

tmta talk

A publication of the
Tooling, Manufacturing &
Technologies Association

**FROM ROB'S
ROOST**
By ROB DUMONT
PRESIDENT & CEO

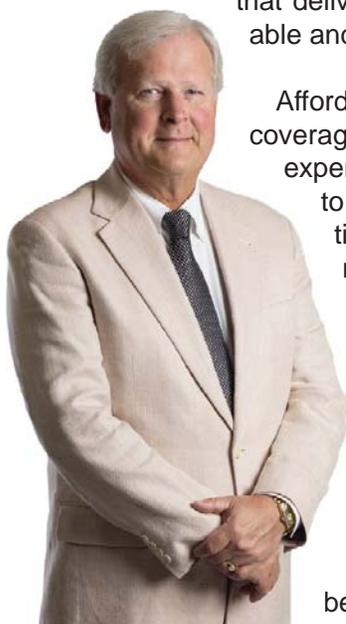
For this month's newsletter, Rob's Roost is guest written by Bob Farris from the Ralph C. Wilson Agency, TMTA's endorsed insurance provider:

Health Care RX

By reducing excessive government bureaucracy, Obamacare could live up to its promise of providing universal health care at reasonable rates.

The Affordable Care Act (ACA) was signed into law six years ago. Since then, both employers and individuals have struggled to understand the landmark legislation of the Obama administration. With its convoluted regulations and complicated rules, coupled with delays in implementation and lack of clarification, compliance with the Affordable Care Act remains a challenge for everyone.

The good news is the shortcomings of Obamacare aren't insurmountable. Rather, the framework of the ACA can be used to bring about needed change in the health care industry. The foundation is there to finally create a system that delivers high-quality care to all Americans at a reasonable and sustainable cost.



Affordability is a key goal of the act. Unfortunately, health coverage on and off the exchange marketplaces is still too expensive for many individuals and families. According to a recent Kaiser Family Foundation survey, satisfaction among marketplace enrollees has declined with regard to premiums and deductibles.

In order to change the trajectory of premium growth, the ACA needs to focus on increasing transparency in the health care industry. Consumers must be able to make informed choices. For that to happen, there needs to be transparency in costs and outcomes.

As high-deductible plans become the norm this becomes even more important, since patients will look to shrink their out-of-pocket costs. The ACA should im-

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tmta Calendar of Events November 2016

16	TMTA Board of Directors meets at TMTA offices
24-25	Thanksgiving Holiday TMTA Offices Closed Happy Thanksgiving!

Visit www.thetmta.com for detailed, up-to-date information on all events



Open Enrollment: What You Need to Know Now About Health Coverage

(LANSING) Over 750,000 Michigan consumers are now buying their own health coverage either through the Marketplace or directly from an insurance company. The Michigan Department of Insurance and Financial Services (DIFS) is reminding consumers that, barring certain qualifying events, open enrollment is the only opportunity they have to get coverage for 2017. Open enrollment for 2017 private health insurance coverage begins November 1, 2016 through January 31, 2017.

“It is important for Michigan citizens to know that private health coverage can only be purchased during the open enrollment period regardless of whether they purchase their coverage on the Marketplace or directly through an insurance company.” said DIFS Director Patrick McPharlin.

Consumers shopping for coverage through the Marketplace can apply online at www.healthcare.gov, by mail, over the phone at 800-318-2596 or in person with the help of a local assister. Consumers shopping for coverage outside of the Marketplace can do so by contacting insurance companies directly or by utilizing the assistance of a licensed insurance agent. A list of companies that sell major medical coverage can be found through the DIFS website.

Regardless of which path you choose, if you don't enroll in a health insurance plan by Jan. 31, 2017, you can't enroll in a health insurance plan for 2017 unless you qualify for a Special Enrollment Period. If you purchased health insurance through the Marketplace last year, you will be auto-enrolled in the same or similar plan unless you select a different plan by Dec. 15, 2016. However, if your current health insurer is not offering coverage through the Marketplace for 2017, you need to select a plan from a different insurer by December 15, 2016. If you fail to select another plan, you will be automatically enrolled into a different insurer unless you opt out of the coverage.

The four carriers withdrawing from the individual Marketplace in 2017 are: Harbor Health Plan (HMO), UnitedHealthcare Community Plan (HMO), Priority Health Insurance Company (PPO), and Alliance Health and Life Insurance Company. DIFS strongly recommends consumers who are currently insured with one of the four carriers actively seek out their own replacement coverage.

DIFS encourages consumers to shop around for health insurance. There may be new options that are less expensive or better suits your needs. In addition, if you use the Marketplace, your eligibility for subsidies depends on your income and available policies in your area. Either of these may have changed from last year. Even if your income and chosen plan have not changed, if there is a less expensive option it could affect the amount of a subsidy. If you do not complete a new eligibility determination, you may be responsible for repaying the difference between what you are currently receiving and what you should receive when you file your 2017 taxes.

DIFS offers tools, guides, and resources on their website which is available for use 24 hours a day, seven days a week on the DIFS Health Insurance Consumer Assistance Program's (HICAP) website at www.michigan.gov/hicap. This site contains information on the Marketplace and the Affordable Care Act. HICAP also has a toll-free number, 877-999-6442, for consumers who wish to speak to someone in person about their questions or concerns.

For more information on individual health care options, contact Bill Percha, TMTA's endorsed health care agent at 248-355-1414, 248-488-0300, or e-mail to billp@rcwa.net.

BCBSM to Cover Select Vaccines Under Pharmacy Benefits

Starting October 1, 2016, eligible BCBSM members have coverage for select vaccines under their pharmacy benefit plans. This will allow participating pharmacies to bill through the pharmacy claims processing system and provide selected vaccines to members at their pharmacy.

Qualified pharmacists giving the vaccine can bill the member's pharmacy benefits plan when the pharmacy participates in the medical Vaccine Affiliation Program. Most BCBSM members with prescription drug coverage are eligible. The vaccine will be covered with no cost share to members if their benefits meet the coverage criteria. Interested members should contact the phone number on the back of their BCBSM card to verify pharmacy coverage for vaccines and to find a participating pharmacy.

Vaccines and age requirements covered under the pharmacy benefits plan include:

- Influenza virus – no age requirement
- Zoster vaccine live/PF (shingles) – ages 60 and over
- Pneumococcal PPS23 and PCV7 (pneumonia) – no age requirement
- Prevnar 13 (pneumonia) – ages 65 and over
- Gardasil (human papillomavirus) – ages 9 to 27
- Gardasil 9 and Cervarix (HPV) – ages 9 to 27

Boostrix and Adacel (tetanus, diphtheria and whooping cough) – no age requirement

Menveo, Menactra, and Menomune (meningitis) – no age requirement

BCBSM Mobile App Enhances Employee Productivity and Patient Experience

BCBSM's mobile app conveniently and securely connects your employees to their health care plan from their smartphones. By putting these tools into the hands of your employees, they can easily manage their healthcare and save time.

Employees can download the BCBSM mobile app free of charge from the Apple App Store or Google Play using the keyword "BCBSM". Existing BCBSM account login information works with the app or the member can register if they are new to the BCBSM system.

Information available to the members includes:

- The member's virtual ID card (picture of the real thing!) including contract and group numbers
- Copayments for office, urgent care, and ER services
- Full access to previous claims including procedure and diagnostic codes
- Doctor chart information
- Find a Doctor services



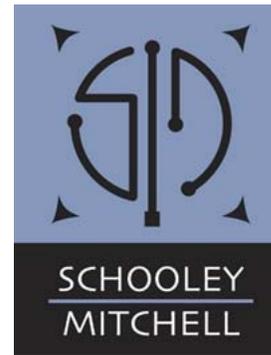
Two Surveys Included

Two surveys are included with this issue of TMTA Talk. One is the **Annual Christmas/New Year's Holiday Schedule** and the second is the **First/Second Quarter 2017 Business Trends Survey**.

Please take a few moments to complete the forms and return them to TMTA by Friday, November 18, 2016. Remember, the results are only as good as the information we receive from you!

For your convenience, both forms are on-screen fillable and both forms also have two 'mouse over' buttons at the bottom. One button will e-mail your completed form to me at elaine@thetmta.com and the other will allow you to print the form so you may fax it to TMTA at 248-488-0500.

Results will be included in next month's TMTA Talk and also posted on our website at www.thetmta.com.



New TMTA Endorsed Provider-Schooley Mitchell

What if you could trim your telecom and cellular costs along with your credit card processing fees by 28% without switching vendors? TMTA is pleased to introduce a cost savings program that can enhance your bottom line while alleviating the hassle of managing multiple telecom, cellular and credit card processing vendors.

TMTA's newest endorsed provider, Schooley Mitchell (<http://www.schooleymitchell.com/summary>), specializes in reducing the costs of telecommunications and credit card processing services. They are not a service provider, but rather a consulting firm who operates with complete vendor independence and objectivity.

With over 17,000 national clients, Schooley Mitchell averages savings of 28% in areas that include cellular phones, local phone service, long distance, internet access, data connectivity, conferencing and credit card processing fees. Schooley Mitchell can also act as a single point of contact for all telecom and credit card processing management issues.

Schooley Mitchell's fees are contingency-based, so there is no up-front cost or obligation for them to conduct an analysis. And in most cases, the savings Schooley Mitchell creates can be achieved without the need to change service providers.

This PDF contains more information on the Schooley Mitchell savings program (<http://www.thetmta.com/documents/161024-Flyer.pdf>). You can reach Sean Fox at (513) 683-8881 or e-mail to sean.fox@schooleymitchell.com. We hope you give Schooley Mitchell an opportunity to speak with you and share their risk-free business model.

TMTA members can expect to hear from Schooley Mitchell by way of an introductory call, but you may certainly reach out to them as well.

In Memoriam



It is with deep sadness and regret that we note the passing of **John "Corky" Hancock** on August 16, 2016 at the age of 73. Mr. Hancock was the owner of **Hancock Enterprises** located in Taylor, MI. He is survived by his wife and best friend, Catherine.

Corky loved golf, travel, and being with family and friends. He was a kind, generous, warm-hearted, decent man who was respected and admired by those who knew him.

Mr. Hancock will be greatly missed by his many family, friends, community, and employees. Memorial donations may be made in his name to Catherine Teifer for the John "Corky" Hancock Memorial Scholarship Foundation.

Our heartfelt condolences go out to his family and friends.

In Memoriam



It is with deep sadness and regret that we note the passing of **James W. Biga** on September 19, 2016 at the age of 59. Mr. Biga owned and operated **Expert Machine & Tool Inc.** located in Port Huron, MI, alongside his three brothers. He is survived by his wife, Marjorie; and three children, Andrew, Matthew, and Aubrey.

Jim was a hard-working, fun-loving, kind person who always had a way of making those around him feel good.

Mr. Biga will be greatly missed by the many people who loved and admired him. Memorial donations may be made in his name to the Blue Water Center for Independent Living at 1042 Griswold Street, Suite 2, Port Huron, MI 48060.

Our heartfelt condolences go out to his family and friends.

In Memoriam



It is with deep sadness and regret that we note the passing of **Richard J. Smith, Jr.** on October 11, 2016 at the age of 70. Mr. Smith was the owner of **Ace Grinding & Machine Company** located in Walled Lake, MI. Loving husband of 40 years to the late Brenda Smith who passed away in 2007; beloved father of Kim, Shawn, and Meg; and cherished grandfather of 6.

Mr. Smith will be greatly missed by his many employees, friends, and family. Memorial donations may be made in his name to the Scleroderma Foundation of Michigan, 23999 Telegraph Rd., Southfield, MI 48033.

Our heartfelt condolences go out to his family and friends.

(Rob's Roost continued from Page 1)

plement transparency standards in order to facilitate a market-based system where providers are held accountable for outcomes. Doing so would encourage providers to improve their quality of care while remaining competitively priced.

Affordability is also tethered to a change in the way health care is delivered. Programs to improve the quality of care should be expanded. Accountable Care Organizations, for example, are groups of hospitals and doctors that voluntarily collaborate to provide coordinated care to Medicare patients.

Private insurers are developing similar programs where providers partner to share best practices, create efficiencies, monitor treatment outcomes, and reduce unnecessary spending. Providers should be incentivized to make care decisions based on something other than simply driving up the volume of services. Outcome-based plans will ultimately do more to control health care spending, while also improving the quality of care for the patients.

Another key goal of the ACA was to improve access to health care for Americans. It partially accomplished this by eliminating pre-existing condition exclusions, prohibiting certain underwriting risk factors, and instituting mandatory coverage categories. However, more can be done to drastically reduce the number of uninsured people in our country and make sure everyone has quality plans available to them.

In turn, plan standardization needs to be concise and consistent in order to alleviate any confusion regarding the exchange. The plethora of plans available is overwhelming, and makes it difficult to make accurate comparisons. The ACA should require all plans on the exchange to be standardized (for example, have all gold tier plans charge the same costs for office visits, lab tests, and deductibles). Once plans are standardized, individuals will be able to more easily navigate the options, and insurers will be compelled to keep premiums at a competitive level.

Access to care is also largely based on subsidizing premiums or out-of-pocket costs. The system in place is needlessly complex and often harms the consumer. For example, advanced premium tax credits are based on projected income and reconciled through personal income taxes. Since annual income is hard to predict for many people, they end up either receiving too little in assistance or have to pay money back.

Fixed-dollar tax credits based on age would be more straightforward to administer, could be used for either employer coverage or coverage on the exchange, and would ease the burden of reconciliation. Subsidies help many people on the marketplace, but they need to be easier to access and understand.

Employers also need relief from the burdensome ACA requirements, and such relief would allow more workers to be covered. The current employee tracking and reporting requirements need to be overhauled and simplified to encourage employers to maintain their plans. Also, employers shouldn't be penalized for offering the best coverage.

Rather, employers should have access to tax subsidies when they offer affordable coverage that meets minimum benefit standards. Employer-provided coverage is generally cheaper than comparable individual plans, so an effort needs to be made to assist employers in offering coverage instead of making it more difficult.

The Affordable Care Act is an incredible piece of legislation in size and scope. It is unlikely to ever be completely repealed, but that doesn't mean acceptance of the status quo. The way forward is a reduction in excessive government bureaucracy and an increased emphasis on how to produce the best treatment outcomes for the lowest cost.

Robert J. Farris is executive vice president and COO of the Ralph C. Wilson Agency Inc. located in Southfield, one of the largest independent insurance agencies in Michigan and a TMTA endorsed provider for all insurance coverages including health, dental, property and casualty, workers' compensation, and more. To find out how the Ralph C. Wilson Agency can save your company money, contact them at 248-355-1414 and mention you are a TMTA member.

State Matching Grants for Small Manufacturers in MI

The Michigan Agency for Energy (MAE) is offering grants to small manufacturers (i.e. 500 or fewer employees) located in Michigan for capital investments in retooling projects resulting in energy waste reduction in their manufacturing processes, and/or manufacturing of clean energy technologies. Proposals are due by December 12, 2016.

Individual grants will range from \$25,000 to \$50,000 and are for manufacturing equipment only. Grantees are required to contribute a 4:1 match in cash or in-kind services and can be for equipment or any other line-item category in the Approved Budget Form. All funds must be expended by December 31, 2017.

Eligible projects must increase energy efficiency of manufacturing processes or result in the manufacturing of energy efficiency technology systems and/or components. Impacted facilities must be occupied and have long range plans of continued use.

All questions must be submitted in writing on or before 5:00 PM, November 21, 2016 and be directed to Roger Doherty at dohertyr1@michigan.gov. You can view the complete Request for Proposals (RFP) at http://www.michigan.gov/documents/energy/MEO_Retooling_RFP_V2_538738_7.pdf.

OSHA Top 10 Safety Violations List

The U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) has announced their top 10 most frequently cited workplace safety violations for fiscal year 2016 (October 1, 2015 thru September 30, 2016).

The announcement was made at the National Safety Council (NSC) Congress and Expo, as it is every year. Deborah Hersman, NSC President and CEO, said "Every year the OSHA Top 10 serves as a guide for employers to address the biggest safety risks facing their employees."

OSHA's Top 10 list of the most frequently cited violations remains essentially the same from year to year with few changes. The top 10 most cited violations for 2016 (with 2015's numbers also listed) are:

- 1. Fall Protection** (1926.501) – 6,721 violations (6,721)

Find health care reform information along with tax and pension limits, insurance forms, required and optional state and federal posters, workers' compensation forms, FMLA and COBRA information and forms, direct links to the OSHA chemical information database and the NIOSHA pocket guide to chemical hazards, and more at www.thetmta.com by mousing over "Information/Networking" on the top navigation bar and choosing "Company Forms & Information."

INFLATION TALK

CPI-W Urban Wage Earners and Clerical Workers

Month	82–84	1967	57–59
Aug	234.909	699.722	813.77*
July	234.789	699.364	813.35*
June	235.308	700.912	815.15*
May	234.444	698.336	812.16*
April	233.438	695.341	808.67*
March	232.209	691.681	804.42*
Feb	230.972	687.995	800.13*
Jan 2016	231.061	688.259	800.44*

CPI-U All Urban Consumers

Month	82–84	1967	57–59
Aug	240.853	721.489	839.08*
July	240.647	720.871	838.36*
June	241.038	722.043	839.72*
May	240.236	719.641	836.93*
April	239.261	716.719	833.53*
March	238.132	713.339	829.60*
Feb	237.111	710.278	826.04*
Jan 2016	236.916	709.695	825.36*

Note: Aug 2016 CPI-W represents a 0.7% increase from one year ago; CPI-U a 1.1% increase.

* Base Year 1957–59 is no longer released. BLS has issued the following conversion factors from the 82–84 year:

CPI-W—.2886674 CPI-U—.2870447

Frequent violations include failure to protect open sides and edges, to prevent falls from roofs, and to cover holes.

- 2. Hazard Communication (1910.1200) –**
5,677 violations (5,192)
Frequent violations include failure to have a written program, inadequate employee education and training, improper or no labels on containers, and no safety data sheets (SDS) or lack of access to them.
- 3. Scaffolding (1926.451) –**
3,906 violations (4,295)
Frequent violations include problems with scaffold construction, improper access to scaffolding surfaces, and lack of guardrails.
- 4. Respiratory Protection (1910.134) –**
3,585 violations (3,305)
Frequent violations include no written respiratory protection program, poor fit-test procedures, unsuitable respirator selection process, and lack of procedures for voluntary use of respirators.
- 5. Lockout/Tagout (1910.147) –**
3,414 violations (3,002)
Frequent violations include poor or no energy control procedures, inadequate worker training, no procedures at all, and inspections not completed.
- 6. Powered Industrial Trucks (1910.178) –**
2,860 violations (2,760)
Frequent violations include inadequate operator training and refresher training, and poor conditions of trucks when returned to service after repair.
- 7. Ladders (1926.1053) –**
2,639 violations (2,489)
Frequent violations include damaged side rails, use of top ladder step or inappropriate ladder for the job, and excessive loads on ladders.
- 8. Machine Guarding (1910.212) –**
2,451 violations (2,295)
Frequent violations include point-of-operation exposures, inadequate or no anchoring of fixed machinery, and exposure to blades.
- 9. Electrical – Wiring Methods (1910.305) –**
1,940 violations (2,404)
Frequent violations include problems with flexible cords and cables, boxes, and temporary wiring; poor use of extension cords; and using temporary wiring as permanent wiring.
- 10. Electrical – General (1910.303) –**
1,704 violations (1,973)
Frequent violations include electric shock and electrocution exposures.

TMTA ENDORSED SERVICE PROVIDERS

Blue Cross Blue Shield/BCN

(Health insurance program)

TMTA contacts:

Bill Percha 586-904-9700 (cell)

Elaine Burger-Laskosky 248-488-0300, ext. 1309

Call-A-Doctor - (Telehealth Program)

Provider contact:

Ed Stines 248-524-3221, ext. 21

CAPTRUST (formerly Freedom One Financial)

(401(k) Retirement program)

Provider contact:

John Young 248-620-8100

Euler-Hermes - (Credit insurance program)

Provider contact:

Jay Poplawski 248-355-1414, ext. 158

John M. Packer & Associates

(Unemployment cost control program)

Provider contact:

Nathan Wiest 800-482-2971

Practical Power LLC - (Electrical savings program)

Provider contact:

Mark Bunting 248-726-7598

Ralph C. Wilson Agency, Inc.

(Insurance management)

Provider contact for Benefits coverages:

Robert Farris 248-355-1414, ext. 109

Provider contact for P&C and WC coverages:

Jay Poplawski 248-355-1414, ext. 158

Reliance Standard/Ameritas

(Life/Dental insurance programs)

TMTA contacts:

Bill Percha 586-904-9700

Stella Krupansky 248-488-0300, ext. 1310

Results Systems Corporation

(Business management consulting)

Provider contact:

Paul Hindelang 248-244-8550

SVS Vision - (Safety & Vision programs)

Provider contact:

Monica Dya 800-611-3683 or www.svsvision.com

Schena Roofing & Sheet Metal Co., Inc. - (roofing)

Provider contact:

586-949-4777

Schooley-Mitchell - (telecom/credit card management)

Provider contact:

Sean Fox 513-683-8881

TMTA receives a benefit from some of its Endorsed Providers when you, as a member, patronize them. This is one way we are able to maintain the level of dues.

Your Association Exclusively Endorses



**Blue Cross
Blue Shield
Blue Care Network**
of Michigan

Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

**Confused about Health Care?
Individual & Group Coverages Available
Contact Bill Percha
at 248-355-1414
(Tell Bill that TMTA sent you!)**



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