FOR YOUR BENEFIT

THE LOCAL 295/LOCAL 851 EMPLOYER GROUP BENEFIT FUNDS NEWSLETTER VOL. XIII, ISSUE 2, SUMMER 2014

REMINDER – THE WELFARE FUND CAN COVER YOUR YOUNG ADULT CHILDREN

Three years ago, we announced that the Patient Protection and Affordable Care Act (the Affordable Care Act) requires insurers to offer young adult children coverage as dependents on their parents' health insurance plans up to the age of 26.

The Welfare Fund Office sent out a letter to all of the eligible plan participants in May, 2011. We included instructions on how to register your young adult sons and daughters for this special coverage.

We're repeating the information in this edition of the newsletter to remind all eligible participants of the coverage that is available to sons and daughters who are under the age of 26.

Coverage is provided at no cost...

The full cost of providing this valuable extended coverage is being absorbed by the Welfare Fund. No employee or dependent or employer is required to make any payments.

Must complete and file an enrollment card...

Previous to the Affordable Care Act, sons and daughters were covered until their 19th birthday. The coverage could be extended until age 23 if the son or daughter was a full-time student. Everyone had to file proof of student status with the Fund Office to get the extension. The proof of student status is no longer required. No one is automatically added to the coverage rolls. If you have any sons or daughters who are over the age of 19 and still under the age of 26, and you have not previously enrolled them in the Welfare Fund coverage, call the Welfare Fund Office to get an enrollment card. You must complete and return the card before the coverage will start. The coverage will start on the first day of the month after you file the enrollment card. If your dependents are eligible to have their coverage reinstated, it can remain in effect until the date of their 26th birthday.

If you have any questions...

Call or visit the Fund Office. The telephone number is 212.308.4200. The address is Sixty Broad Street, 37th Floor, New York, New York 10004 The Fund Office hours are 9:00 AM to 5:00 PM, Eastern Time, Monday - Friday, except holidays.

THE NUMBER OF NETWORK EMERGENCY ROOM DOCTORS AND ANESTHESIOLOGISTS IS INCREASING

We reported in an earlier issue of our newsletter that most of the emergency room doctors and anesthesiologists who are providing medical, surgical and anesthesia services to emergency room patients are not employees of the hospital.

Also, many of these practitioners are not in the Blue Cross/Blue Shield network. The practitioners are providing their services in the network hospitals and the out-of-network hospitals.

Very often, when our covered participants and dependents receive emergency room care, the doctors' and anesthesiologists' charges have to be paid



as out-of-network claims.

Out-of-network claims are paid under the major medical coverage of the Welfare Fund. After the annual deductible has been met, major medical pays the balance of the allowed charge at a percentage. The annual deductible is \$400 for each covered person and the rate of payment is 75%.

Claimants will always have out-of-pocket expense for out-of-network claims. Suppose the doctor's fee is \$600 for emergency room treatment. The allowed charge might only be \$500. After the \$400 deductible is applied, the Welfare Fund would pay 75% of \$100. The payment would be just \$75 and the patient would be responsible for \$525 of the doctor's charges.

We're pleased to report that Blue Cross/Blue Shield has been steadily increasing the number of emergency room network providers.

We suggest you check with your local hospital to find out if their emergency room doctors and anesthesiologists are in the Blue Cross/Blue Shield network.

WINNING THE WAR ON WEIGHT

There is some good news in the war on weight. Some recent studies have shown that obesity in the United States may be stabilizing instead of increasing.

Many adults and children are overweight...

The rates of obesity remain high. About 68 percent of U.S. adults are overweight or obese and almost 32 percent of school-aged children and adolescents are at or above the 85th percentile of body-mass index (BMI) for their age.

With almost seven out of 10 adults overweight, the consequences of obesity are far reaching, affecting not only ourselves but our friends, neighbors, co-workers and family members.

Higher incidence of disease...
Excess weight is linked to type 2
diabetes, heart disease, stroke, high
blood pressure, high cholesterol,
cancer, joint disease, sleep apnea,
asthma and other chronic
conditions. Obesity has a greater
effect on disease and quality of life
than smoking (although smoking has a greater impact on death
rates). Winning the war on weight
doesn't require an all or nothing
approach. Losing just five to 10
percent of your weight can delay or
prevent many chronic conditions.



If you are overweight, set a goal of a gradual weight loss, choose a low-calorie eating

plan, reduce your food intake by 250 to 500 calories a day, learn to be more physically active, educate yourself about healthy eating and physical activity.

Most importantly, discuss your plan with your doctor. And, be sure to enroll in the Welfare Fund's special program – Wellness – The Right Way – For Your Benefit.

SUNY DOWNSTATE MEDICAL CENTER AT LONG ISLAND COLLEGE HOSPITAL HAS CLOSED

You may have heard the SUNY Downstate Medical Center at Long Island College Hospital has closed and is no longer providing hospital care to the local community.

Alternative facilities available...

Blue Cross/Blue Shield reported that four other network hospitals are in the area and they can provide all of the hospital in-patient, out-patient and emergency room services that you and your dependents may require.

The four other hospitals are:

- Brooklyn Hospital Center
 121 Dekalb Avenue
 Brooklyn, New York 11201
- Maimonides Medical Center 4802 Tenth Avenue Brooklyn, New York 11219
- New York Presbyterian
 Lower Manhattan Hospital
 170 William Street
 New York, New York 10038
- The New York Methodist
 Hospital
 506 Sixth Street
 Brooklyn, New York 11215

To find a participating Blue Cross Blue Shield provider, you can call 800.810.2583 or go to www.empireblue.com

WHY DON'T YOU ENROLL IN WELLNESS – THE RIGHT WAY – FOR YOUR BENEFIT?

Enrollment is easy.

Call 1.877.834.4596. You can also enroll on their website. The website address is: http://wellnesstherightway.hmcportal.com

This valuable benefit can be used by all active employees and retirees who are not on Medicare. Dependents are also covered. Each covered person who is age 18 or older should enroll. In that way, the services can be tailored exactly to the needs of each individual.

What are you waiting for? Go online or call right now to enroll. The telephone call is toll free and the benefit program will not cost you anything out of pocket.

NEED INFORMATION?

If you are thinking about retirement or if you need any forms or information about your Welfare and Pension Funds, contact the Fund Office.

The telephone number is 212.308.4200.

The fax number is 212.308.4545. The Fund Office is located in the financial district of Manhattan. The address is Sixty Broad Street, 37th Floor, New York, New York 10004.

DID YOU MOVE?

If you have recently moved, please send your new address to the Welfare and Pension Fund office. You can get a supply of

change of address cards at your local post office. The cards are free. If you keep us up to date on your address you won't delay

the delivery of mail from the benefit funds.

WHERE SHOULD I GO? TO THE EMERGENCY ROOM? TO AN URGENT CARE CENTER?

When you have a life-threatening situation, such as chest pain, or a sudden and severe pain, the emergency department of the nearest hospital is the only option.

If you went to an urgent care center, they'd just send you on to the ER in an ambulance. But, if your condition is less serious, and still requires immediate attention, choosing an urgent care facility can save you loads of time and money, as well as helping to keep the emergency room free to handle more serious situations.

You'll have a very long wait in the emergency room...

The state of New York ranks 46th nationally in the length of its ER waiting time.

The average waiting time was over 300 minutes last year. That's more than 5 hours.

If you have a sprained ankle, or an ear infection, you may end up waiting for many hours in the emergency room and you could have to pay thousands of dollars for treatment in the ER.

You might have to pay the full cost out of pocket...

If your trip to the ER is not for the care of a true medical emergency, as defined by the prudent lay person rule, the ER claim will not be covered at all by the Welfare Fund and you will have to pay the entire cost of the ER services out of pocket.

Most urgent care centers are open for extended hours, and will be able to accommodate you much more quickly.

Not only does going to an urgent care center for minor illnesses help reduce your out-of-pocket costs, it also reduces costs for your health plan.

Your out-of-pocket expense for treatment at a network urgent care center is just \$20. That is the same amount of co-payment that is required for treatment at a doctor's office.

Many Emergency Room visits are not emergencies...

According to a recently published RAND Corporation study, almost 20% of all visits to hospital emergency rooms nationally could potentially be treated at urgent care centers for an estimated savings of about 4.4 billion dollars.



When you should go to the ER:

If you have a serious condition such as a stroke or a heart attack, severe bleeding, head injury or other major trauma you should call 911 or go straight to the nearest ER. Don't take a chance with anything life-threatening. The ER is the best place for these and other critical conditions, including:

- · Chest pain
- Difficulty breathing
- Severe bleeding or head trauma
- Loss of consciousness
- Sudden loss of vision or blurred vision
- Broken bones

When an Urgent Care Center can better meet your needs:



- Minor burns or injuries
- Sprains and strains
- Mild asthma
- Ear infections
- Allergic reactions (non

life-threatening)

- Coughs, colds, and sore throats
- Fever or flu-like symptoms
- Rash or other skin irritations
- Animal bites

And, when in doubt, call ahead. If the urgent care center can't accommodate your condition, they will advise you to go the nearest emergency facility.

Finding an urgent care center near you...

You can find an urgent care center near you by calling Blue Cross toll free at 1.800.810.2583. You can also sign on to the Blue Cross website. The address is: www.empireblue.com/eralt/. Or, you can go to Yahoo, Google or Bing and type in "Empire NY Urgent Care" and you'll find urgent care centers located in your area. There's a link to a Google map page that shows where the urgent care centers are located. There are more than 100 of these urgent care facilities in the metropolitan New York area and the number is growing. Blue Cross is constantly increasing the number of network facilities. And, please remember – out of network means out of pocket.

Do it now... Locate an urgent care center that is near your home. Do it now before you need it, and jot down the address and telephone number next to your doctor's telephone number.

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ELIGIBLE FOR MEDICARE? PLEASE TELL THE WELFARE FUND

If you are eligible for Medicare coverage, it is important that you enroll and that you tell the Welfare Fund Office about the Medicare coverage going into effect.

Claims must be coordinated...
When your Medicare coverage
goes into effect, it changes the way
your claims are paid by the
Welfare Fund. The Welfare Fund
and Medicare have to coordinate
your claims. The process is known
as coordination of benefits.

When claim payments are coordinated, the Medicare rules determine which of the two coverages is primary and which one is secondary.

When Medicare is primary...

If you are covered by Medicare and the Welfare Fund's retiree plan of benefits, that means you are in the Medicare Advantage program of Empire Blue Cross/Blue Shield and Medicare will be responsible for all of your claims. There is no secondary coverage.

When Medicare is secondary...
If you are covered by Medicare and the Welfare Fund's active employee

plan of benefits, the Welfare Fund is the primary plan and will process your claims first. Medicare is secondary and they will consider any balances that may remain after the Welfare Fund has processed your claims.

When Medicare coverage starts... You can begin Medicare coverage on the first day of the month of your 65th birthday. You do not have to retire and you do not have to be receiving Social Security benefits to qualify for Medicare coverage.

Seven month window to apply...



You can apply for Medicare at any time in the three months prior to your 65th

birthday month, during your 65th birthday month and during the three months following your 65th birthday month. If you apply before your 65th birthday, the coverage will start on the first day of your birthday month. If you postpone applying you'll also postpone the effective date of your Medicare coverage.

If you do not apply in the seven-month window, you'll have to wait for the next open enrollment period. The open enrollment pe-

riod starts in the following calendar year. If you enroll during the open enrollment period, your Medicare coverage won't begin until the following July 1st. You will also have to pay a penalty premium for your Medicare coverage.

If you delay, you're taking a big risk... If you qualify for Medicare and do not apply or you delay applying, you will be at risk to pay for a lot of out-of-pocket health claim expense.

Persons who qualify for Social Security disability benefits also become eligible for Medicare coverage. The Medicare coverage begins after 24 months of Social Security disability benefits have been received.

Be sure to tell the Welfare Fund Office when your Medicare coverage begins. Then, the Welfare Fund and Medicare will be able to properly coordinate the payment of any claims that you may have.

Applying for Medicare... You can apply for Medicare in person at any office of the Social Security Administration or you can apply by telephone. The toll-free number is 1.800.772.1213 (TTY 1.800.325.0778). You can also apply on the internet. This is the website address: www.ssa.gov/medicare/apply.html