



WELLPATH'S HEALTHY BACK CHALLENGE

Having a Healthy Back is Just One of Your Benefits

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WellPath Program Supervisor



WELLPATH'S HEALTHY BACK CHALLENGE

Back pain and conditions are crazy common

- 8 of 10 of us will have a bout significant back pain.
 - Medications
 - Seek treatment from healthcare providers
 - Miss work
- 2nd most common cause of physician's visit.
- Survey says: >25% of us have experienced back pain in the last 3-months.
- Leading reason for SL, STD and LTD and worker's comp.



WELLPATH'S HEALTHY BACK CHALLENGE

Back pain and conditions are preventable & treatable

- Lifestyle
- Exercise, including therapy
- Avoiding risky behaviors – **lifting technique** (up to 80% of work-related back injuries happen during lifting)
- Know your risk – mitigate your risk
- Posture
- Ergonomics
- Body Composition



WELLPATH'S HEALTHY BACK CHALLENGE

Self-management

- Chronic Disease Self-Management Program – Stanford Medical School
 - Kate Lorig started in 1978 to create an arthritis education program
 - Discovered that many of the components of managing a chronic illness is common with other chronic illnesses
 - Discovered that peer-leaders could lead an effective self-management program
 - Reduced costs
 - Improved outcomes



WELLPATH'S HEALTHY BACK CHALLENGE

Self-management

- Following much of the processes of the CDSMP
 - Boom in SMPs and development of condition-specific SMPs
 - Majority of the positive outcomes happen with generalized SMP training
 - WP Healthy Back Program
 - Developed using the evidence-base from the CDSMP
 - Incorporating published self-management literature
 - Incorporated published peer-reviewed professional literature
 - In partnership with Integrated Musculoskeletal Care



WELLPATH'S HEALTHY BACK CHALLENGE

Self-management

- WP Healthy Back Program
 - Assess back health and **risk factors** for future back pain/condition
 - Introduce IMC Joint Strong™ App and services
 - Posture assessment
 - Working healthy – ergonomic assessments
 - Exercise program
 - Prevention/management plan
 - Body composition
 - Lifting safely/properly
 - Resources and information
 - Full utilization of employee benefits
 - Active participant in healthcare





WELLPATH'S HEALTHY BACK CHALLENGE

Risk factors

- **Age**: 1st attack 3rd – 5th decade of life and more common as we age
 - Loss of bone strength & osteoporosis
 - Decreased muscle elasticity
 - Atrophy of intervertebral discs – loss of fluid & flexibility
 - Loss of flexibility
 - Loss of strength
 - Unfavorable changes in body composition
 - Abnormalities to the spine (stenosis, bone spurs, etc.)
 - Increased sedentary time.



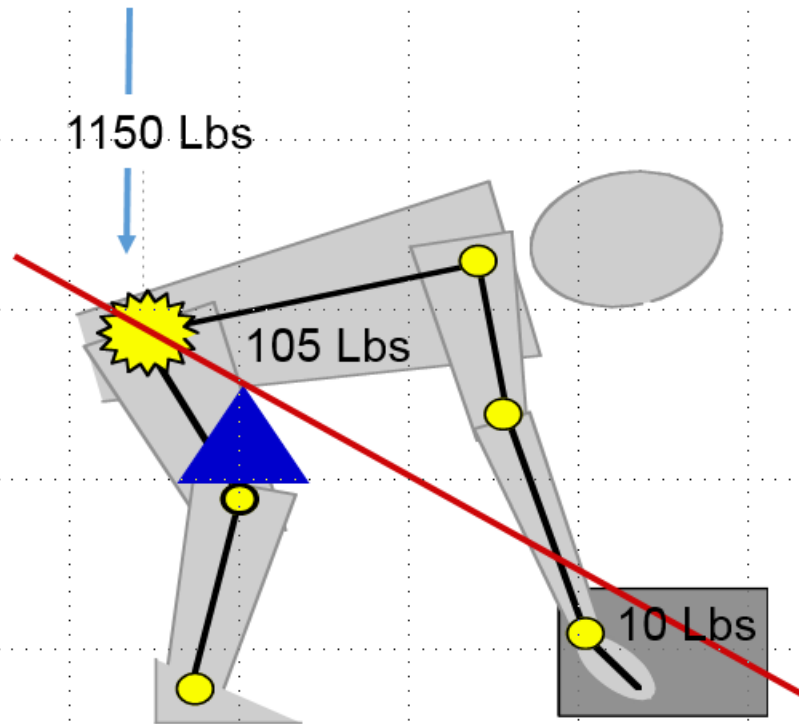
WELLPATH'S HEALTHY BACK CHALLENGE

Risk factors

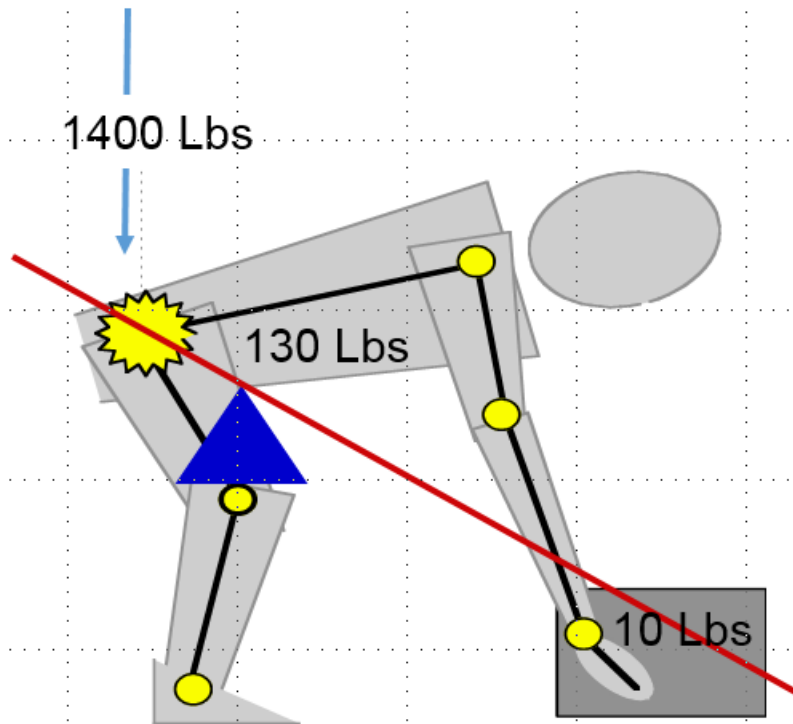
- **Body Composition :**

- Creeping obesity: losing muscle mass and gaining body fat: weight stability
- Inactive body mass increases the weight of every lift
- Inactive body mass increases stress on spine with every lift
- Increased abdominal adiposity can decrease flexibility of the spine
- Increased body weight inversely related to aerobic fitness
- Increased body weight inversely related to balance

When you add in the 105 pounds of the average human upper torso, lifting a 10 pound object puts 1,150 pounds of pressure on the human back.



If you were 25 pounds overweight, it would put an additional 250 pounds of pressure on your back every time you bend over.





WELLPATH'S HEALTHY BACK CHALLENGE

Risk factors

- **Occupational risk factors:**

- Heavy lifting, pushing, or pulling (some involves twisting, turning or vibrating)
- Repetitious tasks – time-dependent tasks
- Inactive jobs – long periods of time in any posture
- Poorly designed workstations
- Moving weight away from the midline of the body
- Dress codes not specific to tasks
- Lack of a worksite wellness program with a Healthy Back Challenge



WELLPATH'S HEALTHY BACK CHALLENGE

“Give me a lever long enough, and a fulcrum on which to place it, and I shall move the world”

- Archimedes





WELLPATH'S HEALTHY BACK CHALLENGE

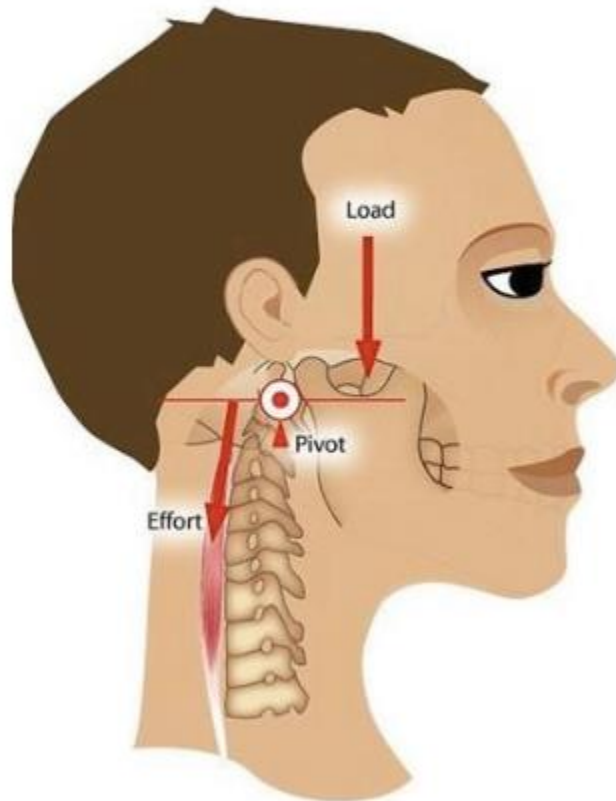
Levers can be used to magnify force applied.
In our bodies, bones act as lever arms, joints as pivots and fulcrums, and muscles and objects provide force.

- Bones act as lever arms
- Joints act as pivots and fulcrums
- Load forces include bodyweight + object
- Levers give us a strength advantage or movement advantage
 - Not both simultaneously



WELLPATH'S HEALTHY BACK CHALLENGE

Class 1 lever – nod your head

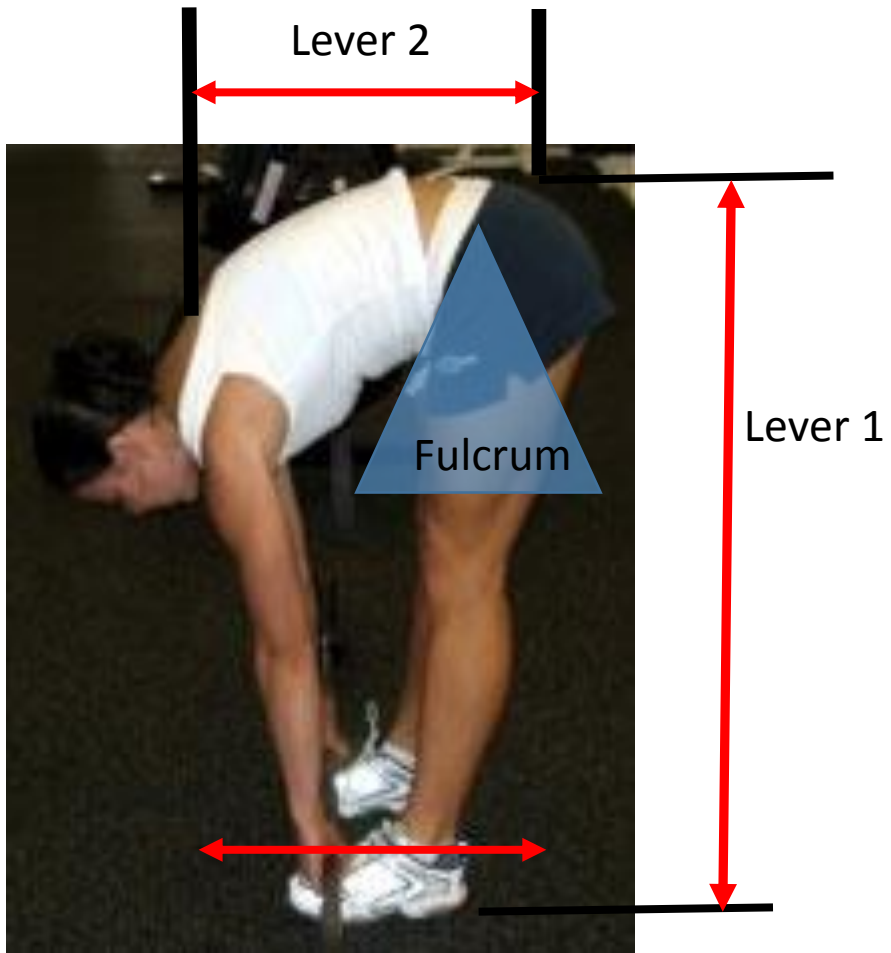


Class 2 lever – stand on toes



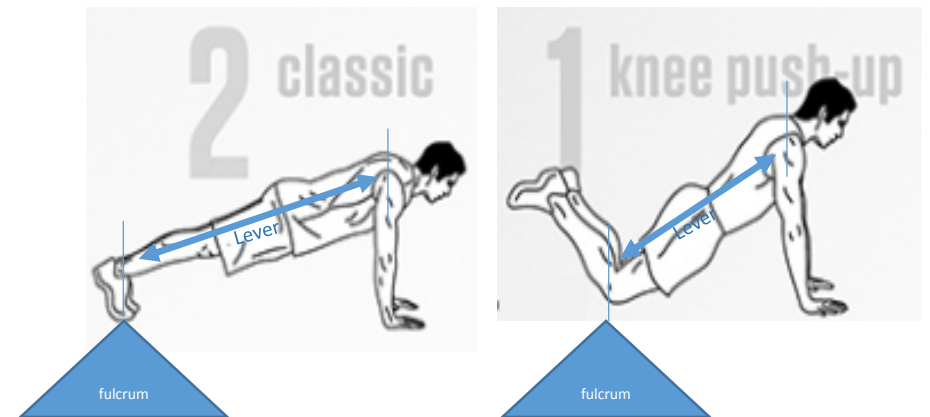
Class 3 lever – bend your arm



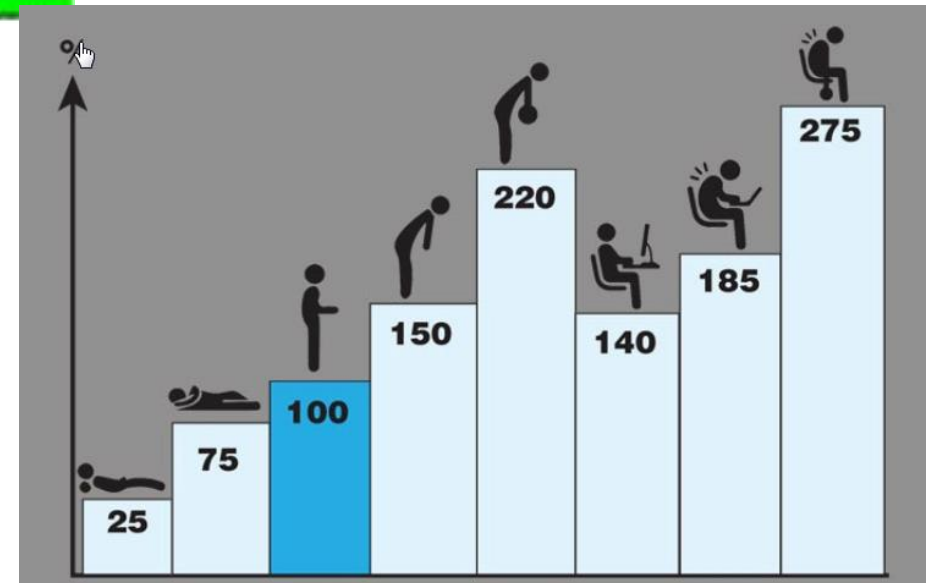
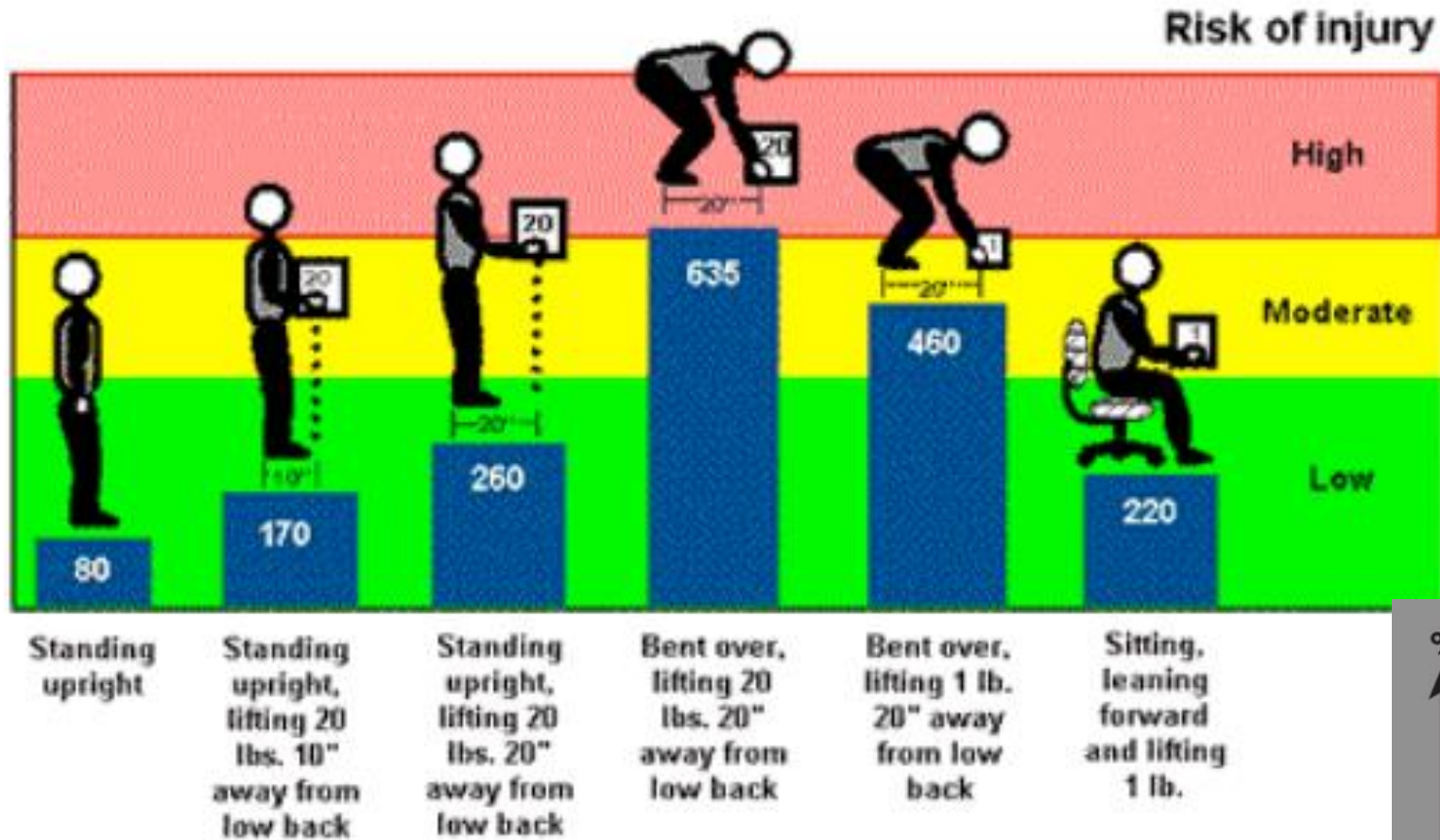


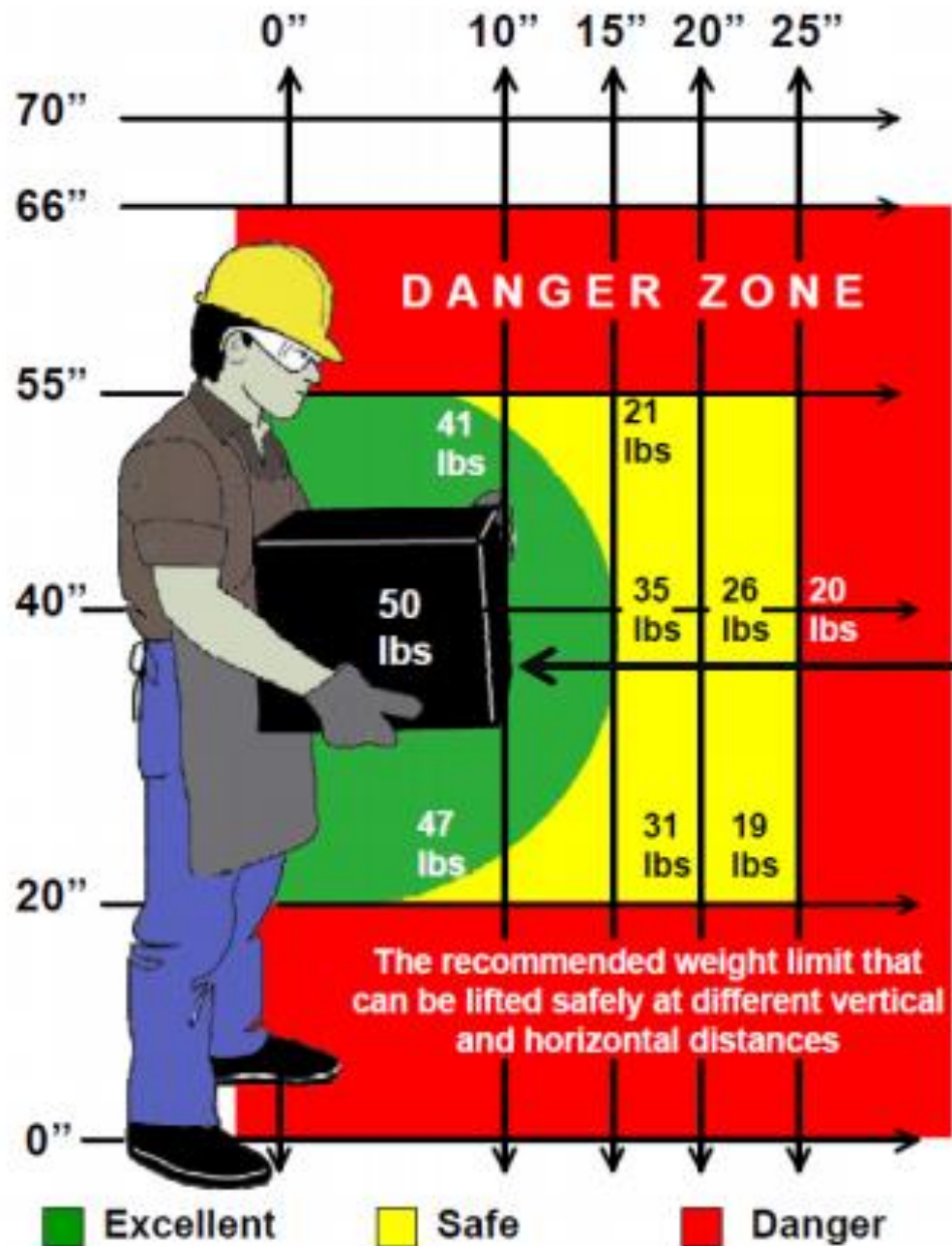
Shorten lever 1: Bend knees.

Shorten lever 2: Lower hips, head up and weight close to the body.



Pounds of compressive force on lower back







WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

PROPER WORKSTATION DESIGN


ERGONOMICS

• SELF-ASSESSMENT

- DO THESE ASSESSMENTS ON YOUR OWN WITH A PARTNER.

THIS WEEK'S QUIZ: **ERGONOMICS**

- REGISTER FOR HELP WITH WORKSTATION ASSESSMENTS



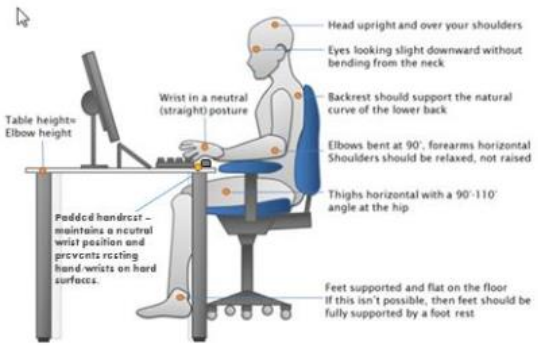
WELLPATH'S HEALTHY BACK CHALLENGE


Workstation Ergonomics Self-Assessment

Name: _____ Date: _____

Hours on computer per day: _____

A well designed workstation can help to reduce the risk of discomfort, pain and injury. Setting up your workstation properly encourages good posture and minimizes risk of discomfort and injury.





Vehicle Ergonomics

Prolonged periods of sitting can place heavy demands on our posture, particularly when sitting in a vehicle due to added effects of movement and vibration on the body. Being comfortable and well positioned in a vehicle aims to reduce driver fatigue and the development of musculoskeletal disorders.

It is imperative that everyone using a vehicle for work observes adequate ergonomic requirements to minimize the risk of injury.

1. Seat Height

2. Raise the seat to ensure the driver has maximum vision of the road.

3. Ensure there is adequate clearance from the roof

4. Back Rest

Adjust the backrest so it provides continued support along the length of the back. Shoulders slightly behind the hips.

2. Lower Limb Position

Knees should be bent, in order to comfortably operate the accelerator/clutch and break. The steering wheel should not come into contact with the top of the legs.

5. Lumbar Support


The lumbar support whether adjustable or not, should provide comfort with no pressure points or gaps between the spine and car seat. A S-shape spine is a safe spine.

3. Seat Pan

Thighs supported along the length of the cushion. Avoid pressure behind the knees.

6. Steering Wheel

- All objects and controls should be in easy reach to prevent unnecessary reaching.
- Elbows and shoulders should be in a relaxed position with hands positioned below shoulder level.
- Check for clearance of thighs and knees. (Allow 2-3 cm.)
- Ensure display panel is in full view and not obstructed.
- A good test is to put your arms straight in front (above the top of the steering wheel), the top of the wheel should sit at approximately wrist level.



7. Headrest

The neck should be in a neutral position, with the headrest positioned centrally behind the head.

8. Mirrors

Adjust the rear view and side mirrors to ensure adequate vision of surrounding areas.

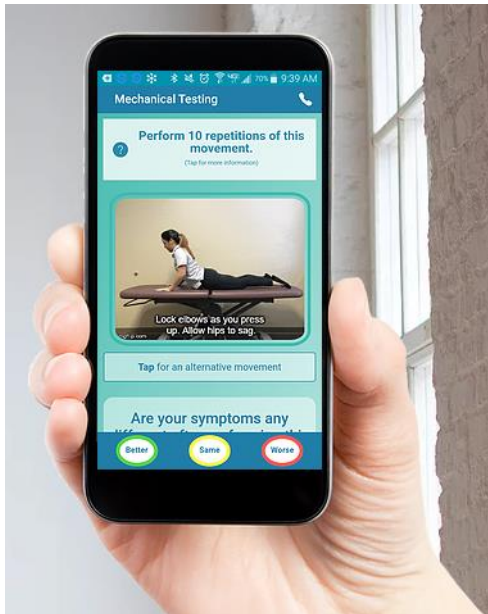


WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

RECOMMENDED METHOD: JOINTSTRONG™ APP



- ASSESSMENTS: PREVENTION VS. TREATMENT
- BASELINES
- EXERCISE
- COACHING (IN ADDITION TO WP COACHES)



WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

ALTERNATIVE METHOD: WWW.WELLPATH.INFO/CHALLENGES

- [BUILDING YOUR BETTER BACK PROGRAM](#)
- [SETTING YOUR GENERAL SYMPTOM AND FUNCTIONAL BASELINES](#)
- [SETTING YOUR SPECIFIC \(EXERCISE\) SYMPTOM AND FUNCTIONAL BASELINES](#)
- THERE ARE LINKS TO A SCADRILLION EXERCISES TOWARDS THE BOTTOM OF WWW.WELLPATH.INFO/CHALLENGES FROM WHICH TO CHOOSE.



WELLPATH'S HEALTHY BACK CHALLENGE



Tip: Never Do Twisting Sit-Ups

Stop it. You're just asking for trouble. Here's why.

by Clay Hyght, DC | 05/17/16



Tags: Tips

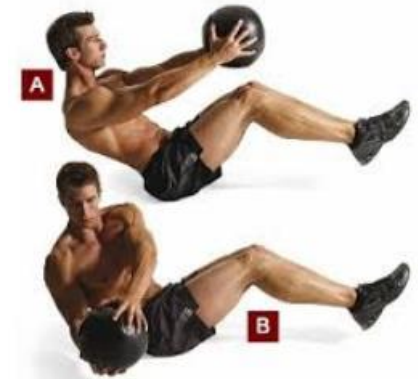
Many people do twisting sit-ups or crunches to target both the rectus abdominus (abs) and the obliques at the same time. Killing two birds with one stone? Makes perfect sense, but there's a problem.

When you do a sit-up – or a full crunch where your lower back doesn't stay flat on the ground – your lumbar spine rounds forward, which is called flexion. The problem is, spinal flexion puts a lot of pressure on the intervertebral discs. But there's one specific motion that's far more dangerous to discs than flexion: flexion combined with rotation. Unfortunately, that's the exact motion you're doing when you do sit-ups with a twist.

Flexion with rotation pushes the nucleus pulposus – the jellylike center – of the disc posterolateral (back and to the side), which is precisely where discs tend to herniate. Unless you actually want a herniated disc – and experience the numbness, tingling, and excruciating pain that goes with it – avoid sit-ups with a twist, or any spinal flexion combined with rotation.

THERE ARE LINKS TO A SCADRILLION EXERCISES TOWARDS THE BOTTOM OF WWW.WELLPATH.INFO/CHALLENGES FROM WHICH TO CHOOSE.

- AVOID CONTRAINDICATED EXERCISES (NOT FOR EVERYONE – NOT FOR YOU.)
- USE SYSTEM TO VET THE EXERCISES TO INCLUDE IN YOUR HEALTHY BACK EXERCISE ROUTINE.





WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

ALTERNATIVE METHOD: WWW.WELLPATH.INFO/CHALLENGES

- SETTING YOUR GENERAL SYMPTOM AND FUNCTIONAL BASELINES

← Symptom Behavior

Are your symptoms (pain, numbness, or tingling) constant or "on and off"?

Constant

On and off

Unsure

← BACK NEXT →

← Pain and Function

Please rate your **CURRENT** pain and function level for **THIS** condition.

Pain: 4/10

Function: 64 /100% →

← BACK NEXT →

WELLPATH'S HEALTHY BACK PROGRAM

BUILDING YOUR BACK PROGRAM
(YOU CAN USE THIS FORM OR THE JOINTSTRONG APP)

GENERAL SYMPTOM AND FUNCTIONAL BASELINES:

SYMPTOM BASELINE: IF YOU HAVE PAIN, NUMBNESS, STIFFNESS, BURNING OR TINGLING NOW, CIRCLE THE LOCATION(S) ON THE PICTURE ABOVE. IF THE PAIN RADIATES DRAW AN ARROW FROM WHERE IT STARTS TO WHERE IT ENDS.

RATE YOUR PAIN IN THAT AREA:

0 1 2 3 4 5 6 7 8 9 10

No Pain Mild Moderate Severe Very Severe Worst Pain Possible

0 1-3 4-6 7-9 10

FUNCTIONAL BASELINE: IS THERE A MOTION OR ACTIVITY WHICH YOU CAN **NOT** DO, OR ARE LIMITED IN YOUR ABILITY TO DO, BECAUSE OF SYMPTOMS OR OTHER LIMITATIONS RELATED TO YOUR BACK? IF SO WRITE THE ACTIVITY DOWN BELOW:

RATE THE LEVEL OF LIMITATIONS: NO LIMITATIONS, MILD LIMITATIONS, MODERATE LIMITATIONS, SEVERE LIMITATIONS





WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

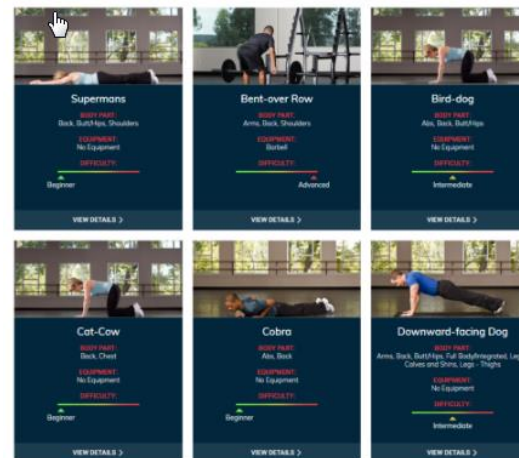
HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

ALTERNATIVE METHOD: WWW.WELLPATH.INFO/CHALLENGES

- THERE ARE LINKS TO A SCADRILLION EXERCISES TOWARDS THE BOTTOM OF WWW.WELLPATH.INFO/CHALLENGES FROM WHICH TO CHOOSE.

3. Stability Ball Back Extension

This exercise will provide flexibility and strengthen to the **muscles** of the back and core. To perform this exercise simply lie prone (on your stomach) on a Stability Ball with your toes firmly planted on the floor for balance. With your hands across your chest or at your ears, raise your chest off the ball so you are hyperextending your spine. slowly return your chest to the ball. Rep.



Click on picture to visit library


Lower Back Stability Ball Exercises

[Back To Full Exercise Library](#)

Now Viewing: [Stability Ball](#) [Lower Back](#)



Click on picture to visit library



Back Extension

Starting Position

Lie facedown, legs hip-distance apart and extended straight, arms at sides with palms facing down, head and neck in a neutral position.

Action

EXHALE: Lift the upper body (chest, shoulders) off of the ground, "crunching" towards the hips.

INHALE: Slowly lower with control to start to complete one rep.

Special Instructions

This is a very small movement-- don't move further than you can naturally and easily. There should be no movement from your hips to your toes. If you feel discomfort in the lower back, widen the distance between the legs and/or decrease how high you lift.

Muscles Worked: Lower back

SPARKPEOPLE



WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

ALTERNATIVE METHOD: WWW.WELLPATH.INFO/CHALLENGES

- CHOOSE AN EXERCISE AND [SET YOUR SPECIFIC \(EXERCISE\) SYMPTOM AND FUNCTIONAL BASELINES](#)



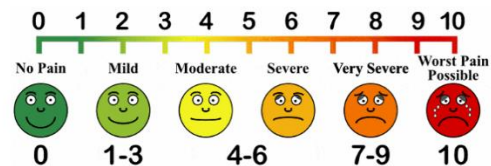
SPECIFIC SYMPTOM AND FUNCTIONAL BASELINES:

CHOOSE AN EXERCISE FROM THE LIBRARY FOUND IN THE RESOURCES (EXERCISE) AREA OF WWW.WELLPATH.INFO/CHALLENGES. FOR THIS ACTIVITY ONLY YOU WILL CREATE A SYMPTOMS AND FUNCTIONAL BASELINE. YOU WILL USE THESE BASELINES TO TEST IF THE EXERCISE IS RIGHT FOR YOU.

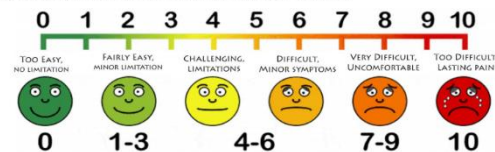
BASELINE ACTIVITY (EXERCISE 1) CHOOSE AN EXERCISE AND WRITE DOWN THE NAME BELOW:

NOTES (MAKE ANY NOTES HELPFUL TO PERFORM THE EXERCISE CORRECTLY):

NOW PERFORM THE EXERCISE AND THEN RATE IF THE EXERCISE CAUSES ANY SYMPTOMS SUCH AS PAIN, NUMBNESS, STIFFNESS, BURNING, TINGLING, OR FATIGUE.



RATE THE DIFFICULTY YOU FEEL WHEN DOING THIS EXERCISE:



EACH TIME YOU PERFORM THE EXERCISE COMPARE THE EXPERIENCE WITH THE BASELINES YOU SET THE FIRST TIME YOU PERFORMED THE EXERCISE.

COMPARED TO THE FIRST TIME YOU DID THE EXERCISE, ARE YOUR **SYMPTOMS**:

BETTER? **SAME?** **WORSE?**

COMPARED TO THE FIRST TIME YOU DID THE EXERCISE, WOULD YOU SAY YOUR PERFORMANCE OR **FUNCTION** IS:

BETTER? **SAME?** **WORSE?**

IF THIS EXERCISE IS MAKING YOUR SYMPTOMS FEEL BETTER OR THE SAME AND IF YOU ARE ABLE TO DO THIS EXERCISE BETTER (MAYBE YOU CAN DO MORE REPS AND SETS) AFTER YOU DO IT FOR 3 – 6 TIMES, THEN KEEP THIS EXERCISE AS PART OF YOUR NEW HEALTHY BACK ROUTINE. IF THE EXERCISE IS NOT HELPING OR MAKING YOUR SYMPTOMS OR FUNCTION WORSE, STOP DOING IT AND TRY A NEW EXERCISE.

START A NEW SPECIFIC SYMPTOM AND FUNCTION BASELINE LOG WHEN YOU AND REPEAT THIS PROCESS WHEN YOU START YOUR NEXT EXERCISE.

THE GOAL IS TO HAVE 8 – 10 EXERCISE THAT YOU CAN DO IN UNDER 20 MINUTES THAT YOU HAVE PROVEN WILL HELP YOU TO KEEP YOUR BACK HEALTHY.

Back Extension

Starting Position

Lie facedown, legs hip-distance apart and extended straight, arms at sides with palms facing down, head and neck in a neutral position.

Action

EXHALE: Lift the upper body (chest, shoulders) off of the ground, "crunching" towards the hips.

INHALE: Slowly lower with control to start to complete one rep.

Special Instructions

This is a very small movement-- don't move further than you can naturally and easily. There should be no movement from your hips to your toes. If you feel discomfort in the lower back, widen the distance between the legs and/or decrease how high you lift.

Muscles Worked: Lower back





WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

HEALTHY BACK EXERCISE ROUTINE (INDIVIDUALIZED)

ALTERNATIVE METHOD: WWW.WELLPATH.INFO/CHALLENGES

- CHOOSE AN EXERCISE AND [SET YOUR SPECIFIC \(EXERCISE\) SYMPTOM AND FUNCTIONAL BASELINES](#)
 - BUILD YOUR ROUTINE OVER WEEKS AND INCLUDE EXERCISES FOR:
 - MUSCULAR ENDURANCE
 - FLEXIBILITY
 - AEROBIC EXERCISE (ESPECIALLY WALKING)
 - MUSCULAR STRENGTH

CONSIDER YOUR ASSESSMENT RESULTS – CONSIDER USING A WELLPATH COACH



WELLPATH'S HEALTHY BACK CHALLENGE

WHAT CAN YOU DO ABOUT IT?

ACUTE TREATMENT PROTOCOL

- WHAT "SETS YOUR BACK OFF" – "HIGH-RISK ACTIVITIES?"
- WHAT ARE YOUR COMMON SYMPTOMS?
- WHAT IS YOUR TREATMENT PROTOCOL?
 - WORK PROTOCOL OUT WITH ANY HEALTHCARE TEAMMATES
 - ANALGESICS
 - ANTI-INFLAMMATORIES
 - ICE
 - MOVEMENTS/EXERCISES
 - REST (WHAT KIND, HOW MUCH?)



WELLPATH'S HEALTHY BACK CHALLENGE

OPEN ENROLLMENT – NOT VERY FAR AWAY



BENEFITS OVERVIEW

Salt River Pima-Maricopa Indian Community is proud to offer a comprehensive benefits package to eligible employees. The complete benefits package is briefly summarized in this booklet. Please refer to the Summary Plan Description for more detailed information about each of these programs.

You share the costs of some benefits (medical and dental), and SRP-MIC provides other benefits at no cost to you (life, accidental death & dismemberment). In addition, there are voluntary benefits with reasonable group rates that you can purchase through Salt River Pima-Maricopa Indian Community payroll deductions.

Benefit Plans Offered

- Medical
- Dental
- Vision
- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- Life Insurance
- Accidental Death & Dismemberment (AD&D) Insurance
- Voluntary Life and AD&D Insurance
- Whole Life Insurance
- Short-Term Disability Insurance
- Long-Term Disability Insurance
- Employee Assistance Program
- Healthcare Bluebook Price Transparency Tool
- Prescription Drug Benefits
- ActiveCare Diabetes Management Program
- Wellness Program (WellPath)
- IMC Musculoskeletal Program



Insurance is risk-sharing





GREAT NEWS...AGAIN!

2017 No Increase to Employee Rates!

Medical Plan Employee Deduction Rates						
Level of Coverage	LOW DEDUCTIBLE PLAN		MID-DEDUCTIBLE PLAN		HDP WITH HSA*	
	Per Month	Per Pay Check	Per Month	Per Pay Check	Per Month	Per Pay Check
Employee Only	\$149.16	\$74.58	\$78.37	\$39.19	\$25.00	\$12.50
Employee + Spouse	\$366.29	\$183.15	\$191.25	\$95.63	\$55.06	\$27.53
Employee + One Child	\$204.89	\$102.45	\$106.45	\$53.23	\$31.11	\$15.56
Employee + Two Children	\$313.33	\$156.67	\$162.76	\$81.38	\$46.01	\$23.01
Employee + Family or Three or more Children	\$522.11	\$261.06	\$272.46	\$136.23	\$76.99	\$38.50

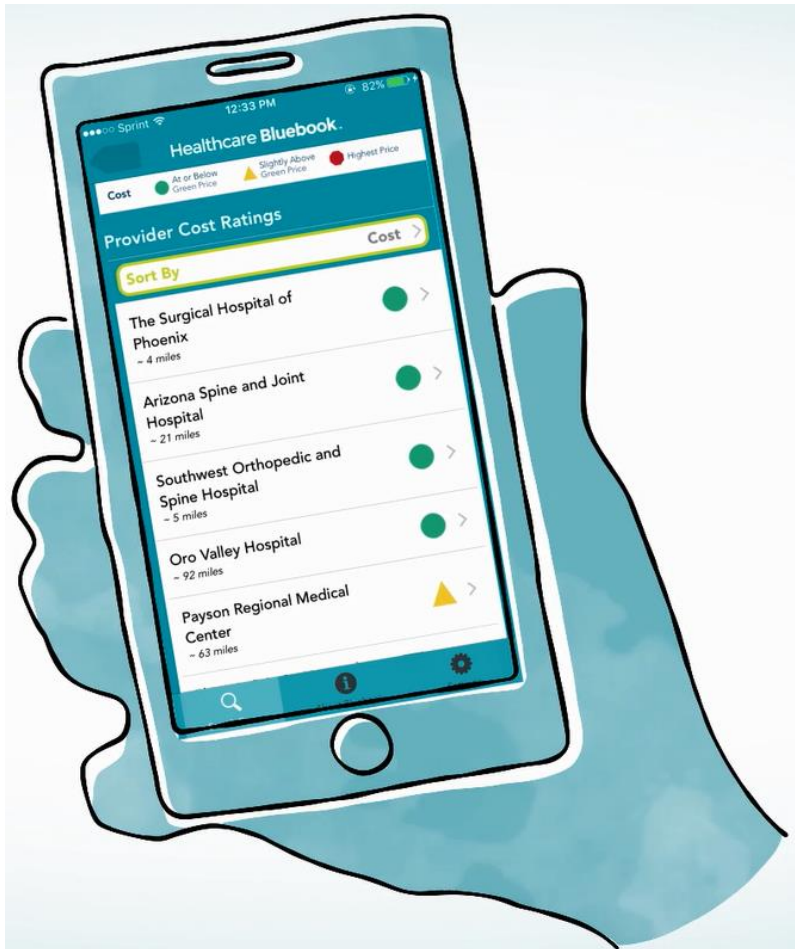
** Depending on your level of coverage, your employer will deposit \$750 (Employee Only) or \$1,500 (all other levels) into your HSA. 50% will be deposited in early January 2017 and the remaining 50% on July 1, 2017.*

Monthly contribution X 12 = annual contribution to the health plan. This is your initial healthcare expenses each year.

In the crazy conversation scenario the person in the LDP who doesn't spend \$ on healthcare has \$1,790 in premiums annually. The \$500 deductible represents 28% of his costs. If he were to elect the HDP with HSA, his annual premiums would be \$300 (savings of \$1,490) but SRP-MIC contributes \$750 in an HSA. So that means if this person really doesn't incur any other healthcare expenses than the premium in a given year, he/she would end up \$450 in positive income. (Same prevention benefits)



	LOW DEDUCTIBLE PLAN		MID-DEDUCTIBLE PLAN		HDP WITH HSA	
	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Annual Deductible	\$500/person	\$1,000/person	\$750/person	\$1,500/person	\$1,500/person \$3,000/family ²	\$3,000/person \$6,000/family
Wellness*	100%	70% after deductible	100%	70% after deductible	100%	70% after deductible



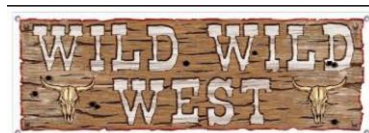
WHAT DOES IT MEAN "IN-NETWORK?" "CONTRACTED PROVIDER?" BALANCE BILL?

2 – POTS OF MONEY

DON'T ASK "DO YOU TAKE MY INSURANCE?" WE HAVE GREAT OON BENEFITS. ASK "ARE YOU A BC/BS PROVIDER?"

WE HAVE FINANCIAL INCENTIVE TO STAY IN NETWORK. WHY?

SMART CONSUMERS STAY IN NETWORK AND SHOP IN NETWORK.



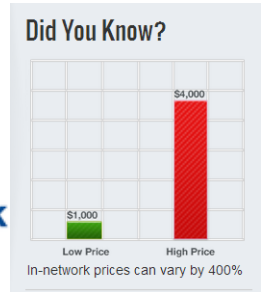


Being a Wise Healthcare Consumer

- **Use good providers in-network**
- **Don't be afraid to ask for prices and compare**
 - **For example MRI and CT Scans wide cost variance**
 - **Outpatient lab services**
- **Best diagnostic testing?**
 - **Sometimes an X-ray isn't going to tell you anything**
- **Use (web) tools: Pharmacy (<https://magellanrx.com>), Plan Admin (www.myameriben.com), symptom checkers (<https://symptomsbeta.webmd.com/#/info>), Apps, EMR, Self-care manual**



Healthcare Bluebook





Being a Wise Healthcare Consumer

- **Relationship with PCP**
 - **Routine medical check-ups**
 - **Preventive/Wellness screenings and services**
- **Relationship with a dentist**
 - **Regular exams and cleanings**
- **Appropriate place for care using self-care guides and symptom checkers. (ED vs. UC vs. self-care)**
- **Choose the right healthcare facility**
 - **Quality, network, MDs, Healthcare Bluebook, etc.**



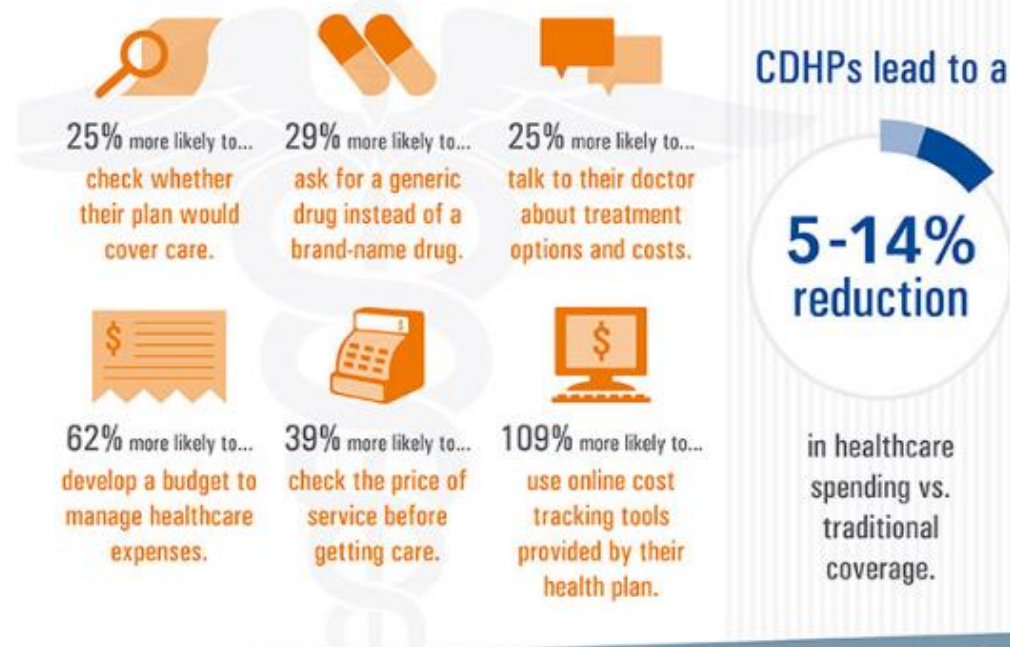
Being a Wise Healthcare Consumer

- **Be a good Historian**
 - **Keep records**
 - **Know history**
- **Scrutinize medical bills and EOBs**
 - **Errors in coding/adjudicating**
 - **Errors in billing** (Have you ever checked your receipt at the grocery store or a restaurant?)
- **Use a health savings account or flexible medical savings account.**



LEADS TO MORE COST-CONSCIOUS HEALTHCARE CONSUMPTION...

Relative to those enrolled in traditional coverage, CDHP participants are:



...AND HIGHER DEGREES OF OVERALL HEALTHCARE ENGAGEMENT

Relative to those enrolled in traditional coverage, CDHP participants are:





- **Our plan helps.....** *“Help us help you!”*



Employee Assistance Program (EAP)

- Up to 5 free counseling sessions per person per occurrence.
- Professional, confidential information, support, short-term counseling and referral (at no cost) to help individuals cope with personal problems that impact their home and work life. EAP counselors can help you with stress, marriage, family, work-related problems, substance abuse (alcohol and drug treatment), crisis intervention along with financial and legal problems.

SCHEDULE OF MEDICAL BENEFITS*					
This chart explains the benefits payable by the Plan. The Deductible applies to all benefits except where noted. See also the Medical Plan Exclusions and Definitions chapters of this document for important information. *Benefits are provided subject to certain limitations and conditions. Not all members have access to all plan options or services. Please refer to the Government Questions, Important Information and Government Employees' Program on an separate basis. The Plans will be coordinated to avoid duplication of benefits or loss of coverage as may be required by the establishment of separate plans under the Pension Protection Act (PPA).					
Deductible: Out-of-Network participants must pay according to the Allowed Charge as defined in the Definitions chapter and meet in balance billing to the state.					
Benefit Description	Explanations and Limitations	Low Deductible Plan PPO In-Network	Mid Deductible Plan PPO In-Network	High Deductible Plan HMO In-Network	High Deductible Plan KNO PPO Out-Network
<p>Integrated Mechanical Care (IMC) Orthopedic Specialists Program</p> <ul style="list-style-type: none"> • IMC is a care coordination firm and network of orthopedic specialists who can rapidly diagnose and manage most back, neck and joint pain without unnecessary surgery, MRIs or drugs. IMC also guides participants through self-care and provides support to manage chronic conditions. • This program is dedicated to helping relief injury, resolve pain and restore function to troubling, painful back, neck or joint conditions. For 90% of patients, troubling orthopedic conditions can be resolved through this evidence-based, non-invasive, conservative care. • SPRMPC offers plan participants access to IMC through the self-care mobile app JointSense, Walksense, and a nearby clinic that will be coming soon. • Contact IMC at 1-855-793-0340 to learn more and find the IMC location nearest you. 	<ul style="list-style-type: none"> • IMC can help you suffer from any of the following musculoskeletal conditions: <ul style="list-style-type: none"> o Lower back and neck pain including migraines o Shoulder or arms pain o Tennis elbow o Carpal tunnel or other wrist or hand pain o Bursitis, osteoarthritis or other hip pain o Knee pain o Foot pain including plantar fasciitis • Copayments and Deductibles: Care coordination assistance, self-care guidance and the JointSense/Walksense application are available to all eligible plan participants at no cost to the participant. If a participant receives treatment from an IMC-trained clinician, either in person or through telemedicine, there may be a copay if the participant is on the High Deductible Plan. • This is both a deconcentration management type of program (no cost to HSA participant) and a disease management program (HSA participant pay for visit) 	<p>In person Treatment: No Cost</p> <p>Telehealth Treatment: No Cost</p>	<p>In person Treatment: \$100 cost (applied to deductible and covers all visits for up to 3 months)</p> <p>Telehealth Treatment: \$50 cost (applied to deductible and covers all visits for up to 3 months)</p>	<p>In person Treatment: \$100 cost (applied to deductible and covers all visits for up to 3 months)</p> <p>Telehealth Treatment: \$50 cost (applied to deductible and covers all visits for up to 3 months)</p>	<p>KNO PPO Out-Network</p>

Diabetes Care Management Program

- A program for participants who have been diagnosed with diabetes and are interested in assistance managing their diabetic condition. Participation in the free ActiveCare Diabetes Management Program is voluntary.

Diabetics who do not want to participate in this free program are to call ActiveCare to opt out. If you opt out of this free program, you may obtain your diabetes supplies from the Plan's Retail or Mail Order program for the usual plan cost-sharing. See the Drug row of the Schedule of Medical Benefits for further details on cost-sharing.

The Plan will provide **FREE** diabetes testing supplies and related services only through the ActiveCare Diabetes Program.

Participants in the ActiveCare Diabetes Program will receive the following **FREE** diabetes testing supplies:

- ✓ Cellular Glucose meter
- ✓ Diabetes testing strips
- ✓ Control solution
- ✓ Alcohol Swabs, Lancets & Lancing device (s)

Supplies are automatically shipped directly to you free of charge.

24/7 Assistance and Support: Glucose readings are provided to ActiveCare's care specialists who provide guidance and support to participants with uncontrolled glucose levels to better manage those blood sugar peaks to bring their diabetes back under control.

Active Care claims will be paid at 100% using the in-network level of benefit, with allowed charges based upon Exhibit A, Schedule of Fees, from the contract between ActiveCare and SRP-MIC.

WellPath Wellness Program

- A broad-spectrum wellness program providing support and resources for participants to improve their health, quality of life and longevity.
- Includes incentives for employees who are regularly active, set and achieve health-related goals, *Know their Numbers* and *Total Wellness Score* and participant in endorsed WellPath activities at work, home and online.

WellPath
Website: www.wellpath.info
Email Questions to: wellness@srpmic-nsn.gov

ActiveCare Diabetes Management Program

Phone: 1-877-862-5553

SRP-MIC'S SELF-FUNDED HEALTHCARE COMMUNITY

“We are in this together.” - Me

INSURANCE IS RISK-POOLING. WE PAY MONEY INTO
A PLAN, TO COVER OUR COSTS FOR HEALTH CARE.

- WE CAN BE PROUD THAT WE ARE COVERING THOSE WHO BEFALL ILLNESS OR INJURY.
- WE INVEST IN HEALTH & WELLNESS, NOT JUST INFIRMARY.
- AS PARTICIPANTS IN THE HEALTH PLAN “COMMUNITY” WE WANT TO BE WISE CONSUMERS AND GOOD STEWARDS OF THE MONEY WE INVEST TO PROTECT ONE ANOTHER.



[Help](#) | [Bookmark](#) | [Rewards](#)

Find the Green Price

Healthcare Bluebook helps you save money on out-of-pocket medical expenses. Shop for affordable care in your area and save hundreds or even thousands of dollars while making informed decisions about your healthcare.

 Mesa, AZ 85215 (change)



Hospital
▼

Physician
▼

X-ray, Imaging
▼

Labs
▼

Hearing Aids
▼

Healthcare Bluebook

An online tool that enables you to find the best prices for healthcare services you may need. You can shop for care so that you get the most affordable care available in your area, from high quality providers.

Why use a healthcare pricing tool?

- Healthcare costs have doubled in the past 9 years
- In-network prices for most healthcare services can vary up to 400% depending on the provider (A sleep study can cost under \$1,000 or over \$3,500 in the same town)
- You can reduce your healthcare costs by becoming a true healthcare consumer

How does the Healthcare Bluebook work?

- Visit the website and search for services
- Prices are based on your local area
- Compares prices using the "green" light, "red" light method

This FREE service is accessible on the AmeriBen website or by visiting <http://healthcarebluebook.com/cc/srpmic>.

<http://healthcarebluebook.com/cc/srpmic>



INTEGRATED MECHANICAL CARE

THE LEADERS IN HUMAN AND ECONOMIC PERFORMANCE

SCHEDULE OF MEDICAL BENEFITS*

This chart explains the benefits payable by the Plan. The Deductible applies to all benefits except where noted. See also the Medical Plan Exclusions and Definitions chapters of this document for important information. *Except as otherwise expressly noted, all benefits, limitations and in-network, out-of-network provisions apply to the Government Operations, Government Division and Commercial Employees' Plans on an aggregate basis. The Plans will be coordinated to avoid duplication of benefits or loss of coverage as a result of the establishment of separate plans under the Pension Protection Act (PPA).

IMPORTANT: Out-of-Network providers are paid according to the Allowed Charge as defined in the Definitions chapter and could result in balance billing to you.

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Integrated Mechanical Care (IMC) Orthopedic Specialists Program</u> <ul style="list-style-type: none"> IMC is a care coordination firm and network of orthopedic specialists who can rapidly diagnose and resolve most back, neck and joint pain without unnecessary surgery, MRIs or drugs. IMC also guides participants through self-care and provides support to manage their conditions. This program is dedicated to helping repair injury, resolve pain and restore function to troubling, painful back, neck or joint conditions. For 92% of patients, troubling orthopedic conditions can be resolved through this evidence-based, non-invasive, conservative care. SRPMIC offers plan participants access to IMC through the self-care mobile app JointStrong, telehealth, and a near-site clinic that will be coming soon. Contact IMC at 1-855-293-0340 to learn more and find the IMC location nearest you. 	<ul style="list-style-type: none"> IMC can help if you suffer from any of the following musculoskeletal conditions: <ul style="list-style-type: none"> Lower back or neck pain including migraines Shoulder or arm pain Tennis elbow Carpal tunnel or other wrist or hand pain Bursitis, osteoarthritis or other hip pain Knee pain Foot pain including plantar fasciitis Copayments and Deductibles: Care coordination assistance, self-care guidance and the Jointstrong mobile application are available to all eligible plan participants at no cost to the participant. If a participant receives treatment from an IMC-trained clinician, either in person or through telemedicine, there may be a cost if the participant is on the High Deductible Plan. This is both a disease/condition management type of program (no cost to HSA participant) and a clinician treatment program (HSA participant pay for visit) 	In person treatment: No Cost		In person treatment: No Cost		In person treatment: \$100 cost (applied to deductible and covers all visits for a particular body region for up to 3 months)	
		Telehealth Treatment: No Cost		Telehealth Treatment: No Cost		Telehealth Treatment: \$50 cost (applied to deductible and covers all visits for a particular body region for up to 3 months)	

Information Needed	Whom to Contact
Integrated Mechanical Care (IMC) Orthopedic Specialists Program <ul style="list-style-type: none"> IMC is a care coordination firm and network of orthopedic specialists who can rapidly diagnose and resolve most back, neck and joint pain without unnecessary surgery, MRIs or drugs. IMC also guides participants through self-care and provides support to manage their conditions. 	IMC 1-855-293-0340



Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Integrated Mechanical Care (IMC) Orthopedic Specialists Program</u> <ul style="list-style-type: none"> • IMC is a care coordination firm and network of orthopedic specialists who can rapidly diagnose and resolve most back, neck and joint pain without unnecessary surgery, MRIs or drugs. IMC also guides participants through self-care and provides support to manage their conditions. • This program is dedicated to helping repair injury, resolve pain and restore function to troubling, painful back, neck or joint conditions. For 92% of patients, troubling orthopedic conditions can be resolved through this evidence-based, non-invasive, conservative care. • SRPMC offers plan participants access to IMC through the self-care mobile app JointStrong, telehealth, and a near-site clinic that will be coming soon. • Contact IMC at 1-855-293-0340 to learn more and find the IMC location nearest you. 	<ul style="list-style-type: none"> • IMC can help if you suffer from any of the following musculoskeletal conditions: <ul style="list-style-type: none"> ○ Lower back or neck pain including migraines ○ Shoulder or arm pain ○ Tennis elbow ○ Carpal tunnel or other wrist or hand pain ○ Bursitis, osteoarthritis or other hip pain ○ Knee pain ○ Foot pain including plantar fasciitis • Copayments and Deductibles: Care coordination assistance, self-care guidance and the Jointstrong mobile application are available to all eligible plan participants at no cost to the participant. If a participant receives treatment from an IMC-trained clinician, either in person or through telemedicine, there may be a cost if the participant is on the High Deductible Plan. • This is both a disease/condition management type of program (no cost to HSA participant) and a clinician treatment program (HSA participant pay for visit) 	In person treatment: No Cost		In person treatment: No Cost		In person treatment: \$100 cost (applied to deductible and covers all visits for a particular body region for up to 3 months)	
		Telehealth Treatment: No Cost		Telehealth Treatment: No Cost		Telehealth Treatment: \$50 cost (applied to deductible and covers all visits for a particular body region for up to 3 months)	

Information Needed	Whom to Contact
<p>Integrated Mechanical Care (IMC) Orthopedic Specialists Program</p> <ul style="list-style-type: none"> • IMC is a care coordination firm and network of orthopedic specialists who can rapidly diagnose and resolve most back, neck and joint pain without unnecessary surgery, MRIs or drugs. • IMC also guides participants through self-care and provides support to manage their conditions. 	<p>IMC 1-855-293-0340</p>

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Rehabilitation Services: Occupational, Physical, and Speech Therapy</u> <ul style="list-style-type: none"> Short-term active, progressive rehabilitation services (occupational, physical, or speech therapy) performed by licensed or duly qualified therapists as ordered by a physician. Inpatient rehabilitation services in an acute hospital, rehabilitation unit or facility or skilled nursing facility for short-term, active, progressive rehabilitation services that cannot be provided in an outpatient or home setting. The professional fees for Physicians & Health Care Practitioners who deliver covered services to patients in an inpatient rehabilitation facility are usually billed separately from the facility fee. See the Physician row of this Schedule for payment parameters. All benefits are subject to the limitations and the limited overall maximum Plan benefits shown in the Explanations and Limitations column. 	<ul style="list-style-type: none"> Maintenance rehabilitation and coma stimulation services are not covered. See specific exclusions relating to Rehabilitation Therapies in the Medical Plan Exclusions chapter. Rehabilitation services are covered only when ordered by a physician. Inpatient rehabilitation admission requires precertification. See the Utilization Management chapter for details. Inpatient rehabilitation services are payable up to 60 consecutive days per person per injury or illness. Outpatient rehabilitation services (physical, occupational and speech therapy) are payable up to 60 days per year. Outpatient physical therapy performed in conjunction with spinal manipulation services is subject to the Plan's limitations for spinal manipulation services. Speech therapy is covered if the services are provided by a licensed or duly qualified speech therapist to restore normal speech or to correct dysphagic or swallowing defects and disorders lost due to illness, injury or surgical procedure. Speech therapy for functional purposes, including, but not limited to, stuttering, stammering and conditions of psychoneurotic origin or developmental (learning) speech delays is excluded from coverage. 	<p>Outpatient Physical, Occupational or Speech Therapy: 100% after a \$20 copay per visit, no deductible applies.</p> <p>Inpatient Rehabilitation Admission: 80% after deductible is met.</p>	70% of the Allowed Charge after deductible is met.	<p>Outpatient Physical, Occupational or Speech Therapy: 100% after a \$25 copay per visit, no deductible applies.</p> <p>Inpatient Rehabilitation Admission: 80% after deductible is met.</p>	70% of the Allowed Charge after deductible is met.	80% after deductible is met.	70% of the Allowed Charge after deductible is met.
<u>Chiropractic Services</u> <ul style="list-style-type: none"> All services provided by a Chiropractor are subject to the limitations and annual maximum Plan benefit shown in the Explanations and Limitations column. 	<ul style="list-style-type: none"> Chiropractic services are payable to a maximum of 12 visits per individual per calendar year. 	100% with a \$20 copay per visit, to the benefit maximum, no deductible applies.	70% of the Allowed Charge after deductible is met, to the benefit maximum.	100% with a \$25 copay per visit, to the benefit maximum, no deductible applies.	70% of the Allowed Charge after deductible is met, to the benefit maximum.	80% after deductible is met, to the benefit maximum.	70% of the Allowed Charge after deductible is met, to the benefit maximum.

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
Weight Loss Management <ul style="list-style-type: none"> If a participant is obese and under the supervision of a Physician, the following weight management services are payable by the Plan: <ul style="list-style-type: none"> Physician office visits. Prescription medication for weight loss is payable under the Drug row in this Schedule. Bariatric surgery (Surgical weight management) is payable as noted in the Explanations column to the right. Nutritional counseling for the purpose of weight management is payable when ordered by a Physician and provided by a health care provider. See also in this document, the SRP-MIC Preventive Care Guidelines chart, the row titled "Obesity screening and counseling for adults," for information on screening and intensive behavioral counseling for weight management at no cost when in-network providers are used. 	<ul style="list-style-type: none"> See also the weight management services payable under the Diabetes Education row and the prescription drug benefits under the Drug row of this Schedule. To be eligible for the Bariatric Surgery benefit, individuals must: <ul style="list-style-type: none"> be age 18 or older; and have been covered under this Plan (in the Government operations, government division and/or commercial employees plan) for a minimum of 3 consecutive years; and must be precertified through the utilization management company; and must use network providers. Benefits for a bariatric surgical procedure are payable once per person per lifetime. When Bariatric surgery is a payable benefit under this Plan, the associated professional fees rendered by a non-network provider are payable at the out-of-network level of benefits for Physician and other Health Care Practitioner services. Expenses related to bariatric services rendered by all other out-of-network providers are not payable by this Plan. 	Hospital Facility: 80% after deductible is met. Surgeon Fees: 80% after deductible is met, and after a \$2,000 copay. Other payable weight management services including nutritional counseling : 80% after deductible is met.	No coverage.	Hospital Facility: 80% after deductible is met. Surgeon Fees: 80% after deductible is met, and after a \$2,000 copay. Other payable weight management services including nutritional counseling : 80% after deductible is met.	No coverage.	Hospital Facility: 80% after deductible is met. Surgeon Fees: 80% after deductible is met, and after a \$2,000 copay. Other payable weight management services including nutritional counseling : 80% after deductible is met.	No coverage.

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Dietitian Services</u> <ul style="list-style-type: none"> Benefits are payable for nutritional counseling to assist individuals with their nutritional health and dietary needs. Benefits can be used for assistance with food choices when diagnosed with such diseases as obesity, high blood pressure, cardiac disease, diabetes, high cholesterol, allergies, kidney disease, etc. Services are payable only when performed by a Registered Dietitian. 	<ul style="list-style-type: none"> For services of a Registered Dietitian or licensed or certified Nutritionist, the benefit maximum is 8 visits per person per calendar year. This visit limit does not apply to nutritional counseling services that are medically necessary for the treatment of an individual diagnosed with a mental health condition, such as an eating disorder. Certain Physician prescribed intensive behavioral counseling interventions are payable as a Wellness service in accordance with Health Reform requirements. As a preventive counseling benefit in compliance with Health Reform, the Plan covers the following services: For adults who are overweight or obese and have additional cardiovascular disease (CVD) risk factors to intensive behavioral counseling interventions to promote a healthful diet and physical activity for CVD prevention. For children age 6 years and older with obesity, the Plan covers Physician prescribed intensive behavioral counseling interventions to promote improvement in weight status at the visit frequency recommended by the child's In-Network pediatrician. 	100% deductible does not apply	Not covered	100% deductible does not apply	Not covered	100% deductible does not apply	Not covered

Preventive Service	Recommended Population				PPACA-Recommended Service?	Benefit Description with Age and Frequency Limitations	Type of Expenses You Can Expect to See Generated if the Preventive Service is Performed
	Adult Male	Adult Female	Pregnant Female	Child			
Obesity screening and counseling for adults	X	X		X	Yes	<p>Clinicians to screen all adult patients for obesity. As a preventive counseling benefit in compliance with Health Reform, the Plan covers the following services: For adults (1) with a body mass index of 30 kg/m² or higher, <u>OR</u> (2) who are overweight (defined as a BMI of 25 to 29.9 kg/m²) or obese (defined as a BMI of 30 kg/m² or higher) <u>AND</u> have additional cardiovascular disease (CVD) risk factors, the Plan covers Physician prescribed intensive behavioral counseling interventions.</p> <p>Intensive behavioral counseling interventions means the Plan will consider as medically necessary preventive services, up to a combined limit of 26 individual or group visits per 12-month period by an in-network provider. For children age 6 years and older with obesity, the Plan covers Physician prescribed intensive behavioral counseling interventions to promote improvement in weight status at the visit frequency recommended by the child's in-network pediatrician.</p>	Generally weight/height measurement and weight discussion with a health care provider is done during an office visit. Intensive counseling can be delivered by primary care clinicians or by referral to other specialists, such as nutritionists or dietitians.

Wellness (Preventive) Services for Children and Adults

The wellness/preventive services payable by this Plan are designed to comply with Health Reform regulations and the current recommendations of the United States Preventive Services Task Force (USPSTF), the Health Resources and Services Administration (HRSA), and the Centers for Disease Control and Prevention (CDC). **These websites below (updated periodically) list the Health Reform required preventive services for children and adults (such as immunizations, mammogram, pap smear, sigmoidoscopy and colonoscopy, including polyp removal):** <https://www.healthcare.gov/what-are-my-preventive-care-benefits> with more details at: <http://www.uspreventiveservicestaskforce.org/BrowseRecommendations/Default.aspx?Category=Preventive>. Certain preventive care expenses are payable for all covered females (as listed on the government websites at <http://www.hrsa.gov/womensguidelines/> or <http://www.healthcare.gov/law/about/provisions/services/lists.html>), including but not limited to screening for gestational diabetes, HPV testing starting at age 30, rental of breastfeeding equipment and necessary supplies after delivery, lactation support following delivery). While obstetrical ultrasounds may be part of routine prenatal care, normal radiology cost-sharing applies to ultrasound services.

- When both preventive services and diagnostic or therapeutic services occur at the same visit, you pay the cost share for the diagnostic or therapeutic services but not for the preventive services.
- When a preventive visit turns into a diagnostic or therapeutic service in the same visit, the diagnostic or therapeutic cost share will apply.
- Preventive services are considered for payment when billed under the appropriate preventive service codes (benefit adjudication depends on accurate claim coding by the providers).
- The Plan will use reasonable medical management techniques - such as age, location for service and test frequency - for consideration of payable preventive services.

The Plan pays for two separate categories of wellness services:

- **Category One:** Certain designated **Non-Health Reform** related wellness services are payable at 100%, no deductible from in-network providers, **up to a benefit limit of \$800/person per year**: including EKG, screening lab work, pulmonary testing, and screening x-rays. DEXA scan and Indirect Calorimetry is covered when performed by a qualified allied healthcare professional with indirect supervision of a physician. Exercise tolerance testing and medical nutrition therapy by a Registered Dietitian is payable. **Once the \$800/year amount is reached, the Plan pays 10% of remaining eligible Category One wellness expenses thereafter, without the deductible applied.**
- **Category Two:** The following **Health Reform** related Wellness services are payable at 100%, no deductible from in-network providers, and **not subject to the \$800 annual wellness services maximum noted above:**
 - Annual routine wellness office visit, Well woman office visits, One annual PSA testing, for men age 50 and over, One annual screening mammogram and interpretation of it, regardless of age.
 - Carotid Intima-Media Thickness (CIMT) payable, once every five years. This test is payable for men over age 35 and women over age 40 and those who have any of the following risk factors: family history of coronary artery disease, smoking habit, high blood pressure, high cholesterol, diabetes, obesity, inactivity or an individual who has atypical chest pain.
 - Certain genetic testing and genetic counseling required as a Preventive service, in accordance with Health Reform regulations, is payable without cost-sharing when services are obtained from an in-network provider (see the Preventive Care Guidelines chart starting on page 59).
 - Services not covered under the wellness benefit may be covered under another portion of the medical plan with the appropriate diagnosis codes. Preventive services are payable without regard to gender assigned at birth, or current gender status.

Category One Wellness Services:
100%, no deductible up to \$800/year then Plan pays 10% of any remaining balance.

Required Health Reform Wellness Services and Category Two Wellness Services:
100%, no deductible.

70% after deductible met.

Note:
No coverage for CIMT, immunizations, sigmoidoscopy or colonoscopy.

Category One Wellness Services:
100%, no deductible up to \$800/year then Plan pays 10% of any remaining balance.

Required Health Reform Wellness Services and Category Two Wellness Services:
100%, no deductible.

70% after deductible met.

Note:
No coverage for CIMT, immunizations, sigmoidoscopy or colonoscopy.

Category One Wellness Services:
100%, no deductible up to \$800/year then Plan pays 10% of any remaining balance.

Required Health Reform Wellness Services and Category Two Wellness Services:
100%, no deductible.

70% after deductible met.

Note:
No coverage for CIMT, immunizations, sigmoidoscopy or colonoscopy.

For a more comprehensive list of covered Wellness/Preventive services, see the Preventive Wellness Services Chart on the next page.

<http://www.wellpath.info/bodycomp>

Preventive Service	Recommended Population				PPACA-Recommended Service?	Benefit Description with Age and Frequency Limitations	Type of Expenses You Can Expect to See Generated if the Preventive Service is Performed
	Adult Male	Adult Female	Pregnant Female	Child			
<ul style="list-style-type: none"> *Screening Electrocardiogram (EKG) *Screening lab work that is not recommended by PPACA *Screening Pulmonary testing *Screening x-rays that are not recommended by PPACA Annual PSA lab test for men age 50 and older (prostate cancer screening test) CT of the Heart without contrast with Quantitative Evaluation of Coronary Calcium or a Coronary Artery Calcification Score payable, once every five years. These scans are payable for men over age 35 and women over age 40 and those who have any of the following risk factors: family history of coronary artery disease, smoking habit, high blood pressure, high cholesterol, diabetes, obesity, inactivity or an individual who has atypical chest pain. *Dexa scan and Indirect Calorimetry is covered when performed by a qualified allied healthcare professional with indirect supervision of a physician. *Exercise tolerance testing and medical nutrition therapy by a Registered Dietitian is payable. 	X	X		X	No	<p>SRP-MIC also offers some coverage toward certain non-PPACA recommended testing as noted in the far left column of this row.</p> <p>Services (to the left) with an asterisk * are subject to the plan's \$800 maximum as described in the Wellness row of the Schedule of Medical Benefits.</p>	Various lab, radiology and physician office visit bills.

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Emergency Room & Urgent Care Facility Services</u> <ul style="list-style-type: none">Hospital emergency room (ER) for an "Emergency Services" as that term is defined in this Plan.Use of an urgent care facility.The following include but are not limited to, criteria for acceptance and payment of emergency room claims under this Plan:<ul style="list-style-type: none">Temperature of at least 104° or above.Sudden onset of chest pain.Hemorrhage or excessive bleeding, for any reason.Acute sudden onset of abdominal pain or severe sudden onset pain in any site.Respiratory distress (difficulty breathing).Acute allergic reaction.Trauma from any source.Possible broken bones (fractures).Seizures, shock, syncope (fainting).Laceration needing stitches, puncture wounds or animal bites.Head trauma or injury.Ingestion of toxic substances/medications.Any life-threatening situation.	<ul style="list-style-type: none">The professional fees for Physicians & Health Care Practitioners who deliver covered services to patients in an emergency room or urgent care facility are usually billed separately from the facility fee. See the Physician row of this Schedule for payment parameters.See also the Ambulance Services section of this chart.Expenses for emergency room services are covered only when those services are for "Emergency Services" as that term is defined in the Definitions chapter of this document.Emergency room visit for non-emergency care is not covered, including but are not limited to, follow-up, removal of stitches, chronic pain or illness with no acute signs or symptoms, routine exams or other routine care.Emergency room services are payable subject to a copayment per visit. Treatment in an emergency room is payable for an emergency/serious medical condition, not routine, non-emergency care.Urgent care facility services (walk-in clinics) are subject to a copayment per visit. Urgent care facilities/clinics in the State of Arizona have extended hours and some are open 24 hours a day. Urgent care clinics provide physician services at times when you are unable to see your own physician.	ER Visit: You pay a \$100 copay per visit, no deductible, then the Plan pays 100% of Allowed charges. Urgent Care Visit: You pay a \$20 copay per visit, no deductible, then the Plan pays 100% of Allowed charges.	ER Visit: You pay a \$100 copay per visit, no deductible, then the Plan pays 100% of Allowed charges. Urgent Care Visit: <i>Within Arizona:</i> You pay a \$20 copay per visit, no deductible, then the Plan pays 100% of Allowed charges. <i>Outside Arizona:</i> 70% of Allowed charges, after deductible met.	ER Visit: You pay a \$100 copay per visit, no deductible, then the Plan pays 100% of Allowed charges. Urgent Care Visit: <i>Within Arizona:</i> You pay a \$25 copay per visit, no deductible, then the Plan pays 100% of Allowed charges. <i>Outside Arizona:</i> 70% of Allowed charges, after deductible met.	ER Visit: 80% of Allowed charges after deductible is met. Urgent Care Visit: 80% of Allowed charges after deductible is met.	ER Visit: 80% of Allowed charges after deductible is met. Urgent Care Visit: 70% of Allowed charges after deductible is met.	

Benefit Description	Explanations and Limitations	Low Deductible Plan		Mid Deductible Plan		High Deductible Plan	
		PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network	PPO In-Network	NON-PPO Out-of-Network
<u>Radiology (X-Ray), Nuclear Medicine and Radiation Therapy Services (Outpatient)</u> <ul style="list-style-type: none"> Radiology refers to the branch of medicine using x-rays, radiopharmaceuticals (like radioisotopes, intravenous dye or contrast materials), magnetic resonance and ultrasound to create images (pictures) of the body that are used to help in the diagnosis and treatment of disease or injury. Common radiology services include chest x-ray, abdomen/kidney x-ray, spine x-ray, CT/MRI/PET and bone scan, ultrasound, angiography, mammogram, fluoroscopy, and bone densitometry. Technical and professional fees associated with diagnostic and curative services, including radiation therapy. 	<ul style="list-style-type: none"> Covered only when ordered by a physician. Some radiology procedures are covered under the Wellness Programs described in this chart. 	80% after deductible is met.	70% of the Allowed Charge after deductible is met.	80% after deductible is met.	70% of the Allowed Charge after deductible is met.	80% after deductible is met.	70% of the Allowed Charge after deductible is met.

THE COMPLETE HSA GUIDEBOOK

How to Make Health Savings Accounts Work for You

TENTH EDITION

Includes health care reform and tax change updates

Stephen D. Neeleman, M.D.

Flexible Spending Accounts

The SRPMIC contracts with HealthEquity to administer flexible spending accounts (FSA) for all eligible employees. These accounts allow employees to pay for out-of-pocket health care and dependent care expenses with pre-tax dollars. The maximum amount an employee can contribute for 2018 is \$2,600 for the Health Care FSA and \$5,000 for the Dependent Care FSA.

Visit the [Health Equity website Education Center](#) which offers documents, tutorials, calculators and much more to help you understand the sometimes complex and confusing world of health care accounts. Health Equity Member Service is also available 24/7 at 1-877-582-6224.

Health Savings Account

SRPMIC contracts with HealthEquity to administer the Health Savings account (HSA) for all eligible employees who enroll in the High-Deductible Health Plan. This account allows employees to pay for qualified medical expenses with pre-tax dollars. SRPMIC will **contribute** \$750 for Employee Only coverage and \$1,500 for all other tiers of coverage. Contributions will be available for your use once they are deposited into your HSA. 50% of your employer's annual contribution will be made in early January and the other 50% will be distributed on July 1st. In 2018, the employee and employer HSA contributions cannot exceed the IRS maximum contribution amounts of \$3,400 for Employee Only coverage, or \$6,900 for Family coverage. If you are over age 55, you can also set aside an additional \$1,000 as a "catch-up" contribution.

Visit the [Health Equity website Education Center](#) which offers documents, tutorials, calculators and much more to help you understand the sometimes complex and confusing world of health care accounts. Health Equity Member Service is also available 24/7 at 1-877-582-6224.



2018 HSA Payroll Deduction Form



HSA Guidebook 10th Edition



WELLPATH'S HEALTHY BACK CHALLENGE

	LOW DEDUCTIBLE PLAN		MID-DEDUCTIBLE PLAN		HIGH DEDUCTIBLE PLAN	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
CHIROPRACTIC SERVICES 12 VISIT ANNUAL MAX	\$ 20 COPAY	30% AFTER DEDUCTIBLE	\$ 25 COPAY	30% AFTER DEDUCTIBLE	20% AFTER DEDUCTIBLE	30% AFTER DEDUCTIBLE
OUTPATIENT PHYSICAL THERAPY 60 DAY ANNUAL MAXIMUM BENEFIT	\$ 20 COPAY	30% AFTER DEDUCTIBLE	\$ 25 COPAY	30% AFTER DEDUCTIBLE	20% AFTER DEDUCTIBLE	30% AFTER DEDUCTIBLE
EMERGENCY ROOM	\$ 100 COPAY		\$ 100 COPAY		20% AFTER DEDUCTIBLE	
URGENT CARE	\$ 20 COPAY	\$ 20 IN AZ/ 30% AFTER DEDUCTIBLE OUTSIDE AA	\$ 25 COPAY	\$ 25 IN AZ/ 30% AFTER DEDUCTIBLE OUTSIDE AA	20% AFTER DEDUCTIBLE	30% AFTER DEDUCTIBLE
PCP OFFICE VISIT	\$ 20 COPAY	30% AFTER DEDUCTIBLE	\$ 25 COPAY	30% AFTER DEDUCTIBLE	20% AFTER DEDUCTIBLE	30% AFTER DEDUCTIBLE



ARE YOU ON THE WELLPATH?

WellPath—Your Wellness Program

In 2017 more employees and dependents participated in WellPath than ever before. More than 2,600 employees & 150 dependents actively participate. WellPath is one of the most valuable employee benefits for you and your dependents who are enrolled in the SRPMIC health plan. Participate any time you want, as much as you want—all employees are eligible.

WellPath consistently places among the top wellness programs in Arizona, and recognized nationally, uses employee feedback to remove barriers and provide cutting-edge Fitness, fiscal, and nutritional programming. Each year participants choose from over 450 endorsed events at the worksite, in the Community, and online. Employees participate on weekends, evenings, before, during and after the workday. Over 1,770 incentives will be earned by employees across the SRP-MIC government and enterprises in 2017.

Visit the WellPath web site from any web-enabled device, 24/7 at www.wellpath.info. There you will find more information about participation and earning incentives. We offer:

ABCs of WellPath Participation

Knowledge is power, and can lead to improved health. Your personal health is changing. Are you healthier than you were last year? Each year, employees answer this question through the "ABC's of Participation."

- » Step A: Watch a quick WellPath Orientation Video online at www.wellpath.info/wellpath-tv.
- » Step B: Know Your Numbers: Use a work site screening or your personal physician for blood work.
- » Step C: Use Your Numbers to complete a Personal Wellness Assessment.

"The ABCs" will help you to know if your health is in decline or improving.

Note: Incentives are offered to all employees and enrolled, eligible dependents who complete "The ABCs."

Attend WellPath Endorsed Events

A calendar of events is available through the MYWellPath portal.

Exercise Regularly

Earn incentives for regular exercise. Contact a WellPath coach for details: www.wellpath.info/coaching.

Set and Achieve Health-improvement Goals

Plan to improve your health in a measurable way. Earn incentives for each goal you reach. Contact a WellPath coach for details: www.wellpath.info/coaching.

Health Challenges

WellPath endorses individual and team health challenges throughout the year.

Practice Prevention

Earn incentives for completing prevention activities such as mammography, annual exams, flu shots, etc. Find out which prevention activities are available and right for you: www.wellpath.info/prevention

Health by Choice, NOT by Chance

Your health is too precious to leave to chance. Employees **love** this course which empowers them to be wiser and more effective consumers of healthcare, making the best decisions in sickness and health. Find out more at www.wellpath.info/choose_health

Eligible dependents who are enrolled in our health plans are also eligible for family WellPath incentives!

AccessMYWellPath

Use MYWellPath for self-serve access—check your WellPath points, add dependents, change your incentive preference, find activities and report participation. You can find MYWellPath on the internet at: www.wellpath.info/mywellpath.

Health Coaching

WellPath Coaches are highly qualified and have over 20 years of experience helping people reach their health goals. In addition to advanced degrees, professional licenses and certifications, each WellPath Coach is a certified exercise professional. WellPath covers all the costs for you to meet with a coach at the worksite, online, or by phone. Meet your WellPath Coach at www.wellpath.info/coaching.

WellPath is your benefit and it is easy to participate, improve your health and earn incentives. So why not start today?

GET ON THE WELLPATH!



Other WP Self-management Programs

Health by Choice, NOT by Chance

It's easy to take our health for granted. Typically as we age we lose our health and function. Health by Choice, NOT by Chance will help you to best use your health plan and other available resources to keep your health and improve your health.

Enroll in new classes beginning in June 1, 2017: http://www.wellpath.info/choose_health



Why enroll?

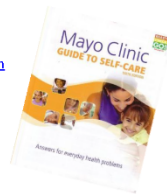
- To utilize your benefits to stay healthy
- To be a smart consumer
- Achieve the best medical outcomes possible when being treated for injury or illness
- Reduce your costs for healthcare and help control costs of your medical plan
- Save your time
- Receive the Mayo Clinic's Guide to Self-Care & 100 WellPath Points. (must complete all 8 sessions)

What is Health By Choice NOT by Chance?

- Knowing how, when and where to treat your common illness and minor injuries
- Managing a healthy lifestyle
- Using your health plan, practicing prevention and a healthy lifestyle to support health in addition to treating illness and injury
- Actively participating in your health – communicating with doctors & healthcare providers

Receive the Mayo Clinic's Guide to Self-Care containing reliable, practical, easy-to-understand information on more than 300 common medical conditions and issues relating to your health.

Classes are starting now: Visit http://www.wellpath.info/choose_health for course and registration information.



Healthy Weight Management

There are no *magic bullets* or even successful evidence-based diets. Yet weight loss products and programs are a billion-dollar industry. *Healthy Weight Management* is a course in which *you* learn, explore and develop an individualized lifestyle which will be most effective for *you*.

Available online or in-person and, for employees and dependents. Register two ways:

Attend online (Dependents register online)

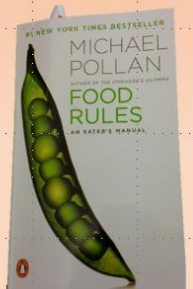
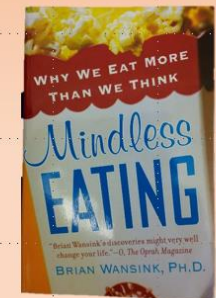
Attend in a traditional setting (face to face)

For registration and more information please visit:
<http://www.wellpath.info/healthyweightmanagement>

New classes coming soon!

100 WellPath Points

Yours to keep if you
complete the 11-week course





WELLPATH'S HEALTHY BACK CHALLENGE

DISABILITY: SHORT-TERM & LONG-TERM

SALARY PROTECTION FOR EMPLOYEES WORKING ≥ 30 HOURS/WEEK IF UNABLE TO WORK FOR DUE TO ACCIDENT, ILLNESS OR PREGNANCY.

- STD AFTER 14 CALENDAR DAYS OF INABILITY
 - INABILITY TO PERFORM MATERIAL AND SUBSTANTIAL DUTIES AND 20% OR MORE LOSS IN WEEKLY WAGES
 - REPLACES 70% OF BASE WEEKLY EARNING UP TO \$ 1,500/WEEK
 - MAXIMUM DURATION IS 166 DAYS
- LTD AFTER 180 DAYS OR DATE STD ENDS
 - SAME DISABILITY FOR 24 MONTHS AND LOSS OF 20% OF INDEXED MONTHLY INCOME
 - REPLACES 60% OF BASE SALARY UP TO \$ 6,000/MONTH



<https://www.unum.com/>



WELLPATH'S HEALTHY BACK CHALLENGE

Worker's Compensation

Please become familiar with the procedures to follow in the event of a work related injury. The most common problems are:

- failure to report the injury immediately, and
- employees seeking medical treatment on their own from unauthorized providers, without the appropriate authorization from the employer and/or carrier.

Failure to follow the procedures may result in delays in treatment and/or denial of medical expenses/disability compensation.

Please remember:

- Report all injuries immediately to your supervisor and complete the "Worker's Compensation Incident Report" eform. The original form is to be forwarded to the Benefit Department.
- If medical treatment is needed, the initial treatment must be authorized by the Employer and provided by one of the facilities on the "Initial Treatment Locations" list.
- If initial treatment is provided in the Emergency Room, follow up care must be provided by one of the outpatient clinics listed on the "Initial Treatment Locations" list. Do not see your personal physician or the physician recommended by the Emergency Room.
- Any additional treatment or referrals to specialists must be authorized by Tribal First. The outpatient clinics listed on the "Initial Treatment Locations" list will coordinate care and obtain the necessary authorizations.
- If your injury requires you to be off work, please communicate with your department and the Benefit Department on a frequent and regular basis while you are off work.

Worker's Compensation Instructions and Treatment Locations

- If your work injury requires professional medical treatment, **all treatment must be received at one of the authorized clinics** below.
- At the clinic, you will receive appropriate medical treatment and a work status form.
- If the physician releases you to return to work, you must return to your place of work and report to your supervisor any work restrictions you have.
- Your supervisor or manager will determine if modified or restricted duty is currently available.
- If the physician has taken you off work, you must call your supervisor and inform them of your status and the date of your next scheduled appointment.
- It is important that you attend all follow-up appointments and follow your treatment plan so that you do not jeopardize any possible benefits.
- Be sure to update your supervisor after each follow-up appointment.
- Tribal First is the administrator for the SRPMIC Workers' Compensation program. **Tribal First must approve all treatment beyond the initial visit.**
- The clinic should coordinate with Tribal First for approval of additional treatment, diagnostics, and referrals.
- Respond to any requests for information from Tribal First immediately so that you do not delay or jeopardize possible benefits.

AUTHORIZED CLINICS:

CONCENTRA MEDICAL CENTERS (see attached map for directions to nearest clinic)
The Concentra Airport Clinic on the attached list is open 24 hours, 7 days a week.

- Hospital emergency rooms should be used only when the injury requires emergency room treatment. Three of the closest hospitals are listed below.
- If you receive treatment at a hospital emergency room, you must then go to a Concentra clinic for any follow-up treatment.

HOSPITALS - (emergencies only)

Scottsdale Health Care-South (Osborn)	7400 E. Osborn Road	Scottsdale	480-675-4000
Scottsdale Health Care-North (Shea)	10450 N. 92nd Street	Scottsdale	480-860-3000

SUPERVISORS:

Ensure your staff is in contact with Benefits and provides a work status after each office visit.

INJURED EMPLOYEE:

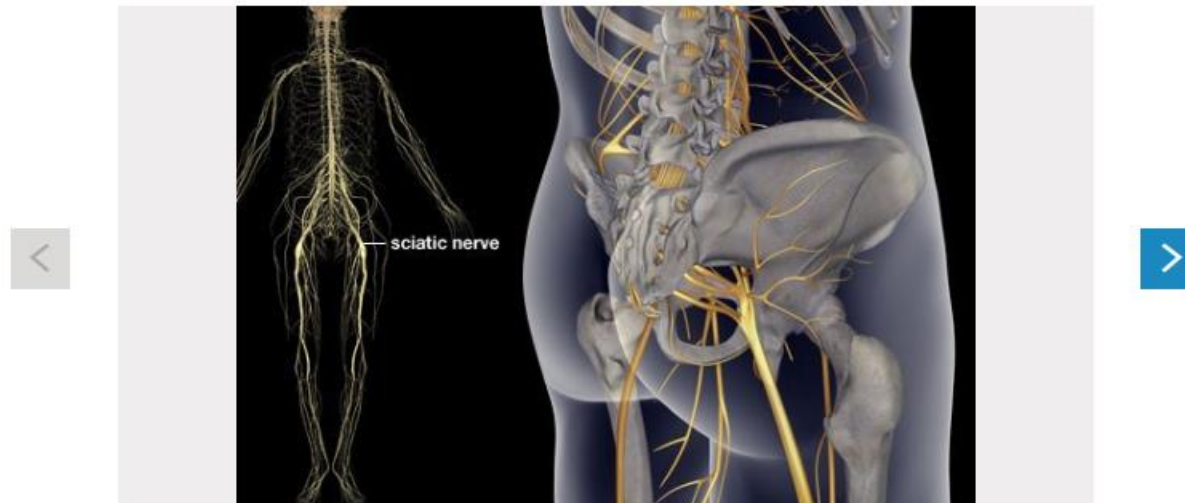
Keep in contact with both your department and Benefits and provide a current work status after each office visit.

Employer: SRPMIC
Point of Contact: Benefits
Phone: 480-362-7919
Fax: 480-362-5870

Workers' Compensation
TRIBAL FIRST
P.O. Box 609015
San Diego, CA 92160
Phone: 800-552-8921
Fax: 858-277-4519
Policy # NAA00014-03

[Back Pain](#) > [Slideshows](#) >

Slideshow: A Visual Guide to Sciatica



What Is Sciatica?

1 / 23

Sciatica refers to back pain caused by a problem with the sciatic nerve. This is a large nerve that runs from the lower back down the back of each leg. When something injures or puts pressure on the sciatic nerve, it can cause pain in the lower back that spreads to the hip, buttocks, and leg. Up to 90% of people recover from sciatica without surgery.



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Slideshow: Comfort Tips for Traveling with Back Pain

Don't let back or other pain keep you from your travel adventures. Try these tips to minimize discomfort during your next flight or driving trip.



Slideshow: Bad Habits for Your Back

You're more likely to have back pain as you get older. Here's how to avoid making things worse with bad habits.



Slideshow: Causes of Neck Pain

When your neck hurts, you know it. But what brought on that pain? Find out more about the causes and their treatments.



Slideshow: What Conditions Cause Back Pain?

Many things can make your back hurt. Find out more about a few of them, including what you can do about them.



Slideshow: What Is Spinal Stenosis?



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Is it stopping you in your tracks?



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Here are tips to help make life a little easier.



Ankylosing Spondylitis

Diagnosis, symptoms, and treatment.



Scoliosis of the Spine

What is it and what causes it?



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Back Pain Guide

Does your back pain have you down? Learn about its causes, symptoms, tests, and treatments. Use this WebMD Health Guide to feel better, get support, and strengthen your back to help curb back pain.

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What Is Back Pain?

[Managing Pain From Back Injuries](#)

[Back Pain Basics](#)

[Musculoskeletal Pain](#)

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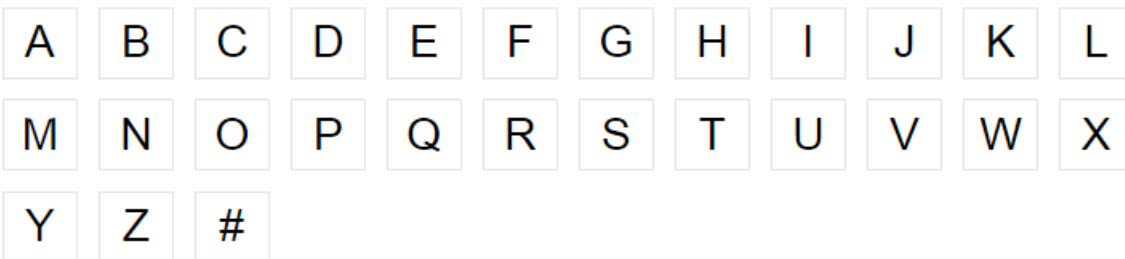


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Find a disease by its first letter



Check your symptoms to find a possible cause

Try the Symptom Checker

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About this Symptom Checker

Foot pain?
Headache? Sore
throat? Skin rash?
Use the Symptom
Checker to find out
what's causing your
symptom.

1
Choose a
symptom

2
Select related
factors

3
View possible
causes

Adult Symptoms

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When to seek medical advice

Get medical care immediately if you have severe low back pain that:

- Is constant or intense
- Causes weakness, numbness or tingling in one or both legs
- Is associated with new bowel or bladder problems
- Is accompanied by fever
- Is associated with pain or throbbing in the abdomen
- Is accompanied by unexplained weight loss

Make an appointment with your doctor if you have back pain that:

- Follows a fall, blow to your back or other injury
- Worsens during rest or at night
- Spreads down one or both legs

Also, see your doctor if you start having back pain for the first time after age 50, or if you have a history of cancer, osteoporosis, steroid use, or drug or alcohol abuse.

1

Choose a symptom

2

Select related factors

3

View possible causes

Low back pain

Find possible causes of low back pain based on specific factors. Check one or more factors on this page that apply to your symptom.

Pain

- ☐ Began suddenly
- ☐ Started gradually
- ☐ Gradually worsens

Triggered by

- ☐ Everyday activities
- ☐ Overuse
- ☐ Injury

Worsened by

- ☐ Movement
- ☐ Prolonged sitting or standing
- ☐ Prolonged rest or inactivity

Accompanied by

- ☐ Decreased range of motion or stiffness in neck
- ☐ Numbness or tingling in limbs, most often on one side of the body (unilateral)
- ☐ Knot or tight spot in back muscle
- ☐ Shoulder, arm or chest pain
- ☐ Loss of balance or coordination
- ☐ Stiffness in lower back
- ☐ Loss of bowel or bladder control
- ☐ Swelling
- ☐ Muscle weakness
- ☐ Weakness, numbness or tingling in leg or foot
- ☐ Numbness or tingling in limbs, most often on both sides of the body (bilateral)

Find causes



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Back pain

Symptoms & causes

Diagnosis & treatment

Doctors & departments

Overview



Back pain is one of the most common reasons people go to the doctor or miss work, and it is a leading cause of disability worldwide. Most people have back pain at least once.

Fortunately, you can take measures to prevent or relieve most back pain episodes. If prevention fails, simple home treatment and proper body mechanics often will heal your back within a few weeks and keep it functional. Surgery is rarely needed to treat back pain.

Symptoms

Signs and symptoms of back pain can include:

- Muscle ache
- Shooting or stabbing pain
- Pain that radiates down your leg
- Pain that worsens with bending, lifting, standing or walking
- Pain that improves with reclining

When to see a doctor

Most back pain gradually improves with home treatment and self-care, usually within a few weeks. If yours doesn't improve in that time, see your doctor.

In rare cases, back pain can signal a serious medical problem. Seek immediate care if your back pain:

Causes

Back pain that comes on suddenly and lasts no more than six weeks (acute) can be caused by a fall or heavy lifting. Back pain that lasts more than three months (chronic) is less common than acute pain.

Back pain often develops without a cause that your doctor can identify with a test or an imaging study. Conditions commonly linked to back pain include:

- **Muscle or ligament strain.** Repeated heavy lifting or a sudden awkward movement can strain back muscles and spinal ligaments. If you're in poor physical condition, constant strain on your back can cause painful muscle spasms.
- **Bulging or ruptured disks.** Disks act as cushions between the bones (vertebrae) in your spine. The soft material inside a disk can bulge or rupture and press on a nerve. However, you can have a bulging or ruptured disk without back pain. Disk disease is often found incidentally when you have spine X-rays for some other reason.
- **Arthritis.** Osteoarthritis can affect the lower back. In some cases, arthritis in the spine can lead to a narrowing of the space around the spinal cord, a condition called spinal stenosis.
- **Skeletal irregularities.** A condition in which your spine curves to the side (scoliosis) also can lead to back pain, but generally not until middle age.
- **Osteoporosis.** Your spine's vertebrae can develop compression fractures if your bones become porous and brittle.

Risk factors

Anyone can develop back pain, even children and teens. These factors might put you at greater risk of developing back pain:

- **Age.** Back pain is more common as you get older, starting around age 30 or 40.
- **Lack of exercise.** Weak, unused muscles in your back and abdomen might lead to back pain.
- **Excess weight.** Excess body weight puts extra stress on your back.
- **Diseases.** Some types of arthritis and cancer can contribute to back pain.
- **Improper lifting.** Using your back instead of your legs can lead to back pain.
- **Psychological conditions.** People prone to depression and anxiety appear to have a greater risk of back pain.
- **Smoking.** This reduces blood flow to the lower spine, which can keep your body from delivering enough nutrients to the discs in your back. Smoking also slows

Prevention

You might avoid back pain or prevent its recurrence by improving your physical condition and learning and practicing proper body mechanics.

To keep your back healthy and strong:

- **Exercise.** Regular low-impact aerobic activities — those that don't strain or jolt your back — can increase strength and endurance in your back and allow your muscles to function better. Walking and swimming are good choices. Talk with your doctor about which activities you might try.
- **Build muscle strength and flexibility.** Abdominal and back muscle exercises, which strengthen your core, help condition these muscles so that they work together like a natural corset for your back. Flexibility in your hips and upper legs aligns your pelvic bones to improve how your back feels. Your doctor or physical therapist can tell you which exercises are right for you.
- **Maintain a healthy weight.** Being overweight strains back muscles. If you're overweight, trimming down can prevent back pain.
- **Quit smoking.** Talk to your doctor about ways to quit.

Avoid movements that twist or strain your back. Use your body properly:

- **Stand smart.** Don't slouch. Maintain a neutral pelvic position. If you must stand for long periods, place one foot on a low footstool to take some of the load off your lower back. Alternate feet. Good posture can reduce the stress on back muscles.
- **Sit smart.** Choose a seat with good lower back support, armrests and a swivel base. Placing a pillow or rolled towel in the small of your back can maintain its normal curve. Keep your knees and hips level. Change your position frequently, at least every half-hour.
- **Lift smart.** Avoid heavy lifting, if possible, but if you must lift something heavy, let your legs do the work. Keep your back straight — no twisting — and bend only at the knees. Hold the load close to your body. Find a lifting partner if the object is heavy or awkward.

Buyer beware



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Diagnosis

Print

Your doctor will examine your back and assess your ability to sit, stand, walk and lift your legs. Your doctor might also ask you to rate your pain on a scale of zero to 10 and talk to you about how well you're functioning with your pain.

These assessments help determine where the pain comes from, how much you can move before pain forces you to stop and whether you have muscle spasms. They can also help rule out more-serious causes of back pain.

If there is reason to suspect that a specific condition is causing your back pain, your doctor might order one or more tests:

- **X-ray.** These images show the alignment of your bones and whether you have arthritis or broken bones. These images alone won't show problems with your spinal cord, muscles, nerves or disks.
- **MRI or CT scans.** These scans generate images that can reveal herniated disks or problems with bones, muscles, tissue, tendons, nerves, ligaments and blood vessels.
- **Blood tests.** These can help determine whether you have an infection or other condition that might be causing your pain.
- **Bone scan.** In rare cases, your doctor might use a bone scan to look for bone tumors or compression fractures caused by osteoporosis.
- **Nerve studies.** Electromyography (EMG) measures the electrical impulses produced by the nerves and the responses of your muscles. This test can confirm nerve compression caused by herniated disks or narrowing of your spinal canal (spinal stenosis).

Education

There's no commonly accepted program to teach people with back pain how to manage the condition effectively. So education might involve a class, a talk with your doctor, written material or a video. Education emphasizes the importance of staying active, reducing stress and worry, and learning ways to avoid future injury.

Physical therapy and exercise

A physical therapist can apply a variety of treatments, such as heat, ultrasound, electrical stimulation and muscle-release techniques, to your back muscles and soft tissues to reduce pain.

As pain improves, the therapist can teach you exercises to increase your flexibility, strengthen your back and abdominal muscles, and improve your posture. Regular use of these techniques can help keep pain from returning.

Surgery

Few people need surgery for back pain. If you have unrelenting pain associated with radiating leg pain or progressive muscle weakness caused by nerve compression, you might benefit from surgery. Otherwise, surgery usually is reserved for pain related to structural problems, such as narrowing of the spine (spinal stenosis) or a herniated disk, that hasn't responded to other therapy.

Treatment

Most acute back pain gets better with a few weeks of home treatment. However, everyone is different, and back pain is a complex condition. For many, the pain doesn't go away for a long period, but only a few have persistent, severe pain.

For acute back pain, over-the-counter pain relievers and the use of heat might be all you need. Bed rest isn't recommended.

Continue your activities as much as you can tolerate. Try light activity, such as walking and activities of daily living. Stop activity that increases pain, but don't avoid activity out of fear of pain. If home treatments aren't working after several weeks, your doctor might suggest stronger medications or other therapies.

Medications

Depending on the type of back pain you have, your doctor might recommend the following:

- **Over-the-counter (OTC) pain relievers.** Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil, Motrin IB, others) or naproxen sodium (Aleve), might relieve acute back pain. Take these medications only as directed by your doctor. Overuse can cause serious side effects. If OTC pain relievers don't relieve your pain, your doctor might suggest prescription NSAIDs.
- **Muscle relaxants.** If mild to moderate back pain doesn't improve with OTC pain relievers, your doctor might also prescribe a muscle relaxant. Muscle relaxants can make you dizzy and sleepy.
- **Topical pain relievers.** These are creams, salves or ointments you rub into your skin at the site of your pain.
- **Narcotics.** Drugs containing opioids, such as oxycodone or hydrocodone, may be used for a short time with close supervision by your doctor. Opioids don't work well for chronic pain, so your prescription will usually provide less than a week's worth of pills.
- **Antidepressants.** Low doses of certain types of antidepressants — particularly tricyclic antidepressants, such as amitriptyline — have been shown to relieve some types of chronic back pain independent of their effect on depression.
- **Injections.** If other measures don't relieve your pain, and if your pain radiates down your leg, your doctor may inject cortisone — an anti-inflammatory medication — or numbing medication into the space around your spinal cord (epidural space). A cortisone injection helps decrease inflammation around the nerve roots, but the pain relief usually lasts less than a few months.



Preparing for your appointment

If your back pain lasts for a few days without improvement, see your doctor. Here's some information to help you get ready for your appointment.

What you can do

Make a list of:

- **Key personal information**, including mental or emotional stressors in your life
- **Your symptoms**, and when they began
- **All medications, vitamins and other supplements** you take, including doses
- **Questions to ask** your doctor

Take a family member or friend along, if possible, to help you remember the information you receive.

For back pain, questions to ask your doctor include:

- What is the most likely cause of my back pain?
- Do I need diagnostic tests?
- What treatment approach do you recommend?
- If you're recommending medications, what are the possible side effects?
- I have other medical conditions. How can I best manage them together?
- How long will I need treatment?
- What self-care measures should I try?
- What can I do to prevent a recurrence of back pain?

What to expect from your doctor

Your doctor is likely to ask you questions, including:

- When did your back pain begin?
- Have you ever injured your back?
- Is the pain constant?
- Does the pain affect your ability to function? If so, how much?
- Do you have other signs or symptoms besides back pain?
- Do you do heavy physical work?
- Do you exercise regularly? What types of activities do you do?
- How often do you feel depressed or anxious?
- Do you sleep well?
- What treatments or self-care measures have you tried so far? Has anything helped?

Thank you.

HBC: What's on the horizon?

- Quiz Friday
- Self-limiting condition resources
- "Decision Trees" resources
- Keep building your exercise routine



Questions? Comments? Also wellness@srpmic-nsn.gov.

Evaluation survey coming.