

WHAT'S INSIDE?

- We Want You! Join Us for the 14th Annual Benefit Fair
- How Does Your Retiree Health Coverage Coordinate with Medicare? What You Need to Know
- Direct Deposit: Now Mandatory for All Supplemental Unemployment Benefits
- Introducing John Hancock Retirement Plan Services
- Important Changes to Your Health Care Benefits: Be on the Look Out

EMPLOYER TRUSTEES:

Kenneth Bauwens
Jack Block
I. Steven Diamond
Kevin O'Shea
Michael R. Walsdorf

UNION TRUSTEES:

Kevin Connolly
John P. Dalton
Donald Finn
Christopher N. McCormick
Mario Miller

MANAGING EDITORS:

Sean Madix
Tracy Sohst

EDITORIAL COMMITTEE:

Kevin Connolly
I. Steven Diamond
Kevin O'Shea
Frank Peters

FUND OFFICE:

 **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

 **Published by:** EIT

We Want You!

Join Us for the 14th Annual Benefit Fair

You are cordially invited to the 14th Annual Benefit Fair on Saturday, October 22, from 8 a.m. to 2 p.m. at the Union Hall, hosted by EIT and Local 134. Take advantage of this valuable opportunity to receive important health services and benefits information at no cost to you! Here's what you'll find at this year's Benefit Fair:

- **Biometric screening** — This 15-minute screening can provide you with a snapshot of your overall health and may help you prevent serious health problems before they start. A screening professional will go over your results with you — including your blood pressure, cholesterol, blood sugar and Body Mass Index (BMI) — and help you identify any problem areas that could put you at risk for certain diseases and health conditions.
- **Flu shot** — Don't let flu season knock you out this fall. You and your covered spouse can get your flu shot at the Benefit Fair. This year we're offering two flu shots — a high-dose version for participants age 65 and older and a standard dosage for all other participants. The Fluzone high-dose flu shot has been found to be almost 25% more effective in patients 65 and older and has four times the antigen of a regular flu shot to better protect older participants from dangerous flu-related complications.

Complimentary flu shots, tetanus shots and/or pneumonia vaccines are available to covered participants and their covered spouses on a first-come, first-served basis. To take advantage of these free services, you must provide your Blue Cross Blue Shield of Illinois ID card and a current ID that lists your date of birth. *Please note that we are unable to offer any shots to children of covered participants.*


DON'T MISS OUT!

What: The 14th Annual Benefit Fair

When: Saturday, October 22, 8 a.m. to 2 p.m.

Where: Local 134 Union Hall,
600 W. Washington Blvd.

- **Pneumonia vaccine** — The pneumonia vaccine protects you from serious infections in the blood, brain and upper respiratory tract. You should consider getting this free vaccine if you are:
 - Age 19 to 64 with a medical condition such as: kidney disease, asthma, chronic heart or lung disease, asplenia — a condition that weakens the immune system — or you are a tobacco user; or
 - Age 65 or older and it has been five years since your previous pneumonia vaccine.
- Source: Centers for Disease Control and Prevention (CDC).*
- **Tetanus shot** — Tetanus, also known as "lockjaw," is a serious bacterial infection that attacks the brain and nervous system. Thanks to the tetanus vaccine, this infection is now preventable. You should consider getting the shot if you:
 - Did not receive a primary series of tetanus shots as a child;
 - Have not had a tetanus booster in the last 10 years; or
 - Have recently recovered from tetanus.

 **All shots and vaccinations are limited, so please arrive early to take advantage of this benefit!**

(Continued on page 5)

How Does Your Retiree Health Coverage Co

What You Need to Know

It is never too early to learn about how your health care needs will be covered when you retire. Many of us wait until it's too late, and that can cost you money. We would like to arm you with the knowledge you need to help make the transition from being an active electrician to a retiree, a successful one! If you are retiring under Pension Plan 2 and you meet the requirements for Retiree Healthcare benefits under an EIT health plan, you need to know how Medicare will affect you, your spouse and any disabled dependents you may have, as well as when you should apply.

Here are some frequently asked questions we often receive from other participants:

Q What happens to my health benefits if I retire before age 65?

A If you are entitled to EIT Retiree Healthcare benefits, you will continue to be covered until you reach age 65, at which time you must apply for Medicare Part A and Part B. You must apply at least three months prior to your 65th birthday so that Medicare will become your primary coverage for your medical expenses and the EIT Retiree Healthcare Plan will become your secondary coverage. If your covered dependent is not yet entitled to Medicare, EIT will remain the primary coverage for your dependent until they become Medicare eligible. If you are not entitled to EIT Retiree Healthcare benefits, you will need to find insurance to bridge the gap until you reach age 65. You can visit the Marketplace (www.getcovered.illinois.gov or www.healthcare.gov) for coverage options.

Q What happens if I continue working past age 65?

A You are not required to take any action. You may continue to be covered under an EIT health plan (if you remain eligible) until you decide to retire. If you are entitled to EIT Retiree Healthcare benefits, you must apply for Medicare Part A and Part B at least three months prior to your retirement so that Medicare will become your primary coverage for your medical expenses and the EIT Retiree Healthcare Plan will become your secondary coverage.

Q What happens if I am on Medicare and my spouse is still actively working and has family coverage through his/her employer?

A If you are retired and entitled to EIT Retiree Healthcare benefits, your spouse's active family coverage will be primary, your Medicare coverage will be secondary and EIT's Retiree Healthcare coverage will be billed as tertiary. When your spouse's active coverage terminates, Medicare will become primary for you, and EIT Retiree Healthcare coverage will pay as secondary. In this situation, the EIT Retiree Healthcare Plan will be your spouse's primary

coverage until he/she becomes eligible for Medicare. At that time, Medicare will become his or her primary coverage and the EIT Retiree Healthcare Plan will become secondary.

Q What happens if I become disabled?

A If you become disabled, are receiving Social Security disability benefits and are entitled to EIT Retiree Healthcare benefits, you **MUST** apply for Medicare Part A and Part B so that Medicare will become primary coverage for your medical expenses and the EIT Retiree Healthcare Plan will become your secondary coverage. If you have a covered dependent that is not disabled, their coverage will continue with the EIT Retiree Healthcare Plan as primary. If you have a disabled dependent, they must be enrolled in Medicare Part A and Part B so that Medicare will become their primary coverage for medical expenses and the EIT Retiree Healthcare Plan will become their secondary coverage.

Q What happens if I return to work after having received a Social Security disability award?

A You must immediately notify the Social Security Administration (SSA) that you have returned to active employment. If you do not notify the SSA, it may result in an overpayment of your Social Security benefit. It may also result in EIT presuming that you still have Medicare Parts A and B as primary and your claims will be incorrectly processed by Blue Cross Blue Shield of Illinois.

Q What happens if I retire before or after age 65 and have a covered disabled dependent?

A If you are entitled to EIT Retiree Healthcare benefits, your disabled dependent is required to take Medicare Part A and Part B so that Medicare will become the primary coverage for their medical expenses and the EIT Retiree Healthcare Plan will become their secondary coverage when your coverage under the EIT Retiree Healthcare Plan begins.

Coordinate with Medicare?

The most important thing to remember is this: Once you are retired and entitled to Medicare, your EIT Retiree Healthcare benefits will always be your secondary coverage, regardless of whether you are enrolled in Medicare. This means that the EIT Retiree Healthcare Plan will only pay benefits equal to what it would have paid if you were enrolled in Medicare Parts A and B, and you will be responsible for any difference in cost. In other words, the EIT Retiree Healthcare Plan will cover 20% of the medical expenses, leaving you responsible for 80% of the medical expenses.

Q What happens if I am an active, covered participant in an EIT health plan and have a covered disabled dependent?

A As long as you continue to be an active, covered participant under an EIT health plan, your disabled dependent's coverage will remain the same. If your disabled dependent is entitled to Medicare while you are still active, Medicare is secondary.

Q What happens if I am still working and my spouse reaches age 65 before me?

A As long as you continue to be an active, covered participant in an EIT health plan, your spouse is not required to take Medicare Part B. However, if you are entitled to EIT Retiree Healthcare benefits, your spouse must already be enrolled in Medicare Part A and Part B, as Medicare will become primary coverage for your spouse's medical expenses and the EIT Retiree Healthcare Plan will become secondary coverage when you retire.

Q What happens if my covered dependents and I are on COBRA continuation coverage and I and/or my covered dependents are entitled to Medicare?

A You must apply for Medicare Part A and Part B so that Medicare will become your primary coverage for your medical expenses and the EIT Retiree Healthcare Plan (if you are eligible) will become your secondary coverage.

Q What happens if I or my covered dependents are entitled to Medicare, but fail to apply for Medicare Part B?

A Under the EIT Retiree Healthcare Plan, EIT assumes you or your Medicare-entitled dependents are enrolled in Medicare and that Medicare is paying 80% of eligible expenses. Therefore, if you or your Medicare-entitled dependents are also entitled to EIT Retiree Healthcare benefits, the EIT Retiree Healthcare Plan will pay the claims as if you were enrolled in Medicare Part B and will cover eligible claim expenses at 20% (the Medicare-approved allowance). Failure to elect Medicare Part B and notify EIT may result in an overpayment of your claims and you may be responsible for repayment of all claims processed incorrectly.

Q When can I join Medicare Part D?

A You can join Medicare Part D when you first become eligible for Medicare and each year from October 15th to December 7th. In some circumstances you may also be eligible for a two-month special enrollment period.

Q How does Medicare Part D compare to my EIT prescription drug coverage?

A If you are currently covered by an EIT health plan your prescription drug coverage is considered, on average, as good or better than Medicare Part D coverage for 2016. This is called "Creditable Coverage."

Q Can I keep my EIT Health and Welfare coverage and enroll in Medicare Part D?

A No. If you decide to enroll in Medicare Part D, your current EIT prescription drug coverage will be affected. If you decide to join a Medicare drug plan, your prescription drug coverage under the EIT Retiree Healthcare Plan will end.

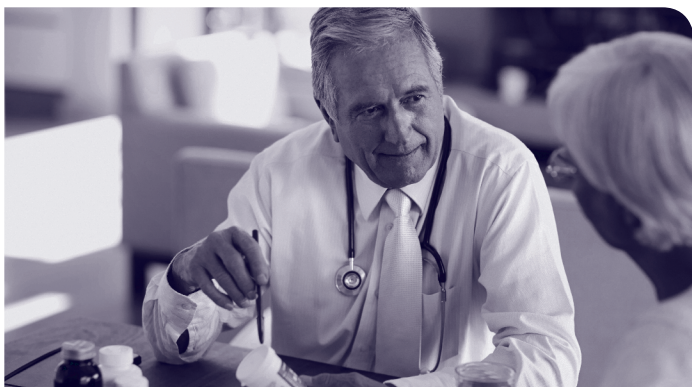
Q What if I am interested in joining Medicare Part D and have prescription drug coverage under the EIT Plan?

A If you are considering joining Medicare Part D, you should first compare your current EIT coverage — including which drugs are covered at what cost — with the coverage and costs of the plans offering Medicare Part D coverage in your area. **If you decide to join Medicare Part D and drop your current EIT Retiree Healthcare Plan coverage, be aware that you will not be able to re-enroll in this coverage.**

For more detailed information about Medicare and your options, you may visit www.medicare.gov or call **1-800-MEDICARE ((800) 633-4227)**. TTY users can call **(877) 486-2048**.

Source: www.medicare.gov.

If you are a Medicare-eligible participant of either the Construction or Administrative Health & Welfare Plan, you will receive a Notice of Creditable Coverage from EIT in mid-October. This Notice provides you with further information regarding Medicare Part D and EIT's prescription drug plan.



Enrolling in Medicare

Generally, most participants retire before they are eligible for Medicare. If this describes your situation, Medicare will automatically enroll you in Medicare Part A (Hospital Insurance) and Part B (Medical Insurance) and deduct the premiums from your Social Security check. Medicare will become effective on the first day of the month in which you turn age 65. When your spouse turns 65, he or she will also automatically be enrolled in Medicare Part A and Part B and the same deductions will be made by Social Security.

You will also be given the option to enroll in Medicare Part D (prescription drug plan). However, the EIT prescription drug plan provides better benefits than Medicare Part D and you are not allowed to be covered by both the EIT prescription drug plan and Medicare for prescription drugs. Therefore, you **should not** enroll in Medicare Part D, because you will lose EIT's prescription drug coverage.

Once you and/or your spouse's Medicare benefits become effective, Medicare will be your primary insurance carrier and the EIT Retiree Healthcare Plan will act as your secondary insurer. All you and your spouse need to do is tell your medical providers that you are now covered by Medicare and **send EIT a copy of your Medicare card(s)** for purposes of coordination of benefits.



DIRECT DEPOSIT: NOW MANDATORY FOR ALL FOR SUPPLEMENTAL UNEMPLOYMENT BENEFITS

Beginning in July, EIT transitioned from paper checks to direct deposit for participants receiving Supplemental Unemployment Benefits (SUB). With this change, you will receive your SUB payments securely and faster than before.

To ensure you are paid in a timely manner, all State Unemployment Compensation **payment details must be submitted by Monday at 4:30 p.m. (CST)** for payment on Friday of that week.

It is important to provide your direct deposit form at the time you apply for SUB. Payments will be delayed until direct deposit information is submitted and approved.

INTRODUCING JOHN HANCOCK RETIREMENT PLAN SERVICES

Your New Pension Plan No. 5 Plan Provider

Effective July 1, 2016, John Hancock Retirement Plan Services took over as record-keeper for Pension Plan No. 5. If you are a Plan 5 participant, you were mailed a detailed transition guide in May of this year. We encourage you to take this opportunity to ensure you're making the most of your plan and the investment options available to you. If you haven't already, visit mylife.jhrps.com and create an online account by clicking "Register now" or call John Hancock at **(800) 294-3575** for more information.



YOU COULD WIN A GIFT CARD!

Receive your ticket for the random drawing when you sign in at the Welcome Desk, and you could be one of five lucky winners of a \$25 Jewel-Osco gift card! We'll draw one name randomly each hour beginning at 9 a.m. You must be present to win.

Talk to Your Providers

Have questions about your benefits? You'll have a chance to talk one-on-one with representatives from the following providers.

- Blue Cross Blue Shield of Illinois
- CVS/Caremark
- EIT Fund Office
- Local 134
- Megent Retirement Consultants
- John Hancock Retirement Plan Services
- VSP

CAN'T MAKE IT TO THE BENEFIT FAIR?

You can receive a complimentary flu shot at a participating pharmacy — now through April 30, 2017. To find a location near you, contact CVS/Caremark's customer service at **(800) 566-5693** or access your online account at **www.caremark.com** and use the Pharmacy Locator. Participating pharmacies will be identified by a "syringe" icon. Be sure to bring a valid photo ID and your prescription card.

Print Plan Forms | Help | Español | Change Text Size

A A A

CVS/caremark

Not Registered?

Get started now to unlock access to your pharmacy benefit on Caremark.com.

✓ Manage Prescriptions

✓ Order Status

✓ Costs & Coverage

✓ Print ID Card

✓ Savings Opportunities

Register Now

Already Have an Account?

Username

Remember me

Forgot your username?

Passwords are cAsE sEnSiTiVe

Forgot your password?

Sign In

Need Refills?

Quick, Easy, Secure.

Date of Birth

mm / dd / yyyy

Mail Service Rx#

Rx # (Must be 9-Digits)

Refill

[+]

Feedback

WOMEN'S HEALTH BENEFIT NOTICE

Each year, we are required by federal law to notify participants that certain mastectomy procedures are covered by the EIT Health & Welfare Plans. These procedures include:

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




221 North LaSalle Street
Suite 200
Chicago, Illinois 60601-1214

PRESORTED
STANDARD
U.S. POSTAGE
CHICAGO, IL
PERMIT NO. 2237

Important Changes to Your Health Care Benefits



Be on the Look Out!

EIT will be making some changes to your prescription drug and behavioral health programs, effective January 1, 2017. You will learn more about these changes in the coming weeks. Watch your mail for more details. 

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**.