



Quit For Life® Program Offered to PEBTF Members

The PEBTF Trustees are pleased to offer the **Quit For Life® Program** brought to you by the American Cancer Society® as part of the PEBTF's Get Healthy initiative.

The Quit for Life Program is provided at no cost to you and your covered dependents (age 19 and older) to help you become tobacco free. It is for anyone who would like to quit using tobacco, regardless of the product – cigarettes, cigar or smokeless tobacco.

Quitting is hard because tobacco use is more than just a physical addiction; it's psychological and behavioral, too. Maybe you associate tobacco use with your

morning cup of coffee. Medications, like gum and the patch might help fight the cravings but for most people that's not enough. Wouldn't it be helpful if you could learn new skills so you could think differently about tobacco?

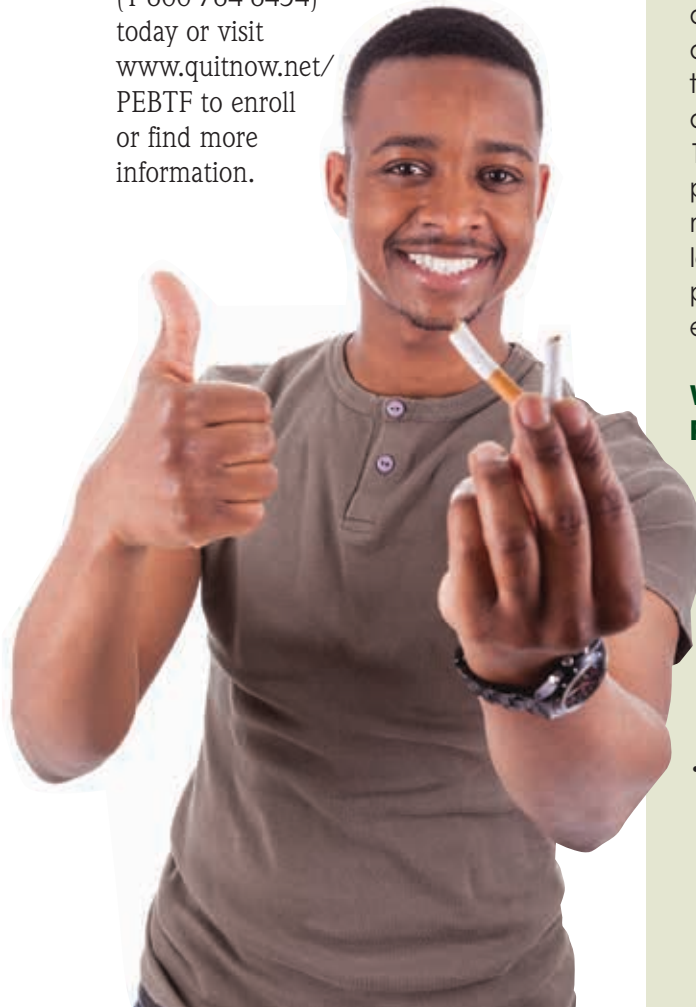
This is where the Quit for Life Program can help. It is designed to help you, through online tools, a printed workbook and toll-free access to expert Quit Coaches®, to make good decisions about nicotine replacement therapy, develop new thinking skills and learn how to act differently in situations that used to involve tobacco.

Call 1-866-QUIT-4-LIFE (1-866-784-8454) today or visit www.quitnow.net/PEBTF to enroll or find more information.



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Q&A

What Makes The Quit for Life Program Right for You?

What is the Quit for Life Program?

The Quit for Life Program is brought to you by the American Cancer Society® and Alere Wellbeing. The two organizations have 35 years of combined experience in tobacco cessation coaching and have helped more than 1 million tobacco users. The program integrates free medication, web-based learning and confidential phone-based support from expert Quit Coaches®.

What does the Quit for Life Program include?

When you join the program, they will help you create an easy-to-follow Quitting Plan that shows you how to get ready, take action and live the rest of your life as a nonsmoker. The program may include:

- Access to Web Coach®, a private, online community where you can complete activities, watch videos, track your progress and

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Quit for Life[®] Program

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join in discussions with others in the program.

- An easy-to-use printed workbook that you can reference in any situation to help stick with your Quitting Plan.
- Recommendations on type, dose and duration of nicotine replacement if appropriate (including patch or gum)
- Free nicotine replacement therapy (patch or gum) mailed directly to your home if appropriate.
- Unlimited toll-free access to Quit Coaches, who offer as much or as little support as you need.
- Access to Text2QuitSM, a text message feature enabling a participant to connect with a Quit Coach, interact with Web Coach, use medications correctly, manage urges and avoid relapse – all from a supported mobile phone.

Who is eligible for the program?

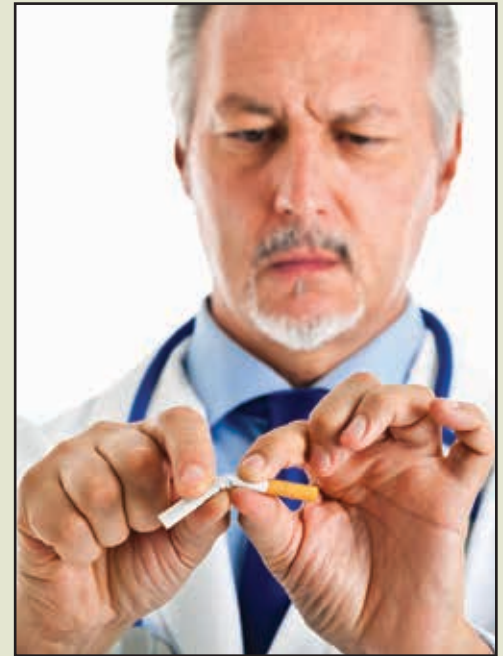
All employees and dependents (age 19 and older) who are enrolled in PEBTF benefits.

How much does it cost to participate in the Quit for Life Program?

The Trustees are committed to helping you become free of tobacco so we are offering this program at no cost. Even the cost of nicotine patches and gums is fully covered.

Why is the PEBTF subsidizing this program?

We believe that quitting tobacco is an important step to improving one's health. The health benefits of quitting tobacco start almost immediately and



continue for a lifetime. On average, people who don't use tobacco have lower medical expenses than those who do. Our members will enjoy better health, live longer and save money on health care.

Is there evidence that the Quit for Life Program works?

The American Cancer Society and Alere Wellbeing have 35 years of combined experience in tobacco cessation coaching and have helped more than 1 million tobacco users.

The program was first validated in 1989 through a randomized clinical trial funded by the National Cancer Institute and the University of North Carolina. The study demonstrated the combination of self-help materials and telephone counseling boosted quit rates by 50 percent. The program has continued to conduct large, randomized trials to prove its methods and effectiveness over the years and also has received six consecutive awards from America's Health Insurance Plans for achievements in tobacco control initiatives.

Is participation in the Quit for Life Program confidential?

Under federal law, all employees of Alere Wellbeing and the American Cancer Society are required to protect the confidentiality of participant's personal health information. Your participation in the program will not be shared with the commonwealth.

How do I enroll in the Quit for Life Program?

Enrollment is easy – just call 1-866-QUIT-4-LIFE (1-866-784-8454) to get started. A registration specialist will verify eligibility to enroll and transfer you to a Quit Coach to get started.

Can I enroll again if I start using tobacco again?

Yes. We recognize that it often takes several attempts to quit tobacco for good, and that participants may start using tobacco during the program. The **Quit for Life Program** was designed to support participants through all phases of quitting, including relapse.

I'm not quite ready to quit. Will information be available in the future?

Information on the **Quit for Life Program** will be available on the PEBTF website. Visit www.pebtf.org and click on the Get Healthy box for more information and a link to the Quit for Life website and the other wellness programs offered by our Get Healthy vendor, OptumHealth. Also, we'll include articles in future newsletters to serve as reminders about the program.

Dangers of Secondhand Smoke

Here is another reason to quit smoking. Not only will you benefit by quitting smoking, but your family will benefit as well. Smoke from the burning end of cigarettes, pipes or cigars and smoke exhaled from smokers contains more than 4,000 substances, more than 40 of which are known to cause cancer in humans and animals. It is rated as a Group A carcinogen by the EPA (Group A carcinogens also include radon and asbestos).

According to the American Cancer Society, second hand smoke causes about 3,400 lung cancer deaths and about 46,000 deaths from heart disease each year in healthy nonsmokers who live with smokers. Nonsmokers living in the household are also more likely to get asthma and other respiratory problems, eye irritation and headaches.

Source: UnitedHealthcare

Wellness Word Search

Y M K E F G O M B G W N S F V
K M F H X O R A Q P E O T L E
G R W I U E L N R Z T I R E K
S N O I T A R E D O M T E X F
G E C I N N V C A F L A N I A
L V L C V E E C I Y O V G B E
Y A E B N A T S H S S I T I R
G D I T A I H T S H E T H L O
R H I C V T L E A W I O F I B
E O E I O A E P B B R M I T I
N T T A E S P G E V O M Q Y C
E Y P H R Y K P E S L E E P B
N U T R I T I O N V A L M S Z
J E L A C I S Y H P C B D K G
G W A L K I N G S T I U R F H

ACTIVITY	EXERCISE	HEART	PREVENTION
AEROBIC	FITNESS	MODERATION	SLEEP
BALANCE	FLEXIBILITY	MOTIVATION	SOCIAL
BEHAVIOR	FRUITS	MOVE	STRENGTH
CALORIES	GET HEALTHY	NUTRITION	VEGETABLES
ENERGY	HAPPY	PHYSICAL	WALKING



Get Healthy Annual Health Assessment

April 1 to April 22, 2013

In late March, you received a postcard about the annual Health Assessment period. This is another reminder that it is now time to take the annual Health Assessment.

You and your spouse/domestic partner must take a Health Assessment every year to be enrolled in the Get Healthy Program. You can save half of your health care contribution by participating in the Get Healthy Program.

Don't delay. It's easy to complete the Health Assessment.

1. Go to www.pebtf.org
2. Select the Get Healthy logo on the right side of the home page
3. Select the "Take the Health Assessment" button
4. Follow the instructions

If you have any questions or need help completing the Health Assessment, call our Get Healthy unit at 1-800-522-7279, Active member option 4, Get Healthy option 1.



Hidden Causes of Weight Gain

Struggling to maintain your weight or take off pounds?

One or more of these things might be getting in your "weigh."

Too little sleep. Between-meal snacking can be a high-calorie substitute for what you *really* need – a nap.

Snacking to beat stress. Save calories by addressing the causes of the stress, without food.

Lack of consistency. Eating wisely on weekdays but not on weekends can mean a pound or two of weight gain every month.

Confusing "heart healthy" or "fat-free" with "low calorie." Food labels can be confusing. Many foods that are good for you are not low in calories.

Portion distortion. Is that *one* serving of cereal in your bowl – or *three*? Studies show that most people greatly underestimate how much they eat.

Missing meals. This makes you likely to overeat at the next meal.

No exercise. Skipping one 20-minute walk each day can add 10 pounds in a year.

Overestimating calories burned by exercise. It takes just a few minutes to eat 500 calories, but nearly two hours of exercise for most people to burn it off.

Medications. Some medications can lower the body's metabolic rate and stimulate hunger. If you've started a new medication and gained four pounds or more in a month, ask your doctor for advice.

Undiagnosed mood disorders or thyroid problems. Both can result in weight gain.

A high blood insulin level. Your doctor can check for this. It can be associated with weight gain around your middle and other health issues.

Source: Madelyn Fernstrom, PhD, CNS; Senior Advisor–Health Management, UPMC Health Plan, and author of the book *The Real You Diet*, ©2010

Your Benefit Questions Answered

Do you have a question about your PEBTF benefits that you would like to appear in the newsletter? Submit your question to Communications@pebtf.org, mail it to Communications, PEBTF, 150 S. 43rd Street, Harrisburg, PA 17111-5700 or fax it to Communications, 717-561-1696. Please include your full name, address, and daytime phone number. Only your first name will appear in print. If the PEBTF publishes your question in a future newsletter or in the FAQ section of the PEBTF website, you will receive a pedometer to help you walk your way to better health.



You included an article on preventive benefits in the Winter 2013 newsletter that stated preventive colonoscopies are covered every 10 years. I had a polyp removed and was advised to have my next colonoscopy in five years. Will this colonoscopy be covered by my plan? — Gail

A colonoscopy with removal of polyp does not fall under the 'routine' benefits. The claim would be processed as medical because the doctor found and removed a polyp. The 'medical' colonoscopy with polyp removal does not count toward the once in 10-year accumulation. Anyone with a polyp removal would be eligible for another routine colonoscopy in five years.

The 10-year limit is for routine colonoscopies. If you are found to be at high-risk, colonoscopies may be done more frequently as recommended by your doctor.

Smart Snacks

Snacking is part of a healthy diet, especially if it is more than four hours between meals. Here are some smart options that won't add a lot of extra calories.

100 Calories

- 1 hard-cooked egg with half a slice of toasted wheat bread
- ½ cup ice milk or sherbet
- 1 large graham cracker with 1½ tsp peanut butter
- ½ cup wheat-flake cereal with ½ cup non-fat milk
- 1 small whole-wheat pita with 1 Tbsp hummus
- 1 slice whole-wheat bread with 1 oz. sliced turkey breast and mustard
- ½ cup 1% low fat cottage cheese with 1 cup cherry tomatoes
- 1 cup baby carrots, celery and bell peppers with 2 Tbsp light dressing
- 1 small apple with 1½ tsp peanut butter

200 Calories

- 16 oz. non-fat fruit yogurt mixed with 1 Tbsp raisins
- 1 slice whole-wheat bread with 1 Tbsp peanut butter and 1 tsp jelly
- 8" flour tortilla with 2 oz turkey, lettuce, tomato and balsamic vinegar
- 1 medium baked potato with ¼ cup 1% low fat cottage cheese
- ¼ cup dry roasted mixed nuts
- 8 reduced fat Triscuit crackers with 1 oz. reduced fat cheddar cheese
- ½ cup Raisin Bran with ½ cup skim milk
- 2 fig bars and medium apple
- ¼ cup hummus with 10 baby carrots and 1 whole red pepper



Source: www.everydayhealth.com

Coverage for Disabled Dependents

The PEBTF provides coverage for members' eligible dependents. Your child may remain on PEBTF benefits until age 19. Also, you may continue to cover your child to age 26 if the child is not eligible for coverage under another employer-sponsored health plan (other than through a parent).

Coverage is provided for disabled dependents. Your disabled dependent child age 26 and older may remain on PEBTF benefits as long as he or she meets the following criteria:

- The child must be dependent on the employee or his or her spouse/domestic partner for more than 50% support.
- The disability must have occurred prior to the age of 26.

- The unmarried child was the employee's or his or her spouse/domestic partner's dependent prior to the age of 26.
- The disability must be total and permanent, as defined by the PEBTF.
- The child is claimed on the employee's or his or her spouse/domestic partner's federal income tax return.

A disabled adult child will not automatically be excluded from coverage if he or she lives outside the employee's home, but the child's living situation and its ramifications will be taken into account in determining whether the child meets the support requirements. For example, a disabled

adult child who lives in a group home or other facility and whose care and expenses are subsidized significantly by the government may no longer be deemed to receive more than half of his or her support from an employee or his or her spouse/domestic partner.

You will periodically have to recertify that your dependent meets the above criteria. It is your responsibility to notify the PEBTF of any event that would cause your dependent to no longer be eligible for coverage. You will be responsible for any claims incurred when your dependent was not eligible for benefits.

Annual Notification

Important Information About the Women's Health and Cancer Rights Act of 1998

On October 21, 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. The PEBTF health plans already complied with this important legislation requiring health plans to cover:

- Reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas

Coverage will be provided in a manner determined in consultation with the attending physician and the patient. Coverage may be subject to deductibles and coinsurance, as detailed in your specific plan option.

SEAP Summary of Benefits

Information about the State Employee Assistance Program (SEAP)

The Affordable Care Act requires that group health plans provide a Summary of Benefits and Coverage (SBC) to employees. Because SEAP is considered to be a group health plan, SEAP is required to provide an SBC.

The federal government has defined very strictly what information must be included in an SBC and how it must be formatted. That's why you'll notice that most of the categories of information do not apply to SEAP, and that many of the listed services are identified as "not covered."

You can view the SBC by going to www.pa.gov >Other State Agencies > Office of Administration > Human Resources > Workplace Support > State Employee Assistance Program > Tools and Resources and choosing "SEAP Summary of Benefits and Coverage." You can also receive a paper copy at no charge by contacting SEAP at 800.692.7459.

National Colorectal Cancer Awareness Month

March was National Colorectal Cancer Awareness Month. Even though the month of March is just behind us, the subject of colorectal cancer awareness is an important one no matter what time of the year. Colorectal cancer is the second leading cancer in the United States. Colon cancer affects all racial and ethnic groups and is most often found in people age 50 and older.

According to www.healthfinder.gov, a federal government website managed by the U.S. Department of Health and Human Services, if all men and women age 50 and older were screened regularly, six out of 10 deaths from colorectal cancer could be prevented.

People over age 50 are at highest risk for colorectal cancer, which is why preventive screenings are covered for PEBTF members age 50 and over. Other risk factors include smoking, having a family history of colorectal cancer and being African American.

To lower your risk of colon cancer:

- Maintain a healthy weight
- Eat foods high in fiber – vegetables, fruits and whole grains
- Eat less red meat and processed meat (hot dogs and some luncheon meats)
- Limit alcohol (no more than 2 drinks a day for men and 1 drink a day for women)
- Get regular exercise
- Quit smoking

Screenings for Colon Cancer

Screenings can help find colon cancer early while it's still curable. If a polyp is found, your doctor can remove it before it has a chance to become cancer.

Here are the preventive screenings the PEBTF covers for people age 50 and over:

- **Colonoscopy – preventive test covered once every 10 years:** Uses a lighted tube with a small camera on the end to examine the entire length of the colon and rectum. If polyps are found, they may be removed during the test.
- **Flexible sigmoidoscopy – preventive test covered once every 5 years:** Is similar to colonoscopy, but examines only the lower part of the colon and rectum. If polyps are found, they may be removed during the test, or you may need to have a colonoscopy later.

According to the American Cancer Society, the lifetime risk of developing colorectal cancer is about 1 in 20 (5.1%).

- **Fecal occult blood test – preventive test covered once every 12 months:** Is used to detect tiny amounts of blood in the stool that could indicate the presence of polyps or cancer. You may take the test at home with a kit you obtain from your doctor.

Sources: www.healthfinder.gov; www.cancer.org

Your Cost for These Important Preventive Benefits		
Colonoscopy	\$25 copay for specialist office visit, which is usually done prior to scheduling the procedure	\$0 (for the actual colonoscopy procedure)
Flexible Sigmoidoscopy	\$25 copay for specialist office visit, which is usually done prior to scheduling the procedure	\$0 (for the actual flexible sigmoidoscopy procedure)
Fecal Occult Blood Test	\$15 (PCP)/\$25 (specialist) office visit copay	\$0 (for the actual test kit)
NOTE: CDHP Members – See your preventive care benefit		

PEBTF

Pennsylvania Employees
Benefit Trust Fund
150 South 43rd St., Suite 1
Harrisburg, PA 17111-5700



Local: 717-561-4750
Toll Free: 800-522-7279

PEBTF telephone hours:
8 a.m. – 5 p.m. Tuesday - Friday
8 a.m. – 6 p.m. Monday (or 1st day
following a holiday weekend)

PEBTF Benefit News is available in
an alternative format. Please contact
the PEBTF to discuss your needs.

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This newsletter may contain a general description of the Plan of Benefits (Plan). It is provided for informational purposes only and should not be viewed as a contract, offer of coverage, confirmation of eligibility or investment, tax, medical or other advice. In the event of a conflict between this newsletter and the official plan document, the official plan document will control however, to the extent expressly stated, an article may modify the provisions of the Summary Plan Description. The PEBTF reserves the right to amend, modify or terminate the terms of the Plan, including any options available under the Plan, at any time and for any reason, with or without prior notice.

Your Important Health Benefits

PEBTF May Cancel Your Coverage For Fraud, Intentional Misrepresentation or Non Payment

IMPORTANT: If you intentionally provide false or misleading information about eligibility for coverage under the PEBTF Plan (or about a claim) or you fail to make a required contribution on time, your coverage may be terminated retroactively. This may occur, for example, if you file a false claim, fail to notify us promptly of a divorce or fail to submit timely proof of birth or adoption that verifies your relationship with a new child whom you have added as a dependent.

