

OCTOBER 2008

HealthLine

INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 4
HEALTH & WELFARE PLAN



Dear Health & Welfare Participant,

THIS EDITION OF *HEALTHLINE* addresses the following topics:

- New life insurance vendor with enhanced benefits
- Addition of Limited Service Clinics to PPO network
- Clarification of recent mailings of CVS Caremark ID Cards

NEW LIFE INSURANCE CARRIER

Effective Aug. 1, 2008, the Health & Welfare Fund has a new life insurance policy through Aetna. The previous policy with ReliaStar has been replaced. The life insurance benefit remains the same for covered employees enrolled under the basic benefit plan.

- The life insurance benefit amount is \$50,000. Your life insurance benefit is reduced to \$32,500 when you reach age 70 and are still an active employee; it is further reduced to \$25,000 when you reach age 75 as an active employee; and it is further reduced to \$12,500 when you reach age 80 as an active employee.
- Upon your death, the proceeds of your life insurance are paid in a lump sum

by Aetna to the beneficiary you have on file with the Fund Office. If you need to update beneficiary information, contact the Fund Office for a new census card.

In addition to the financial protection your life insurance can help provide, your Aetna insurance provides other valuable services you can use.

- **Accelerated Death Benefit:** You can collect up to 75 percent of the life insurance benefit and use the money to pay medical or other bills during your illness if you are diagnosed with a terminal illness. A terminal illness is defined as having life expectancy of less than 24 months. To obtain a claim form, contact the Fund Office.
- **Bereavement and Grief Counseling:** The Aetna Life Essentials Program offers three telephone grief counseling services to your beneficiary and family members for up to 12 months after you pass away. Information about these sessions can be obtained by calling **800-806-8891**.

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HARVARD HEALTH TIP

The FDA defines a whole-grain food as one that contains at least 51 percent whole-grain content by weight. If a product meets that standard, it may carry the following statement on its label: "Diets rich in whole-grain foods ... may help reduce the risk for heart disease and certain cancers."

Source: Harvard Health Publications • www.health.harvard.edu

South-of-the-Border Specialties

MEXICAN FOOD IS A PERENNIAL FAVORITE, but healthy low-fat recipes aren't easy to find. The following recipes from *The Road to a Healthy Heart* by Joseph C. Picatella are quick, economical, and low in calories and fat.

The Cheese and Bean Quesadillas are high in fiber and quick and easy to prepare. The Mexicali Corn Salad is low in sodium and a great addition to almost any meal.



CHEESE AND BEAN QUESADILLAS

- 1 15-oz. can black beans
- ½ c. red onion, diced
- ¾ c. tomatoes, diced
- ½ t. ground cumin
- 6 8-inch tortillas
- 1½ c. low-fat cheddar cheese, grated

Preheat cookie sheet in a 400° oven. Drain beans, rinse, and pour into a bowl. Add onion and tomatoes. Sprinkle with cumin and mix with a fork.

Place one tortilla on cookie sheet. Sprinkle with ¼ cup of cheese and five heaping tablespoons of the bean mixture. Add an additional ¼ cup of cheese and top with another tortilla. Repeat procedure with remaining tortillas.

Bake the tortillas for five minutes, then turn them over and bake five minutes more. Using a pizza cutter, slice each quesadilla into six pieces. Serves six.

Per Serving Calories—286, Fat—6 gm, Calories from fat—19%, Cholesterol—6 mg, Sodium—791 mg, Carbohydrates—42 gm



MEXICALI CORN SALAD

- 3½ c. fresh corn kernels
(or 16 oz. frozen)
- 1 15-oz. can kidney beans,
drained and rinsed
- 2 ripe tomatoes, diced
- 1 red pepper, diced
- 1 yellow pepper, diced
- ½ c. celery, diced
- 1 c. fresh cilantro, chopped
- 1 T. olive oil
- ¼ c. fresh tomato salsa
- ½ t. chili powder

Combine all ingredients in a large salad bowl. Chill before serving. Serves eight.

Per Serving Calories—153, Fat—1.4 gm, Calories from fat—8%, Cholesterol—0 mg, Sodium—221 mg, Carbohydrates—5 gm

For more recipes, see *The Road to a Healthy Heart* by Joseph C. Picatella, Workman Publishing, 2006, \$14.95.

CUT THE FAT

Limiting how much saturated and trans fat you eat can help reduce your blood cholesterol level and lower your risk for coronary artery disease. **The best way to reduce saturated and trans fats in your diet is to limit the amount of solid fats**—butter, margarine, and shortening—in the foods you eat.

HOW TO AVOID COMMON **Self-Care Mistakes**

IT MAY NOT BE NECESSARY TO CALL YOUR DOCTOR OVER EVERY LITTLE FEVER OR SNIFFLE. But when you're calling the shots, you want to be confident you're making wise health care decisions.

Here are steps to take to avoid some common self-care mistakes.

- **Don't take more medication than the label recommends.** Some people think if one dose of medication is good, then two must be even better. But the dosage recommendations on the package are there to protect you.

For example, too much ibuprofen over time can cause gastrointestinal bleeding or ulcers. Too much acetaminophen can cause liver damage.

- **Don't treat symptoms without treating their cause.** One danger of self-treating with OTC drugs is confusing symptom relief with a cure—meaning your underlying health problem may continue or worsen even as you start feeling better.

When in doubt, ask your pharmacist or doctor for advice.

- **Don't treat for too long before calling your doctor.** You won't always save money by not seeing the doctor.

For example, if you don't start taking antibiotics right away for a urinary tract infection, what began as a minor condition could evolve into a full-blown kidney infection that requires stronger, more expensive antibiotics or even hospitalization.

- **Don't use someone else's prescription medications.** It's common for people to give friends or family members their medications to try. But that's not safe for several reasons.

For starters, some drugs require a prescription because they may not be safe for everyone, may need special monitoring, or may interact with other medications.

- **Don't use leftover prescription medications.** If you have medication left over from a previous illness and then you develop similar symptoms, does it make sense to take the leftover medication? Not necessarily. Your symptoms may be the same but the condition—and its appropriate treatment—may be different.

- **Don't take herbal or other alternative medicines without telling your doctor.** Herbal remedies are drugs and need to be taken with caution. Some can raise blood pressure, thin the blood, or interact with other medications you may be taking.

Anytime your family's health is in your hands, pay attention to your information sources: Are you visiting the right Web site? Reading the label? Tapping into the expertise of your doctor or pharmacist? All the information you need is there; it's only a matter of seeking it out.

To learn more: American Academy of Family Physicians, www.familydoctor.org

ESSENTIAL SELF-CARE

Self-care means actively monitoring your health for signs of approaching illness and knowing when it's appropriate to seek professional care. **For those living with long-term conditions, it means learning to manage symptoms and treatments and minimize complications.** Self-care means staying informed, asking questions, and making decisions.



DEPRESSION Myths and Facts

LIKE OTHER MENTAL HEALTH CONDITIONS, DEPRESSION IS WIDELY MISUNDERSTOOD, leading many people to believe myths about the condition, the people who have it, and its treatment.

Learning the facts about depression can help you seek help for yourself or a loved one who suffers from it.

Myth: Depression isn't a real medical problem.

Fact: Depression is a serious medical condition that affects people's mental and physical health. It has a variety of causes, and genetic and biological factors can influence its development.

Myth: Only women become depressed.

Fact: According to the National Institute of Mental Health, more than 6 million American men become depressed each year, but the number is likely to be much greater since many men are undiagnosed.

Women who are depressed often feel sad, guilty, hopeless, and worthless. Men with the condition are likely to have different symptoms that may include drinking alcohol to excess or becoming frustrated,

discouraged, irritable, and sometimes abusive or violent. Men also are more likely to commit suicide because they're less likely to seek help.

Myth: Since depression is genetic, only people who have a family history of it can get it.

Fact: In the same way you can be genetically predisposed to high blood pressure or diabetes, you can be genetically predisposed to depression. This doesn't mean, however, that if a family member has a history of depression, you're fated to suffer from it as well. Just be aware that your chance of having depression is higher than if you had no family history of the illness, and seek treatment if you start to develop symptoms.

Myth: Getting help for depression doesn't make it go away any faster.

Fact: Depression is highly treatable, and 80 percent of people who obtain treatment from a mental health professional find relief.

Effective treatment usually consists of talking with a therapist about your life and the circumstances that may have caused your depression. Many people also are prescribed an antidepressant medication that treats chemical imbalances in the brain. People with depression who aren't treated often have the condition for years—and untreated depression is a major risk factor for suicide, especially among men.

To learn more: Mental Health America, www.nmha.org

DEPRESSION AND ILLNESS

Studies show major depression often occurs with other illnesses. According to the National Institute of Mental Health, **it affects some 25 percent of people with cancer, 27 percent of people who abuse alcohol and drugs**, 10 to 27 percent of people who have had strokes, 33 percent of people who have had heart attacks, and 50 to 75 percent of people with eating disorders.

SAY GOOD-BYE to High Cholesterol

WORRIED ABOUT HEART DISEASE?

There's some good news: Once arteries start getting clogged after years of high-fat eating and too little exercise, it may be possible to reverse the process.

New research suggests (at least for some people with coronary artery disease) that statins, a commonly prescribed medication, can actually begin to reopen the arteries that supply blood to the heart. The drug therapy is most successful when combined with dietary changes, exercise, and other lifestyle improvements.

CORONARY ARTERY DISEASE

Smoking, high blood pressure, and high cholesterol all contribute to coronary artery disease. So do obesity, diabetes, and physical inactivity. In a process called hardening of the arteries, plaque forms in the arteries and excess fat, calcium, and other deposits build up.

SHIFTING INTO REVERSE

If you already have coronary artery disease, the key to controlling or reversing it is to lower your blood cholesterol level.

Your options may include:

- **A heart-healthy diet.** Eating a diet low in animal fat and saturated fats and higher in unsaturated fats can typically lower the cholesterol level by 10 percent. That's not enough by itself to reverse coronary artery disease, but it can help control cholesterol.
- **A healthy diet also includes** foods low in calories, sodium, and refined sugars, and rich in fruits, vegetables, and low-fat dairy products.
- **Physical activity.** A heart-healthy lifestyle includes at least 30 minutes

of aerobic exercise a day on most days of the week. Examples of aerobic activities include brisk walking, jogging, swimming, cycling, and jumping rope.

Adding a moderate strength-training regimen also provides significant health benefits. Be sure to get your doctor's approval and guidance before starting an exercise program.

- **Drug therapy.** Your physician may recommend a low-fat diet and exercise before suggesting medication. But if you're trying to reverse heart disease, not just prevent or control it, you also need drug therapy.
- **Quitting smoking.** Smoking just one or two cigarettes a day can significantly raise your risk for heart attack, stroke, or other cardiovascular conditions. For healthy people, the risk of getting coronary artery disease decreases by 50 percent within one year after quitting smoking.
- **Diabetes control.** People with diabetes are at increased risk for high cholesterol and high blood pressure, which in turn raise the risk for heart disease.
- **A healthy weight.** Excess weight contributes to the onset of cardiovascular disease. It tends to raise cholesterol and blood pressure levels and increase the risk for diabetes.

Remember, if you have coronary artery disease and want to reverse your illness, the most important advice is to maintain a healthy cholesterol level.

To learn more: National Heart, Lung, and Blood Institute, www.nhlbi.nih.gov



Take Part in Every Medical Decision

IN SOME MEDICAL SITUATIONS, THERE'S A CLEAR RIGHT ANSWER regarding which treatment is best.

In other cases, such as breast or prostate cancer, for instance, there are several valid treatment options, each of which is effective. What's best for you can depend on your values, preferences, the stage of your condition, cost considerations, and the risks and benefits that go along with each choice.

Well-informed people who play a significant role in deciding how they're going to treat their health conditions are more likely than those who aren't involved to feel better about the decision process, make decisions that support their values, stick with their treatments, and rate the results of treatments as better, according to research by the Foundation for Informed Medical Decision Making in Boston.

The following strategies can help you take part in every medical decision you'll face.

- **Ask your doctor** to recommend and explain the most effective treatment options for your condition.
- **Learn about your condition** and the recommended treatments, gathering factual information from reputable

Web sites, books, self-help groups, and patient organizations.

One of the best Web sites to visit is the National Guideline Clearinghouse, www.guideline.gov. It provides information based on scientific evidence about which treatments work for certain conditions and which don't.

- **Take time to consider your personal preferences** regarding your quality of life and family situation and how they relate to your treatment options.

For example, some men diagnosed with prostate cancer can choose between chemotherapy and radiation, both of which can have serious side effects such as incontinence or erectile dysfunction, or watchful waiting, which has no immediate side effects on quality of life but may seem like a passive response.

ASK FOR INFORMATION

Having accurate information is necessary before you make a decision regarding treatment options, medical tests, or surgery. Asking your doctor the following questions can help you get the answers you need.

- What are the chances the treatment will work?

- What are the risks and benefits?
- What are the side effects?
- Is the treatment painful? How can the pain be controlled?
- How much does the treatment cost? Will my health plan pay for it?

Once you have the answers to these questions, make a chart of "Benefits and Risks" or "Pros and Cons" to help you decide if the treatment is right for you.

WEIGH THE BALANCE

After you know the facts, you must decide if the benefits outweigh the risks.

Working with a doctor with whom you have open communication can help you clarify your treatment preferences, taking into account medical research and your personal concerns.

To learn more: Food and Drug Administration, www.fda.gov, search for "Guide to Choosing Medical Treatments"



TOOLS FOR CHANGE

Are You a Good Listener?

Every day, you have many conversations—with coworkers, friends, and family members. You hear the words, but do you pay close attention to what is being said?

There's a big difference between hearing somebody and being a good listener. Active listening is the art of listening and responding to another person to improve communication and increase your understanding of each other.

Here are some tips to help you become an active listener:

- **Offer your full attention.** Put aside everything else and make eye contact with the speaker. Give encouraging nonverbal cues, such as nodding.
- **Don't interrupt.** No matter how eager you are to respond, allow the speaker to finish.
- **Rephrase the speaker's points,** including his or her emotions. For example, say, "I want to make sure I understand: You feel [name the emotion] because [state the issue]?"
- **Don't contradict the speaker.** Doing so can cause tension or prompt the speaker to withdraw. You don't have to agree, but respond neutrally.
- **Ask questions.** Make them constructive and avoid questions that are intrusive, too personal, or off the subject.
- **Don't spend your listening time thinking of a response.** Fully engage your mind in absorbing what is being said. Shifting your body position can help you refocus.

Assess Your Fitness Goals

WHETHER YOU WANT TO RUN A MARATHON or just start exercising regularly, having a goal is an important tool.

Fitness goals help focus your attention, increase your motivation, channel your energy, and provide checks and balances so you're accountable. But unless they're carefully crafted and reassessed regularly, they can backfire.

To help you formulate exercise objectives that work for—not against—you, try these specific goal-setting recommendations, which form the acronym SMART.

SPECIFIC

The best exercise goals are specific. A goal such as "I will exercise for at least 30 minutes at least three times a week by the end of December" fits the bill, but one such as "I want to exercise to look and feel better" is too vague to be useful.

If you have a big exercise goal, such as running in a 10K, break it down into specific performance goals that will help you get there.

For example, strive to train five days a week for at least several months before the race date, and include rest days so you can recover. Give yourself credit for all you do by recording what you've done each day or crossing it off your calendar.

MEASURABLE

The most helpful goals are those where you can measure your progress, whether it's crossing your exercise sessions off your to-do list or measuring a specific outcome, such as improving your running time or being able to lift more weight.

ACHIEVABLE AND REALISTIC

Your goals also should be challenging enough to inspire you, but not so difficult



that you feel like dropping them after a week or two.

Trying to lose 30 pounds a month isn't realistic or achievable, but losing 6 to 8 pounds might be—if you have the time and energy to focus on exercising and cutting calories.

TIME-SPECIFIC

Your goals should have a clear endpoint, a benchmark at which you know you've accomplished them. If you're training for a marathon, participating in the race and getting to the finish line is the objective. After you've reached that marker, you can set a new time-specific goal to get you to the next endpoint, and so on.

There may be times when you want to stop, but it's important to keep going. Goal-setting can help you get to the finish line.



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The Aetna Compassionate Care Web site, www.aetnacompassionatecare.com, helps participants and caregivers by providing them with information to help talk about and cope with end-of-life issues.

Questions about the life insurance or ancillary benefits can be directed to the Fund Office. Any life insurance appeals can be directed to Aetna at PO Box 1459, Lexington, KY 40572-4549, or faxed to **800-238-6239**.

LIMITED SERVICE CLINICS IN PPO NETWORK

Limited Service Clinics (such as CVS Minute Clinics) are a new type of health care provider that became available effective Sep. 1, 2008. These clinics are being offered in retail and other nontraditional settings. They offer increased access to care by enabling you to obtain treatment for minor ailments (such as coughs, colds, and aches) and vaccines in locations that are convenient for you. These clinics also increase access to care by letting doctors' offices focus on more intensive treatment of more serious or chronic conditions.

The cost share for covered services is \$25 per visit, the same as you would pay for similar services provided by a primary care provider or specialist. No patients under 2 years of age will be cared for at these clinics, and no preventive services or tests will be provided.

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CAREMARK ID CARDS

The Fund Office has received calls from some participants who are confused about three recent mailings from Caremark involving ID cards. To clarify:

- **New CVS Caremark plastic ID cards** were issued to replace Social Security numbers as identification. These cards, which also have the Local 4 logo, are intended to be used for covered prescriptions at retail pharmacies or through Caremark mail service.
- **RX Savings Plus paper cards** were sent out to offer you discounts on non-covered drugs or pet medications purchased at retail pharmacies. Examples of noncovered drugs are cosmetic, infertility, or erectile dysfunction prescriptions. (Note: Noncovered prescriptions can also be purchased at a discount if obtained through Caremark mail service using the CVS Caremark plastic ID card). You are always responsible for 100 percent of the cost after the discount for noncovered prescriptions.

- **CVS Caremark Extra Care Health key tags** were sent out to help you save money on health-related items. A 20 percent discount is available on CVS brand FSA-eligible products, such as over-the-counter medications. Additionally, you can earn "Extra Bucks" rewards based on how much you use these key tags.

Sincerely,

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October is National Breast Cancer Awareness Month. To learn about the importance of early detection and hope for future generations, visit www.nbcam.org.