The Fund Office Report

Important News About Your Employee Benefit Programs in the Construction Trades Branch of Steamfitters' Local 638

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IMPORTANT INFORMATION ABOUT COMPOUND MEDICATIONS

We want you to know about an important change coming to your prescription drug coverage on July 15, 2014. As of this date, your prescription benefit will no longer cover prescriptions for some compounded medications.

At the recommendation of Express Scripts, our prescription drug manager, the plan no longer covers certain compounded medication products that have little or no proven clinical value in relation to their high cost. Furthermore, these compounded products are not evaluated or verified for safety or efficacy by the FDA.

To avoid paying the full cost of your medication, you should:

- Ask your doctor for a new prescription for an FDA-approved drug before your next fill.
- Be aware that this new prescription may still require further review and/or approval to be covered under your plan.

Please understand that because the compound medication you're currently taking may no longer be covered under your plan, you could pay the full cost if you continue EXPRESS SCRIPTS taking it. So, it's important that you ask your doctor for a new prescription.

Preventative Care Benefits Part II - Children

In the last Fund Office Report we presented the first of a three part series on Preventative Care Benefits. Below you'll find the second part regarding Child preventative care benefits. Women's preventative care benefits will follow in our next Fund Office Report. All three parts encompass the premise of taking care of yourself and your family by using your preventative care benefits and getting regular checkups as well as exams which may help you stay well and catch problems early.

The services listed below are at no cost to you when you get these services from doctors in your plan's network. Please be aware you are responsible for the costs if you use a doctor outside the network.

Below is the preventative care screening tests and immunizations listing.

Child preventative care ~ Preventative physical exams

- Behavioral counseling to promote a healthy diet HPV screening (female)
- Blood pressure
- Cervical dysplasia screening
- Cholesterol and lipid level
- Depression screening
- Development and behavior screening
- Type 2 diabetes screening
- Hearing screening
- Height, weight and body mass index (BMI)
- Hemoglobin or hematocrit (blood count)

Immunizations

- Diptheria, tetanus and pertussis (whooping cough)
- Haemophilus influenza type b (Hib)
- Hepatitis A and Hepatitis B
- Human papillomavirus (HPV)
- Influenza (flu)
- Measles, mumps and rubella (MMR)

- Lead testing
- Newborn screening
- Screening and counseling for obesity
- Oral (dental health) assessment when done as part of a preventive care visit
- · Screening and counseling for sexually transmitted infections
- Vision screening² when done as part of a preventive care visit
 - Meningococcal (meningitis)
 - Pneumococcal (pneumonia)

 - Rotavirus
 - Varicella (chickenpox)



Empire Expansion of Medical Benefits under Empire EPO

Effective immediately, the following benefits are available and/or clarified under your EPO Plan with Empire BlueCross:

- Online Physician Visits Utilizing Empire's Website (primary care only)
- Urgent Care services
- · Breast Pump Maximum

Online Physician Visits are covered services which include a medical consultation using the internet via a webcam with online chat or voice functions. You must utilize the Empire website (www.livehealthonline.com) to establish your account and to access an online physician. Services are provided by board certified, licensed primary care physicians. Online visits are not for specialist care. Common types of diagnoses and conditions treated online are: cough, fever, headaches, sore throat, routine child health issues, influenza, upper respiratory infections, sinusitis, bronchitis and urinary tract infections, when uncomplicated in nature. Online services not covered include: to get reports of normal or other test results, to request an office appointment, to ask billing, insurance coverage or payment questions, to ask for a referral to a specialist, to request precertification for a benefit or to ask a physician to consult with another physician.

Online Visits have a \$20 copayment.

Urgent Care Services are available for an unexpected illness or injury that cannot wait until a regularly scheduled office visit. Urgent Care problems are not life threatening and do not call for the use of an emergency room. Benefits for urgent care include x-ray services, care for broken bones, tests for flu, urinalysis, pregnancy testing, rapid strep, laboratory services, stitches for simple cuts and draining an abscess. An Urgent Care facility is a licensed, health care facility that is separate from a hospital and whose main purpose is providing immediate, short-term medical care, without an appointment. Always be sure that the Urgent Care facility is in the Empire network by inquiring with them.

Urgent Care services have a \$20 copayment.

Breast Pump Maximum is established as one breast pump per pregnancy. Breast pumps are covered under our Durable Medical Equipment benefits and there is no copayment. However, you must obtain your breast pump from an Empire approved, in-network supplier.

If you have any questions regarding these benefits, contact the Welfare Fund at Option 4 on the Main Menu.

Disability Status Program

The Disability Status Program (DSP) is designed to help covered participants maintain eligibility if they are unable to work due to a medical condition. The DSP can protect you from losing coverage if your illness or injury prevents you from working. As a prerequisite to the DSP application process, you must be covered in the Welfare Fund at the time of your injury or illness, have at least 10 years of service in the Pension Fund (unless you're an apprentice) and have been in coverage for at least 10 of the 40 calendar quarters immediately preceding the date on which your DSP application is received by the Fund Office.

Under the rules of the Welfare Fund, you must report any injury on or off the job which will affect your ability to work to the Fund Office as soon as possible. Your completed DSP application must be received within thirty (30) days of the accident or illness. You will be required to undergo an independent medical examination as part of the process prior to Trustee approval. Call the Welfare Fund (Option 4 on the Main Menu) with any questions regarding the DSP application.

Keep Records Current

It's important to keep the Fund Office up to date regarding changes in your life. You should report a change of address, a new spouse, a birth, adoption of a child, your entrance into or discharge from military service, disability, changes to your beneficiaries or a divorce.

It is essential to report a divorce, for instance, so that COBRA coverage may be made available on a timely basis. In addition you are liable for the unnecessary costs the Welfare Fund incurs due to your non-notification. Contact the Welfare Fund at Option 4 on the Main Menu regarding the above. You may also visit the member website to make certain changes.

Privacy

Please be advised that for your own security, the Fund Office will not provide any personal information, including hours paid or account balances, over the phone. You are encouraged to check your account balances using our online system or contact your business agents. Please contact the Fund Office at (212) 465-8888. menu option 7, if you have any questions regarding log-in information.

Remember Keep Your Pay Stubs

Please review your pay stubs against your Statement of Earnings each quarter. Should a discrepancy arise upon reviewing posted hours on your Statement of Earnings against your pay stubs, contact the Remittance Department at (212) 465-8888, option 5. Please be prepared to provide copies of your pay stubs to the Fund Office.

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