Insurance Insights
April 2010

Health Care Reform Act: Impact to UT System Uniform Group Insurance Plans

As you know, President Obama has recently signed two important health reform bills: the Patient Protection and Affordable Care Act and the Health Care and Education Affordability Reconciliation Act. While this comprehensive legislation has numerous provisions which take time to analyze before the implications for employers, employees, retirees and dependents can be fully understood, there are some areas of certainty. These include:

- Health care reform does not change UT System’s commitment to providing employees, retirees and dependents with a comprehensive benefits package highlighted by the UT SELECT Health plan;
- Based upon the effective date of the legislation, most provisions of the legislation will not begin to impact UT System benefits plans until September 1, 2011;
- UT System and your institution remain committed to supporting the “Living Well Make it a Priority” Wellness Programs and Services.

Once analysis of the numerous provisions is complete, the Office of Employee Benefits will provide clear, thorough and timely communication to each UT Institution regarding the impacts of the reform bills on our plans, including the effective date of the mandatory coverage for adult children up to age 26, possible changes to the Evidence of Insurability processes, and the addition of certain required benefits.

While the Office of Employee Benefits analyzes and clarifies these provisions, please know that the new legislation does not change UT System’s commitment to being a partner in your healthcare and offering a robust health plan.

UT SELECT Medical: Ongoing Review of UT SELECT Plan Costs, Impacts

The UT SELECT Medical plan (administered by Blue Cross and Blue Shield of Texas) includes prescription benefit coverage (administered by Medco Health Solutions) and is self-funded by the UT System. As a self-funded plan, all claims are paid by UT System through premium sharing dollars provided by the State Legislature, UT System, and your monthly out-of-pocket cost.

The UT SELECT Medical plan is unique in that it provides coverage to System employees and retirees at nine different academic institutions and six different health institutions. Full-time benefits eligible employees and retirees of UT System currently receive their UT SELECT Medical insurance with 100% of the premium paid for by the
State and UT. Additionally, the State and UT pay 50% of the UT SELECT premiums for the spouses and children of U.T. employees and retirees covered under the plan.

With close to 200,000 individuals eligible for coverage under a UT System insurance plan, one of the Office of Employee Benefits' (OEB) most important responsibilities is to maximize the benefits and services that employees and retirees receive for every dollar spent on benefits.

As it does every month, OEB works with the contracted vendors to monitor and analyze the claims for benefits and services, while comparing the expenditures to date against the projected costs. For this plan year 2009/2010, the actual claims experience has unexpectedly exceeded the projected costs, as well as the total dollars appropriated (during the 81st Legislative Session) to UT System to administer the UT SELECT Medical insurance plan. OEB is working to analyze the reasons for this unexpected jump in claims costs which has also affected other large government health plans in Texas.

As a result of the higher than anticipated claims experience, it is likely that there will be an increase in the monthly premium cost for dependent levels of coverage, plus possible changes to the UT SELECT Medical benefit plan design. It is unknown at this time how much the premium increase may be or what the plan design changes could be. Possible changes to the benefit plan design include increasing deductibles, office visit copayments, coinsurance, and prescription copayments.

While determining and implementing premium cost increases and/or benefit plan design changes is always difficult, the Office of Employee Benefits is working with the System Wide Insurance Advisory Committee (SWIAC), which includes representatives from all fifteen institutions plus UT System, in order to ensure that the UT SELECT Medical plan remains financially sound, while maintaining an appropriate balance of robust benefits and affordability for U.T. employees, retirees and their covered dependents.

Over the coming months, continue to watch for information and announcements regarding your UT SELECT Medical plan leading up to Annual Enrollment in July 2010.

**UT SELECT Benefit At A Glance**

**Ambulance Services**

Part of handling an emergency is being able to evaluate warning signs and make quick decisions. In an emergency, always call 9-1-1 or other community emergency resources to obtain assistance. If you or a covered family member has an emergency requiring ambulance transport, UT SELECT covers the services when medically necessary. Benefits are paid at the network level which is 80% of the allowed amount after the $250 deductible.

Medical necessity is met when:

- The patient’s condition is such that any other form of transportation would be medically contraindicated, and
- The patient is transported to the nearest site with the appropriate facilities for the treatment of the injury or illness involved or in the case of organ transplant, to the approved transplant facility.
The following services are not medically necessary, as they do not require ambulance transportation:

- Ambulance services when the patient has been legally pronounced dead prior to the ambulance being summoned, and
- Services provided by an ambulance crew to render aid, but the patient is not transported.

Non-emergency transportation by ambulance is also covered and is deemed medically necessary for a patient who has a medical problem requiring treatment in another location and is so disabled that the use of an ambulance is the only appropriate means of transfer. This includes either of the following:

- The patient is a registered inpatient in a facility and the specialized services are not available in that facility, or
- The provider of a specialized service is the nearest one with the required capabilities (i.e., renal dialysis center).

Transfers by medical vans or commercial transportation (such as physician owned limousines, public transportation, cab, etc.) are not reimbursable.

**UT Benefits**

**Do You Have a Plan for Your Long-Term Care?** Many people think they have coverage for long term care expenses under their medical or disability insurance, but it’s typically not true.

**Basic facts**

Long-term care insurance helps pay for the care people need when they are unable to take care of themselves. This need for care could be the result of an injury from an accident or due to a chronic illness such as multiple sclerosis. Services can range from assistance with daily activities such as bathing or dressing at home to skilled care in a nursing home.

**What are the estimated costs?**

- The average annual cost for an Assisted Living Facility in Texas is over $33,000*
- The cost of one year’s stay in a nursing home in Texas averages $58,400*
- The average stay in a nursing home is two-and-a-half years**

**Common misconceptions**

It is easy to confuse long-term care insurance with long-term disability insurance. They’re both great to have, but they have very different uses. Long-term disability insurance is intended to replace your income if you become disabled. No medical or health care expenses are covered.

Your health insurance covers acute medical expenses but typically little or no long-term care expenses.

Another little-known fact is that 40% of the people needing long-term care services today are working age adults.*** The need for long-term care can strike at any age.

**The myth of government help**

Many people assume that government programs will pay for long-term care. In fact, Medicare only pays for limited care following hospitalization. Medicaid does pay almost
half of the nation's nursing home bills. But to qualify, you must first meet federal poverty guidelines, which means spending virtually all of your savings and assets. And, some nursing homes do not accept Medicaid-only patients.

With long-term care insurance, the quality of your long-term care remains in your control because you select the facilities and caregivers. Features designed to help you remain at home, such as the home medical technology benefit and caregiver training, are not covered under the government programs.

With long-term care insurance, you can protect both your income and your assets. Review your current financial plan and see if a long-term care insurance plan makes sense for you.

**Long Term-Care Insurance is available through UT Benefits**
Long Term Care Insurance is one of the benefits available through the University of Texas System benefits program. Long Term Care Insurance through UT System is available to: you, your spouse, your adult children (25 years and older), your parents, grandparents, your parents-in-law and your grandparents-in-law. During the Annual Enrollment period this July, you will have the opportunity to enroll in long-term care insurance through the Evidence of Insurability process.

Long Term Care Insurance is provided by CNA, underwritten by the Continental Casualty Company. For more information about this plan visit [www.ltcbenefits.com/uts](http://www.ltcbenefits.com/uts) or call CNA LTC Customer Service at 888-825-0353.

**Health Insurance Association of American (HIAA), Guide to Long-Term Care Insurance, 1996;
***Public Policy Monograph, Long-Term Care, Academy of Actuaries, January, 1999.

Continental Casualty Company provides the products and/or services described. The information is intended to present a general overview for illustrative purposes only. It is not intended to constitute a binding contract. Please remember that only the relevant insurance policy can provide the actual terms, coverages, amounts, conditions, and exclusions for an insured. All products and services may not be available in all states and may be subject to change without notice. CNA is a registered trademark of CNA Financial Corporation. © 2010 CNA. All rights reserved.
Dental Health Education*

Put the brakes on bad oral health
Some personal behaviors are harmful to oral health and can lead to damaged teeth and costly dental work. With hectic schedules and days full of distractions, it is easy to lose track of some of the “little things” that can lead to dental problems. Keep in mind that living without these bad habits will help you develop and maintain a healthier, brighter smile:

1. **Smoking.** Using cigarettes (and smokeless tobacco) can lead to off-color teeth, gum damage, periodontal disease, tooth loss and worse – oral cancer, one of the deadliest forms of the disease. Quit now.
2. **Using teeth as tools.** Biting anything except food with our teeth is asking for trouble. Use the right tools to open bags, pry off bottle caps and clip fingernails.
3. **Clenching and grinding.** Doing this (while awake or asleep) creates harmful wear and tear on teeth and jaws, and can lead to other health problems. Your dentist can recommend simple home therapies or prescribe a form-fitting mouth guard to wear at night.
4. **Not mindful of what goes in your mouth.** Soft drinks, candies and other sugary treats are well-known culprits. Not so well-known are prescription medications, which are helpful in treating specific ailments, but can sometimes create the right conditions for oral health problems. Be sure to tell your dentist about prescription medications you are taking so he or she can suggest solutions to counter any adverse effects.
5. **Skipping the basics.** Don’t be in too much of a hurry and forget to floss daily, brush twice a day for at least two to three minutes and visit your dentist regularly. Your reward will be better teeth, fresher breath, a brighter smile and lower dental bills.

*Article provided by Delta Dental*
How much money will you receive from Social Security, the Teacher Retirement System, or your UTSaver Plans?

Knowing the answer to that question could make the difference in having a retirement you can enjoy, or having to start a second career just to pay your bills.

Now you have a tool to help you determine not only what you can expect to receive in retirement, but also to determine if that amount will be enough, and if not, what you can do to make sure you do have enough to live the retirement you deserve.

My Retirement Outlook is a new calculator that integrates sources of retirement income such as the Teacher Retirement System, Social Security and other savings plans and compares those incomes to your likely expense. The tool is available whenever you need it at www.utretirement.utsystem.edu. Take a look at My Retirement Outlook now so that when it comes time to retire, you will be able to enjoy it!

This information is intended for general informational purposes only. You should not consider it tax, legal or investment advice. In the event that anything in this newsletter conflicts with the UT System Retirement Program plan documents, UT System policies, or state or federal law, the UT System Retirement Program plan documents, UT System policies, or state or federal law will govern. Please consult your tax, legal or investment advisor for assistance with your personal situation. Calculations for My Retirement Outlook are based solely on information provided by you. All examples are hypothetical and for illustrative purposes only and do not represent current or future performance of any specific investment. All investments carry a degree of risk and past performance is not a guarantee of future results.
Wellness Wise
April 2010

What You Eat After Working Out Matters.

Carbohydrates in What You Eat After Exercise Affects Health Benefits

What you eat after working out makes a difference, but it doesn't mean you have to starve yourself to reap the health benefits of exercise.

A new study shows that eating a low-carbohydrate meal after aerobic exercise enhances insulin sensitivity. Increased insulin sensitivity makes it easier for the body to take up sugar from the bloodstream and store it in muscles and other tissues where it can be used for fuel.

Impaired insulin sensitivity, or insulin resistance, increases the risk for type 2 diabetes and heart disease.

Researchers say the results support a growing body of research that shows many of the health benefits of exercise come from the most recent exercise session rather than weeks or months of training.

“Many of the improvements in metabolic health associated with exercise stem largely from the most recent session of exercise, rather than from an increase in ‘fitness’ per se,” researcher Jeffrey F. Horowitz of the University of Michigan says in a news release. “But exercise doesn't occur in a vacuum, and it is very important to look at both the effects of exercise and what you’re eating after exercise.”

Eating Affects Health Benefits of Exercise

The study, published in the Journal of Applied Physiology, looked at the effects of three different meals on the body’s metabolism after 90 minutes of moderate exercise on a treadmill and stationary bicycle compared with resting metabolism in nine healthy men.

The first meal consisted of a balanced meal with a carbohydrate, fat, protein, and calorie content that matched their calorie expenditure during the exercise session.

The second meal matched the calorie count of their exercise expenditure but contained about 200 grams of carbohydrates (less than half the carbohydrate of the balanced meal).

The third meal contained fewer calories than those burned during the aerobic workout (about one-third less than the other two meals) and relatively high carbohydrate content.

In all three exercise sessions, researchers say there was a trend for an increase in insulin sensitivity. But when the participants ate the low-carbohydrate meal following exercise, it increased their insulin sensitivity even more.
Researchers say the results show that people can reap important health benefits from exercise without starving themselves after exercise or losing weight.

Source By Jennifer Warner
WebMD Medical News Reviewed by Louise Chang, MD

Resources Available to You and your Dependents:

- **What are your Health Goals?** WebMD HealthQuotient (HQ) helps you identify your personal health risks, provides recommendations for improving those risks, and informs you of the easy-to-use tools to help make healthy lifestyle changes. Complete the WebMD HQ, go to [www.webmdhealth.com/ut](http://www.webmdhealth.com/ut).

- **Stress Management Lifestyle Improvement Program** teaches you about how stress can affect your life and gives you tools and tips for managing and reducing the impact it has on your health. Learn more at our [Living Well Health Manager powered by WebMD](https://www.webmdhealth.com/ut/default.aspx?startid=1255).

- **Lifestyle Improvement Programs** gives you the support and tools you need to stop smoking, eat healthier, manage your weight, improve your fitness, and even manage stress. Learn more at our [Living Well Health Manager powered by WebMD](https://www.webmdhealth.com/ut/default.aspx?startid=1230).

- **Emotional Health Lifestyle Improvement Program** A positive mood is an important key to continued emotional health and well-being. Changing your lifestyle to maintain a positive mood takes time and real effort. But, with the help of this program, you can do it. And it's worth it: Achieving and maintaining a positive mood can help you lead your daily life with more happiness and well-being, improve your immune system, help prevent illness, reduce stress, and help you stay mentally sharp.

This program contains valuable information about simple but effective techniques that can really help you keep your mood up and your depression risks as low as possible. Learn more at our [Living Well Health Manager powered by WebMD](https://www.webmdhealth.com/ut/default.aspx?startid=1232).

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Healthy Recipe of the Month
March 2010

Spring Clean Your Diet

Fresh fruits and vegetables abound during the spring, so make room for these nutritional powerhouses.

Best of Spring

Spring has arrived, and with longer days and warmer weather comes a new crop of fresh produce. 'Tis the perfect season to "spring clean" your diet, so out with the heavy fall and winter fare and in with springtime fruits and veggies. In-season produce reaps the most nutritional value so here's what to look for on the produce aisle or at the local farmers' market.

Strawberries
Strawberries are available year-round in most areas of the country, but their peak season is from April until June. These sweet, juicy berries are nutritional jewels with just 1 cup offering 3.5 grams of fiber and meeting 100% of your daily vitamin C needs. For the best flavor, buy strawberries grown close to home since they are likely to be fresher and suffer less damage in transit. Strawberries should be plump, firm, well shaped, and uniformly colored. A sweet addition to salads, dressings, or even a main meal, strawberries "take the cake" and save your waistline as a light dessert.

View Recipe: Strawberries Romanoff at http://find.myrecipes.com/recipes/recipefinder_dyn?action=displayRecipe&recipe_id=1816355

Asparagus
Dubbed the "food of kings" by Louis XIV of France, asparagus definitely have a royal nutritional profile. Low in fat and high in fiber, these tender stalks are a good source of iron, B vitamins, and vitamin C. Asparagus are at their peak from March through June but can be purchased year-round. Once harvested, asparagus deteriorate rapidly, so place them in cool storage to retain freshness and nutrition. Delicious roasted, grilled, or lightly sautéed in olive oil, these seasonal spears make a tasty addition to any meal.

View Recipe: Grilled Asparagus with Balsamic Vinegar at http://find.myrecipes.com/recipes/recipefinder_dyn?action=displayRecipe&recipe_id=1087034

Sweet Cherries
Succulent sweet cherries are only available during the late spring and early summer, so make sure to enjoy your fill. Sweet cherries are high in fiber and potassium, while remaining low in calories—just 1 cup of sweet cherries is about 100 calories. The intense color of cherries is due partly to their anthocyanin content. Anthocyanins are a type of plant chemical (phytochemical) that are believed to be high in antioxidant activity.
The best cherries are large (an inch or more in diameter), plump, firm, and rich in color and are equally delicious as a snack or dessert.

View Recipe: Fresh Cherry Pie at http://find.myrecipes.com/recipes/recipefinder.dyn?action=displayRecipe&recipe_id=1816376

**Peas**

Fresh peas including sugar snap peas, snow peas, and green peas can usually be found year-round but are at their peak from April through July. Like most legumes, peas are low in fat and high in fiber and are a good source of plant protein. Their nutritional profile differs depending on variety, with green peas providing more B vitamins and zinc, while snow and snap peas offer more vitamin C. Peas are perfect as crudités with dips, tossed in salads, and served as a side dish.


**Radishes**

For a burst of flavor with very few calories, look no further than the radish. Radishes are root vegetables with a distinctive flavor that ranges from mild to sharp, depending on variety. One cup of sliced red radishes will give you 30% of your daily vitamin C requirement in less than 25 calories. To choose the best, pick radishes that are deep in color with solid roots. This root vegetable is a flavorful addition to soups, condiments, and cooked dishes. You can also eat the green tops, which lends a peppery taste to salads.


**Fava Beans**

With their rich, hearty flavor, fava beans are a terrific addition to soups, salads, or main dishes. Due to their high protein and fiber content, these beans help to keep you feeling full for longer. Young favas can be shelled and eaten raw or cooked, but more mature favas must be both shelled and skinned, as the skins are too tough to eat.


**Apricots**

For a boost of beta-carotene, potassium, vitamin C, and fiber in a sweet 50-calorie bundle, be sure to bring home apricots from the farmers’ market or grocery store. The peak season for this fresh fruit is from May to August. Sandwiches, snacks, jams, salsas, and salads will all be just a bit sweeter and delicious with apricots.
Artichokes
While artichokes are harvested year-round, the crop peaks from March through May. A 2-ounce serving (approximately the size of the bottom of one large artichoke) has about 3 grams of fiber and just 25 calories. Artichokes are also a good source of iron, potassium, magnesium, folate, and vitamin C. Try them served in dips, or bake and toss in pastas or salads.


Rhubarb
Although technically a vegetable, rhubarb is often used as a fruit and is a good source of vitamin C, potassium, and manganese. Rhubarb stalks (the only part of the plant that should be eaten) are very tart but when sweetened, give rich flavor and texture to sauces and pies. Rhubarb can also be blanched, diced, and added to salsas and salads. Rhubarb is available in some locations year-round, however, field-grown varieties are harvested from April through July.


Morel Mushrooms
Cone-shaped with a spongy texture, morels are a springtime delicacy making an entrance at fine restaurants and farmers’ markets in early spring through late June. A member of the truffle family, these wild mushrooms are best known for their honeycomb texture and nutty flavor. The spongy texture of morels make them ideal for soaking up flavorful sauces. Pair with other spring veggies like asparagus, spring onions, and green peas or toss in pastas, sautés, and salads.

View Recipe: Chicken Scallopine with Morels and Spring Vegetables at http://find.myrecipes.com/recipes/recipefinder.dyn?action=displayRecipe&recipe_id=249954

Source By: Katherine Brooking, M.S., R.D. Cooking Light April 2010

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Resources available to You and your Dependents:

- **Top Questions to Ask Your Health Care Provider.** We believe that an understanding of the relationship between health and cost of care and better communication with your doctor will ultimately increase use of self care practices. Below we have listed several top modifiable/preventable conditions with questions to ask your Health Care Provider:
  - Blood Pressure
  - Cholesterol
  - Diabetes
  - Depression
  - Metabolic Syndrome

View these top questions and be prepared for your next doctor’s visit. [http://www.livingwell.utsystem.edu/myhealth.htm#drq](http://www.livingwell.utsystem.edu/myhealth.htm#drq)

- **Expanded Breadth for Health Topics at Living Well Health Manager powered by WebMD.** Covering a broad cross-section of conditions, procedures, and other information, Health Topics organizes information by topic including relevant articles, tools, and resources — whether provided by WebMD or UT System. It streamlines this information, with the most relevant information provided up front, and makes it very easy for users to locate, explore, and effectively use all the tools, content, and other portal resources for a specific area of health. Take a look at [35 additional health topics that have been added, resulting in a total of 200 at](https://www.webmdhealth.com/ut/default.aspx?startid=3165).

- **New Living Well Health Manager Video Content Source.** A new content source is being added which is comprised of approximately 2000 concise videos covering a broad range of health and wellness subjects, all created and reviewed by the expert clinical team from WebMD. Each video has been indexed using the Living Well Health Manager powered by WebMD Insight Engine, which ensures relevant video content will be prominently presented to the user based upon their comprehensive health profile in key locations in the portal – such as in My Health Guide on the home page. Take a look at some of the videos today at Living Well Health Manager powered by WebMD at [https://www.webmdhealth.com/ut/default.aspx?startid=711](https://www.webmdhealth.com/ut/default.aspx?startid=711).

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