



Healthy Structures
YOUR TOOLS FOR A SMART FINISH

- Please read this important announcement about changes to your benefits.
- It explains how the changes work and what you need to do.
- The changes go into effect on September 1, 2011.
- Contact the Trust Fund Office at 1-888-245-5005 if you have questions.
- The information in this brochure applies for active employees only.

Your benefit Trust Fund is working to make sure you have access to quality health care, when you need it, at prices you can afford.

Your employer's contributions for your health benefits are the primary source for paying your health premiums and claims. The contributions are part of the money negotiated for your wages and for your health and retirement benefits. When health costs are on the rise, the contributions needed for your health benefits must go up, too. However, if we can flatten our health care costs, we may be able to allot more money toward your pay and retirement.

To flatten health care costs, your benefit Trust Fund is making three important changes to your programs. The changes go into effect on September 1, 2011:

- 1** You will need to talk with a "Care Counselor" before you receive **non-emergency** care from anyone other than your primary doctor.
- 2** If you need routine total hip replacement or total knee replacement surgery, you will save money if you work with an Anthem Blue Cross "Designated Hospital."
- 3** You will need to use the lowest cost prescription drugs whenever appropriate.

If you take the time to understand why the changes are necessary and what you need to do, you will save money without sacrificing any quality in your care.



Program Change #1: Care Counseling

We are introducing a new program called Care Counseling. Before you get **non-emergency treatment** outside of your primary doctor's office, you need to take the simple step of calling a Care Counselor. (Primary doctors include family/general practice physicians, internists, pediatricians, and OB-GYNs.)

The Care Counseling program is provided through a Northern California-based health company called Pacific Health Alliance (PHA). Your conversations with a Care Counselor are completely confidential.

Why are we introducing this program? Anthem Blue Cross network providers can charge **very different costs** for the **same service**. Since you share in the cost for health care services, we think you'll benefit from knowing the costs **before** you get treatment. We also want you to have a confidential, unbiased resource to help you navigate the health system and your care.

Here is what you need to do.

- You can reach our Care Counseling service at 1-855-754-7271. Representatives are available on Monday through Thursday from 7:00 a.m. to 7:00 p.m., and on Friday from 7:00 a.m. to 5:00 p.m. (Pacific Time).
- You will talk with your Care Counselor about the different Anthem Blue Cross network providers who offer the services you need and their costs. You will continue to be able to visit any provider, but we think most of you will choose a lower cost option if you know about it.
- You can also talk with your Care Counselor about the recommended treatment for your injury or illness. Your Counselor will help you understand what to expect and help you think about questions to ask your doctor as you proceed with treatment. Also note, a dedicated nurseline is available after hours. When you call after hours, you'll connect with a registered nurse who can answer questions about your health.
- Your Care Counselor may ask you if you have a relationship with a doctor that you consider to be your personal doctor. If not, the Counselor can help you find one.

Calling our Care Counseling service before you receive specialized treatment can save you hundreds of dollars, with no effect on the quality of your care. We hope you will take advantage of this important new program.

There is no penalty if you don't call our Care Counseling service. However, one of the goals of this program is to save you and your benefit Trust Fund money. This program will help, because it can direct you to cost-effective Anthem Blue Cross providers. So, if participants do not use this service over the next few months, a penalty for **not calling** may apply in the future. (For example, you could pay extra for certain procedures and services if you don't call a Care Counselor first.) We will communicate the initial results of this program in the coming months.

Program Change #2: Using an Anthem Blue Cross “Designated Hospital” for Routine Total Hip Replacement or Total Knee Replacement Surgery

Starting in September, you will have a big incentive to use an Anthem Blue Cross “Designated Hospital” for routine total hip replacement or total knee replacement surgery. The Designated Hospitals are contracting with your benefit Trust Fund to charge no more than \$30,000 for these surgeries. This will become the maximum charge allowed for these surgeries.

Why are we making this change? Charges for routine total hip replacement and total knee replacement surgery can vary greatly among Anthem Blue Cross hospitals and facilities. Yet, there is little evidence of a higher quality of care at a higher cost facility. This fact can cost you and your benefit Trust Fund thousands of dollars.

Here is how the benefit works.

If You Visit an Anthem Blue Cross Designated Hospital	If You Visit Another Anthem Blue Cross Network Hospital	If You Visit An Out-of-Network Hospital
<ol style="list-style-type: none"> 1. You pay 20% of the cost until you meet your annual out-of-pocket maximum (\$3,000). 2. Your benefit Trust Fund pays the rest. 	<ol style="list-style-type: none"> 1. You pay 20% of the cost until you meet your annual out-of-pocket maximum (\$3,000). 2. Your benefit Trust Fund pays the remaining balance, up to \$30,000. 3. You pay any additional amount due. 	<ol style="list-style-type: none"> 1. You pay 40% of the first \$15,000 of allowable charges. 2. Your benefit Trust Fund pays the remaining balance, up to \$30,000. 3. You pay any additional amount due.

Which hospitals are on the Anthem Blue Cross Designated Hospital list?

Your benefit Trust Fund is working with well-known and well-respected hospitals in California to provide you with this benefit. There are over 40 hospitals on the Anthem Blue Cross Designated Hospital list. You can get a copy of the Designated Hospital list through the Trust Fund website at www.norcalcementmasons.org, or request a copy from the Trust Fund Office.

If you need to travel more than 50 miles from your home to a Designated Hospital, your benefit Trust Fund may reimburse up to \$750 of your travel expenses (mileage, hotel costs, and meals). Reimbursement for travel may be considered taxable income by the IRS. If you request reimbursement, you will receive a 1099 Form from the Trust Fund Office for income reporting.

Here is what you need to do.

- If you are planning routine total hip replacement or total knee replacement surgery, call our Care Counseling service at 1-855-754-7271. Your Care Counselor will review your treatment plan and talk with you about the Designated Hospitals you might consider.
- Your Care Counselor will also remind you to pre-authorize your surgery with Anthem Blue Cross and can assist you with that process. (To keep your costs as low as possible, be sure to call Anthem Blue Cross at 1-800-274-7767 before **any** inpatient hospital stay.)
- Once approved by Anthem Blue Cross, you can go forward with your surgery.
- Contact the Trust Fund Office at 1-888-245-5005 if you want to take advantage of the \$750 travel allowance.

Planning routine total hip or total knee replacement surgery?

Make sure you understand your share of the costs **before** your surgery. Call our Care Counseling service for help.

Program Change #3: Incentive for Use of Generic/Lower Cost Prescription Drugs

Starting in September, your benefit Trust Fund will introduce a new list of covered drugs. (The covered drug list is known as a “formulary list.”) The new formulary list will include the most cost-effective drugs for treating various classes of conditions and illnesses—for example, drugs to lower cholesterol, drugs to treat allergies, and drugs for diabetes. **The list will include mostly generic medications and some cost-effective brand name medications.**

Why are we making this change? For most people, generic drugs are as effective as brand name drugs in treating an illness or a health condition. And, generic drugs cost much less.

Here is how the benefit works.

- You pay a set copay for the drugs **included** on the formulary list:

	At the Pharmacy (30-day supply)	Mail-Order Maintenance Drugs (90-day supply)
Formulary Generic	\$10 copay (first three fills) \$20 copay (fill four and after)	\$20 copay
Formulary Brand	\$25 copay (first three fills) \$50 copay (fill four and after)	\$50 copay

- You pay the **full cost** for drugs that are **not on** the formulary list.

The new formulary list will be available through the Prescription Solutions website, www.prescriptionsolutions.com, on September 1, 2011. You can also request a copy through Prescription Solutions customer service at 1-800-797-9791.

Here is what you need to do.

- When your doctor prescribes a medication, always ask if it is a generic drug. If not, ask if it would be appropriate for you to try a generic or lower cost option.
- If your current medications are **on the new formulary list**, you don't need to take any action.
- If you are taking medications that are **no longer on the formulary list**, talk with your doctor right away. Ask if there are alternative medications available to treat your illness or condition. If appropriate, ask your doctor if you can try an alternative. However, if your doctor has determined that your non-formulary drug is medically necessary, he/she can request an exception. When approved, you pay the copay for formulary brand name drugs. You or your doctor can call Prescription Solutions at 1-800-711-4555 to start this process.

Go to the Prescription Solutions website, www.prescriptionsolutions.com, to compare the costs between generic vs. brand drugs. You will need to register, so be sure to have your prescription drug ID card handy.

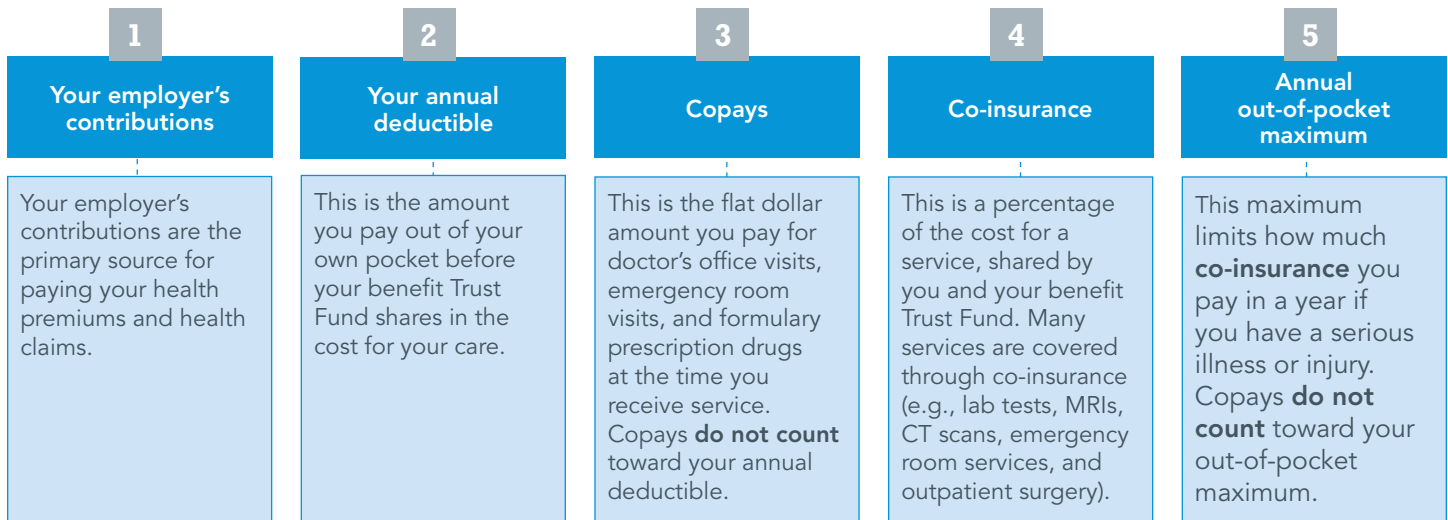


We're In This Together—Your Actions Make a Difference

We all share responsibility for making smart, informed decisions about our health. During the next few months, your benefit Trust Fund will provide you with resources to help you. We need you to take an active role in your health.

Start Here: Understand how health insurance works.

Ask how much services cost and understand the share you have to pay. Here's how the money works when it comes for paying for your care.



Refer to your benefit plan comparison, available through the Cement Masons website, www.norcalcementmasons.org, for the deductible, copay, co-insurance, and out-of-pocket maximum amounts that apply for your care.

Next Step: Plan ahead and make informed decisions.

Our health benefit changes will give you a view into the real cost for your care. Your call to a Care Counselor will start a conversation about the costs you can expect. You can also use the following resources:

Medical Care	Prescription Drugs
<p>Register to use the Anthem Blue Cross website, www.anthem.com/ca. Be sure to check out these tools:</p> <p>Care Comparison You can compare the costs charged by different Anthem Blue Cross network providers. When you do, think about the share you will pay.</p> <p>Find a Doctor Search for a network primary doctor, specialist, hospital or other health care provider. Be sure to choose "Large Group Plan" under "plan type" and "Blue Cross PPO (Prudent Buyer)" under "select a plan."</p>	<p>Register to use the Prescription Solutions website, www.prescriptionsolutions.com. You can set up a personalized account and manage your prescriptions online, learn more about your medications, and compare the differences in generic vs. brand name drug costs.</p> <p>Check out the Consumer Reports prescription drug website, www.consumerreports.org/health/home.htm. You'll find unbiased comparisons of generic vs. brand name drug effectiveness and costs.</p>

Coming Soon: Think about your health status and how it affects your health costs.

When was your last visit with the doctor? Do you know your health risks? Do you know how to improve your health or manage a health condition? As we go into 2012, your benefit Trust Fund will introduce new programs and incentives that help you take action on your health. We'll sponsor a free health screening, and you can share the results with your doctor. If you need to make some changes to deal with a health risk or health condition, we'll provide you with resources to help.

Watch for more information during the next few months.

Learn more about the preventive health screenings recommended for you and your family at www.healthfinder.gov/prevention.

Important Resources for Your Health

Who	Why	Phone	Website
Care Counseling (Provided through Pacific Health Alliance)	<ul style="list-style-type: none"> ■ Call before you receive non-emergency care outside of your primary doctor's office. ■ Get information about the costs for your treatment plan. ■ Ask questions and get information about your illnesses or your injuries. 	1-855-754-7271	www.pacifichealthalliance.com
Anthem Blue Cross	<ul style="list-style-type: none"> ■ Find a primary doctor, specialist, hospital, or other health care provider. ■ Compare the costs for many services and network providers. ■ Get quality information about many network providers. ■ Pre-authorize a hospital visit. ■ Find wellness resources. 	1-800-274-7767 (for hospital pre-authorization) 1-855-754-7271 (for help finding a provider and information about costs and quality) 1-888-245-5005 (for benefits and claims questions)	www.anthem.com/ca
Prescription Solutions	<ul style="list-style-type: none"> ■ Get the formulary drug list. ■ Compare your costs for generic vs. brand drugs. ■ Manage your prescriptions. ■ Find a network pharmacy. 	1-800-797-9791 1-800-711-4555 (to request a formulary list exception)	www.prescriptionsolutions.com
Northern California Cement Masons Trust Fund Office	<ul style="list-style-type: none"> ■ Get information about your benefits, eligibility, and claims. ■ Request copies of plan summaries and communications. 	1-888-245-5005	www.norcalcementmasons.org



Healthy Structures
YOUR TOOLS FOR A SMART FINISH