

Cement Masons Health and Welfare Trust Fund for Northern California
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IMPORTANT ANNOUNCEMENT

Insert with the September, 2011 Bulletin

Date: September 15, 2011

TO: All Active Direct Payment Plan Employees and Eligible Dependents

RE: Healthy Structures, Your Tools for a Smart Finish Program

In July and August, Active Employees were sent various informational flyers, with the last mailing on August 30th. The flyers announced a new Program, called "**Healthy Structures, Your Tools for a Smart Finish**" and outlined three upcoming changes to the **Active Direct Payment Plan: (1) a new Care Counseling Benefit; (2) a new custom Prescription Drug Formulary, and (3) Designated Hospitals for Routine Total Hip or Knee Replacement Surgery.**

We briefly outlined the new **Care Counseling Benefit** as an article in the September, 2011 Cement Masons bulletin; the other two changes are being repeated from the July and August flyers in two separate **Important Announcements** and are included as inserts with the September, 2011 Bulletin.

ROUTINE TOTAL HIP OR TOTAL KNEE REPLACEMENT SURGERY
Insert #11 to the September, 2007 Health and Welfare Plan Booklet

Effective **September 1, 2011**, the maximum that will be allowed for **inpatient hospitalization charges** for routine total hip or total knee replacement surgery is **\$30,000**. The professional **surgical** fees are separate.

There are **currently** 46 Anthem Blue Cross **Designated Hospitals** throughout California where it has been determined that the negotiated hospital fees are **\$30,000 or less**. Call Care Counseling at the telephone number below for the most **recent list of Designated Hospitals**.

When you call **Care Counseling at 1 (855) 754-7271**, they will coordinate your care for the referral to the specialist and if you do need to have a routine total hip or total knee replacement, they will help you navigate through the process where you will be saving the most money on your share of cost for the surgery.

While you can use any Anthem Blue Cross Prudent Buyer Plan participating hospital, only those currently **Designated Hospitals have a negotiated contract rate that is no more than \$30,000 for the hospitalization fees**. If you chose a hospital other than one of the Anthem Blue Cross **Designated Hospitals**, you will pay any amount over the **\$30,000** maximum in addition to your coinsurance.

☎ Designated Hospitals may change from time-to-time. Call the Care Counselor for the most up-to-date information about Designated Hospitals.

If you need to travel more than 50 miles to use a **Designated Hospital**, you may be reimbursed for up to \$750 for mileage, hotel expense, and meals. Any amount you receive is reportable income on your taxes; the Trust Fund will provide you with a Form 1099 at tax time; you should keep a record of your mileage and your receipts for income tax purposes.

If you do not use the services of a **Care Counselor**, you may experience higher out-of-pocket costs on your surgery or any other non-emergency services.

If you have questions, call the Trust Fund Office, Monday through Friday, 8:00 AM to 5:00 PM **or** a Care Counselor at **1 (855) 754-7271 Monday through Thursday, 7:00 AM to 7:00 PM and Friday, 7:00 AM to 5:00 PM.**

Sincerely,

Board of Trustees