Welcome!

We’re pleased to present our winter issue of—“Sprinkler Fitter You”—the NASI Welfare Fund’s quarterly newsletter that provides customized content exclusively for our participants. Our goal is to provide important and timely Welfare Plan information that helps you make the most of your benefits.

If you have any questions or would like more information about what you’ve read here, please contact the NASI Fund Office at 800-638-2603. We’re here to help!

A Closer Look at Preventive Care Visits

In our fall issue, we talked about preventive care services being covered at 100% under the Affordable Care Act (ACA). While this is generally accurate, there are certain factors that can affect whether or not a service is considered preventive. In some cases, your age, gender and even risk factors for certain diseases will determine whether or not a service is preventive. For example, for a cholesterol screening to be covered at 100%, you must be:

• A male 35 or older;
• A male between age 20-35 who has heart disease or risk factors for heart disease; or
• A female age 20 or older who has heart disease or risk factors for heart disease.

You can find a full list of covered preventive services and the age, gender and risk factor criteria for those services on the ACA website at: www.healthcare.gov/preventive-care-benefits/.

Is it a Diagnosis or Prevention?

When your doctor suggests a preventive screening or test, you should ask if it will be fully covered. There are circumstances under which a service is considered diagnostic rather than preventive, and is therefore not covered at 100%. Let’s say you have a routine blood sugar test as part of your annual physical and the results indicate that you could be prediabetic. Your doctor may recommend further tests. Those additional tests are considered part of a diagnosis, and you would be responsible for sharing the cost.

Even if your preventive service is covered at no cost, you may still have to pay for part of your office visit. For example, if you go to the doctor’s office because you have leg pain and the doctor gives you a routine blood pressure screening during the visit, you would still be responsible for paying the coinsurance for the doctor’s office visit, because the blood pressure test was not the main reason for your visit. The blood pressure screening, however, would be covered at 100%.

The next time you are considering a preventive service or your doctor recommends one, keep this “fine print” in mind. If you are uncertain as to whether or not a service is covered, check with the Fund Office.
GET TO KNOW YOUR PRESCRIPTION DRUG BENEFITS!

When your doctor prescribes you a medication, navigating your benefits should be your last concern. We’ll try to simplify your prescription drug coverage so that you can keep your focus where it should be — on getting better.

The NASI Welfare Fund’s Prescription Drug Program features a retail pharmacy benefit and a mail-order program, both provided through Express Scripts.

**Retail Pharmacy**

If you need a prescription filled for an acute condition, simply present your prescription with your Express Scripts (ESI) ID card at your local pharmacy.

Most major pharmacy chains participate in the ESI network.

- If you ask for and receive the generic medication, you’ll pay 25% of the cost for up to a 30-day supply.
- If there is no generic equivalent for your medication, you’ll pay 25% of the cost for a preferred brand-name drug. Brand coverage is limited to generic cost when a generic equivalent is available.
- If you receive a non-preferred brand name drug, you’ll pay 35% of the cost for a 30-day supply.

**Mail-Order Program**

If you take medication on a routine basis to treat a chronic condition (like high cholesterol, high blood pressure or asthma), you should use the mail-order program to have your prescriptions filled.

The Mail-Order Program saves you both time and money. For the generic version of a medication, you can receive up to a 90-day supply — delivered right to your door — for 25% of the cost. You will receive your order within 10-14 days after Express Scripts receives your order. Your medication will be delivered to your home via UPS or first class U.S. mail.

**IT PAYS TO GO GENERIC!**

*Generic medications are the way to go. They contain the same active ingredients as their brand-name counterparts, but they cost a lot less. If you request a brand-name drug when a generic is available, you will be charged the difference in the cost between the brand-name drug and generic substitute.*

For more information about your prescription drug benefits, visit Express Script’s website www.express-scripts.com or call the Fund office at 800-638-2603.

**WHAT’S THE DIFFERENCE BETWEEN A “PREFERRED” BRAND-NAME DRUG AND A “NON-PREFERRED” BRAND-NAME DRUG**

Preferred drugs are on the Express Scripts “formulary” — a list of recommended of generic and brand-name prescription medications that is created, reviewed and continually updated by a team of physicians and pharmacists. Non-preferred drugs are drugs that are not on the formulary because they have not been found to be any more cost effective than available generics, preferred brands, or over-the-counter drugs. You can find a link to the current formulary on the Express Scripts website (www.express-scripts.com) or at www.nasifund.org.

**FREE MOBILE APP FROM EXPRESS SCRIPTS!**

Express Scripts offers a free mobile app, available on Apple, Android, Windows and Blackberry device that allows you to:

- Track the status of your mail-order prescriptions
- View your current medications, set reminders to take or reorder them, and get personalized safety alerts
- View lower-cost prescription options under the plan

Visit your app store and download the app today!
FEBRUARY IS AMERICAN HEART MONTH!

Did your New Year’s resolutions for 2015 include making sure you have a healthy heart? If not, make a pledge this month, along with millions of other Americans, to take the right steps to improve your heart health.

Cardiovascular disease (CVD)—including heart disease, stroke, and high blood pressure—is the leading killer of women and men in the United States. It is the number one cause of disability as well—preventing Americans from working and enjoying family activities. Sadly, one out of every four deaths in the United States is due to CVD. To put that into perspective, every 33 seconds someone in the US dies from a CVD-related illness.

What Can I Do?

Some risk factors, such as age and family history, can’t be changed. But there are a number of other risk factors you can change. The Centers for Disease Control (CDC) offers some tips to make your efforts more effective:

- **Get a checkup at least once each year.** Your doctor can check for conditions that put you at risk for CVD, such as high blood pressure and diabetes—conditions that can go unnoticed for a long time.

- **Monitor your blood pressure.** High blood pressure often has no symptoms, so be sure to have it checked on a regular basis. You can check your blood pressure at home, at a pharmacy, or at a doctor’s office.

- **Get your cholesterol checked.** You should check your cholesterol levels at least once every five years.

- **Eat a healthy diet.** Having a healthy diet can reduce many of the other risk factors for heart disease. It is one of the most important steps for prevention. For more information on eating a healthy diet, you can visit the CDC’s Nutrition page: www.choosemyplate.gov.

- **Exercise regularly.** Physical activity can help you maintain a healthy weight and lower cholesterol and blood pressure. Adults should engage in moderate activity for at least 150 minutes per week.

- **Don’t smoke.** Cigarette smoking greatly increases your risk for CVD. We offer employees many resources for tobacco cessation, including the Quit for Life® Program and discounts on cessation medication.

- **Limit alcohol use.** Men should stick to no more than two drinks per day, and women to no more than one.

Knowing Your Numbers

Another key to reducing your risk for heart disease is to keep your health numbers — blood sugar, cholesterol, blood pressure and body mass index (BMI) — within their recommended ranges.

<table>
<thead>
<tr>
<th><strong>Blood Sugar</strong></th>
<th>is the amount of sugar (glucose) in the blood. A blood sugar test is commonly used to diagnose the presence of diabetes. Left untreated, diabetes can lead to heart disease, kidney disease, and other complications. Blood sugar is measured by the amount of glycosylated hemoglobin (HbA1c) in your blood.</th>
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<td><strong>RECOMMENDED RANGE</strong></td>
<td>Less than 130 mg/dL</td>
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<th><strong>Blood pressure</strong></th>
<th>is the force of blood against the arteries when the heart beats and rests. High blood pressure (hypertension) increases your risk of heart attack, stroke, and kidney disease. It also can damage your brain, eyes and arteries.</th>
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<td><strong>Upper Number (Systolic)</strong></td>
<td>less than 120</td>
</tr>
<tr>
<td><strong>Lower Number (Diastolic)</strong></td>
<td>less than 80</td>
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<th><strong>Cholesterol</strong></th>
<th>is a fatty substance that our bodies need to form cell membranes, many hormones and bile acids (which digest fat). When there’s too much cholesterol in your blood, it can build up on the inside walls of your arteries and increase your risk of heart disease and stroke.</th>
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<tr>
<td><strong>Total Cholesterol:</strong></td>
<td>200 or less</td>
</tr>
<tr>
<td><strong>HDL (“good”) cholesterol:</strong></td>
<td>40 mg/dL or higher</td>
</tr>
<tr>
<td><strong>LDL (“bad”) cholesterol:</strong></td>
<td>less than 100 mg/dL</td>
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<tr>
<td><strong>Triglycerides:</strong></td>
<td>less than 150 mg/dL</td>
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<th><strong>BMI</strong></th>
<th>“Body Mass Index,” a tool for indicating weight status in adults. As BMI rises, the risk for some diseases increases. A person’s ideal body weight varies by gender, age, height, and frame. Your body mass index (BMI) and waist circumference provide good indicators of whether you are at a healthy weight.</th>
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<tr>
<td><strong>Below 18.5 — Underweight</strong></td>
<td>18.5 – 24.9 — Normal</td>
</tr>
<tr>
<td><strong>25.0 – 29.9 — Overweight</strong></td>
<td>30.0 and Above — Obese</td>
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THE NASI PERSONAL HEALTH MANAGEMENT PROGRAM: YEAR-END STATISTICS

On August 1, 2014, we launched a new benefit program called the “NASI Personal Health Management Program.” The Program helps participants with chronic conditions (like asthma, diabetes, COPD and high blood pressure) by giving them the support and tools they need to effectively manage the symptoms of their conditions and improve their quality of life. By the end of the year, we are pleased to report that 542 members are currently enrolled in the program and 19 members have already graduated.

“After joining the program to assist with my asthma, I reviewed the breathing exercise material and now do exercises five days per week. I am short of breath much less I have not had to use my rescue inhaler in the last month.”
—Program Enrollee

REMINDER: TAKE THE CALL!

If you are contacted by a Carewise Health representative about enrolling in the Program, please take the call—it’s about you!

Want More Information?

There is more information about the NASI Personal Health Management Program on the Fund’s website: www.nasifund.org or by calling Carewise Health at 866-691-8433.

The information provided in Sprinkler Fitter You is of a general nature only and does not replace or alter the official rules and policies contained in the official plan documents that legally govern the terms and operation of the NASI Welfare Fund. If this newsletter differs in any way from the official plan documents, the official plan documents always govern. Receipt of this newsletter does not guarantee eligibility for benefits. The Trustees have the right to modify benefits at any time.