
FOR YOUR BENEFIT

NEWSLETTER OF THE LOCAL 295 IBT EMPLOYER GROUP BENEFIT FUNDS
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OPTUM NEWSLETTER

One of the most important benefits you have in the Local 295 Welfare Fund is the prescription drug coverage for you and your family. This valuable benefit is provided by Pharmacy Benefit Manager (“PBM”) named OptumRx, Inc. When you need to get a prescription filled either at the pharmacy or by mail you use the same card that you use at the doctor’s office. The OptumRx logo is on the back of your card.

OptumRx is one of the largest PBMs in the United States. As part of their commitment to customer service they maintain a website for their insureds. As a member of the Local 295 Welfare Fund, you are eligible to go on the website and explore the many options that are there.

The logon for the site is optumrx.com or download the OptumRx app from the Apple App Store or Google Play Store. When you first sign-on you need to set up an account and a password. The information you need to set up the account is your name, Date of Birth, Zip Code and user id. The user id is your LLX number found on your card.









Once you have created your account you can use the website or app for a variety of services. The site and app are set up with screens that take you deeper into the site. There are a variety of services and information available to you as a Local 295 Welfare Fund member or dependent. OptumRx has created digital tools that allow you to manage and gain deeper insight into your prescription benefits, making it easier for you to take an active part in your health care decisions. On one slide of the app you can track your order, search for a lower cost alternative, set medication reminders and elect home delivery.

Part of the app is called “My Medicine Cabinet” which has all of the information about your particular medications including any actions you might need to take such as renewing, refilling or any other actions that you might need to take.

“The Savings Advisor” provides you with drug pricing alerts and shows lower cost alternatives. It also has the “Hassle Free Fill” that will automatically refill your prescriptions that are eligible for this service.

One of the most important sections of the app concerns Prior Authorization requirements. When your doctor prescribes a medication to you, the doctor should check to see if a Prior Authorization is required. Sometimes, this doesn’t happen, and it becomes necessary for you to take some action. The app makes it easier to do this than having to call customer service. You can simply select your doctor and medication and submit. The rest is done automatically without the need for you to do anything else.

A short list of the functions on the app are:

-  Refill and renew home delivery
-  Search for drug prices and view lower cost alternatives
-  Transfer retail prescriptions to home delivery
-  Track your orders
-  View your claims history
-  Enroll in text message alerts
-  Manage medications for family members
-  View your real time benefits

There are many more things that the app can do for you. It is worth it to spend some time browsing the app to see what functions would be most important to you. Not all the functions on the app may apply to your particular situation, but they might apply to someone else you know and may apply to you in the future. Good luck with your browsing!








THE CONDITIONS THAT WE HAVE

The Local 295 I.B.T. Employer Group Welfare Fund provides medical coverage to you and your family for all types of health conditions. We have created a variety of helpful programs that enhance your well-being. These include the outreach programs from Health Maintenance Company (“HMC”) and specific programs from our pharmacy benefits manager, OptumRX, that aim to improve your overall well-being.

As you may have read in previous newsletters in the past the predominant medical condition that affected the most of our participants, and had the highest cost of benefits, was diabetes. This is the most common health condition in the Northeast United States and has been for many years.

We have attacked diabetes with the programs from HMC and OptumRx. Diabetes has dropped from first to fourth in claims costs in the Fund. This is an exceptional result. You have worked with our providers to do the things that improve your health.

The conditions that are most prevalent in the Fund for the 2020 calendar year were:

-  Hyperlipidemia – High Cholesterol
-  Hypertension – High Blood pressure
-  Back Pain
-  Diabetes
-  Coronary Artery Disease
-  Asthma
-  COPD – Lung Disease

Congratulations on the hard work you have done to reduce diabetes. Keep working with the outreach providers. If you haven't worked with them yet, please consider talking to them if they contact you. It can only be For Your Benefit. Keep it up!

CHECK THE NETWORK

We have had a recent number of medical claims that have fallen into the following scenario. A member goes to a provider and asks if they take Empire Blue Cross/Blue Shield. When the provider, or the provider's office staff, answers that yes they take Empire's insurance, our member thinks that they have done the right thing and have gone to an in-network provider. This is a mistake. Almost every provider, doctors, labs, x-ray centers, they ALL take Empire insurance. This does NOT mean they are in-network.

The correct question to ask is “are you in the Empire panel and do you accept my insurance as payment in full (minus the co-pay).” Only then can you be sure that you are going to an in-network provider and that you will NOT be responsible for additional out-of-network charges.

A recent example of this is a member who asked if the doctor accepted Blue Cross and was told that yes, they would bill Blue Cross for the services. The doctor's charges were \$1,000.00. The doctor was out-of-network. When we received the claim from Empire, we determined that the Out-of-network allowance (250% of the Medicare allowance) amounted to \$450. To make matters even worse, we then had to apply the \$400 deductible to the claim. The Fund paid \$37.50 for this claim. The remaining \$962.50 was the member's responsibility. This was one very unhappy member.

A way you can be sure that you are going to an in-network provider is to look for providers on the Empire website -www.empireblue.com or call 1.800.810.Blue (2583). This list is kept up to date so if you find your provider on this list you can rest assured you are going to a network provider and will have only a co-payment.

Even if you are going back to a provider that you saw in the past, check to see if the provider is still in the network. Things change all the time and providers sometimes don't let you know they left the network.



SPRING CLEANING

Now that Spring is here it is traditional to spend some time cleaning the house, yard and removing clutter. May we suggest you do the same with your wallet and/or purse. As a retiree in the Welfare Fund your medical and prescription benefits are provided by the Aetna insurance company. The only cards you should carry with you are your new Aetna Card and your actual Medicare card. All other medical cards are no longer used and carrying them can only lead to confusion. Clean Up!

ORAL CANCER

Every hour of every day someone in the United States dies of Oral Cancer. It has a higher fatality rate than other more well-known cancers such as leukemia, Hodgkin's lymphoma, testicular or cervical. Early detection has an 80% survival rate, but that falls dramatically to less than 20% if found in a late stage.

Due to the Covid-19 pandemic, dental offices were closed for many months in 2020 and you were not able to make regular dental appointments. Make sure you visit your dentist soon. Everyone 18 years of age and older needs to be screened for oral cancer annually.


Men are twice as likely to develop oral cancer than women. The average age at diagnosis is 62 and nearly two-thirds of individuals with this disease are over 55. Of course, tobacco use increases your risk. Quitting smoking dramatically reduces your risk for oral and many other kinds of cancer. Most importantly brush


and floss your teeth every day and visit your dentist once a year and request a cancer screening.


COVID SCAMS


As part of our ongoing warnings to you about potential scams, there are now scams going on relating to Covid Testing and Covid Contact Tracing. Most of us are aware that there should be no charge for any Covid testing so if you are approached by anyone who demands any form of payment for a Covid test tell them to take a hike.

However, what many of us do not know is that if you are contacted by a person who claims to be a "Contact Tracer" there are some things you should know:

 Real Contact Tracers will never ask you for money. Only Scammers will insist on some form of payment most likely by gift card, money transfer or bitcoin.

 Contact Tracing does not require your bank account or credit card number. Never share this with anyone with whom you did not initiate the call.

 Legitimate Contact Tracers will never ask for your Social Security Number. Never give any part of your number, such as the last 4 digits, if you do not know who is asking.

 Do not click on any link in a text or email that is sent to you without your asking for it. Doing so can download malware or spyware onto your phone, tablet or computer.

Talking to a real Contact Tracer helps stop the spread of the virus. If the person you are talking to asks for any of the above information you can be sure they are a scammer. You can report any such contact at ftc.gov/complaint. Stay safe.

LOCAL 295 IBT EMPLOYER
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WELL VISIT STATISTICS

Our Welfare Fund network provider, Empire Blue Cross/Blue Shield, has compiled statistics on how well we are using the annual physical and wellness benefits in our plan. Some of our usage is very encouraging and others leave room for improvement. As we have said in the past there is probably no better thing you can do for your health than get annual check-ups.

Remember, there is no copay for these doctor visits if you use a network provider.

Where we rank well with respect to Blue Cross' entire insured participants is with well-baby (birth through 3 years old) visits with nearly 88% of eligible children receiving these visits. Also childcare visits (ages 3 through 15) saw nearly 78% of eligible children seeing their pediatricians.

Annual physicals for women and breast cancer

screenings were just slightly above the national average with 51% of women having an annual physical and nearly 60% having breast cancer screenings. As you can see there is room for improvement in both of these categories. Both the annual physical and breast cancer screenings are performed without any cost to you if you use a network provider.

Where we are below the national averages is with annual physical and cancer screening for men. Only 1 in 3 of eligible members had these visits or tests. We really need to get more men in front of a doctor on a regular, annual basis. Conditions found early have a much greater chance of a positive outcome than those that are caught later. You work hard to provide for your family. Get an annual physical for your sake and especially for the sake of your loved ones.