

What's Inside?

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- Blue Cross & Blue Shield Changing ID Cards
- Women's Health Issues
- Protecting Your Health Care Coverage
- Ask EIT
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Come to the Fair!

Sponsored by Local 134 IBEW/EIT

Last year's Benefit Fair was such a success we're going to do it again. On Saturday, October 23, Local 134 and EIT will host the 2nd annual Benefit Fair in the Boyle Auditorium (Union Hall) at 600 West Washington from 9:00 a.m. to 4:00 p.m. The Benefit Fair will provide you with a great opportunity to meet and speak with EIT and Local 134 staffers.

Also on hand will be representatives from:

- Blue Cross/Blue Shield,
- Global Med Net,
- CIGNA Behavioral Health,
- Caremark/Advance PCS,
- Putnam Investments,
- The Chicagoland Electrical Credit Union,
- Megent Retirement Consultants, and
- Several State and County Agencies

The Benefit Fair makes one stop shopping easy. Not only do you have the opportunity to meet with the vendors and get information from them, but you also can:

- Verify and change your address
- Verify contributed hours
- Get your LMCC Certification and Lockout/Tagout cards
- Get a free flu shot (for covered members, retirees and covered spouses)
- Have a free blood pressure screening
- Replenish your Local 134 wardrobe

So mark October 23 on your calendar and come join us at the Benefit Fair. ✖



Mark Your Calendar!

Date: Saturday, October 23
Time: 9 a.m. to 4 p.m.
Place: Boyle Auditorium (Union Hall)
600 West Washington

Want a Flu Shot? Bring Your ID!

If you want to take advantage of the free flu shot at the Benefit Fair, make sure you bring your Blue Cross Blue Shield ID or a photo ID with your date of birth.

Employer Trustees:

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Michael R. Walsdorf
Kenneth Bauwens
Kevin O'Shea

Union Trustees:

Michael Fitzgerald
Michael J. Caddigan
Samuel Evans
Daniel Meyer
Richard Sipple

Fund Office:

Hours: 8:30 a.m. to 4:30 p.m.
Phone: 1-312-782-5442
Fax: 1-312-782-4431
SUB Fax: 1-312-782-7240

Benefit Notice

We are required by law to notify you annually that mastectomy procedures are covered by the Electrical Insurance Trustees Health & Welfare Plan, including:

- Reconstruction of the breast on which the mastectomy has been performed,
- Surgery and reconstruction of the other breast to produce a symmetrical appearance, and
- Prostheses and treatment of physical complications of all stages of mastectomy, including lymphedemas.

Crossword Puzzle Answers

8. flu
5. Megent
4. screening
2. construction
1. waiver
Down
9. October
7. identification
6. retirement
3. two
Across

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Heading Your Way — A New Blue Cross/Blue Shield Card

In early October, Blue Cross/Blue Shield will issue new medical identification cards. Your new card will combine your existing group number with a new and unique 9-digit identification number and will eliminate the use of your social security number on all BC/BS correspondence. After you receive your new card **destroy** your old one and notify your service providers of the new number. ❌

Protecting Your Health Care Coverage

A Brief Explanation of Self-Pay and Waiver of Self-Pay

If you participate in the Construction or Communication Health and Welfare Plan, your eligibility for insurance coverage is based on the number of contributed hours you work while under covered employment. You must work at least 600 hours within six consecutive months to be eligible for coverage. Once eligible, you must meet one of the two requirements listed below to continue your coverage:

- 300 contributed hours in the most recent contribution quarter of review, or
- 1,200 contributed hours in the most recent four contribution quarters

Once each quarter the EIT staff reviews the contributed hours of every member to determine eligibility for initial or continued coverage. As an example, using the most recent termination date of October 1, 2004, to maintain your eligibility for coverage you would need to have a minimum of:

- 300 contributed hours between April and June 2004, or
- 1,200 contributed hours between July 2003 and June 2004

How Self-Pay Works

Maintaining coverage during good economic times can be fairly easy, but what happens when times are tough and work is slow? You may not know that, in 1991, the Board of Trustees took steps to help protect health care coverage for members who are not working because they've been laid off as a result of a reduction to the work force. A "self-pay" provision was implemented that allows members to pay for the shortfall in their hours so they can continue coverage. This means, you can "buy" your missing hours by paying the current contractor contribution rate for the number of hours you are short. Here's an example of how it works:

Example of How Self Pay Works

	<i>Hours Per Quarter</i>	<i>Hours Per 4 Quarters</i>
Required contributed hours	300	1,200
Actual contributed hours	250	1,000
Shortfall	50	200

In this example, you would pay the contributed rate for the shortfall of 50 hours, the lesser of the two shortages.

What the Waiver of Self-Pay Means

In 1993, the Board of Trustees expanded the “self-pay” provision by permitting, in its discretion a waiver of the self-pay requirement so that members could continue their coverage without making a self-pay contribution. Using the example on page 2, the Trustees could waive or excuse the 50 hour shortfall and the Fund would continue to provide coverage to the members at no additional cost.

Who Is Eligible for Self Pay and Waiver of Self Pay

Today, provided you are eligible (as shown in the chart below), self-pay is available during any quarter, and a waiver of self-pay is granted at the sole discretion of the Board of Trustees. It is important to remember that waivers of self-pay are not a guaranteed benefit under the Plan. During times of high unemployment the Executive Committee of the Board of Trustees takes into consideration a number of factors, including the number of contributed hours during the quarter of review and the number of participants registered and available for work at the Referral Hall before determining if a waiver of self-pay will be offered.

For either Plan, determining if you are entitled to pay for your shortfall hours with a self-pay or if you can receive a waiver of self-pay is based on several things.

First, you must be registered and available for work within the jurisdiction of Local 134. **Second**, you need to meet the requirements of your Plan, as follows:

If you are a:	You are eligible for self pay if:	You are eligible for waiver of self pay if:
Communication Member (You are eligible for self-pay or waiver of self-pay for up to two consecutive quarters)	You were covered for less than one year.	You had at least one year of continuous healthcare benefits before the potential termination date.
Construction Member (You are eligible for self-pay or waiver of self-pay for up to three consecutive quarters)	You collected SUB but worked fewer than 320 hours (50% in the Local 134 jurisdiction) in the six months prior to the layoff.	You collected benefits from the SUB Plan during the four quarters of review, <i>and</i> during the six months before the layoff worked a minimum of 320 hours (50% in the Local 134 jurisdiction).*

* If you chose not to collect SUB during the four quarters of review you could still qualify for a waiver of self-pay if you worked a minimum of 1,040 hours (50% in the Local 134 jurisdiction) during the four quarters before the layoff. If you worked fewer than 1,040 hours (50% in the Local 134 jurisdiction) you are eligible to self-pay.

Helping One Another When Times Are Tough

The hourly contribution rate for Health & Welfare in the Construction Plan was \$7.45 for the most recent period of review and \$5.10 for the Communication Plan. During the period of review for the October 1 eligibility quarter, the shortfall of Construction and Communication members’ hours was 146,671 and 50,110 respectively. That means a loss of revenue to the Plans equaling \$1,092,699 and \$255,563. As is the true spirit of Union and Brotherhood, the contributed hours of those who are working help the Brothers and Sisters who are not by enabling the Board of Trustees to offer the waiver of self-pay. ✕

ASK EIT

Q. *What are the requirements to withdraw funds from the Additional Security Benefit fund?*

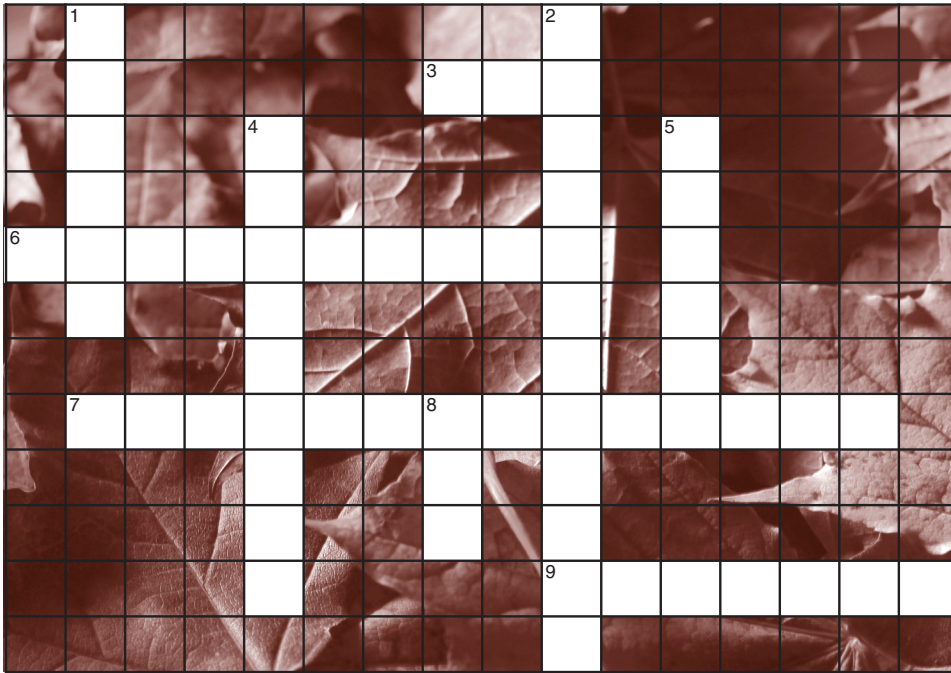
A. Local #134 Communication and Construction members can withdraw the balance of their ASB account under the severance provision once there has been no contribution to their accounts for a minimum of 3 and 9 (respectively) contribution months. A disabled member can withdraw the balance of his ASB account after 6 months, provided he has applied for a benefit from the Social Security Administration and he is not receiving disability benefits from an EIT disability plan. A member upon his retirement may also withdraw funds for certain retiree medical expenses.

Q. *When can I withdraw the money from my Pension Plan No. 5 account? Is there any provision which would let me have it any sooner in an emergency situation?*

A. Pension Plan No. 5 is a multi-employer defined contribution money purchase plan designed for retirement purposes only. You are eligible to retire and have access to your account when you reach age 65 or at age 55 if you have at least 10 years of eligibility service. If you leave before reaching retirement age, funds are available under the terms of the Plan once you have been away from the trade and jurisdiction of Local 134 for a minimum of 24 consecutive months. There are no provisions that would allow the withdrawal of funds any earlier, unless you are disabled and eligible for disability benefits from Social Security or determined to be disabled by the Trustees.

Crossword Puzzle

Hint: Most of these words can be found in this issue of the *EIT Communicator*. (Answers on Page 2)



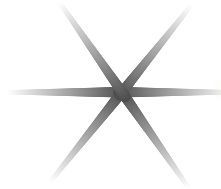
Across

3. The number of consecutive quarters a Communication member needs to be considered eligible for self-pay.
6. What Pension Plan No. 5 is meant to prepare you for.
7. The type of new card Blue Cross/Blue Shield will be sending you.
9. The Benefit Fair will happen in this month.

Down

1. What the Board of Trustees may, at its sole discretion, give to a member so he/she doesn't have to self-pay.
2. One of the groups eligible for self-pay and waiver of self-pay.
4. What you can get at the Benefit Fair related to your blood pressure.
5. One of the vendors who will be at the Benefit Fair.
8. What you can avoid if you take advantage of this offering at the Benefit Fair.

This newsletter contains information on various benefits, but it does not give you all of the details. The official plan documents have all of the details. If there are any differences between this newsletter and the plan documents, the plan documents will govern. If you have any questions about your benefits, please contact the Fund Office at **1-312-782-5442**.



Your EIT Newsletter!

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