



OK TO WELLNESS

OKLAHOMA ♦ UNITED ♦ METHODIST ♦ HEALTHCARE ♦ NEWSLETTER

Beyond Cholesterol

September is National Cholesterol Education Month

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FLU SHOTS: THURSDAY

October 14th 8:30 to 12:00

for persons on the United Methodist Conference Health Benefits Plan. Those NOT on the Conference Plan may have the shots for \$25 for flu and \$55 for pneumonia. (You only need the pneumonia shot once every 10 years.)

In Oklahoma City:

Conference Ministry Center
1501 N.W. 24th

In Tulsa:

Boston Avenue UMC
1301 S Boston Avenue

To participate, please phone Linda at 1-800-231-4166 so we will know how many shots to order.

Cholesterol is a household word, synonymous with coronary heart disease. But a growing body of research shows that this fat-like substance in your blood may be just the tip of the iceberg. Scientists are learning that other substances may give you and your doctor new clues about your heart disease risk. And that's good news. Coronary heart disease, in which fatty deposits build up in your arteries, is the nation's top killer. Half of all heart attack victims have none of the better known risk factors, so new ways of foreseeing risks could lead to more prevention. But doctors aren't yet sure how to treat these clues. "This is very much a work in progress," says Stephen Devries, M.D., director of the University of Illinois' outpatient heart center. "We can now identify more heart disease triggers than ever before, but there's a lot to be learned. "How can you and your doctor use the findings? If you don't yet have heart disease, the best way is to look at the whole picture, says Dennis Sprecher, M.D., Cleveland Clinic director of preventive cardiology. "What these newer predictors can do," he says, "is provide us with a sense for how aggressive we should be in treating those things we already know how to treat." Those things include too much "bad" or LDL cholesterol, and not enough "good" or HDL cholesterol. If your levels are out of kilter, Dr. Sprecher says, data on the new predictors could tip your doctor's hand on more intense treatment. If you already have heart disease, discuss appropriate treatment with your health care provider.



Here are some of the leading new predictors:

Homocysteine

Homocysteine is an amino acid, a constituent of the proteins we eat. According to Richard Stein, M.D., chief of cardiology at Brooklyn Hospital, a few of us don't process this substance very well. It seems to be toxic to the cells that line the arteries. "This toxicity tends to promote the fracture of plaque," he says. "When plaque fractures, a clot forms, blocks the blood flow, and causes a heart attack." Scientists are studying whether some B vitamins (vitamin B12, pyridoxine, and folic acid), which appear to lower levels of homocysteine in the blood, may help treat high levels. So far, the American Heart Association (AHA) recommends only that we take in 400 mcg daily of the B vitamin folic acid for its general health benefit. Experts don't recommend routine blood tests for homocysteine unless you have other heart-disease risk factors, or unless you have heart disease but no known risk factors. Your homocysteine level could provide a clue.

Triglycerides

Triglycerides are no longer the new kid on the block, but many people still don't realize their importance. They are your body's most common form of fat and main source of stored energy. Your liver makes triglycerides and cholesterol from food. Doctors view triglyceride levels as less important than cholesterol levels. But high triglycerides are a warning sign, Dr. Devries says, especially if your HDL is low, you're diabetic, and you're a woman. Diet and exercise affect triglycerides, just as they do cholesterol. Obesity, inactivity, and high-sugar foods can cause special trouble. If lifestyle changes, like a low-fat diet and exercise, don't lower triglycerides, Dr. Devries says, drugs such as statins and fibrates may help, along with the vitamin nicotinic acid, a specific form of niacin. (Other forms of niacin do not affect triglyceride levels.) Labs check triglycerides as part of a full lipid study that also measures HDL and LDL. Talk with your doctor if your level is high.

C-Reactive Protein

Your C-reactive protein (CRP) level rises if there's inflammation in your body. Scientists think chronically high levels might predict inflammation in blood vessels. "The problem with this marker," says Dr. Sprecher, "is that if you have a little bit of a cold, it will go up." Testing is very sensitive but not very specific. The AHA does not recommend checking everyone's CRP level. However, for people with risk factors for heart disease, a CRP level may help a physician decide whether to be more aggressive with treatment to reduce or eliminate risk factors for heart disease. Levels above 3 are considered high. Dr. Stein says studies show statins may lower CRP.

DON'T FORGET YOUR

FLEXIBLE SPENDING ACCOUNT

The Flexible Benefits/Cafeteria Plan adopted by the Oklahoma Conference of The United Methodist Church provides eligible employees the option of paying their basic medical premiums (including voluntary dental and vision provided by the Oklahoma Conference) and other qualified medical or dependent care expenses with pre-tax dollars through a salary-reduction agreement with their salary-paying unit.

Eligible Participants include: all licensed or ordained clergy under appointment in the Oklahoma Conference who are certified by their District Superintendent as living on the charge and working at least 20 hours per week on their pastoral duties. Lay persons who are employed by a local church or conference agency and are certified by their supervisors as working at least 20 hours per week and earning at least the minimum wage are also eligible for enrollment.

Medical Expense Reimbursement Account

All medical expenses incurred, up to an annual limit of five thousand dollars (\$5,000), within the applicable contract period that are not paid by your medical insurance, such as dental care, eyeglasses & exams, and insurance co-pays or deductible amounts can be included in your Medical Reimbursement Account. In making your decision, it is advisable to calculate the amount of out-of-pocket medical expenses you have incurred during the past several years.

Dependent Care Assistance Account

To qualify for this account, the employee must be single, or both the employee and their spouse must be employed outside the home, or one of the marriage partners must be employed and the other attending school. Expenses incurred are up to an annual limit of five thousand dollars (\$5,000).

The Three Rules of Time Management

The first step in achieving better control of your time is to look at how you use time now. Keep a record of your daily activities and the time they take. Then, look at each of the activities and ask yourself these questions:

Is It Necessary?

- Has the task lost its usefulness over time?
- Is it important enough for the amount of time it's using?

Is It Efficient?

- Is there a better way to do it?
- If I take some time now to think of shortcuts and alternatives, will it save me time in the long run?

(Cholesterol continued from front page)

Lp(a) is "LDL with attitude," Dr. Devries says. It's a fat-carrying particle made up of LDL and protein. Scientists agree your Lp(a) level is set mainly by genetics, so people with a family history of heart disease may have high levels. Knowing this may help doctors decide how aggressively to treat other risk factors, such as high LDL cholesterol. "Lp(a) magnifies the risk of the other problems you have," says Dr. Devries. Like high cholesterol, it can also be treated with statin drugs and niacin, but doctors don't yet know if lowering your Lp(a) level cuts your heart-disease risk. Your doctor would likely order an Lp(a) blood test only if you have other serious risk factors for heart disease.

Cholesterol: Still Our Top Danger Sign

A high level of cholesterol in the blood is still our top heart disease predictor, experts say. A 2001 report from the government's National Heart, Lung, and Blood Institute urged these changes in cholesterol screening and treatment:

- If you are 20 or older, you should have a full lipid profile every five years, unless more frequent evaluations are indicated. This test is done after fasting and measures total cholesterol, LDL cholesterol, HDL cholesterol, and triglycerides.
- Doctors should treat certain people at risk more aggressively with drugs. Those with total cholesterol above 200 mg/dl, an HDL below 40 mg/dl, or an LDL higher than 100-130 mg/dl are at risk and might be treated. A family history of heart disease, diabetes, and smoking also are risk factors. So is metabolic syndrome -- a combination of abdominal obesity, high triglycerides, low HDL, high blood pressure, and a high blood-sugar level.
- If you're at risk, you should make important lifestyle changes. You should cut saturated fats to 7 percent of your total daily calories, lower cholesterol in your diet to less than 200 mg a day, eat more soluble fiber and foods with plant stanols or sterols (found in some margarines and salad dressings), stick to a healthy weight, and make exercise a habit.
- You should learn your risk level. Experts have set up four risk categories. Your doctor can work out your level with a risk assessment tool based on blood tests, blood pressure, and smoking status. You can walk yourself through a quick test (or get the full guidelines) at www.nhlbi.nih.gov.

By the Numbers

Risk Predictor: Total Cholesterol (1)

Ideal Number: Below 200 mg/dl

Risk Predictor: HDL Cholesterol (1)

Ideal Number: Above 60 mg/dl

Risk Predictor: LDL Cholesterol (1)

Ideal Number: Below 130 (or 100 depending on other risks) mg/dl

Risk Predictor: Triglycerides (2)

Ideal Number: Below 150 mg/dl

Is It Appropriate?

- Does it belong in my department?
- Is it appropriate to my skill level?
- Can it be delegated?

Three Ways to Make Better Use of Your Time

1. Discontinue low-priority tasks.
2. Find someone else to take some of the workload.
3. Be more efficient at what you do.

Free and Confidential Services

ACCESS CENTER: TAKING CALLS AROUND THE CLOCK

Trained intake staff answer the Help Line 24 hours a day, 365 days a year. Licensed clinicians are on-site 24/7 to assist callers.

1-877-327-5832

www.AetnaEAP.com

ID: EAP4LIFE

Aetna is pleased to announce a new resource.

We have added online training to www.AetnaEAP.com. ID: EAP4LIFE

This information covers a wide range of topics, such as:

- Anxiety/Depression
- Marriage/Relationships
- Family/Parenting
- Alcohol/Substance Abuse
- Time Management
- Anger Management
- Stress Management

To log on to this information, please go to www.AetnaEAP.com, click on Aetna EAP then type in your ID: EAP4LIFE.

Flexible Benefit/Cafeteria Plan Election Information for 2011

Open health insurance enrollment and voluntary dental and vision plans are offered January 1, 2011. You do not need to be enrolled in the Health Benefits Plan to participate in the voluntary dental and vision plans, but you do need to be working at least 30 hours a week for The United Methodist Church or an Agency thereof. (If you did not enroll in the dental plan last year, there is a 12 month waiting period for class II, III & IV services.) Enrollment forms and other information can be found on our web page: www.okumc.org/healthcarebenefits. Enrollment forms must be in the Health Benefits office November 24, 2009 to participate in 2011 Health Plans.

2011 Cafeteria Plan Changes:

Over-the-counter medicine and drugs will require a prescription for reimbursement. Medical supplies and equipment will still be eligible for reimbursement.

Election Form for the Plan Year **1/1/2011** through **12/31/2011**

Employees working 20 hours or more a week may participate in the medical and dependent care plan.

Employees who do not wish to participate still must complete the form by entering zeros if they work at least 20 hours or more a week.

Return the **original form** to the Conference office by **November 24, 2010**.

If you need additional information or assistance you may go to our web page at: www.okumc.org/healthcarebenefits or phone **(405) 530-2069**.

HEALTH INSURANCE, DENTAL & VISION:

Enrollment in the Oklahoma Conference Healthcare Benefit Plan is executed through the Conference Treasurer's Office. Clergy or lay employees must enroll within 31 days of becoming eligible and work at least thirty (30) hours a week and be making at least the minimum wage per hour. If you or your dependents are not enrolled within 31 days of the date you become eligible, you will not be able to enroll until open enrollment ending November 24, 2010 with coverage beginning January 1, 2011.

FLEXIBLE BENEFIT PLAN (CAFETERIA PLAN):

Clergy or lay employees of a local church, institution, or agency of the Oklahoma Annual Conference working a minimum of twenty (20) hours per week and one thousand (1,000) hours per year, and earning at least minimum wage may participate in the Flexible Benefit Plan. An election form must be returned to the Conference Treasurer's office within 31 days of eligibility and a new election form must be completed and returned to the Conference Treasurer's office by November 24th every year.



New Savings Opportunity for 2011

Oklahoma Conference The United Methodist Church Health Benefits Member Trying to Lower Their Cholesterol



Do you take Lipitor, Crestor, Vytorin, or another brand name medication to help lower your cholesterol?

We have a money saving solution that could *save you up to \$300.00 a year.*

The Oklahoma Conference The United Methodist Church Health Benefit members can now enjoy a lower co-pay on select cholesterol medications if you and your doctor decide switching to a generic such as Simvastatin, Pravastatin, or Lovastatin is right for you.

Simvastatin, Pravastatin, or Lovastatin \$10.00 for 1 month or \$25.00 for 3 months

Helpful tip to ask your doctor if a generic drug is available for you.

2 Questions for your Doctor:

- ◆ Ask the Dr. if your medication is available in generic.
- ◆ If it's not, ask the Dr. a second question: "Is there another medication that does the same thing that IS available in generic?" In most cases, the answer is YES.



MaxCare Rx Pharmacy Providers of Oklahoma

1-800-259-7765 or 1-405-528-3342

Non-Maintenance 2011	Maintenance & >34 day supply NTE 102 2011
Generic - Not to exceed \$10	Generic - Not to exceed \$25
Multi-Source or Single Source Brand—NTE \$40.00	Multi-Source or Single Source Brand—NTE \$100.00



BRIAN BAKEMAN
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 Conference Benefits Officer
 (405) 530-2067
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 Health Benefits Director
 (405) 530-2069
TIARA DALTON
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 (405) 530-2063
DEBBIE WARE
 Conference Benefits Assistant
 (405) 530-2069

2011 PLANS & RATES



Monthly Premium:
Employee Only: \$29.37
Employee + Spouse: \$58.71
Employee + Child(ren): \$85.39
Employee + Family: \$114.76
 For information regarding Delta Dental simply go to their secure log-in at: www.deltadentalspotlight.org

Employee Only..... \$9.02
Employee + One Dependent \$13.08
Employee + Family..... \$23.45

For information regarding VSP Vision Plan, go to www.vsp.com/go/okumc.

Delta Dental and VSP are voluntary plans. Eligible persons not enrolled when first eligible are limited to some services.

2011 Health Plan Changes:

- ▶ Third Party Administrator for our self-funded group may change for **active participants**. Blue Cross Blue Shield and United Healthcare have placed bids for our group to help lower network costs.
- ▶ Active participants will see a 10% increase in health premiums.
- ▶ Retirees will see a 10% increase in health premiums.
- ▶ Prescription drug co-pays will increase.
- ▶ Office visits will increase.
- ▶ Individual deductibles will increase.
- ▶ Apportionments will increase 8.6%.

IMPORTANT NUMBERS:



Medical Claim questions, HRA or Flexible Benefit Plan questions:
 1-405-521-1711 or
 1-800-324-9396
 Fax: 405-521-9804
www.kempstongroup.com

Health Benefit Plan Document, Forms & Privacy Notices
www.okumc.org/HealthCareBenefits

MaxCare Rx Pharmacy
 1-800-259-7765
www.ppok.com

First Health Network
www.myfirsthealth.com

Preferred Community Choice
www.ccok.com

LabCard 1-800-646-7788
www.labone.com

Delta Dental 1-800-990-7337
www.DeltaDentalOK.org

VSP 1-800-877-7195
www.vsp.com/go/okumc

New Directions EAP
 1-800-624-5544 www.ndbh.com

The Hartford
 1-800-368-3653

General Board of Pension
 1-800-851-2201
www.gbophb.org

Newsletter published by:
 Janet A. Tofani
 Health Benefits Director

Monthly Premium Rate Schedule:	2011
Active Clergy:	
Special Rate: (Total Compensation of \$29,999 or less)	
Single	\$245.00
Two Party	\$479.00
Family	\$535.00
Regular Rate: (Total Compensation of \$30,000 or more)	
Single	\$307.00
Two Party	\$598.00
Family	\$704.00
Retired Clergy (under 65):	
Single	\$295.00
Two Party (both under 65)	\$586.00
Two Party (spouse over 65)	\$422.00
Retired Clergy (65 & over):	
Single	\$169.00
Two Party (spouse under 65)	\$387.00
Family (under 65)	\$446.00
Two Party (both 65 or over)	\$334.00
Surviving Spouses of Clergy (under 65):	
Single	\$238.00
With one dependent	\$464.00
With two or more dependents	\$512.00
Surviving Spouses of Clergy (65 & over):	
Single	\$90.00
Lay Employees & Diaconal Ministers (Active):	
Single	\$539.00
Two Party	\$1,070.00
Family	\$1,245.00
Retired Lay Employees & Diaconal Ministers:	
Single (under 65)	\$538.00
Single (65 & over)	\$243.00
Two Party (both under 65)	\$1,049.00
Two Party (Spouse under 65)	\$787.00
Two Party (both 65 or over)	\$486.00