

Expanding Access to Quality Health Care Effective April 1, 2021

The Welfare Fund Board of Trustees is pleased to announce its new partnership with Activate Healthcare Family Medical Centers. This new partnership became available to our eligible members, retirees (including Medicare-eligible retirees), and covered dependents, effective April 1, 2021.

Activate Healthcare was founded in 2009 in Indianapolis, Indiana, and currently operates more than 69 medical centers across the country. Of these 69 centers, 41 provide services to 31 local unions, allowing approximately 100,000 union members and their dependents access to quality health care.

Activate Healthcare understands unions and prides itself on providing the best quality care with an emphasis on an exceptional patient experience. The medical centers and their providers have the technology to identify and manage at-risk patients while raising patient awareness about the importance of proactive health.

With this partnership, we are joining forces with other local trades to utilize current medical centers for our eligible members and their covered dependents who reside near Rockford, Illinois, and Davenport, Iowa. (See location information on page 4.) **All covered health services provided at each medical center will be FREE: no deductible, no coinsurance, and no copay.** Each medical center provides the services listed to the right:

PRIMARY CARE

- Burn treatment
- Contusions/lacerations
- Disease management
- Ear, nose, throat infections
- Gastrointestinal disorders
- Minor eye conditions
- Minor fractures
- Minor surgery
- Referral management
- Respiratory infections
- Skin rashes/lesions
- Sprains/strains
- Urinary problems
- Virtual and in-person visits

PREVENTIVE CARE

- Flu shots
- Health coaching
- Health Risk Assessment
- Lifestyle management
- Preventive screenings: hypertension, metabolic health, cancer, diabetes, depression, musculoskeletal
- Sports/DOT (Department of Transportation) physicals
- Wellness exams

CHRONIC CONDITION MANAGEMENT

- Arthritis
- Asthma
- COPD (chronic obstructive pulmonary disease)
- Coronary artery disease
- Degenerative spine disease
- Depression/anxiety
- Diabetes
- Hypertension

ADDITIONAL SERVICES

- Lab draws
- On-site generic drugs
- Secure patient portal
- 24/7 nurse line
- Virtual health visits



TAKE 3 STEPS TOWARD HEALTHY EATING



WE KNOW WE SHOULD EAT MORE OF WHAT'S GOOD FOR US AND LESS OF WHAT'S NOT. But most Americans get too many calories and not enough nutrition in their daily diet. Here's a simple three-step plan to help.

1

FOCUS ON FRUITS AND VEGETABLES

Having a hard time fitting in those fruits and veggies? Try adding them to foods you already eat. For example:

- Top pizza with peppers, zucchini, and mushrooms.
- Stack your sandwiches with spinach, onions, and tomatoes.
- Put bananas, peaches, or berries on cereal or pancakes.

2

MAKE HALF YOUR GRAINS WHOLE

Start adding more whole grains to your diet. Some ways to get started:

- Spread "light" or fat-free cream cheese on a whole wheat bagel.
- Use a whole wheat pita for lunch instead of white bread.
- Snack on whole-grain tortilla chips with salsa.

3

CUT BACK ON CULPRITS

Saturated fat, sugar, and salt can derail your diet. Choose fat-free or low-fat dairy products, reduced-sodium foods, and foods with the least amount of added sugars. Here are more tips for staying on track:

- If you eat beef, get a lean cut—and eat less of it.
- Keep the chicken but lose the fat by trimming the skin. Also, use healthier cooking methods: broil, bake, stew, or roast.
- Love ice cream? Substitute with low-fat or fat-free frozen yogurt or ice cream.



(recipe)

Asparagus and Pea Salad with Fresh Herbs

- ¼ cup fresh tarragon leaves, loosely packed
- ¼ cup fresh mint leaves, loosely packed
- ¼ cup fresh dill, loosely packed
- 2 tbsp. low-fat sour cream
- 1 tbsp. extra virgin olive oil
- 2 tbsp. fresh lemon juice
- 1 tbsp. honey
- ¼ tsp. sea salt
- ¼ tsp. black pepper
- 1 lb. asparagus, ends removed, chopped
- 1 cup frozen peas, thawed
- 1 shallot, diced (about ¼ cup)
- 5 cups salad greens of your choice
- ¼ cup pea tendrils (pea sprouts) or alfalfa sprouts

Bring a medium pot of water to boil over high heat. Meanwhile, place tarragon, mint, dill, sour cream, olive oil, lemon juice, honey, sea salt, and black pepper into a food processor. Blend until creamy and smooth, about two minutes. Place chopped asparagus into boiling water and boil for one minute. Remove asparagus from the pot with a slotted spoon and add directly to a bowl of ice water. Let sit for five minutes, then use a colander to ensure the asparagus is well-drained. In a large bowl, stir together asparagus, peas, and shallot. Pour dressing on top. Stir until well-combined. To serve, place 1 cup of greens on a plate, top with ½ cup of asparagus-pea mixture, then top with ¼ cup pea tendrils or sprouts.

Serves five. Each serving provides about 100 calories, 4 g fat (1 g saturated fat, 0 g trans fat), 3 mg cholesterol, 160 mg sodium, 15 g carbohydrates, 4 g fiber, 8 g sugar, and 5 g protein.

6 Ways to Get Creative with Your Cardio

EVER HEARD THE SAYING THAT A “BODY AT REST IS LIKELY TO STAY AT REST?” Well, the opposite is true, too. Get your body moving, and you’re likely to stay moving, reaping a host of health benefits as well. Cardiovascular exercise, or “cardio,” is activity that uses the major muscle groups of your body and raises your heart rate for a sustained period of time. It includes everything from walking to swimming to dancing to household chores like sweeping and yard work.

WHY CARDIO?

Cardio burns calories and helps you maintain a healthy body weight. It can also help lower your blood pressure; raise your HDL, or “good,” cholesterol levels; and reduce your risk for heart disease and stroke.

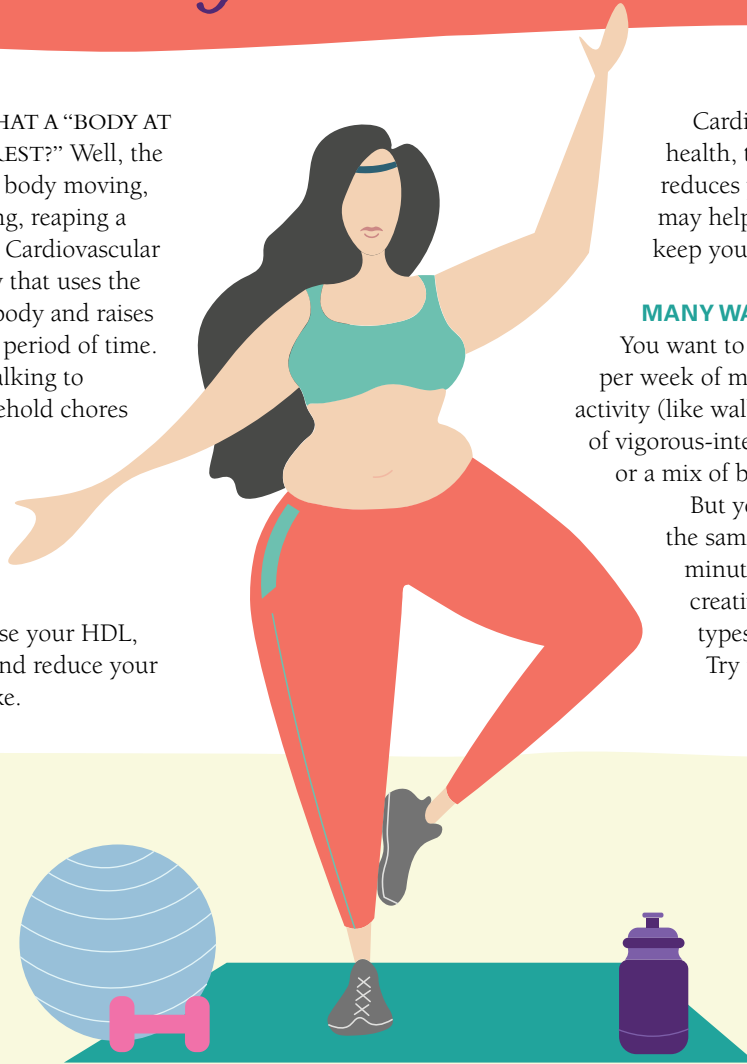
Cardio is good for your mental health, too. Regular cardio activity reduces your risk for depression and may help you sleep better. It can also keep your brain sharp as you age.

MANY WAYS TO WORK IN CARDIO

You want to aim for at least 2.5 hours per week of moderate-intensity physical activity (like walking briskly) or 1.25 hours of vigorous-intensity activity (like jogging), or a mix of both.

But you don’t need to stick to the same cardio activity to get those minutes under your belt. Think creatively and you can fit different types of cardio into your day.

Try these tips:



1. Get those steps.

Going to the grocery store? Park at the farthest end of the parking lot and add a couple of minutes of walking to your day.

2. Grab some drumsticks.

Try a cardio drumming class. This type of class lets you drum to music. This fun workout will get your heart rate up and can be modified for any fitness level.



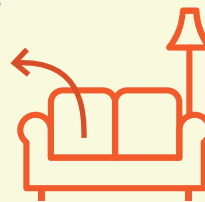
3. Dance it off.

About 15 million people every week take Zumba, a high-energy dance class. No time for class? Cue up your favorite music and take a five-minute dance break.



4. Get up from that couch.

Do you, like many people, spend most of your day sitting? Instead of sitting in front of the TV all night, walk in place or do a set of slow, controlled squats while catching up on your favorite shows.



5. Get wet.

Swimming is a fun way to move your body. Water exercise classes are a great option if you have joint or mobility issues, too.

6. Walk and talk.

Grab a coffee to go, meet up with a friend, and get a walk in. (While keeping safe social distance, of course.) You’ll catch up while you sneak in a workout.



Pharmacy Advocate's Corner

Dear Members and Families,

At the February Welfare Fund Board of Trustees meeting, there were a few enhancements to the Prescription Drug coverage that were approved:



ERECTILE DYSFUNCTION MEDICATION

If you met the established criteria, the plan would cover 10 tablets per 90 days. When the Retiree Welfare Plan (RWP) Medicare Prescription Drug Plan (PDP) went into effect, Medicare guidelines allowed 24 tablets per 90 days. The Trustees decided to align this same coverage for active members and pre-Medicare retirees of the RWP with the RWP Medicare PDP coverage. **The plan covers 24 tablets per 90 days beginning March 1, 2021, when prescribed by an Operators' Health Center (OHC) provider or beginning April 1, 2021, when prescribed by an Activate Healthcare provider.** As a reminder, to have your erectile dysfunction (ED) medication covered under the Plan, you must follow the specific guidelines summarized below:

- You must utilize one of the OHC locations (Countryside or Merrillville) or an Activate Healthcare facility.
- You must affirmatively elect to make the OHC or an Activate Healthcare facility your primary care provider.
- The OHC or Activate Healthcare provider must determine that ED medication is medically necessary to treat your symptoms. (You will be required to answer a questionnaire to properly screen and diagnose ED.)
- Your prescription must be written by an OHC or Activate Healthcare provider and filled at a network retail or mail service pharmacy.

If you're unable to visit an OHC or Activate Healthcare location, you can pay for your ED medication out of pocket and submit your receipts, itemized bills, and a Family Supplemental Benefit (FSB) Claim Form to the Fund Office for reimbursement (if you have FSB funds available for the Plan Year). For more information regarding the FSB benefit, call Member Services at **708-579-6600**.

For additional information regarding the ED guidelines for plan coverage, visit www.moefunds.com/pharmacy or call the Pharmacy Benefit Department at **708-387-8331**.

OPTUMRX VACCINE PROGRAM

Beginning April 1, 2021, you can also get certain vaccines through the Pharmacy Benefit at the pharmacy. You're responsible for paying the standard formulary copay based on the tier the vaccine falls under, as listed in the OptumRx Formulary and your Summary of Benefits.

For a complete list of vaccines available at the pharmacy and our recommended pharmacy locations, visit www.moefunds.com/pharmacy and refer to the "OptumRx Vaccine Program" flyer under **PHARMACY FORMS/NOTICES**.

Kind regards,

Tracy Biela
Pharmacy Benefit Advocate

Activate Healthcare Locations

The Welfare Fund Board of Trustees is proud to announce this new partnership with Activate Healthcare. Take advantage of this great opportunity to receive FREE quality health care services. Don't delay—call today to schedule an appointment!



Activate Healthcare Family Medical Center in Rockford

ROCKFORD, ILLINOIS

Activate Healthcare Family
Medical Center
3413 Colony Bay Drive
Rockford, IL 61109
Call: **779-368-0757**

DAVENPORT, IOWA

Activate Healthcare Family
Medical Center
4624 Progress Drive, Suite A
Davenport, IA 52806
Call: **563-214-1599**

HOURS OF OPERATION

Monday, 7 a.m.–6 p.m.	Monday, 6 a.m.–6 p.m.
Tuesday, 6 a.m.–6 p.m.	Tuesday, 6 a.m.–6 p.m.
Wednesday, 8 a.m.–5 p.m.	Wednesday, 6 a.m.–6 p.m.
Thursday, 9 a.m.–7 p.m.	Thursday, 6 a.m.–6 p.m.
Friday, 8 a.m.–noon	Friday, 6 a.m.–11 a.m.
Saturday (second Saturday of each month), 8 a.m.–noon	

CARE TEAM

Sheri Pierce, M.D.; David
Wester, P.A.-C.; and Danielle
Solares, N.P.

Karl Treiber, D.O., and Lindsey
Lange, F.N.P.-C.



Inside the Rockford, IL, location



Inside the Davenport, IA, location

Welfare Fund Updates for the Upcoming Plan Year

At the Welfare Fund Board of Trustees meeting, the following enhancements to the Welfare Fund were approved:

Downgrade option. Effective April 1, 2021, eligible active members of the MOE Health Plan Marketplace can make up to two downgrades for the 2021/2022 Plan Year. Members will be able to choose a less expensive health plan option by using the downgrade option, allowing them to maintain eligibility in the Marketplace longer. Selecting the downgrade option can be easily handled through your My150 account or the My150 app.

Subsidized self-payments. Effective April 1, 2021, eligible active members of the MOE Health Plan Marketplace will be allowed to make one self-payment per eligibility period during the 2021/2022 Plan Year. With the passage of the American Rescue Plan of 2021, members and covered dependents may qualify for up to

six months of full COBRA subsidies at 100% of the cost of COBRA premiums. The Fund Office will notify you of both these options to determine which option you are able to use to extend your active Welfare Fund coverage.

Remember, if you lose your active eligibility under the MOE Health Plan Marketplace, you will have to reestablish your eligibility by working 300 hours in a consecutive 12-month period and, as of your eligibility date, you will be autoenrolled into the Bronze PPO Plan.

Retiree Medical Savings Plan (RMSP) account. Interest will be granted to your account at 4%. This interest adjustment will be a line item as of December 31, 2020. You can review this amount in your My150 account at www.My150.com, under the **My RMSP** tab.

Pharmacy benefit. Coverage under the Retiree Welfare Plan (RWP) Medicare Prescription Drug Plan, effective January 1, 2021, allows Medicare-eligible members to receive 24 tablets per 90 days of erectile dysfunction medication. The trustees decided to align this same coverage for active members and pre-Medicare retirees of the RWP, **if prescribed by an Operators' Health Center (OHC) or Activate Healthcare provider.** This plan enhancement went into effect on March 1, 2021.

Vaccinations listed under the OptumRx Vaccine program are now allowed through the Pharmacy Benefit, effective April 1, 2021. For additional details, including copay information and a list of covered vaccines, please visit www.moefunds.com/pharmacy.

Refer to the "Pharmacy Advocate's Corner" article on page 4 for additional details on both enhancements to the Pharmacy Benefit.

Activate Healthcare Family Medical Centers. Eligible active members, retirees, and dependents were able to start using these medical centers effective April 1, 2021. (See pages 1 and 4.)

Applied behavior analysis (ABA) therapy related to autism spectrum disorder. Effective April 1, 2021, this will be a covered service for both the active plan and for the Retiree Welfare Plan, if approved by the Case Manager and is medically necessary.

Absolute Solutions Imaging Network. If a member needs an MRI, PET, or CT scan, we encourage you to contact Absolute Solutions. This partnership became effective on January 1, 2021. The service is FREE if medically necessary and you utilize an Absolute Solutions facility.

Attention Members of the Operators' Health Center Plan

If you use an in-network provider or facility, all covered services under the Operators' Health Center (OHC) Plan are FREE—no deductible, no copay, and no coinsurance. In-network providers include:

- OHC locations in Countryside and Merrillville
- Providers and facilities under the HST Care Connect Network:
 - Advocate Healthcare System
 - Community Healthcare System
 - Methodist Healthcare System
- ATI Physical Therapy facilities
- Absolute Solutions Imaging Network
- MinuteClinic™ in CVS/Target retail stores

If you have any questions regarding the OHC Plan, call **708-579-6668**.



Team Approach to Cancer Care Treats the Whole Patient

CANCER IS A COMPLEX DISEASE.

Treating it involves more than shrinking or removing a tumor. That's why many cancer centers use what's called a multidisciplinary approach.

When you're faced with a frightening diagnosis, this type of treatment gathers a team of experts, from oncologists to social workers. They'll work together to meet your mental, physical, and emotional needs.

When you're choosing a health care provider or hospital, ask if they follow this approach. Multidisciplinary cancer care can:

- Improve treatment outcomes and survival
- Help you understand and cope with your disease
- Ensure your treatment plan is developed just for you
- Ease your fears and help you feel more optimistic
- Reduce the risk for medical errors
- Provide coordinated support during diagnosis, treatment, and follow-up

SPECIALISTS COLLABORATE ON YOUR CARE

Cancer care can be overwhelming. Multidisciplinary treatment helps simplify things for both providers and patients. For one thing, when you go for an appointment, you might see many doctors and other health care professionals at one place.

Your multidisciplinary team may include:

- **Oncologists**, doctors who specialize in treating cancer. Medical oncologists focus on chemotherapy and other drugs, surgical oncologists operate, and radiation oncologists specialize in radiation therapies.
- **A dietitian or nutritionist** to help plan your meals.
- **A pathologist**, or a doctor who specializes in using lab tests to detect diseases.

- **A case manager or patient navigator** who coordinates your care and guides you through each step of treatment. This person might be a nurse or social worker.

YOU PLAY AN IMPORTANT ROLE

These members of your care team will meet to discuss your case. Then they'll recommend a treatment strategy. Your plan will be based on the latest medical evidence. But it will also be tailored to your specific situation.

Communication is key to this type of care. Your team will talk not only with each other, but also with you. They may ask about your thoughts and feelings in addition to your symptoms.

Be open and honest with them, even when you have fears or concerns about your treatment. This helps you understand your options and make treatment decisions that are right for you.





GIVE YOUR DAUGHTER A SHOT AGAINST CANCER WITH THE *Hpv Vaccine*

FROM HEARTBREAK TO SELF-DOUBT TO BODY CHANGES, GROWING UP COMES WITH ITS SHARE OF CHALLENGES. Try as you might, you can't always shield your tween or teen daughter from them.

But a new study confirms one way to keep her safe—for years to come. Get her vaccinated against HPV, or human papillomavirus. This may slash her risk of developing cervical cancer by up to 88%.

HPV: A COMMON THREAT

About eight in 10 people will eventually be exposed to HPV. It's one of the most common sexually transmitted infections. Often people don't even know they have it.

That's a problem. HPV infections can cause cancer in a woman's cervix, vagina, vulva, anus, and throat. In fact, more than nine out of 10 cases of cervical cancer are linked to HPV. The

virus causes more than 21,000 cases of cancer in women each year.

SHOTS PROVIDE EFFECTIVE PROTECTION

Health care providers already knew HPV vaccines were highly effective in fighting the virus and these cancers. The new study, in the *New England Journal of Medicine*, provides added evidence.

Scientists studied more than 1.6 million Swedish girls and women from as young as age 10 through their 31st birthday. For every 100,000 women, 94 who weren't vaccinated developed cervical cancer. The vaccine cut that number to 47.

STARTING YOUNG HAS BENEFITS

Providers recommend two to three doses of the HPV vaccine for both girls and boys. Boys can develop anal, throat, and penile cancers from HPV.

Men and women can get the shots as late as age 26.

But the earlier, the better, since younger immune systems make more virus-fighting antibodies from the vaccine. In the study, only four in 100,000 women who'd started vaccination before age 17 went on to develop cancer.

The Centers for Disease Control and Prevention recommends girls and boys get the shots at age 11 or 12. Some parents worry this encourages sexual activity. Studies dispute this—but an open discussion with your child and the pediatrician can address your concerns.

PROTECT YOUR KIDS WITH VACCINES

What other vaccines might your child need? Check out a vaccination chart at www.cdc.gov/vaccines.



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FRINGE BENEFIT FUNDS

MIDWEST OPERATING ENGINEERS
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COUNTRYSIDE, IL 60525



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Important Information

- > For Valenz Care, Case Manager, call **855-298-0493** or learn more at **www.valenzhealth.com**.
- > For ATI Physical Therapy, call **833-ATI-0001** or visit **www.ATItpt.com/MOE** to locate a facility near you.
- > To locate a Blue Cross Medical PPO provider, call **800-810-BLUE (2583)** or visit **www.bcbsil.com**.
- > For mental health and substance abuse, Member Assistance Program (MAP), and work-life services, call ERS at **855-374-1674**. Or visit the enhanced ERS website at **www.mylifeexpert.com** to create your own personal account (**Company Code: MOEMAP**).
- > To locate a dental provider, call Delta Dental of Illinois at **800-323-1743** or visit **www.deltadentalil.com**.
- > For OptumRx's Customer Care Call Center, call **855-697-9150 (855-MYRX150)**.
- > To confirm eligibility, obtain benefit information, or inquire about a claim, call Member Services at **708-579-6600**.
- > For questions about your pension benefits or for assistance applying for benefits, call the Retirement Services Group at **708-579-6630**.
- > For Operators' Health Center (OHC) appointments, visit **www.operatorshealthcenter.com**.
- > Call EyeMed Advantage Network at **866-393-3401** or visit **www.eyemed.com**. For discounts on hearing aids, call Amplifon at **888-407-7177**.
- > Call Absolute Solutions about free MRI/CT or PET scans at **800-321-5040**.



Member Advocate's Corner



Dear Members and Families,

Lately, the Fund Office has seen an uptick in appeals for the coverage denial of intermittent pneumatic compression devices, a durable medical equipment item that is being ordered after orthopedic joint replacement surgery. These devices cost anywhere from \$5,000 to \$7,000 and are used for prevention of deep vein thrombosis (DVT) for patients who find themselves in one of the following categories: are bedridden, have a condition that would not allow them to use medication to combat DVT, or are considered high risk for DVT. Because these devices are more than \$1,000, it would require approval through the Fund Office's case manager to be considered under the medical coverage.

The appeals that come in for this device often report the same situation: When the orthopedic surgeon's office contacts the case manager to get the approval for surgery, the office is not getting the device reviewed by the case manager at the same time. So, a retro review is then requested at the time the Fund Office receives the claim. When a retro review is completed by the case manager, the use of this device is coming back as not medically necessary or standard of care because the patient who received the device does not have any of the above-mentioned conditions that would require the

need for this device. The claim therefore gets denied and the patient appeals with the Fund Office. As the plan will only consider equipment determined to be medically necessary and standard of care, the Appeals Committee ends up denying the appeal by the patient.

Don't find yourself in this situation! Take an active role in your health care. Talk with your providers and ask questions, especially if you're having surgery, to find out if you will need any follow-up care, like durable medical equipment, or inpatient or outpatient rehabilitation. To remove all doubt, use the Valenz Case Management Services available and have your provider call **855-298-0493**. Know what is covered under your plan by reviewing your schedule of benefits. These are your benefits, and you should be able to access them when you need to. However, you can't always assume the item or service being recommended is covered under your plan. As always, if you have any questions or need assistance, you can call Member Services at **708-579-6600**.

Respectfully yours,
Kerry McMahon
Member Advocate