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# NEWS

## January 2004 Winter Issue

A reference guide to the Penn-Ohio Alliance HealthAssurance Program

Have Questions About Penn-Ohio? Call: 1-800-211-2253

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## Letter from the President

by Pamela K. Vass

As the new year unfolds, we at the Penn-Ohio Alliance hope that 2003 was a healthy and prosperous year for you and your business. We had a successful year in promoting Penn-Ohio in the community forum and feel that our greater presence can benefit all of us. As we move forward in the coming year, we will continue to provide helpful information to our member companies about the changing world of health care.

### Annual Meeting

We will hold our annual meeting at the Radisson in West Middlesex, PA. Please mark **February 12, 2004** on your calendar. As required by our bylaws, we will present the Alliance's financial reports and next year's budget plan. The 2004 Board of Directors will also be introduced. We encourage all of our member companies to attend, participate in discussions, and ask questions of our Board of Directors.

### Membership

In January of 2003, our new three-year financial offer went into effect. This generated considerable interest from prospective members. As of January 2004, our numbers have grown to 16,207 members and 278 member companies. As we've said

before, there is strength in numbers. As our membership continues to grow, we are encouraged that we can continue to meet our goal of providing our employees with quality, cost effective health care benefits.

### Wellness Fair

A healthy lifestyle can make many differences in your life: mentally, physically, and even financially. Penn-Ohio continues to promote wellness as one of our core missions. On October 21, 2003, Penn-Ohio sponsored a wellness fair at the Butler County Family YMCA in Butler, PA. We were pleased with an enthusiastic turnout of over 150 attendees and 15 different vendors proving a wide variety of services. From flu shots to blood pressure and body fat analysis, to stress tests and disease management education, there was a wide array of opportunities for a diverse audience. Penn-Ohio is currently working on two wellness fairs for next year, moving into different communities in our seven-county region to make it easy for our members to attend these fairs. A warm thanks to all of you who attended, and for the others, we'll see you next time!

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## PROVIDER SPOTLIGHT

# United Community Hospital, Grove City, Low Risk Cardiac Catheterization Lab Opens January 2004



United Community Hospital is located in Grove City in Lawrence County.

After months of planning and preparation, United Community Hospital, Grove City, will be opening a low risk cardiac catheterization lab in January 2004. UCH President and Chief Executive Officer, Anthony Zelenka, notes, "The staff at UCH, and a private consulting firm, Health Care Visions, have worked together to coordinate and plan all aspects of this new service. Of primary concern to the planning team was the appointment of a medical director for the new service. David Lasorda, DO, FACP, FACC, and his group of cardiologists, will oversee the program and perform the procedures. His practice is respected throughout the region and we are very pleased to have contracted their services for United Community Hospital."

The cath lab will be located in a newly renovated operating room at the hospital. The new equipment has arrived and the staff is being oriented. Mr. Zelenka adds, "Cardiac catheterization is a service that will bring significant benefits to our community. Area patients will be able to have cardiac catheterizations, performed by a group of top cardiologists, without the added stress of traveling out of the area."

Cardiac catheterization is a method of detecting blockages in the arteries that provide blood and oxygen to the heart muscle. When those arteries become blocked, the chances of a heart attack greatly increase. In order to detect blockages, a thin flexible catheter (tube-like instrument) is inserted into an artery in the groin and carefully advanced up to the heart. The tip of the catheter is positioned at the

opening of the heart's arteries and a dye is injected. The dye flows into the blood vessels of the heart. Then, a fluoroscope, which is a specialized form of x-ray equipment, is used to produce images of the arteries. If a blockage is detected, the physician can prescribe the appropriate treatment plan.

In addition to detecting arterial blockages, the catheter also measures pressures in the main heart chamber (the left ventricle). This measurement provides valuable information regarding the heart's pumping ability, and so the test is also valuable for diagnosing several different heart conditions. Cardiac catheterization is generally performed on an outpatient basis and, for most patients, there are very few complications. The procedure

takes only between 30-60 minutes and provides an immediate and definitive diagnosis. For some patients the test rules out heart disease as the cause of symptoms such as chest pain. For other patients, the test will reveal a heart condition that requires further treatment.

UCH's cath lab is considered 'low risk' because the service will be provided only for patients who are not in immediate need of angioplasty or bypass surgery. Emergent and high risk patients will be stabilized and transferred to the appropriate hospital.

Mr. Zelenka concludes, "United Community Hospital is looking forward to performing the first cardiac catheterization procedure shortly after the New Year. It's a great way to start off the year and we look forward to continued growth throughout 2004."

## LEGISLATIVE CORNER

# U.S. Medicare Reform Bill Passes in Senate

By Candace Hoffmann

*This article is a reprint from P/S/L Group's online pharmacy news publication, FirstWordSM. P/S/L Group is a global organization dedicated to putting information at the service of medicine.*

November 25, 2003.

In a 54-to-44 vote, the U.S. Senate passed the Medicare reform legislation that had already won approval in the House of Representatives a few days earlier, news



sources report. The legislation now goes to President George W. Bush for his signature to make it law.

The bill is expected to increase drug sales by some \$4 billion to \$13 billion a year, analysts say, according to a news source. Competition among drugmakers however, could have an effect in keeping prices low "tempering an increase in sales volume," Pfizer's CEO Hank McKinnell reportedly told a news source. "On balance, it is probably neutral [for profit]," he is quoted by the news source as saying.

Nonetheless, the final version of the bill is considered a victory for drugmakers and testament to their lobbying power in that the government is prohibited "from setting individual drug prices,

specifying formularies, or intervening in price negotiations between pharmaceutical firms and the private drug plans that will administer the Medicare drug benefit," a news source says. Drug re-importation from Canada is also not allowed under the law.

Still, the question remains whether the government's role could change in the future. "The real danger is farther down the road. Now that [prescription drugs] are being covered by Medicare, the next time we have a budget crunch. . . Congress may enact price controls on pharmaceuticals that aren't there now," William S. Custer, a professor

at Georgia State University's Robinson College of Business is quoted as saying.

### Reference Articles

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- Senate votes 54-44 to approve Medicare prescription-drug bill - (*Bloomberg*)
- Congress passes Medicare drug bill - (*CBS MarketWatch*)
- Cashing in - (*CBS MarketWatch*)
- Medicare overhaul clears Senate - (*CNN*)
- Medicare budget buster on track - (*Forbes.com*)
- Drug makers move closer to big victory - (*The New York Times*)
- The ins and outs of Medicare changes - (*USA Today*)
- Senate passes Medicare bill - (*Washington Post*)
- U.S. Medicare drug plan could spawn price controls - (*Yahoo!Finance*)

## Women's Health and Cancer Rights Act

The Women's Health and Cancer Rights Act (WHCRA) is a federal law that requires most insurers, HMOs, or group-sponsored health plans that provide benefits for mastectomies to also cover reconstructive surgery and prostheses after a mastectomy. Most HealthAssurance plans already provide the coverage required by this law. Certain government-sponsored plans,

church plans, CHAMPUS Programs, and Medicare-related programs, however, are exempt from the requirements of the WHCRA. Please contact your plan if you have questions about the applicability of this law.

The law requires that if your plan covers mastectomies and if you choose breast reconstruction after the

mastectomy, benefits also must be provided for:

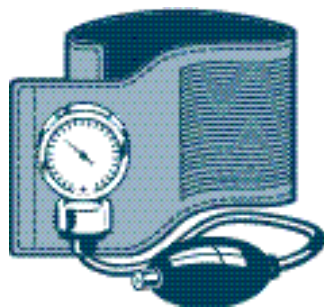
1. Reconstruction of the affected breast.
2. Surgery and reconstruction of the other breast to produce a symmetrical appearance
3. Prostheses.
4. Treatment of physical complications of all stages of mastectomy, including lymphedemas.

This coverage will be provided in consultation with you and your doctor. If applicable under your plan, the coverage is subject to the same annual deductibles and coinsurance provisions as those established for other plan benefits. Please share this information with your family members covered under your plan, and keep this notice with your official plan documents.

# PENN-OHIO NEWS

## A Gift of Health

As an Alliance for employers in Western Pennsylvania and Eastern Ohio, Penn-Ohio's focus is to provide access to quality care at reasonable costs. While HealthAmerica and HealthAssurance have provided great opportunities for cost savings, we are asked the question many times from employers, "What can I do to help lower



have fewer sick days, and have less stress. Combine these traits and most likely it will result in a happier employee. Penn-Ohio wants to encourage this type of behavior through education and opportunity.

Our 2003 Gift of Health Wellness Fair took place on October 21, 2003, at the Butler County Family YMCA. We had more than 150 attendees taking advantage of the free services and information that was provided from more than 15 different vendors.

Chair massages were offered by local vendors, Wellness Works and Louis Charles Company Day Spa. The YMCA had inspiring workout demonstrations with classes on the hour of Yoga, Pilates, Tai-Chi and Intense Step Aerobics, and also offered body fat analysis and flu shots. Osteoporosis screening, mental health screenings, and physical therapy demonstrations were offered by Butler Memorial Hospital.

The folks from Health Assurance were taking blood pressures; scoliosis and stress tests were given by Discover Chiropractic. Useful information was available from many organizations such as Weight Watchers, the American Lung Association, the American Cancer Society, the American Heart Association, the American Respiratory Alliance, and the American Red Cross. With lots of raffles and giveaways to

It was great to see the enthusiasm and positive responses from our guests.

We are currently planning our next Wellness Fair, scheduled to take place



on Saturday, February 28, 2004, at the Rosemont Banquet and Catering Center in Sharon, PA. Look for more detailed information to follow in the mail. What a way to kick off a new year! If you have suggestions or ideas you would like to share regarding wellness



health care costs?" Among the options is promoting wellness and healthy lifestyles to employees.

With encouragement from employer groups, employees are able to be motivated to lead healthier lifestyles. It can help if they can participate with their coworkers and friends. By doing so, employees will be healthier, more productive,



pass out, everyone was energized and in the mood to learn about their options for healthy living.

Thank you to the member companies who encouraged their employees to attend.



fairs, or if you would like to participate as a vendor please contact Kelly Schraven at 412-395-4036. See you soon!

## PLAN NEWS

# Generics Make Good Sense: Why Pay More When You Can Get the Same Drug Treatment at a Much Lower Price?

We all want to save money. But few of us are willing to sacrifice quality just to pinch a few pennies. With many products, the old adage “you get what you pay for” is true. But when it comes to prescription drugs, you can get the same quality at significantly lower cost. How? By going generic.

Generic medication is one product where you are guaranteed to find a bargain version of a product that is just as good as the expensive brand name. Here’s why.

When a drug company develops a new drug, that drug must be approved by the U.S. Food and Drug Administration (FDA). When it is, the company receives a patent. For a number of years, that company has the exclusive right to sell the drug and profit from the investment it made in research, testing, and advertising.

But when the patent runs out, other companies can make and sell the medicine. They can sell it under the chemical name, but not under the brand name. It’s like being able to make facial tissue, but not call it Kleenex.®

Since these companies don’t have to cover the same research and advertising costs, they can sell it at a lower price. Competition among companies also helps bring the prices down.

As Americans, we currently spend more than \$100 billion a year on prescription drugs, and the price is going up. We all share in that cost. Doesn’t it make good sense to pay less?

### FDA-Approved

We’ve been conditioned to believe that higher prices mean higher quality. Since generic drugs sell for less than brand name drugs, many people believe that they must be inferior. But the truth is that generic drugs, by law,

must contain exactly the same active ingredients as the brand name drug and be just as safe and effective.

Generics also have to be approved by the FDA, just as the brand name drugs do. And a drug company has a lot of proving to do before the FDA gives it permission to sell a generic drug. It must show that its drug has the same ingredients, strength, and dosage as the original. And it must prove, through clinical trials, that its drug gets into a person’s bloodstream just as fast as the brand name version.

Not all drugs have generic equivalents. And sometimes, the name brand may be a better choice. Your doctor or pharmacist will know. But most of the time, generics are a smart alternative to the better-known medicines.

Same active ingredients. Same effectiveness. Same safety. Lower price. Is there any reason not to go generic?

## A Closer Look at Costs

Just how much can you really save with generics? For one example, Motrin can sometimes treat arthritis as effectively as Celebrex. Celebrex costs about \$97 per month. The cost of the generic form of Motrin is around \$20 per month. Or take Claritin. When it was patent-protected, a month’s supply had cost about \$85 at the pharmacy. Now that it’s available in generic form, it can cost less than \$30 a month.

When it costs us less to cover it, it costs you less in the form of lower copays. That’s why you pay different amounts for different classes of drugs. The more you use generics, the more we all save.

Here are some other examples of common drugs, their costs, and how much can be saved using generic equivalents:

Condition	Brand Name (cost per year)	Generic (cost per year)	Savings
High blood pressure	Prinivil (\$363.60)	Lisinopril (\$173.76)	\$190/52%
Depression	Prozac (\$974.64)	Fluoxetine (\$191.40)	\$783/80%
Diabetes	Glucophage (\$1,045.68)	Metformin (\$393)	\$653/62%



# How to Get Emergency and Urgent Care

When you or someone in your family is sick or injured, you may think you should go straight to the emergency room (ER). However, if your situation is not a true medical emergency, the ER is not the best place for you to seek care.

## Emergency Care

HealthAssurance defines a medical emergency as a sudden accident or medical condition that causes severe symptoms or severe pain. A person with average knowledge of health and medicine could reasonably expect that if immediate medical attention was not received in a medical emergency, it would:

- Place his or her health (or for a pregnant women, the health of her unborn child) in serious jeopardy.

- Cause serious damage to bodily functions.
- Cause serious dysfunction of any bodily organ or part.

A medical emergency presents an immediate danger to your health and/or the health of your family member. Some examples might include, but are not limited to: *severe pain; bleeding you cannot stop; chest pain or difficulty breathing; loss of consciousness; heart attack; poisoning; or a drug overdose.*

True medical emergencies do not need prior authorization. If you believe that you (or your family member) need(s) to be treated right away, call 911 or your local emergency number, or go directly to the nearest ER. If you are not sure, call your doctor. He or she (or an on-call partner)

is available 24 hours a day, seven days a week to advise you. If the situation is not an emergency but does require immediate attention, your doctor will either arrange to see you in his or her office right away or direct you to an ER.

If you are treated in an ER and are an HMO or POS (CCPPO) member, we recommend your primary care physician (PCP) be notified as soon as possible after you are treated or admitted to a hospital. This will ensure that your medical records are up-to-date for any follow-up care. Once you are released from an ER, work with your PCP to arrange any follow-up care that the ER doctor recommends to be sure you are covered at the highest level.

## Urgent Care Situations

Knowing when your condition is not an emergency will help you get the best care in the quickest time and save you money. Treatment for any serious condition that does not present an immediate danger to your health is considered urgent care.

Examples of urgent care situations may include, but are not limited to: *Back pain; an earache; a cold or the flu; a high fever; strep or sore throat; a sprained ankle; nausea; pulled muscles; Urinary tract infection; or a rash.*

If you are unsure about the care you need, call your doctor first. If you have any questions about your emergency care coverage, call Member Services at the number on your ID card.

## Your ID Card: Remember to Carry It

Your HealthAssurance ID card contains important information. Please remember to carry it with you in your purse or wallet at all times. Showing your ID card at your doctor's office or the hospital will help the staff to correctly process your benefit information and help ensure timely payment of claims.

## Print Your ID Card Online

- You've misplaced your ID card—just when you are ready to drive to the doctor's office.
- Your new day care provider needs an ID card on file before they will accept your child.
- You must order another ID card for your spouse but you always remember after business hours.
- Your child is away at school and loses his or her ID card.

makes it easy to request an ID card with the press of a button. *My Online Services* gives you access to your personal account information—day or night. Just visit [www.healthassurance.cvty.com](http://www.healthassurance.cvty.com) and register today for the convenience of *My Online Services*. Just click on the red Login/Register button on the gold navigation bar to the left of your computer screen and follow the simple instructions to print a copy of your card anytime.



*My Online Services* is our secure member area self-service feature that

# It's Your Health, After All Responsibility for Your Health Truly Does Begin with You

*Bernard Mansheim, M.D., is chief medical officer of Coventry Health Care, Inc. (parent company of HealthAmerica and HealthAssurance.) Dr. Mansheim is board certified in internal medicine and infectious disease.*



Bernard Mansheim, M.D.

Forever etched into my mind is the image of a 45-year-old patient I saw in the emergency room on a Sunday afternoon some years ago. He had just sustained a heart attack.

Although the man's pain was controlled and he was relatively comfortable with an intravenous line, a heart monitor, and oxygen flowing into his nose, he was clearly scared. He kept repeating: "Why didn't I listen to you? All those times you told me to stop smoking, cut down on my drinking, and start an exercise program. Now it's too late. Why didn't I listen to you?"

Fortunately for him it was not too late, although he did have a permanent scar on his heart. But only at that desperate point did the man realize his role in his own health care.

What we inherit from our parents is beyond our control. But don't think that heredity was what landed my patient in the emergency room that Sunday afternoon.

Excess body weight is an epidemic in America, affecting almost two-thirds of all citizens. Today, one-third of Americans are overweight by medical standard, and almost another

one-third are, frankly, obese. Obesity is a significant contributor to heart disease. Recent studies have also shown that obesity is associated with increased risk of death from most forms of cancer. It is believed that 90,000 cancer deaths each year could be prevented if obesity was eliminated.

Many contributors to obesity can be found simply by looking around. In the 1950s a bottle of Coke was 6 ounces. Today it is hard to find a vending machine that contains a Coke with fewer than 20 ounces. One bottle contributes 250 calories, which is over 10 percent of all the calories most people need in an entire day.

The average plate is 12 or 13 inches across, up from 10 inches one decade ago. Recipe books often contain the same ingredients as they did years ago, but today's editions promise fewer servings simply because we are eating more. In general, we consume an average of 500 calories per day more than our parents did.

We are supersizing ourselves to death while much of the world is dying from malnutrition. Smoking is widely known to be a major contributor to heart disease, lung disease, and a significant number of cancers. Despite all we've learned about this habit, bans on some advertising, and laws that bar smoking from a growing number of public places, smoking is still far too prevalent in society, particularly among teenagers.

Alcohol use continues to be widespread. Studies have shown that nearly half of fatal car accidents are related to drinking. Excessive alcohol use is an additional risk factor for heart disease, and is well known for its destructive damage to the liver.

These realities are depressing. But the good news is that rewriting this story is largely in our own hands, and you can start with a simplified focus. For example, a primary goal for everyone should merely be to achieve normal weight. And to get to a normal weight does not require reading diet fad books, taking pills, having surgery, or running marathons.

Start with exercise. All that means is a brisk walk—covering about a mile in 15 to 20 minutes. This should be done for 45 minutes, three times a week. Make it part of your life, like eating, sleeping, and going to work. Naturally, the more exercise the better. But don't plan to do more, then end up discouraged and do nothing.

Next, eat and drink sensibly. Stop drinking sweetened soft drinks except as an occasional treat. Consume normal portions of normal food—and never leave the table "stuffed." If you snack between meals, eat fruit. And finally, don't supersize anything. You do not need it, period. Limit alcohol consumption to an average of one drink per day at most. How about no drinking during the week? Again, lots of calories will be avoided.

Of course you should not forget to see your doctor (and your dentist) when you need to, for preventive testing and periodic examinations.

***"Excess body weight is an epidemic in America, affecting almost two-thirds of all citizens."***

If you follow these simple recommendations on diet and exercise, you will have made a major commitment. And that commitment is what will take you to next steps to achieve good health. It's your health after all.

When you lapse into your old habits, remember the story of my patient. Fortunately, he went on to live a healthy life after his near-death experience.

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# ValueOptions: News from Your Behavioral Health Provider

**Member Messenger Available**  
ValueOptions, HealthAssurance's behavioral health provider, continues to be committed to excellence. To keep you informed of their quality initiatives to improve care and service, they have created a member newsletter called *Member Messenger*. Visit ValueOptions' website at [www.valueoptions.com](http://www.valueoptions.com) to read a copy. Click on "For Member/Northeast Service Center News and Information" for articles that contain important information. If you do not have an internet connection, please call Carrie Turner at 1-800-322-4824 x2827 (TDD 1-800-334-1897) and request the printed version.

**Depressed?**  
ValueOptions offers a **free five-minute depression screening and booklet**. The booklet is written to help adults who may be depressed or are dealing

with family members who may be depressed. A screening is **not** required in order to receive a booklet. **Call toll-free 1-800-872-8592** (TDD 1-800-334-1897). ValueOptions also offers a toll-free Crisis Line that operates 24 hours a day, 7 days a week, at 1-866-834-1717.

**Do You Think You have a Child with ADHD? Are You Super-Stressed? Free ADHD screening of your child and detection of parental stress PLUS a free 30-page workbook.** Get a handle on your child and your stress with our 10-minute screening. The workbook is designed for parents of children with ADHD. Easy-to-read chapters, kid-tested techniques for behavior management, and proven ways to reduce stress. Screening is **not** required in order to receive a workbook. Call **1-800-872-8592**.

## President

*continued from page 1*

### Forum on Healthcare

Penn-Ohio participated in "A Forum on Healthcare Purchasing in Western Pennsylvania" on Tuesday, October 28, 2003. Targeted to area business and human resource departments, this event consisted of a panel discussion of local health insurers, including HealthAmerica and HealthAssurance, and Butler Memorial Hospital. The discussion offered insight as to what each carrier is doing to control costs and how health care costs are impacting the provider community. HealthAmerica and HealthAssurance presented the Penn-Ohio Alliance's program as an alternative that all employers should review and consider. Hosted by the Butler Human Resources Association & the Butler County Chamber of Commerce, Penn-Ohio was a sponsoring vendor and it gave us a great opportunity to meet with prospective members and generate interest for our membership.

### Educational Meetings

In 2004, we plan to hold educational breakfasts and luncheons in both the spring

and the fall. We would like to host a panel discussion to provide different perspectives to our members regarding the concerns in the health care marketplace today. If you have specific topics that you would like to be covered, please contact Kelly Schraven at 412-395-4036 or [kmschraven@tjsins.com](mailto:kmschraven@tjsins.com). All topics and ideas are welcome.

### Board of Directors

This December, three of our nine valued Board of Directors will be completing their three-year terms. They are Dawn Chaffee (Secretary), Mark Tomaszewski (Vice President), and Dr. Jack Amato. As usual, we will finalize the Board of Directors' election process at our Annual Meeting on February 12, 2004. Please look for the Penn-Ohio packet that will be mailed to you in January; it will include your ballot. You can either mail the ballot or bring it to the Annual Meeting.

### 2004

My sincere thanks to all of our members for your support in 2003. I wish you and your businesses much success and prosperity in 2004!

*Pam Vass*

## We want to hear from you!

**Mail Responses to:** HealthAssurance  
Attn: Penn-Ohio Newsletter – J. Wall  
11 Stanwix Street • Suite 2300 • Pittsburgh, PA 15222

**Or Fax to:** 412-553-7386 **Or e-mail to:** [jwall@cvty.com](mailto:jwall@cvty.com)

## It's Your Health

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Don't wait until you end up in the emergency room. By then it may be too late.

For more information on taking responsibility for your health, see the health risk

assessment section on HealthAmerica's website at [www.healthamerica.cvtty.com](http://www.healthamerica.cvtty.com), or call 1-800-404-9886. If you have a question for Dr. Mansheim, please write to him at Coventry's headquarters, at 6705 Rockledge Drive, Suite 900, Bethesda, MD 20817.

