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# yale health care

NEWS FROM THE YALE HEALTH PLAN

VOL. VII NO. 5

SEPTEMBER–OCTOBER 2004

## A Little Stress Goes a Long Way

CAROLE T. GOLDBERG, PSY.D.

*Department of Mental Hygiene*

RHEA HIRSHMAN

*Editor*

**W**e hear a lot about “reducing stress.” What constitutes a stressful event varies from person to person, but stress is always based on the body’s built-in “flight or fight” response and produces a range of physiological changes.

Any problem or obstacle, imagined or real, causes the cerebral cortex (thinking part of the brain) to send an alarm to the hypothalamus (main switch for the stress response). The hypothalamus stimulates the sympathetic nervous system: your heart rate, breathing rate, muscle tension, metabolism, and blood pressure all increase. Your hands and feet get cold as blood is directed away from the extremities and digestive organs into the larger muscles that can help you fight or run. Your diaphragm and anus lock. Your pupils dilate to sharpen vision and your hearing becomes more acute. Your adrenal glands secrete corticoids (adrenaline, epinephrine, and norepinephrine).



These chemicals inhibit vital functions such as digestion, reproduction, growth, and tissue repair as well as the response of your immune and inflammatory systems.

*continued on page 2*

## Patches Offer Option to Shots and Pills

MARTHA L. ASARISI, R.PH.

*Pharmacy*

RHEA HIRSHMAN

*Editor*

**T**ablets and capsules to swallow and solutions that are injected have been the usual ways to take medication. However, many people have difficulty swallowing tablets or taking injections, and researchers are finding new dosage delivery systems for existing chemical compounds. Medications have been formulated into nasal sprays and long acting or sustained release (small amount of medication released into the bloodstream over hours) formulations. These sustained release systems may also reduce side effects by decreasing the overall medication blood levels.

One sustained release system is the skin patch, also called the transdermal (“across the skin”) method. These adhesive patches deliver a controlled drug dose through the skin. A skin patch uses a membrane to control the rate at which the liquid drug contained in the reservoir within the patch can pass through the skin and into the bloodstream.

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## A LITTLE STRESS

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If you decide, consciously or unconsciously, that the situation is no longer stressful (generally within three minutes) the brain is programmed to begin the relaxation process.

Stress is not all bad; we need a certain degree of it to keep us alert and engaged and at times it can make life exciting.

But remaining in a continuous high-stress state shuts down the relaxation response and your system remains flooded with corticoids, putting you at risk for long-term negative effects.

The good news is that there are a variety of ways to reduce stress. Whole books have been written on this topic, but here are a few simple tips:

- Most of us need 7 or 8 hours of sleep nightly. At least 50% of Americans are chronically sleep-deprived. Sleep deprivation causes impaired functioning similar to that caused by alcohol intoxication — poor judgment, slowed reflexes, blurred vision, reduction in reasoning capacity.
- Focus on the moment. If you are worrying, try making a “worry date” for later, telling yourself that you will not worry until a certain time but will allow yourself to worry at that time if you really have to. Often, the need to worry will diminish.
- Move. “Move it or lose it” isn’t just a catchy slogan. Our bodies were built to move, and any exercise is better than no exercise. Build exercise into your routine: walk up and down your stairs five or ten times before you shower; pace when on the phone; stretch while watching television; take the stairs whenever you can.
- Get a massage. It doesn’t cost much more than a couple of dinners out.
- Laugh. Laughter increases oxygen intake, releases endorphins that create a natural high, and softens your face, which makes others respond positively to you — making you feel better!

## Important telephone numbers

<b>Urgent Care</b>	432-0123
<i>Open 24 hrs/day, seven days per week</i>	
<b>Toll Free</b>	1-877-YHP-CARE
<b>Information</b>	432-0246
<b>Pharmacy</b>	432-0033
<i>Hours of operation</i>	
Monday, Friday	8:00 AM–6:30 PM
Tuesday, Wednesday	8:00 AM–6:30 PM
Thursday	8:30 AM–6:30 PM
Saturday	8:30 AM–3:30 PM
<b>Patient Representative</b>	432-0109
<b>Medicare/Retiree Coordinator</b>	432-8134
<b>Outpatient Referrals</b>	432-7397
<b>Claims</b>	432-0250
<b>Inpatient Care Facility</b>	432-0001

# in touch

## Surveys Show Results for Access Improvement Initiatives

CHRIS KIET

*Deputy Director for Operations*

RHEA HIRSHMAN

*Editor*

Yale Health Plan has experienced enormous growth since its earliest years. While in 1974 — three years after its establishment — YHP served 14,000 members, we are now serving over 31,000. During this time we have also added numerous departments and services, including Ob/Gyn, Dermatology, Ophthalmology, and Health Promotion.

With growth come challenges. Effectively expanding services requires that we continually ascertain the best ways of meeting our mission: providing the highest quality health care, with attention to the particular needs of the Yale community. We must keep abreast not only of clinical and technological advances, but also of the needs of our members.

We know that YHP members value their actual clinical experiences. Results of a six-month survey by an outside firm showed a YHP patient satisfaction rating with clinical care in the 93rd-98th percentile — very high marks according to national health care industry standards.



However, one area which we are aware has needed improvement has been telephone access, particularly in Internal Medicine, our most heavily used department. A February 2003 survey of Internal Medicine patients showed that while 41% of respondents were satisfied with their ability to schedule routine appointments via telephone, 33% were dissatisfied. In addition, while 40% were satisfied with the ability to reach clinicians via phone for follow up care, 30% were dissatisfied.

That survey was done a few months before we went live with Yale Health Online in Internal Medicine. Experience with YHOL in other clinical departments led us to undertake concerted marketing of YHOL to Internal Medicine patients. The purpose was to encourage its use for routine clinical communication — thus reducing the number of phone calls to Internal Medicine while increasing patient access to the department.

*continued on back page*



# from the desk of

PAUL GENECCIN, MD

DIRECTOR, YALE UNIVERSITY HEALTH SERVICES

Many of us take stock of our health care options during the University's Open Enrollment period, and make choices based on which offerings best meet our needs. As Director of YUHS, I use this time to reflect on the state of Yale Health Plan. While YHP may not be the choice of every member of the Yale community, it enjoys a stable and extraordinarily high enrollment of 78% of Yale faculty, staff and dependents. My family and I have been members since 1989 and, from my standpoint, the reasons to be a YHP member have never been better. In this space I can mention only a few high points – but I welcome every opportunity to talk about this thriving organization with current members as well as with colleagues who are considering joining YHP.

In thinking about health plans, my first question would be whether I will like my doctors and other clinicians. Do they listen to me, treat me with respect, understand my condition(s), spend sufficient time with me and give me confidence in their knowledge and expertise? I also want to know if I will be satisfied with my overall visit experience, the components of which include: ease of scheduling; interactions with support staff; waiting time; and other non-clinical matters.

In our continuous monitoring of patient satisfaction, we have found that 96% of YHP patients are satisfied with their interactions with their clinicians and 91% are satisfied with the overall visit. Is there room for improvement? Of course. But these ratings are remarkably consistent and compare

extremely favorably with other health care venues. At the same time, we are addressing the challenges of telephone access in a busy health care setting. I am pleased to report a 45% increase in satisfaction with access to departments such as Internal Medicine for appointment scheduling, obtaining results and communicating with clinicians among the thousands of members who now use Yale Health Online. For more on the role of YHOL, see Chris Kiehl's article in this issue.

In selecting a health plan, I would also want to know what would happen if a member of my family or I became seriously ill. The partnership of YHP with world-class experts in all specialties — most from the School of Medicine — is a vital component of our proven ability to provide excellent care. Equally important, our experts are dedicated to the Yale community and they have many years of experience in working with our primary care clinicians. We are confident that we provide exemplary care to our sickest members, and many of the warmest testimonials come from our patients who have been through treatments for life-threatening conditions.

Access to care throughout the week is an important consideration. While many practices keep bankers' hours, YHP offers extended hours to accommodate those who work and study here. Also, our Urgent Care Department and Inpatient Care Facility are staffed by physicians 24 hours a day, all year round. The ICF provides a welcome alternative to the hospital for many patients because of the favorable nurse to patient ratio and the expert physician care.

Some YHP initiatives relating to quality of care were the subject of a recent article in the Weekly Bulletin and Calendar, which you can find on the web at <http://www.yale.edu/opa/v32.n33/story12.html>. In that article you can read about some of the groundbreaking work we are doing in areas including diabetes care, immunization of high-risk patients, and asthma care. We are proud that YHP has the highest child immunization rate among large practices in Connecticut — itself the state with the highest child immunization rate. Likewise, we lead the country in immunization of elderly members against pneumococcal disease and our rate of influenza immunization of asthmatics is the highest in Connecticut. At the same time, we are increasing our focus on healthy members; one example is our drive to ensure that our female members get Pap smears and mammograms.

These are just a few of the initiatives already in full swing; numerous others are under development. I wish I had space to tell you about our accreditation project with the Joint Commission on Accreditation of Healthcare Organizations, our electronic medical record (EMR), and many quality improvement projects that are at the cutting edge of health care.

Lastly, I want to address cost. Because YHP membership is free for employees and because family membership is so much less expensive than at the competing plans, some might assume that YHP's revenues could never be sufficient to cover health care of the first quality.

*continued on back page*

## URGENT AND EMERGENCY CARE

203.432-0123

# questions, answers

*By answering your questions, this column will help you get the most out of your YHP membership.*

*Send your questions to:  
Member Services Q & A,  
Yale Health Plan,  
17 Hillhouse Ave.,  
P.O. Box 208237  
New Haven, CT  
06520-8237.*

*We'll get them answered  
by someone "in the know."*

The Urgent Care Department is open 24 hours a day, 365 days a year, staffed by clinicians specially trained to deal with urgent medical problems. Please note that Urgent Care is not an after hours clinic for routine care, and that our primary care clinics offer a wide range of appointment options including lunch-time and early evening hours.

**Q. What is the difference between urgent and emergency situations?**

A. One significant difference has to do with the amount of time that can safely be allowed to lapse before someone is seen. We define "urgent" as an illness or injury that requires prompt care but will not generally cause loss of life or severe impairment if left untreated for a brief time. Examples: bleeding wound, laceration, exacerbation of asthma, sprain or fracture. "Emergency" refers to a situation where an illness is presently or potentially life threatening or threatens severe impairment if the patient is not seen immediately. Examples: stroke, heart attack, crushing accident, overdose.

**Q. Are other considerations involved?**

A. Yes. Some other factors used to make the determination include: amount of bleeding from a wound, size of the laceration, degree of breathing difficulty, severity and/or location of pain. We also consider the patient's age. Certain symptoms or conditions not ordinarily considered serious may be more of a concern in the very young or very old. In addition, someone with a chronic illness may be at higher risk and need more immediate attention

(for instance, a person with asthma who shows symptoms of an upper respiratory infection).

**Q. What should be done in a medical emergency?**

A. For emergencies such as seizures, severe chest pains or difficulty breathing, call 911 (off campus) or 111 (on campus) immediately. If uncertain about the severity of the problem, call Internal Medicine (203-432-0038) or Pediatrics (203-432-0206) during the hours of 8:30 – 5:00 or Urgent Care (203-432-0123) between 5:00 pm and 8:30 am. Each department has a triage nurse, who will advise you either to call 911, to come in to Urgent Care or, if appropriate, make you an appointment with your primary care clinician.

**Q. How do I obtain care on the weekends or at night?**

A. In a true emergency, you should call 911. The Urgent Care Department is open 24 hours a day, 7 days a week for urgent problems, but is not a weekend and after hour clinic for routine care. If you are uncertain about the level of care you need, please call Urgent Care at 203-432-0123 to talk with a triage nurse who can advise you.

**Q. What about urgent or emergency care when out of the area?**

A. Members are covered for emergency and urgent care while they are out of the area, but you should make sure that you understand how this coverage works. Please see the Member Handbook for complete information about out-of-area coverage, and remember that when you are away you can call the toll-free number from the US or Canada (877-YHP-CARE) for medical advice. If you are traveling overseas toll-free numbers are available from several other countries. Check the YUHS web site for those numbers before you travel.

## SKIN PATCHES

*continued from page 1*

Some drugs must be combined with a solvent such as alcohol to increase their ability to penetrate the skin in order to be used as a skin patch.

In order for a drug to be deliverable into the bloodstream through this method, the molecules must be small enough and strong enough to pass through the tougher outermost layer of skin (stratum corneum) as well as the layers below. The medication must be potent and stable enough to remain effective after its course through the skin, into the bloodstream, and to its designated target in the body. Some such drugs include scopolamine (motion sickness); nicotine (quitting smoking); estrogen (hormone replacement for women); testosterone (hormone replacement for men); nitroglycerin (angina); lidocaine (pain); and fentanyl (severe pain). Most require a prescription, except for nicotine, which can be purchased without one.

Some medications for which the steady delivery made possible by a skin patch might seem ideal cannot be delivered that way. One example is insulin; its molecule is too large to pass through the skin.

If you have occasion to use a skin patch, keep in mind the following:

- Skin patches must be placed on a clean, dry, mostly hairless area of the skin. They must not be applied to oily, broken or irritated skin. To clean the area, use a soap less cleanser or rubbing alcohol.
- Open the sealed package and remove the protective strip and apply to the skin, pressing firmly with the palm of your hand for 15 seconds so the edges of the patch adhere firmly.
- Wash hands before and after application and after any contact with a patch (including when you throw it away).
- You may bathe or swim while wearing a skin patch.
- If a patch falls off, you must use a new patch; they cannot be re-used once removed.
- Follow the instructions about how long to wear and when to remove. With each application you must use a new location and rotate sites often.

- Although the patch is applied externally, there still may be side effects. Be sure to read the directions and ask your pharmacist.

Also, be sure to take proper care in disposing of the used patches. Apply the sticky sides together, wrap the patch and

put in the trash so that children or pets cannot get a hold of it. Some residual medication is left in the used patch and can be dangerous in the wrong hands.

If used properly, skin patches can be a safe and effective treatment for a variety of conditions. If you have any questions, ask your clinician or pharmacist.

# healthy ideas

## TOASTY TOES ENCOURAGE SLEEP

In addition to having a quiet, dark room to sleep in, research suggests that having warm feet also may help trigger sleepy feelings. The body dilates blood vessels in the hands and feet and releases heat from these extremities in preparation for sleep. Warming your feet with socks and then removing the socks would mimic this sleep preparation process.

## POWER OUT? KEEP FOOD IN

If a thunderstorm, hurricane or blizzard zaps your electrical power, do you know how long the food in your refrigerator will stay safe? The answer depends on two main factors. How full is the refrigerator or freezer and how many times has the door been opened?

- Unopened, most refrigerators will hold food at the right temperature for four to six hours.

- Full freezers keep food frozen for about two days. A half-full freezer will warm faster so food may stay frozen for only one day.
- The more often the freezer or refrigerator door is opened, the faster the temperature rises, decreasing the length of time foods are safe. You can put a block of ice in the refrigerator to increase the time that foods stay cold.
- If perishables are at room temperature for more than two hours, they should be discarded. Frozen foods that still have ice crystals can be refrozen but should be used as soon as possible.

## ASTHMA ACTION

As the fall allergy season takes hold, families of children with asthma and other chronic illnesses should keep in mind the following:

- Make sure you have a written asthma action plan at home and school, and that you keep adequate supplies of medications in both places. If you need help with this, call the Pediatrics Department at 203.432.0206.
- Remember to have your child immunized against the flu.
- The Pediatrics Department will be offering programs on asthma management in late October and early November. Watch for more information, or call us at 203.432.0206.



# information



## SENIOR HEALTH FAIRS

Three senior health fairs are scheduled for October. All fairs run from 9:00–1:30. Events will include blood pressure screenings, flu immunizations, medication consultations and discussions about a range of health issues. Refreshments will be served. Mark your calendars now. If you need more information, please call Member Services at 203.432.0246.

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published by Yale Health Plan

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- **Thursday, October 14 in Branford**  
Branford Evangelical Free Church  
(231 Leetes Island Road)
- **Tuesday, October 19 in Hamden**  
The Unitarian Society of New Haven  
(700 Hartford Turnpike)
- **Thursday, October 21 in Orange**  
High Plains Community Center  
(Orange Center Road)

## FLLEE THE FLU

Free flu vaccination clinics will be held at YUHS on the following Wednesdays and Thursdays in November and December: November 3, 4, 10, 11, 17, 18 and December 1 and 2. All clinics run from 8:30-4:00. In addition, a YUHS evening flu clinic will be held on Tuesday, November 16 from 4:00–8:00 p.m. Please note that there are no clinics during Thanksgiving week. For more information, contact the Office of Health Promotion and Education: 203-432-0093.

## YUHS BREAST CANCER AWARENESS PROGRAMS

October is National Breast Cancer Awareness Month. YUHS and the YUHS Obstetrics and Gynecology Department will offer its seventh annual breast cancer program series for the Yale community. All events are in the Presidents' Room in Woolsey Hall at 12:00 noon. Lunch will be provided. Events are free, but pre-registration is requested at 203.432.1826.

- **Wednesday, October 20**  
*New Concepts in Breast Cancer Treatment*  
Speaker: Donald Lannin, MD, Executive Director of the Yale New Haven Breast Center.
- **Wednesday, October 27**  
*Benign Breast Disease*  
Speaker: Teri Ponn, MD, Assistant Professor of Surgery and Associate Director for Surgery at the Yale New Haven Breast Center.

## AMERICAN PHARMACISTS MONTH

October is also American Pharmacists Month, this year using the theme of *Know Your Medicine, Know Your Pharmacist* to spread the word about the pharmacist's role in improving medication use and advancing patient care. The YUHS Pharmacy will participate with displays, programs and giveaways. Watch for more information.



## MAKING SPACE, CONTINUED

Renovations to 17 Hillhouse Avenue continue. The next phase includes the following changes:

- Member Services will move to the other side of the 4th floor in late September.
- Student Medicine will expand and move to the 4th floor in early November.
- The Dermatology Department will move in early December into a new, expanded space on the 3rd floor.

# YHP staff

## Employees Honored

Each year we honor staff members, both clinical and administrative, whose service exemplifies our mission of providing the highest quality, patient-focused care. This year's winners are:

### PHYSICIAN OF THE YEAR

MOSHE SIEV, MD

Described by one colleague as "...the most compassionate and empathetic person I have ever met," and by a patient as "...my own personal rabbi of health and wellness," Moshe Siev has been a physician in both Pediatrics and Student Medicine since 1985. Known for his calm demeanor, his ability not to miss or forget anything, and for his capacity to "make everyone feel as though he is 100% there for them — no matter how many patients he is seeing," Siev is "loved by his patients." He "takes extra time to work with the entire family" on developmental and behavioral issues and is "always sensitive in difficult situations." In addition to his work as a YHP clinician, Siev is very involved in his community and is "a great team player and teacher."

### CLINICIAN OF THE YEAR

VICKY CHANG, APRN

According to her colleagues, Vicky Chang is "always on the lookout for ways to help patients receive the most effective care." Since Chang, an advanced practice nurse in Internal Medicine came to YUHS in 2000, she has received advanced certification in diabetes education and "has done an excellent job with our diabetes program." Described by colleagues as "a dedicated clinician who is deeply committed to patient care," Chang is known for her willingness to help out whenever and wherever she is needed. One colleague noted: "She is one of the clinicians I can go to whenever I have a patient who needs to be seen immediately. And she'll walk down to Urgent Care or down the Internal Medicine hallway just to see if she can help."



Left to right: Bradburn; Siev; Genecin; Chang; Montuori (Linda Blackwood was not available)

### EMPLOYEE OF THE YEAR

LINDA BLACKWOOD

Linda Blackwood, ultrasonographer in the Radiology Department since 2000, has "single-handedly transformed the ultrasound service at YUHS." Described in one patient letter as "a gem," Blackwood is noted for her "professionalism, caring and compassion." One clinician said, "She saved my patient's life by finding a cancer that would have been missed if she hadn't gone the extra mile. I also know from personal experience that she is very gentle and respectful in the way she does her exams." Another noted, "It's not uncommon for her to work through her lunch hour or to stay late to help care for a patient in need of urgent care." Another patient wrote, "YUHS should be proud of her and I know I am happy she is on your staff."

### CONSULTANT OF THE YEAR

HUBERT (BEN) BRADBURN, MD

An orthopedist who practiced at the old Department of University Health before Yale Health Plan was established, Bradburn continued to provide services when YHP opened in 1971.

Although he left YHP in the mid-70s, he returned in 2001 to staff the Orthopedic clinic four days a week. One colleague wrote that "He embodies all the qualities a physician should strive for; is knowledgeable, wise, technically proficient and humanistic. He is always...easy to reach for good advice." In addition, he is "happy to consult on urgent cases, even though his clinic is usually full," and "will come in on his day off to accommodate a patient."

### DIRECTOR'S AWARD

KIM MONTUORI

Kim Montuori, now a senior administrative assistant the Department of Quality Management, came to YUHS in 1989. She is known for "bringing patience and insight to her work." Highly motivated and a self-starter, "she is persistent and dedicated to the semi-thankless task of maintaining the YUHS policy and procedure manual and web page." She has an "amazing ability to multi-task," moving back and forth "from policies and procedures, to clinical practice guidelines, to referral and benefit questions, to providing IDx support" — all the while being willing to go out of her way to "answer any questions or concerns that are brought to her."

## SURVEYS SHOW RESULTS

*continued from page 2*

We sent 15,000 letters from clinicians to patients asking them to use YHOL — the secure, web-based medical communications tool. In addition, we did on-site demonstrations, worked with our Member Advisory Committee (which includes representatives from local 34 and 35, management and professional groups, retirees and students), and used the YHP newsletter to keep patients informed of the program's benefits.

The results have been significant. In the last six months we added 2,656 new accounts for a total as of this writing of 5,207. YHOL messaging is up and telephone call volume to Internal Medicine is down (this past July's phone call volume was 23% lower than a year ago).

In addition: 277 patients have used YHOL to cancel or reschedule appointments in the last six months, and 281 have submitted demographic update requests. The most notable number has been the 2,640 patient messages to clinicians, sent at the patient's convenience, responded to within two business days — and eliminating that number of phone calls to Internal Medicine.

The results of a subsequent patient satisfaction survey revealed that those using YHOL had an improved experience with Internal Medicine when doing so.

- 74.7% of patients are satisfied with the YHOL Internal Medicine experience and 40.4% are very satisfied.
- 55% are more satisfied with their Internal Medicine experience because of YHOL.
- 50% find it easier to communicate with their clinicians using YHOL.
- 71.6% are satisfied with the ability to communicate with their clinicians in a secure online environment.
- 41.4% are dissatisfied reaching their clinicians by phone, while only 19.3% are dissatisfied using YHOL.

While satisfaction is up, we know we need to improve the management of appointments and schedules. That project is underway, and patients should see improvements this fall.

Future plans include the integration of YHOL with our electronic medical record (EMR) project to allow patients access to their personal health information when they want to see it.

The strategic importance of YHOL in our technology and care initiatives will grow as YUHS comes closer to following the national health care information initiatives recently announced by the federal government.

## FROM THE DESK OF

*continued from page 3*

But keep in mind that Yale Health Plan is Yale's health plan; Yale subsidizes the cost of care for YHP members. This is the greatest bargain in world class health care — and not just because of the premiums, but also because YHP does not charge co-payments for visits or hospitalization. As I emphasize YHP's connection to Yale, I should also mention that our dedication to confidentiality means that no one — not even a family member, let alone your employer — has access to your private health information without your written consent.

As always, I welcome the opportunity to talk with you about YHP. If you have questions about your choice of health plans during Open Enrollment, and particularly if you have never been a YHP member, contact our Member Services Department (203-432-0246) or me personally. YHP is pleased to serve

nearly 80% of the Yale community and we are dedicated to following on our proud trajectory of continuous improvement in care and service.



## yale health care

Yale Health Plan  
Member Services  
17 Hillhouse Avenue  
P.O. Box 208237  
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Please remember that free parking for YHP members is available both in the lot right next to 17 Hillhouse Avenue and in parking lot 37, just across Trumbull Street.

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