

More to Come



The Trustees are excited to provide you and your family with the _____ program to make a positive difference in your current and future health. Now it's up to you to make the most of it. You are encouraged to start taking steps to make 2008 and beyond the healthiest years of your life—see your doctor to get healthy and stay healthy. If you have a health condition, follow the regimen prescribed by your doctor.

Look for more communications with the _____ logo in the coming months. When you see the logo, you'll know that you're getting important health information and program updates to help you and your family lead healthier lives.

For more information about your benefits, go to the Fund's web site at www.ironworkerstristate.com. If you have questions about your benefits, call the Plan Administrator at _____.



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Mailing label here

New Wellness Benefit for 2008 and Beyond



We Care About You!

The Trustees of the Tri-State Welfare Fund are always looking for ways to improve the benefits and services that the Fund provides to you as Fund participants. At the same time, the Trustees are also interested in making the Fund ever more efficient. Both of these goals can be achieved with the new wellness benefit, _____.

_____ provides coverage for preventive care, which can identify health issues earlier so that they require less intense therapies. In addition, several adult screening tests have been added to the list of covered services. This is good news for you and your health – and it's also good news for the Fund because healthy participants save the Fund money.

The Trustees commissioned a study to determine the diagnoses or medical conditions that were most prevalent among Fund participants. All of us at the Fund wanted to help as many people as possible to regain and/or maintain good health. The study indicated that the highest



health risk was associated with diabetes. Cardiovascular diagnoses came in second, with a combination of asthma/respiratory, depression, and breast cancer as the third highest risk. Initially, the _____ program focuses on conditions that relate to diabetes, high blood pressure/heart disease, high cholesterol, and asthma, although other health issues are addressed.

We will continue to grow and add more benefits to the _____ wellness initiative over the coming months. Look for mailings with this new _____ look about any Plan changes as well as health tips. Fund benefits are being designed to do their part to provide you with the benefits and resources to make it easier to take care of your and your family's health. But, you have to do your part, too – by using the benefits provided through the _____ program to maximum advantage.

What Your New Wellness Benefit Covers

For adults, your new _____ program covers preventive care services at 100%, up to a \$1,000 per person each year (effective January 1, 2008). The prior annual maximum was \$300 per person. Covered services include annual physicals, immunizations, age- and gender-specific screenings, and more.

For children, the wellness benefit is not changing and covers services at 100%, up to \$300 per year (\$500 for the first year), for check-ups and immunizations recommended by the American Academy of Pediatrics (AAP) Immunization Guidelines.

In addition, effective March 1, 2008, copayments for prescription drugs used to treat diabetes, high blood pressure/heart disease, high blood cholesterol, and asthma have been lowered to ensure that if you have one of these chronic conditions you receive the medications you need. See page X of this brochure for information on the addition of the special Therapeutic Class Prescription Drug Benefit.



How the Wellness Benefit Works

The deductible does not apply to wellness services, so the Plan pays benefits from the first dollar for wellness expenses. And, once you reach the annual maximum, coverage does not end – benefits will be paid as any other medical expense, which means they are subject to the Plan’s deductible and coinsurance provisions.

Well Child Care and Immunizations

Coverage includes a well-child office visit and scheduled immunizations as recommended by the AAP. The AAP web site, www.aap.org, has all of the schedules as well as additional information about immunizations and child development.



Adult Routine Physicals

Getting routine physicals is a good habit. A short investment of time can make a tremendous difference to your health. If you’re “in the pink,” congratulations! If, however, you show some warning signs or health issues, the good news is that you’ll catch them early, before they became bigger health problems. Simple tests, such as blood and urine analyses, can detect many conditions. It’s far easier to treat common health issues such as high cholesterol, high blood pressure/heart disease, diabetes, and asthma when they are caught early. In many cases, medication and/or lifestyle changes are sufficient to get you on track toward better health.



- Here’s a general guide for getting routine adult check-ups:
- ▶ **Ages 18 to 39**—every one to three years
 - ▶ **Ages 40 to 59**—every one to two years
 - ▶ **Age 60 and older**—every year

Talk to your doctor to see how often you should have a physical.

Adult Immunizations

Immunizations are not just for kids. Adults need a little shot in the arm sometimes too. If you have average risk (no health issues), the Centers for Disease Control and Prevention (CDC) recommends these immunizations:

- ▶ Influenza (flu) vaccine annually, beginning at age 50
- ▶ Pneumococcal vaccine, once, at age 65 or older
- ▶ Tetanus (Td) every 10 years
- ▶ Zoster (herpes) for people age 60 and older
- ▶ Human papillomavirus (HPV) for women who are age 26 or younger

In addition, you may need other vaccinations if there is no evidence of immunity or prior vaccination for:

- ▶ Diphtheria and pertussis (along with tetanus) in the Tdap instead of the Td vaccine;
- ▶ Measles, mumps, and rubella (MMR) under the age of 50; and
- ▶ Varicella (chickenpox).

If you have any health conditions or your environment increases your risk, your doctor may recommend additional immunizations.



Screening Exams

And, don’t forget to talk to your doctor about screening exams—they can save your life!

Talk to your doctor about the screenings you need, based on your risk level. However, if you are at average risk, the U.S. Preventive Services Task Force (USPSTF) recommends these cancer screenings:

- ▶ **For men and women age 50 and older:**
 - Fecal occult blood testing (FOBT) annually;
 - Flexible sigmoidoscopy, in five-year intervals;
 - Colonoscopy, every ten years;
- ▶ **For women:**
 - Age 21 and older, Pap smears annually;
 - Age 40 and older, mammograms every one or two years;
- ▶ **For men:**
 - Age 50 and older, Prostate Specific Antigen (PSA) test annually; and
 - Age 65–75, a one-time screening by ultrasound for abdominal aortic aneurysm for those who have ever smoked.

Please note that full body scans are **not included** under the _____ program and are **not covered** under the Medical Plan.

You and your doctor are partners in your health care. Talk to your doctor about screening tests you should have and how often.

Early Detection Saves Lives

Five Year Survival Rates for Most Common Cancers by Stage at Diagnosis, 1996–2002 ¹			
Cancer Site ²	Local	Regional	Distant
Skin	99.0%	64.9%	15.3%
Prostate	100%	--	33.3%
Lung	49.3%	15.5%	2.1%
Breast	98.1%	83.1%	26.0%
Colon	90.4%	68.1%	9.8%

¹ American Cancer Society
² Local cancers haven’t spread past the organ of origin, regional cancers have spread to surrounding tissues and/or lymph nodes, and distant cancers have spread to other body parts away from the original area.

Adding Therapeutic Class Prescription Drug Coverage

In light of the most common diseases and diagnoses in Fund participants, we’ve lowered the copayments for medications used to treat diabetes, high blood pressure/heart disease, high blood cholesterol, and asthma. We’ve lowered the copayments to encourage you to take the medications your doctor prescribes. It’s up to you to do your part and follow your doctor’s orders.

The copayments for these classes of prescriptions are:

Type of Prescription	Retail Pharmacy (up to 34-day or 100-unit supply)	Mail Order (up to 90-day supply)
Generic	\$0	\$0
Preferred Brand	\$10	\$20
Non-Preferred Brand	\$20	\$40

