

THE TRUSTEE

December 2017
NARCOTIC AGREEMENT

The opioid epidemic across America has led to restrictions on prescriptive pain medications. As with many errors, the response sometimes results in over-corrective actions. As wide as the pendulum swung to one side, it swings as far to the other side before it settles, hopefully, in a middle ground. Now, some patients who need pain relief may experience delayed or denied medications as providers err on the side of caution. Progressive providers have developed guideline agreements with their patients so that each side has an understanding of the benefits and risks of the treatment.

Many agreements inform the patient of existing law. In New York State, it is against the law to conceal your medication history from any medical provider. A patient must reveal all medications to any medical provider treating them and must inform the provider of all prescriptions from other providers. Electronic record keeping has improved communication among providers, but if there is addictive use of any drug, the patient may be trying to hide its use in an attempt to maximize its use. The provider can discuss medications with another provider as part of a referral, but they need to identify the provider. In the agreement, the patient agrees to comply with all aspects of the treatment program including, but not limited to, physical therapy, behavioral management, and self-help programs. The provider will evaluate, periodically, the benefits of the narcotic medication(s) using the criteria of pain relief, increase in general function, increase in exercise, completion of a rehabilitation program, return to work, maintenance of job, nutrition, and other activities of daily living. Honesty regarding drug and alcohol history, both past and present, must be provided.

Patients who want to receive narcotic medications must certify they are not currently abusing illicit or prescriptive drugs; have not been involved in the sale, illegal possession, diversion or transport of controlled substances; will not share the drugs; and are not pregnant. Patients must agree to fill the narcotic prescription at only one pharmacy. No other person, without prior arrangement, may pick up the prescription. No dosage modifications can be made without a face-to-face medical appointment. Medications will not be replaced under any circumstances, including lost, stolen, or damaged medications. Patients must agree to urine and blood tests by the provider at any time. And, the patient has to understand the narcotic medication may become addictive. The pharmaceutical companies had marketed opioids as non-addictive medications and allowed them to become the most abused drug in the country. Providers and patients were tragically misled by Big Pharma and the result has been devastating to our society. Congressional accountability is a must.

RETIREE DENTAL

At the November quarterly meeting of the Trust, the Trustees voted, unanimously, to pay the second half of the semi-annual premium for all enrolled members. This represents the 10th consecutive year the Trust has assumed the payment for retirees. Retirees who have dental insurance will not receive another premium invoice until the end of May 2018. It will be due by June 30, 2018 and will be for the first half of the 2018-19 school year.

STUDENT OUT-OF-AREA

Members who have students enrolled in college outside of the 75 mile radius of Kingston and wish to have them covered as in-network while at school should send a copy of their Spring semester schedule enrollment to Kathy at the Trust Office by January 31, 2018.

ALLYHEALTH

It's cold and flu season. Members who enrolled and registered in AllyHealth Telemedicine are reminded that they have 24/7/365 access to U.S. Board Certified doctors and pediatricians. When

sore throats, fever, and coughs persist, avoid the trip to a provider, avoid a member co-pay, and save the Trust an office visit co-pay by contacting an AllyHealth doctor at [888-565-3303](tel:888-565-3303).

IN MEMORIAM:

Rhoda Gellen | Marcia Skwish | Anthony Maneen | Phyllis Bernard