

SUMMER 2009

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EMPLOYER TRUSTEES:

William T. Divane, Jr. Kenneth Bauwens I. Steven Diamond Kevin O'Shea Michael R. Walsdorf

UNION TRUSTEES:

Timothy Foley Michael J. Caddigan Samuel Evans James North Lawrence Crawley

MANAGING EDITORS:

Sean Madix Linda Cardone

EDITORIAL COMMITTEE:

Kevin Connolly Lawrence Crawley I. Steven Diamond Kevin O'Shea

FUND OFFICE:

(b) Hours: 8:30 a.m. to 4:30 p.m.

Phone: (312) 782-5442

Fax: (312) 782-4431 SUB Fax: (312) 782-7240

Website: www.fundoffice.org

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New Investment Options for Pension Plan No. 5

he Electrical Contractors' Association and IBEW Local 134 Pension Plan No. 5 (the Plan) is a valuable benefit, providing you with a range of investment options to help you pursue your retirement goals.

Periodically, the Trustees review the investment options in the Plan as part of their continuing effort to stay current with investment trends and participant needs. As a result of a recent review, a number of the Plan's current investment options were removed and new fund choices were added to the Plan, effective as of July 1, 2009.

By now, you should have received information about these changes, and you may also have attended an educational meeting.

If you had an existing balance in and/or had future contributions directed to any of the eliminated investment options as of 2:30 p.m. on June 29, 2009, your future contributions, and in some cases, your existing balances were automatically redirected to investment options under the Plan's new investment lineup.

If you would like to review or change the investment options in which your current balance and future contributions are invested, you can access your account online or over the phone.

Online

- Log on to www.ibenefitcenter.com
- Click on the "My Accounts" tab
- From the "Account Changes" menu, choose "Change How Your Money Is Invested"
- Select whether you would like to change how existing balances are invested, how future contributions are invested, or both
- Follow the prompts to complete your account changes

You will need your User Name and Password to make investment changes online. If you have forgotten or misplaced your User Name or Password, call **(888) PLAN555** to have this information mailed to you.

Phone

- Call (888) PLAN555
- Press 0 to speak with a Service Representative between 7 a.m. and 9 p.m. any business day

You will need your Social Security number and personal identification number (PIN) to make investment changes to your account by phone. If you have forgotten or misplaced your PIN, call (888) PLAN555 to have this information mailed to you.

WHY BCBS MAY NEED YOUR DEPENDENT'S SOCIAL SECURITY NUMBER

This summer, you may receive a letter from Blue Cross and Blue Shield of Illinois (BCBS) that asks you to provide a Social Security number for your spouse or dependent.

BCBS is required by federal law to obtain Social Security numbers for the following groups:

- Spouses, regardless of age
- Dependents age 45 and older
- Dependents who are Medicare-eligible due to end-stage renal disease or another disability

The Centers for Medicare and Medicaid Services (CMS) requires this information to help the organization properly coordinate Medicare payments with other health plans, like the EIT Health & Welfare plans. CMS will use this information to determine the primary payer, which will help to avoid claims processing errors.

Keep in mind that BCBS is committed to respecting your privacy and will not share your data with anyone except authorized recipients, including CMS. If you have any concerns or questions, please contact BCBS at **(800)** 862-3386.



Keep Your Dependents Covered

EIT is proud to offer Health & Welfare coverage to your eligible dependents, which helps keep your family healthy. Dependents who are age 19 through 22 and attend school full-time may be covered under an EIT health plan if they provide a student certification from their school as proof of full-time enrollment. Coverage is provided for 120 days from the last day that EIT has proof of full-time enrollment. Student certifications must be obtained from the school's registrar's office.

Now that school's out for the summer, your dependent's eligibility for coverage becomes a little less clear. Below, we address some of the most common questions, problems and situations encountered by the EIT Benefit Funds eligibility department:

What should I do if my 18-year-old turns 19 during June, July or August?

Dependents can be benefit-eligible for 120 days from their last date of *full-time attendance*. If your dependent has a summer birthday, the Fund Office looks for a *student certification or enrollment verification letter* from their school that confirms their student status from the spring term, prior to turning age 19.

This letter will provide a last date of full-time attendance (usually sometime in April, May or June), which will provide eligibility for 120 days. In September, your dependent will need to provide a student certification letter for the fall term.

My student's 120 days will soon run out, but his or her school won't provide a student certification letter until after that date. Will he or she lose eligibility? This situation commonly happens each September.

Often, a student's 120 days end in early September, but his or her school either has just started or will not yet release full-time status for the fall term.

If this happens to you, **don't panic!** Many schools use the first 10 days of the term to allow students to drop or add classes. Schools wait until that period ends before issuing the student certification letter. We are *very understanding* about this process, and there is a 'grace period' for students that fall into this category.

If your student is in this situation, he or she needs to obtain the student certification letter as soon as possible and forward that information on to the Fund Office. If we don't receive the student/enrollment certification letter, EIT will terminate the dependent's benefits retroactively from the end of the 120-day eligibility period.

I've read about a new law extending health insurance coverage for dependents until age 26. Can I take advantage of this?

A new law in Illinois (HB 5285) allows parents to keep their covered dependents under their health insurance until age 26, with no provision for full-time student status. This law does not apply to EIT participants because we are self-funded, and therefore, EIT's benefits are governed by federal law, *not* Illinois insurance law.

Dependents' eligibility under the Health & Welfare Plan terminate on their 23rd birthday, regardless of their student status.

STUDENT HEALTH COVERAGE: DO'S AND DON'TS

Follow these simple do's and don'ts to ensure that your dependents age 19 through 22 maintain benefit eligibility:

DO

- Provide us *only* a letter from the school's registrar's office that certifies full-time status and the dates of the current term.
- Forward that information to the Eligibility Department at the Fund Office via mail, fax or e-mail.
- Contact the Eligibility Department at (312) 782-5442 (extension 258 or 276) to confirm we received that information.
- Get your students into the habit of getting this information on their own as soon as their school will provide it. Don't wait until a COBRA cancellation letter arrives to provide the Fund Office with the necessary information.

DØN'T

- Send your student's class schedule or tuition bill. Only a letter from the school's registrar's office suffices to maintain benefit eligibility.
- Send us a letter from your student's educational institution that includes the phrase pre-registered on it. It will not be accepted, because we need the information provided after the "drop/add period" that certifies full-time attendance.
- Rely on the Blue Cross and Blue Shield of Illinois Student Certification form online. It does not establish or maintain eligibility status for dependents. Only the Fund Office manages eligibility for participants and their dependents. Please provide the proper information to EIT Benefit Funds, not to Blue Cross and Blue Shield of Illinois.



ENHANCED VISION COVERAGE AVAILABLE

Beginning for purchases made on and after July 1, 2009, in-network vision benefits offered by VSP (Vision Service Plan) have been enhanced to provide you even more choice and flexibility. These enhancements include:

- 30% off unlimited additional pairs of prescription glasses if you purchase them on the same day as your eye exam from the same VSP provider who provided the exam. Additionally, you may receive a 20% discount on additional pairs of glasses, valid through any VSP doctor within 12 months of the last covered eye exam.
- 30% off unlimited non-prescription sunglasses if you purchase them on the same day as your eye exam from the same VSP provider who provided the exam. Additionally, you may receive a 20% discount on additional pairs of glasses, valid through any VSP doctor within 12 months of the last covered eye exam.
- Full coverage for a contact lens evaluation and initial supply of approved lenses (including toric, multifocial and hydrogel lenses) for new and current contact lens wearers. If you choose contact lenses at a price above the covered amount, you may pay the difference between the covered amount and the actual price of the lenses. Additionally, if you choose lenses at a price below the covered amount, you can apply the difference toward additional contact lenses.

Keep in mind your situation may require additional services and premiums when you are fitted for contact lenses. Your VSP provider will determine if you are qualified for this program.

For more details on these enhancements, contact your provider or call VSP Member Services at **(800) 877-7195** Monday through Friday, 8 a.m. to 8 p.m.

Take Charge of Your Health This Summer

On April 1, 2009, the federal government increased its cigarette tax, which boosted the price of a pack of cigarettes by 62 cents per pack. If you smoke a pack per day, you now pay \$226 more per year in taxes alone!

If you use tobacco, now is a great time to quit. *Take Charge's* resources can help you get there. Through EIT's partnership with Free & Clear, you can get access, at no additional cost to you, to a quit coach and medicine to help you quit smoking. In fact, 129 participants and spouses report that they have quit tobacco using the resources offered through *Take Charge*, and 97% of them reported satisfaction with the program.

Take Charge Isn't Just for Smokers...

No matter your health goals — like weight loss, better nutrition or a stronger back — *Take Charge* offers resources to help you achieve them. *Take Charge* also offers valuable rewards. If you complete a NextSteps program, EIT will send you a \$50 Jewel-Osco gift card. If your spouse completes a program, you'll get another \$50 gift card. So far, 1,500 participants and spouses have participated in NextSteps, and 98% of participants who completed a survey reported they were satisfied with the program.

There's still plenty of time to complete a NextSteps program. Start by taking a Health Assessment, which is a confidential, personalized questionnaire designed to help you address your specific health needs. To take a Health Assessment online, visit www.fundoffice.org/takecharge and:

- Click on the "StayWell" tab in the top right corner of the page
- Login to the site and follow the instructions to access and complete your Health Assessment
- Get instant feedback

To request a paper copy, contact the *Take Charge* helpline at **(800) 926-5455**.

After you complete a Health Assessment, you may be invited to participate in NextSteps. If you don't wish to take a Health Assessment, but still want to complete an online NextSteps program, visit www.fundoffice.org/takecharge, click on the StayWell link and log onto the StayWell website. You will find the Healthy Living Program link in Your Toolbox.

Want to Learn More About Take Charge?

To learn more about Take Charge and its resources — including the Free & Clear tobacco cessation program, the NextSteps® program and the Health Assessment — visit www.fundoffice.org/takecharge.

Plugged In Meet Linda Cardone

In this issue of the Conduit, we introduce "Plugged In," a feature that introduces you to members of Participant Services. In this issue, we feature Linda Cardone, the Director of Participant Services at EIT.

As shared with you in the last issue of the *Conduit*, Sherry Frankenbach has decided to enjoy retirement with her husband, Pat, and her former responsibilities have been transitioned to Linda Cardone.

Linda's entire career has been committed to customer service, and she has spent the past 14 years in benefits administration. She came to EIT in October 2008 and has come to understand what she describes as the "depth of dedication and the capacity for compassion that is demonstrated each day by the very capable staff in Participant Services." Linda and her team maintain the departments for ASB/SUB, Disability, Eligibility and the Health Plan.

"Our commitment to you remains the same," Linda said. "We will continue to deliver the level of service you, the membership, deserve. I look forward to working with and getting to know each of you."

MARK YOUR CALENDAR FOR THE 2009 BENEFIT FAIR!

The seventh annual EIT/Local 134 Benefit Fair is scheduled for November 7, 2009. Mark your calendar for this important event, where all active and retired covered participants and their spouses will be able to receive health services at no additional cost to you, including flu shots. Look for more information about other health services available at the Benefit Fair in

In the meantime, if you have questions about the Benefit Fair, please call the Fund Office at (312) 782-5442.

the next issue of the Conduit.

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 (312) 782-5442.

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