

New Eligibility System for the Carpenters Health and Security Plan

Introduction

Effective October 1, 2009, the Carpenters Health and Security Plan of Western Washington (the Employee Health Plan) will begin using a "dollar bank" system to determine current and future eligibility for participants in this plan. The existing "hour bank" system (275 hours in a three-month period) will be phased out on the last day of September 2009. The transition to the new eligibility system should be seamless for most of you because the dollar bank system was designed to provide current and future eligibility that closely tracks with the existing hour bank system. Here is how the new eligibility system works.

Dollar Bank Account

Under the new dollar bank system, each of you will have your own dollar bank account. Employer contributions made on your behalf to the Employee Health Plan will be added to this account. Your current and future eligibility will be calculated based on the balance of your dollar bank account.

Employer Contributions

Employers contribute to the Employee Health Plan for each compensable hour. The amount credited to your dollar bank equals the hourly contribution received less the hourly amount credited to the Retiree Health Plan Reserve Fund. The June 1, 2009 Area Master Agreement calls for an employer contribution of \$6.91 per hour to the Employee Health Plan. Currently, \$.60 per hour funds the Retiree Health Plan Reserve Fund leaving \$6.31 per hour for your dollar bank account.

\$6.91	hourly contribution
- \$.60	retiree health reserve
= \$6.31	dollar bank

If, for example, you work 120 hours in October 2009 for an employer who is signatory to the Area Master Agreement, \$829.20 is submitted to the Employee Health Plan on your behalf. Of that amount, \$757.20 is contributed to your dollar bank account.

\$6.91	hourly contribution
x 120	hours
= \$829.20	total contribution
\$6.31 x 120	hourly contribution hours
= \$757.20	dollar bank contribution

Remember, if you work under a different collective bargaining agreement, the hourly rate may be less than \$6.91 per hour.

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Monthly Dollar Bank Deduction

Effective October 1, 2009, the cost for one month of eligibility is \$725. The monthly deduction from your dollar bank account is made the month before the month of eligibility. For example, the deduction for November 2009 eligibility is made no later than October 31, 2009.

Maximum Dollar Bank Amount

Effective October 1, 2009, the maximum dollar amount you can have in your dollar bank account is \$5,800. This amount currently provides eight months of future eligibility.

The monthly dollar bank deduction and the maximum dollar bank balance is subject to change by the Board of Trustees and will typically be reviewed on an annual basis.

Key Point About the Transition

Any future eligibility you currently have under the hour bank system will be preserved when you transition to the new dollar bank system. To do this, your dollar bank account will receive \$725 for each month of future eligibility you have on September 30, 2009. For example, if in September 2009 you have five months of future eligibility (October 2009 through February 2010), \$3,625 will be added to your dollar bank account on September 30, 2009.

\$725 per month x 5 months = \$3,625

This \$3,625 will "buy" you five months of eligibility through February 2010. If you currently have more than eight months of future eligibility under the hour bank system you will be allowed to keep that balance as part of the transition to the new system. If, in the future, your dollar bank account goes below the maximum (\$5,800), then you will become subject to the \$5,800 maximum going forward.

Initial Eligibility

If you are new to the Employee Health Plan or you have not had coverage under the dollar bank system for 12 months or more, you earn initial eligibility as follows. This process is illustrated in the chart below:

- The hourly contributions from your employer(s) are added to your dollar bank account.
- At the current monthly deduction rate of \$725, you must have \$2,175 or more in your dollar bank account within a three-month period for initial eligibility (\$725 per month x 3 months = \$2,175) with at least \$1.00 of contributions earned in the first month.
- The fourth month is the "lag month." This is the time required for your employer to send updated contribution records to the plan and the time required for the plan to process those records.

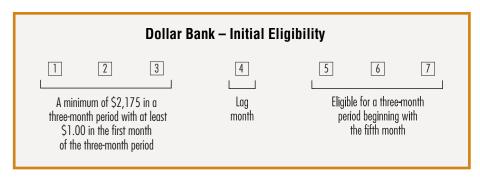
your dollar bank will accumulate \$2,176.95.

115 hours x \$6.31 per hour = \$2,176.95

Because your dollar bank has at least \$2,175, you will be eligible for a three-month period beginning on the first day of February 2010. January 2010 is the lag month. After your three months of eligibility, you must have \$725 in your dollar bank by April 30, 2010 to be eligible for the fourth month (May 2010), and so on for future months.

When Coverage Ends

Your eligibility ends on the first day of any month your dollar bank account is less than \$725. For example, if you have less than \$725 on October 31, 2009, you will not have eligibility in November 2009. If you lose eligibility under the dollar bank system, you may still qualify for Self Contribution Coverage or COBRA Continuation Coverage



■ You are then eligible for benefits for a three-month period beginning on the first day of the fifth month.

For example, if you work 115 hours per month in October, November and December 2009 and the contribution rate to your dollar bank is \$6.31 per hour,

as you did under the hour bank system. The Enrollment/ Eligibility Department will automatically provide you with the appropriate notification and forms. If you are called to active duty in the military you may elect to freeze your dollar bank account under existing USERRA guidelines.

Reinstatement of Eligibility

If your eligibility ends because you have less than \$725 in your dollar bank account, then the balance in your account, if any, is carried for 12 months. If, during the next 12 months you work and add dollars to your account, your eligibility will be reinstated on the first day of the second month after your dollar bank account has the amount necessary for one month or more of eligibility at the current dollar bank deduction rate.

Forfeiture of Balances of Less Than the Monthly Dollar Bank Deduction Bate

If you do not become eligible for benefits under the dollar bank system for 12 consecutive months, any remaining balance in your dollar bank will be forfeited and you become subject to the "Initial Eligibility" provisions described above.

Retiree Health Plan

The dollar bank system does not affect the eligibility requirements for the Retiree Health Plan. You still need to qualify for the Carpenters Retirement Plan of Western Washington and have 7,500 hours in the Carpenters Health and Security Plan in the 120 months immediately preceding your retirement under the Carpenters Retirement Plan.

Update On Wellness and Disease Management Initiatives

Goals and Objectives

The Board of Trustees of the Carpenters Health and Security Plan of Western Washington introduced two important initiatives in 2006 and 2007. The first initiative – the Wellness Program – focused on health awareness to restore or maintain healthy habits. The second initiative – the Disease Management Program – focused on assisting with chronic health conditions.

Wellness Program Goal

Provide you and your family with accurate, expert medical information you can use to increase your understanding of your health issues, treatment options and treatment alternatives. Provide tools and resources which you and your family can use to maintain or even improve your health.

Disease Management Program Goal

Provide you and your family with easy access to programs and professionals that provide guidance and support in managing chronic medical conditions.

Bring Resources to Plan Participants

To pursue these goals, the Board of Trustees contracted with Mayo Clinic to provide wellness information and resources, and with Nurtur (formerly Cardium Health) to provide disease management services. These resources are available to participants, spouses and domestic partners who are not covered by Medicare.

Before we review the Mayo Clinic and Nurtur resources in detail, let's review the four major objectives of these two programs.

Wellness and Disease Management Program Objectives

One – Provide accurate medical information

- Help you and your family assess your health status
- Provide you and your family with information about specific conditions and treatment options
- Help you and your family understand prescription drugs and therapy alternatives
- Provide tools and assistance to help you and your family change and improve your health status

Two – Promote preventive care

- Encourage preventive care and diagnostic testing that is appropriate for you and your family
- Remind you and your family about the plan's medical, dental and vision preventive care benefits

Three – Help you and your family become better health care consumers

- Make the best use of the health care system resources
- Understand plan benefits and how best to use the plan booklet
- Knowing what treatment options are available
- Understanding what questions to ask your doctor regarding treatment choices

Four – Provide support and information for you and your family if you have one or more chronic conditions

- Support the physician/patient relationship and plan for care
- Help you and your family understand evidence based, best practices for the treatment of your condition
- Inform you and your family about self-care actions which can sustain and improve your health status

Reasoning Behind Wellness and Disease Management Programs

There are two compelling reasons for undertaking these initiatives. First and foremost is quality of care. It is well understood that the highest quality of care is also the most cost effective. By highest quality we mean getting the right treatment by the right provider at the right time. By increasing your health awareness, you can greatly improve your chance of receiving high quality health care. This is better for you and your family

and, over the long term, better for the health plan's bottom line.

The second reason is both practical and financial. The Carpenters Health and Security Plan spends 75 cents of every medical expense dollar for the care of chronic conditions. These conditions include coronary artery disease, heart failure, asthma and pulmonary disease, diabetes, and chronic back pain. The disease management program reaches out to participants and their families who face these conditions and offers counseling, coaching and other assistance to those who are willing to enroll in the program. Chronic conditions can be stressful to the patient and the patient's family. Helping families navigate the complex health care system and have better outcomes is good for them and can help manage plan costs over time.

As you read more about Mayo Clinic and Nurtur, consider the short- and long-term benefits of a healthier carpenter population. Explore these resources and use them.

Wellness and Lifestyle Support Program

The Board of Trustees hired Mayo Clinic to deliver information and wellness support services. The objective behind Mayo Clinic programs is to provide expert medical information over the internet, telephone, through newsletters, and other printed media. As consumers of health care, you can significantly increase the

quality of your health care services by better understanding your medical conditions and treatment alternatives.

First let's review the array of wellness program resources available through Mayo Clinic. Mayo Clinic is a not-for-profit, integrated practice of medicine with over 100 years of service. It

integrates clinical practice with extensive research and education programs.

EmbodyHealth Guide to Self Care

In 2006 you were sent this comprehensive medical reference book. It helps to answer common everyday health questions as well as help identify health issues before they become more serious. It represents the collective knowledge of some 2,000 Mayo Clinic physicians and researchers in dozens of medical specialties.

Ask Mayo Clinic

Ask Mayo Clinic is a popular 24 hour nurse line. Mayo Clinic nurses will answer health questions, help you determine appropriate levels of care, and guide you to available health resources. The nurse line is staffed by experienced registered nurses (RNs) that draw on the resources of Mayo Clinic. This is a multilingual service. The 24 hour nurse line is at 1-800-903-1836. Please see testimonials about this service from participants and spouses on pages 8-9.

Mayo Clinic EmbodyHealth Newsletter

You receive a monthly newsletter discussing current health topics, and health and wellness information. This newsletter is a great resource for making small changes in your lifestyle that can produce big changes in your health. Watch for news items specific to the Carpenters Health and Security Plan.

Mayo Clinic EmbodyHealth Website

Mayo Clinic provides a customized website for you and your family. Go to www. CarpentersHealth.org and check it out. On this site you can research a health topic, issue or condition in as much or in as little detail as you like. This is a great source for just about every health topic imaginable.

Mayo Clinic Health Assessment

Many of you have completed the online health assessment. The health assessment is a tool which helps you measure and better understand your overall health risk profile and take positive steps to improve your health status. A paper health assessment has also been available each year for those without access to the internet. The paper assessment is not provided by Mayo Clinic.

Mayo Clinic Lifestyle Coaching

Trained Mayo Clinic counselors work one-on-one with you and your family over the phone to address behavior changes related to exercise, nutrition, weight management, and stress management. Use these resources if you face challenges in any of these lifestyle choices and are looking for change.

Quit For Life Tobacco Cessation Program

1-866-QUIT-4-LIFE (866-784-8454). This program has helped hundreds of carpenters and their spouses quite tobacco. Use it when you are ready to quit. If you have tried to quit and failed, please use it again. Just call the number and identify yourself as a participant in the Carpenters Health and Security Plan. The Quit For Life Program is a separate resource introduced to the plan in November 1999.

Disease Management Program

Help Managing Chronic Medical Conditions

In medicine, a chronic disease is a disease that is long lasting or recurrent. Nearly one in two Americans has a chronic medical condition of one kind or another. Most of these people are not disabled, as their medical conditions do not impair normal activities. But if conditions worsen over time, chronic diseases can become life threatening.

The Carpenters Health and Security Plan has partnered with Nurtur Health, Inc. (Nurtur), a national health and disease management company, to provide disease management programs for you and covered family members if you have heart disease, congestive heart failure, diabetes, lower back pain, asthma, and chronic obstructive pulmonary disease (COPD).

Why Nurtur?

As you may know, 75 percent of all health care dollars are spent for the treatment and care of individuals with chronic disease conditions. Making even modest improvements to the health status of our members with these conditions will help to lower overall medical costs. More importantly, these services should be viewed as a resource for plan members to use in managing their conditions and improving their lives.

Who Is Nurtur?

Nurtur is a leading provider of health improvement and disease management programs. The company's core focus is on providing medical support and educational interventions to individuals with chronic conditions. The Nurtur staff includes nurses, dieticians, diabetes educators, exercise physiologists, and other health professionals. They are trained to provide you with information, guidance, and support that is specifically tailored to your needs.

What Are Disease Management Programs?

Disease management programs are designed to improve lives. These phone-based programs provide you with the tools and support you need to improve your health, manage your chronic health conditions and live a healthier life. Participation in these programs is free, voluntary and completely private. The program works in partnership with your doctor to offer the right guidance and level of support.

How Do Disease Management Programs Work?

Nurtur works with Carpenters Health and Security Plan participants and their spouses to offer guidance and support in managing chronic conditions. All enrolled participants are provided with a personal health coach who calls once or twice a month at a time and a place that is both private and convenient. Health coaches take time to talk with you, answer your questions, and offer support. All disease management programs from Nurtur are conducted over the telephone and are completely confidential. No personal health information is shared with the Carpenters Health and Security Plan.

Personal health coaches understand that each person is unique and will work with you one-on-one to guide you to better manage your condition and make better informed decisions. In addition, you may call your health coach toll free at any time.

How Does Nurtur Know If I Am Eligible For A Chronic Condition Medical Program?

In compliance with the HIPAA personal privacy act, your health plan provides Nurtur with medical and pharmacy claims data to help identify individuals who could benefit from disease management programs. Any information shared with Nurtur is held strictly confidential. Phone conservations between you and a health coach may

be monitored by a supervisor for training purposes but no one else is allowed to listen. Nurtur is required by federal law to protect your personal health and medical information against disclosure to others and to use your personal health information only for counseling or administrative purposes.

What Happens Next?

Nurtur analyzes medical claims and pharmacy data to determine who may be eligible who are able to participate in disease management programs. If you are eligible, you will first receive a written notice followed by an outreach phone call. The purpose of the initial call is to introduce you to the program and evaluate your eligibility to participate. Recall that participation is free and is voluntary. If you decide to enroll, you'll be contacted by a health coach with expertise in your areas of concern. In addition, your primary attending physician will be notified that you are participating in the program.

Use the Program

If you enroll in the program, you will reap rewards for participating. Individuals lose weight successfully, stop smoking, lower their cholesterol, and get their blood pressure to a healthy level. They have stronger relationships with their doctors. They take medications appropriately, and are better able to manage the stress of every day life. It's the kind of information and help (coaching) that may not be available from your busy clinician.

Customized Programs

The disease management programs recognize that everyone's health status is different. Perhaps you just need a little help in lowering your cholesterol or blood pressure. Your health coach will work with you to establish realistic, measurable goals and help you work toward them. You will also get information about the

medications you may be taking. If you're fully in control of your condition, you may benefit from additional educational materials. Individuals with higher health risks who enroll in the plan will be assigned a health coach with the ability to coordinate a range of Nurtur resources as they are needed. Here are more details about these programs.

Coronary Artery Disease Program, Congestive Heart Failure

Program objectives for these conditions include reducing total cholesterol, LDL cholesterol and triglycerides and increasing HDL cholesterol. The program tools used to address these objectives include disease specific education, help with medication compliance, setting

Why Use A Health Coach?

Getting Better Medical Information

Have you ever left your doctor's office only to forget the advice he or she gave you? Or have you ever left your doctor's office and thought, "Oh! I forgot to ask my doctor about..."? Or did your doctor send you your lab report and, even after you deciphered the handwriting, you still weren't quite sure what the numbers meant?

A lot of us have had these experiences – but why? The simple answer is that when we visit the doctor we are likely to feel nervous, worried, rushed, or just too tired or sick to remember what was said or all the questions we wanted to ask. This is one of the reasons why the Carpenters Health and Security Plan has teamed up with Nurtur (formerly Cardium Health) to offer you a personal health coaching program.

Nurtur's coaching programs are offered to Trust members diagnosed with pre-diabetes, diabetes, coronary artery disease, heart failure, asthma, and/or back pain. Your Health Coach may be a nurse, exercise physiologist, respiratory therapist, dietitian or diabetes educator. Whatever their expertise, your Coach will be someone you can turn to for support and guidance when you have questions or concerns about your condition or your medications.

You may receive a letter from Nurtur inviting you to contact them. Nurtur will also call anyone who may be eligible for one of the coaching programs. A Nurtur coach will leave a message with a toll-free number so that you can return the call at your convenience. When you speak with a Nurtur coach he or she will ask you some questions about your condition and talk with you about your concerns and your goals. Your coach will be able to work with you on a regular basis or you can call in when you have a question.

This is a completely private and confidential program protected by the Federal HIPAA Privacy laws. The Health and Security Plan will never know who is participating or why.

Call Nurtur toll-free at 1-877-676-7700 to determine whether you are eligible to take part in a health coaching program.

cholesterol and blood pressure goals, modifying diet and managing stress. The Quit For Life program is also available to help eliminate tobacco.

Diabetes Program

Objectives include, lowering hemoglobin levels, blood pressure and cholesterol. Program tools include education in self-management of blood glucose levels, compliance with physician plans of care, nutrition education, cholesterol and blood pressure targeting.

Asthma and Chronic Obstructive Pulmonary Disease (COPD)

Program objectives are to reduce the use of rescue inhalers, reduce both daytime and nighttime symptoms, and increase compliance with prescribed maintenance medications. Tools include diagnostic testing, education, peak flow meter use, medication management, and the use of breathing exercises.

Back Pain Program

Objectives include improving body mechanics, reducing pain episodes, and reducing pain medicine usage. Tools include symptom specific education, stress management, relaxation techniques, proper instruction for core stabilizer muscles, goal setting, and recovery planning.

The goal of these programs is to provide the information and skills for you and your family to better care for yourselves.

An objective of every program discussed above is to reduce the number of hospitalizations and emergency room visits over time. The Board of Trustees will be closely monitoring hospital and emergency room activity as one measure of overall program

success. Other measurable outcomes include lower cholesterol and blood pressure levels across the plan population and various clinical measures unique to each condition. The Board of Trustees will be analyzing the changes in hospital utilization and clinical measures over time. It is expected that the benefits of these programs, in terms of lower long-term medical costs, will outweigh the cost of providing these additional resources. This is good for all plan members from both the potential of improved health status and from a total health care cost standpoint.

If you get a letter and a phone call from Nutur, please seriously consider the benefits of these resources. If you have been contacted and declined to participate, please think again about enrolling.

Wellness and Disease Management Programs At Work

This issue of *Carpenters Care* is about bringing you health care resources, through Mayo Clinic with its 24-hour nurse line and website, and the health education and health coaching services provided by Nurtur. Here are some examples of how plan participants have benefited from these resources.

Ask Mayo Clinic

One participant who was six and a half months pregnant called about her heart and breathing issues. The Ask Mayo Clinic nurse told her to call 911. When she arrived at the emergency room they found that she was experiencing atrial fibrillation. When she called to thank Mayo Clinic she said the nurse saved her life. She also said she won't be taking the nurse line number off her refrigerator any time soon."



- A participant was camping with his child who fell and hit her head. He could not get to an emergency room so he called the 24-hour nurse line. He put his cell phone on speaker so the nurse could talk directly to his 12 year old about her injury. He says the nurse calmed his daughter (and him!) by talking about the symptoms and helping him treat his daughter's injury.
- A participant experiencing abdominal pain called the 24-hour nurse line. The nurse concluded possible appendicitis and directed him to the ER. He was admitted and treated for appendicitis. Our participant was a few hours away from boarding a flight to Europe. While his vacation was delayed, he was grateful to have avoided an even greater emergency.

While most of these examples are dramatic, most nurse line calls don't result in emergency visits. They do help callers with their concerns and help them take the appropriate steps.

Nurtur

- A 57 year old male with a history of low back pain. He states, "I got the exercises and noticed that I have a lot better circulation, they're good." He also stated that he is working with his tool belt again and feels a lot better physically. He is now working four tens with an hour and 15 minute commute. He feels a "bit stiff" when he gets to the worksite, but feels better after doing his assigned stretches.
- A 51 year old male with a history of two cardiac stents in 2003 and a recent episode of atrial fibrillation requiring hospitalization. He had multiple tests including cardiac catheters, chemical stress and EP (electrophysiology) studies. He has not yet received his results and is concerned, but doesn't want to bother his cardiologist. He says he finds the program helpful because it helps answer questions and helps him understand what is going on with his own health and deal with health anxieties.
- A 57 year old female with a history of diabetes and low back pain. Since working with an exercise physiologist, she said that "the most important thing to me is to move again." She said that she "went to a wedding last weekend and danced for the first time in a long time." She also walked to lunch with coworkers and thought is was "wonderful." Her doctor is pleased with her progress, including her correct use of her insulin pump and her use of a pedometer.

Nurtur's coaching programs are offered to plan participants diagnosed with pre-diabetes, diabetes, coronary artery disease, heart failure, asthma, and/or back pain. Your Health Coach may be a nurse, exercise physiologist, respiratory therapist, dietitian or diabetes educator. Whatever their expertise, your Coach will be someone you can turn to for support and guidance when you have questions or concerns about your condition or your medications. This program is private and completely confidential.

Tools For Becoming A Wise Consumer

Considering Robotic-Assisted Surgery?

Robotic-assisted surgery is, as the name suggests, surgery using robots. The robotic surgical equipment consists of three components: a console for the surgeon, a patient-side robotic cart with four arms manipulated by the surgeon (one to control the camera and three to manipulate instruments), and a high definition 3-D vision system.

The surgical system has been approved by the FDA for a variety of general surgical procedures, including hysterectomies and prostate cancer surgeries. Some area hospitals have purchased these robotic systems (current price approximately \$1.75 million) and are promoting their use. Some of the marketed benefits are smaller incisions, greater precision, and quicker healing time. The procedures are called minimally-invasive.

The Carpenters Health and Security Plan has received claims for robotic procedures, most often for hysterectomies, but also for prostate and other surgeries. The use of robotics has typically added from \$10,000 to \$40,000 to the cost of each procedure compared to other surgical approaches. In the case of hysterectomy (and other surgeries), there

already exists a successful, minimally-invasive surgical technique called laparoscopy. Laparoscopy is performed through small incisions by hollow tubes which transport imaging or surgical devices. For the majority of operations where either technique can be used, laparoscopic procedures are appropriate. There may be some cases where small surgical sites or other complications warrant the use of robotics, but most often the additional charges associated with robotic surgery are not considered medically necessary. This means that you may be responsible for the difference in charges if robotic procedures were used where other approaches would be appropriate.

The Board of Trustees are by no means opposed to this new technology, but seek to promote its use only in the small percentage of cases where robotics provide an actual technical and medically necessary advantage over laparoscopy. If vour surgeon recommends a robotic-assisted procedure for you, please contact a Customer Service Representative at the Trust Office and ask for preauthorization of the surgery. The plan uses an outside independent review agency to determine the appropriateness of recommended surgical procedures.

Variations In Hospital Prices – What Can You Do?

Let's take a look at some recent charges from hospitals used by plan members to provide some routine day surgeries for their children. We look at two of the more common procedures for children.

The first is tonsil and adenoidectomy. This surgery, usually for children under twelve, is recommended for chronic sore throat and infections, and also when a child's breathing passage may be narrowed or partially blocked. The surgery is performed by an ear, nose and throat (ENT) specialist or otolaryngologist. The surgeon removes tonsil and adenoid tissue. It is an outpatient surgery not requiring an overnight stay in the hospital.

The second procedure is the insertion of drainage tubes in a child's ear (myringotomy tubes). The tubes are surgically placed into the eardrum by the ENT specialist. The tubes help drain fluid from the middle ear after an infection, and help prevent future infections. The procedure is most common for children from one to three years of age. This is also an outpatient procedure, not requiring an overnight stay.

The following charges were from hospitals within the First Choice Health Network used by the Carpenters Health and Security Plan and include the discounts the plan receives under its preferred provider contract with these institutions. The charges do not include the surgeon's bill or anesthesia.

Facility	Allowable Charge
Tonsils and Adenoids	
Tacoma General Allenmore	\$2,102.00
Auburn Outpatient Surgery Center	870.00
Valley Medical Center	1,768.00
Mary Bridge Children's Hospital	9,527.00
Valley General Hospital	4,543.00
Seattle Children's Hospital	2,334.00
Drainage Tubes In Ear	
Tacoma General Allenmore	\$2,102.00
Valley Medical Center	1,571.00
Mary Bridge Childrens Hospital	7,921.00
Valley General Hospital	1,227.00
Seattle Childrens Hospital	1,268.00
NW Nasal Sinus Surgery Center	315.00
Cascade Medical Surgery Center	1,092.00

As you can see, there is a wide variation in charges from these facilities for these common procedures. Since you may be paying a portion of the bill along with the plan benefit, it makes sense to inquire about cost. With these two procedures, you are usually referred to an ENT specialist by your primary care physician. You can ask the ENT surgeon if he or she has hospital privileges at more than one facility and select a lower cost provider if your surgeon agrees.

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Carpenters 🌘 Care

Emergency Room Utilization Causing Concerns

Since the beginning of the year, 95 members of the plan (including spouses and children) have been treated in the emergency room three or more times. 17 of these members have been treated five or more times. A variety of conditions were treated with the most common for adults being chronic pain (back, abdomen and headache) and for children, asthma and other respiratory conditions.

The plan's Medical Consultant feels strongly that in addition to

the high cost of care, ongoing use of the emergency room for a condition that should be managed by a primary care doctor or other specialist may be unsafe, potentially harmful and medically inappropriate.

There may be several reasons why emergency room use happens. It can be a real emergency. Often, however, members may not have a primary care physician to turn to with medical problems.

If you have questions about immediate treatment you can call the 24-hour Ask Mayo Clinic Nurseline at 1-800-903-1836. This is a multi lingual service that

can help you decide if emergency care is needed.

If you need help in finding a physician in your area, you can get help at the website for the First Choice Health Network. First Choice is our preferred provider network. The internet address is www.fchn.com. If you don't have internet access, you can call a Customer Service Representative at the Trust Office and get a list of physicians in your area.