

F O R Y O U R Benefit



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Protecting your skin from the summertime sun - and all year long

By now, we've all heard the warnings and understand the dangers of too much sun exposure and the subsequent risk of developing skin cancer. In fact, unprotected sun exposure can lead to a host of additional problems, including premature aging of the skin, wrinkles, freckles, discoloration of the skin, actinic keratosis (skin growths), and general skin dryness.

What you may not know is that skin cancer is the most common form of cancer in the United States with more than 3.5 million skin cancers in over 2 million people diagnosed annually, reports the Skin Cancer Foundation. Consider the following facts:

- One in five Americans will develop skin cancer in the course of a lifetime, according to the American Cancer Society.
- Basal cell carcinoma, rarely fatal, is the most common form of skin cancer, with an estimated 2.8 million individuals diagnosed annually in the U.S.
- Squamous cell carcinoma is the second most common form of skin cancer with approximately 700,000 cases diagnosed each year and killing 2,500 annually in the U.S.
- Melanoma accounts for only about 3 percent to 4 percent of skin cancer cases but causes more than 75 percent of skin cancer deaths.
- An estimated 9,480 people will die of melanoma in 2013.
- About 86 percent of melanomas and 90 percent of non-melanoma skin cancers can be attributed to the sun's ultraviolet rays.

What to look for

Basal cell carcinomas account for 80 percent of all skin cancers but are the most easily treated. Basal cell tumors usually present themselves as small, fleshy bumps on the head, face, neck, or hands but can be found elsewhere. They may look pearly and raised or crusty and bleeding. This cancer grows slowly and rarely spreads.

Squamous cell carcinomas (16 percent of skin cancers) are tumors that may appear as nodules or as red or pink, scaly patches typically on the face, hands, and ears. This cancer may spread to other parts of the body, but can be easily treated if it's detected early.

Malignant melanomas are the most serious type of skin cancers, though they can be treated successfully if caught early on. Melanomas begin as dark brown or black flat spots with irregular borders that often begin to change shape or color. This skin cancer is now one of the most common cancers among adolescents and young adults ages 15 to 29.

Protecting yourself

Unprotected exposure to UV radiation is the most preventable risk factor for skin cancer and other skin damage, according to experts. What the best course of attack for keeping that glaring sun off your skin?

1. Cover up with clothing

Light-colored clothing reflects the sun's rays rather than absorbing them, so they'll also keep you cooler in the hot summer sun. In addition, tightly woven clothing blocks out more light. Here's a good test:

Place your hand between a single layer of the clothing and a light source. If your hand is visible through the fabric, the garment will likely offer you little protection from the harsh sun. Consider wearing full-length pants and long-sleeved shirts for optimal protection.

2. Wear a hat

Wide brim hats are ideal for shading not only the top of your head but also your neck, ears, forehead, and eyes from the sun. Baseball caps with their short brims won't provide nearly enough protection for all these areas. Ideally, wear a hat with a neck protector.

3. Watch the clock

If possible, it's wise to curtail your sun exposure during the hottest and brightest times of the day. In summertime, the sun and its UV rays are strongest between 10 a.m. and 3 p.m., so limit the time you spend in the sun during these hours and seek shade instead.

4. Use sunscreen

Sunscreen can be very effective at protecting your skin from the sun but only if it's the right sunscreen for your skin and is applied correctly. Here are some tips for ensuring premium protection from your sunscreen:

- For proper coverage, apply sunscreen from the top down. Start with your face, neck, ears, arms, and hands, and then move to your chest, mid-section, thighs, legs, and feet and toes. Be sure to do both the fronts and backs of your arms, legs, and ears! Don't forget to have someone apply lotion to your shoulders and back. If no one is available to assist you, wear a shirt instead.
- Apply lotion 30 minutes prior to heading outside, giving the sunscreen an opportunity to absorb into the skin.
- Reapply sunscreen every one and a half to two hours, especially if you're swimming, sweating, it's humid, or you've rubbed your skin with a towel. New U.S. Food and Drug Administration regulations, designed to help consumers select and use sunscreens properly, now require sunscreen manufacturers to indicate on the front label how much time a user can expect to get the declared SPF level of protection while swimming or sweating. Sunscreen labels will identify these times as either 40 minutes or 80 minutes.
- Use the right amount, which is typically one ounce (2 tablespoons), to adequately cover your legs, arms, face, and neck.

- For maximum protection, don't consider buying or using a sunscreen unless it has a sun protection factor (SPF) of 15 or higher and is labeled as "broad-spectrum," which means it's proven to protect against ultraviolet A and ultraviolet B radiation. Scientists say sunburns are primarily caused by UVB rays, but both types can cause sunburn, raise the risk of skin cancer, and age the skin prematurely. New FDA-required labeling will advise consumers that if used as directed in conjunction with other skin protection measures, the product can reduce the risk of skin cancer and early skin aging.

According to FDA regulations, sunscreen products that aren't broad-spectrum or are broad-spectrum with SPF values from 2 to 14 must be labeled with a warning that indicates the product has been shown only to help prevent sunburn, not reduce the risk of skin cancer or early skin aging. **FYB**

Pre-bedtime workouts may help sleep, not hinder it

If you don't have any other time in the day to do it, go ahead with your pre-bedtime exercising – it just may help you sleep better. According to the 2013 Sleep in America Poll conducted by the National Sleep Foundation, most people won't have any problem sleeping after a workout, contrary to the age-old theory that you should hold off on exercise in the hours leading up to bedtime.

In fact, the study found that people who exercised in the last four hours before bedtime reported sleeping just as well as those exercising earlier in their day. And, people who exercise at any time of the day reported sleeping better and feeling more rested than those who didn't exercise at all.

The poll found that more than half of vigorous and moderate exercisers reported sleeping better on days they exercised – even if it was close to bedtime. In the poll of 1,000 people, just 3 percent of pre-bedtime exercisers said they slept worse.

Previously, the theory was that the stimulation of exercise, combined with rises in body temperature, would keep people awake. And, while that may be true for some, recent studies show it may not be the norm.

That's enough sun!

If you're unsure how long to spend playing or working in the hot sun this summer, a new inexpensive piece of arm décor should help guide you when to head immediately into the shade. The disposable wristbands, available online and at local retailers, react to UV light, changing color depending on your level of sun exposure. The bands alert you when you should reapply sunscreen or when you need to get out of the sun.

Online site helps identify medications

Having trouble identifying one of your pills that's gotten mixed up with some others? Check out WebMD's handy pill identification tool at www.WebMD.com/pill-identification/default.htm. All you need to do is enter the imprint, shape, or color to identify a prescription drug or over-the-counter medication. The pill finder tool will display pictures to compare to the pill you have on hand.

Field notes: Your questions answered



As our communications representative, Sharron Carlson, roams the halls and holds general meetings in our Benefits Fund facilities, she's routinely reporting back on some of the hot topics she's hearing about and discussing with our participants in the field.

Question: Why am I charged a \$20 copay at the pharmacy for each of my prescriptions?

Answer: You're being charged the non-preferred brand-name copay for your prescriptions. In most instances, you make the choice whether to get a brand-name drug at a higher copay or

have the drug filled generically or with a preferred drug and pay a lower copay (often there's no charge at all). Always discuss these options with your physician when she is prescribing a medication for you during your office visit.

The following are the Benefits Fund copay amounts depending on your coverage plan (please reference your CBA to verify if you're covered under Benefit Coverage Plan A or Benefit Coverage Plan B):

Benefit Coverage Plan A

At retail pharmacy: \$0 Generic
\$10 Preferred
\$20 Non-preferred

Staff changes at the NYSNA Benefits Fund



Lisa Davies

The Benefits Fund welcomed several new employees to its staff this spring. At our reception desk, and the first voice you'll hear when calling the Fund office, is Lisa Davies. Prior to joining us at the Benefits Fund in April, Lisa spent 12 years in the provider services department at Empire BlueCross BlueShield (later known as WellPoint). Lisa lives in Colonie with her husband and has a daughter Karly, one of our newest additions to the Benefits Department, as well as a son who will start college this fall.

Also in April, Karly Davies of Schenectady, NY, was appointed to the Benefits Department clerk position. Prior to her move to the Benefits Department, Karly was the receptionist for the Pension Plan and Benefits Fund.

Last, but certainly not least, Michele Carlson also has joined the Benefits Department as a par-

By mail-order (for a 90-day supply of maintenance medications):

\$0 Generic
\$20 Preferred
\$40 Non-preferred

Benefit Coverage Plan B

At retail pharmacy: \$7 Generic
\$20 Preferred
\$35 Non-preferred

By mail-order (for a 90-day supply of maintenance medications):

\$15 Generic
\$40 Preferred
\$70 Non-preferred

Question: My daughter, who is currently covered by the NYSNA Benefits Fund, is nearing her 26th birthday next month. When will her coverage through the Fund end?

Answer: Benefits for a young adult dependent end on her 26th birthday, not the last day of the month in which her birthday falls. If your daughter is eligible for benefits through her employer, losing eligibility through the Fund due to an involuntary loss of coverage (such as reaching her 26th birthday) is considered a qualifying event, therefore, she shouldn't need to wait until the next open enrollment period to enroll in her employer's benefit plan. **FYB**

icipant service representative, replacing Sharron Carlson (yes, they're sisters-in-law!) who moved to the Communications Department as the communications representative on April 1.

Michele is no stranger to the healthcare benefits industry. She was previously a member services representative at Empire BlueCross BlueShield, where she answered members' questions about their health insurance benefits. Michele also has experience working as a dental claims representative for the CSEA Employees Benefit Fund.

Michele lives in West Sand Lake, NY, and is a passionate New York Yankees fan. **FYB**



Michele Carlson and Karly Davies

Select sunglasses for protection and comfort

Overexposure to the hot summertime sun is not only a concern for skin damage, it's also a danger to your eyes. Wearing sunglasses every time you head outside, even on hazy or overcast days, is the best way to protect your eyes from the sun's damaging ultraviolet radiation.

Sun exposure can cause photokeratitis, sunburn of the cornea, as well as permanent retina damage. Over time, unprotected exposure to the sun can speed the formation of cataracts and cause fleshy growths called pterygia or pinguecula on the eyeballs. Too much exposure to visible light (the kind that makes you squint) may contribute to macular degeneration, the leading cause of blindness for the elderly, and is responsible for headaches and eyestrain.

In addition, the skin around the eyes, including your eyelids, is thin and fragile, making it especially susceptible to developing skin cancer or, at the very least, the formation of wrinkles like crow's feet.

Because UV eye damage is cumulative over a lifetime, it's important to make wearing sunglasses a habit from an early age. Children's eyes are still developing, so they're especially vulnerable to the harsh rays of the sun.

What to look for UVA/UVB blockage

When shopping for sunglasses, look for the Z80.3 sticker, which is the American National Standards Institute code that the glasses provide adequate protection against UVA and UVB rays. Your best bet is sunglasses marked "UV 400" or "100% UV protection," meaning that all UV rays are blocked.

If the sunglasses are labeled "General Purpose," the Z80.3 stamp means they screen 60 percent of UVA and 95 percent of UVB. Shades with the "Special Purpose" label provide even more protection – they block 96 percent to 98.5 percent of UVA and 99 percent UVB. If you spend a lot of time boating or participating in other water sports, special purpose glasses are for you. Those branded "Cosmetic use" shield only 70 percent of UV rays.

Color

As for colored lenses, your choice depends on usage and comfort: *Yellow or amber* lenses (the color of blue-blockers) distort colors and make it hard to distinguish the red, yellow, and green of traffic signals, although yellow lenses do make it easier to see a tennis ball. *Brown* also blocks a significant percentage of blue light, but produces less color distortion. *Greens and grays* allow you to see true colors.



It's best to avoid *blue-tinted* lenses because they're thought to actually increase exposure to the sun's blue light.

Lense type

Sunglasses labeled "*blue-blockers*," which usually have amber lenses, purport to screen out blue light, the band of visible light bordering UV on the light spectrum. But lenses that block most visible light also block most of the blue.

Polarized lenses reduce glare off such smooth surfaces as pavement, car hoods, and water. These lenses have a downside, however, as they make it difficult to read your cell phone, GPS device, or liquid-crystal displays on car dashboards or ATMs.

Single-gradient lenses cut glare from above and are suitable for driving because they shield your eyes from overhead sunlight and allow more light through the bottom half of the lens where you need to see the dashboard. *Double-gradient* sunglasses are dark at top and bottom, making them good for water sports.

Photochromic lenses change from light to dark as ambient light increases. They may block up to 15 percent of visible light at their lightest, and some block all UV rays.

Fit

Finally, buy sunglasses that fit. They should cover the entire eye and fit close to, but not touch, your brow and cheekbones. Wraparound frames are the best, as they block sunlight coming in at the sides, top, and bottom. Nylon or composite frames are lightweight yet strong, wire-coated can be shaped for a better fit, and metal frames, while fashionable, can be heavy and inflexible.

Coverage from the Benefits Fund

Prescription sunglasses are available through Davis Vision, your vision care provider. In-network, you pay only a \$30 copayment for fashion, sun, and gradient-tinted plastic lenses from a special selection. A one-year unconditional warranty for breakage covers all eyeglasses supplied from this special Davis collection (excludes lost eyeglasses). There are additional copayments of \$75 for polarized lenses, \$65 for plastic photosensitive lenses, and \$12 for ultraviolet coating.

If you choose a frame from the doctor's private selection, a \$150 retail credit will be applied toward the cost of those frames.

The cost of prescription sunglasses purchased out-of-network is reimbursed up to a maximum allowance of \$75 for the glasses and eye exam every two years. **FYB**

Youngest generation is the most stressed

There's no doubt we all, no matter what our age or lifestyle, think we're pretty stressed. However, a new national survey has found that stress levels for Americans have actually dropped in the past year – except for the youngest generation of adults, those dubbed the "Millennials."

The Millennial generation, comprised of young adults between the ages of 18 and 33, reported stress levels higher than the national average, according to a recent online survey of over 2,000 U.S. adults conducted by the National Psychological Association. Thirty-nine percent of this group said their stress increased in the past year, while 52 percent reported that it had kept them awake at night.

The NPA's annual report, "Stress in America," reported that 76 percent of Millennials view work as a somewhat or significant stressor, compared to 65 percent of Generation Xers (Americans age 34 to 47) and 62 percent of the Baby Boomer generation.

Overall, 20 percent of Americans reported extreme stress in 2012, down from 24 percent in 2010. However, 35 percent of all ages said their stress rose in the past year. The top stressors cited: money (69 percent), work (65 percent), and the economy (61 percent).

Stress can lead to additional problems for these individuals, including depression and anxiety. The survey found that 19 percent of Millennials have been diagnosed with depression and 12 percent with anxiety disorders, higher percentages than reported by the other generations surveyed.

Davis Vision expands eyewear selection

Davis Vision, which administers the Benefits Fund's routine vision care services (including eye exams and eyewear), has recently expanded its selection of designer brand frames available to participants. The Davis Vision Collection features over 200 frames, including top designer brands in a variety of styles for men, women, and children. The expanded line now includes frames from designers such as Elizabeth Arden®, Steve Madden®, Candies®, Perry Ellis®, and Harley Davidson®.

To find a vision care provider in the Davis Vision network, go online to www.davisvision.com. Benefits Fund participants are eligible for a complete eye exam and a pair of eyeglasses or contact lenses every 24 months. For more information on your vision care benefits, contact a participant service representative at (877) RN BENEFITS [762-3633].

Pregnancy disability benefit begins sooner than you think

If you're pregnant and apply for short-term disability through the Benefits Fund, you can request a disability leave when you have two weeks or less until your due date.

RNs who encounter complications during their pregnancy can request an earlier leave but must provide documentation from a physician stating the medical necessity of an earlier leave.

Benefits are payable at a weekly rate of 66 2/3 percent of your regular weekly compensation up to a maximum of \$215 per week and extend for a maximum of up to six weeks postpartum.

The short-term disability benefit you receive from the Fund may be fully taxable as regular income. You'll receive a W-2 form at the end of the year to file with your federal and state income tax.

In order to start receiving your benefit, you need to submit a short-term disability claim form to the Benefits Fund within 30 days of the day your doctor declares you disabled.

Forms can be found on our Web site, www.rnbenefits.org, or you may request one by calling the Fund office at (877) RN BENEFITS. It's a three-part form that must be completed by you, your doctor, and your employer. Once all sections are completed, you or your employer must mail the original form to us at PO Box 12430, Albany, NY 12212-2430.

For Your Benefit is published six times each year as a service to participants in the New York State Nurses Association Benefits Fund. The information in this newsletter is not intended to be complete plan information, and is not a substitute for the Summary Plan Description. Please address questions regarding this newsletter to the Communications Department.

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If you'll be changing your address, please notify us so you won't miss the next issue of For Your Benefit.

The NYSNA Benefits Fund office will be closed July 4 and 5 in observance of Independence Day.

Oxford news and updates

Easier-to-read EOBs

Oxford Health Plans recently changed the appearance of its explanation of benefits form, making it easier for participants to read and understand. A quick-glance summary shows participants the math behind how the claim was paid, including:

- the amount billed;
- any plan discounts;
- the amount paid by the plan;
- the total amount owed by you to the provider, such as copays.

To find your EOBs, log on to myuhc.com and select "Manage My Claims." You'll find the most recent claims at the top of the "Claims Summary." Select "View Claim" for the claim you want to review and then click on "Explanation of Benefits (PDF)."

Preventive health screening reminders

As a healthcare worker, you understand how vital it is to receive routine preventive care in order to maintain or improve your health. Regular check-ups and screenings can:

- help avoid serious health problems down the road;
- allow you and your doctor to work together to manage your overall health;
- assist you in reaching your personal health and wellness goals.

Oxford's online preventive care tool gives participants the ability to view health guidelines and recommendations specific to your age and gender. To use this tool, visit www.uhcpreventivecare.com.

To receive monthly preventive reminder e-mails for health screenings and immunizations, go to www.oxhp.com and click on "Tools & Resources." Then, click on either "Exam Reminders" or "Preventive Care Guidelines" under the "General Health & Programs" heading within the "Manage Your Health" subsection.

Dental care

To help you keep your teeth, gums, and mouth healthy as you age, the NYSNA Benefits Fund provides participants with a wide range of dental care coverage. Benefits cover you, your spouse, and any eligible dependents. Administered by Aetna, this dental benefit offers two options: network and out-of-network.

The network option requires you to seek care from a provider in the Aetna Preferred Provider Organization network. On the other hand, if you already have a relationship with a dentist who doesn't belong to this network, you'll still be able to receive care from that provider. However, you'll need to use the out-of-network benefit option, which allows you to see any non-participating dentist. You can choose either benefit option any time you or your dependents receive services.

Your out-of-pocket cost for dental services varies, depending on your choice of a network or out-of-network provider:

Network option

- There's no yearly deductible.
- Diagnostic and preventive care are covered at no cost.
- Basic restorative services, endodontics, periodontics, maintenance of prosthodontics, and oral surgery are paid at 80 percent of the

negotiated charge. You're responsible for the remaining 20 percent.

- Major restorative services, installation of prosthodontics, and orthodontics are paid at 50 percent of the negotiated charge. You pay the other 50 percent for these services.
- Orthodontics have a maximum benefit of \$1,000 per course of treatment separated by two years.

Out-of-network option

- A \$50 deductible must be met (\$150/family).
 - Diagnostic and preventive care is paid at 80 percent of the usual and prevailing fee, after the deductible is met. You're responsible for the remaining 20 percent and anything over the usual and prevailing fee.
 - Basic restorative services, endodontics, periodontics, maintenance of prosthodontics, and oral surgery are paid at 80 percent of the usual and prevailing fee.

- Major restorative services, installation of prosthodontics, and orthodontics are paid at 50 percent of the usual and prevailing fee.
- Orthodontics have a maximum benefit of \$1,000 per course of treatment separated by two years.

The maximum yearly dental benefit for either option is \$1,200. **FYB**

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Spotlight