



CURRENTS

SAN DIEGO ELECTRICAL TRUSTS

Issue 70

November 2013

PLAN A PPO PLAN AMENDMENTS EFFECTIVE JANUARY 1, 2014

PLEASE REVIEW THESE SIGNIFICANT CHANGES CAREFULLY!

1. Knee & hip replacement limitation - The maximum amount payable for all facility charges, including the replacement joint, will be \$30,000. A listing of Blue Cross PPO facilities throughout California that participate in this program (by providing all related services for \$30,000 or less) will be made available. There are at least 2-3 facilities in San Diego County included in this list.

In the event knee or hip replacement surgery is recommended the participant should do the following:

- a. Contact **Best Doctors** to confirm the diagnosis and recommendation of the procedure; and
- b. If the replacement procedure is the desired course of treatment be sure the facility participates in this program so that there will be no financial exposure for any costs exceeding the Plan's maximum payment limit.

IMPORTANT - if a non-participating facility is to be utilized please contact the facility IN ADVANCE to seek a written commitment that the Plan's payment will be accepted as payment in full so that there will be no balance due to the participant.

2. Organ transplants - If a live human organ donor (example - bone marrow) is without health insurance coverage for the procurement procedure a maximum of \$30,000 shall be considered as **Eligible Expenses** of the covered organ recipient. All eligible expenses related to any other source of a live human organ donation or procurement will be limited to a maximum of \$30,000.

3. Out-patient Specialty Drugs - Specialty medications are used in the treatment of chronic conditions and complex drug therapies such as rheumatoid arthritis (RA), multiple sclerosis (MS) and cancer. Depending on the condition and prescribed therapy, these medications may be taken orally (by mouth), intravenously (IV) or self-injected.

These medications often require special handling, such as refrigeration or time-sensitive delivery. Some of them are available only through limited distribution and many can be very expensive, in some cases costing thousands of dollars per dosage. The limit for each prescription is up to a 30-day supply.

It is important to be aware that all injectable medications to be administered on an out-patient basis (i.e. while not admitted to a hospital) must be ordered directly through the Specialty Rx program of CVS/Caremark in order for the full price of the medication to be considered for payment by the Plan. Out-patient specialty drugs procured through a retail or hospital pharmacy will not be covered by the Plan unless they are required for treatment of urgent or emergency care. It may also be possible to arrange for covered in-home administration. In the event other than a SpecialtyRx is used to fill specialty drug prescription the Plan will not pay more than it would have if the prescription(s) had been properly filled through SpecialtyRx. **This means the participant could be responsible for the full balance of the cost.**

4. Maximum payments for wellness and preventive services - The following maximum payment allowances will be applicable to:

Breast pumps (manual or electric) - 100% up to \$200 without any deductible or co-insurance.

Mammograms - 100% up to \$500 for all services*

Colonoscopies - Up to \$1,000 for all services*

The term maximum payment means this is the most the Plan will pay for any of the above procedures or devices. For mammograms and colonoscopies the maximum payment applies to

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DO NOT PAY MORE THAN AN OFFICE VISIT CO-PAY

Under the PPO Plan participants should **NEVER** pay more than the prescribed office visit co-payment at the time of their visit or medical service and that is only if there is going to be an office visit.

Presently, the schedule of PPO physician office visit co-payments is as follows: Sharp - \$10, Other PPO physicians in San Diego County - \$30, and all PPO physicians outside of San Diego County - \$15. The Plan will then pay 100% of the balance of the charge for an office visit without application of a deductible or co-insurance.

Paying anything more than the office visit co-payment at the request of the service provider could result in the participant being over-charged as the amount(s) may not include the provider's negotiated discount. Further, the provider may not know if the participant has already satisfied their calendar year deductible or out-of-pocket maximum, both of which could impact how much they may actually owe.

If a physician's office or a medical facility asks for payment of anything more than an office visit co-payment you should

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all services related to the conduction of either procedure. Please be aware that hospitals or hospital owned facilities routinely charge much more than free-standing PPO providers and that some providers break their charges down into many components which appear to be intended to push the total billed charges up as high as possible.

How may I ensure that I do not have any financial responsibility for the cost of these wellness and preventive services? Routine physical exam services for covered Plan A PPO participants (employees/spouses), including mammograms and colonoscopies, are provided at no cost to the participant through Sharp Rees Stealy. **Otherwise a deductible and co-insurance may apply which could result in out-of-pocket expense to the participant.** To make arrangements through Sharp Rees Stealy call 858-616-8411.

In the event billed charges for a routine mammogram or colonoscopy exceed the stated maximum amount, even if it is a PPO provider, it is possible the balance of billed charges could become the responsibility of the participant. Before scheduling a routine mammogram or colonoscopy please contact your claims examiner at the Trust Office to receive all necessary information as to how to avoid owing anything toward the cost of either procedure.

PLAN A PPO PROVIDERS IN MEXICO

As of **January 1, 2014** the PPO Plan will recognize medical service providers in various parts of Mexico who participate in a network developed by Pinnacle Claims Management, Inc. In particular, providers are located in the following border cities: Mexicali, San Luis, Los Algodones, Tijuana and Palaco.

What this means is that it will become possible for covered participants working in the U.S. and/or living in Mexico to access certain providers in these areas by displaying a special ID Card that will be provided to all participants. For the cost of services by these providers to be covered by the Plan the patient must be covered at the time services are rendered.

Please make note that there will be NO OUT-OF POCKET COST to the participant for use of Pinnacle panel providers in Mexico. “No out-of-pocket cost” means there will be no co-payment, deductible, or co-insurance shared amount applicable to the cost of services rendered by Pinnacle panel providers so long as the services are considered to be eligible expense(s) under the Plan.

For employees and family members working/living in Imperial County, it is our understanding that certain Pinnacle network providers will send transportation to the Mexico side of the U.S./Mexico border crossing at various times to take people in need of medical attention to their facilities. Transportation will also return them to the border crossing to return to the U.S.

As arrangements for this program are finalized you will receive more information along with a special ID card that must be presented to a panel provider with a picture ID in order to be treated under this Program.

BEST DOCTORS VERIFIES DIAGNOSES AND TREATMENT PLANS

How Does This Work? - A recently reported case involved a male participant who was diagnosed with lower back spinal stenosis as the cause of considerable pain running all of the way down one leg and a recommendation of a laminectomy and spinal fusion - major back surgery. The participant contacted **Best Doctors** to confirm the diagnosis and recommended procedure. Following a **Best Doctors** “Inter-Consultation” review by an Orthopaedic Expert the participant was informed that the diagnosis was confirmed, but a review of the imaging studies did not support the need for a more invasive spinal fusion due to the absence of spinal instability. The expert offered two treatment options suggesting spinal steroid injections, medications and physical therapy as the conservative approach or only the laminectomy from a surgical standpoint. The participant opted for the much less invasive surgical procedure which was expected to effectively address his pain symptoms.

Need Elective Surgery? According to the **Best Doctors** program 38% of recommended surgeries are totally unnecessary and another 18% of the time the procedure to be performed isn’t the optimal one. Therefore, for any of the following elective procedures it is highly recommended that the patient contact **Best Doctors** (1-866-904-0910) **BEFORE** undergoing the procedure: Back, hysterectomy, knee and hip replacement, obesity or bariatric, coronary artery by-pass graft, heart valve replacements, prostatectomy and lumpectomy/mastectomy.

As a reminder, in the event a participant completes the “Inter-Consultation” process, and submits a certificate of completion to the Trust Office, their \$250 deductible for that calendar year will be waived or reimbursed if already satisfied. Please remember that it is totally up to **Best Doctors** to determine if an “Inter-Consultation” is warranted for a particular case.

refuse and advise that you will await a final determination AFTER the claim for service(s) has been remitted to the Plan and an Explanation of Benefits has been received from the Trust Office. **By refusing to pay anything more than a required office visit co-payment please know that the provider may not refuse to render their service(s), especially if the required service is of an urgent or emergency nature.**

In the event you are faced with a situation like this, please suggest that the service provider contact the Trust Office.

MAKING DIRECT PAYMENTS VIA ACH TRANSFER

Recognizing the distance between eastern San Diego/Imperial Counties and the location of the Trust Office in San Diego various alternatives to making a Direct Payment to maintain Plan A or Plan B coverage have been explored, in particular with respect to electronic processes.

Presently, participants who are advised they must remit a Direct Payment to maintain group insurance coverage for a particular month may do so in the following ways: Mailing a check to the Trust Office, delivering a check to the Trust Office or using a debit card at the Trust Office before the stated deadline. Other than the cost of a stamp or gas to use one of these methods there are no other fees or costs to the participant.

Following an extensive review as to other ways in which Direct Payments could be remitted, it has been determined that the acceptance of ACH transfers, which can be initiated by a participant on a personal computer, notepad or smartphone with Internet connectivity, should make it much easier for participants to arrange to make their payments **on a timely basis.**

Unfortunately, payment by a credit card is not practical due to varied use rules between Visa and MasterCard programs and the resulting high cost that would have to be passed on to participant.

Watch for information and instructions for remitting an ACH payment to be included with Direct Payment notifications commencing with **January 2014** coverage.

UPCOMING JOURNEYMAN CLASSES FOR FALL 2013

For more courses, descriptions and registration information please see the online schedule at www.positivelyelectric.org.

Class	Start	Day	Time
Anti-harassment Training for Managers & Supervisors	10/22/13	Tue	5-7pm
Anti-harassment Training for Managers & Supervisors	11/19/13	Tue	5-7pm
Audio Components & Controls	10/30/13	Wed	5-8pm
Basic CPR and First Aid for Adults (Imperial County)	10/04/13	Fri	4:30-9pm
Basic CPR and First Aid for Adults (Imperial County)	11/01/13	Fri	4:30-9pm
Basic CPR and First Aid for Adults	11/05/13	Tue	4:30-9pm
Basic CPR and First Aid for Adults (Imperial County)	11/22/13	Fri	4:30-9pm
Basic CPR and First Aid for Adults	12/03/13	Tue	4:30-9pm
Basic CPR and First Aid for Adults (Imperial County)	12/13/13	Fri	4:30-9pm
CALCTP Acceptance Technician	10/12/13	Sat	7:30am-4:30pm
CALCTP Acceptance Technician	11/16/13	Sat	7:30am-4:30pm
CALCTP Systems Course	10/07/13	Mon/Tue	5-8:30pm
Confined Space Entry	12/13/13	Fri	4:30-8pm
Electrical Requirements for Health Care Facilities, NEC Article 517	11/22/13	Fri	4:30-8pm
Electrical Review	10/21/13	Mon/Wed	5-8pm
Fire/Life Safety/VDV Prep For State Certification	10/08/13	Tue	5-8pm
NEC Code Changes - Part 1	10/16/13	Wed	5-8pm
NEC Code Changes - Part 1	11/20/13	Wed	5-8pm
NEC Code Changes - Part 2	10/30/13	Wed	5-8pm
NEC Code Changes - Part 2	12/04/13	Wed	5-8pm
NFPA-70E Arc Flash Hazard Awareness	11/14/13	Thu	5-8pm
NFPA-70E Arc Flash Hazard Awareness	12/05/13	Thu	5-8pm
OSHA 30/EM-385 Construction Hazard Awareness (Imperial County)	10/12/13	Sat	8am-4pm
OSHA 30/EM-385 Construction Hazard Awareness (San Diego)	10/28/13	Mon/Tue	5-8:30pm
Refresher For Basic CPR and First Aid For Adult	10/29/13	Tue	4:30-7pm
Refresher For Basic CPR and First Aid For Adult	11/26/13	Tue	4:30-7pm
Refresher For Basic CPR and First Aid For Adult	12/10/13	Tue	4:30-7pm
Residential A/V	11/20/13	Wed	5-8pm
RF/CATV Distribution	12/04/13	Wed	5-8pm
SDG&E Service Guide	10/24/13	Thu	5-8pm
SDG&E Service Guide	11/07/13	Thu	5-8pm
Video Systems: Components	11/06/13	Wed	5-8pm
Welding	10/18/13	Fri	5-8pm
Your Pension Plan	12/10/13	Tue	5-8pm

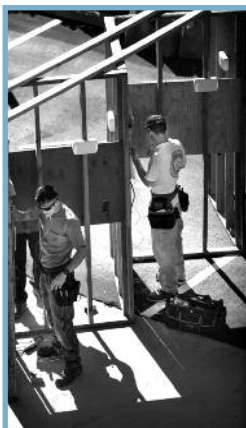
TO REGISTER FOR CLASSES: • On-line at www.positivelyelectric.org • By telephone: **San Diego classes:** (858) 569-6633, ext. 156. • For Spanish, dial ext. 301. • **Imperial County classes:** (760) 355-3000, ext. 401. • Walk-in - drop by our office and complete a registration form.

San Diego Electrical Training Center hosted the 50th anniversary Western States Electrical Competition

on September 7th. The contest originated in 1963 as a competition between the IBEW/NECA joint electrical training programs in Oregon. In 1983, it was expanded to include the Northwest states of Alaska, Idaho, Oregon, and Washington. In 1999, it was expanded even further to include the eleven

western states in the eighth and ninth districts of the IBEW. Apprentice graduates from training centers in Alaska, California, Colorado, Hawai'i, Idaho, Montana, Nevada, Oregon, Utah, Washington, and Wyoming were eligible to compete.

This year's event drew graduates from twenty training centers located in California, Nevada, Oregon, Washington, and Utah. The competition was grueling, due in part to the heat wave that descended upon San Diego on September 7th.



This year's winner was David Byrne from Central Valley Electrical JATC Local 684 in Modesto, CA.

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TITLE 24 ACCEPTANCE TECHNICIAN TRAINING

What is Title 24? On July 19th, 1978, the California Energy Commission (CEC) adopted regulations governing energy conservation for new residential and nonresidential buildings. Initially, the regulations addressed building insulation but were expanded to include lighting, illuminated signs, HVAC equipment, building envelope (construction and insulation), and fenestration (windows and doors). The regulations have saved \$74 billion in energy waste since their implementation. As electrical workers, we have come to know these regulations as **Title 24**.

What is the problem? While billions have been spent specifying, purchasing, and installing energy-saving equipment, the CEC found that this equipment often did not function as intended – either because it was installed incorrectly or was bypassed after inspection.

The 2013 Title 24 standards aim to correct this. On January 1st, 2014, enforcement of Title 24 standards will be taken to the next level. All electrical installations will be required to be **“acceptance tested”** to ensure that the equipment is specified, installed, and functioning according to Title 24 regulations.

What does this mean for us? To verify compliance with Title 24 regulations, the CEC is certifying Acceptance Technicians (AT) who will verify that all Title 24 conditions on every installation are met. These ATs are, in effect, private inspectors whose approval is required before a Certificate of Occupancy is granted to a building owner.

What is SDETC’s role? San Diego Electrical Training Center is providing classes for electrical workers who want to become **Acceptance Technicians** for electrical installations. At present, there are only a handful of these technicians in the state, and the demand for ATs **is going to take off** on January 1st, 2014.

How do you become a certified AT? If you are interested in becoming a certified AT, there are several steps that must be taken. First, you must be a certified electrician. Second, you must have completed the **California Advanced Lighting Control Training Program (CALCTP) Technical course** held at SDETC. Third, you must complete the **CALCTP-AT** course that is being offered for the first time this semester. Finally, you must apply for an AT certificate that lists you in a statewide database and enables you to perform acceptance testing on electrical installation.

NEC Change coming January 1st, 2014

On January 1st, 2014, California will formally adopt the **2013 California Electrical Code** which is based on the **2011 National Electric Code**. SDETC is offering classes to highlight and explain the changes that will be enforced in the coming year. As a California-certified electrical worker, it is your responsibility to comply with all of the changes that will be implemented. Attendance at the NEC Code Changes class will also provide credit toward your recertification. Please note that California certification exams will not reflect these new code changes until mid-year.

HEALTH INFORMATION SOURCES

Best Doctors - 1-866-904-0910 or www.bestdoctors.com;
Caremark - www.Caremark.com; Specialty medications - CVS/Caremark at 1-800-237-2767;
“NurseLine”-24/7 access to Registered Nurses at 800-250-6181 or <http://healthresources.caremark.com/topic/specialty>; and for researching doctors and hospitals: www.healthgrades.com, www.leapfroggroup.org/; www.Calhospitalcompare.org; www.hospitalcompare.hhs.gov; <http://www.npdbhipdb.hrsa.gov/> **National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank** may be used to verify information on a healthcare provider; and <http://www.medbd.ca.gov/lookup.html> - **Medical Board of California for physician licensing. The California Health Care Foundation** supports www.CalHospitalCompare.org which combines ratings for quality of care, patient safety and patient experience in an effort to help consumers make informed choices.