



COMPASS CONNECTION

SPRING 2020

CERVICAL
CANCER
SCREENINGS
CAN SAVE LIVES
.....
HERE'S HOW

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INTRODUCING
**AGING
WELL**

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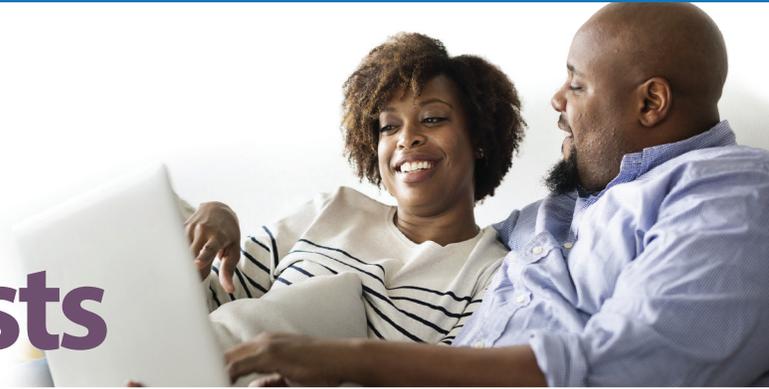
3 TOOLS
TO HELP
MANAGE YOUR
HEALTH CARE
COSTS

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WHAT OUR **2019 HEALTH PLAN**
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3 Tools to Help Manage Your Health Care Costs



As a member of the Compass Rose Health Plan, you have access to great benefits, wellness programs and incentives that you can take advantage of. We also offer plenty of ways to reduce your health care costs while getting the care you need. You can access many of these tools through your Compass Rose Member Portal account at <https://member.compassrosebenefits.com>. Here are three tools that can help you save on your health care expenses:



1. Provider Directory

One of the best ways to save on health care costs is to stay in-network. The online Provider Directory lets you browse our network of providers, urgent care centers and other facilities so you can make sure you are getting care from a preferred provider. Staying “in-network” simply means using the health care providers available to you as a part of the UnitedHealthcare Choice Plus network. In-network providers have a contract with UnitedHealthcare and agree to limit what they will bill. Because of that, when you use an in-network provider, your share of covered charges consists only of your deductible and coinsurance or copayment.

There may be times when you decide to visit a doctor not in our network. If you go out-of-network, your costs are usually higher because those providers are not under a contract. They can set their own rates and may expect you to pay the difference between what we cover and the amount they bill.

Start saving money by locating network providers in your area. Research local urgent care facilities and hospitals so you are prepared in case of an emergency. When you call to schedule an appointment, verify that they are a part of UnitedHealthcare’s Choice Plus network, as some providers may not recognize the Compass Rose Health Plan name. At your visit, present your health plan member ID card, which lets them know where to submit claims.



2. UMR Health Cost Estimator*

Do your research when shopping for a new car or the latest technology? You should do the same when it comes to health care services. Prices can vary among providers, just as they do for other consumer goods, and doing your research can help you save.

We believe in price transparency and think it is important for our members to know how much they might owe

before they have an appointment or procedure. To help with that, Compass Rose Health Plan members have access to UMR’s **Health Cost Estimator**, which allows members to see out-of-pocket cost estimates for treatments and procedures at various health care facilities in their area, based on our plan’s benefits.

Plus, members and their covered spouse can each earn 50 reward points just for using this tool.**



3. Express Scripts’ Price a Medication

Our members always have real-time access to their drug coverage information and co-pay amounts. Express Scripts’ **Price a Medication** tool lets you know what your specific cost will be for a prescription based on our plan benefits *before* you fill a prescription.

The tool is also designed to help you find potential savings on prescription medications that you or your covered family members take on an ongoing basis. When you price a medication, you will be provided with available generic equivalents that usually cost less than brand-name drugs. If there is a lower-cost option, discuss with your provider whether the medication is right for you. That way, you can make more informed decisions based on your health and cost.

In addition, members and their covered spouse can each earn 50 reward points just for using this tool.**

We believe that having access to these online resources helps our members become conscientious health care consumers, putting them in the driver’s seat of their health care decisions. Log into your Member Portal account today to weigh your options and make important decisions about your health care needs at <https://member.compassrosebenefits.com>.

* Prices may vary and are subject to change.

** Reward points for completing this activity can only be earned once per calendar year and only for using one of the tools (Health Cost Estimator or Price a Medication).

How Dropping Only a Few Pounds Can Help Your Heart

We have all heard that being overweight is bad for your heart. Most people assume they must lose a significant amount of weight to see health benefits. But did you know that even dropping as few as 10 pounds can lower your risk of heart disease and help you feel better, according to the American Heart Association?¹ Losing weight can also improve healthy cholesterol levels, lower your bad cholesterol, lower blood pressure and lower your risk for developing diabetes.²

Support for Real Results

Dropping extra weight can have a direct impact on your overall health, wellness and happiness. Real Appeal[®] can help with an online program that provides the support and tools you need to lose weight from the comfort of your own home.

With Real Appeal, you will get:

> **A Transformation Coach** who leads online group sessions.

> **Online tools** to help you track your food, activity and weight loss progress.

> **A Success Kit** with food and weight scales, recipes, workout DVDs and more — shipped to your door.

In just over one year, Compass Rose Health Plan members lost a combined 3,093 pounds.

Real Appeal is based on clinical science, demonstrating that simple and steady changes, over time, can lead to transformational results. Participants attend up to a year of digital program sessions with Transformation Coaches who present new information during each session on nutrition and exercise along with strategies for staying motivated to help them reach their personal weight loss goals. This program is available to you and eligible family members at no additional cost as part of your health benefits plan.

Ready to get started?

The next step is your choice. With Real Appeal, you can have access to a proven, science-based approach through education, support and tools to lose weight and start living a healthier lifestyle. Get started at compassrosebenefits.com/RealAppeal.

**Real
Appeal[®]**

SOURCES:

¹ https://www.heart.org/HEARTORG/HealthyLiving/WeightManagement/Obesity/Losing-Weight-and-Getting-Healthier_UCM_447778_Article.jsp

² Williamson DA, Bray GA, Ryan DH. Is 5% Weight Loss a Satisfactory Criterion to Define Clinically Significant Weight Loss? *Obesity*. 2015; 23(12)2319-2320.

* Real Appeal is available at no additional cost to Compass Rose Health Plan members, their covered spouses and dependents 18 or over, with a BMI of 23 and higher, subject to eligibility. Members with a BMI of 23 to 29.9 without a qualifying comorbidity (such as diabetes, pre-diabetes, dyslipidemia, high blood pressure or tobacco use) can participate but are not eligible to receive one-on-one coaching.



Ask These Questions to Help Avoid Misdiagnosis

One of the most important skills your doctor has is listening. But sometimes doctors are pressed for time and may not get the full picture of your symptoms, concerns and changes in your health. Unfortunately, this can increase your risk of misdiagnosis or inappropriate care. To help lower that risk, here are some questions you can ask during your appointment to improve doctor-patient communication:

- **What could be the underlying cause of my symptoms?** Rather than asking what your diagnosis is, ask about the possible causes for your symptoms. This starts a broader discussion that is not limited to a single diagnosis.
- **What treatment options should I consider?** Ask about all possible appropriate treatments, from simpler changes — like diet, exercise or physical therapy — to higher impact options like medication and surgery. Gathering as much information as you can about your options can help you make a more informed decision.
- **What outcome should I expect?** It is important to understand what the likely outcome of your treatment will be. You may think that after back surgery you will feel 100% better, while your doctor's definition of success is a small improvement in range of motion or reduction in pain.
- **What are the potential side effects or impact on my quality of life?** Knowing what the possible side effects of treatment are, can help you decide if the relief you will get from your symptoms is worth the discomfort or decrease in quality of life you may experience during treatment.

- **What clinical evidence supports this treatment?**

There should be evidence from double-blind clinical studies. For example, if you are considering a specific surgical treatment, ask what studies have been done that shows the treatment is effective and safe.

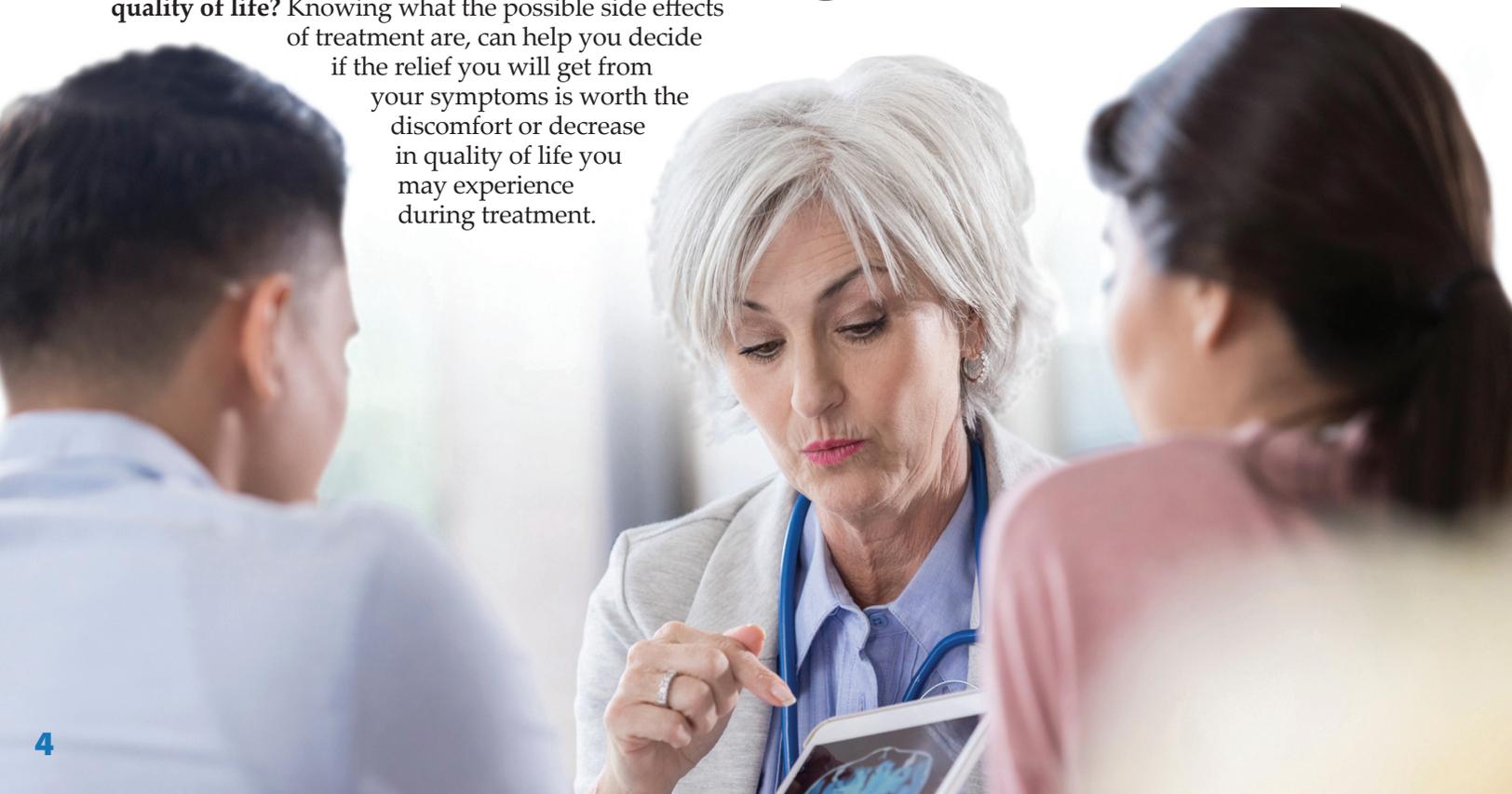
If you have been diagnosed with a complex medical issue, you may find that you need extra help navigating the health care system. That is where the Health Advisory Program through PinnacleCare comes in. Their advisors work solely for you as an unbiased resource to help you navigate your unique diagnosis and the health care system for the best possible outcome.

PinnacleCare can help you seek a second opinion, which can help reduce your risk of misdiagnosis, ensure you understand all your options and, in some cases, may change your diagnosis and treatment recommendations. In addition, they can help you get appointments with top specialists and hospitals and can help you better understand your diagnosis and treatment options.

To learn how PinnacleCare can help, visit compassrosebenefits.com/HealthAdvisor or call (443) 351-7370 Monday through Friday, 8 a.m. to 6 p.m. EST.



PINNACLECARE



Cervical Cancer Screenings Can Save Lives — Here's How

Do you have your well-woman visit scheduled for this year? Routine preventive care is important even if you are not experiencing any symptoms or you are not sexually active. Well-women exams increase the likelihood of your doctor catching problems early — before they turn into bigger issues, like human papillomavirus (HPV) and cervical cancer.

Since the widespread adoption of the Pap test (also called a Pap smear or cervical cytology) during the 1960s, cervical cancer deaths in the U.S. have dropped significantly, according to the American Cancer Society.¹ But many women may still have questions about whether they need screening, the best screening method, how often and where they can get screened.

There are two tests used to screen for cervical cancer. A Pap test takes a sample of tissue from your cervix that is examined under a microscope for abnormal cells that could indicate cancer or could eventually become cancer. An HPV test looks for the type of HPV virus that may cause cervical cancer. The type of test you need depends on your age and your provider's recommendation, regardless of whether you are sexually active. The primary goal of a cervical cancer screening is to catch potentially dangerous abnormalities early before they become cancer or progress to a serious disease.

Do I need a cervical cancer screening?

You should start getting regular Pap tests at age 21. How often you get tested after that depends on your age, medical history, and the results of your last Pap or HPV tests. The U.S. Preventive Services Task Force (USPSTF) recommendations are as follows:



Your annual well-woman exam is FREE when using a network provider and you can earn 100 reward points for getting a cervical cancer screening.

TIP: Be sure to say you are coming in for a "well-woman visit" when you schedule your appointment.

- **In Your 20s:** Regular screening for cervical cancer starting at age 21 every 3 years with cervical cytology alone.
- **For Those 30-65:** At age 30, two additional cervical cancer screening options are added to their recommendation. Women can receive a pap test every three years, an HPV test every five years or get both tests at the same time (called co-testing) every five years.²

Talk with your provider about your risk for cervical cancer and which screening option is right for you, especially if you have never been screened for cervical cancer. Some women may also need to get screened more often if you have had cervical cancer or abnormal test results in the past. If you do get a screening test, talk

with your health care provider about the results of your test and the next steps you may need to take. The bottom line is that it is important to get screened.

Where can I go for a test?

You can get a cervical cancer screening at an obstetrician-gynecologist office. Some primary care providers' offices also offer cervical cancer screenings. A well-woman visit may make some people feel uncomfortable. A good relationship with your provider is vital. Your provider should show interest in your concerns, without judgement, and allow you to feel comfortable. To find an in-network provider, visit compassrosebenefits.com/UHC.

Getting the best health care means making smart decisions about what screening tests, services and preventive care to get and when to get them. We want to make sure you are getting the care you need. Regular and timely preventive care can help keep you healthy and prevent disease.

SOURCES:

¹ <https://www.cancer.org/cancer/cervical-cancer/about/key-statistics.html>

² <https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/>

What Our 2019 Health Plan Quality Measures Mean for You

Our 2019 quality measures are in. We would like to share with you how our plan is performing to include the percentage of our members who are compliant with various measurements and the results of the feedback we have received.

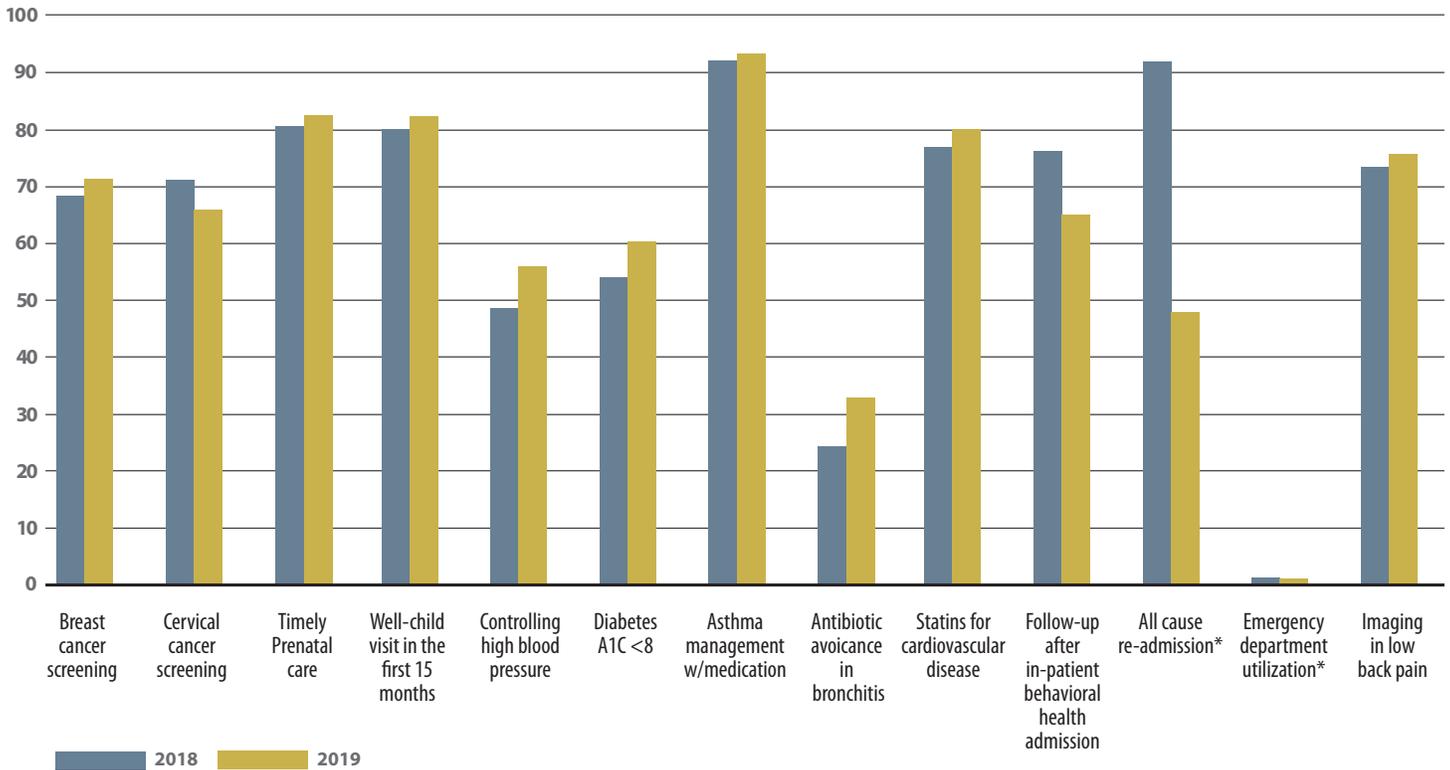
Quality measurement in health care is the process of using data to evaluate the performance of health plans and providers against recognized quality standards.

As an FEHB Plan, we report Healthcare Effectiveness

Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) measures to OPM for a Plan Performance Assessment. The results are shared by OPM in their Plan Comparison Tool to assist federal employees, annuitants and their families in choosing the health plan that best meets their needs.

The chart below shows the percentage of our members who were compliant with each HEDIS measurement.

Healthcare Effectiveness Data and Information Set (HEDIS)



* All cause-readmission is an unexpected readmission within 30 days after discharge. Emergency department utilization is measured by how many people went to the emergency room versus the number of people expected to visit the emergency room. In these instances a lower number would be better.

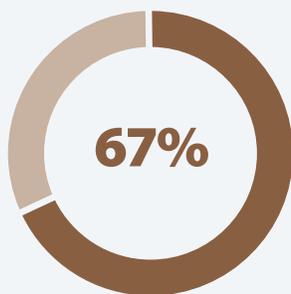
** CAHPS Percentages are based on the members who responded usually or always to survey questions pertaining to their experience with the Compass Rose Health Plan over the last 12 months.

Our HEDIS scores are an integral part of the Compass Rose Health Plan's efforts to improve health care for our members. The results are used to help shape member education initiatives in areas where we could be more compliant. For example, if we see that not enough women are getting their cervical cancer screening, not enough members are controlling their high blood pressure and too many people are going to the emergency room for non-emergent needs, we create programs to help bring awareness to the importance of being compliant in each of these areas.

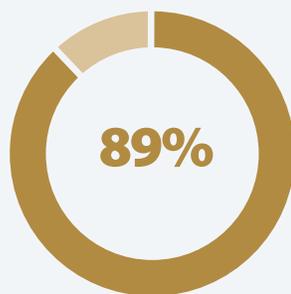
These scores are all about helping to improve your health — we cannot do it without YOU. By staying healthy, getting your routine preventive care exams and screenings and staying compliant with your provider's recommendations, not only are you improving your health, but the health of the Compass Rose Health Plan.

Wondering what other Compass Rose Health Plan members have to say about us? Below are the results of our 2019 CAHPS survey mailed to randomly selected members.**

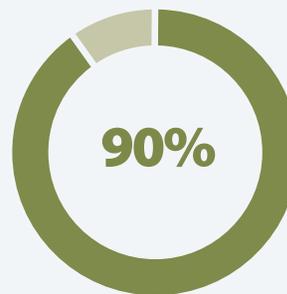
Consumer Assessment of Healthcare Providers and Systems (CAHPS)



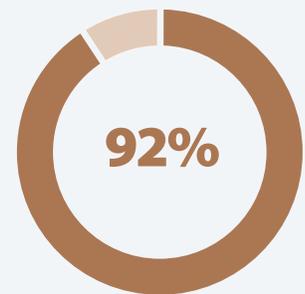
67% of members were able to obtain information on costs of healthcare services, equipment or prescription medications.



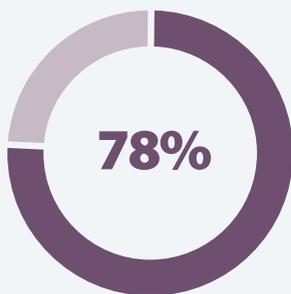
89% said they are getting the care they need.



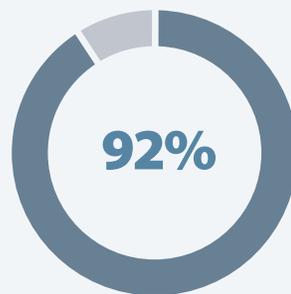
90% said they are getting care they need quickly.



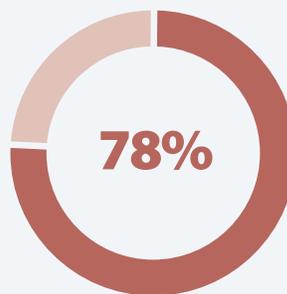
92% said their claims were handled quickly and correctly.



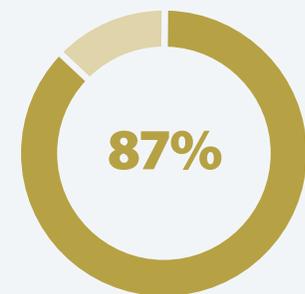
78% ranked the Compass Rose Health Plan as an 8, 9 or 10 on a 10-point scale with 10 being the best.



92% said that our health plan's customer service staff gave them the information or help they needed and treated them with courtesy and respect.



78% said their personal doctor seemed informed and up-to-date about the care they received from these doctors or other health provider.



87% ranked their personal doctor as an 8, 9, or 10 on a 10-point scale with 10 being best.

Health care plays an important role in ensuring a long and happy life. Are you doing your part to improve it? Take the first step by scheduling your annual preventive care checkup with your primary care physician. To locate a network physician in your area, visit compassrosebenefits.com/UHC.

Opioid Epidemic



FACT:

MORE THAN 191 MILLION OPIOID PRESCRIPTIONS WERE DISPENSED TO AMERICAN PATIENTS IN 2017.¹



FACT:

ON AVERAGE, 130 AMERICANS DIE EVERY DAY FROM AN OPIOID OVERDOSE.²



FACT:

TWO MILLION PEOPLE HAD AN OPIOID USE DISORDER IN 2018.²



Our nation's unprecedented opioid epidemic has been called the worst drug crisis in American history. Drug overdose is the leading cause of accidental death in the United States, with opioids being the most common drug.³

Opioids are a class of medications used to treat moderate to severe pain. When used correctly under a health care provider's direction, prescription pain medicines are helpful. However, the misuse of prescription opioids can lead to dependence and addiction. Over time, your body can build up a tolerance to the medication, causing you to need a stronger dose to receive the same level of pain relief. However, higher doses lead to an increased risk of side effects as well as addiction and overdose. It is important to know the facts and be cautious.

The best ways to prevent opioid overdose deaths are to improve opioid prescribing, reduce exposure to opioids, prevent misuse and treat opioid use disorder.

The Compass Rose Health Plan is committed to preventing opioid abuse and has launched numerous initiatives to combat the opioid epidemic. Express Scripts is constantly monitoring our large member population to ensure prescriptions are being used properly, guard against possible prescription fraud and track suspicious doctor shopping (seeking care and prescriptions from multiple doctors without notifying them of the other). In addition, our provider network is monitored for opioid prescribing.

Health plan initiatives are only a piece of the treatment puzzle. As a health care consumer, it is important to understand how to prevent and treat opioid misuse. If you or a loved one is prescribed opioids for your

pain, you have the following responsibilities to help ensure you are getting the safest, most effective pain management possible:

- If possible, seek alternatives. Talk to your provider about over-the-counter medications like acetaminophen, ibuprofen and aspirin. Certain services like acupuncture, chiropractic care and injection therapies may also be good alternatives.
- Talk to your doctor about any and all side effects and concerns.
- Follow up regularly with your doctor.
- Do not doctor or pharmacy shop.
- Never take opioids in greater amounts or more often than prescribed.
- Never sell or share prescription opioids.
- Store prescription opioids in a secure place, out of reach of others (including children, family, friends and visitors).
- Dispose of unused or expired opioid medications properly. Visit [fda.gov/DrugDisposal](https://www.fda.gov/DrugDisposal) for instructions.
- Do not take opioids with alcohol or other medications like sleep aids, muscle relaxers, benzodiazepines (like Xanax or Valium) and other opioids.

If you or a loved one suffer from opiate addiction, work together to seek treatment. As a Compass Rose Health Plan member, you have coverage for professional services by licensed substance use disorder treatment practitioners, medication-assisted therapy and detoxification from opioid use disorder.

SOURCES:

¹ Centers for Disease Control and Prevention. 2018 Annual Surveillance Report of Drug-Related Risks and Outcomes — United States. Surveillance Special Report 2. Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. Published August 31, 2018.

² <https://www.hhs.gov/opioids/>

³ <https://www.ncbi.nlm.nih.gov/pubmed/29262202>

⁴ <https://www.hhs.gov/surgeongeneral/priorities/opioids-and-addiction/naloxone-advisory/index.html>

Thrift Savings Plan

(Traditional or Roth)

Retirement – you dream about and plan for it, but how do you know you are making the best choices regarding your Thrift Savings Plan (TSP). The TSP is a retirement savings and investment plan for Federal employees and members of the uniformed services. Established in 1986, the TSP offers the same type of savings and tax benefits offered by most private companies under a 401(k) plan.

Below is a short scenario to demonstrate how the Roth TSP and the Traditional TSP differ. Once you think you know which choice is best for Ella, visit Mission Financial Solutions* for the answer at missionfinancialsolutions.com.

Ella, a single, 30-year-old filer, would like to contribute \$5,000 into either a Roth TSP or Traditional TSP.



She currently is in the 22% tax bracket as her taxable income is \$40,000. She is unsure what tax rates will be like when she retires, so she would like to assume that she will be in the same 22% tax bracket in the future and will take out the funds at age 60 or 30 years from now.

Which is a better option for Ella?

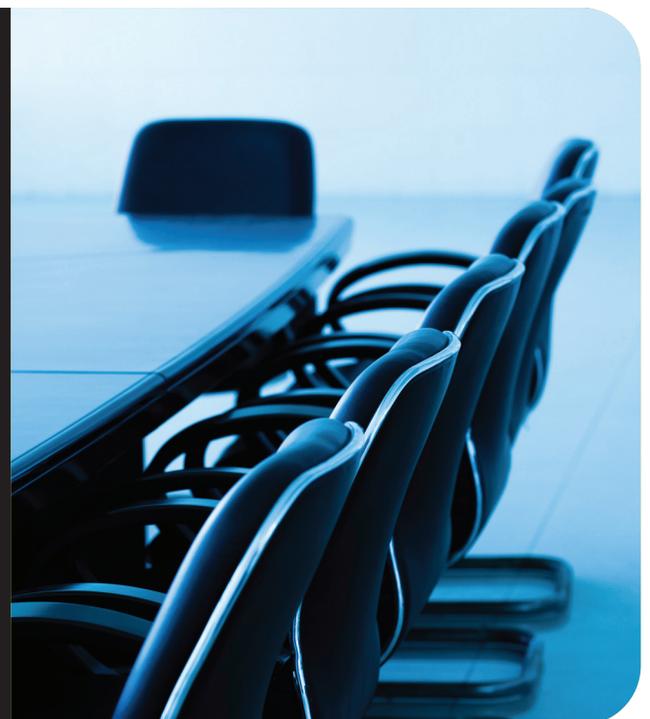
Visit missionfinancialsolutions.com to find out.

**Compass Rose members have FREE access to articles, interactive tools and even personalized answers to your financial questions through Mission Financial Solutions. The information on the Mission Financial Solutions website is for educational purposes and the opinions and information is provided by the publisher (Horowitz & Company) and is not the opinion of Compass Rose Benefits Group or its affiliates.*

MISSION FINANCIAL SOLUTIONS

Meet the 2020 Board of Directors

Compass Rose Benefits Group (CRBG) is pleased to congratulate Kevin Smith, Beverly Borich Christiana and Mark Williams as they return to our Board of Directors. The Board plays an important part in ensuring CRBG's products and services meet the unique needs of our members. Our Board shares a great level of expertise and dedication to CRBG. Kevin Smith will serve as chair of the 2020 Board of Directors. We are fortunate to have them help us usher in a new decade.



Introducing Aging Well

As a not-for-profit association, we have helped our members with their health and life insurance needs for over 70 years. This year, we are excited to launch a new program called Aging Well. The goal of this program is to support members in leading fulfilling, healthy, safe and secure lives. This free service will assist members with health and wellness concerns, provide education and resources and help develop a personal aging well strategy.

Like all significant milestones in our lives, we set goals, make plans and strive to meet them. We did this in our careers, in raising our families and in planning for our retirement. In many ways, planning for our aging is like any other planning process, so why do many of us put this off? While you cannot control your age, you can set goals and make smart choices along the way.

Many people start taking steps to eat better, get regular exercise and manage stress to extend their healthy years. But it goes beyond that. Healthy aging should include thinking ahead to the financial, medical and family issues that you could face as an older adult. For example, do you wish to stay in your current home, or would you like to downsize? If you want to stay in your current home, are

modifications needed? If you want to downsize, what do you do with all the things you no longer need? Are you interested in joining social clubs or volunteering? Do you have a health issue that needs to be managed? Do you have a living will? Are you active? What kinds of physical activity can you do? All these decisions can seem overwhelming. The issue of aging well is far too large and complex for you to tackle alone. CRBG is here to help.

To assist members in developing a personal aging well strategy, CRBG has put together a dedicated team of professionals and resources to help members achieve their goals. Members can connect with:

- A resource coordinator, who can identify local resources for an array of needs
- An anchor nurse, who can help manage health conditions, nutrition, and wellness.
- A pharmacist, who can perform a complete medication review and answer medication questions

The best part is that this program is FREE to Compass Rose Health Plan members age 65 and over. For members under age 65 and starting their planning early, our resource coordinator is available to assist. Plus, anyone can access our Aging Well website, which is full of useful information.

We encourage our members to get started sooner rather than later. Planning for aging well should be proactive rather than reactive. In the long run, you will be happy that you planned in advance as good planning can save you time, money and resources.

Explore Aging Well today:

By phone: 855-512-WELL (9355)

Online: compassrosebenefits.com/AgingWell

The Aging Well team is ready to serve you!



AGING WELL

The Key to Aging Well

Getting older is inevitable. And while it may not be something we like to think about, at a certain point it is important to start planning for future medical and supportive care needs. Planning early while you are still healthy can help ensure that your wishes are carried out. Putting together a life care plan is an important step in ensuring that everyone — including you, your family, friends and physicians — are on the same page and understand your wishes.

A life care plan is an overarching document that includes:

- A **living will**, also known as a directive to physicians, health care declaration or advanced medical directive. A living will helps guide your family and doctors in deciding about the use of medical treatment for you at the end of life.
- A **will**, also known as a last will and testament or living trust. This is a legal document that allows you to plan who receives your financial assets and property.
- **Health care power of attorney**, who is an appointed person authorized to deal with all medical situations when you cannot speak for yourself.
- **Financial power of attorney**, which is a legal document that appoints someone to make financial decisions for you. A power of attorney is effective only while you still handle your own finances. A *durable* power of attorney remains valid after you cannot make financial decisions due to illness or injury.

Even if you decide you just want your family to make all the decisions, it is still important to put together this paperwork. Some states will not allow families to make decisions unless there is a living will or health care power of attorney.

Choosing your health care agent and talking about end-of-life decisions is not always easy.



The most important considerations when appointing a health care agent is picking someone who you trust, who knows you very well and who will honor your wishes.

Here are some things you need to talk about even if you think the answers are known:

- Know when and how you would want life-sustaining treatments provided to you.
 - If you suffer a massive stroke or had a head injury from which you are unlikely to regain consciousness, how would you want to be treated?
 - Would you want to receive artificial nutrients and fluids?
 - If you were seriously ill and your heart stopped beating or you stopped breathing, would you want resuscitation attempts? Would you want to have a ventilator breathe for you? If so, for how long?
- Understand personal and spiritual values about death and dying.

Thinking about and talking about end-of-life is never easy but once everyone has come together to discuss your plan, you can enjoy all the time you are given with each other knowing that in the end your wishes will be honored.



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compassrosebenefits.com
member.compassrosebenefits.com



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Follow us on
twitter.com/CRBGinsurance

Compass Rose Contact Information:

Medical Claims

UMR
P.O. Box 8095
Wausau, WI 54402
(888) 438-9135

Provider Precertification

UMR
(800) 808-4424

Lab Work Program

LabCorp
(888) 522-2677
labcorp.com
Quest Diagnostics
(866) 697-8378
questdiagnostics.com

Prescription Drug Program

Express Scripts
P.O. Box 14711
Lexington, KY 40512-4711
(877) 438-4449
express-scripts.com/Pharmacy

Doctor On Demand (Telehealth)

(800) 997-6196
compassrosebenefits.com/DrNow

Compass Rose Benefits Group

(866) 368-7227
askCRBG@compassrosebenefits.com
compassrosebenefits.com