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**Office Hours**

Monday-Friday  
 7:00 a.m.-4:30 p.m.

**Phone Hours**

Monday-Friday  
 7:30 a.m.-4:30 p.m.

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# BENEFIT BUZZ



AN OFFICIAL PUBLICATION OF THE ST. LOUIS LABORERS' BENEFIT OFFICE

MARCH 2017 EDITION

## Get ready to Wear your Blue!

**D**id you know that March is Colon Cancer Awareness Month? Well, now you do!

*Show your support for Colon Cancer Awareness by wearing Blue on Friday, March 3rd!*

This is probably not a topic you normally find yourself discussing with your spouse, co-workers or friends, but it actually is a really important thing to talk about.

When colon cancer is discovered early, it is very treatable. Most colon cancers start out as polyps (abnormal growths in the colon/rectum) and then later can become cancerous.

Luckily, you may be eligible to get a yearly preventive colonoscopy, FREE! It may not be something that is at the top of your to-do list, however, taking the time to get your yearly screening now could help you with prevention in the future.

Keep reading to see what other preventive services are covered under the plan!

As you probably are already aware, your benefits allow you to get some preventive

services for FREE, so why not take advantage of them? Below are a list of some of the preventive services offered:

- Screening Mammograms
- Screening Colonoscopies
- Yearly Well Woman Appointments
- Well Child Appointments
- Immunizations/Vaccinations
- Smoking Cessations (2 attempts per year)
- Birth Control
- Yearly Physicals
- Bone Density Test (60 years and older)

The **Benefit Office** encourages all of our eligible members, spouses and dependent children to take advantage of these preventive services. We want you to be healthy and catch any possible problems early. This can help in treatment options and getting the problem taken care of.

If you have any questions regarding preventive services or your eligibility for these services, please call the **Benefit Office** at 314-644-2777 ext. 2 so we can help!



Colon cancer does not discriminate. It affects both men and women

**EQUALLY**



More than **1,000,000** colon cancer survivors live in the United States



Colon cancer is up to **90% BEATABLE** when caught early

# PENSION BUZZ



## Important Information regarding Medicare

We know how confusing Medicare can be, so we wanted to provide a little information so you have a better understanding when you retire.



### **How do I know if I am eligible?**

Most people associate becoming eligible for Medicare with their 65<sup>th</sup> birthday. Although that is one way you will be eligible for Medicare A & B, it's not the only way.

You would also become eligible for Medicare two years after you are awarded a Social Security Disability. In order to be awarded Social Security Disability, you have to be deemed Totally and Permanently Disabled by the Social Security Administration.

### **What happens prior to your 65th birthday?**

Medicare will mail you a red, white and blue Medicare card automatically if you are receiving Social Security Benefits. If you are not receiving Social Security Benefits, you will need to contact your Local Social Security Office to enroll. The **Benefit Office** will mail you a Medicare packet three months prior to your Medicare eligibility date.

### **What happens if you become eligible for Medicare due to a disability?**

If you are eligible for Medicare because you are deemed disabled then you need to notify the **Benefit Office** immediately. **This is very important so we can provide you with your Medicare options.**

### **Does Medicare A & B cost?**

Medicare Part A is free! Medicare Part B however, does have a cost. You would have to check with Medicare on the Part B premium. The Part B premium will be automatically withheld from your Social Security check unless you have declined Part B coverage or are not yet receiving a check from Social Security. Before you decline the Part B coverage, you need to speak with the **Benefit Office** because this could **seriously impact** your insurance coverage with the Laborers!

### **Does my insurance change when I am eligible for Medicare?**

Yes, under our Plan once you become eligible for Medicare you are no longer eligible for the Retiree coverage. However, we do offer four different Medicare supplement plans that you can choose from. **(If you decline Part B, you are not eligible for Retiree or Medicare Supplement coverage.)**

**The most important thing you need to know is when it comes to Medicare questions and your benefits call us at 314-644-2777 x2.** We need to know when you are eligible for Medicare so we can explain your options.

Look for your next Pension check to be mailed on **March 22, 2017**





# Larry's Reminders

\* Have you liked us on Facebook? If not, what are you waiting for? The **Benefit Office** uses Facebook to connect with members and spouses on the plan regarding benefits, updates, office closings, etc. Like our page so you don't miss out!



- \* Have you provided the **Benefit Office** with your most current address, phone number and email address? We need your updated information for mailings, phone calls and emails sent from our office!
- \* Have you checked out [www.stllaborers.com](http://www.stllaborers.com)? On our website, you can log into I-Site and see your hours worked, claims information, pension, etc. You can also view the Benefit Buzz, find a doctor, get Health Fair and Wellness updates, and so much more!
- \* Have a comment, suggestion or concern? Give us a call at the **Benefit Office @ 314-644-2777 ext 2**, or email the office at [benefits@stllaborers.com](mailto:benefits@stllaborers.com). We would love to hear from you on how we can improve our service to you!

## Dependent Custody Letters

Have you received one of these forms in the mail and are not sure why? Let's take a minute to explain.

Dependent Custody forms are sent to members who have children on the plan but are not married, are separated or divorced from the natural parent.

When there is no court order or divorce decree stating one parent has to insure the children, the **Benefit Office** uses this form to coordinate benefits and process claims.

Keep in mind, this is a yearly form that is sent in the month of the member's birthday. The form requires both natural parents as well as any step parents to complete and sign.

Please do not hesitate to call the **Benefit Office** at 314-644-2777 ext 2. with questions!

**LABORERS'**  
2357 59<sup>th</sup> Street • St. Louis, MO 63110 • [www.stllaborers.com](http://www.stllaborers.com)  
Phone 314-644-2777 • Fax 314-646-4440

**Dependent Custody Form**

The medical coverage with the Greater St. Louis Construction Laborers' Welfare Fund Benefit Office contains a Coordination of Benefits (COB) provision. Processing of claim/services your dependent cannot be completed until this COB form has been completed, signed by the member, natural mother and natural father, and returned to the Benefit Office. Your delay or failure to return the COB form could result in the denial of claim/services under the Plan for your dependent(s).

**Member:** Member SS# or ID: \_\_\_\_\_

**Part One - Child:** Social Security: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ With whom does the child reside? \_\_\_\_\_  
Home Address: \_\_\_\_\_ City & State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

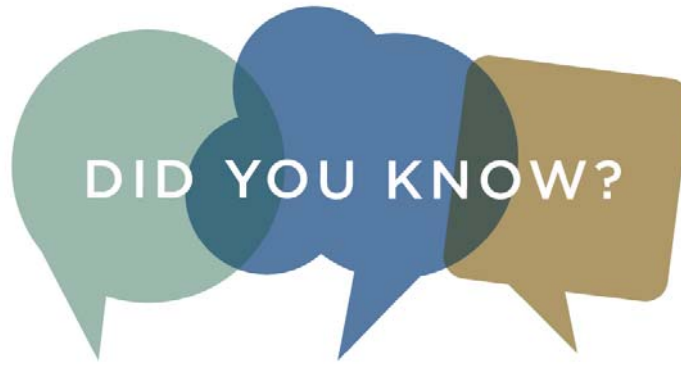
**Part Two - Natural Father's Information:** Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Do you have other insurance coverage:  Yes  No  
Type of coverage:  Single  Family  
Name of Plan: \_\_\_\_\_ Please check all that apply:  Medical  Dental  Vision  Prescription  
Effective Date: \_\_\_\_\_ Member ID: \_\_\_\_\_ Phone Number of Plan: \_\_\_\_\_

**Part Three - Natural Mother's Information:** Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Do you have other insurance coverage:  Yes  No  
Type of coverage:  Single  Family  
Name of Plan: \_\_\_\_\_ Please check all that apply:  Medical  Dental  Vision  Prescription  
Effective Date: \_\_\_\_\_ Member ID: \_\_\_\_\_ Phone Number of Plan: \_\_\_\_\_

**Part Four - Step Parent's Information:** Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
City & State: \_\_\_\_\_  
Do you have other insurance coverage:  Yes  No  
Type of coverage:  Single  Family  
Name of Plan: \_\_\_\_\_ Please check all that apply:  Medical  Dental  Vision  Prescription  
Effective Date: \_\_\_\_\_ Member ID: \_\_\_\_\_ Phone Number of Plan: \_\_\_\_\_

I understand that it is my responsibility to immediately notify the Benefit Office of any changes in the above information. I certify the above statements are true, complete and accurate to the best of my knowledge. I understand if anything is untrue, it could result in my termination and/or termination of my dependents and recoupment by the plan. I authorize any physician, hospital, employer, insurance company, or other information to furnish any information necessary to consider claim(s) on dependents and myself listed above. A photocopy of this authorization should be as valid as the original. If you have not already done so, please provide a copy of the divorce decree and/or court order showing who is responsible for insurance coverage and who has legal custody for the above dependent.

Signature of Member: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Natural Father: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Natural Mother: \_\_\_\_\_ Date: \_\_\_\_\_



- Coordination of Benefits forms are mailed yearly in the month of the member’s birth. (These forms are necessary for the processing of claims).
- Eligible members and dependents can get 2 free dental cleanings per year.
- Out-of-network surgical facilities are not a covered benefit under the Plan.
- If your address or phone number changes, you must call our office to update. (Any changes given to your local does not get transferred to our office).
- Vacation plan year for Laborers’ runs from October-September.
- Vacation plan year for Mason Tenders runs from November-October.
- You are able to get prescriptions in 30 or 90 day fills through retail, or through mail order.

As always, don’t hesitate to call the **Benefit Office @ 314-644-2777 ext. 2** for questions regarding the above information or any other questions about your benefits!

## Insurance Coverage Quarters

How many hours do I need to be covered? This is a question we are often asked, so to better explain, here is an example. If you work 275 hours in the St. Louis jurisdiction during the months of September, October and November, you will have coverage beginning January 1. Any hours worked that are over 275 will be put in your bank and can be used towards the next quarter. You can only bank 275 hours.

QUALIFYING QUARTERS 275 HOURS*	COVERAGE QUARTERS
Sept. Oct. Nov. →	Jan. Feb. Mar.
Dec. Jan. Feb. →	Apr. May June
Mar. Apr. May →	July Aug. Sept.
June July Aug. →	Oct. Nov. Dec.

\*If you work outside of the St. Louis jurisdiction you may need more or less than 275 hours for eligibility.

### Construction Lingo!

Y W V D J G F V C D R S G J U  
 A M E M E S U O R I G G I N G  
 W A K L H M N X V Q Q Z Q L T  
 H S A M D C O G N I T S I O H  
 G O F R R I U L Q O N V D P A  
 I N B E O D N G I O Z G X X B  
 H J T I I V E G T T J V O N A  
 V E N T M V D L R G I Z C T T  
 U J A C K H A M M E R O O V E  
 X X F K A H C A C Y R O N S M  
 L F N P P L L I R D L O H O E  
 B J X S C O S R T S E R B Q N  
 J Z A O L E C P I K U N T A T  
 Z D S T P S A B E O S E J Q L  
 T R K C A A B G I G G K C H G

You know the drill! Find the below words and enter to win a \$25 gift card!

Complete the puzzle and mail to the address on the front page or email [benefits@stllaborers.com](mailto:benefits@stllaborers.com) for your chance to win. Good Luck!

All entries must be completed and received by 2/28/17.

Concrete  
Jackhammer  
Laborer  
Mason  
Highway  
Demolition  
Abatement

Tools  
Drill  
Asphalt  
Welding  
Rigging  
Hoisting




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## Member I-Site

Have you logged into your Member I-Site lately? If you answered no, try to take a minute to log on and make sure all your information looks accurate. If something is wrong, call the **Benefit Office** and we will send the necessary paperwork to get that information updated. While you are logged in, don't forget to take a look at your eligibility, hours reported, pension statement, beneficiary information and medical claims.

If you have not registered for I-Site, or need help accessing your I-Site, the **Benefit Office** can help out. Give us a call!



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Ways to reach the Benefit Office

- Phone: 314-644-2777
- Email: [benefits@stllaborers.com](mailto:benefits@stllaborers.com)
- Website: [stllaborers.com](http://stllaborers.com)
- Facebook: Laborers' Benefit Office



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1	2	3	4
5	6	7	8 Local 110 Union Mtg. at 6:30 pm	9	10	11
12	13	14	15 January Hours Due	16	17 	18
19	20	21	22 \$ Pensioner Payday Local 42 Union Mtg. at 6:30 pm	23	24	25
26	27	28	29	30 Self Pay Due	31	