OCTOBER 2015

Health bulletin

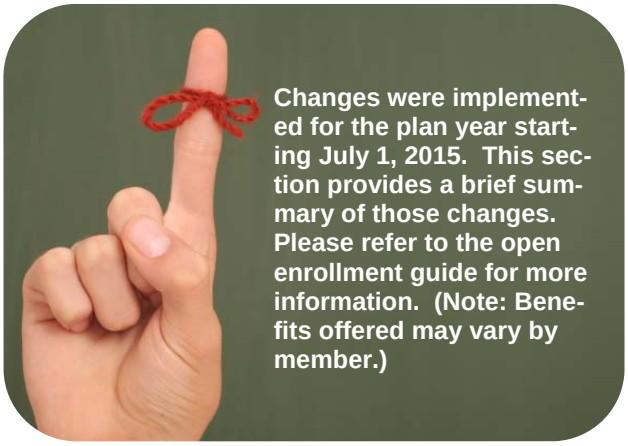
ARIZONA PUBLIC EMPLOYERS HEALTH POOL

HALLOWEEN EDITION

The household item you probably never wash, but should!

Keep your bed pillows fresh and free of allergens by tossing them into the washing machine

Washing bedsheets, blankets, and duvet covers is probably part of your housekeeping routine. But when was the last time you washed your pillows? Unless you keep pillows zipped up in impermeable or plastic covers, or use MicronOne® pillowcases, they can harbor dust mites and other allergens. One easy way to reduce the substances that can cause allergic reactions—and even trigger asthma symptoms—is to wash your pillows in hot water. For best results, use a mild detergent and wash pillows on a gentle setting. After the cycle is complete, rinse the pillows two more times in order to get all the soap out. Then dry the pillows completely, using a low heat setting. Add a couple of new tennis balls to the dryer for a fluffing effect.
(courtesy: Cleveland Wellness Clinic)



Changes were implemented for the plan year starting July 1, 2015. This section provides a brief summary of those changes. Please refer to the open enrollment guide for more information. (Note: Benefits offered may vary by member.)

Identification cards. New identification cards have been issued for medical, prescription drug, and dental coverage prior to the new plan year.

Health savings account (HSA) contribution increase. The IRS has increased the HSA contributions for 2015–2016 to $3,350 (individual) and $6,650 (family).

AmeriBen Medical Management replacing American Health Group. Claims and pre-certifications are now processed through AmeriBen.

Reliance Standard Life Insurance (RSLI) replacing Lincoln Financial Group. Life and AD&D insurance are now covered by RSLI.

Out-of-network coinsurance. The out-of-network coinsurance for all plans has changed to 50% coinsurance.

Out-of-pocket maximum. There are no longer out-of-pocket maximums for out-of-network services.

Preauthorization requirements for some medications. Preauthorization is required for compound and unit cost drugs costing more than $300. Individuals *currently* receiving a compound or unit cost prescription through the plan are exempt from this requirement.

Medication therapy management. This is required for certain individuals, to be determined by the plan.

Try this super yummy—and healthy—dessert! Find this and other healthy recipes here: http://goo.gl/OJ4XQe.

Halloween Doesn't Have to be Scary for Teeth

Nearly 25% of people hand out something other than candy. Here's the breakdown.

22% give toys
15% give fruit
13% give money
11% give pencil/erasers
9% give popcorn

Check out more tips, other trick-or-treating ideas, infographics, kids' activities, and more—Tooth Fairy style. Visit www.toothfairytrickytreats.com.

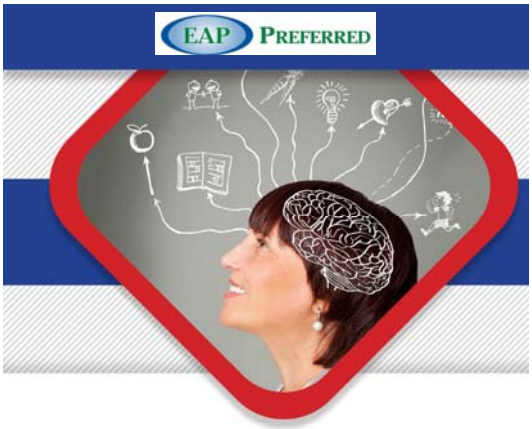
Last word

"This Halloween, the most popular mask is Arnold Schwarzenegger. And the best part? With a mouth full of candy, you will sound just like him."

- Conan O'Brien

Heads Up

Tips for better brain health



Learn ways to keep your brain nourished and fit as you age.

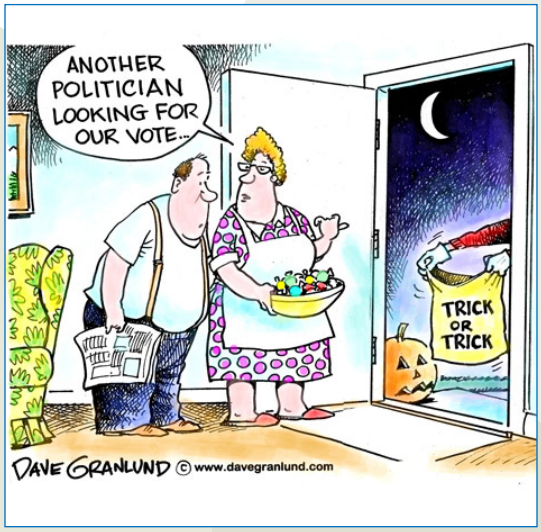
Your Employee Support Program can help with:

- Articles and tips on aging and brain health
- Audio on causes of memory loss
- Resource links to the Alzheimer's Association and the Administration on Aging
- Support for caregivers

TOLL-FREE:
800-327-3517
WEBSITE:
www.eappreferred.com
USERNAME:
APEHP
PASSWORD:
eappreferred

Available any time, any day, your Employee Support Program is a free, confidential program to help you balance your work, family, and personal life.

Comic relief



Would you like to win $50?

Simply answer the questions below and submit your response before Friday, November 6, 2015 to:

APEHP
333 E. Osborn Road, Suite 300
Phoenix, AZ 85012
(or fax to 602.222.3878)

Answer all the questions correctly, and you will be entered into the drawing.

GOOD LUCK!

1. When was the last time you washed your pillow?
   _____
   _____

2. What will your costume be for Halloween this year?
   _____
   _____

3. What is the best Halloween treat/gift you or your child ever received?
   _____
   _____

Your Contact Information

Name:_____

Phone:_____

Address:_____

City/ZIP:_____

Employer:_____

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