SPRINKLER Wellness Benefits Everyone

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ISSUE

SUMMER 2016



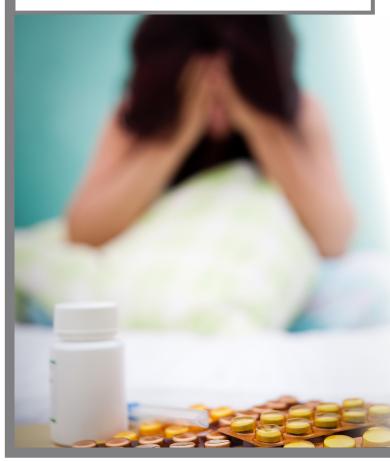


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Welcome to the summer issue of *Sprinkler Fitter You*, our quarterly health and wellness publication exclusively for NASI Welfare Fund participants and their family members.

WELFARE

If you have any questions or would like more information about what you've read here, please contact the NASI Fund Office at 800-638-2603. We're here to help!



OPIOID ADDICTION: A GROWING EPIDEMIC IN THE U.S.

Chances are, if you've turned on the news in the last month or two, you've heard about the uptick of opioid abuse in our country. More physicians and health care providers are prescribing opioids to their patients in both the ER setting and the doctor's office for less severe complaints of pain which often leads to dependency and addiction. In fact, the National Institute of Health (NIH) reports that 4.1 percent of U.S. adults used prescription opioid painkillers for non-medical reasons in 2012 – 2013, up from 1.8 percent just 10 years earlier.

What are Opioids?

Opioids are medications that relieve pain. They bind to the areas of the brain that control pain and emotions, driving up the levels of the feel-good hormone dopamine in the brain's reward areas and producing an intense feeling of euphoria. Commonly prescribed opioids include hydrocodone (e.g., Vicodin), oxycodone (e.g., OxyContin, Percocet), morphine (e.g., Kadian, Avinza) and codeine. Hydrocodone products are mostly used to treat dental and injury-related pain. Morphine is often used before and after surgical procedures to alleviate severe pain.

With continued use, opioid users build up a tolerance, so it takes more and more of the drug to produce the same levels of pain relief and well-being. An illegal and nonprescribed opioid—heroin—often becomes a substitute for prescription medication.

The Link Between Heroin and Prescription Opioids

Many heroin users first became addicted to prescription pills. Heroin is a cheaper alternative (about one-tenth the cost of prescription opioids) and can be easier to get than prescription medication. However, there's a ripple effect around heroin use: In addition to the risk of death and overdoses, heroin addiction comes with a whole new set of problems, such as rheumatological diseases and infections of the heart lining and valves.

Heroin users are also more likely to suffer from HIV, hepatitis and other blood diseases due to the sharing of needles among some users.

What's Being Done to Help?

Now, federal agencies are trying to tackle the problem in different ways. The Centers for Disease Control and Prevention recently issued guidelines for prescribing opioids for chronic pain as part of an effort to push doctors to prescribe pain medications responsibly.

The U.S. Food and Drug Administration announced that immediate-release opioid painkillers such as oxycodone and fentanyl will now have to carry a "black box" warning about the risk of abuse, addiction, overdose and death.

In addition, the Department of Health and Human Services (HHS) is raising the limit on how much of the opioid addiction medication, buprenorphine, can be prescribed by qualified health-care providers. Previously, these providers could prescribe buprenorphine to no more than 100 patients at once. Now, HHS is raising the limit to 275 patients in an effort to help more individuals treat their dependence.

SCARY BUT TRUE: FACTS ABOUT ADDICTION IN THE U.S.

Every 19 minutes, someone dies from an accidental overdose.

Americans represent just 5% of the world's population, but they consume 80% of the world's opioids.

People who've had an alcohol use disorder are nearly twice as likely to also develop an opioid addiction.

Most drug overdose deaths — at least six out of 10 — involve an opioid.

Overdose deaths involving prescription opioids have quadrupled since 1999, yet the amount of pain reported by Americans has not changed much.

* Sources: Centers for Disease Control; CNN, American Society of Interventional Pain Physicians.

Benefits 101

We use them all the time when we talk about benefits, but how well do you understand these terms?

- A **deductible** is a fixed dollar amount you must pay each year before the Plan pays any benefits. However, you do not need to meet the deductible for some preventive care exams if you visit an in-network provider. The deductible is taken from the first expenses you incur during a calendar year. Any expenses you incur during the last three months of a calendar year that apply toward the deductible will also be applied against the deductible for the next calendar year.
- **Preventive care** refers to treatment from a doctor that helps identify health issues or risks before they become problems. In many cases, preventive care helps a patient avoid serious or even catastrophic health situations. Some preventive care is covered at 100% without any application of deductible. Refer to the Plan booklet to see which preventive care services qualify for this higher level of coverage.
- **Coinsurance** is your share (a percentage) of the cost for a particular service after you've met your deductible. For example, if the Plan pays 75% of the Usual and Customary charge for a service, your coinsurance would be 25% of the Usual and Customary charge. If your provider charges more than the Usual and Customary amount, you're required to pay the balance in addition to your coinsurance.
- **Usual and Customary charges** are charges that are generally considered appropriate for a particular service in a particular geographic location.
- An **out-of-pocket maximum** is the most you will pay for your deductible and coinsurance each year. Once you reach your out-of-pocket maximum, the Plan pays 100% of covered medical expenses for the rest of the year.

SUMMER SAFETY IS MORE THAN JUST SKIN PROTECTION

Most people don't need to be reminded to apply sunscreen (SPF15 or higher) when heading outdoors, nor do they need a reminder wear sunglasses and a hat with a brim. However, you may not know that perishable food, such as cold cuts and fresh fruit, can stay safely unrefrigerated for only two hours if the air temperature is under 90 degrees — and for only one hour if the temperature is 90 degrees or higher? This means when having a picnic, be sure to keep cold food cold and hot food hot to avoid food poisoning.

Here are a few other summer safety tips you may not have considered:

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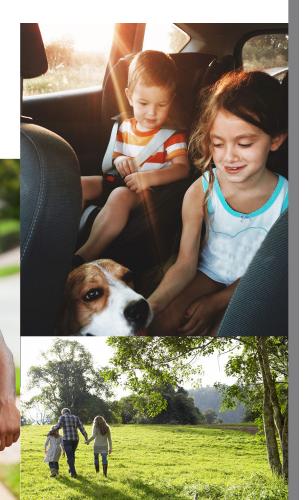
- **Bike helmets aren't just for kids.** According to the National Highway Traffic Safety Administration, bicycle helmets are 85% effective in reducing brain injuries but only 20-25% of all cyclists wear them. Wear a helmet!
- Ticks aren't only found in dense woods. In certain parts of the country, ticks (which carry Lyme disease, Rocky Mountain spotted fever and other illnesses) may be found in backyards, so protect key parts of your body when outdoors. Areas of the body where ticks particularly like to feed include the armpits, groin, behind the ears, on the back of the neck and behind the knees.

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Eating spicy, greasy and heavy foods can contribute to carsickness. Carsickness is a type of motion sickness that occurs when the brain receives conflicting information from the ears, eyes and nerves, all of which help the body perceive motion. This mix-up can result in an upset stomach, cold sweat, fatigue, dizziness or vomiting. If you're heading out for a long car ride, it's better to stay away from foods that can make you queasy.

- Don't leave kids or pets inside a car, even for just a few minutes. Children are more sensitive to heat than adults, so it doesn't take long for them to feel the effects of heat exhaustion. The effect is amplified in a car, which acts like a greenhouse, trapping sunlight and heat inside. Children's bodies can lose the ability to cool themselves at high temperatures, leading to dehydration, heat stroke, seizures and even death.
- **Keep drinking water.** Water is the secret weapon that can help you make it through a hot afternoon. Avoid sugar-sweetened and highly caffeinated beverages and alcohol because they cause the body to release fluids, adding to dehydration.
- Watch out for dehydration. Some people are more susceptible to dehydration, including those older than 65, infants and young children, so look for warning signs, such as a dry, sticky mouth; lethargy; headaches; muscle cramps and dizziness.

- Soothe a bee sting with ice. Then, use a credit card to scrape the stinger out if it's still lodged in the skin. To stop any itching, try calamine lotion. Most important: If your face, tongue or throat swells up, if you have trouble breathing or if you feel dizzy or faint, seek immediate medical help—you might be having an allergic reaction.
- Don't pop blisters caused by new sandals. The fluid-filled sac actually protects the skin healing under the blister, so be sure to keep it clean and dry. (Poking the blister to drain it can introduce dirt or infection.) Cover it with a bandage after it pops—on its own—to prevent infection then take it off after the swelling goes down to allow the area to heal.







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in the official plan documents that legally govern the terms and operation of the NASI Welfare Fund. If this newsletter differs in any way from the official plan documents, the official plan documents always govern. Receipt of this newsletter does not guarantee eligibility for benefits. The Trustees have the right to modify benefits at any time.

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at 800 638-2603 (www.nasifund.org) or by calling the Fund Office.

us by email at mail@nasifund.org or by phone



Have You Had a Life Event? Let Us Know!