

THE WIRE



4th District IBEW Health Fund
**KEEPING YOU WIRED TO BENEFITS
NEWS AND INFORMATION**

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WINTER 2013

*This issue kicks off the year with a focus on your dental health, along with ways to save money. The **Fund Business** section reviews dental plan improvements that took effect on January 1, 2013—a new Delta Dental Network and a higher calendar year maximum when you use in-network providers. The **Rx Update** provides a reminder about how the Step Therapy Program saves you—and the Fund—money, as well as what medications are covered under this Program. **HealthCorner** puts a spotlight on monthly health topics and a useful tool from GuidanceResources® Online that can help you write legal documents without needing a lawyer. The **Fund Stuff** section wraps things up with something a little different from the usual health food recipe. We hope this issue helps you get a healthy start to the New Year.*

FunD Business

Brush Up on Dental Plan Changes

The 4th District IBEW Health Fund is now working with Delta Dental of Ohio to administer your dental benefit plan. This means you will have access to two large networks of providers who have agreed to accept negotiated, discounted fees for their services. Along with this change, the calendar-year maximum for benefits is increasing to \$900 when you go in-network for your dental care. Both of these changes were effective January 1, 2013.

The Delta Dental network is comprised of two networks—the **Delta Dental PPO**, which offers a smaller network of providers but has deeper discounts; and the **Delta Dental Premier®**, which offers a larger number of participating providers but lower discounts. When you seek care from a dentist in either network, you'll see a significant savings on your dental bill and out-of-pocket payments.

Most members should find that their dentist is in one of the networks; however, we encourage you to check before your next visit. When you use Delta Dental's "Find a Dentist" tool, you will need to select either the "Delta Dental PPO" button or the "Delta Dental Premier" button (see Step 3 in the Feature Box inside). Of course, you can visit an out-of-network provider; however, Delta Dental's discounted rates do not apply, your calendar-year maximum for benefits will drop to \$750 and you will be responsible for any amount over the maximum non-participating dentist fee. The chart below shows how you save when you go in-network.

The dental plan continues to cover preventive care at 100% and all other covered services and supplies remain the same. For a complete overview of dental benefits, visit the Fund's website at:

<http://www.4thdistricthealthfund.com/benefits/active/dental/>.

Delta Dental PPO		Delta Dental Premier		Out-of-Network	
Dentist's Billed Fee:	\$100	Dentist's Billed Fee:	\$100	Dentist's Billed Fee:	\$100
PPO Fee Schedule Amount:	\$70	Maximum Approved Fee:	\$90	Maximum Non-participating Dentist Fee:	\$90
Delta Dental pays 75% of the PPO Fee Schedule Amount:	\$52.50	Delta Dental pays 75% of the Maximum Approved Fee:	\$67.50	Delta Dental pays 75% of the Non-participating Dentist Fee:	\$67.50
You Pay:	\$17.50	You Pay:	\$22.50	You Pay:	\$32.50*

* If you seek care from an out-of-network dentist and that dentist charges more than the allowed, maximum non-participating dentist fee, you must pay the difference from your own pocket. This is called "balance billing." In the above example, the difference (and subsequent out-of-pocket expense) is \$10.00. The maximum non-participating dentist fee is based on fees charged by all dentists for similar services in a geographic area and currently provides, on average, payment for 90% of the submitted charge before deductibles, coinsurance, and over maximum charges.

A Review of Benefit Enhancements

As the New Year begins, we thought it would be a good time to review the benefit improvements the Fund has made to the Plan over the last few years. Even though we've been operating in a difficult financial environment for the past few years, the Trustees have been able to enhance your benefit plan by expanding access to coverage, making preventive care affordable and providing more financial security for your family. Since 2011, the Fund has made the following improvements to your health and welfare benefits:

- ▶ **In-network preventive care is covered at 100%**, whether or not you have met the deductible, and any dollar limits for benefits were removed.
- ▶ A **greater number of preventive care services for women are covered at 100%** when you go in-network, including certain contraceptive coverage.
- ▶ Most **prescription drug costs are limited to copays within a minimum and maximum range**, while generic drugs filled through the mail order pharmacy have a flat \$15 copay for up to a 90-day supply.
- ▶ The **benefits for treatment of autism were expanded** to include testing, evaluation and medication management.
- ▶ If you go **out-of-network for emergency hospital care, it is covered at 80%**. Also, out-of-network mental health/substance abuse services are covered at 60% and the daily maximum benefit was removed.
- ▶ When you need dental care, you have access to a network of providers who discount their fees and the **Fund increased the calendar-year maximum for in-network benefits to \$900**.
- ▶ The **Life Insurance benefit was increased to \$25,000** and the **Accidental Death & Dismemberment benefit was increased to \$30,000**.

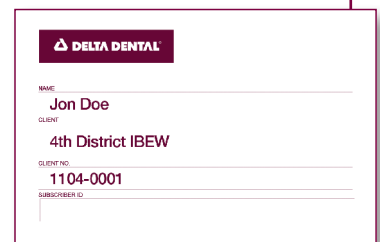
▶ Other Plan enhancements:

- the age limit for covered dependents was raised to age 26, and limitations based on their employment or access to other coverage were removed;
- the claims and appeals process was changed to comply with Affordable Care Act requirements;
- the dollar bank maximum was increased to \$8,500; and
- the eligibility rules now allow members to elect the Flexible Choice Plan in lieu of COBRA or making the full self payments.

- ▶ For retirees, eligibility rules were expanded to include members who may not have been able to find work just prior to retirement. In addition, the Medicare Supplement Program is now self-funded through American Benefits Corporation to help keep plan administration costs low so the Fund can try to limit cost increases.

New Dental ID Cards.

You should have received a new dental ID card to use in 2013. Here is an example of what the new card looks like. If you have not received yours, contact the Fund Office 1-304-525-0331 or 1-888-466-9094.



Rx Update

Step Therapy for Certain Drugs

Step Therapy is a program designed for people who take prescription drugs on a regular basis for ongoing conditions like arthritis, asthma and high blood pressure. It helps you get an effective medication to treat your condition while keeping costs as low as possible. Step Therapy does this by requiring you to first try certain drugs to treat your medical condition before another drug will be covered.

Examples of typical therapeutic classes and medicines that require Step Therapy include, but are not limited to: Proton Pump Inhibitors (like Prevacid/Nexium), statins for cholesterol, sleep aids, SSRI/SNRI antidepressants, nasal sprays, osteoporosis medications, ARB antihypertensives and combination antihypertensives.

Recently, the Fund added the following medications to the Step Therapy Program for new prescriptions filled on or after September 1, 2012: Lyrica, Nasal Sprays, Overactive Bladder medications, Tekturina, Glaucoma Agents and Migraine medications. If you started a prescription for one of these medications before September 1, 2012, your coverage is not subject to the Step Therapy Program.

For a complete list of medications, or if you have questions about the Step Therapy Program, contact Sav-Rx at 1-866-233-IBEW. Also see the Prescription Drug page for a benefits summary:
www.4thdistricthealthfund.com/benefits/active/prescription-drugs/

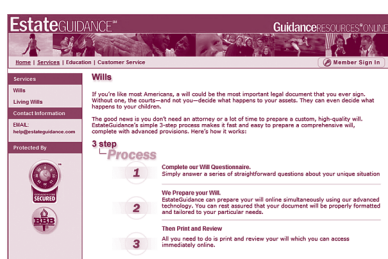
In each issue, **Health Corner** highlights hot topics in health care, as tracked in the National Health Observances calendar, to help you raise your “health” awareness of those topics and show you how the Health Fund’s benefits cover related services and/or care.

Health Topic	What It Is	Why It Is Important	Fund Benefits*
<p>January is National Glaucoma Awareness Month</p>	<p>Glaucoma, if left untreated, is an eye disease that can lead to vision loss by damaging a part of the eye called the optic nerve.</p>	<p>Glaucoma is controllable with treatment, and there are options to help keep glaucoma from further damaging your eyes. Treatment cannot reverse damage that has already occurred, but it can prevent further vision loss.</p>	<p>The Fund provides vision care benefits through an arrangement with National Vision Administrators (NVA). You can visit any vision care provider you wish; however, you receive discounted services and more coverage when you use NVA providers.</p> <p>The NVA benefit provides discounted fees on exams, lenses, and frames, as well as one annual eye exam covered in full.</p>
<p>February 1 is National Wear Red Day</p>	<p>The National Heart Lung and Blood Institute designates a day each year in February to raise awareness that heart disease—the number one killer of women—is preventable.</p>	<p>Some risk factors, such as high blood cholesterol, have no signs or symptoms. Nearly one in every two American women has high or borderline high cholesterol.</p>	<p>The medical plans cover a wide array of preventive care services, including an annual exam, associated laboratory and radiology services, and cholesterol screenings.</p>
<p>March is National Nutrition Month</p>	<p>National Nutrition Month® is a nutrition education and information campaign created by the Academy of Nutrition and Dietetics. The campaign focuses attention on the importance of making informed food choices and developing sound eating and physical activity habits.</p>	<p>A nutrient-rich diet can help keep your immune system strong, which is one of the best defenses against illness. What you eat plays a role in managing illness and preventing it. If you have a chronic condition, your diet may reduce or, in some cases, eliminate symptoms.</p>	<p>Look under the “Wellness” section on the GuidanceResources® website for a wealth of fitness and nutrition resources—tips and recipes for reducing salt intake, how to incorporate super foods into your diet, and other special diet or nutrition needs.</p>

* You must use PPO providers (In-Network) when receiving preventive, well-care services for benefits to be paid.

Legal documents made easy and affordable.

When you register on GuidanceResources® Online, you also gain access to EstateGuidance®. This online service saves you time and money on common legal matters. The do-it-yourself tools and educational center can help you prepare legal documents—such as wills and advance directives—from your home or office without the expense of a lawyer. If you haven’t registered yet, visit: www.guidanceresources.com and enter in the Fund ID, “MAP_4_IBEW.” You may also call 1-877-627-4239.



Is your dentist in-network? To see if your dentist participates in one of the Delta Dental Networks, visit www.deltadentaloh.com and follow these instructions:

1. Click the “Find a Dentist” link in the upper right corner or the green button at the bottom of the page.
2. Click the “Delta Dental PPO or Premier Network” link.
3. Select the “Delta Dental PPO” button or the “Delta Dental Premier” button (you have access to both networks), and enter your city and state or zip code.
4. You can filter your search results by distance, dental specialty, languages spoken, gender or extended hours. You may also search for a dentist by name.
5. Click “Search for a Dentist” to view your results.

Find a Dentist



FunD Stuff—Factoids About Dental Care



George Washington had several dentures constructed for him during his lifetime:

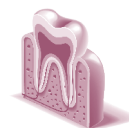
- ▶ They were made of a variety of materials including lead, gold, steel, ivory and human and animal teeth.
- ▶ Washington's own teeth or other human or animal teeth were inserted into the base with metal rods or wires.
- ▶ There is no evidence to support the widespread myth that any part of George Washington's dentures were ever made out of wood.



The toothbrush that we are all familiar with today was not invented until 1938.

Prior to the invention of the toothbrush, people would chew on twigs to clean their teeth.

Tooth decay is the second most common disease in the United States, after the common cold.



Research shows that chewing sugarless gum for 20 minutes following meals can help prevent tooth decay because it increases the flow of saliva in your mouth, which helps neutralize and wash away cavity-causing acids and bacteria.



If you don't floss, you miss cleaning 35% of your tooth surfaces.



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4th District IBEW Health Fund
609 Third Avenue
Chesapeake, OH 45619
Phone: 1-304-525-0331 or 1-888-466-9094
www.4thdistricthealthfund.com

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