

health awareness



A COUNTY HEALTH POOL PUBLICATION

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ALCOHOL AWARENESS MONTH

Since 1987, the National Council on Alcoholism and Drug Dependence Inc. (NCADD) sponsors Alcohol Awareness Month during the month of April. The council's goal is "to increase public awareness...reduce stigma and encourage local communities to focus on alcoholism and alcohol-related issues."

Moderate Drinking Measures

You might be thinking, what are "moderate" drinking levels?

- Two drinks/day for men younger than age 65
- One drink/day for men age 65 and up
- One drink per day for women of any age

What is considered "one drink"?

- One drink = 12 oz of beer, 5 oz of wine, or 1.5 oz of 80-proof distilled spirits

Alcohol and Blood Pressure

Did you know that even a "healthy" person who imbibes three or more drinks in one sitting may experience a temporary blood pressure spike? According to the Mayo Clinic, habitual binge drinking can lead to long-term increases in blood pressure. Thinking about cutting back? One caveat for heavy drinkers: It's best to reduce your intake slowly over a two-week timeframe. Quitting cold turkey can result in extreme high blood pressure lasting for several days. High blood pressure can lead to heart disease and a plethora of other medical issues, so keeping blood pressure at a healthy level is important for longevity.

Weight Gain and Medications

Keep in mind that alcohol contains calories. These calo-

ries can result in unwanted weight gain, another risk factor for high blood pressure. Alcohol may also negatively interact with some blood pressure medications, decreasing effectiveness and intensifying medication side effects.

Alcohol and Depression

Does regular drinking lead to depression, or are depressed people more likely to drink too much? Both are possible. Almost one-third of people with major depression also have an alcohol dependency. Studies show that depressed children are more likely to develop alcohol problems in future years. In fact, teenagers diagnosed with a bout of major depression are two times as likely to start drinking as teens who are not depressed. Can drinking really make you depressed? Remember: Alcohol

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is a depressant. If you already have a genetic predisposition for depression, drinking can worsen the depression, causing you to make poor decisions or act impulsively, a snowball effect that can lead to financial woes, ruined relationships with loved ones, employment issues, etc.

Risk of Injury and Violence

Alcohol consumption can increase your risk of injury, violence and drowning. Decision-making ability is thrown off kilter when you are under the influence of alcohol. You might decide to swim in a lake, do a back handspring, throw a punch at someone, etc. – things you wouldn't normally do in a sober state. The result: You could end up in the emergency room, incarcerated or worse.

Underage Drinking

It's no surprise that alcohol is the preferred drug choice among young people. Underage drinking can have dangerous consequences including unsafe sex, alcohol poisoning, educational failure, traffic fatalities and suicide. If you are a parent, the underlying theme with your kids is "talk early, talk often." Be involved. Take an active role in alcohol education. Research shows that kids who have conversations with their parents about the dangers of alcohol and drug use are 50% less likely to use these substances than those who don't have such conversations. "Alcohol and drug use is a very risky business for young people," says Andrew Pucher, President and Chief Executive Officer of NCADD, "and par-

ents can make a difference. The longer children delay drinking and drug use, the less likely they are to develop any problems associated with it. That's why it is so important to help your child make smart decisions about alcohol and drugs."

Dependence or Addiction

If you know someone who needs help with alcohol dependence or addiction, contact Alcoholics Anonymous in Colorado (www.coloradoaa.org), your church or your nearest hospital. The County Health Pool is a great resource for information on alcohol and substance abuse. Contact your CHP Benefits Administrator and refer to the details in the Benefits Corner.

Making a Difference

- Track how much you drink or try abstinence
- Choose a day each week you will not drink alcohol
- Avoid drinking when you are upset
- Make a list of reasons not to drink
- Be candid with your kids and talk openly about alcohol use
- Tweet or post on Facebook regarding Alcohol Awareness Month

If you pick one - or several - of these things and take action, imagine the collective impact in your workplace, your family, and your community!

BENEFITS CORNER

The 2016 Plan Documents and Summaries of Benefits and Coverage (SBCs) are available online at www.ctsi.org. Under Pools, select CHP; select the blue link for CHP documents.

CHP Educational Training is available for all entities starting in May. See your HR contact to find out if your Benefits Administrator is scheduled to present. Topics include: loss analysis, utilization, trends, plan updates, understanding pre-authorizations, and how to read Anthem's Explanations of Benefits (EOBs).

CHP Members enrolled in a medical plan also have access to alcohol and substance abuse benefits (in-network*):

- Inpatient care: Possible admission co-pay (depending on plan) and 80/20% coinsurance after deductible (co-pay, deductible and OOP maximum vary according to plan**)
- Outpatient facility: Co-pay per office visit (co-pay varies according to plan**); 80/20% after deductible for all other eligible services including facility care (co-pay, deductible and OOP maximum vary according to plan**)

*Out-of-network coverage is also available for alcohol and substance abuse. Contact your CHP benefits administrator.

**High Deductible Health Plans (HDHPs) are set up differently and do not have copays. Contact your benefits administrator.

This is only a summary; for coverage and costs details, the CHP Plan Document is available at www.ctsi.org.