

LOVE CANAL MEDICAL FUND

Winter 2014 BULLETIN - HEALTH NEWS AND BENEFITS Issue 29

LCMF Will Reach Its 30th Year of Operation in 2015

It's been quite a journey. Like many events and programs that grew out of the Love Canal Crisis, this fund is one of the first of its type. The Board needed to create the program without an existing model. Today, others are looking at what the Love Canal Medical Fund (LCMF) has developed and are following our lead.

Prescription Coverage Continues

The Love Canal Medical Fund's Board has **increased the Prescription Benefit to \$500 per year** per beneficiary for calendar years 2014 and 2015. This benefit is subject to the \$100 deductible for medical claims.

Prescriptions covered by the plan are for medical conditions which reasonably could be related to exposure to toxic chemicals at Love Canal. For example, if you are a diabetic, take thyroid or heart medication you should submit your prescription costs to the Love Canal Medical Fund Benefits Plan.



Getting your prescription information to submit is easy. Just ask the drug store, or other place where you have your prescription filled, to print out a summary of the prescription medications you purchased and their costs. They will usually do this at no cost. Indicate the ones that are related to Love Canal and submit them for reimbursement.

Note: If you are submitting prescriptions costs to the LCMF and have not sent in a claim for the disease or its treatment, we will need to have your physician send a letter indicating that you are being treated for the disease.

For example, if you are asking the fund to cover your prescription expenses for heart disease but have never submitted a claim for medical care for heart disease, there is no record on file that you have heart disease. A simple letter from your doctor saying you are being treated for the disease in which your prescriptions are related, would speed up the process and get your reimbursement money to you sooner.

Co-Payments

Many people have health insurance policies or programs which require a co-pay when visiting a doctor or undertaking diagnostic tests. Those co-pays are considered out-of-pocket costs and should be included in your claim for reimbursement of prescriptions or other medical costs. Including your co-pay charges will help to meet the deductible for your expenses. All claims are subject to a \$100 deductible per year except annual physicals.

Are You On Facebook?

If you are a member of Facebook, you should visit the Love Canal Medical Fund Facebook page. Meet new friends or old friends that might be trying to find you after 35 years. You can also visit us on our website at www.lcmf.org. On the website you can find the up-to-date benefits plan, claim forms to submit your claims, our Annual Reports and Health News Bulletins Everything you need to know about the program and more.



What types of diseases do we cover for beneficiaries?

A brief summary of covered medical expenses follows. But please, refer to your medical benefits plan booklet or read the online version at www.lcmf.org/Medplan.pdf which describes in detail what is and what is not covered. The list is just too long for this bulletin.

Start the New Year Right.

Schedule an appointment now for your 2014 or 2015 physical check-up. The Love Canal Medical Fund reimburses beneficiaries for annual physical examinations up to \$250 per year, with **no deductible**.

The best gift you can give yourself is a physical. An annual physical can detect problems early and possibly avoid serious health problems later.

As the Love Canal Beneficiaries are growing older we have reached that point in time in which some diseases such as cancer start to develop. Therefore we are encouraging everyone to take the time to go to your doctor and get a check-up.

Other Coverage

All coverage includes medical problems that reasonably could be associated with exposure to toxic chemicals from Love Canal. This includes expenses for treatment and diagnostic procedures related to such medical problems. For example, cancer, heart, kidney, lung diseases, thyroid problems, and reproductive related problems like infertility as well as miscarriages, amniocentesis, sonograms and other procedures designed to detect potential problems with the fetus of a female beneficiary are covered medical conditions.

Preventative and Diagnostic Procedures and tests in order to detect any medical problem that reasonably could be associated with exposure to toxic chemicals are also included. This includes blood tests, x rays, MRI's or biopsies.

Mental Health and Emotional Disorders diagnosis and treatment related to an illness or other medical condition that reasonably could be associated with exposure to toxic chemicals at Love Canal up to a maximum of \$2,000 per beneficiary per year.

Allergies- covered expenses include desensitization shots and prescription medications.

Chemotherapy Treatment—prescription medication is treated differently than other prescriptions drugs.

The Fund will pay up to \$2,000 per year for a chemotherapy treatment protocol/regimen.

Rental or Purchase of Appliances such as devices to assist in walking or mobility (walker, wheelchair) or hospital bed, etc. These must be prescribed by a health care provider for medical conditions that reasonably could be associated with exposure to toxic chemicals at Love Canal. Maximum benefit is up to \$2,000 per beneficiary per year.

Please visit www.lcmf for more complete information on coverage and a copy of the most up-to-date medical benefits plan.

Only YOU Can Submit A Claim For Reimbursement

The Medical Fund does not accept bills directly from providers—hospital, doctors, the lab, etc. You must fill out a form following the procedures outlined on the form. The LCMF reimburses the beneficiary according to the plan outline. Thus direct payments to anyone other than the beneficiary or a designated family member is not done.

Do the best you can to fill out the form and mail it with a copy of your bill(s) to our claims adjuster at:

First Niagara Risk Management, Inc.
239 Van Rensselaer Street
Buffalo, NY 14210

(716) 849-8188 -(800) 899-3078

If they have any questions, they'll contact you. LCMF does not accept blank or almost blank claim forms.

Love Canal Medical Fund Contact Information

If you have any questions about whether your illness is covered by the Fund, please contact us using e-mail, the telephone, or the U.S. postal system.

Our phone number is 716-773-6578 and our email address is: lcmf@yahoo.com. Please leave a message and we'll make sure that your call or e-mail receives a quick response.

You can also write to us at Love Canal Medical Fund, P.O. Box 1782, Amherst, NY 14226.

