

# The Flare



Guiding Retiree Members down the road to better benefit understanding. **CCPOA Benefit Trust Fund**

Summer 2009

*For the last few years the Trust has embarked on a goal to be more receptive to our members. Many of you have probably noticed a Trust presence at your institutions. If not we need to hear about it. Hopefully, you have seen someone at your local chapter meeting or at the entrance. We have gone to great lengths to put a face to the Trust. Many of you have stopped to chat with Joe, Tracy, Bob, Al, Karen, Ken, and Sam about your benefits and how to make the best use of them. In addition, Ben Sybesma from the Legal Defense Fund has been showing up at chapter meetings to answer questions on how and when to utilize this very important benefit. If you haven't seen them around give our communications staff a call and ask them to let you know when they are scheduled to visit your institution. As always we are here to serve you and can be reached at (800) IN-UNIT- 6 and if you ever feel that we haven't performed to your satisfaction I want to know about it.*

*Michael E. Smalley, Assistant Administrator  
CCPOA Benefit Trust Fund  
1-800-IN-UNIT-6/1-800-468-6486*

## MEET THE TRUST'S REGIONAL BENEFIT REPS – TRACY GUNTER AND JOE GONSALVES



Tracy Gunter

The CCPOA Benefit Trust Fund is represented at institutions, chapter meetings and retiree chapter meetings by two teams of regional benefit representatives. If you've ever spent any time with these key regional benefit representatives, Tracy Gunter of SERC and Joe Gonsalves from Combined Insurance, you know that their workday is one of constant forward momentum - greeting people, making calls, getting the word out to members about how to use their benefits. This high-energy pair is committed to getting benefit questions answered in the fastest time possible, to the members' satisfaction. We asked each of them to sit down and put into words their involvement with the CCPOA membership, what drives them to serve our CCPOA family and what pushes their buttons about CCPOA members and their benefit decisions.

An unabashed hugger of all and avowed total people person, Tracy Gunter notes "I love helping people and when I do it is the best feeling in the world. I know how frustrating it can be to search for answers to questions; so, if I can help a member with theirs, or get them to the right person, I have done my job.

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*The Flare is brought to you by:*

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*For more information on the  
topics covered in this issue,  
please contact the Trust.*

# HEART DISEASE PREVENTION: HEART HEALTH AND KNOWING THE WARNING SIGNS

Coronary heart disease is America's No. 1 killer, according to the American Heart Association. Stroke, a leading cause of serious disability, ranks third. That's why it's so important to reduce your risk factors, know the warning signs, and know how to respond quickly and properly if warning signs occur.

## ADOPTING A HEALTHY LIFESTYLE

A healthy lifestyle is one of the best things you can do to reduce your risk of heart attack and stroke.

## EAT WELL

Better food choices can help you reduce your risk for heart attack. A healthful eating plan means choosing the right foods to eat and preparing foods in a healthy way. Knowing the facts about cholesterol can also reduce your risk for a heart attack or stroke. Be sure to eat foods that are low in saturated fat, trans fat, and cholesterol.

## EXERCISE

Swimming, cycling, jogging, skiing, dancing, walking, and dozens of other activities can help your heart. Whether included in a structured exercise program or just part of your daily routine, regular physical activity can lead to a healthier heart.

## MANAGE YOUR WEIGHT

Manage your lifestyle to better manage your weight and reduce your risk for heart attack.

Adults are encouraged to have their blood pressure checked regularly. Be sure to call your doctor if you have any questions about your blood pressure or show any symptoms of high blood pressure such as sudden, severe headache or chest pain.

## THE WARNING SIGNS OF HEART ATTACK

Some heart attacks are sudden and intense where there's no doubt what's happening. But most heart attacks start slowly, with mild pain or discomfort. People experiencing heart attack

symptoms aren't always sure what's wrong and often wait too long before getting help. Here are signs that might mean you are experiencing a heart attack:

- **Chest discomfort:** most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back – it can feel like uncomfortable pressure, squeezing, fullness, or pain.
- **Discomfort in other areas of the upper body:** symptoms may include pain or discomfort in one or both arms, the back, neck, jaw, or stomach.
- **Shortness of breath with or without chest discomfort.**
- **Other signs may include breaking out in a cold sweat, nausea, or lightheadedness.**

As with men, women's most common heart attack symptom is chest pain or discomfort. However, women are somewhat more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea/vomiting, and back or jaw pain.

Learn the signs, but remember this: Even if you're not sure it's a heart attack, have it checked out. Minutes matter! Fast action can save lives — if you think you are having a heart attack, don't wait more than five minutes to call 911. ♦



### GET STARTED WITH HEALTHY LIFESTYLE REWARDS TODAY!

HEALTHY LIFESTYLE REWARDS AN INTERACTIVE ONLINE PROGRAM FOR CCPOA MEDICAL PLAN SUBSCRIBERS **THAT REWARDS YOU WITH CASH** WHEN YOU ADOPT HEALTHY LIFESTYLE HABITS. GET THE RESOURCES, MOTIVATION, AND SUPPORT YOU NEED TO EAT HEALTHY, GET FIT, MANAGE STRESS, AND MORE. YOU CAN USE THE BLOOD PRESSURE TRACKER, TAKE THE HIGH BLOOD PRESSURE QUIZ, AND USE THE EXERCISE AND DIET PLANNERS TO GET STARTED ON THE ROAD TO BETTER HEALTH.

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## MEET THE REPS *Continued from first page*

“I have a deep respect for everyone in Unit 6 and I am proud to work with them. The public just doesn’t understand what they do. Personally, I think that everyone should tour a prison to get a taste of what the correctional officers put up with. They protect the public from the worst of the worst and they have to deal with them daily,” she adds.

With a stack of maps, extra jackets for cold mornings, and an overwrought Blackberry to link members and service coordinators at the Trust, Tracy travels up and down the state on her quest to explain benefits to members. She begins many days at 3 a.m. and is at the institution until at least 3:30 p.m.

When the Trust increased its presence to CCPOA members about seven years ago, Tracy was at the forefront of this change. Her initial assignment by the Trust was to increase awareness of the legal plan by traveling to each chapter and getting the word out about this important, premium-free personal and professional legal program.

“There are still members out there who don’t know they have this great (legal) benefit, but the numbers are getting smaller. Hurray! Did you see me jump in the air on that one? In January we had four new benefits added to the legal plan. Because of the furloughs, the housing market and the economy, the phone has been ringing off the hook about the mortgage meltdown help Caldwell now provides. I hate to see so many members needing to use it but I am so glad that we have it to help all those in need.”

As the Trust increased its outreach to members, the Trust Board brought Joe Gonsalves from Combined on board with a team of regional benefit representatives. Joe is a specialist in life and disability insurance products, which he sees as the “two most critical pieces of a person’s insurance portfolio.” Initially self-taught on CCPOA member benefits through his business with Combined Insurance, Joe approached the Trust about expanding his knowledge of CCPOA benefits and coordinating these with the disability and accident programs available through Combined.

Joe now leads a team of six trained benefit representatives. Their objective is to know CCPOA

BTF benefits up and down and be able to share that knowledge with the membership. In 2008, by traveling in teams of three, his team reached institutions 92 times. On a typical week, his team arrives at 5:15 a.m. Tuesday and stays through the week. This year, by adding two team members, he plans to double his team’s institutional visits. Because of his high drive to achieve and to reach members, Joe has sometimes been able to get management to give him additional time on grounds – including getting permission to be at the 10 p.m. shift change at many institutions.



Joe Gonsalves

“My mission statement is simple: to build a team of insurance specialists – not salesmen – that have the same drive that I do to help this group understand insurance so that they make sound insurance decisions and protect their families,” noted Joe.

“The CCPOA has taught me many things, but if I had to pick just a couple I think it would be that there are a very small percentage of Americans in this country that, day after day, shift after shift risk their wellbeing for the safety of the rest of us. And that alone commands and deserves all of our total respect.”

Both Tracy and Joe have an abundance of experience and knowledge about the insurance industry and the benefits the CCPOA Benefit Trust Fund Board has developed for members. But sometimes, they don’t reach everyone. While many members understand the rich array of benefits available through CCPOA membership, others don’t stop to find out. For both Tracy and Joe, getting the word out has become a mission – both gratifying and at times, frustrating.

“My team for the last few years have (sic) worked so hard to extend the proper accurate information to the CCPOA family. I hope this isn’t wrong to say, but as hard as we work it sometimes feels like every time my team or the Trust gets one member on track, it feels like we lose two members that get confused by an outside vendor giving them inaccurate information with the sole purpose of making a sale or a fellow CCPOA member sharing information that is also inaccurate thinking they

know what they're talking about – not trying to purposefully hurt or damage their fellow coworker. Insurance is a very complicated field. I guess it would be like me taking my car to the local doctor for repair, or asking my mechanic to handle my delicate brain surgery... this group has got to approach the whole subject with a much wiser approach or we will continue to see members hurt by bad or uninformed decisions regarding insurance,” said Joe. “We are not your typical vendor that is there primarily to sell product.”

Joe is especially passionate that CCPOA members have a responsibility to others, especially their children and spouses. “No matter how difficult your job is – when you are off, your obligations are NOT over. You have a family to raise and you have a community to serve. No matter how hard people work to bring (you) the richest benefit portfolio you have to get the proper information to best protect you and your family.”

At the correctional academies, on the road, at chapter meetings, during State Board meetings, retirement gatherings, and at convention time, Joe, Tracy and the Trust staff are committed to making sure CCPOA members understand how to utilize their programs, and make the most of their benefits. Whether this means checking to make sure a beneficiary is correct on a life insurance program, assisting a family going through a medical problem, or just letting a subscriber know how to use a wellness kit, the Trust is committed to educating members about benefits.

“My main responsibility,” notes Tracy, “is to educate the members about the truly wonderful benefits they have through their union membership. These benefits were designed by correctional officers for correctional officers and the Trust continually tries to get the best rates and benefits for the membership; that’s real value. My mission statement is: educate and help the members understand their benefits, assist them with their benefit issues and help them take advantage of what’s available so they can save



Tracy talking with members at Convention 2008

money and make their benefit dollars go further.”

Tracy and Joe will continue to be a part of the CCPOA Benefit Trust Fund team this year. Look for information on other Trust key benefit specialists in upcoming Flare newsletters as well as on-line and in the Peacekeeper. Meanwhile, if you have questions about your benefits, know that the Trust is only a telephone call away – or visit us if you are in Sacramento.

Until then, see you on the road. ♦

## SWINE FLU *Continued from page 5*

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This new vaccine should be available by October – so, checking with your physician about getting a swine flu vaccination in addition to the seasonal flu vaccination may not be a bad idea. Especially if you work in close quarters with many people, or you have lowered immunity. Infectious disease professionals are suggesting that everyone should get whatever vaccines are available, especially as some of the seasonal viruses can be worse than swine flu.

Influenza is also known to spread by small droplets from coughing or sneezing remaining on tabletops, telephones and other surfaces and then by transferred by fingers to mouth, nose and eyes. You can reduce the spread of the disease by disinfecting household surfaces with a diluted chlorine bleach solution.

One final step you can take to reduce your chances of getting swine flu? Boost your immunity. Taking short exercise breaks throughout your day can increase your stamina and immunity. Or, you can eat immunity boosting foods like oats, fish and tea. Failing that, you can always rely on garlic. While it might not increase your immunity, it will give you additional space and that may lower your chance of infection. ♦

# ARE YOU PREPARED IF SWINE FLU RETURNS?

With Mexico reporting decreasing outbreaks of “Swine Flu,” the new H1N1 virus, people are beginning to ask – did governments overreact to a mild seasonal flu strain, or should we be taking steps to prepare for an imminent pandemic?

In early spring, reports of a new, virulent disease began to emerge. Mexico and other countries closed schools, limited travel, quarantined people with symptoms, and contemplated closing borders. Public health officials were swamped with requests for information. By early June an estimated 200,000 Americans were infected, with 21 deaths reported. Yet, as flu outbreaks go, Swine Flu appears to be neither especially virulent nor lethal.

According to the Centers for Disease Control and Prevention, the human version of the 2009 swine flu has fairly mild symptoms. Like all influenza-like illness, these include cough, sore throat, body aches, headache, chills and fatigue. The infection is spread by contact with others – including coughing, sneezing, and touching something with the virus on it (a door handle or countertop), and then touching your eyes, nose or mouth. Swine flu is not transmitted by eating pork or pork products.

In May, swine flu was identified in California and Texas. In late May, an elementary school student in California died from swine flu and a possible secondary bacterial infection. These developments caused the World Health Organization to push the pandemic level alert from a three to a five. For, while the virus is dying down, infectious disease professionals feel it has the potential to mix and mutate with the seasonal flu virus now entering the Southern Hemisphere. And, some feel swine flu is hanging around longer than is typical for a spring flu outbreak. Many claim this is proof a pandemic is near.



*Avoid behavior that may spread the virus.*

Why the fuss? Both WHO and the CDC note that viruses mutate and change all the time. So it’s too early to predict how bad this virus is. And in some ways, the mildness of the onset of this new virus is cause for concern. The 1918 pandemic – cited as the worst flu of modern times – killed an estimated 40 million. And it began just like the 2009 Swine

Flu version - as the mild arrival of a new H1N1 virus, in the spring.

The Spanish Influenza of 1918 disappeared over the summer months. Then it roared back in August with deadly results, taking an enormous toll on children and adults in their prime.

But, that doesn’t mean that Swine Flu will have the same outcome. Remember the 1976 Swine Flu? Don’ worry. No one else does, either. Assumed to be an upcoming pandemic after young recruits fell ill at a military installation in New Jersey, 40 million Americans were vaccinated. Some people developed a rare neurological disease called Guillain-Bar syndrome after being vaccinated for the flu. But the pandemic of 1976? It never spread from Fort Dix.

So, should you prepare for swine flu’s possible return? And what steps are prudent to take?

Most health providers agree, the best way to avoid flu is to continue to wash your hands frequently, avoid sick people, and take time off if you can when you have flu-like symptoms so that you don’t spread the disease to others. Little treatment beyond rest and supportive care to control fever and maintain body fluid balance is required. Like most influenzas, swine flu cannot be treated with antibiotics.

Another approach? Plan to get vaccinated. In addition to increasing its stockpile of antiviral medication, the government has stepped up production of a Swine Flu vaccination.

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## CCPOA Benefit Trust Fund

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