

Health Traxx

For Teachers by Teachers

A PUBLICATION FOR TEACHERS HEALTH TRUST PARTICIPANTS

SUMMER 2007



VOLUME 6, ISSUE 2

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HEALTH TRAXX

*The Teachers Health Trust
Quarterly News Publication*

Health Traxx is published quarterly by the Teachers Health Trust to help participants make life-saving choices when making health care decisions. Although editorial content is based on sound medical information, we ask that you consult a health care professional for all matters of concern. We encourage you to keep copies of this news publication to build a handy home-medical reference or recycle issues to friends and family.

Any opinions expressed by an author/source whose article appears in this publication are solely the opinions of the author/source and do not necessarily reflect the views of the Teachers Health Trust. If you have questions or comments regarding this issue, email the Trust at wellness@teachershealthtrust.org or write to:

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A MESSAGE FROM THE CEO

Spring is in the air and a young man's fancy turns to...his health. What are we all doing to take care of our bodies and minds and to be responsible for exercising our options to obtain optimal and affordable health care? The Trust offers wellness programs, educational materials and seminars on health-related topics, prostate and mammogram screenings, limited rebates for health clubs and a host of other benefits designed to keep you out of the doctor's office and the hospital. While many diseases and illnesses are unavoidable, we owe it to ourselves to do everything possible to maintain a healthy lifestyle and to enjoy the good things that life has to offer. Take advantage of what we have to offer and you may experience a new you! Our Wellness Division is here to serve you, and I would encourage you to look at what it has to offer by going to our Web site at www.teachershealthtrust.org and clicking the Wellness Division link.

On another note, the Trust is being deluged with bills from a new breed of medical doctor called a hospitalist. This doctor only sees patients in a hospital setting, either through an agreement with a hospital or at the request of your own doctor who does not wish to make hospital visits. The Trust has prepared an informational mailer on this subject which you should have already received. The difference in your out-of-pocket responsibility for a contracted hospitalist (the Trust is contracted with four groups and looking for more) and one that is not contracted is startling, so inquire when an unfamiliar doctor walks up to your bed at the hospital. Please read the information sent to you by the Trust for more details.

Enjoy the summer, stay healthy and make a conscious effort to keep fit – it will pay dividends.

Sincerely,

Peter Alpert
Chief Executive Officer

TRUST TIDBITS



Don't miss these important Trust deadlines and events:

• The Clark County School District's Annual **New Hire Teacher Orientation** will be held on August 15 through 17, 2007, at Cox Pavilion, University of Nevada, Las Vegas.

• The deadline for the submission of **Domestic Partner Verification Information** is May 14, 2007. An annual reminder was mailed April 16, 2007. Please submit a signed statement confirming that you and your domestic partner continue to meet all of the qualifications of the Plus One Enrollment Benefit by **May 14, 2007**.

• There is now a faster, easier way to obtain your **Eligibility Documents and Forms**. You can now download your required eligibility forms from the Teachers Health Trust Web site. Log on to www.teachershealthtrust.org and click on the "Trust Forms" link. The following forms are available online:

- Consent to Discuss/Disclose Personal Protected Health Information (PHI)
- Medco Mail Order Forms
- Declaration of Domestic Partnership
- Student Status Verification
- Coordination of Benefits (COB)
- Two CCSD Employee Enrollment Form
- VSP Out-of-Network Services Form
- Termination of Domestic Partner Form
- Dependent No Longer Meets Student Status Requirements Form

You also have the ability to request a change form via the web.

• **Notice for Pregnant Families:** As you near the final months of your pregnancy, you anxiously make final arrangements for your new arrival. If you have two insurances (that is, you have insurance through the Trust and your spouse has insurance through his work or vice versa), this is

also the time to find out if your other insurance carrier has an automatic enrollment policy. If so, your child could automatically be enrolled in your spouse's policy for the first 31 days of his or her life. At this time, it would be necessary to inform the Trust of the dual coverage as you enroll your child in your own plan.

• You will be receiving your **2007 Summary Plan Document (SPD) CD** in the mail soon. This convenient CD-Rom allows you to find answers to your health benefit questions quickly and efficiently. Keep it on hand as a handy reference.



• The first annual **Prostate Cancer Awareness Campaign** and the annual **Breast Cancer Awareness Campaign** are scheduled for September, October, and November. Watch your mailboxes for informational flyers and find more information regarding these programs in the fall issue of *Health Traxx*.

Trust Office Closings

The Teachers Health Trust offices will be closed for the following holidays:

Memorial Day	May 28
Fourth of July	July 4
New Hire Orientation	August 15-17



CONGRATULATIONS



WellFit for Life Participants and Best Weigh to Go Teams

Congratulations and job well done to all those who competed in the 2007 WellFit for Life Program. You certainly are already reaping the benefits of your hard work and dedication to this new lifestyle change. The WellFit for Life Mileage and Worksite winners as well as the Best Weigh to Go team winners will be announced on the Trust Web site early in May and featured in the fall issue of *Health Traxx*. Log on to www.teachershealthtrust.org to view the WellFit for Life results and don't forget to "Eat Less, Move More."



From top left, clockwise: April Kermani, Deseret Women's HealthCare, provides information to Trust participants on prenatal and postnatal care in Lifestyle Decisions™ seminar; Susie Roles, Certified Pilates Instructor, leads Trust participants and staff in weekly Pilates/yoga sessions; Trust participants listen to a presentation in the Marvin Sedway Conference Room; and participants await the beginning of the Diabetes Management Seminar, provided by Lifestyle Decisions™.

THANK YOU

to our **Sponsors**



Out-of-Network Hospitalists

Your Bucks

They come into your hospital room and introduce themselves. They check your vitals, look at your chart, ask you how you are feeling. Then, they are gone, and it is possible that you will not see them again during your entire stay at the hospital. They are called hospitalists, and they could be costing you a lot of money.

A hospitalist is a doctor whose primary focus is the general medical care of hospitalized patients. Hospitals will often assign a hospitalist to a patient when the individual enters the hospital, either through the emergency room or other admission. Just as the Trust contracts with physicians and provides you with a list of In-Network Providers, the Trust also contracts with hospitalists. However, it is possible that during your stay in the hospital, you could unknowingly be seen by an Out-of-Network hospitalist, which would greatly increase your out-of-pocket expenses.

The following is the true story of a Trust participant who did not realize his hospitalist was Out-of-Network:

Dear Teachers Health Trust:

I would like to describe an incident that happened last year so others will not get caught in the same trap.

I went to the emergency room of a local hospital when I started experiencing chest pains. After doing the necessary paperwork, I was admitted to the emergency department and given numerous tests by hospital nurses and technicians. An emergency room doctor reviewed the results with me and suggested that my cardiologist be contacted. The emergency room doctor was employed by the hospital. My cardiologist appeared a little later, reviewed the tests, and thoroughly examined me. He told me that he wanted to do an MRI, and, if that did not show anything negative, I could go home. That procedure was performed and I only had to wait for the results to be interpreted. While waiting, a person wearing a white coat and a stethoscope appeared at my bedside and asked to talk to me. I had never seen this person before and was really in no condition to question anything as I had not slept or eaten for 24 hours. As far as I can remember (which my wife says is accurate), this person took my pulse, listened to my heart through his stethoscope for about 30 seconds, put a business card in my hand, and left. This person, who I later learned was, in fact, a medical doctor, was in my presence between two and three minutes. I never saw this doctor again.

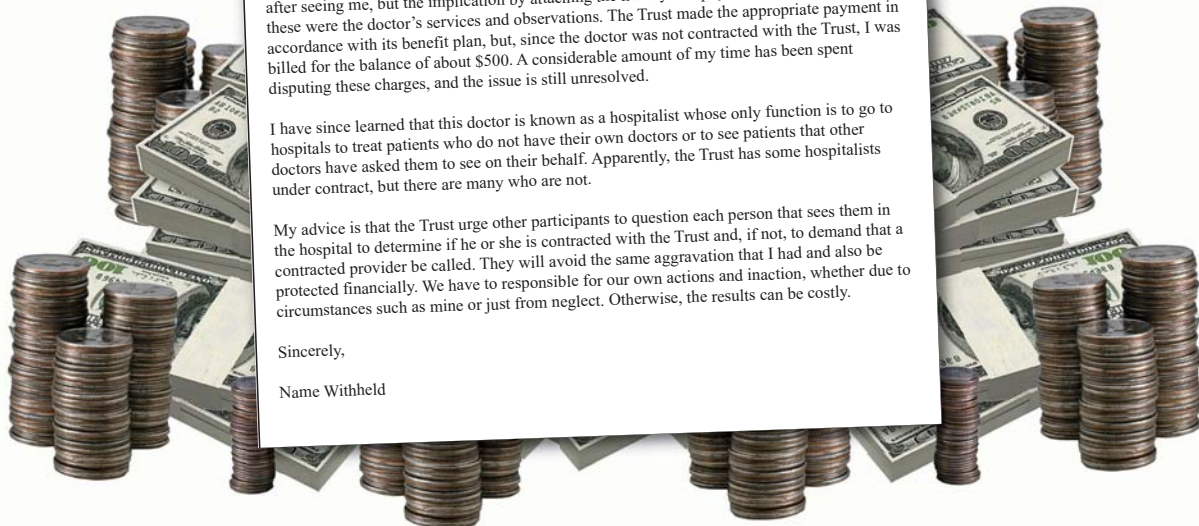
About a month after I was released, I got a bill for almost \$700 from this doctor's billing service. Attached to the bill was my complete history and physical performed entirely by hospital personnel, consisting of two typed pages of comments and test results, yet it was signed by the unknown doctor. I do not know if the doctor reviewed my chart either before or after seeing me, but the implication by attaching the history and physical to my bill was that these were the doctor's services and observations. The Trust made the appropriate payment in accordance with its benefit plan, but, since the doctor was not contracted with the Trust, I was billed for the balance of about \$500. A considerable amount of my time has been spent disputing these charges, and the issue is still unresolved.

I have since learned that this doctor is known as a hospitalist whose only function is to go to hospitals to treat patients who do not have their own doctors or to see patients that other doctors have asked them to see on their behalf. Apparently, the Trust has some hospitalists under contract, but there are many who are not.

My advice is that the Trust urge other participants to question each person that sees them in the hospital to determine if he or she is contracted with the Trust and, if not, to demand that a contracted provider be called. They will avoid the same aggravation that I had and also be protected financially. We have to be responsible for our own actions and inaction, whether due to circumstances such as mine or just from neglect. Otherwise, the results can be costly.

Sincerely,

Name Withheld



Are You Giving Yourself the Blues?

Stop Here!

As the participant's letter suggests, the Trust would like to ensure that you know that you have the right to question who you are being seen by in the hospital setting. The following tips will help you save money and hardship when you have to visit the hospital:

- ✓ **Know who your physicians are.** Ask the admitting staff to ensure all your physicians are within the Teachers Health Trust Provider Network.
- ✓ **Speak your mind.** Question any unfamiliar doctor who enters your room. Request a business card for your records and insist that you be seen by an In-Network hospitalist if the physician is Out-of-Network.
- ✓ **Know what questions to ask.** Be sure to ask any unfamiliar doctor if he or she is **contracted** with the Teachers Health Trust. Simply asking if the doctor takes the Trust insurance does not guarantee that he or she is In-Network.
- ✓ **Inform your family members and friends.** Ensure that anyone who may accompany you to the hospital and may speak on your behalf knows to ask for In-Network hospitalists only.

It is your right and your duty to take control of your health care and to ensure you are doing everything possible to keep your health care costs low. **Please make note of the following names and be aware that these Providers are not part of the Trust Network of Providers.**

Out-of-Network Providers

Cardiovascular & Thoracic Surgery of Nevada	Leela I. Gopalakrishn	Paul Ponnaiya
Children's Acute Care— Nevada	Dennis Gordon	Vishweshwar Ranga
Critical Care Associates	Frank Gruber	Jonathan C. Reboton
Desert Palms Medical Association	Edwin Herd	Kathy Reynolds
Nevada Orthopedic & Spine Center	Nauman Jahangir	Reynold Rimoldi
RMS Healthcare Inc.	Pavan Janapati	Ardeshir Rohani
Shivay Saran International	Robert Johnson	Daniel Sabry
Valley Primary Care Center	Robert Johnson	Lewis H. Self
Mandip S. Arora	Dhires R. Joshi	Rebecca Sinai
Edward Ashman	Ritu Joshi	Mahender P. Singh
Frank Berry	Thomas Kim	Abhinar Sinha
Shalini Bhatia	Michael R. Klein	Ronald Smith
Michael Bradford	Vrijendra H. Kumar	Sean S. Steele
Marc C. Bush	Sharon Landers	Finch Sudhir
Bashir Chowdhry	Daniel Lee	Kent A. Swaine
Ishitaq Chowdhry	Patrick McNulty	Arthur Taylor
Miguel M. Gonzales	Javed Malik	Thomas Tetzlaff
Leela I. Gopalakrishn	Nath Manoj	Michael Thomas
	Gary Morris	James W. Vahey
	Ramanathan Muthaian	Sandeep Vijay
	Russell Nevins	Sandhya Wahi-Gurur
	Sukhbir Pannu	Kim H. Won
	Vijay Steele Patel	Conrad Yu

As always, the Trust Service Team is available to assist you with any questions or concerns you may have regarding Out-of-Network hospitalists. For more information, please contact the Service Team at 702-794-0272 or via email at serviceteam@teachershealthtrust.org.

*Misti R. Brock, Publications Specialist
Teachers Health Trust*

Men and the Doctor: Encouraging Health through Prevention

It's a well-known fact—no one likes to go to the doctor.

From annual preventative exams to trips to the quick care for allergies or a virus, in general, women and men alike moan, groan and complain their way through these appointments.

However, studies now show that men are much more likely to take the easier way out of these exams—by just not scheduling them at all.

According to Dr. Jean Bonhomme, president and co-founder of the National Black Men's Health Network, men are less likely to visit the doctor on a regular basis and less likely to even have a primary care physician.

And this means that men are also less likely to take the necessary steps to identify and prevent illness early on, which could end up costing them both a great deal of time, money and heartache later in life.

What's worse is that, according to the Mayo Clinic, the majority of life-threatening health risks men face are preventable. For instance, the Center for Disease Control and Prevention (CDC) cites heart disease and cancer as the top two killers of American men in 2002.

Simply visiting the doctor annually for routine exams could have prevented any number of the 718,450 deaths that resulted from the above two causes alone.

So why do women have a life expectancy that is approximately five years longer than men? Why, according to the CDC, are women 100 percent more likely to go to the doctor than men?

"I would guess that women are just taking more of a proactive approach to their health," said Craig Koppleman, a Clark County School District teacher and Trust participant. "Also, maybe men just procrastinate a little bit more than women."

Koppleman, a Physical Education Specialist at Ronzone Elementary School, agrees with the importance of men taking just as active of a role in their healthcare as women.

"As for me, I try to listen to my body and follow accordingly," Koppleman, who considers himself relatively healthy, said. "I try to exercise three to five days per week. I also try to eat a balanced diet."

Likewise, Koppleman agrees that it is necessary for men to take preventative measures toward insuring their health, steps he has already begun discussing with his own doctor.

"I talked to my doctor and he said now that I am 40, he will be setting up annual preventative exams," he said, recalling a discussion that all men should have with their primary care physician as they near age forty or earlier if they have a history of certain diseases in their families.

The bottom line is, as Bonhomme notes in an interview with CNN.com, there tends to be a disconnection between men and the health care system and, more specifically, a lack of information regarding men's health issues.

This is why the Trust is reaching out to its male participants and encouraging them to listen to their bodies and take an active approach to their health. Take advantage of your Routine/Preventative Care Benefit and look for information this fall regarding the Trust's newest program, the Prostate Cancer Awareness Campaign, which will debut along with the Breast Cancer Awareness Campaign in September.

*Misti R. Brock, Publications Specialist
Teachers Health Trust*

RUTH SJOHOLM IS LEAVING HER CANCER IN THE DESERT.

A LITTLE THING LIKE STAGE III BREAST CANCER WASN'T ABOUT TO SLOW DOWN RUTH SJOHOLM OR MAKE HER GIVE UP THE ACTIVITIES SHE LOVED. AN AVID BIKER AND SKIER, RUTH'S SCHEDULE NOW INCLUDED CHEMOTHERAPY AND RADIATION TREATMENTS AT NEVADA CANCER INSTITUTE WHICH SPECIALIZES IN RESEARCH-BASED CANCER CARE, AS WELL AS EARLY DETECTION AND PREVENTION. IN ADDITION, RUTH FOUND TIME TO TAKE UP NEW ACTIVITIES INCLUDING WAKEBOARDING AND YOGA. TODAY, RUTH IS A TRUE SURVIVOR. AFTER ALL, SHE WASN'T ABOUT TO LET ANYTHING KEEP HER FROM LEADING AN ACTIVE LIFESTYLE. AND THAT INCLUDED CANCER. **HOPE THRIVES IN THE DESERT.**

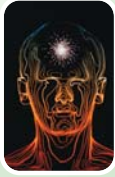


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The example below is “uptown.”

N
W
O
T

1 **SLEEP**

2 **TEASPOON**

3

	ALL		ONE
ONE	ALL		ONE
	ALL	ALL	ONE
	ALL		ONE

4 **midstuckdle**

5 **FAUCET**

Answers on page 16.

Did You Know?



- ▶ One in six men in the U.S. will develop prostate cancer in the course of his lifetime.
- ▶ The motor-vehicle death rate is highest among males ages 15 to 24 years.
- ▶ Compared to women, men have higher death rates for all fifteen leading causes of death and, on average, die approximately six years before the average woman.
- ▶ Men make up approximately 50 percent of the workforce, but they are the victims of 94 percent of workplace deaths, states Men’s Health Consulting.
- ▶ According to the Center for Disease Control and Prevention (CDC), women are 100 percent more likely to visit a doctor for an annual preventative exam than men.
- ▶ Men suffer hearing loss at twice the rate of women.
- ▶ By age 100, women outnumber men eight to one.
- ▶ Because depression often remains undiagnosed in men, men are four times as likely to commit suicide than women, with young men ages 15 to 24 accounting for the highest suicide rates.
- ▶ The CDC states that in 1920, women lived, on average, one year longer than men. Now, men, on average, die almost six years earlier than women.

Sources: Men’s Health Consulting, Male Health Center, and Men’s Health

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HIGHLIGHTS

Ask the Editor

Dear Editor,

This year was my fourth year to participate in WellFit for Life, and, each year, I really dedicate myself to the program. I go to the gym, I eat less junk and healthier foods, and I see both weight and inches come off. But it is the same story after each WellFit ends—I lack motivation to continue, I get lazy with my food choices, and I end up putting all my weight back on in just a few short months. The WellFit program offers me structure and motivation that I cannot seem to find on my own. Any advice on how to stay on track after the program ends?

Temporarily Lighter, Laughlin

Dear Temporarily,

First of all, congratulations on staying with the program, making healthier choices, and seeing results. Getting through the ten-week WellFit for Life program is quite an accomplishment, and you should be proud of yourself. In regard to your question, the reason the program runs ten weeks is because scientific studies have shown that ten weeks is enough time to allow your body to become accustomed to a change. Anyone can eat fruits and veggies and go to the gym for four weeks. It is pushing yourself to remain dedicated for almost three months that trains your body to adjust to the new regimen. After ten weeks, you notice how much better you feel and will, with hope, find that the lifestyle changes you have made are now permanent. However, it is easy to fall off the wagon, so to speak, when you don't have teammates, a food journal, a mileage chart, or the idea of prizes motivating you each day. The trick here is finding exactly what it is about the WellFit for Life program that keeps you motivated and incorporating that into your lifestyle. For instance, if actually seeing how many calories you are eating each day keeps you away from that chocolate cake in the break room at work, continue to keep a food journal. Nothing says you can't carry over this excellent habit into the months following the program. Soon, you will learn the calorie counts in various foods and will mentally jot down just how much you ingest each day (if you aren't already doing this!). If the idea of athletic shoes, your name on the back of a t-shirt, or even the Best Weigh to Go money is what kept you going those ten weeks, then reward yourself! Set up a realistic goal—to maintain your post-WellFit for Life weight well into the summer, for example—and provide yourself with a worthy reward—a new outfit, a mini-vacation, tickets to a show you've been wanting to see—when you've made it to August and accomplished your goal. When it comes down to it, maintaining your dedication and motivation is about making your decision to get healthy permanent. If you look at April 22nd as just another day in the life of a healthy you and not the first day off your "diet," pretty soon your sluggishness, overeating, and bad habits will be a long forgotten thing of the past.



Maintaining a healthy attitude and mental outlook will help you stay on track.

Ask the Editor is a recurring feature of *Health Traxx* that allows participants to write in with health and wellness related questions. For each issue, the editorial staff will choose two to three questions to respond to and print. In addition to questions, your comments are also appreciated. Let us know what

articles you truly enjoyed or what types of articles you would like to see more often. Questions and comments can be sent by mail to the Teachers Health Trust, c/o Misti Brock, P.O. Box 96238, Las Vegas, NV 89193-6238 or via email to mbrock@teachershealthtrust.org.

NUTRITION

Reap the Benefits: Families Eating Together

With the traditional school year coming to an end, many individuals are finding more time to dedicate to themselves and their families. The busy schedules of the typical school day coupled with after-school activities are beginning to slow down, making this the opportune time to make time for one's family. And what better way to do that than over the dinner table? According to Deborah A. Richardson, MA, RD, of Optimal Nutrition, LLC, "meal preparation and nutritional content are often compromised because of the fast pace that we maintain." Read on for Richardson's suggestions on why sitting down to a meal as a family may be greatly beneficial in all areas of life:

- **Family connections.** Mealtime is an opportunity to bond as a family, pray, talk, catch up on family news and learn from one another. Genuine family belonging is hard to achieve if family members are routinely eating in separate locations. Social skills are more likely to be taught.
- **Financial considerations.** Invariably, it will cost you more money to dine out or take out than it will to cook at home. Currently, the restaurant industry's share of the total food dollar is 46%. It's not unusual for individuals and families to eat out several times each week. Meals eaten away from home cost 2 to 4 times as much compared to similar meals made at home.
- **Improved health status.** Baskets of bread, chips and salsa, high calorie desserts and other food temptations... sound familiar? When you eat at home, you control the portions, ingredients and food choices. Remember, restaurants are in the business of pleasure and profit. The "economic" choices of dining out include ordering "combo" meals that offer an entrée, a side dish or two and beverage for a predetermined price. We tend to eat the quantity served. This is no doubt contributing to the obesity epidemic in our country.
- **Nutritious food choice and nutrient intake.** Research shows that meals eaten at home are usually higher in fruits, vegetables and dairy products. Also, at home we tend to minimize fried foods, sodas and high sodium side dishes. Typically the meals are higher in fiber, calcium, folate, vitamins B6, B12, C and E. They also tend to be lower in saturated fat, sugar, sodium, trans fats, cholesterol and total calories compared to restaurant meals.
- **Family dinners enhance academic motivation.** Believe it or not, children that eat frequent dinners at home with their families have higher academic performance than children that don't. Younger children benefit from the exposure to adult conversation as well.
- **Enhanced mental health and less teen substance abuse.** Eating together fosters emotional well-being. Teens tend to report less depression, fewer mental health problems and less boredom. Lower rates of smoking, drinking and illegal drug use among teens are seen with more frequent family dining.



Information adapted from
Deborah A. Richardson, MA, RD
Optimal Nutrition, LLC
www.optimalnutrition4u.com

YOUR SAFETY

Worker's Compensation: What You Need to Know

Injury or illness that occurs on the job is no laughing matter. The following are frequently asked questions that may shed a little light on the rules and regulations when it comes to filing a Worker's Compensation claim.

- Q:** I injured my back at work a few days ago. How long do I have to file a Worker's Compensation claim?
- A:** You must file a report on injuries and/or illness incurred at work within seven days of the incident.
- Q:** I am a soccer coach and was injured on a trip with the team. Do I have to file for Worker's Compensation?
- A:** Yes. If you are participating in any school activities, such as field trips or other events, during or after school and you incur an injury or illness during this time, you **must** file a Worker's Compensation claim.
- Q:** If I trip in the parking lot coming into school before work or while leaving work, should I file my claim through Worker's Compensation?
- A:** Yes. Depending upon the circumstances, Worker's Compensation may cover you from your vehicle to the building and from the building to your vehicle.
- Q:** With whom do I file the claim?
- A:** Report your injury or illness to your administrator immediately and then contact the Clark County School District's Risk Management office at 702-799-2967.
- Q:** What happens if I do not file my claim within seven days and my claim is denied?
- A:** The Trust will **not** consider claims if Worker's Compensation is denied because you failed to file the claim within a timely manner. Remember, you must report your injury or illness immediately.
- Q:** What type of paper work will I be expected to complete?
- A:** You will have to complete a Form C-1 at your place of employment, a Form C-4 at your treating physician's office, and a TPL or Third Party Liability form from the Teachers Health Trust.
- Q:** What if I don't think a claim should be considered Worker's Compensation, or what if I prefer to use my Trust coverage instead of Worker's Compensation coverage?
- A:** It is not up to you to make that determination. If the Trust deems the injury to be work-related, the Trust will not pay for the service, and you will be responsible for any and all charges related to the incident.



Regardless of the severity or type, any injury or illness sustained on the job should be submitted to Worker's Compensation. Being cautious will help ensure your financial security. For more information, contact the Trust Service Team at 702-794-0272 or via email at serviceteam@teachershealthtrust.org.

CASE MANAGEMENT

Trust Offers New Benefit

Effective January 1, 2007, the Trust is offering a new benefit to its participants called the **Extended Network Benefit**.

The **Extended Network Benefit** is applicable to all non-contracted services that cannot be performed within the Trust's Network, including the UCLA Medical Center Network. The benefit is only applied prior to services being performed and billed to the Trust.

The Plan will consider medically necessary inpatient and outpatient facility services at an allowance of two (2) times the Trust's In-Network rate. This allowable will be paid at 100 percent after the Out-of-Network deductible (Diamond \$1,500 or Platinum \$2,500) has been satisfied.

All professional charges and other services will be subject to the Reasonable and Customary (R&C) allowed amount established by the Trust. The Participant will be responsible for all amounts over the R&C and all charges above the Trust allowable payments as well as any non-covered charges.

Mandatory Steps Required to Initiate the Extended Network Benefit

1. The Participant must contact the Trust's RN Case Manager at 702-794-0272 or 866-585-2273.
2. The Participant must have been evaluated by an In-Network Provider and have the relevant medical records for an independent medical review by the Trust to see if the requested surgical/medical approach could be provided within the Trust's or UCLA Medical Center's Network.
3. The Trust RN Case Manager will initiate case management, and the Participant will sign the Case Management Consent Form.
4. The Trust RN Case Manager will review the Extended Network Benefit in the Summary Plan Document (SPD) with the Participant, and the Participant will acknowledge receipt in writing.
5. If the independent medical review states that contracted providers can perform the requested services, the Participant must agree to receive services through Trust contracted centers or be subject to the non-contracted benefits described in the SPD.

Should you have questions or need additional information, please contact the Case Management Department at 866-585-2273 between 8 a.m. and 5 p.m. Monday through Friday or email the Case Management Department at casemanager@teachershealthtrust.org.

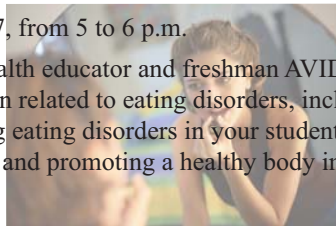
Lifestyle Decisions™ Educational Seminar Series

Join us in the Marvin Sedway Conference Room of the Teachers Health Trust offices, 2950 E. Rochelle, for the following free informational seminar as part of the Lifestyle Decisions™ Educational Seminar Series.

Every Body Is Different: A Discussion of Eating Disorders

When: Thursday, May 31, 2007, from 5 to 6 p.m.

What: Ann Marie Perone, a health educator and freshman AVID with the Clark County School District, will provide information related to eating disorders, including understanding that an eating disorder is an illness, identifying eating disorders in your students, improving self-esteem within your classes, and understanding and promoting a healthy body image. A question and answer session will follow the presentation.



Please R.S.V.P. for each seminar by logging on to the Trust's Web site at www.teachershealthtrust.org. Space is limited. Please reserve your seat at the above seminar at least two days prior to the event. For questions or concerns, please contact the Wellness Division of the Teachers Health Trust via email at wellness@teachershealthtrust.org or call 702-794-0272.

Prevention Today for Wellness Tomorrow.

Against All Odds

INDIVIDUALS OVERCOMING, COPING, LIVING



Harry in the hospital.

The birth of a couple's first child is usually a blissful occasion, filled with laughter and tears of joy.

But when the newborn is eleven weeks early and can fit in the palm of one's hand, that happiness turns into painful tears, sleepless nights, financial worries and weeks and weeks of waiting—which is exactly what new parents Brooke and Benjamin LaGrasso experienced.

Brooke, a special education teacher at Crestwood Elementary, and her husband, Benjamin, a long-term substitute, employed at Variety High School, were preparing for the arrival of their firstborn when, unexpectedly, he arrived on November 14, 2006—weighing only one pound, eight ounces.

"When he was born, they gave him a 10 percent chance of survival," Brooke recalled. "And they said if he did survive, he would have a number of complications and disabilities."

Harrison "Harry" LaGrasso was born, his head the size of a tennis ball and his body fitting in the palm of an adult hand, with underdeveloped lungs, extreme jaundice, and Grade 1 brain bleed, amongst other problems.

"We were terrified and scared," Brooke remembers. "The days turned into weeks. He wasn't doing well, but he was still alive. Still here. Still fighting. But they kept preparing us for the worst."

Remarkably, however, little Harry's eyes and ears were fully developed, and, by the end of December, his parents, doctors and nurses started to notice a change for the better. Then, in January, when their son was fifty-five days old, Brooke and Benjamin got to hold little Harry for the first time.

"He started exceeding everyone's expectations," Brooke said. "No one thought that he would make it, but he did."

Finally, in March 2007, after living his first 110 days of life in the neonatal unit at UMC, Harry got to go home, weighing a healthy six pounds, eight ounces, to his anxiously awaiting Mommy and Daddy.

"We are so, so lucky," Brooke said. "He is not on any medications. He is on oxygen but a very low amount. He is doing so well."

According to Brooke, this traumatic ordeal has taught her what it means to be a survivor.

"Fortunately, very few people are forced to fight for their lives months on end. He is a tiny, innocent little baby, but he has taught my husband and me what the will to live is and what it means to want to be here," she said.

"When everyone was so grim and everyone thought he wouldn't make it, he fought so hard. He is definitely a fighter."

In regard to finances, Brooke praised the Teachers Health Trust and its Case Management Department for being "extraordinary," as she remembered that there were parents in same or similar situations as the LaGrassoes that were having to apply for Medicare and figure out how they would be able to afford to save their children's lives.

"But we never had to worry. We never heard how insurance was not able to pay for a certain test or procedure. Our Case Manager knew us on a first name basis and knew Harry's case very intimately," Brooke said. "There are parents that go bankrupt over stuff like this. We were so lucky that nothing like that happened to us."

Now, thankful to be at home caring for her healthy and rapidly growing little boy, Brooke offered a few words of advice for other parents who may be in a situation with a sick child or a pre-term pregnancy.

"You must listen to the doctors and learn as much as you can about what they are talking about. You must try to inform yourself as much as possible so you can understand," she said. "Take it day by day. Know that they are going to survive and they will."



Harry at home with oxygen cannula.

While the HEROS section of *Health Traxx* honors a licensed employee that is dedicated to living a healthy life, Against All Odds recognizes a family or dependent of a licensed employee who is living with or has survived a life changing disease or condition or who has been through a life changing experience in regard to health. To nominate your family member for recognition in Against All Odds, contact Misti R. Brock, Publications Specialist, at mbrock@teachershealthtrust.org.



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Answers:

5. leaky faucet
4. stuck in the middle
3. one for all, all for one
2. one-half teaspoon
1. sleep walking

Critics' Corner

With the WellFit for Life program officially over, the Wellness Division tests a new Tae Bo workout—Fat Blasting Cardio—to see if it offers a way to keep participants motivated beyond the ten weeks of the program.

Brenda: For individuals on the go, this DVD offers a great alternative to the gym. It allows you to workout in the comfort of your own home, and the instructor provides guidance for those who want to workout at a low intensity and for those who want to kick it up to the next level. I really like the fact that he doesn't spend the entire workout explaining how to do the moves. As a more intermediate to advanced workout, the instructor moves smoothly from move to move, doing each move slowly through one or two sets of reps before moving into the faster paced, higher intensity version of the same move. He also incorporates resistance bands for sculpting, although these bands have to be purchased at an additional cost. My only complaint about the workout is that it is only forty-five minutes long. I believe the additional fifteen minutes could be used for core training and would round out the hour nicely. One thing that is for certain about the Tae Bo videos is Billy Blanks keeps you wanting more. **A+**



Robin: When I first turned the DVD on, I was turned off by the fact that all the onscreen participants were thin. They don't really have an average person doing the workout, which, to me, is unrealistic. I also don't like how the instructor does not show how to modify the exercise for those who cannot do the moves at the same pace as the class. This is definitely not a beginner's workout. I thought the workout moved very quickly at a tough intensity; however, the instructor did an awesome job coaching. For someone who could keep up with the video, it would probably be a great workout. I can see how you would definitely work up a sweat. The workout just wasn't for me. **D**

Mary: I am an avid lover of Tae Bo and have been using the videos since 1996. Billy Blanks is very positive and motivating. I like the fact that he looks directly into the camera throughout the workout and talks directly to the people at home. I also like that he has had many of the same people in his classes since he first began the program. It is motivating to see the changes in their bodies. And their consistency helps me stay motivated. I also like it because it is intense. It is hard to find any type of cardio workout that is fun and intense at the same time, and I think that is what you get with Tae Bo. My only complaint would be that some of the moves are not for those who are not very coordinated. If you lose your way, you are stuck not knowing what to do and you can lose your momentum. Otherwise, you get a workout for every single part of your body in one, which is great. **A+**

Misti: I was first introduced to Tae Bo in high school when I borrowed a friend's video just for kicks. Since then, I have followed Billy Blanks and his program without fail. From Tae Bo Boot Camp to the newest Tae Bo Amped, I think this program is one of the best overall workouts for both the body and mind. This specific DVD is a great addition to the Tae Bo family because it combines heart-pumping cardio with traditional kicks and punches. Billy is enthusiastic and energetic. Not only does he demonstrate the moves, but one of my favorite parts about this DVD in particular is that he concentrates on using his class to show you proper technique. When one of the members of his class is not doing a move properly, he pauses, shows the class how to do the move correctly, and lets the viewers at home know that proper technique is key. The biggest downside to this DVD, which was purchased at a discount store and not in a pack from the Tae Bo Web site, is that it did not come with the resistance bands used by the class—but this is not all together negative because the workout is flexible enough that you can replace the bands with wrist and ankle weights and reap the same benefits. It is true that this workout was not designed on the beginner level, so those new to kickboxing and Tae Bo should learn proper technique before attempting the moves. Overall, I think that the positive attitude, energy, and passion that Billy and his team bring to the realm of exercise is an awesome alternative to the traditional gym workout. **A++**