

Health Advocate™

Great news – Health Advocate[™] has new, extended hours!

Now you can reach your Personal Health Advocate[™] Monday through Friday between the hours of 8:00 am and 12:00 am (midnight), Eastern Time. This is great news for everyone, especially our Members on the West Coast! After these hours and during weekends, staff is available for assistance. To reach Health Advocate[™], call 1-877-325-7265, Option 2, and don't forget to save the number for Health Advocate[™] in your phone's contact list!

Know Before You Go

Do you have an upcoming appointment or procedure? Give your Personal Health Advocate™ (PHA) a call and ask any questions you have about coverage and anticipated costs. Your PHA is prepared to discuss all of the following items.

- · What do Medicare and your ITDR Medical Plan cover?
- Do the hospital and doctors you plan to see accept Medicare?
- Does an item require preapproval? (This is not common with Medicare, but there are some rules.)
- What important questions should you ask your provider about your specific situation?
- For a costly procedure, can Medical Bill Saver help you by negotiating a reduced fee before your appointment?

Let your PHA do the legwork to find out the details for you! After your appointment or procedure, your PHA can provide additional support such as discussing a diagnosis, planning next steps in your care, sorting through billing, and, if necessary, advising you about the appeals process.

Avoid Unnecessary Medical Testing

We all want to get the best, most up-to-date care available. However, when it comes to testing and treatment, more is not necessarily better. In fact, some tests can lead to costly, invasive procedures.

Before undergoing any medical tests, it's important to ask your doctor to clarify the reasons for a specific test. If you need help talking to your doctor or scheduling a second opinion, your Personal Health Advocate™ (PHA) can help.

In discussion with your PHA, you may also learn what other tests are available, and what screening tests are appropriate for your age group – all important information to discuss with your doctor.

Remember, your PHA is ready to help you, as well as your spouse, parents, and parents-in-law. Call today!

Get in touch with your Personal Health Advocate™!

Save the phone number for Health Advocate™ in your phone's contact list!

Your Lifeline • Your Confidential Resource • Your Negotiator



1-877-325-7265, Option 2

Normal business hours are M-F, 8 a.m. - 12 a.m. (midnight) EST. After hours and during weekends, staff is available for assistance.



answers@HealthAdvocate.com

Your request will be assigned within 24 hours.

ALERT: Compound Medications: Safety and Financial Concerns



Why this alert?

Compounding drugs is a method by which entrepreneurs are able to create a product in "compounding pharmacies" that for a time slipped under the radar of both the Food and Drug Administration (FDA) and insurance companies.

Result: Patient Safety risks, actual and potential, and rampant cost increases to pharmacy benefit plans are of great concern.

What are compound medications?

Compound medications are drugs that are combined or mixed by a pharmacist to create medications such as topical ointments, creams, and powders for treating pain, scars and wrinkles, with active ingredients which are approved by the FDA, plus other additives.

When the active ingredients are mixed with other ingredients by "compounding pharmacies" the result is a new product (drug) that is not approved by the FDA and is therefore not commercially available. They are available for sale as "individually prescribed and mixed" from approved drugs.

What are the concerns with compounds and compounding pharmacies?

Your safety: Compounded drugs *are not approved* by the FDA, so their quality, safety and effectiveness can't be verified.

Likewise, government oversight of the compounding pharmacies themselves has not been adequate in well publicized instances.

An outbreak of fungal meningitis in 2012 was traced to a compounding pharmacy in New England. The incident was called the worst public health crisis in the U.S. in decades and led to an FDA crackdown.

The cost of compounding pharmacy drugs: Between 2012 and 2014, the average compound prescription cost rose to \$1,100 from \$90, and for about a dozen compounds, the actual cost jumped by more than 1,000%. As a result, the amount spent by prescription drug plans for compounds increased to roughly \$171 million in first quarter 2014, up from \$28 million during the comparable period in 2012.

How can this happen? In 2012, the National Council on Prescription Drug Programs, which sets standards for billing practices, made a change permitting compounding pharmacies to bill for <u>each</u> ingredient included in the compound individually. Until then, coverage was based only on the most expensive ingredient. This change provided ingredients suppliers the ability to charge higher prices for all ingredients. Express Scripts compares the situation to buying a burger at a fast food restaurant two years ago for \$5, but now paying, say, \$30, because the restaurant has decided to charge for each ingredient – the bun, pickle, tomato, lettuce and so on.

Waste: For nearly all of these compounded products, there is already an FDA-approved generic or brand commercial preparation available with the same active ingredient and covered under your drug plan.

What do you need to know now, and for the future?

To help preserve affordable prescription drug plans, and for Member safety, many drug plans are now excluding coverage for compounds, and the ITDR Prescription Drug Plan will as well, beginning in 2016.

Ask your doctor if there is an FDA-approved, commercially available medication for your condition, if he or she recommends a compounding pharmacy product to you. By doing so, you'll be helping to ensure your safety, and that your therapy is covered by your plan.

Questions about compounds?
Call Express Scripts 24 hours a day,
7 days a week: 1-844-470-1529.



Express Scripts Provides Personalized Care through Specialist Pharmacists and the Therapeutic Resource Centers

Express Scripts recognizes that our ITDR Members are unique individuals, and not everyone can be treated exactly the same way. Some Members, such as those with high blood pressure, Hepatitis C, high cholesterol, asthma, depression, diabetes or cancer, need a higher degree of clinical support. Specialist pharmacists and the Therapeutic Resource Centers (TRC) offer the personalized care, information, and counseling these Members need to achieve healthier outcomes.

If you call Express Scripts and want to speak with a specialist pharmacist, you'll be directed to the TRC specifically chosen for you. Members are assigned to a TRC based on their prescription history and other factors.

Benefits to ITDR Members:

- Access to specialist pharmacists is free of charge to all ITDR Prescription Drug Plan Members.
- Specialist pharmacists provide support whether you use the Express Scripts home delivery pharmacy or a retail pharmacy.
- Specialist pharmacists are available 24/7 by calling the Member Services number on the back of your Express Scripts ID card, 1-844-470-1529, and they have the time to talk to you at length, in private, without distractions.
- You can also reach a specialist pharmacist by logging into expressscripts.com, visiting Health and Benefits Information / Resource Center, choosing a topic, and then clicking the link on the right to "Ask a specialist pharmacist." You should receive a response in 24 to 72 hours.

How can the TRC help you?

Adverse side effects discourage you from taking necessary medications as you should.

You call Express Scripts, and a TRC specialist nurse reviews your situation, prescription history, and overall therapy, and makes suggestions to prevent side effects, such as timing medications before or after meals to help lessen stomach irritation. The nurse then connects you with a specialist pharmacist for additional support. This pharmacist helps you understand which over-thecounter drugs interact with your prescriptions so you can make adjustments, and the pharmacist becomes a resource you can call again in the future if needed.



Travel with Confidence!

Your Trust Medical and Prescription Drug Plans include valuable foreign travel coverage for illness, accidents, and more:

- ITDR Medical Plan: Foreign Travel Emergency Coverage
- ITDR Prescription Drug Plan: Foreign Travel Prescription Coverage
- Travel Assistance Services (an additional benefit to your ITDR Medical Plan, through The Hartford)

Look for more information about these benefits in the electronic version of this newsletter at our website, itdr.com!





Insurance Trust for Delta Retirees 11330 Lakefield Drive, Building 1 Duluth, GA 30097

Please make a note of your Trust Board's mailing address. Please continue to send account specific correspondence (including premium payment, insurance plan eligibility, enrollment status, medical claims status or questions, and Delta subsidy information) to the Retiree Service Center (Mercer): Insurance Trust for Delta Retirees Service Center, P.O. Box 14464, Des Moines, IA 50306-3464

Visit with your ITDR Trust Board in 2015!

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Annual Trust Plan Benefits Road Show (ATL)

Save the date! The Atlanta Road
Show will be on Wednesday, October

28, 2015, from 9:00 a.m. to 12:30 p.m., at the Delta Flight Museum. Join us to learn more about your benefits, get news and updates for 2016, and visit with friends. Put it on your calendar now – it's never too early to plan!

See you there!

Your Trust has a new shorter website address: itdr.com

Save us in your favorites and check the Message Center often for updates. Keep in touch with us at trustmailbox@itdr.com, (but please remember we cannot accept messages with any personal health information). Our old address, insurancetrust4deltaretirees.com will remain active as well.



Some status changes will result in a new Medicare number. For example, you sign up for Medicare using your Social Security number on your 65th birthday, and you have chosen to delay claiming Social Security until you turn 70. Medicare sends you a Medicare card with your Medicare number: your Social Security number with an "A" behind it. The "A" is Social Security's code that you are the retired worker.

When you turn 70, you decide to apply for spouse benefits under your spouse's Social Security. Medicare sends you a new Medicare card with a new Medicare number: your spouse's Social Security number with a "B" behind it. The "B" is Social Security's code for the wife of the retired worker. (For men that claim spouse benefits, the code is "B1" for the husband of the retired worker.)

What do you do now that you have a new Medicare number? Make sure to tell your providers and show them the new card.

How does this affect your ITDR Medical Plan?

The Retiree Service Center is automatically informed of the new number by Medicare. Your ITDR Medical Plan will continue to pay claims as usual, and is equipped to do so whether the claim is submitted under your old number or new number, while your providers are updating your records.

If you have questions or need any assistance with a Medicare number change, call Health Advocate $^{\text{TM}}$ at 1-877-325-7265, Option 2.