

Get Healthy *Know Your Numbers*



By now, you should have received your Get Healthy letter notifying you if you earned the health care contribution waiver beginning July 2015. If you earned the waiver, you are among the 78 percent of employees who did.

Get Healthy *Know Your Numbers* Wellness Screenings Continue for 2015

The Trustees are pleased to announce that the *Know Your Numbers* wellness screenings will be offered again in fall 2015 for all employees and covered spouses/domestic partners. Watch for your Get Healthy brochure in July.

Quest Diagnostics reports aggregate data only to the PEBTF which will help us focus on programs that will help members improve their health.

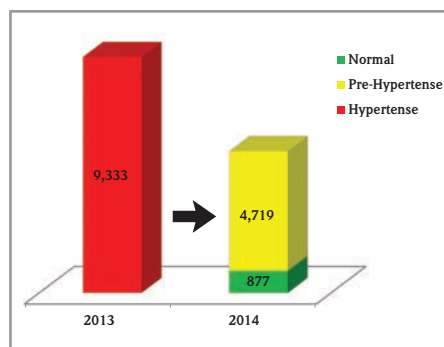
So how did we do? Let's take a look at the results for 2014.

- Of the 115,298 eligible employees and spouses/domestic partners, 91,078 or 79 percent completed a wellness screening. The percentage of completions remained consistent with last year which is great news even with the added wellness screening requirement for spouses/domestic partners in 2014.
- We had some great results. When we look at the yearly comparison for employees only – 2014 versus 2013, we see:

What's Inside

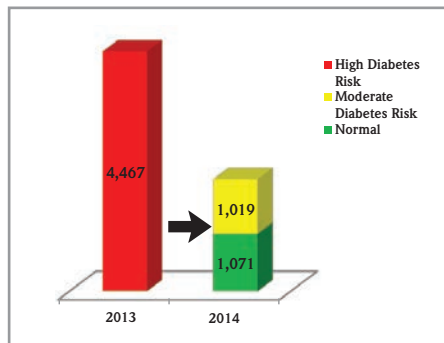
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Employees with High Blood Pressure Improvement – 2013 vs 2014

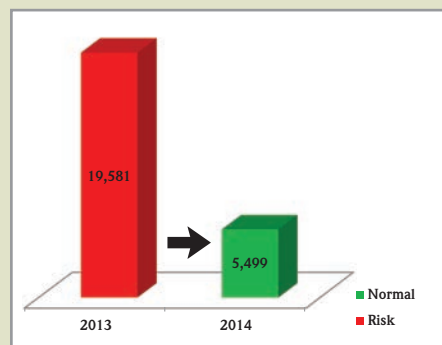


- **Blood Pressure:** Sixty percent, or 6 out of 10, of the employees with high blood pressure improved their numbers in 2014 versus 2013.

Employees with High Glucose Improvement – 2013 vs 2014



Employees with Cholesterol HDL Risk Levels Improvement – 2013 vs 2014



- **Cholesterol:** HDL stands for high density lipoprotein, which is the good cholesterol. The higher the number the better for a decreased risk of heart disease. In 2014, 28 percent of those employees in the risk level range improved their HDL numbers over 2013.

- **Glucose (sugar):** Forty seven percent of employees with high glucose readings in 2013 improved their readings and brought that value within the moderate or low risk range in 2014.

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SPRING 2015

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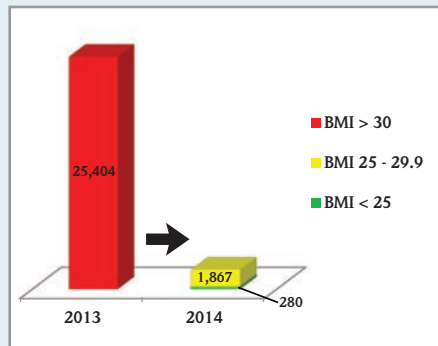
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Employees with High-Risk BMI Improvement - 2013 vs 2014



- **Body Mass Index:** Body mass index (BMI) is an indication of body size and by association body fat. Good news is that 8 percent of employees with BMI in the high risk level in 2013 brought that value within moderate or low risk by 2014. Seeing results like this in just a year's time is a great improvement.

Next year we will have comparison data for spouses/domestic partners and we'll be able to see the improvements the entire population made year over year.

Improving Your Wellness Screening Results

While genetics play a part in our wellness screening results, there are things you can do to help improve your health and hopefully, improve your numbers year over year.

- **Stop smoking.** The PEBTF offers the Quit For Life Program. Call 1-866-QUIT-4-LIFE to get started.
- **Eat a healthy diet.** Include plenty of fruits and vegetables and cut down on saturated fat.
- **Monitor your blood pressure.** Talk to your doctor about your results and discuss any lifestyle changes or medications.
- **Maintain a healthy weight.**
- **Exercise regularly.** The American Heart Association recommends at least **30 minutes** of moderate intensity aerobic activity **5 days per week** = total of 150 minutes. Moderate intensity includes brisk walking, biking slowly, ballroom dancing and water aerobics. If you do higher-intensity aerobic activity such as running, just 25 minutes, 3 days per week for a total of 75 minutes is recommended. Break it up into smaller chunks of time – just make sure you do at least 10 minutes at a time.

1 in 3 adults in the U.S. has high blood pressure, which is 140/90 or higher.

Source: NIH National Heart Lung & Blood Institute

According to the Centers for Disease Control & Prevention, people with high total cholesterol have twice the risk of heart disease as people with optimal levels (optimal is below 200 mg/dL).

Member Success Story

Making Changes to Improve Health

Justin B. is a 35-year old male enrolled in PEBTF benefits. He wanted to get an idea about his health and save money so he completed ***Know Your Numbers*** wellness screenings both years they were offered.

While Justin's first year's results weren't terrible, he knew there was room for improvement so in February of 2014 he decided it was time to make some changes.

“My biggest motivator was to make the change while I was still in my 30s,” said Justin. “I knew if I waited until after I was 40, just five years away, it would be more difficult.”

In just eight months, Justin:

- ✓ Lost 50 pounds from his 6' 7" frame which improved his BMI from 27.6 (overweight) to 23.6 (normal range)

- ✓ Decreased his blood pressure from 140/78 to 122/80
- ✓ Lowered his total cholesterol from 166 to 154 and improved his HDL numbers
- ✓ Decreased his glucose (sugar) results from 130 to 93
- ✓ Lost 4 inches off his waist measurement

So, how did Justin do it? He replaced sugary drinks with water, counted calories and started exercising – just simple common sense.

“I was probably drinking a gallon of store-bought sweetened iced tea and instant tea a day,” commented Justin. “Now, I drink water and I brew my own iced tea and just add a little sugar.”

Justin follows a sensible diet. He eats oatmeal for breakfast and salad

with chicken breast and vinaigrette dressing or a frozen 400 calorie meal for lunch. He loads up on vegetables at dinner and adds grilled chicken breast, salmon or steak. Initially, he limited his calories to 1,500 a day but has since increased that amount slightly. He doesn't eat many desserts and limits beer to just a couple glasses a week.

Justin also knew it was important to be active because he sits at a desk all day. He uses a rowing machine three times a week. He built a deck on the back of his home this past summer and is now remodeling his basement. He plans on adding weightlifting to his workouts.

The Get Healthy Program was the impetus to get Justin started on his healthy lifestyle but it was up to him to put the plan in action.



PEBTF May Cancel Your Coverage For Fraud or Intentional Misrepresentation

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.

The Value of Your Benefits

This is the first in a series of articles that takes a look at the costs of medical care and the out-of-pocket costs for our members.

We are fortunate to have excellent health benefits at a low cost. Many of us don't realize the cost of our medical care unless we take the time to look at the provider's charge on the Explanation of Benefits (EOB). Those enrolled in the PPO or HMO option pay low copays for some services and this example is for

members enrolled in the PPO. Those enrolled in the CDHP or Bronze Plan options have an annual deductible and then the plan pays at 100 percent for in-network services. The scenario presented below is not a real PEBTF member but the costs represented are typical of what members would see in Pennsylvania.

Irene & Maggie (Parent and Child) – Value Preventive Care

Irene is a busy mother in her early

40s. She and her daughter, Maggie, are always on the go. Maggie is active in soccer and many of their weekends are spent traveling to tournaments in the mid-Atlantic area. Even though they are busy, Irene takes the time for important preventive care screenings so both she and Maggie can stay healthy. Preventive care is covered in network at 100 percent and Irene and Maggie want to take advantage of this wonderful benefit.

2014 Medical Costs PPO Plan Example	Actual Cost	Member Cost (out-of-pocket)
Medical expenses:		
Annual physical for Irene (including bloodwork)	\$160 Dr. visit \$1,092 blood work	\$0
Annual preventive care GYN exam and pap test for Irene	\$148	\$0
Annual preventive care mammogram for Irene	\$630	\$0
Well child visit	\$130	\$0
Flu shots for Irene and Maggie	\$110	\$0
Two visits to Irene's primary care physician due to illness (\$15 copay per visit)	\$240	\$30
Two visits to Maggie's pediatrician for illnesses (\$15 copay per visit)	\$260	\$30
Prescription drugs for Maggie Amoxicillin Suspension (antibiotic 10 days)–cost is less than the \$10 generic copay	\$5	\$5
Ciprodex Otic Suspension (ear drops for 7 days)–brand name drug	\$151	\$18
4 dental visits– six month exam, cleanings and X-rays for both Irene and Maggie (\$125 to \$183 each visit depending if X-rays were taken)	\$616	\$0
Vision exam and new progressive lenses and frames for Irene	\$625	\$335
Total medical expenses	\$4,167	\$418

You can see Irene paid only \$418 for medical care. She also pays the reduced health care contribution of \$1,040 per year or 2 percent of her

\$52,000 salary for her benefits because she participates in the Get Healthy Program. The contribution is deducted from her biweekly pay

at \$40 per pay. Her total spent on health care in 2014 for she and her daughter is \$1,458.

Preventive Care Immunizations

Listed below are the immunizations that are covered under your plan at 100 percent. For more information on all of the preventive care services,

please visit www.pebtf.org and click on Active Members tab, select Benefit Information and then click Preventive Benefits. The information

may also be found in the Summary Plan Description, which is also on www.pebtf.org.

Preventive Health Benefits Adults – Immunizations *	Preventive Benefits Children (up to age 21) – Immunizations*
<ul style="list-style-type: none"> • Haemophilus influenza type b (Hib) • Hepatitis A • Hepatitis B • Herpes Zoster (shingles)–age 60 and older (may also receive the vaccine under the Prescription Drug Plan by visiting a network pharmacy) • Human Papillomavirus (HPV) – females & males to age 26 • Influenza (flu)(members age 18 and older may also receive the vaccine under the Prescription Drug Plan– see the Summary Plan Description for more information) • Measles, Mumps, Rubella (MMR) • Meningococcal • Pneumococcal • Tetanus, diphtheria, pertussis (Td/Tdap) • Varicella (chickenpox) 	<ul style="list-style-type: none"> • Diphtheria/Tetanus/Pertussis (DTaP), Tetanus/Diphtheria/Pertussis (Tdap) or Tetanus/Diphtheria (Td) • Haemophilus influenza type b (Hib) • Hepatitis A • Hepatitis B • Human Papillomavirus (HPV)–for females and males ages 9 to 21 • Influenza (flu) (members age 18 and older may also receive the vaccine under the Prescription Drug Plan– see the Summary Plan Description for more information) • Measles/Mumps/Rubella (MMR) • Meningococcal (MCV4) • Pneumococcal (PCV) • Polio (IVP) • Rotavirus • Varicella (Chickenpox)

*Immunizations that combine two or more component immunizations to the extent the component immunizations are covered under the Plan. Doses, recommended ages and recommended populations vary. All recommended routine immunizations are covered at no cost to the member. Vaccines are recommended by the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP).



What does the Affordable Care Act (ACA) have to do with my taxes?



The Affordable Care Act has resulted in numerous changes to health care in recent years. But did you know that it could also affect your taxes if you don't have health coverage?

Effective January 2014, you were required to have health insurance, whether individual coverage, through your employer, your spouse's employer or a government-sponsored program. When you filed your 2014 taxes, the IRS may have asked you to

confirm that you and your dependents were enrolled in health insurance coverage in the 2014 calendar year. If you did not have health insurance coverage for one full calendar month or more in 2014 as

required by the ACA, you may have been assessed a penalty by the IRS.

In 2016, you will receive two notices, one from the PEBTF and one from your employer. These forms will show you which months you and your dependents were eligible and enrolled in coverage through the PEBTF. You will need both of these notices in order to file your 2015 federal taxes.

The PEBTF and the commonwealth cannot provide tax advice and you should contact your accountant or tax advisor on how this may affect you.

Spouse/Domestic Partner Attestation For Employees Hired on or After August 1, 2003

New Enrollees

In June 2015, new enrollees who want to have their spouses/domestic partners covered under their PEBTF benefits will be required to provide additional information, including other coverage the spouse/domestic partner may have available through his or her employer.

Annual Attestation

In August, the PEBTF will begin an attestation process for all employees **hired on or after August 1, 2003** who have a spouse/domestic partner

enrolled for PEBTF benefits. Information will be sent to the employee's mailing address.

Eligibility rules for employees hired on or after August 1, 2003:

If your spouse/domestic partner is eligible for medical or supplemental benefit (prescription drug, vision, dental or hearing aid) coverage through his or her own employer, your spouse/domestic partner **must** take his or her employer's coverage as primary coverage **regardless of any employee contribution** your

spouse/domestic partner must pay and **regardless of whether your spouse/domestic partner had been offered an incentive** to decline such coverage. This rule does not apply if your spouse/domestic partner is self-employed. PEBTF coverage for your spouse/domestic partner is limited to secondary coverage.

Additional information on the spouse/domestic partner annual attestation will appear in the Summer **PEBTF Benefit News**.

Interesting Facts

In 2014, the average cost of health insurance per employee was \$9,504 – the average cost to the employers was \$6,276 and employees paid an average of \$3,228, according to the 2014 United Benefit Advisors Health Plan Survey. Commonwealth employees currently contribute an average of **\$2,572 or \$1,029 if employee is earning the Get Healthy waiver.**



Over **30 percent** of **cancers** could be prevented by avoiding tobacco and alcohol, having a healthy diet and engaging in physical activity.

Source: www.who.int

One organ donor can save up to 8 lives. April is National Donate Life Month.

Source: www.organdonor.gov

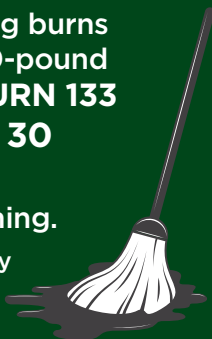


Suffering from **SEASONAL ALLERGIES?** Pollen levels can be affected by temperature, time of the day, humidity and rain. Pollen counts are lowest on chilly, soggy days. Pollen counts are highest between 10 a.m. and 4 p.m. especially on hot, dry and windy days.

Source: WebMD

Spring cleaning burns calories. A 150-pound person can **BURN 133 CALORIES** in **30 MINUTES** of vigorous cleaning.

Source: Everyday Health



A baby is born on its predicted due date just 4 PERCENT of the time.

www.bbc.com



Sitting more than **2 hours** a day can cut **2 years** off a person's life expectancy.

Source: Time, July 10, 2012

May is Healthy Vision Month. Bugs Bunny knew carrots were good for the eyes, but eating a diet rich in fruits and vegetables, particularly dark leafy greens such as spinach, kale, or collard greens, is important for keeping your eyes healthy too. Research has also shown there are eye health benefits from eating fish high in omega-3 fatty acids, such as salmon, tuna, and halibut.

Source: www.nei.nih.gov



PEBTF

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

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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.



Your Important Health Benefits

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.

Adding a Newborn to PEBTF Coverage

Having a baby is such an exciting and busy time but you do not want to forget to add your newborn to your PEBTF coverage. Newborns are automatically covered for the first 31 days after birth so that the hospital stay, initial check-up, durable medical equipment and any medications are covered.

You **must** contact the HR Service Center or your local HR office if your agency is not supported by the HR Service Center to add your newborn to PEBTF coverage. You will need to complete an Employee Enrollment/Change Form (PEBTF-2). Do not wait to complete the PEBTF-2 because you want to make sure your newborn is covered for any medical expenses.

You will then have six months to provide an original birth certificate and the child's Social Security number. If you fail to provide the required documentation within the required timeframe, your child will be terminated from PEBTF coverage and you will be responsible to reimburse the PEBTF for any claims that were paid on behalf of your child. For more information, see Section 1.15 of the Summary Plan Description, which may be found on www.pebtf.org.

