



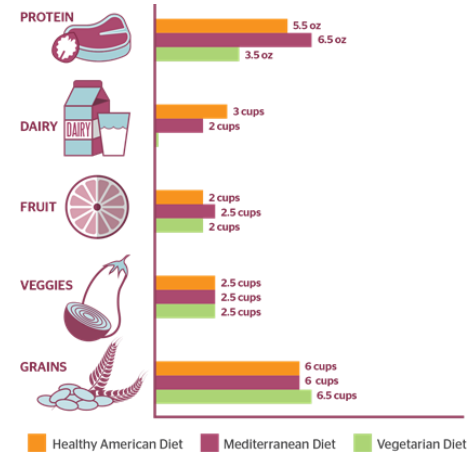
March, 2016

## 3 Diets to Help You Follow the New Dietary Guidelines

The new 2015-2020 federal dietary guidelines focus on the prevention of diet-related chronic diseases instead of just weight management alone. Here are three suggested diets designed around the guidelines to help make them more user-friendly:

- **Healthy American Diet:** A healthier version of what people in the United States typically consume, it suggests 2.5 cups of vegetables, 2 cups of fruit, 6 ounces of grain, 3 cups of dairy and 5.5 ounces of protein daily.
- **Mediterranean Diet:** Heavy on protein and fruits while light on dairy, this diet suggests 6.5 ounces of protein, 2.5 cups of fruit and 2 cups of dairy daily. Like the American diet, it also suggests 2.5 cups of vegetables and 6 ounces of grain daily.
- **Vegetarian Diet:** This diet only suggests 3.5 ounces of protein daily. To replace meat and seafood, it prescribes 7 ounces of nuts and seeds, as well as 8 ounces of tofu and other soy products. It also recommends 2.5 cups of vegetables, 2 cups of fruit and 6.5 ounces of grain.

\*Above examples are based on a 2,000 calorie diet.



## Colorectal Cancer

Colorectal cancer is the third most common cancer and third leading cause of cancer-related deaths for adults in the United States. Occurring in the colon or the rectum, colorectal cancer is often curable if the cancerous polyps are found early.

### Onset

Colorectal cancer begins in the tissues of the colon or rectum. Normally, they grow and divide to form new cells. When this process goes wrong, new cells can form before the body needs them, or old cells do not die. These extra cells can form a mass of tissue creating a tumor. Tumors can be benign (non-cancerous) or malignant (cancerous). When colorectal cancer spreads outside the colon or rectum, it is usually found in nearby lymph nodes and the liver.

### Risk Factors

While the exact cause of colorectal cancer remains unknown, studies have found that the following may increase the chance of developing this type of cancer:

- Being over 50 years old
- The presence of colorectal
- Family history of colorectal cancer
- Smoking
- Type 2 diabetes
- Ulcerative colitis or Crohn's disease
- Heavy alcohol use
- Lack of physical activity
- A diet rich in red meats (beef, liver, etc.) and processed meats (bacon, hot dogs, etc.)
- Being obese

### Testing for Cancer

Screening tests are crucial to finding polyps or cancer before symptoms are experienced. Those who should get screened include those in their 50s and older and those people at a higher-than-average risk of developing colorectal cancer.

There are several screening tests available, including a colonoscopy, a digital rectal exam and a fecal occult blood test. Should a test come back suggesting cancer, a complete physical exam and/or a biopsy will likely be recommended.

### Symptoms

The most common sign of colorectal cancer is a change in bowel habits, such as diarrhea, constipation, finding blood in the stool, or discovering that stools are narrower than usual. Other symptoms include:

- Feeling that the bowel does not empty completely
- Frequently having gas pains or cramps, or feeling full or bloated
- Losing weight for no reason
- Constantly feeling tired
- Nausea or vomiting

### Treatment

The choice of treatment depends on the location of the tumor and progression of the disease. Typical treatment consists of surgery, chemotherapy, biological therapy or radiation therapy.

### Prevention

The best way to prevent cancer in general is to eat well and not smoke. Some factors, such as genetics, cannot be avoided, which is why it is important to be screened. When colorectal cancer is found early, the 5-year survival rate is 90 percent.

## Recent Court Rulings Raise Questions about FMLA

Source: Zywave

The Family and Medical Leave Act (FMLA) clearly states that when an employer knows that a worker taking leave qualifies for FMLA, it must designate the worker's absence as FMLA leave.

Despite this requirement, some employers let employees choose whether to designate their leave as FMLA leave. Two recent court cases have highlighted why this approach could cause problems for your company.

Both cases—[Escriba v. Foster Poultry Farms](#) and [Amstutz v. Liberty Center Board of Education](#)—involved workers who were terminated from their jobs. These employees later brought FMLA lawsuits against their former employers, claiming FMLA interference and retaliation, respectively.

In these cases, both employees requested **not** to use FMLA leave for medical-related absences and instead elected to take another type of paid time off—and both employers allowed them to do so.

In both cases, the courts ruled in favor of the employers because the workers had previously used FMLA leave on several occasions and understood their companies' FMLA processes. So when they declined to use FMLA leave, they knew what they were doing. Not having the leave designated as FMLA leave was their own choice, not a result of their employers' interference or retaliation.

While these employers were successful in defending against the FMLA claims, HR professionals should be wary of similar situations. Letting employees decide whether or not to apply FMLA could be dangerous for your company.

This approach could be seen by an employee, and a court, as the employer attempting to prevent employees from exercising their FMLA rights. Trying to make leave-designation decisions based on which employees understand FMLA procedures could expose your company to administrative and legal issues.

The easiest way to avoid an FMLA lawsuit is to always apply FMLA leave when an employee qualifies for it. Even if a worker chooses to use another type of leave, FMLA leave should run concurrently.

Applying FMLA right away avoids giving employees the option to decline FMLA leave, and can help protect you against future lawsuits while safeguarding your bottom line.



## IRS Clarifies ACA Rules for Employer-provided Coverage

Source: Zywave

The Internal Revenue Services (IRS) recently released Notice 2015-87, which clarified a number of ACA rules for employer-provided coverage, including employer shared responsibility penalties and ACA market reforms.

Significantly, the notice addressed how certain plan features, such as flex credits and opt-out incentives, affect whether an applicable large employer's coverage is affordable.

In the notice, the IRS clarified that the adjusted affordability threshold (9.56 percent for 2015 and 9.66 percent for 2016) applies for the affordability safe harbors for these employers.

The IRS also confirmed the adjusted employer shared responsibility penalty amounts (\$2,080 and \$3,120 for 2015 and \$2,160 and \$3,240 for 2016). The IRS anticipates that adjustments for future years will be posted on the IRS' website.

The notice also supplemented previous guidance on health reimbursement arrangements (HRAs) and employer payment plans. For more information, the notice can be viewed in its entirety [here](#).

### DID YOU KNOW?

On Groundhog Day, House Republicans voted to repeal the Affordable Care Act (ACA) for the 63rd time.

The 241-186 vote fell short of the two-thirds majority needed to override President Obama's veto of the Restoring Americans' Healthcare Freedom Reconciliation Act of 2015 (H.R. 3762). If passed, this bill would have repealed major parts of the ACA and cut federal funding for Planned Parenthood.

The vote was largely seen as a political message intended to help rally Republicans in the upcoming 2016 election.