LMHF

3786 Broadway Street Cheektowaga, NY 14227 PRESORT STD
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BUFFALO NY



Birth of Newborn?

Please contact your employer to add your newborn to your Insurance coverage within 30 days from date of birth.



Moving?

Please change your address with your health insurance provider, CMS and employer. If you will be away during open enrollment period and would like a packet mailed to a different address please call the LMHF office at (716) 601-7980

LMHF

Labor-Management Healthcare Fund

3786 Broadway Cheektowaga NY 14227 Phone (716) 601-7980 Fax (716) 601-7984

E-MAIL:

suggest@LMHF.net

We're on the Web!

Visit us at:

www.LMHF.net

Labor-Management Healthcare Fund

Annual Newsletter July 2019

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A Note from the Executive Director...

Dear LMHF Member:

Greetings from the LMHF staff and best wishes for a safe and healthy summer!

A warm welcome to Pioneer Central School District, the most recent member of the Labor-Management Healthcare Coalition effective July 1, 2019!

Our wellness program continues to grow with new retreat topics, family weekends, seminars, cooking demonstrations, exercise classes and more! Within this last year, two new staff members joined the LMHF team: Kristie, LMHF Wellness Coordinator and Meah, LMHF Wellness Assistant.

Please take a look at our updated website - www.LMHF.net. We hope you find the site easy to navigate and find the information you are looking for without any difficultly. If you have any suggestions for our website, please contact us! We are always looking for ways to improve.

As you know, our "LMHF® Strive to Thrive" program has been running for over two years. Nearly 500 people have attended the retreat and found it to be a positive experience. The feedback received from attendees indicate that the benefits they received from attending were put to use after the retreat and were integrated in their everyday life. Attendees were able to eliminate and/or reduce stress and learned how to deal with stressors in a healthier way. LMHF® Strive to Thrive will be expanded to focus on the improvement of mental health and also assist individuals recovering from substance abuse. To learn more about the program and attendance eligibility, please contact your supervisor or the LMHF office.

By now you have heard about and hopefully decided to participate in our first Coalition-wide LMHF Walk-and-Win competition! We had such a great response to this event! Good luck to everyone! Winners will be announced on our website.

I would like to take this opportunity to express our gratitude to our wonderful group of retirees. We appreciate your attendance at the Health & Wellness Fairs, monthly cooking classes and Lunch & Learn Wellness Seminars at the Fairdale and also the October Retiree Retreat, which is especially designed for you. Thank you for making a healthy lifestyle your priority and supporting our efforts in providing you with the most current information regarding many topics including nutrition, medications, fitness, etc.

We look forward to another year of providing benefits that will assist you in maintaining good health for you and your families.

Sincerely yours,

Vicki Martino

Vicki Martino



LMHF® Strive to Thrive

The LMHF® Strive to Thrive program is a holistic approach to improving the health and quality of life of all First Responders and other public employees in high stress positions or personal situations by learning and experiencing the skills and knowledge to manage stress through proper rest/sleep, exercise & proper nutrition. Lodging and all meals included. Overnight required.

The Strive to Thrive program is designed to provide First Responders the tools necessary to perform vital functions while building better relationships within the community.

Our three-day, two-night program is held on the beautiful grounds of the Beaver Hollow Conference Center Biggest Loser/Niagara in Java, New York. Indoor and outdoor activities included. Parking free of charge. Program begins at 7:30 a.m. Wednesday and adjourns 3:30 p.m. on Friday.

If interested, your supervisor should contact Vicki Martino at Vicki.Martino@LMHF.net

May 1 - 3	August 7 - 9
May 15 - 17	August 21 - 23
May 29 - 31	September 4 - 6
June 19 - 21	September 11 - 13
June 26 - 28	September 25 - 27
July 10 - 12	October 16 - 18
July 24 - 26	October 23 - 25

	Changes in Fund Balances (Reserve for Futu	ure Benefits)		
	Reconcilement of Fund Balance			
14		00	140	
<u>Item</u>		20	<u>)18</u>	- 100 00
•	eserve for future benefits) at beginning of year		\$	3,408,96
18. Total additions d		208,545,967		
	during year (item 16)	208,658,133		(440.40
20. Total net increas				(112,16
21. Fund Balance (reserve for future benefits) at end of year (item 14, statement of assets and liabilities)			\$	3,296,79
	Schedule of Other Administrative Expe	anses		
	Ochedule of Other Administrative Expe	511363		2018
1. Employee Benefit	<u> </u>		\$	<u>2016</u> 183,07
2. Copier Expense			Ψ	11,71
3. Enrollment Expen	se			25,87
4. Newsletter				5,27
5. Office Supplies ar	nd Expenses			115,31
6. Postage				26,91
7. Telephone				8,38
8 Depreciation				21,29
Total: Line 12(h): C	Other Administrative Expenses		\$	397,85
	Statement of Assets and Liabilitie	s		
	ASSETS			
Item:		2018		
1.Cash				
2. Receivables:		20,543,035		
Z. Receivables:				
	(a) Contributions			
	(1) Employer	7,110,509		
	(2) Other Administrative Fees	-		
3. Other Assets:				
	(a) Prepaid Expenses and Security Deposits	26,717		
	(b) Office Equipment	205,361		
	(c) Less Accumulated Depreciation	(138,097)		
4. Total Assets	(c) Less Accumulated Depreciation			
4. Total Assets		27,747,525		
	LIABILITIES			
5. Unpaid Claims (N	ot Covered by Insurance)	2,198,500		
6. Accounts Payable		6,687,762		
· · · · · · · · · · · · · · · · · · ·	Funds held for others	15,563,969		
8. Reserve for Future Benefits (Fund Balance)		3,296,794		
8. Reserve for Futur	9. Total Liabilities and Reserves			
		27,747,025		

	Additions to Fund Balance	,	
	7 (44.11.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.		
Item			2018
1.Contributions:			
	(a) Employer	205,845,196	
	(b) Employee		
	(c) Other (Enrollment Reimbursement)		
	(d) Total Contributions		205,845,19
2. Dividends & Exper	ience Rating Refunds from Insurance Companies		
Investment Income	e:		
	(a) Interest	24,581	
	(b) Dividends		
	(c) Rents		
	(d) Miscellaneous		
	(e) Total income from investments		24,58
4. Profit on disposal o	of investments		
· · · · · · · · · · · · · · · · · · ·	ment in asset values investments		
6. Other Additions: (Itemize)		
	(a) Administrative fees		2,183,55
	(b) Brokers premium, expense reimbursements		492,63
	(c) Total Other Additions		2,676,19
7. Total Additions			\$208,545,96
	Changes in Fund Balance (Reserve for Fut Deductions From Fund Balance		
	Boddollollo i Tolli i dild Baldillo		
			2018
	ity Premiums to Insurance Carriers and to Service		\$205,845,196
Organizations (Incl	luding Prepaid Medical Plans)		\$205,845,196
Organizations (Incl 9. Wellness program 10. Payments to an O	luding Prepaid Medical Plans)		
Organizations (Incl 9. Wellness program 10. Payments to an C of providing bene 11. Payments or cont individuals provid	benefits Drganization maintained by the plan for the purpose fits to participants tract fees paid to independent organizations or ling plan benefits (clinics, hospitals, doctors, etc.)		\$205,845,196
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Organizations (Incl 9. Wellness program 10. Payments to an C of providing bene 11. Payments or cont individuals provid 12. Administrative Ex	benefits Drganization maintained by the plan for the purpose fits to participants tract fees paid to independent organizations or ling plan benefits (clinics, hospitals, doctors, etc.) typenses: (a) Salaries	\$ 497,422	\$205,845,196
Organizations (Incl 9. Wellness program 10. Payments to an Cof providing bene 11. Payments or confindividuals provid 12. Administrative Ex	benefits Organization maintained by the plan for the purpose fits to participants tract fees paid to independent organizations or ling plan benefits (clinics, hospitals, doctors, etc.) Expenses: (a) Salaries (b) Allowances, Expenses, etc.	-	\$205,845,196
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Organizations (Incl 9. Wellness program 10. Payments to an Cof providing bene 11. Payments or confindividuals provid 12. Administrative Ex	benefits Drganization maintained by the plan for the purpose fits to participants tract fees paid to independent organizations or ling plan benefits (clinics, hospitals, doctors, etc.) spenses: (a) Salaries (b) Allowances, Expenses, etc. (c) Payroll Taxes (d) Fees & Commissions (e) Rent (f) Insurance Premiums	38,885 1,025,830	\$205,845,196
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Join the LMHF in Our 5th Annual



LMHF Family Wellness Event

Saturday, September 7, 2019. Walk begins at 9:00 a.m.

- ~ Run or walk at your own pace ~
- ♦ Check-in at the park will be from 8:00 a.m. 8:45 a.m.

Beaver Hollow - The Biggest Loser Niagara 1083 Pit Road Java Center, NY 14082

You will find several (free of charge) parking areas available. Upon arriving, report to the registration desk located in the Main Lodge which is down the path on the right-hand side. Staff will assist/direct you from there.

Free to all LMHF subscribers and (any age) family members

- * All attendees, including spouses & dependents must be an LMHF member.
 - ♦ Please call (716) 601-7980 to register by the deadline August 9th
 - ♦ LMHF Vendors will be present ◆ No Registration Fee Required
 - ♦ Bike Raffle for LMHF Members Who Participate
 - ♦ Win Prizes
 - ♦ Run or Walk on a well-prepared course







ATTENTION Retirees!

Mark Your Calendar!



Labor-Management Healthcare Coalition Open Enrollment Period

Monday, October 14 through Friday, November 15 2019.

Changes made during this period will take effect January 1, 2020.

Our Annual Open House/Health Fair at the Fairdale Banquet Facility for Retirees will be:

Thursday, November 7, 2019

8:00 a.m - 4:00 p.m

Representatives from BCBS of WNY, Independent Health & Pharmacy Benefit Dimensions will be present to answer questions you may have regarding your health & prescription benefits. Please call the LMHF office at (716) 601-7980 if you would like to attend. Reservations are required. If for any reason we need to cancel, please check Channel 4 (WIVB.com) for closing information. The rescheduled date will be November 12. You must be a LMHF member and present your BCBS or Independent Health identification card to receive a flu vaccine.



- ◆ Screenings: Total Cholesterol, HDL Cholesterol, Glucose, Flu Vaccines Participating Vendors:
- * Wegmans Blood Pressure Screening by Registered Pharmacist (offering \$6 Meal Coupon)
- ❖ BlueCross BlueShield Let's Talk Health: Opportunity to ask health related questions
 - ❖ Pharmacy Benefit Dimensions
 - ❖ Independent Health
 - ❖ Value Vision Eye Care
 - ❖ Biggest Loser Niagara Resort
 - Erie County Senior Services

Location:

Fairdale Banquet Center 672 Wehrle Drive Amherst, NY 14225





WOMEN'S HEALTH AND CANCER RIGHT'S ACT

Annual Benefits Notice

Do you know that your plan, as required by the Women's Health and Cancer Rights Act of 1998 (WHCRA), provides benefits for mastectomy related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema?

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under WHCRA. For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- ❖ All stages of reconstruction of the breast on which mastectomy was performed;
- ❖ Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- ❖ Prostheses: and
- * Treatment of physical complications of the mastectomy, including lymphedema

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. If you would like more information on WHCRA benefits, call your plan administrator, BCBS WNY at 1-888-839-5169.

THE FOLLOWING DOCUMENTS REGARDING HEALTHCARE REFORM ARE AVAILABLE ON THE LMHF WEBSITE AT WWW.LMHF.NET

Children's Health Insurance Program Reauthorization Act (CHIPRA) CHIPRA allows states to subsidize premiums for employer-provided group health coverage for eligible children.

Letter of Creditable Coverage

An important notice about your prescription drug coverage and Medicare.

Notice of Privacy Practices

The HIPAA Privacy Rule permits the disclosure of personal health information needed for patient care and other important purposes and gives patients an array of rights with respect to that information. The notice describes how medical information may be used and disclosed and how you can get access to this information.

Notice of Special Enrollment Rights

Notice to employees eligible to enroll in a group health plan describing the plan's special enrollment rules.

Notice of Patient Protections

Notice to participants of their rights to choose a primary care provider or pediatrician and obtain obstetrical or gynecological care without prior authorization.

Summary Plan Description (SPD)
The Summary Plan Description provides information about the plan and how it operates, such as when an employee can begin to participate in the plan, how services and benefits are calculated, when benefits becomes vested, when and in what form benefits are paid, and how to file a claim for benefits.

Women's Health and Cancer Rights Act
Provides information on the availability of certain mastectomy-related benefits for individuals who elect breast reconstruction after a mastectomy.

<u>Summary of Benefits of Coverage (SBC)</u> An easy to understand summary about health plan's benefits and coverage.

Glossary of Health Coverage and Medical Terms
A uniform glossary of terms commonly used in health insurance coverage, such as "deductible" and "copayment". This document may assist you when reviewing your SBC.

LMHF Retiree Wellness 2019

Remaining 2019 Retiree Seminars at the Fairdale Banquet Center

(672 Wehrle Drive, Amherst NY)

Retiree "Lunch & Learn" wellness seminars are held on Wednesdays from 11:30 a.m. to 1:00 p.m. on the following dates. All LMHF sponsored seminars are strictly for LMHF members. When making phone reservations, retirees must provide their BCBS, PBD or Independent Health group number to validate their LMHF membership. In addition, when attending the seminar, attendees must produce their identification card. Please make all reservations and cancellations by 12:00 p.m. on the Monday before the seminar.

Delicious Vegetables! July 17, 2019

Get to Know Your Feet August 21, 2019

Longevity New Anti-Aging for Men & Women September 18, 2019

October 16, 2019 Me Time - It's All About Me!

November 20, 2019 Healthy Home

Limited Seating! Please call the LMHF office at 601-7980 to make your reservation today!

REMINDER: Please bring your BlueCross BlueShield, PBD or Independent Health identification card with you.

Please check CHANNEL 4 or WIVB.COM for any weather related closings

"Labor-Management Healthcare Seminar"

Two-Day Retiree Wellness Retreat at Beaver Hollow

October 15 & 16, 2019

This two-day retreat is focused on healthy aging through proper nutrition and activity providing tools to increase strength, mobility and fitness. Includes fall prevention practices, an introduction to essential oils, reflexology, medication compliance and a prescription Q &A with a pharmacist.

Retirees can complete an entry form between January 1 - September 5, 2019 at the LMHF office located at 3786 Broadway, Cheektowaga NY 14227, at the Retiree Seminars held at the Fairdale Banquet Center or call the LMHF office at (716) 601-7980 to request an entry form.

Retirees with health coverage through Independent Health

Independent Health's

Healthy Benefits Fitness Program

In order to begin using this benefit, please present your Member ID card at the participating facility. For more information, a list of providers or a reimbursement form, call Member Services at (716) 250-4401 or 1-800-665-1502 (TTY users call 1-800-432-1110).

Please note, that when you present your ID card to begin your membership at a participating facility, you will be required to pay a \$20 activation fee to the fitness facility. Memberships will not roll over from year-to-year; they will restart in January each year.

Members can be reimbursed for the \$20 activation fee by submitting an Independent Health "Claim Form" along with a copy of their gym membership receipt to



Independent Health Attn: Healthy Benefits P.O. Box 9066 Buffalo, NY 14221 Fax (716) 774-8092



Independent Health's Medicare Advantage Hearing Aid Coverage

All of our plans cover up to two hearing aids per year when purchased through TruHearing. View the copayments and fees for the hearing aid evaluation exam and hearing aids in the chart below. To take advantage of this benefit, call TruHearing to schedule a hearing exam.

1-844-211-1723 (toll-free) TTY: 1-800-975-2674 8:00 a.m – 8:00 p.m, Monday-Friday

Coverage includes:

- 2 hearing aids per year when purchased through TruHearing
- 3 follow-up visits with an in-network provider for fit ting & adjustment of hearing aids
- 45-day trial
- 3-year manufacturer warranty for repairs & one-time loss & damage replacement
- 48 batteries per aid

	Independent Health Member copay	Retail Price
Flyte 700 14 channels, 4 programs, 6 styles, advanced features	\$699 copayment (per aid)	\$1,850 (per aide)
Flyte 900 17 channels, 4 programs, 9 styles, premium features	\$999 Copayment (per aid)	\$2,995 (per aid)
Hearing Aid Evaluation Exam Hearing Exam performed by a TruHearing provider	\$45 evaluation copayment	12 C

Attention! Members with coverage through BCBS/PBD only

(Members enrolled in a Medicare Advantage plan are not eligible for the following SCAP program.)



Using a specialty drug?

Pharmacy Benefit Dimensions® and Labor-Management Healthcare Fund are pleased to offer a Specialty Copay Assistance Program (SCAP) which helps members save on specialty prescription drug copayments, and offers participants a unique benefit to offset other healthcare costs.

Once enrolled, members who utilize a specialty drug in the program and obtain their medication through Reliance Rx will receive their medications with \$0 member obligation. In addition, LMHF Members who choose to participate in the program are offered \$400 per year (paid quarterly) into their HRA account.

Below is a list of the most commonly used specialty medications in the program. When ordering a specialty medication from Reliance, the Patient Representative will let you know if your drug is part of the program or you can call Reliance Rx at any time for more information.

* Avonex ®	* Jadenu ™
* Betaseron ®	* Simponi ®
* Cimzia ®	* Sovaldi ®
* Enbrel ®	* Stelara ®
* Extavia ®	* Rebif ®
* Humira ®	* Orencia ®
* Gilenya ™	* Xeljanz ®

In order to receive any of the above specialty medications with \$0 member obligation, and qualify for up to \$400 per year in your HRA account (\$100 per quarter), **you will need to sign up for this program with Reliance Rx.** If you are eligible and do not enroll, your copayment for these medications will be your appropriate tier copay (cost varies per plan).

For more information, or to sign up for the Specialty Copay Assistance Program, please contact Reliance Rx at (716) 929-1000 or 1-800-809-4763, Monday through Thursday from 8 a.m. to 7 p.m. and Friday from 8 a.m. to 5 p.m. (EST).

Pharmacy Benefit Dimensions

www.pbdrx.com

Urgent Care vs. Emergency Room tips:

- 1. Know how your insurance covers urgent care before you go. If you have a PPO plan, often the urgent care copay is MORE than a regular office visit copay. (e.g. \$75 urgent care copay vs. \$50 specialist visit copay vs. \$25 PCP copay). However, usually urgent care copays are LESS than emergency room visit copays (which are often \$100 or more).
- 2. Some "urgent care clinics" are actually hospital emergency rooms in DISGUISE. You need to ask the urgent care clinic in advance if it bills as urgent care or as an ER and know the name of the person who gives you the information.
- 3. If you have an established relationship with a doctor (e.g. family practice physician, Ob/Gyn, pediatrician), you can often call the doctor's office or their afterhours line to tell them your symptoms and often they can call you in a prescription.
- 4. If you are traveling and have forgotten a medication or have run out of a medication and you have refills still left at your home pharmacy, often you can have your pharmacy transfer a refill to a pharmacy at your travel location.

Attention BCBS of WNY Members with diabetes

Diabetes Management Simplified

With BlueCross BlueShield of Western New York and *Livongo*, it's never been easier to manage diabetes. Livongo uses advanced technology with coaching to support you and your family, and is available at no cost to you.

As part of your health benefit, Livongo provides you with a smart glucose meter, unlimited testing supplies, and coaching. The program features:

- Personalized tips with each blood glucose check
- Real-time support when you're out of range
- Testing supply reordering, right from your meter
- · Optional family alerts to keep everyone in the loop
- Data sent directly to your doctor from your meter
- Automatic uploads for logging

If you or your covered family members have diabetes, visit <u>join.livongo.com/BCBSWNY</u> or call Livongo Member Support at 1-800-945-4355 to sign up or learn more.





Retirees with health coverage through Independent Health

BE PROACTIVE. LIVE HEALTHY. GET REWARDED.

At Independent Health, we want you to get the most from your health care. Schedule your **Enhanced Annual Wellness Visit (EAV)** and talk with your doctor or health provider. Together, you'll develop a plan to help maintain or improve health.

Get Rewarded with Senior Savings LMHF Retirees: Take charge of your health. Complete your EAV and get a \$30 HRA card.

HOW IT WORKS

- Schedule an appointment with your doctor. Tell your doctor's office that the visit is for your *Enhanced Annual Wellness Exam*. There is no copayment for this visit.
- Complete your Health Risk Assessment provided by your doctor. Answer each question to the best of your ability to help your doctor accurately gauge your health.
- **Discuss your results with your doctor**. Discuss your Health Risk Assessment, your health goals/treatments and any current medical conditions.
- Get your rewards card. Within 90 days of your EAV, you'll receive a \$30 Health Reimbursement Account (HRA) card in the mail. Use it toward qualified health care expenses, such as prescriptions drugs, dental and vision services, and more. Please note: This is an annual reward. If you completed your EAV in a previous year and received an HRA card, keep it and the card will be reloaded when you complete your next year's EAV. Remember, having the conversation now may save you from complications or illness later.

For more information, please call Member Services:

(716) 250-4401 or 1-800-665-1502 (TTY Users: 1-800-432-1110)

October 1-February 14:Monday-Sunday, 8 a.m.-8 p.m.

February 15-September 30: Monday-Friday, 8 a.m.—8 p.m.





Attention Retirees with coverage through Independent Health!

Important Information regarding your Prescription Drug and Medical Insurance Coverage with LMHF Through Independent Health/Pharmacy Benefit Dimensions

PLEASE NOTE:

If you enroll in <u>any Medicare Part D plan</u> or Medicare Advantage health insurance plan (with or without prescription drug coverage) that is not through the LMHF/Independent Health, you will be terminated from your current medical and prescription drug coverage.

Depending on the offerings presented to you that are in addition to your current plan with LMHF/ Independent Health, you may actually be enrolling in a Medicare Part D plan which will supersede and cancel your current coverage. According to Medicare regulations, you cannot be covered under two separate Medicare plans.

If you are unsure about what is being offered to you and <u>before signing any application engaging you in a prescription discount program and/or coupon offering associated with your prescription plan</u> OR you enroll in another healthcare plan either as an individual or through your spouse, **PLEASE CALL LMHF**. We can provide assistance and advise whether your participation will affect your current coverage.

Retirees enrolled in a commercial plan with coverage through BCBS
Please Read

If you:

- **❖** Are retired
- ♦ Became Medicare eligible after 1/1/2009
- ♦ Or your spouse became Medicare eligible after 1/1/2009

INFORMATION FROM MEDICARE

When you first become eligible for Medicare Part A (hospital insurance), you have an initial enrollment period (seven months) in which to sign up for Part B (medical insurance). A delay on your part will cause a delay in coverage and result in higher premiums. Your monthly premium increases 10 percent for each 12-month period you were eligible for, but did not enroll in, Medicare Part B. Active employees and/or spouses/dependents of active employees who become Medicare-eligible, are not required to enroll in Part B until the subscriber of the plan is enrolled in a retiree plan of benefits.

INFORMATION FROM BLUECROSS BLUESHIELD OF WNY

If you are eligible for Medicare Part B and are not currently enrolled, payments on claims will be reduced by the benefit amount you are entitled to under Medicare. **Without Part B coverage, you will be responsible for whatever would have been paid under Medicare. For example:** You submit a bill for \$100. The amount Medicare would pay if the member has Part B is 80% or \$80. BCBS would pay the balance, which in this case is \$20. Without Medicare Part B, your responsibility is the amount Medicare would have paid if you were enrolled, which in this case is \$80. Non-participating providers also can bill any remaining balance for additional amounts.

CONTACT FOR FURTHER INFORMATION:

Social Security Administration: 1-800-772-1213

Medicare: www.medicare.gov; Toll free number 1-800-633-4227; TTY number 1-877-486-2048

If your spouse and/or dependent are becoming Medicare eligible, regardless of reason, please contact your employer's Human Resources/Personnel Department for additional information and requirements.

Congratulations!

LMHF hereby acknowledges our exceptional "Wellness Achievers"; namely members who have participated in 100+ wellness classes throughout the year. The following Erie County employees are our 2018 "Wellness Achievers". Congratulations on your participation in our classes and practicing such a great healthy lifestyle!

Mary Jo Wasch

Cheryl Gould

Patricia Huels

Noriko Herrington

Social Lifestyle Tools

SANDRA SWELLE Health People Hobbies No. 1997 The Children Health People Hobbies No. 2017 The Connect Connect Live Spiritual Mediation Connect

Nancy Willgens

Luanne Kozlowskie Wellness

Cheryl Ballard



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Attention Active Employees:

Open enrollment period for all LMHF groups: Monday, October 14 through Friday, November 15, 2019

Your employer will have packets available during that time if you wish to make changes and/or enroll at that time. Additional information will be posted at employer sites as the open enrollment period draws near.

Dr. BeyeR Opticals

646-EXAM

Dr. Beyer Opticals/Value Vision is offering the following to LMHF members:

Eye Exam	Copay Specific to Your Plan
Insurance Frame	\$19
Value Vision Frame	\$65
Designer	\$90+
SV CR39 with UV	\$51
BF CR 39 with UV	\$66
No-Line CR39 with UV	\$136
Digital No-Line with UV	\$151
Varilux Comfort with UV	\$175

<u>Value Vision</u> 3035 Genesee Street

Buffalo, NY 14225 (716) 896-3351

2305 Union Road, Suite 2 West Seneca, NY 14224 (716) 668-0711

1234 Abbott Road / Abbot Road Plaza Lackawanna, NY 14218 (716) 826-9230

642 Sheridan Drive Tonawanda, NY 14150 (716) 695-3733

7900 Buffalo Avenue Niagara Falls, NY 14304 (716) 283-9746 Hamburg Optical

50 Buffalo Street Hamburg, NY 14075 (716) 649-1035

Your Local Optical
5827 South Transit Road

Lockport, Ny 14094 (716) 727-0085

Whelpey & Paul

3180 Latta Road Greece, NY 14612 (585) 663-6655

2815 Monroe Avenue Brighton, NY 14618 (585) 473-1800

950 Ridge Road Webster, NY 14580 (585) 671-6630 Buffalo Optical

280 Delaware Avenue Buffalo, NY 14202 (716) 854-1620

1567 Military Road Kenmore. NY 14217 (716) 875-7779

4080 Seneca Street West Seneca, NY 14224 (716) 674-4110

5350 Main Street, Suite 4 Williamsville, NY 14221 (716) 631-3820

Southgate Optical

1028 Union Road, Suite B Southgate Plaza West Seneca, NY 14224 (716) 674-6060

www.drbeyeropticals.com

*The LMHF does not endorse any single provider. This is not an endorsement.



LMHF HEALTHY COOKING DEMONSTRATIONS 2019 SCHEDULE

All Cooking Demonstrations are FREE to LMHF Active and Retiree Members

LMHF Retirees 11:30 a.m. - 1:00 p.m. LMHF Active Employees 5:30 p.m. - 7:00 p.m.

Grab your passport! We're traveling around the world! Each month we will be tasting healthy traditional foods from the countries listed below!



July 11 Germany

August 8 Brazil

September 12 Japan

October 10 The Dominican Republic

November 14 Australia



Location Address:

LMHF Wellness Zone 3786 Broadway Street Cheektowaga, NY 14227

To Register: Call (716) 601-7980

Please have your Identification card to register.

We will take reservations up to two months in advance. <u>PLEASE</u> contact this office if you must cancel your reservation. In an effort to avoid vacancies in the class and to promote fairness to both the presenters and the members who are on the waiting list, we ask that registrations & cancellations be made by 12 noon on the Monday of its respective week. Missing three classes without notifying this office will result in the member being placed on the waiting list of future classes; they will then only be eligible to attend in the event of a cancellation/vacancy. Must be at least 18 years of age to participate.

◆ Please check CHANNEL 4 or <u>WIVB.COM</u> for any weather related closings "Labor-Management Healthcare Fund Seminar"

LMHF Wellness Incentive Program

Part I & Part II Instructions

Beginning January 1 of each year, active employees, along with their spouses, (who are LMHF members) are eligible to participate in Part I and Part II of the LMHF Wellness Incentive Program. The program runs January 1 through December 31, at which time, the benefit re-sets and begins tracking the next year's activities

Wellness Incentive Program - Part I

Employee and/or spouse is required to receive an annual physical by their Primary Care Physician and submit the necessary paperwork to LMHF. Upon completion and LMHF verified, participant will receive a \$50.00 HRA debit card.

- 1. Retrieve a LMHF "Wellness" packet. All required forms are included in the packet.
- 2. Applicant is required to receive an Annual Physical provided by his/her Primary Care Physician.
- 3. Applicant must complete the "Employee Verification" section. Applicant's physician must complete "Annual Physical Verification" section. Must receive physical the same year in which member is applying and be an active LMHF member at the time of his/her annual physical.
- 4. The completed and signed form must be submitted to the LMHF office either in person or via U.S. Postal Service (*Self-addressed envelopes are provided in packets*).
- 5. A debit card will be delivered to their residence via U.S. Postal Service. Please allow three to four weeks for delivery following LMHF's receipt of documentation.

Wellness Incentive Program - Part II

To qualify, employee and/or spouse must each participate in twelve (12) wellness-related activities. Upon completion and LMHF verified, participant will receive an additional \$50.00 credit added to their HRA debit card.

- 1. Participate in twelve (12) approved wellness activities.
- 2. Complete the Wellness Activity Redemption form.
- 3. Healthcare provider must complete and sign the Preventative Screening Verification form(s) (if applicable). Must receive screenings the same year in which member is applying and be an active LMHF member at the time of his/her screening(s).
- 4. Submit the Wellness Activity Redemption Form and Preventative Screening Verification form(s), vaccination certification (if applicable) to the LMHF office either in person or via U.S. Postal Service.
- 5. If Part II is fulfilled prior to Part I, documentation will be accepted and kept on file at LMHF. Participant will not be rewarded \$50 for Part II until LMHF receives documentation confirming completion of Part I.

All documents must be submitted no later than February 15 for the prior year's participation and <u>must contain original</u> signatures! <u>Faxes and/or scans are Not Accepted</u>

Wellness Packets can be obtained through your Human Resources/Personnel Department, LMHF office at 601-7980 or online at www.LMHF.net



Pioneer Central Schools







Wellness Incentive HRA cards for

Part I & II Distribution has changed

HRA cards that LMHF members receive for participating in the Wellness Incentive plan will now come directly from Nova not the LMHF office so please do not throw them away.

See sample card below.





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