Diabetes Benefits for People with Diabetes

People with diabetes can tap into several Medicare benefits to help control diabetes and avoid serious medical problems.

**Diabetes Equipment and Supplies.** Medicare helps pay for diabetes equipment and supplies for blood glucose monitoring. These supplies include glucose meters, test strips, and lancets prescribed by your health care provider. You can buy these supplies at your pharmacy, hospital or clinic or order them by mail. If you qualify, you pay 20 percent of the Medicare-approved costs after you meet your Part B deductible. (The deductible is $110 this year).

**Diabetes Self-Management Training.** Self-management training helps you to succeed with your diabetes care. Your health care provider must prescribe this training for you before Medicare will cover it. The training program must also be certified by the American Diabetes Association or the Indian Health Service. Your health care provider will direct you to this training or you can check with the American Diabetes Association or the Indian Health Service to find an approved program near you.

Medicare will cover a total of 10 hours of initial training during a 12-month period. You pay 20 percent of the Medicare-approved costs after you meet your yearly Part B deductible.

**Medical Nutrition Therapy.** Medicare will pay for medical nutrition therapy prescribed by your doctor and provided by a registered dietitian. The dietitian will review your eating habits, recommend better food choices and follow-up to be sure you are making progress. Again you will pay 20 percent of the Medicare-approved cost once your Part B deductible is met.

**Other Medicare Benefits.** Part B also covers several other medical services covered if your doctor prescribes them:
- A1C test to see your average blood glucose control
• Dilated eye exam to check for diabetic eye disease
• Glaucoma screening
• Flu and pneumonia shots. Medicare will also cover foot exams if you have damage to either of your feet due to diabetes. You can get a foot exam every six months by a podiatrist or other foot care specialist. You do NOT need a doctor’s prescription for this foot exam.

For more information, call 1-800-MEDICARE (1-800-633-4227) or 1-877-486-2048 for TTY users. Information is also on the Medicare web site, www.Medicare.gov.

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**Medicare Drug Coverage**

January 1, 2006 marks the start of the Medicare prescription drug plans for people who choose to enroll in them. This is the new “Part D” plan of Medicare.

Enrollment in the new drug plan begins November 15, 2005. If you do not enroll within 6 months of the date you become eligible for Part D, Medicare may charge you a higher premium for your drug coverage. If you have Medicare now, you should enroll from November 15, 2005 to May 15, 2006. Until the plan takes effect, Medicare-approved drug discount cards are available.

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**How to Help Someone Who Has Diabetes**

Having diabetes is tough. Living with someone with diabetes can also be stressful. You want to help, but it often seems whatever you do is wrong. The National Diabetes Education Program has these ideas about becoming a better helper:

**Tip #1 Learn about diabetes.** There is a lot to know about diabetes and it changes often. To learn more so you can help your friend or family member:

• Attend a diabetes class.
• Go on the Internet and do a diabetes search.
• Ask one of the diabetes medical team about how you can learn more.

**Tip #2 Understand diabetes.** Each person’s diabetes is different. Ask your loved one what things are hard to manage and what things are easier.

**Tip #3 Find out what your family member or friend needs.** To get started, ask these three questions:

• What do I do that helps you with your diabetes?
• What do I do that makes it harder for you to manage your diabetes?

• What can I do to help you more than I do now?

Tip #4 Talk about your feelings. Diabetes affects you, too. Telling your loved one how you feel can help both of you. Invite him/her to share feelings as well. Try to be honest without blaming.

Tip #5 Offer practical help. Instead of nagging, find ways to be helpful. Ask your loved one what would help most before you act.

• Offer to go to the doctor with him/her.

• Take a walk together.

• Cook a tasty and healthy meal that you both can enjoy.

Tip #6 Try a new approach. When things are not working, try something new. Find one thing that works and build from there.

• If exercise is boring, take up a new activity together.

• If large restaurant portions cause overeating, start sharing entrees.

• If medicines are missed, buy a pillbox to hold all the pills for a week and fill it together.

Tip #7 Get help. Many people can help with diabetes.

• Find a support group in your newspaper or on the Internet. If your community doesn’t have one, think about starting one.

• Ask your health care provider about ways to help if your loved one is sad or depressed.

• Contact diabetes organizations for information like the American Diabetes Association (1-800-Diabetes) or www.diabetes.org or the National Diabetes Education Program (1-800-438-5383) or www.ndep.nih.gov.

Diabetes is a hard disease to handle alone. By taking one or more of these steps, you can make a big difference in how well you and your loved one cope.
Web Site for Teens and Pre-Teens with Diabetes

Getting kids to learn about diabetes management can be hard. A Web site called “Think Like a Pancreas” (www.thinklikeapancreas.com) tries to make the process more fun. Using cartoon characters depicting a band called “The Ketones,” and a narrator named Pierre Pancreas, the Web site tries to get important information about diabetes quickly across to adolescents.

On the home page are listed four main topics:

1) Controlling Sugars;
2) Lifestyle Issues;
3) Staying Healthy;
4) Trouble-shooting.

There are also links to other Web sites with more information on special topics like exercise and insulin pumps.

The site uses short cartoons about self-management featuring “The Ketones,” interactive question-and-answer sessions and lists of what to do about different diabetes issues to present the facts without being too “preach-y.”

Under the topic “Controlling Sugars,” Pierre Pancreas shows the symptoms of high and low blood glucose levels, A1C is explained, and ways to have more flexible diabetes care are described.

In “Lifestyle Issues,” important concerns like driving, exercise, traveling, drug and alcohol use, smoking and special issues for boys and girls are discussed.

“Staying Healthy” gives tips on preventing common diabetic complications and defines celiac disease (gluten intolerance) and autoimmune thyroiditis (a problem with the thyroid gland) that can occur with Type 1 diabetes.

Finally “Trouble Shooting,” offers guidelines on handling illness, dealing with insulin problems, managing food, monitoring blood glucose, reducing stress and improving blood glucose control.

Some of the wording is pretty clinical, but it does introduce the kids to terms they will hear for the rest of their lives. Some teens may find the site a little too “cute,” but if they want a quick way to learn or review the basics of self-care, this is a good place to start.

What About Those A1C Numbers?

Most people with diabetes now have an A1C test done when they go to
the doctor. Sometimes the doctor tells you whether the number is “good” or “bad,” but what does that number really mean?

First, an A1C test (pronounced A-one-C) shows your average blood glucose level over the last three months. In contrast, your monitoring only shows what your blood glucose is right now. Since you cannot monitor all the time, the A1C gives a rough idea about your overall blood glucose control. True, you could have extreme highs and lows and still have a decent average, but that is why you check at home. Hopefully those daily checks will show whether you have those highs and lows very often. For that reason, your A1C and your daily monitoring are BOTH important.

You should have an A1C test at least twice a year. You may need it more often if you are having control problems or are changing treatment. For most people, the A1C goal is less than 7. People without diabetes usually have an A1C of 6 or less. If your value is over 7, ask your medical team how you can bring that number down.

For most people, plasma values before meals should be 90-130 and less than 180 after meals. Some doctors want that after meal value less than 140. Higher A1C numbers show that these goals are not being met.

This chart from the American Diabetes Association shows how the A1C number matches the values from a blood glucose monitor. The chart shows clearly that a high A1C means that the average blood glucose value is too high.

<table>
<thead>
<tr>
<th>A1C Level</th>
<th>Average Self-Test Glucose Numbers (Plasma)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>345</td>
</tr>
<tr>
<td>11</td>
<td>310</td>
</tr>
<tr>
<td>10</td>
<td>275</td>
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<td>9</td>
<td>240</td>
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<tr>
<td>8</td>
<td>205</td>
</tr>
<tr>
<td>7</td>
<td>170</td>
</tr>
<tr>
<td>6</td>
<td>135</td>
</tr>
</tbody>
</table>

**Did You Know?**

*The America on the Move Foundation* says that walking 2000 steps (equal to one mile) and cutting back 100 calories per day (equal to 1 pat of butter or regular margarine) can help you to achieve a healthy body weight.
Turkey-Cranberry Salad

This is a good recipe for leftover holiday turkey.

1 ½ cups cooked, diced turkey breast 2 tablespoons almonds
½ cup light vinaigrette dressing, divided 4 cups of lettuce
1 cup dried cranberries or cherries

Combine the turkey with 1/4 cup of the vinaigrette dressing in a small mixing bowl. Marinate for 10 minutes. Then stir in the dried fruit and the almonds. For each serving, place one cup of the lettuce on each plate and top with one fourth of the turkey salad. Drizzle the remaining dressing equally on each serving.

Makes 4 servings

Nutrient Analysis, per serving:
Calories 204  Carbohydrate: 32 grams  Fat: 3 grams  Fiber: 3 grams
Protein: 27 grams  Cholesterol: 70 milligrams  Sodium: 222 milligrams

Exchanges: 4 very lean meats, 2 other carbohydrates

<table>
<thead>
<tr>
<th>Menu Item</th>
<th>Exchanges</th>
<th>Carbohydrate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turkey Cranberry</td>
<td>4 very lean meats</td>
<td>32 grams</td>
</tr>
<tr>
<td>Salad*</td>
<td>2 other carbohydrates</td>
<td></td>
</tr>
<tr>
<td>Whole wheat roll</td>
<td>1 starch</td>
<td>15 grams</td>
</tr>
<tr>
<td>Cut up raw carrots,</td>
<td>1 vegetable</td>
<td>5 grams</td>
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<tr>
<td>broccoli, bell pepper</td>
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<td>0</td>
</tr>
<tr>
<td>Hot tea</td>
<td>Free</td>
<td>0</td>
</tr>
</tbody>
</table>

*This month’s featured recipe.

Note: Portions make need to be adjusted for your meal plan.

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Dear Friend,

*Diabetes Life Lines* is a bi-monthly publication sent to you by your local county Extension agent.

It is written by Food and Nutrition Specialists at the University of Georgia, College of Family and Consumer Sciences. This newsletter brings you the latest information on diabetes, nutrition, the diabetic exchange system, recipes, and important events.

If you would like more information, please contact your local county Extension office.

Yours truly,

County Extension Agent

Connie Crawley, Principal Writer

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Scott Angle, Dean and Director

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