It’s Open Enrollment Time for GIC’s Pre-Tax Programs for Active Employees October 10 – November 10
Free HCSA Debit Card! Lower Fee! New Vendor!

Open enrollment time is here for the GIC’s money-saving Flexible Spending Accounts (FSA) – the Health Care Spending Account for out of pocket health care expenses and the Dependent Care Assistance Program for child care and other dependent care expenses. Enroll anytime between Tuesday, October 10 and Friday, November 10 for calendar year benefits effective January 1, 2007.

Health Care Spending Account (HCSA):
Do you have physician office and hospital copays and deductibles? Prescription drug copays? Orthodontia or dental expenses not covered by your dental plan? Do you buy over-the-counter drugs such as pain relievers, bandages, cough medicine, eye drops, or nasal sinus sprays? Do you plan on attending classes for childbirth or smoking cessation? Do you plan to have laser vision surgery or visit a speech therapist not covered by your health plan? You can save money by paying for these services on a pre-tax basis with the Health Care Spending Account. Any active state employee eligible for GIC health benefits is eligible for this program. Elect as little as $500 or as much as $2,500 annually.

Free HCSA Debit Card!
All HCSA participants will automatically receive a FREE debit card to conveniently pay for eligible expenses. (In 2006, participants paid $18.00 annually for a debit card.) With a debit card, you don’t need to submit claims and receipts for reimbursement. The card works like a credit card – you don’t enter a PIN – just sign the receipt and your transaction will be paid out of your HCSA account.
Dependent Care Assistance Program (DCAP): Do you have children under the age of 13 that attend day care, day camp or after school programs so that you (and your spouse, if married) can work, look for work or attend school full-time? Do you have adult dependent day care expenses? Reduce your federal and state income taxes by paying for these expenses on a pre-tax basis. Active state employees who have dependent care expenses who work half-time or more are eligible for DCAP. You may elect an annual payroll deduction of up to $5,000.

New Vendor

The GIC has selected SHPS (pronounced “Ships”) as the new vendor for the HCSA and DCAP programs effective January 1, 2007. SHPS is a national company with extensive experience administering pre-tax programs, serving more than 1,100 organizations, including Fortune 500 companies. If you are a 2007 participant or current 2006 participant, submit your claims after January 1, 2007 to SHPS. Details will be mailed this fall to current 2006 participants.

Fee Reduced!

The monthly administrative pre-tax fee for HCSA and/or DCAP will drop to $3.75 effective January 1, 2007, a 5% reduction from the current fee.

Important Reminders

Be sure to estimate your annual election amount carefully. IRS rules require that any unused funds in a participant’s account be forfeited. However, you have a 2 1/2 month grace period after the plan year ends (March 15, 2007 for current participants) to incur expenses and submit claims for reimbursement. Of course, you must have a balance remaining to receive these reimbursements.

For More Information

Attend one of the several mid-October mini-fairs at agencies across the state. Fair dates, times and locations will be listed on the HCSA and DCAP posters that will be posted at your agency and are on our website. See our website for answers to other common questions about these benefits, www.mass.gov/gic, or call SHPS 1-888-867-2422.

Save Money on Taxes – Enroll No Later Than November 10

Whether you are a 2006 participant, or you wish to enroll for the first time, you must enroll no later than November 10 for 2007 HCSA and/or DCAP calendar year benefits. Current participants can conveniently re-enroll online; you will receive instructions by mail. New enrollees or 2006 participants who do not wish to re-enroll online should return enrollment forms to their agency’s Payroll Coordinator no later than Friday, November 10, 2006. Forms are available through your Payroll Coordinator and on the GIC’s website: www.mass.gov/gic.

Reminder for Commonwealth Indemnity Plan Basic, Community Choice and PLUS Members with Seasonal Homes

I f you are a member of one of these plans and will reside outside of your home state for four or more consecutive weeks, please notify UniCare, the administrator of your plan, by phone or email. UniCare will provide you with information on how to avoid being balance billed by non-Massachusetts providers. You are protected from this practice in Massachusetts as state law prohibits Massachusetts providers from balance billing. [If you are a member of the Commonwealth Indemnity Plan Medicare Extension (OME), you do not need to report seasonal address changes.]

Wow! I Didn’t Know I Could Use it For That!

“I saved almost $500 because my HCSA contributions were deducted before taxes from my paycheck. During the year, I paid $2,000 for my family’s out-of-pocket medical expenses such as co-pays, eyeglasses and visits to the dentist’s office. Not only did my HCSA reimburse these expenses, the tax savings helped offset our healthcare costs. I will definitely re-enroll this year!”

S. Fitzgerald
Downsizing – What Retirees Can Expect and How to Cope

Downsizing can offer both financial and lifestyle benefits for retirees. In addition to reducing mortgage expenses, you may be able to cut everyday expenses such as utility costs and property taxes. (Talk to a tax or financial advisor to see whether selling your home, moving to a less expensive dwelling and investing the excess proceeds makes sense for you.) Moving to a retirement setting can help prolong your independence by reducing your home responsibilities, giving you support and assistance when needed, and improving opportunities to interact with others.

Despite its ultimate rewards, downsizing can be a physically exhausting and emotionally draining experience. You may have accumulated many possessions over a number of years and not everything can or should be moved to your new home. Christine Price, Ph.D., Extension State Gerontology Specialist at Ohio State University offers the following tips:

continued on page 4
Reduce Your Risk for Medication Errors

Medicine is prescribed to help you. But it can harm you if you take too much or mix medicines that don’t go together. Many people are harmed each year, sometimes seriously, because of taking the wrong prescription drugs or not taking these medications correctly. A new report from the Institute of Medicine estimates that there is at least one medication error per hospital patient per day, with error rates varying widely across facilities. Although not all errors lead to injury or death, the number of preventable injuries - 1.5 million - is staggering. The extra medical costs of treating drug-related injuries occurring in hospitals alone is estimated at $3.5 billion, which does not take into account lost wages, productivity, or additional health care costs.

The good news is that new computerized systems for prescribing drugs show promise for reducing the number of drug-related mistakes. Electronic prescribing is safer because it eliminates problems with handwriting legibility and alerts prescribers to possible interactions, allergies, and other potential problems. The GIC is actively involved in a number of efforts to bring electronic prescribing to the Commonwealth. However, statewide electronic prescribing is a few years off.

You can help reduce your own risk for medication errors. You can alert your health care team (and family members if you are incapacitated) of all the prescription and over-the-counter medicines, vitamins, herbal and dietary supplements you are taking, their dosage and any side effects or allergies you may have.

The next two pages, developed from materials supplied by the Massachusetts Coalition for the Prevention of Medical Errors, a coalition of health care professionals committed to reducing medical mistakes, will help you to avoid medication errors:

- Tear this out and fill it out completely
- Use it to ensure that you thoroughly understand the medications you take - who prescribed it, what is the dose, when do you take it, what's its purpose, what are possible side effects, and other factors to consider.
- Update it each time you are prescribed a new prescription.
- Make sure to give each doctor you see an updated copy - consider giving family members a copy so that they can act as an informed advocate for you in the event you are incapacitated.

Save $$$

Don’t forget to give your doctor a copy of your health plan’s prescription drug formulary. Discuss with your doctor whether the drugs with lower co-payments are appropriate for you.

Being an active member of your own health care team is the single most important way you can stay healthy. For additional steps you can take, visit the federal Agency for Healthcare Research and Quality website at www.ahrq.gov.

Downsizing – What Retirees Can Expect and How to Cope

1. Begin in the areas of the house you don’t use often, such as the guest room, basement, and attic.
2. Start with large items and move to smaller ones - make decisions on furniture before knick knacks - you’ll feel like you’re making progress faster
3. Have a sorting system - use stickers and piles to indicate what gets tossed, donated, sold at a garage sale or auction, given to family, or moved
4. Write down family history for items being kept or given to family members - this information will be cherished for generations to come.
5. Allow plenty of time - start the process early and allot time for looking at old pictures, reading letters, and grieving. Work at a pace that is comfortable for you. Sue Ronnenkamp, the author of Living Transitions, suggests spending one or two hours at a time so as not to get overwhelmed.

Remember – the goal is to improve your quality of life. The end result of undertaking this move will bring many rewards. Many communities have relocation specialists or professional organizers who can help with all stages of the downsizing process. Your realtor may be familiar with the providers in your area. If you or your spouse is having difficulty dealing with a downsizing change, seek help. Commonwealth Indemnity Plan and Navigator by Tufts Health Plan members have access to EAP services through United Behavioral Health.
# MEDICATION LIST

## Information About You

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Birth Date</td>
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<tr>
<td>Pharmacy</td>
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<tr>
<td>Phone</td>
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<tr>
<td>Primary Care Physician</td>
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<td>Phone</td>
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<tr>
<td>Other Physicians</td>
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<tr>
<td>or Specialists</td>
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<td>Phone</td>
<td></td>
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<tr>
<td>Emergency Contact</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
</tbody>
</table>

## Medical Conditions

- [ ] Asthma
- [ ] Heart Disease
- [ ] Diabetes
- [ ] High Blood Pressure
- [ ] Cancer
- [ ] Kidney Disease
- [ ] Other

## Important Health Care Documents

- [ ] Health Care Proxy
- [ ] Health Care Durable Power of Attorney
- [ ] Interested in Organ or Tissue Donation

## Questions to Ask Your Doctor

<table>
<thead>
<tr>
<th>Question</th>
<th>Information</th>
</tr>
</thead>
</table>

## Over-the-Counter Medications

- [ ] Allergy Relief/Antihistamines
- [ ] Cough/Cold Medications
- [ ] Aspirin/Other
  - for Pain/Headache/ Fever
- [ ] Antacids
- [ ] Laxatives
- [ ] Sleeping Pills
- [ ] Diet Pills
- [ ] Vitamins, Minerals
- [ ] Herbal/Dietary Supplements
  - [ ] St. John’s Wort
  - [ ] Gingko Biloba
  - [ ] Kava Kava
- [ ] Other (be sure to list on Medication list)

## Discontinued Medications/Products (due to Allergies, Side Effects, or Reactions)

<table>
<thead>
<tr>
<th>Medication/Food/Environment that cause a reaction</th>
<th>Allergy, Side Effects, Reaction or Intolerance Experienced (symptoms, severity)</th>
<th>Date (mm/yy)</th>
</tr>
</thead>
</table>

## Vaccinations

- [ ] Influenza
- [ ] Pneumococcal
- [ ] MMR
- [ ] Tetanus/Diphtheria

## Health Insurance Plans

<table>
<thead>
<tr>
<th>Insurance Plan</th>
<th>Information</th>
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</thead>
</table>

## Massachusetts Coalition for the Prevention of Medical Errors • Betsy Lehman Center for Patient Safety and Medical Error Reduction • Massachusetts Medical Society
<table>
<thead>
<tr>
<th>Start Date</th>
<th>Name of Medication</th>
<th>Prescribed By</th>
<th>Dosage</th>
<th>When is the Medication Taken</th>
<th>Purpose</th>
<th>Danger Signs*</th>
<th>Stop Date</th>
<th>Monitoring Required</th>
<th>Notes/Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>mm/dd/yy</td>
<td>Brand and Generic name (If available)</td>
<td>mg/units/puffs/drops</td>
<td>How many times per day? Morning and/or Night? After meals?</td>
<td></td>
<td>how many times per day? Morning and/or Night?</td>
<td>Call Immediately if you experience any of these signs</td>
<td></td>
<td>Blood Test Every 4 weeks</td>
<td></td>
</tr>
<tr>
<td>1/01/06</td>
<td>Medication ABC</td>
<td>Dr. ABC</td>
<td>5mg</td>
<td>2 times, morning and night</td>
<td>Ulcer</td>
<td></td>
<td>6/15/06</td>
<td>Reviewed by Dr. ABC</td>
<td></td>
</tr>
</tbody>
</table>

* Always refer to physician and pharmacist input and the detailed drug sheets provided with each medication for a complete list of potential side effects/danger signs/interactions. Whenever you see a doctor, including your primary care physician and any specialists, review and update this medication list. After any hospitalization, check with your doctor to review this medication list.

- Please use pencil to complete this form.

For Your Benefit
Congratulations to Two $2,500 Scholarship Winners!

Two GIC dependents received $2,500 towards their fall college tuition. Tufts Health Plan, the administrator of the Navigator plan, awarded scholarships to Elizabeth Russell of West Roxbury and John Herrmann of Dedham. The scholarship committee received many qualified applications for this annual award. Applicants demonstrated strong research, thought and writing skills when answering the essay question on the impact that the Massachusetts health care legislation will have on young adults aged 19 to 26. The two winners’ essays stood out, as did their commitment to health care, strong academic records and letters of recommendation:

Elizabeth Russell is the daughter of John Russell, who works for the Massachusetts College of Art. Ms. Russell is currently a biology major at Wellesley College.

John Herrmann is the son of Ann Hermann, who works for the Department of Revenue. Mr. Herrmann is studying chemical engineering with a biological concentration at Johns Hopkins University in Baltimore.

Congratulations Elizabeth and John!

Reminder for Most GIC Retirees: Don’t Enroll in Medicare Part D

The federal government’s next open enrollment for the Medicare Part D prescription drug program will take place soon. For most GIC Medicare retirees, the drug coverage you have through your GIC health plan is a better value than the Medicare drug plans offered. Therefore, you should not enroll in a Medicare drug plan. See the Notice of Creditable Coverage, located in your health plan handbook and on the GIC’s website, for additional details.
Rating Health Care – GIC’s Select & Save Plans Pave Way for Changes in Health Care

Wouldn’t it be great if there were a Consumer Reports that rated doctors and hospitals?

The GIC’s Select & Save (Clinical Performance Improvement Initiative) model — rating health care providers on quality and cost effectiveness, and giving employees incentives for choosing these providers for their care — has paved the way for all Commonwealth residents to have information about health care cost effectiveness and quality. By pooling the data of more than 9 million treatment episodes from all GIC health plans, the GIC has helped to develop reliable, easy-to-understand performance data.

Other similar initiatives are being implemented: Blue Cross Blue Shield of Massachusetts, the state’s largest health insurer, is launching a plan in January similar to the GIC’s Select & Save plans. “I’m glad to have company,” said Dolores L. Mitchell, the GIC’s Executive Director.

Is there resistance to differentiating quality and cost efficiency by health care providers? “You bet,” said Susan Connolly, Partner with Mercer Human Resource Consulting, in a recent Boston Globe editorial. Some critics consider measuring physician quality an impossible task, which she finds puzzling. As Ms. Connolly notes, “We’re all measured in one way or another — on the job, at school, on the soccer field. Measurement is a way of assessing problems and identifying opportunities for improvement.” “We understand the rating of physicians is coming, and physicians have to be prepared for it,” said Dr. Kenneth R. Peelle, President of the Massachusetts Medical Society, which represents about 19,000 doctors, in a recent Boston Globe article.