

HEALTH

A Publication for Teachers Health Trust Participants



TRAXX

Spring 2015  Volume 14, Issue 1
For Teachers by Teachers

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p.9

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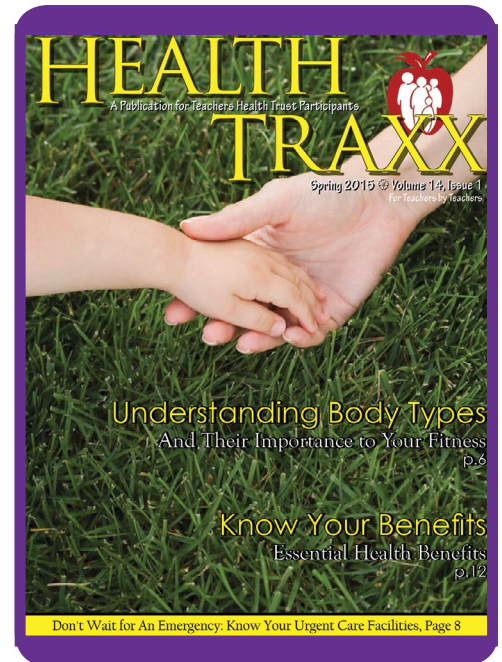
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Trust Tidbits **Announcements, Closures & Important Dates**

Effectuve April 10, 2015: North Vista Hospital No Longer In-Network

North Vista Hospital is no longer an in-network hospital with the Teachers Health Trust. If you choose to utilize North Vista Hospital, your services will be processed at the out-of-network level of benefit, as described in the Plan Document found at www.teachershealthtrust.org. Use of out-of-network medical providers will greatly increase your out-of-pocket costs.

If you are currently scheduled for medical services at North Vista Hospital, you must reschedule services at an in-network hospital facility to avoid higher out-of-pocket costs. Contact your physician to assist you with moving a scheduled service from North Vista Hospital to an in-network facility. For further assistance, you may contact the Trust at 702-794-0272.

2015 WellFit for Life Update

The WellFit for Life and Best Weigh to Go programs are well underway and there are a few important items for those participating to keep in mind:

- ♥ The weigh-outs will be held at the Trust on Saturday, April 18 from 9:00 -11:00 a.m.
- ♥ All Best Weigh to Go teams must weigh out together in order to qualify.
- ♥ All WellFit for Life participants must have their activity log completed by Tuesday, April 21 in order to qualify for prizes.



Trust Office Closures

- Friday, April 3:** Spring Break
- Monday, May 25:** Memorial Day

Important Dates

- Saturday, April 18:** Best Weigh to Go Weigh Out
- Saturday, May 23:** Diabetes Day in May

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 decisions about health care. Although editorial content is based on sound medical information, we ask that you consult a health care professional regarding all medical concerns. We encourage you to keep copies of this news publication for the purpose of building a handy home medical reference guide or to 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 Trust. If you have questions or comments regarding this issue, e-mail the Trust at wellness@teachershealthtrust.org or write to:

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This publication is made in part by the generous donations of network providers and non-profit community organizations. Individuals or companies interested in advertising opportunities in *Health Traxx* should contact Philip DiGiacomo, Director of Health Promotions and Support Services, at wellness@teachershealthtrust.org or contact the Teachers Health Trust Wellness Division at (702) 866-6192. An advertisement in the *Health Traxx* publication does not mean the Trust endorses the provider or service. Ad purchase space is based on a first-come, first-served basis, and advertisers are preferred to be a part of the Teachers Health Trust Provider Network. Other organizations, such as non-profit local or national health agencies or for-profit companies with a valid business license, may advertise once approved by the Teachers Health Trust Special Events Committee.

2015. Diabetes Day in May

The Teachers Health Trust is proud to announce our sixth annual Diabetes Day this spring. The 2015 Diabetes Day in May will be held at Sunrise Hospital (3186 S. Maryland Parkway) on May 16, 2015 from 9:00 a.m. - 12:00 p.m.

Join us at this year's event for seminars on important diabetic-related topics and to visit with an array of organizations dedicated to helping Trust participants better understand how they can live a long and healthy life with diabetes. In addition, a selection of health-conscious food vendors and providers will be on hand to demonstrate services and products targeted at improving the lives of individuals with diabetes and their families.

If you would like to join us for this important event, be sure to visit www.teachershealthtrust.org to complete an online RSVP for the seminar beginning Thursday, April 23, 2015. RSVP is mandatory for family and friends as well.

Lifestyle Decisions

The Teachers Health Trust encourages all participants diagnosed with diabetes to join the Trust's free program, *Lifestyle Decisions*[®], a disease management program focused on helping you learn to self-manage your condition through a variety of educational resources.

Lifestyle Decisions[®] allows you to partake in a variety of different health activities and offers valuable information and resources for learning more about chronic conditions. Through the program, you can learn how to live a healthy lifestyle and manage your condition effectively.

To join, visit the Wellness page at www.teachershealthtrust.org and select *Lifestyle Decisions*[®]. You will then be able to access diabetes-specific articles, links, tips and free educational seminars provided by a variety of specialists who are all part of the Trust Network.

Being diagnosed with a chronic condition is a difficult and life-changing event. The Trust would like to help ease the difficulty by arming you with as much knowledge as possible regarding your condition. *Lifestyle Decisions*[®] is focused on helping you make the right decisions according to your specific needs. For more information or to schedule an appointment to obtain your free glucose meter, contact the Wellness Division at 702-866-6192 or via e-mail at wellness@teachershealthtrust.org.

Lifestyle 
Decisions


SUNRISE
HOSPITAL & MEDICAL CENTER

Your Updated Plan Document

Staying Up to Date with the New Format



The Teachers Health Trust has posted the updated Plan Document for 2015. You can find the newest version online on the Trust's website at www.teachershealthtrust.org. It is important to note that the 2015 Plan Document utilizes a new format that streamlines all benefit information.

In the past, the Trust's benefit information was separated into two separate books, one for active participants while the other was for our retirees. In 2015, the Trust has opted to condense all plan benefit information into a single document.

The new Plan Document is separated into three sections as follows:

SECTION A: ACTIVE EMPLOYEE BENEFIT PLAN INFORMATION, P. 9		
Chapter		Page
1: Eligibility		11
2: Enrollment		23
3: Other Health Insurance		45
4: Medical		57
5: Prescription Drugs		171
6: Dental		187
7: Vision		201
8: Life Insurance		211

Section A: Active Employee Benefit Plan Information - The first section covers all benefit information for active employees and dependents enrolled in either the Diamond or Platinum medical plans. This section includes content on eligibility, enrollment and life insurance; as well as medical, prescription drug, dental and vision benefits.

Section B: Retired Employee Benefit Plan Information - The second section covers all benefit information for subscribers and dependents enrolled in the Retiree medical plan. This section includes content on eligibility, enrollment and life insurance; as well as medical, prescription drug, dental and vision benefits.

SECTION B: RETIRED EMPLOYEE BENEFIT PLAN INFORMATION, P. 231		
Chapter		Page
9: Eligibility		233
10: Enrollment		253
11: Other Health Insurance		273
12: Medical		283
13: Prescription Drugs		385
14: Dental		399
15: Vision		413
16: Life Insurance		423

SECTION C: PLAN INFORMATION FOR ALL PARTICIPANTS, P. 441		
Chapter		Page
17: Wellness		443
18: Appeals		451
19: Legal Notices		459
20: Definitions		481

Section C: Plan Information for All Participants - The third section of the Plan Document covers content that is standard across all three medical plans. This section includes content on the wellness benefits, appeals and legal notices.

The Trust hopes that the new format of the Plan Document will help all of our participants more easily find and review information on their benefits.

Keep Costs Down: In-Network Laboratories



Most of us have probably experienced this: You schedule an appointment with your doctor, have your blood drawn for a test and figure that it will be covered after meeting your copayment. A few weeks later, a bill shows up in your mailbox, showing that your insurance only covered a percentage of the tests and you are responsible for the balance.

It is important to know how your laboratory and pathology benefits work so that you are aware of any potential costs. Leaving it up to your provider could result in high out-of-pocket fees.

Medical offices and facilities deal with hundreds of different types of medical insurances each day. This is why it so

important to know your own benefits.

If the provider completes a lab slip and directs you to have your test done at a free standing laboratory, make sure they send you to an in-network laboratory, which will result in no copayment. If both the specimen collection and the test are completed in the provider's office, you will be responsible for a \$10.00 copayment per test performed. Keep in mind that even if only one tube of blood is drawn, several tests may be performed. If 10 tests are completed, your copayment responsibility will be \$100.00.

If the provider obtains the specimen in their office and sends the specimen out to a laboratory, once again, ensure that

they are sending your specimen to an in-network laboratory. If the provider sends the specimen(s) to an out-of-network provider for testing, your claim will be denied unless prior authorization was received, though, your out-of-network benefits will apply.

The Trust offers a wide array of resources and services to help you keep your out-of-pocket costs down. Taking advantage of these resources and services will help you cut down on unnecessary out-of-pocket expenses and keep the overall cost of your health care down. It may save you hundreds or thousands of dollars over time.

*Olga Singleton, Contributor
Teachers Health Trust*



Avoiding the Flu

Flu season is worse than usual this year, and the U.S. Centers for Disease Control and Prevention (CDC) has stated that this year's flu epidemic is showing elevated activity.

Even if you got the flu shot this year, you might still be susceptible to getting sick. Each season, the flu vaccine is designed to protect against the flu viruses that researchers determine are most likely to circulate that year. This is why the flu vaccine is more effective some years than others. This year, the flu vaccine may not protect well against the more severe influenza A (H3N2) virus that is circulating. However, the CDC still recommends the flu vaccine as it should offer at least partial protection.

According to the CDC, the flu commonly spreads through droplets made when people cough, sneeze and talk, as well as when people touch something with the flu virus on it and then touch their mouths, noses or eyes.

Children, pregnant women, the elderly, and those with disabilities and other health conditions are at increased risk of getting the flu. Whether or not you have been vaccinated, you can still take measures to protect yourself and others from the flu.

- When possible, avoid close contact with sick individuals.
- Wash your hands frequently with soap and water. If you can't wash your hands, use an alcohol-based hand rub.
- Don't touch your mouth, nose or eyes.
- Disinfect potentially contaminated surfaces, especially in shared areas such as the office kitchen.

In addition to keeping yourself healthy, you can help protect others from getting sick from your germs.

- Cover your nose and mouth when sneezing or coughing.

- Stay home for at least a day after your fever is gone, with the exception of getting medical care.

If you do get sick, aside from keeping your germs to yourself, here are a few suggestions for getting better as quickly as possible:

- Rest as much as possible.
- Drink plenty of water, broth and other clear fluids.
- Relieve symptoms by gargling with salt water, putting a humidifier in the room and covering yourself with a warm blanket.
- Talk to your doctor about a prescription antiviral medication to help with the flu.

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**YOU MUST FILE A
REPORT ON ALL
INJURIES AND/OR
ILLNESSES INCURRED
AT WORK
WITHIN SEVEN DAYS!**

Claims resulting from work-related injuries must be filed through your Workers' Compensation carrier, not the Teachers Health Trust. This includes, but is not limited to, coaching injuries, environmental illnesses, etc.

If you are injured on the job, the Clark County School District (CCSD) and the State of Nevada require that you submit a written Notice of Injury or Occupational Disease (Form C-1) within seven (7) days of the incident.

If a timely-filed claim and all permissible appeals (including court reviews) are denied as not being work-related, the Trust will review your claims for payment. The Trust will not consider claims if Workers' Compensation denied them because you failed to file your claims in a timely manner.

Regardless of the severity or type, any injury or illness sustained on the job should be submitted to Workers' Compensation. Notify your administrator immediately and then call the School District's Risk Management office at 702-799-2967.



Understanding Body Types and Their Importance to Your Fitness Plan

Summer is almost here and the Trust's WellFit for Life program is underway. It is the time of the year when so many of us have kicked their focus on fitness, nutrition and weight loss into overdrive.

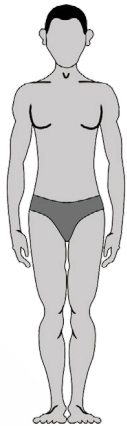
The level of success achieved in the endeavor to adopt and maintain a healthier lifestyle is based on dedication to a well-crafted program. What success means, though, should be different for each of us, based on our personal physiology. Here at the Trust, we often remind people that the goal should be to stay healthy, not skinny. We reiterate this mantra because we know that the image of healthy that modern media portrays as ideal is neither realistic nor even healthy for everyone.

Somatotypes

If you have been consistent with your program, yet not achieving your fitness goals, it may be time to ensure your program is compatible with your somatotype (body type). There are three basic body types, as classified by American psychologist W.H. Sheldon, and understanding what they mean to your health plan can help you maximize the benefits. Understanding your body type can save you a lot of time and frustration as well.

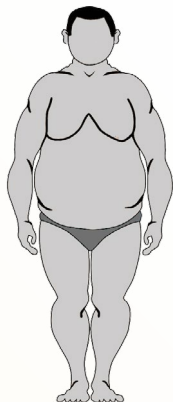
The three basic body types are listed to the right. It is a brief overview and we encourage all of our participants to not only research further but also to discuss your program with your physician. A further understanding of your body type coupled with assistance from your physician may serve as a valuable tool to help you maintain a fitness and nutrition plan optimal for your individual needs. Of course, these body types are not the singular driving force for your fitness success, but another factor to consider.

Ectomorph is the body type most associated with being slim. The ectomorph somatotype tends toward a linear shape with less fat and muscle mass than other body types. Although classification as an ectomorph should not be considered absolute, a person is classified as an ectomorph if he/she exhibits predominant ectomorph traits. These traits include a thin face, high forehead and receding chin; narrow chest and abdomen; long, thin arms and legs; and less body fat and muscle.



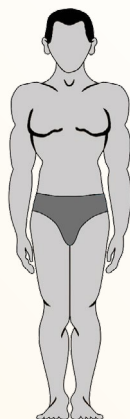
An ectomorph that wants to increase strength and tone the body should look to a simple weight-training routine.

Endomorph is the body type most associated with being curvy. The endomorph somatotype tends toward a round shape. As with the ectomorph, classification traits for the endomorph are not absolute, though commonly include a round body, head and abdomen; short arms and legs; fat upper arms and thighs; and slender wrists and ankles. Under normal conditions, an endomorph has a higher body fat percentage, but is not always a fat person.



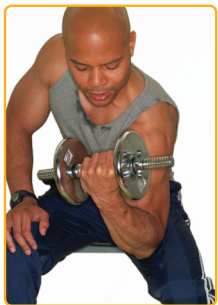
Endomorphs will find that building muscle comes easier than other body types. Nonetheless, a slower metabolism increases difficulty in staying lean. Endomorphs typically have difficulty losing fat solely by diet, meaning a complete nutrition and fitness program, which include both weight and cardio training, is essential to increasing metabolism and for optimal health.

Mesomorph is the body type marked by greater than average muscular development. As with the other body types, classification traits for the mesomorph are not an absolute. Commonly, though, the mesomorph traits include a larger, square head; broad, muscular chest and shoulders; heavily muscled arms and legs; and minimal body fat.



Mesomorphs tends to develop muscle easily, and can usually be distinguished from those whom have developed muscles through body-building exercises. Simply put, mesomorphs have a genetic advantage where building muscle is concerned. Despite this genetic inclination, though, mesomorphs who wish to stay lean must maintain a heavy focus on diet and cardiovascular activities since they are prone to weight gain. Thanks to a naturally greater amount of muscle mass, mesomorphs often have higher calorie needs than other body types. Mesomorphs often lose weight quickly while on a fitness and nutrition plan. Conversely, they often gain weight quickly if taking in too many calories.

How Much Exercise Do You Need?



When it comes to physical activity, any exercise is better than none, and a lot is better than a little. Physical activity is anything that gets your body moving, but messages promoting exercise often lack a strict definition of the amount of exercise needed to attain health benefits. In the 2008 Physical Activity Guidelines for Americans, the Department of Health and Human Services (HHS) concluded that adults need two types of physical activity each week to improve overall health: aerobics and strength training.

HHS recommends:

- Two and a half hours of moderate-intensity aerobic activity each week and two or more days a week of muscle-strengthening activities that work all major muscle groups;
- One hour and 15 minutes of vigorous-intensity aerobic activity each week and two or more days a week of muscle-strengthening activities that work all major muscle groups; or
- Two or more days a week of an equivalent mix of moderate- and vigorous-intensity aerobic activity and muscle-strengthening activities that work all major muscle groups.

Moderate-intensity aerobic activities include brisk walking, water aerobics, bicycling slower than 10 mph, ballroom dancing or gardening. Vigorous-intensity aerobic exercise includes jogging, running, swimming and bicycling faster than 10 mph. Major muscle groups include legs, hips, back, abdomen, chest, shoulders and arms.

Exercises can be completed in as little as 10-minute intervals, while still providing health benefits.

However, keep in mind that these numbers are just the minimum recommendations. Older adults are advised to perform additional physical activity. Moreover, all adults will gain greater health benefits for performing any physical activity above the minimum recommendations.



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MENTAL MUSCLE EXPRESS

Boost your brain power by solving these puzzles. See if you can uncover the meaning in these words, letters, symbols and positions. Each puzzle represents a common word, phrase, expression, person or place.



The example below is "spring break."

SPR ING

(1)

**sitting
world**

(2)

**JEWELRY
JEWELRY
JEWELRY
JEWELRY**

(3)



fishing

(4)

HENFOXHOUSE

(5)

NO F_N

See answers on page 16.



Don't Wait for an Emergency

Know Your Nearest Urgent Care Facilities

Do you know the location of the urgent care facility nearest to your home and work? Do not wait for an emergency to find an open in-network facility. The Trust has compiled this list of in-network urgent care facilities and their hours of operation. For holiday hours, contact the individual facility. Providers are added and removed from the Trust's network regularly. You can check the provider's status within the Trust's network at www.teachershealthtrust.org.

Advanced Urgent Care/Nightlight Pediatrics

9975 S. Eastern Ave., Ste. 110
Las Vegas, NV 89123
702-361-2273
Mon. through Fri., 8 a.m. to 9 p.m.
Weekends, 9 a.m. to 4 p.m.

Healthcare Partners

9499 W. Charleston Blvd., Ste. 150
Las Vegas, NV 89117
702-228-5477
Mon. through Fri., 7 a.m. to 8 p.m.
Weekends, 8 a.m. to 4 p.m.

595 W. Lake Mead Pkwy.
Henderson, NV 89015
702-566-5500

Mon. through Fri., 7 a.m. to 8 p.m.
Sat., 8 a.m. to 4 p.m.
Closed Sunday

4880 S. Wynn Road
Las Vegas, NV 89103
702-871-5005
Open 24 hours, including holidays

Genesis Medical Group

100 N. Green Valley Pkwy., Ste. 110
Henderson, NV 89074
702-436-7700
Mon. through Fri., 7 a.m. to 7 p.m.
Sat./Holidays, 9 a.m. to 5 p.m.
Sun., 9 a.m. to 2 p.m.

IHC Instacare

St. George: 1739 W. Sunset Blvd.
St. George, UT 84770
435-634-6000
Mon. through Sat., 9 a.m. to 9 p.m.
Closed Sunday

Hurricane: 75 N. 2260 West
Hurricane, UT 84737
435-635-6550
Mon. through Sat., 9 a.m. to 9 p.m.
Closed Sunday

River Road: 577 S. River Road
St. George, UT 84790
435-688-6300
Mon. through Sun., 9 a.m. to 9 p.m.

Legacy Urgent Care

105 N. Pecos Road, Ste. 111
Henderson, NV 89074
702-263-4555
Mon. through Fri. 8 a.m. to 6 p.m.
Weekends, 8 a.m. to 2 p.m.

Night Light (Pixie) Pediatrics

1240 E. 100 South, Ste. 14
St. George, UT 84790
435-628-8232
Mon. through Fri. (day), 9 a.m. to 5 p.m.
Mon. through Sun. (night), 6 p.m. to 10 p.m.

Rapid-Care Medical Clinic

4270 S. Decatur Blvd., Ste. A-1A
Las Vegas, NV 89103
702-798-7770
Mon. through Fri., 8:30 a.m. to 5 p.m.
Sat., 9 a.m. to 2:30 p.m.
Closed Sunday

UMC Quick Care

1700 Wheeler Peak St.
Las Vegas, NV 89106
702-383-1900
Daily, 8 a.m. to 6 p.m.
61 N. Nellis Blvd.
Las Vegas, NV 89110
702-383-6240
Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

9320 W. Sahara Ave.
Las Vegas, NV 89117
702-383-3850

Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

4231 N. Rancho Drive
Las Vegas, NV 89130
702-383-3800

Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

4180 S. Rainbow Blvd., Ste. 810
Las Vegas, NV 89103
702-383-3645

Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

2031 N. Buffalo Drive
Las Vegas, NV 89128
702-383-3750

Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

525 Marks St.
Henderson, NV 89014
702-383-6210

Mon. through Fri., 8 a.m. to 7:30 p.m.
Weekends, 8 a.m. to 4 p.m.

Urgent Care Nevada

All Locations open 8 a.m. - 9 p.m.
Seven days a week

10652 S. Eastern Ave.
Henderson, NV 89052
702-476-2800

585 College Drive, Ste. C
Henderson, NV 89015
725-777-3200

8300 W. Cheyenne Ave., Ste. 106
Las Vegas, NV 89129
702-656-0911

4575 W. Charleston Blvd.
Las Vegas, NV 89102
702-877-8777

6125 W. Tropicana Ave., Ste. A
Las Vegas, NV 89103
702-701-8900

3020 W. Ann Road
Las Vegas, NV 89031
702-701-9501

9785 S. Maryland Pkwy., Ste. A-2
Las Vegas, NV 89183
702-474-0077

5891 E. Charleston Blvd., Ste. 150
Las Vegas, NV 89142
725-777-3120

2269 N. Green Valley Pkwy.
Henderson, NV 89014
702-855-0500

2202 W. Craig Road
N. Las Vegas, NV 89032
702-826-3200

4900 W. Craig Road, Ste. B1-B3
Las Vegas, NV 89130
702-901-8230

4075 S. Durango Drive, Ste. 108-110
Las Vegas, NV 89147
702-701-9509

10530 S. Highlands, Ste. 150
Las Vegas, NV 89141
725-777-3350

What is Step Therapy?

Brought to You by MedImpact

MedImpact
Delivering · Flexible · Choice

What is Step Therapy?

Step therapy is a clinical tool used in your prescription benefit to promote the use of effective, clinically appropriate medications that may be less costly to you and to your employer.

Step therapy requires that a patient try a clinically appropriate, lower cost medication first, or requires that their doctor has clinically documented why the patient is not a good candidate for the clinically appropriate, lower cost medication, or therapy.

The pharmacist uses step therapy to automatically review a patient's medication history to ensure the patient is filling the most clinically appropriate and cost effective prescription medication. Often, step therapy will recommend an alternative medication (sometimes a generic medication) to replace the more costly medication (sometimes a brand medication). If a patient chooses to fill the prescription medication recommended through step therapy, typically, the patient benefits by paying a lower copay. The employer also benefits because the overall cost of the medication is lower.

How Does Step Therapy Work?

Sometimes, it is determined by the doctor that a clinically appropriate, lower cost medication (often a generic medication) is not the best choice for that particular patient or the patient's condition. In this case, the patient might bring a brand or higher cost option prescription to the pharmacy that is more clinically appropriate for them, as determined by their doctor.

When filling prescriptions for patients, the pharmacist runs the prescription through the system to check the patient's benefits and past medication history. If the patient history shows that the brand or higher cost medication was filled in the past, step therapy is not required. If step therapy is not required, the brand or higher cost medication will automatically be covered under the patient's benefit when the pharmacist fills the prescription.

Step therapy is used when the patient history shows that the brand or higher

cost medication was not filled in the past. The patient now has the opportunity to evaluate if the clinically appropriate, lower cost drug works for them.

For those patients that do not meet the step therapy requirements (as outlined by the patient's benefit), the patient's doctor may submit a request for prior authorization, letting the pharmacy know that the patient meets the clinical criteria to receive the brand or higher cost medication without using step therapy.

Step therapy and prior authorization are clinical tools that balance: patient access to appropriate medications, appropriate medication utilization, and cost savings for the patient and for the employer.

Not all medications are included in the step therapy program. For specific information on your prescription benefit, please visit the Member Web Site at: www.medimpact.com and click on Members or ask your employee benefits administrator.



YO-YO Dieting: The Causes, Pitfalls & Risks of Weight Cycling



Every year, millions of overweight Americans set out to become healthier, leaner and, hopefully, happier people. Armed with the most recent fad and/or starvation diet, many succeed in dropping a significant amount of weight. Having accomplished their immediate goal, they are temporarily filled with pride. Unfortunately, these losses have a tendency to be merely short-term. Over the course of a few weeks or months, most or all of the weight is regained. Making matters worse, the apathy and depression that can set in often lead to further weight gain.

For most people in the cycle, determination eventually reemerges and the dieting begins again, continuing an endless, cyclical nightmare of losing and regaining weight. This pattern is called weight cycling – more commonly referred to as yo-yo dieting. With each up-and-down phase of yo-yo dieting, those trapped in the cycle become more disheartened with their ability to ever reach and maintain a healthy weight and figure.

For those caught in this cycle, it is important to realize you are not alone and that it is not an unbreakable pattern.

The questions anyone caught in the weight cycle trap need to ask are:

- **What causes the yo-yo effect?**
- **How does my body react?**
- **What are the health risks?**
- **How do I break the cycle?**

Causes of the Yo-Yo Effect?

Weight cycling is most often a side-effect of dieting that utilizes any form of extreme caloric deficit as the primary component for weight loss. Incorporating this extreme weight loss strategy as a daily dietary plan is a surefire way to become trapped in or continue weight cycling if it is not the first time the method has been employed.

The primary trapping of this approach to weight loss is that, in the beginning, the results of drastic caloric deficits appear promising. And why not? Initially, weight is dropped at an accelerated rate. Since weight loss is the goal and the method is yielding rapid results, it would seemingly make sense to continue, "seemingly" being the key word.

The Starvation Response

In reality, this approach to weight loss simply sets a trap because it overlooks one of the most important aspects of human physiology: adaptability.

In this case, the problem the body must adapt to is starvation, and the fact that it is self-imposed is not a factor in the biological response. Over the span of human existence, the body has had to develop a suitable response to periods in history where famines could and would occur often. As a result, the body learned how to cope with such occurrences by slowing the rate at which caloric intake and fat stores get converted into energy.

Currently, despite the fact that we live in an era and region in

which famines are rare, our bodies are still programmed to respond to drastic reductions in available calories by employing a strategy where metabolism is slowed.

Metabolic Slowdown

After the body experiences a caloric deficit for an extended period of time, which varies from one individual to the next, the natural response to starvation is conservation of energy stores (*yes, the fat stored on your body has a practical purpose*). This conservation is accomplished through slowing your metabolic rate. What this means for the yo-yo effect is that while the initial shock of starving oneself may yield early results, the body will eventually adapt by lowering the amount of calories burned daily. This adaptation is key in weight cycling.

Let us consider a person who normally burns 2,000 calories daily. At some point, this individual begins a starvation diet that consists of a mere 1,400 calories a day. The initial shock of such a drastic caloric deficit results in rapid weight loss, encouraging the dieter to continue. Of course, this result is due only to the fact that the body has not yet adapted to the sudden introduction of a 30% reduction in daily caloric intake.

As time passes, the dieter will experience an ever-diminishing amount of weight loss. The reason for this is simple; the body has adapted to the caloric deficit by reducing the person's metabolic rate from 2,000 to somewhere in the ballpark of 1,800 calories a day. This, in turn, slows the rate of weight loss. Eventually, the stress of the diminishing returns coupled with the inevitable reversion to more sustainable eating habits (*as few people can maintain a starvation diet for a prolonged period*) sets the weight cycle in motion. Now, even if a healthy nutritional regimen of 2,000 calories per day is maintained, weight gain is possible and likely. While the new regimen would have yielded



positive results prior to the metabolic slowdown, due to the starvation approach attempted previously, it now contains 200 calories more than the body will utilize, at least until the body adapts yet again.

Pitfalls & Health Risks

In addition to the failed attempt to lose weight, yo-yo dieting presents a yet unclear set of risks to long-term health. One of the problems in analyzing the long-term effects is that yo-yo dieting is a relatively new concern for our society, having emerged only as our ability to mass-produce food has increased in recent decades.

As it stands, continued research is still needed before any and all health risks associated with weight cycling can be confirmed. The issue is further confounded by the fact that most physicians agree that data on the long-term risks is mixed. Nonetheless, as research does continue, a significant percentage of health professionals note a growing body of evidence that suggests weight cycling may lead to both cardiovascular and metabolic disorders.

Whether it is ultimately determined that weight cycling itself is dangerous, physicians agree that being overweight leads to many health risks, including:

- *High blood pressure.*
- *Heart disease & stroke.*
- *Diabetes.*
- *Cancer.*
- *Gallbladder disease & gallstones.*
- *Osteoarthritis.*
- *Gout.*
- *Respiratory problems (e.g., sleep apnea and asthma)*

The confirmed dangers of being overweight and potential risks of weight cycling make it clear that those caught in the pattern would do well to clip the yo-yo's string once and for all.

Clipping the Yo-Yo's String

Putting an end to weight cycling requires acceptance that dieting alone is insufficient. Rather than endlessly

starting and ending unsuccessful diets, consider the vastly more effective strategy of implementing a long-term and sustainable nutritional regimen.

It is equally essential to realize that nutrition is only one component of maintaining a healthy weight. To truly be effective, nutrition must be maintained in concert with a fitness regimen. You must find ways to incorporate additional physical activity into your daily life.

In the end, maintaining a healthy weight requires consistency and sustainability. Fad diets come and go, and some may yield short-term results, but the cost, effort and sacrifice that go into them will always pale in comparison to the pride, self-confidence and rewards of adopting and maintaining a healthy lifestyle.

*by Philip DiGiacomo
Teachers Health Trust*

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Know Your Benefits:

Essential Health Benefits

Beginning in 2015, the Trust ended the \$600 calendar year maximum for benefits covered as Preventive/Routine care. Additionally, office copayments are no longer required for Preventive/Routine care. The services listed below are covered under the Preventive/Routine Care Benefit when no diagnosis is present and you utilize an in-network provider. For details on the eligibility and prior authorization requirements, see the Teachers Health Trust Plan Document found online at www.teachershealthtrust.org.

Preventive Health Services for Adults

- Abdominal Aortic Aneurysm Screening
- Alcohol Misuse Screening and Counseling
- Aspirin Use to Prevent Cardiovascular Disease
- Blood Pressure Screening for All Adults
- Cholesterol Screening for Adults at Higher Risk
- Colorectal Cancer Screening for Adults Over 50
- Depression Screening for Adults
- Diabetes (Type 2) Screening
- Diet Counseling
- HIV Screening
- Immunization Vaccines
- Nutritional Counseling
- Obesity Screening and Counseling
- PSA and DRE Cancer Screenings
- Sexually Transmitted Infection (STI) Counseling
- Syphilis Screening
- Tobacco Use Screening/Cessation Interventions

Preventive Health Services for Women

- Anemia Screening for Pregnant Women
- Bacteriuria Urinary Tract/Infection Screening for Pregnant Women
- Breast Cancer Genetic Test Counseling (BRCA)
- Breast Cancer Mammography Screenings
- Breast Cancer Chemoprevention Counseling
- Breastfeeding Comprehensive Support & Counseling
- Breast Pumps (One Per Pregnancy)
- Cervical Cancer Screening
- Chlamydia Infection Screening
- Contraception: FDA-Approved Contraceptive Methods, Sterilization Procedures, Education & Counseling
- Domestic & Interpersonal Violence Screening/Counseling
- Folic Acid Supplements
- Gestational Diabetes Screening
- Gonorrhea Screening
- Hepatitis B Screening for Pregnant Women
- HIV Screening & Counseling
- HPV DNA Test
- Osteoporosis Screening
- Rh Incompatibility Screening for Pregnant Women
- Sexually Transmitted Infections (STI) Counseling
- Syphilis Screening for Pregnant Women
- Tobacco Use Screening & Interventions
- Urinary Tract/Other Infection Screening for Pregnant Women
- Well-woman Visits for Women Under 65

Preventive Health Services for Children

- Alcohol & Drug Use Assessments for Adolescents
- Autism Screening for Children at 18 & 24 Months
- Behavioral Assessments
- Blood Pressure Screening
- Cervical Dysplasia Screening
- Congenital Hypothyroidism Screening for All Newborns
- Depression Screening for Adolescents
- Developmental Screening
- Fluoride Chemoprevention Supplements
- Gonorrhea Preventive Medication for Newborns
- Hearing Screening for All Newborns
- Height, Weight & Body Mass Index Measurements
- Hematocrit or Hemoglobin Screening
- Hemoglobinopathies/Sickle Cell Screening for Newborns
- HIV Screening
- Hypothyroidism Screening for Newborns
- Immunization Vaccines
- Iron Supplements (Ages 6 to 12 Mos. at Risk for Anemia)
- Lead Screening for Children at Risk of Exposure
- Medical History Throughout Development
- Obesity Screening & Counseling
- Oral Health Risk Assessment
- Phenylketonuria (PKU) Screening for Newborns
- Sexually Transmitted Infection (STI) Prevention Counseling & Screening
- Tuberculin Testing
- Vision Screening

Many of the screenings listed above are inclusive as part of a single preventive care office visit. To review complete and detailed descriptions of screening/counseling requirements, age groups and vaccine types in respect to all preventive health services, please visit www.healthcare.gov.

Sunglasses: An Eye-Care Must

Summertime is upon us, which means plenty of fun in the sun. Remember, though, that you run the risk of overexposure to harmful UV rays when you don't protect your eyes from the sun. That's why it is not only important to wear your sunglasses but to select a pair that will protect your vision.

Fortunately, your friends at VSP know what makes for a good pair of summer shades.

Here's a rundown of things to consider when picking the perfect pair:

- ☞ **Go Big or Wrap It:** Bigger frames and lenses, and also wrap-around styles, give you more UV protection because they block peripheral rays.
- ☞ **Go Polar:** Polarized lenses block out sunlight glare bouncing off windshields, pavement, and other smooth surfaces.
- ☞ **Consider Color:** Gray lenses are best. Why? They don't change colors. Green and brown lenses are good too.
- ☞ **Rx Effects:** If you wear prescription glasses, why not add prescription sunglasses to your eyewear wardrobe?
- ☞ **Shade Your Specs:** You can make your regular glasses into sunglasses. Look for clip-on or magnetic tinted lenses that can attach to your specs.
- ☞ **Automate:** Ask your eye doctor about photochromic lenses. They automatically get darker outside, then return to normal inside.

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Pregnancy Resources

Pregnancy and Preterm Delivery Support Groups

March of Dimes: www.marchofdimes.com

Sidelines National Support Network: www.sidelines.org

Mothers of Supertwins: www.mostonline.org

Center for the Study of Multiple Birth: www.multiplebirth.com

American Pregnancy Association: www.americanpregnancy.org

Mommy Cast: www.mommymcast.com

The Teachers Health Trust provides Case Management Services for Diamond, Platinum or Retiree Health plan participants who may experience a difficult pregnancy. Services are provided at no charge and are coordinated by a registered nurse (RN) who is also a certified case manager (CCM).

The Case Management Department is available to assist you during those challenging times and to help you achieve the best possible outcome for you and your new family member(s). For more information, please contact the Trust at (866) 585-2273 between 7:00 a.m. and 5:45 p.m. Monday through Thursday and 8:00 a.m. to 11:45 p.m. on Friday or e-mail the Case Management Department at casemanager@teachershealthtrust.org.

Antibiotics Aren't Always the Answer

Antibiotics do not fight infections caused by viruses like colds, flu, most sore throats, bronchitis, and many sinus and ear infections. Instead, symptom relief might be the best treatment option for viral infections.

What to Do

Just because your healthcare professional doesn't give you an antibiotic doesn't mean you aren't sick. Talk with your healthcare professional about the best treatment for your or your child's illness.

- Soothe your throat with crushed ice, sore throat spray, or lozenges. (Do not give lozenges to young children.)
- If you are diagnosed with the flu, there are flu antiviral drugs that can be used to treat flu illness. They are prescription drugs.

Illness	Usual Cause		Antibiotic Needed
	Virus	Bacteria	
Cold/Runny Nose	✓		NO
Bronchitis/Chest Cold (in otherwise healthy children and adults)	✓		NO
Whooping Cough		✓	YES
Flu	✓		NO
Strep Throat		✓	YES
Sore Throat (except strep)	✓		NO
Fluid in the Middle Ear (otitis media with effusion)	✓		NO
Urinary Tract Infection		✓	YES

What Not to Do

- Do not demand antibiotics when your healthcare professional says they are not needed.
- Do not take an antibiotic for a viral infection.
- Do not take antibiotics prescribed for someone else. The antibiotic may not be right for your illness. Taking the wrong medicine may delay correct treatment and allow bacteria to grow.

If your healthcare professional prescribes an antibiotic for a bacterial infection:

- Do not skip doses.
- Do not stop taking the antibiotics early unless your healthcare professional tells you to do so.
- Do not save any of the antibiotics for the next time you or your child gets sick.

Get smart about when antibiotics are needed—to fight bacterial infections. When you use antibiotics appropriately, you do the best for your health, your family's health, and the health of those around you.

Taking antibiotics for viral infections, such as colds, flu, most sore throats, bronchitis, and many sinus or ear infections:

To feel better when you or your child has a viral infection:

- Will not cure the infection
- Will not keep other people from getting sick
- Will not help you or your child feel better
- May cause unnecessary and harmful side effects
- May contribute to antibiotic resistance, which is when bacteria are able to resist the effects of an antibiotic and continue to cause harm

- Ask your healthcare professional about over-the-counter treatment options that may help reduce symptoms.
- Drink more fluids.
- Get plenty of rest.
- Use a cool-mist vaporizer or saline nasal spray to relieve congestion.

Rest, fluids, and over-the-counter products may be your or your child's best treatment option against viral infections.



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Centers for Disease Control
www.cdc.gov/Features/GetSmart*

Use Antibiotics Wisely

Remember—there are potential risks when taking any prescription drug. Unneeded antibiotics may lead to harmful side effects and future antibiotic-resistant infections.

Hydrocodone Combination Drugs

Notice of Updated Federal Regulations

Under a final rule issued by the U.S. Drug Enforcement Administration (DEA), hydrocodone combination products are now in a more restrictive category of controlled substances.

Hydrocodone combination drug products such as Vicodin, Lortab and other generic versions are now classified as Schedule II Controlled Substances. As such, they will be subject to the same prescribing rules as painkillers like morphine and oxycodone. These requirements include, but are not limited to, security protocols, labeling and packaging, inventory and record keeping and reporting.

As a result of these stricter requirements, pharmacies may encounter difficulties in maintaining adequate supplies of these products. The tighter controls also restrict the pharmacies from advising patients over the phone as to whether they have a particular hydrocodone medication in stock.

You may not obtain an early refill of your prescription unless 75 percent of your existing supply has been used as directed by your prescribing provider. If the existing supply on hand is less than 75 percent used, your prescription will be denied until this requirement has been met.

These are issues being experienced by all pharmacies and insurance companies and are due to the new federal regulations.

To fill your Schedule II Controlled Medications, you will need to go to your pharmacy and present your prescription for fill. If that pharmacy advises you that they are out of stock, you will need to go to another pharmacy with the prescription and present it for fill. If you are refilling your Schedule II Controlled Medications, you may need to request that the pharmacist transfer the prescription to another pharmacy. Pharmacies will not advise you if they have your Schedule II Controlled Medications in stock over the phone due to security-related issues. The only way to find the medication is to walk into the pharmacy with your prescription. The Trust understands that while this may not be convenient, the rules were established for your safety and are outside the Trust and pharmacies' control.

Text **CCEA** to

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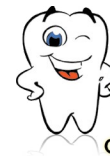
MENTAL MUSCLE ANSWERS

1. Sitting on top of the world
2. Jewelry box
3. Deep-sea fishing
4. A fox in the henhouse
5. No fun without you

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