

Know your numbers



**Brian
Hellman**

the lower your blood pressure, the better; however, if a low reading occurs, and you are not feeling well, you should speak to your doctor.

“There are many ways we can take better care of ourselves.”

Fasting lipoprotein profile—Cholesterol plays a huge part in an individual’s heart health. Knowing these levels or numbers is very important, because a high number can produce a greater risk of heart disease, heart attack or stroke. The Plan covers one routine fasting lipoprotein profile (total cholesterol, LDL, HDL and triglycerides) every five years, for ages 20 and older. Your cost: nothing when you use a PPO provider.

Diabetes screening—You need to know how much glucose (an important and necessary source of energy) is in your blood. This number is important for detection of diabetes and other treatable medical conditions. The Plan covers a routine diabetes screening, to include one hemoglobin A1C test and one two-hour blood sugar test every three years for adults with medical indications, as recommended by the U.S. Preventive Services Task Force (USPSTF). Your cost: nothing when you use a PPO provider.

Body mass index—Body mass index (BMI) is a number based on a person’s weight and height that provides a way to estimate the effect of weight on health. A normal BMI is between 18.5 and 24.9. The higher the BMI, the greater the risk of some diseases, including high blood pressure, coronary artery disease, stroke, osteoarthritis, some cancers

and Type 2 diabetes. The Plan covers one biometric screening annually, which includes calculation of body mass index (BMI), waist circumference measurement, total blood cholesterol, blood pressure check and fasting blood sugar. Your cost: nothing when you use a PPO provider.

If you anticipate a need to have someone assist you with your health insurance claims or questions, you must complete and return the HIPAA Privacy Rule Personal Representative Authorization form. This form allows the Plan to disclose your protected health information (PHI) to a person who will act as your personal representative. The information covered by the authorization is protected health information, including identification of treating providers of care, diagnosis, procedures and personal information such as date of birth and mailing address. However, please note this authorization does not give your personal representative authority, either implied or direct, over any treatment or direct care decisions. Also, we will not condition enrollment, eligibility for benefits or benefits payments on the completion of this form.

If you are a health benefit representative (HBR) and you have enrollees in your branch who want you to contact the Plan on his/her behalf to ask specific questions about claims, claim check status or detailed health information, that enrollee must fill out a Personal Representative Authorization form naming you, the HBR, as their representative.

We can and will continue to release limited claim status information only to an enrollee’s spouse enrolled on the policy. We will only disclose whether a claim has been paid, and if so, on what date and in what amount. We cannot disclose any further information, such as the diagnosis or the reason for treatment, without an authorization.

Members with adult children (a person generally is considered an adult at age 18) on their policy should also be reminded that, under the Privacy Rule, the Plan can only disclose to the natural parents of the adult child claim status as well. In order for the natural parents to access more detailed PHI, such as diagnosis and treatment of the adult child, the child must complete a Personal Representative Authorization form naming the parents as their personal representatives.

Copies of the HIPAA Personal Representative Authorization form may be obtained by calling the Plan and requesting copies, or by downloading them from the NALC HBP website at nalchbp.org.