



Your Breast Cancer Prevention Guide

5 ways to lower your risk of breast cancer

What to expect at your mammogram

Breast cancer FAQs



When to talk to your doctor



Lower your risk of breast cancer

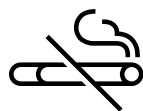
You can never get rid of your risk completely. But you can lower it by making these lifestyle changes.



Be active

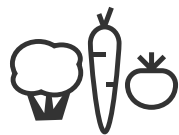
Moderate activity is linked with lower breast cancer risk. The American Cancer Society recommends adults get 150 to 300 minutes of moderate-intensity activity each week. That means you can talk while you move — but not sing.

Some good options: a brisk walk in the park or dancing around the house. Talk with your doctor about the best exercise options for you.



Don't smoke

Women who smoke or used to smoke are more likely to get breast cancer than those who don't or never did. If you use tobacco products, make a plan to quit with your doctor.



Eat a healthy diet

Limit your intake of saturated fats, processed foods, red meat and sugary drinks. Instead, fill your plate with foods that can help lower the risk of breast cancer, such as:

- Whole grains, like brown rice and oatmeal
- High-fiber foods, like beans, berries and popcorn
- Foods like salmon, tuna or nuts, which contain healthy fats known as omega-3s and omega-6s.



Aim for a healthy weight

Being overweight increases your breast cancer risk, especially after menopause. If you are overweight, talk to your health care provider about a safe, effective weight-loss program.



Limit alcohol

Even drinking small amounts of alcohol has been linked with an increase in breast cancer risk. It is best not to drink alcohol at all.

If you do have an occasional drink, have no more than one a day. One drink is 12 ounces of beer, 5 ounces of wine or 1.5 ounces of hard liquor.

Breast cancer FAQs

Get answers to your most-asked questions

Should I get a DNA test if breast cancer

You may be able to get DNA (genetic) testing if you have a strong family history of breast cancer. This means you have:

- At least three women in your family with breast or ovarian cancer
- Men in your family with breast cancer
- A close relative with cancer in both breasts

My mammogram showed something. Now what?

Don't panic — follow-up tests are common. A radiologist might do additional imaging such as a diagnostic mammogram, ultrasound or MRI. Your doctor will decide if a biopsy is needed, which can determine if you have cancer cells or not.

Am I at risk ?

Anyone — of any gender — can develop breast cancer at any age. Keep in mind, estrogen-progestin therapy (estrogen-only hormone replacement therapy, or HRT) does not increase risk. Risk factors include:

- Being female
- Being over age 50
- Having gene mutations
- Starting your period before age 12
- Starting menopause after age 55

What if I have breast cancer?

Create a support system by talking with your doctor, family and friends. Once you've finished treatment and are in recovery, survivorship programs at cancer care centers can help you move forward with confidence.

When to talk to your doctor



If you find a change in your breast, you should talk to your doctor as soon as possible. When cancer is detected early, it's usually easier to treat. Make an appointment with your doctor as soon as possible if you notice:

- ✓ A hard lump in your breast or near your underarm
- ✓ Thickening or fullness that differs from other areas of the breast
- ✓ Dimpling or puckering of the skin
- ✓ A nipple is pushed in or inverted (and it wasn't before)
- ✓ Redness, warmth, swelling or pain
- ✓ Itching, scaling, sores or rashes on the breast
- ✓ Bloody nipple discharge

Remember to schedule a yearly breast exam with your doctor and an annual mammogram along with your monthly self-exams. Go to page 5 to learn more about mammograms and other breast screenings.



If you're eligible for both Medicare and Medicaid, you may qualify for an Aetna® Dual Eligible Special Needs Plan, or D-SNP.

- Aetna D-SNP members have a dedicated care team that can help them find in-network doctors and book appointments.
- Aetna D-SNP members also get a monthly allowance on an Extra Benefits Card to help pay for certain everyday expenses like healthy food and select over-the-counter (OTC) items.

To learn more about Aetna D-SNPs, visit [AetnaMedicare.com/DSNPIInfo](https://www.aetna.com/medicare/dsnps)



Mammography: What to expect

Starting at age 50, you should get biennial mammograms. It helps to know what will happen at your screening in order to get the most out of the appointment. Here's what to expect, step-by-step.

1

You'll be given a cover or wrap and asked to undress from the waist up.

2

You'll stand in front of the mammogram machine. The technician will gently place your breast onto the machine.

3

A plate will be lowered on top of your breast to flatten it. Then the technician takes an X-ray. It might be uncomfortable. But the process only takes about 15 seconds. You'll repeat this on the other breast.

4

Next, the plate is adjusted to take a side-view X-ray on each of your breasts.

5

If you have dense breast tissue, you may need additional screening, such as an ultrasound. This is normal. More than 40 percent of women have dense breasts.

6

Plan for any screening appointment to take about 20 minutes.



Having an Aetna Dual-Eligible Special Needs Plan (D-SNP) means you're covered for mammograms and other key screenings.

To learn more about Aetna D-SNPs, visit [AetnaMedicare.com/DSNPInfo](https://www.aetna.com/DSNPInfo)

Aetna Medicare is a HMO, PPO plan with a Medicare contract. Our DSNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. Plan features and availability may vary by service area. Participating health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. If your plan's Extra Benefits Card includes roll over, any unused amount will rollover into the next month. The monthly amount can be rolled over through the end of the plan year but will not carry over into the next plan year. Eligibility for the Model Benefit or Reward and Incentive (RI) Programs under the Value-Based Insurance Design (VBID) Model is not assured and will be determined by Aetna after enrollment, based on relevant criteria (e.g., clinical diagnoses, eligibility criteria, participation in a disease state management program). To send a complaint to Aetna, call the Plan or the number on your member ID card. To send a complaint to Medicare, call 1-800-MEDICARE (TTY users should call 1- 877-486-2048), 24 hours a day/7 days a week. If your complaint involves a broker or agent, be sure to include the name of the person when filing your grievance.

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We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. If you speak a language other than English, free language assistance services are available. Visit our website, call the phone number listed in this material or the phone number on your benefit ID card.

In addition, our health plan provides auxiliary aids and services, free of charge, when necessary, to ensure that people with disabilities have an equal opportunity to communicate effectively with us. Our health plan also provides language assistance services, free of charge, for people with limited English proficiency. If you need these services, visit our website, call the phone number listed in this material or on your benefit ID card.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Grievance Department (write to the address listed in your Evidence of Coverage). You can also file a grievance by phone by calling the Customer Service phone number listed on your benefit ID card (TTY: 711). If you need help filing a grievance, call Customer Service Department at the phone number on your benefit ID card.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf.

ESPAÑOL (SPANISH): Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento.

繁體中文 (CHINESE): 如果您使用英文以外的語言, 我們將提供免費的語言協助服務。請瀏覽我們的網站或撥打本文件中所列的電話號碼。

NONDISCRIMINATION NOTICE

Discrimination is against the law. *Aetna Medicare Preferred Plan (HMO D-SNP)* follows State and Federal civil rights laws. *Aetna Medicare Preferred Plan (HMO D-SNP)* does not unlawfully discriminate, exclude people or treat them differently because of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity or sexual orientation.

Aetna Medicare Preferred Plan (HMO D-SNP) provides:

- Free aids and services to people with disabilities to help them communicate better, such as:
 - ✓ Qualified sign language interpreters
 - ✓ Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as:
 - ✓ Qualified interpreters
 - ✓ Information written in other languages

If you need these services, contact *Aetna Medicare Preferred Plan (HMO D-SNP)* between 8 AM and 8 PM 7 days a week by calling 1-860-409-1221. If you cannot hear or speak well, please call 711. Upon request, this document can be made available to you in braille, large print, audiocassette or electronic form. To obtain a copy in one of these alternative formats, please call or write to:

Aetna Medicare Preferred Plan (HMO D-SNP)
Aetna Medicare PO Box 7405 London, KY 40742
1-860-409-1221 [TTY/TDD 711 [California Relay 711]

HOW TO FILE A GRIEVANCE

If you believe that *Aetna Medicare Preferred Plan (HMO D-SNP)* has failed to provide these services or unlawfully discriminated in another way on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, gender, gender identity or sexual orientation, you can file a grievance with *Aetna Medicare Grievances*. You can file a grievance by phone, in writing, in person or electronically:

- By phone: Contact *Aetna Medicare Grievances* between 8 AM and 8 PM, 7 days a week, by calling 1-866-409-1221. Or, if you cannot hear or speak well, please call [TTY/TDD 711].
- In writing: Fill out a complaint form or write a letter and send it to:
Aetna Medicare Grievances
PO Box 14834 Lexington, KY 40512
- In person: Visit your doctor's office or *Aetna Medicare Preferred Plan (HMO D-SNP)* and say you want to file a grievance.
- Electronically: Visit *Aetna Medicare Preferred Plan (HMO D-SNP)* website at AetnaMedicare.com

OFFICE OF CIVIL RIGHTS – CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

You can also file a civil rights complaint with the California Department of Health Care Services, Office of Civil Rights by phone, in writing, or electronically:

- By phone: Call **916-440-7370**. If you cannot speak or hear well, please call **711 (Telecommunications Relay Service)**.
- In writing: Fill out a complaint form or send a letter to:
Deputy Director, Office of Civil Rights
Department of Health Care Services
Office of Civil Rights
P.O. Box 997413, MS 0009
Sacramento, CA 95899-7413

Complaint forms are available at http://www.dhcs.ca.gov/Pages/Language_Access.aspx.

- Electronically: Send an email to CivilRights@dhcs.ca.gov.

OFFICE OF CIVIL RIGHTS – U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you believe you have been discriminated against on the basis of race, color, national origin, age, disability or sex, you can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights by phone, in writing or electronically:

- By phone: Call **1-800-368-1019**.
If you cannot speak or hear well, please call **TTY/TDD 1-800-537-7697**.
- In writing: Fill out a complaint form or send a letter to:
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

- Electronically: Visit the Office for Civil Rights Complaint Portal at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.

If you speak a language other than English, free language assistance services are available. Visit our website or call the phone number listed in this document. (English)

Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento. (Spanish)

如果您使用英文以外的語言，我們將提供免費的語言協助服務。請瀏覽我們的網站或撥打本文件中所列的電話號碼。(Traditional Chinese)

Nếu quý vị nói một ngôn ngữ khác với Tiếng Anh, chúng tôi có dịch vụ hỗ trợ ngôn ngữ miễn phí. Xin vào trang mạng của chúng tôi hoặc gọi số điện thoại ghi trong tài liệu này. (Vietnamese)

Kung hindi Ingles ang wikang inyong sinasalita, may maaari kayong kuning mga libreng serbisyo ng tulong sa wika. Bisitahin ang aming website o tawagan ang numero ng telepono na nakalista sa dokumentong ito. (Tagalog)

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Եթե խոսում եք անգլերենից բացի մեկ այլ լեզվով, ապա Ձեզ համար հասանելի են լեզվական աջակցման անվճար ծառայություններ: Այցելեք մեր վեբ կայքը կամ զանգահարեք այս փաստաթղթում նշված հեռախոսահամարով: (Armenian)

اگر به زبان دیگری بجز انگلیسی گفتگو می کنید، کمک زبانی رایگان فراهم می باشد. به وبسایت ما مراجعه نمایید و یا به شماره تلفن که در سند ذیل لست شده، تماس بگیرید. (Farsi)

Если вы не владеете английским и говорите на другом языке, вам могут предоставить бесплатную языковую помощь. Посетите наш веб-сайт или позвоните по номеру, указанному в данном документе. (Russian)

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បើលោកអ្នកនិយាយភាសាផ្សេងក្រៅពីភាសាអង់គ្លេស សេវាកម្មជំនួយផ្នែកភាសាមានផ្តល់ជូនដោយឥតគិតថ្លៃ។ សូមចូលមើលគេហទំព័ររបស់យើងខ្ញុំ ឬហៅទៅកាន់លេខទូរស័ព្ទដែលមានរាយនៅក្នុងឯកសារនេះ។ (Khmer)

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