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COMPREHENSIVE OBSTETRICAL AND GYNECOLOGIC CARE

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By the time you receive this newsletter, we will be in our beautiful new office on **the first floor of the 499 E. Hampden building in suite 190.** This is the same building we've been in for the past three years but just one floor down from our previous location. The phone number is the same, but **our fax number has been changed to 720-259-4566.** We have enjoyed sharing office space with Dr. Mike Hall, but with the addition of Mindy, our nurse practitioner, and a new physician's assistant in Dr. Hall's practice, we were seriously running out of space. We realize parking can be problematic on the Swedish campus, but remember, there is free valet parking in the front of our building. Our suite is just inside the front door on the left.

We are excited about our new state-of-the-art, dedicated room for in-office surgery. We have the ability to perform in-office Novasure endometrial ablations and Essure hysteroscopic sterilizations. Providing these services in our office markedly reduces the cost to you, our patients. Please call us anytime you have questions regarding your obstetric or gynecologic concerns. Our practice continues to grow, thanks to your kind referral of friends, associates, and family. We cherish these referrals and your trust in us. It is our goal to continue to provide you and the people you refer to us with competent, personalized, and attentive care.

H1N1 Flu

The Center for Disease Control has recommended all pregnant women receive both the seasonal flu shot and the 2009 H1N1 flu shot. The CDC also recommends the use of Tamiflu in pregnant women who have been exposed to or who become sick with the flu. Our practice strongly supports these recommendations. Compared with people in general who get the 2009 H1N1 flu (formerly called "swine flu"), pregnant women are more likely to have serious illness and have a 30% higher death rate. Thus, immunization of pregnant women to prevent seasonal flu and H1N1 must be taken very seriously.

When a pregnant woman receives the vaccination it can protect both her and her baby. The seasonal flu shot has been given to millions of pregnant women over many years. Flu shots have not been shown to cause harm to pregnant women or their babies, regardless of the pregnancy trimester during which the vaccine is received. The 2009 H1N1 flu vaccine is being made in the same way and at the same places where the seasonal flu vaccine is made.

If you are pregnant, and have not received both the seasonal influenza vaccination and the H1N1 vaccination, please call our office to schedule the injection or ask us about it at your next prenatal appointment. Many pharmacies are also providing the immunizations.

If you are around any person with influenza or become sick with influenza, please call our office within 24 hours of symptoms to receive a prescription for Tamiflu. We can call the medication into the pharmacy without the need for an appointment.

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H1N1 FLU

Pregnant women are in a high risk category. Learn what steps need to be taken to prevent and treat the flu.

HEALTH INSURANCE: AN EVER-CHANGING AND COMPLEX WORLD

It's open enrollment season. Get the information you need to choose the best plan for you and your family's needs.



Quote of the Day:

"Life is like riding a bicycle. To keep your balance you must keep moving."

If you become ill or exposed on a weekend, please call the answering service and they will facilitate getting the Tamiflu prescription for you. Do not wait until the office opens on Monday as it is important to start the medication as soon as possible.

Signs and Symptoms of Influenza:

Fever over 100.4 degrees
Muscle aches and pains
Headaches
Abrupt onset
Cough
Nausea and vomiting

Flu usually does not have:

Runny nose
Diarrhea

If you want more information regarding 2009 H1N1 Influenza and Immunizations for Pregnant women please go to the CDC website at [CDC.gov](http://www.CDC.gov).

HEALTH INSURANCE: AN EVER-CHANGING AND COMPLEX WORLD

As we approach the New Year we are also approaching, for many of you, open enrollment for insurance coverage. Some employers offer only one plan, for others, there may be multiple options. As you select which plan is right for you here is a quick overview of some of the more common options and a few of the many things you should consider.

PPO and POS

PPO stands for Preferred Provider Organization. POS stands for Point-of-Service. These plans are very similar. PPO and POS plans are managed care plans in which the insurance company has negotiated agreements with doctors, hospitals and other providers who have agreed to accept discounted rates set by the insurance companies. There are in-network and out-of-network benefits with these plans. When you see an in-network doctor you will probably owe a co-payment, and you may also have a deductible and co-insurance for any services you may receive. Any out-of-network providers typically cost more, in the form of higher deductibles and co-insurance.

HMO

HMO stands for Health Maintenance Organizations. HMOs traditionally require you to receive the majority of your care from one primary care physician. HMOs, unlike PPOs, have no out-of-network benefits. HMOs usually do not have deductibles or co-insurance and instead usually have office visit co-pays only, in exchange for a higher monthly premium. HMOs also require referrals from your primary care doctor to see a specialist.

HDHP

HDHP stands for High-deductible Health Plans. In 2010, an individual deductible of more than \$1,200.00 or a family deductible of more than \$5,950.00 qualifies a plan as a HDHP. The deductibles of these plans must be met before most services are covered. After the deductible has been met the insurance will usually pay at least 90% of any health expenses incurred. If you sign up for a HDHP you may want to open a Health Savings Account (HSA), a medical savings account that allows you to save money for current and future medical expenses on a tax free basis.

Here a few very important questions you will want to ask yourself before choosing your health plan for the year:

- Am I, or is my family, planning any major medical events (a planned surgery, pregnancy, or other major medical procedure)?
- If this is a procedure or event that involves our office we can estimate how much that might cost with regard to our fees.
- Are my current chosen doctors participating in the insurance plan?
- What is the deductible and when does it apply? The deductible is your responsibility to pay before your insurance will cover any expense. Many policies have deductibles that only apply for surgery or in-office procedures.
- What is the lifetime maximum benefit on the plan? (This is the maximum your insurance will pay for your care over your lifetime or while you are an active participant.)
- How much is that amount? \$1,000,000 in lifetime benefits is the absolute minimum recommendation and is a small amount in today's health climate
- What is the maximum out of pocket? This is the maximum amount you will pay out of pocket within either the calendar or policy year depending on how your policy is set up. Be sure to clarify whether your deductible applies to your maximum out of pocket level.
- What is my co-insurance level? Co-insurance refers to the percentage of your bill you will be responsible for after your deductible is met. This percentage has increased in the past few years.

Be sure to contact your HR department with any questions before you pick a plan. For other questions and more information on any of the items mentioned in this article please go to the US Department of Health and Human Services Agency for Health Care Research and Quality's website at <http://www.ahrq.gov/consumer/insuranceqa/>.

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