

TWIN HORSE CRIER

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Optum Rx Provides Programs To Ensure Your Prescriptions Are As Cost Efficient As Possible

In November of 2010, we notified you of mandatory programs provided by Optum Rx. These programs are designed to ensure your prescription benefits are used most efficiently. Here's a quick refresher on those programs and how they can benefit you.

Step Therapy Program

The Step Therapy Program is designed to ensure that lower level drugs are first used to address your need for a medication. If the low level drug works, both you and the Fund pay less than if you were using a more expensive medication available to treat your condition. If your doctor then prescribes you the higher level drug, you should be able to fill it without an authorization as Optum Rx is aware that you've already tried the lower level drug. If the higher level drug is prescribed first, there may be a delay in filling the prescription while Optum Rx works with your doctor to ensure such a drug is necessary without trying others first.

Quantity Limit Program

The purpose of the Quantity Limit Program is to

minimize the risk of overdosing and unwanted drug interaction. For example, some pain relievers contain a combination of narcotics and acetaminophen. There have been cases where prescriptions were written for 10 of these pills per day when, in fact, the body can only properly process eight pills per day.

This program also guarantees that prescriptions are filled in the most cost effective manner. For example, let's say your doctor prescribes a 10mg pill per day, and then later increases the dosage to two 10mg pills. Provided there is a 20mg pill available, your pharmacist should dispense the medication as one 20mg pill. The cost of the 20mg pill may be the same as or close to the cost of the 10mg pills, which will reduce your out-of-pocket cost as well as reduce Fund expenses.

Prior Authorization Program

Certain drugs require prior authorization from Optum Rx. Generally these drugs are very high in cost or require a review for medical necessity. The list of

drugs requiring prior authorization will be updated effective October 1, 2014 and will be accessible via the Fund's website at www.tjc83funds.org/prescription-drugs.asp. If you are currently receiving one of these drugs, you will receive notification from Optum Rx regarding what steps are necessary to continue receiving your prescriptions without interruption.

For further information regarding these programs, please contact the Fund Office.

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H&W NEWS

Dental Fee Schedule Increased

On August 1, 2014, the dental fee schedule for out-of-network benefits was increased to meet the 2014 FAIR Health dental fee schedule.

New Trustee Appointed to Board

The Fund Office welcomes the newest member of the Board of Trustees, Jay Bowers of United Parcel Service. Mr. Bowers was appointed as a Management Trustee effective May 12, 2014, replacing Bill Strickland, also of United Parcel Service.

Lab and Radiology Claims

Effective July 23, 2013, out-of-network out-patient lab and radiology charges are paid at a percentage equal to the in-network benefit. Consult your Schedule of Benefits for specific benefit information. Claims already processed at a lower percentage will be automatically reopened and do not need to be refilled.

Maternity Management Program

If a Participant or their Dependent is within the first trimester of pregnancy, she must successfully complete the maternity management program provided by Carewise Health. The maternity management program is deemed successful when the 28 week survey is completed. A \$500 penalty will apply if the program is not completed.

Durable Medical Equipment Frequently Asked Questions



What is "durable medical equipment"?

The term "durable medical equipment" (DME) is defined as equipment that is medically necessary and used solely by the patient for the treatment of an illness or injury.

Does DME require prior-authorization?

If the rental or purchase of DME totals \$500 or more, the durable equipment must be pre-approved by Carewise Health. You or your provider can contact Carewise Health directly at 888-852-8382. Often, they are able to approve the rental or purchase within the initial phone call, as long as all the necessary clinical information is provided. You or your provider can also fax a request for approval to Carewise Health at 866-854-4496. Faxes are reviewed within 72 hours provided no additional information is requested.

How will I know if my DME request is approved or denied?

Once Carewise Health approves or denies the request of DME, notification is sent to the patient, provider, and the Fund Office.

If my DME request is approved, do I need prior-authorization for supplies also?

No. Supplies for equipment such as CPAP machines are covered for the same time period that the DME is approved. In other words, if Carewise Health approves the rental of a CPAP machine for 6 months, supplies will be covered for that same 6 month time period. If you've been prescribed an oxygen tank rental, you can have your provider request approval for the rental for one year at a time.

What if I fail to request prior-authorization on the purchase or rental of DME?

A retro review can be performed if requested by the provider. If the retro review indicates medical necessity, claims will be considered for payment. All necessary clinical information and a letter of necessity can be faxed to the Fund Office at 804-288-3530. Please note that Carewise Health will not perform the retro review without the permission of the Fund Office.

What is not covered under the DME benefit?

Durable medical equipment does not include items that are environmental in nature or solely for convenience, or equipment to be used in the home, such as humidifiers, vacuum cleaners, air purifiers, bathtub/shower seats, etc.

Services that Require Prior-Authorization from Carewise Health

The following is a list of services that require prior-authorization through Carewise Health. If you are planning to receive one of these services, please contact Carewise Health by phone at 888-852-8382.

- + Skilled Nursing charges
- + Diabetic education classes
- + Physical therapy, speech therapy, and occupational therapy over the maximum of 20 visits per calendar year
- + Home health care
- + Any out-patient surgeries that could potentially be considered cosmetic (i.e. breast reduction, gastric bypass, etc.)
- + Dental services provided in the hospital
- + Durable medical equipment rental or purchase over \$500
- + Out-patient cardiac rehabilitation



Worker's Compensation:

What You Need to Know if Injured on the Job

If you sustain an injury while on the job, there are several things you need to know to ensure your claims are processed properly.

Most importantly, notify your employer immediately if an injury occurs while on the job. Your employer should provide you with the proper forms for filing a worker's compensation claim. Be sure to also tell your doctor you were hurt on the job. Part of the worker's compensation process for approval is that you provide a definite date, time, place and incident of your injury. Failure to provide this information will likely cause your case to be denied.

After submitting the proper forms, you should receive notification as to whether or not your claim was approved. If your case is approved, you are entitled to receive benefits through the worker's compensation program. Please note that your employer has its own worker's compensation carrier and these benefits are not paid by the Fund Office.

If your claim is denied as not job related, the Fund Office can advance payment on your medical bills and provide short-term disability benefits as long as you agree to certain conditions as presented in the Fund's Worker's Compensation Benefit and Appeal Authorization.

One of the key requirements is to continue to appeal your case through the various appeal levels of the workers' compensation program. Appeals must be filed in a timely manner and according to the guidelines provided. Failure to begin the appeal process in a timely manner can hinder your right to appeal. If your claim is denied for failure to follow the proper guidelines, you are responsible for repayment of all charges paid by the Fund, including disability benefits. It is imperative that the appeal process begins as soon as possible and that all paperwork issued during the appeal process be provided to the Fund Office.

If your denial is overturned by the worker's compensation carrier, you must agree to repay the Fund for any claims paid on your behalf while going through the worker's compensation process but only to the limit of the award. If an attorney represents you, the Fund is still entitled to full reimbursement without any deductions for legal fees or costs. If you do not have an attorney and you settle your own claim, it is your responsibility to immediately pay the Fund back in full from the settlement proceeds but only to the limit of the settlement. Please note, a settlement of your claim can only occur after receiving written consent from the Fund.



Planning to Travel Abroad?

How to Properly Dispose of Unused Medications

Many of us have a few half empty prescription bottles sitting in our medicine cabinets that need to be thrown away. If you fall into this category, there are a few options as to how you can properly dispose of unwanted medications, depending on the type of drug.

Medicine Take-Back Programs

One popular option is to participate in a medicine take-back program. Contact either your local government's trash collection service or your pharmacist to find out if there is a program in your area. Be sure to ask if there are any special rules regarding which medications can be taken back.

Disposal in Household Trash

You can also safely dispose of your unwanted medications at home. The FDA's website lists the following steps for safe disposal:

- ✦ Mix medicines (do not crush tablets or capsules) with an unpalatable substance such as kitty litter or used coffee grounds;

- ✦ Place the mixture in a container such as a sealed plastic bag;
- ✦ Throw the container in your household trash
- ✦ Before throwing out your empty pill bottle or other empty medicine packaging, remember to scratch out all information on the prescription label to make it unreadable.

Certain Medications are Flushable

There are certain medications that are safe to flush down the toilet or sink. These medications (e.g., fentanyl patches and Demerol) are often considered extremely dangerous if consumed by someone other than the prescribed individual. Prompt and proper disposal of these medications could prevent accidental ingestion by children or pets. A complete listing of medications that can be flushed is available on the FDA's website at www.fda.gov.

For more information regarding the proper disposal of unused or unwanted medications, contact the FDA.

Here's what you need to know should you require medical attention while outside the U.S., Puerto Rico or U.S. Virgin Islands.

Always carry your medical ID card. Be sure the medical ID card you currently have has a prefix of "TJA". If your card still has a prefix of "TMJ", contact the Fund Office for a new card.

In an emergency, go directly to the nearest hospital or doctor. Call the BlueCard Worldwide Service Center if hospitalized.

If you need to locate a doctor or hospital, or need medical assistance services, call the BlueCard Worldwide at 800-810-BLUE(2583) or call collect at 804-673-1177, 24 hours a day, seven days a week. An assistance coordinator, in conjunction with a medical professional, will arrange a physician appointment or hospitalization, if necessary.

Call the BlueCard Worldwide Service Center at 800-810-2583 or collect at 804-673-1177 when you need inpatient care. In most cases, you should not need to pay upfront for inpatient care except for the out-of-pocket expenses you normally pay, such as copays, deductibles and co-insurance and the hospital will submit your claim on your behalf.

Call Carewise Health for admission notification if necessary. You can find their phone number on the back of your medical ID card.



See a brighter future with annual eye exams

Eye exams aren't just about getting new glasses or contacts. For optimal vision and overall health, you should get one every year.

In fact, eye exams play an important role in your overall wellness. Besides measuring your vision, regular eye exams can help identify early signs of certain chronic health conditions, including high blood pressure, diabetes, heart disease and high cholesterol.

So here's what you can expect. During an eye exam, your doctor will check all aspects of your vision, including your eyes' structure and how well the eyes work together. Based on the exam results, your doctor will recommend a solution that's right for your eye health and vision care needs. Annual eye exams also enable your doctor to monitor the health of your eyes and track any changes from year to year. For example, subtle changes in the retina can be a warning sign of high blood pressure.

So even if you don't need vision correction, it's important to take charge of your eye care. When you get your eyes checked every year, you're helping your eyes – and potentially your whole body – stay well.

Retirees

The Fund would like to recognize the following Participants on their recent retirement:

Local 22

Alan C. Moore
Dicky Thurston

Local 29

Danny R. Dressler
Margaret Sue Ewald
Anthony K. Foster
Barbara S. Hopkins
Nathon Johnson
James L. Kiser
Carl E. McCloskey
Larry A. Rymon
Steven R. Stover
James E. Taylor, Jr.

Local 71

Douglas M. Kuter
Ricky L. Propst
David E. Watts

Local 171

Mona Lisa Bare
Gary W. Lawhome
Dana W. O'Dell
Perry L. Pendleton
Barry G. Sigmon
Michael L. Waddell

Local 322

Timothy W. Allen
Vance E. Allen
Kenneth R. Blaylock
Michael L. Carn
Ralph A. Foster
Douglas E. Goode, Sr.
Marshall D. Henderson
Phillip W. Marion
Jeff A. McConaghy
Larry J. Mitchell
Frank M. Oley
Howell M. Paige

Local 592

James R. Bass III
Michael E. Daniel
Frank J. Reese, Jr.

Local 822

Hiram R. Borgolini
Joseph W. Feres
Vernon J. Poindexter
Joseph E. Polansky
Jerry W. Sourbeer

Dreaming of Retirement?

You've worked hard all your life and you're now finally considering retirement. You're ready to travel, spend time with loved ones and enjoy your freedom. You've done the math and you're ready to submit your pension application to the Fund Office for review. But wait, are you sure you know all the facts about receiving pension benefits from the Fund? What if you change your mind and decide to go back to work? Will your pension benefits be affected? Here are a few factors to consider when making that important decision:

If you retire, return to work under Covered Employment, and then re-retire, you cannot change your initial election options chosen when you originally retired. For example, if you elected either the Joint and Survivor or Contingent Annuitant benefit, no changes can be made to those elections.

Also, if you return and earn additional service, your pension benefit may be actuarially reduced for the pension monies previously received. However, you will never receive less than the amount you originally retired under.

Remember, retirement is a commitment that shouldn't be taken lightly. Be sure you are well informed before making this decision.

Still have questions? Don't hesitate to call the Fund Office's Pension Department at 804-282-3131 or toll free at 800-852-0806 for more specific information regarding your pension benefits.

DOMA:

How Does it Impact the Pension Fund

In response to the U.S. Supreme Court's overturn of the Defense of Marriage Act (DOMA), the Pension Plan now recognizes participant spouses of same-sex marriages as beneficiaries of Joint and Survivor, Pop-Up and Pre-retirement Survivor benefits. The marriage must have occurred in a state where same-sex marriage is legal. The current list includes:

California	New Hampshire
Connecticut	New Jersey
Delaware	New Mexico
District of Columbia	New York
Hawaii	Oregon
Illinois	Pennsylvania
Iowa	Rhode Island
Maine	Vermont
Maryland	Washington
Massachusetts	
Minnesota	

For more information regarding DOMA and how it affects your pension benefits, please contact the Fund Office.



Retiree Health Benefits Premium Schedule

As a reminder, the schedule below shows premiums for Retiree Health Benefits through July 2017.

Retiree Health Benefits Plan (ZR) Premium Schedule						
Premium Effective	Retired at Age 56 or Younger		Retired at Ages 57 to 61		Retired at Ages 62 to 64	
	Single	Family	Single	Family	Single	Family
July 1, 2014	\$485	\$585	\$430	\$530	\$330	\$430
July 1, 2015	\$530	\$630	\$470	\$570	\$360	\$460
July 1, 2016	\$580	\$680	\$520	\$620	\$390	\$490
July 1, 2017	\$630	\$730	\$560	\$660	\$430	\$530

Are You Prepared for an Emergency or a Natural Disaster?

Teamsters Joint Council No. 83 of Virginia
Health & Welfare and Pension Funds
8814 Fargo Road
Suite 200
Richmond, VA 23229

Most of us would admit that we are not prepared for an emergency or natural disaster. Fortunately, Red Cross offers mobile apps to help you be more prepared before, during and after such an event. These apps give you instant access to information you need when disaster strikes.

First Aid app - gives you access to the information you need to know in order to handle the most common first aid emergencies, including allergic reactions, asthma attacks, bleeding, burns, choking etc. This app contains videos, interactive quizzes, and step-by-step instruction to administer first aid.

Flood app - provides you with all the information you and your family need before, during and after a flood. It also allows you to notify others that you are safe.

Tornado app - provides you with information on how to get your family and home prepared for a tornado, as well as how to begin the recovery process after the tornado passes.

Earthquake app - sends you alerts and notifications when an earthquake occurs. This app also allows you to notify others that you are safe.

Wildfire app - provides you with news and updates regarding wildfires in your area and allows you to notify others that you are safe.

Hurricane app - allows you to monitor conditions in your area or throughout the storm track, as well as notify others that you are safe.

Shelter app - provides you with information on what shelters are open in your area, as well as their current population.

Pet First Aid app - provides veterinary advice to help care for your pets.

These apps are available for iPhone and Android devices. You can download the apps by searching "American Red Cross" in the iTunes app store or Google Play.

You can also call **REDCROSS from your mobile phone and they will send you a link to download the apps.



FUND OFFICE CONTACT INFORMATION

To contact the Fund Office by phone:
(804) 282-3131 - local
800-852-0806 - toll free

To contact the Fund Office by fax:
(804) 288-3530

Visit us on the web at :
www.tjc83funds.org

E-mail questions and comments to:
yourfund@tjc83funds.net

E-mail documents and forms to:
documents@tjc83funds.net

