

THE WIRE



4th District IBEW Health Fund
**KEEPING YOU WIRED TO BENEFITS
NEWS AND INFORMATION**

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SPRING 2016

*The Fund is committed to providing our members and their families with quality benefits at a reasonable cost. To do this—and to maintain the Fund's stability—we regularly review the Fund's financial status and make necessary adjustments. This Spring issue of the Wire includes details about changes to the hourly contribution rates, the Dollar Bank "charge" amount and retiree self-pay amounts. Going forward, the Fund hopes to reduce unnecessary health care costs by conducting a dependent verification audit, which you can read about in the **Fund Business** section. Over the next several months, we'll be working with a third-party contractor on this initiative, with the goal of ensuring that all benefit claims are for eligible participants only. More information about the process is being mailed to your home. Finally, with warmer days on the way, the **Health Corner** provides tips on skin safety. After you review them, double-check your "Sun Safety IQ" in the **Fund Stuff** section.*

FunD Business

The Dollar Bank: You Know You're Covered

Your Dollar Bank is the holding area for contributions made on your behalf by the employer(s) you work for throughout the year. We encourage you to understand how it works because your eligibility for benefits is based on your Dollar Bank balance. It must be at least the required minimum amount for your classification (see related "*Hourly Contribution Rate & Dollar Bank Changes*" article).

While work availability may be hard to predict due to unexpected weather conditions or a downshift in the economy, the Fund recognizes the importance of continued health insurance coverage and wants to make it as easy as possible for you to know when your coverage begins and how long it will last. You can easily track employer contributions and your benefits eligibility through the **Member Dashboard** on our website. If you aren't registered yet, go to our website (www.4thdistricthealthfund.com) and click on "New User Registration" to get started.

Self-Payment Option. Given the ups and downs of the economy, we know there may be times when your Dollar Bank balance falls below the required minimum amount. When this happens, the Fund offers a self-payment option so that benefit coverage for yourself and your family isn't interrupted. We regularly review members' Dollar Banks to ensure there are sufficient balances and will notify you if a self-payment is required to continue your coverage.

It is important to remember that there is generally a two-month processing time between the months you work and the date your coverage becomes effective. The table below illustrates the steps involved in this process.

Timing	What Happens	What This Means
May	Work month	A member works for two employers in May.
June	Employers make contributions	Employers make required contributions to the member's Dollar Bank based on the number of hours worked in May.
July	Eligibility for coverage is determined	The Fund Office reviews the member's Dollar Bank balance to ensure the required amount is available to cover the cost of coverage. If it isn't available, the member is contacted to make a self-payment.
August	Benefit effective date	Benefit coverage is effective for the eligible member.

Hourly Contribution Rate & Dollar Bank Changes

The Board of Trustees is responsible for ensuring that your benefits offer quality and value. Our goal is to provide you with a plan of benefits that is both comprehensive and meets the needs of you and your family. As part of our oversight process, we meet on a quarterly basis to review the state of the Fund and determine what actions are needed, if any, to manage the Plan properly and achieve our objectives. During the December board meeting, the Trustees decided it was necessary to increase the contribution rates as shown below so that we can maintain the Fund's financial stability and continue to provide you with a valuable benefit plan.

- ▶ If you are a regular, active member in the **Building Trades Plan** (also known as the Comprehensive Major Medical Plan) and not in the CW/CE classification, the recommended hourly employer contribution rate will increase from \$6.40 to \$6.60 starting June 1, 2016. (Note: this change does not include the HRA contribution amount.) With this change, the monthly Dollar Bank deduction for coverage will also increase to \$924 starting September 1, 2016.
- ▶ If you are a regular, active member in the **Flexible Choice Plan**, and not in the CW/CE classification, the recommended hourly employer contribution rate increased to \$4.45 in January 2016. (Note: this change does not include the HRA contribution amount.) With this change, the monthly Dollar Bank deduction for coverage increased to \$589 as of April 1, 2016.

Retiree Self-Pay Contributions. If you are no longer actively employed due to retirement or a disability, you may be eligible for retiree benefits. If you elect retiree benefits, you are required to make quarterly, self-payment contributions in order to receive coverage under the Plan. The monthly retiree self-pay amounts effective April 1, 2016, are:

- ✓ Pre-Medicare participants: \$507 (\$1,521 per quarter)
- ✓ Medicare-eligible participants: \$210 (\$630 per quarter)

Initiative to Verify Dependent Eligibility

The 4th District IBEW Health Fund is conducting a dependent eligibility verification of our medical plans to confirm that all dependents currently covered under the Plan are eligible for benefits. By ensuring that our Plan only covers eligible participants and their eligible dependents we can reduce unnecessary health care costs. Otherwise, you and the Fund may be paying claims for dependents who are not eligible for coverage.

The Fund has partnered with Secova, an independent third-party vendor that specializes in dependent verification, to perform our audit. Secova has more than 15 years of dependent eligibility verification experience with Funds like ours. Under federal law, we have a fiduciary obligation to ensure that the Plan's assets are used exclusively for the benefit of eligible individuals so we need everyone to verify that their dependents are eligible to receive benefits. Here is a brief summary on how this process will work:

- ▶ The verification period will last about 60 days.
- ▶ If you have dependents, you will receive a letter requesting that you verify your dependents and provide additional information. The letter will explain the Plan's rules regarding dependent eligibility and list your dependents currently covered under the Plan — and any documentation (such as birth certificates, marriage licenses, etc.) required to confirm their eligibility.
- ▶ To keep your eligible dependents covered under the Plan, you must provide the required documentation as outlined in the instructions included in the letter.
- ▶ Your confidentiality is assured; any information you provide will be handled in a secure manner.

This initiative will assist in our continued effort to offer a full range of quality health benefits while also maintaining the financial security of our Fund. You will receive more details about this shortly. Secova is mailing packets to members' homes the first week of April.

We introduced a new benefit in 2016! The Transition Care Program helps Plan participants stay healthy and avoid readmission after a hospital stay. Services include:

- ✓ General assistance with post-discharge needs
- ✓ Medical appointment scheduling
- ✓ Finding health care providers
- ✓ Coordinating delivery of medical records
- ✓ Connecting you with community resources to facilitate your care and recovery
- ✓ Coordinating prescription fills

For more information, visit the Medical Benefits page on our website at www.4thdistricthealthfund.com or call the Transition Care Line at 1-800-554-0281.



Skin Safety: Sunscreen Matters if You're Out in the Sun

Spring is coming, and that means longer days and more time in the sun. Fifteen minutes of sunshine daily can provide all the vitamin D you need. And, it's great for bone health and an energized immune system. However, the sun can damage your skin after just 20 minutes of exposure, according to the Skin Cancer Foundation.

If you'll be outside for at least 15 minutes, it's important to wear sunscreen with UV (ultraviolet) protection and an SPF (sun protection factor) of 15 or higher. SPF indicates the percentage of sunburn-producing UV rays that are blocked (e.g., SPD 15 blocks about 94% of harmful UV rays). UV rays can damage your cells and cause eye problems, wrinkles, dark patches and skin cancer.



Use Your Fund Medical Benefits

Early detection of melanoma can save your life. Carefully examine all of your skin once a month. Any new or changing spots should be evaluated. The Fund offers medical benefits using the Anthem Blue Cross Blue Shield provider network. Regardless of whether you're enrolled in the Building Trades Plan or the Flexible Choice Plan, when you see a doctor in the PPO network (such as a dermatologist), you'll save money for you and the Fund.

For more information about your medical benefits, visit www.4thdistricthealthfund.com/benefits/active/medical/. To find a network provider, visit www.anthem.com.



The "Summer Resources Guide" on the Member Assistance Plan (MAP) website has more information on how to be safe while having fun in the sun. When you type "summer" in the search box, you'll get all the details. Call 1-877-627-4239 or visit www.guidanceresources.com. If you haven't registered yet, use the Fund ID (MAP_4_IBEW) to get started.

Sun Safety Tips

According to the Centers for Disease Control, you can take the following steps to reduce sun damage:

- ▶ **Use sunscreen all the time—not just on sunny summer days.** Although UV rays from sunlight are the greatest during the late spring and early summer, you should protect yourself all year round. UV rays from the sun can reach you on cloudy and hazy days, as well as bright and sunny days. UV rays also reflect off surfaces like water, cement and sand.
- ▶ **Stay out of tanning beds.** Tanning (using a tanning bed, booth or sunlamp to get tan) exposes your skin to UV radiation.
- ▶ **Stay in the shade, especially during midday hours.** The hours between 10 a.m. and 4 p.m. are the most hazardous for UV exposure outdoors in the continental United States.
- ▶ **Watch the clock.** Be sure to apply sunscreen 20 to 30 minutes before going out; set a reminder on your phone or watch to reapply at least every two hours.
- ▶ **Wear protective clothing.** Wear a hat with a wide brim to shade your face, head, ears and neck. Sunglasses should wrap around and block both UVA and UVB rays. Make sure your children are wearing hats and sunglasses as well.
- ▶ **Get Vitamin D safely.** Rather than sunbathing, you can get a boost of Vitamin D by enhancing your diet. Foods rich in Vitamin D include tuna canned in water, sardines canned in oil, milk or yogurt, beef or calf liver, egg yolks and cheese. You can also take vitamin supplements.
- ▶ **Never look directly at the sun,** even when wearing sunglasses!

FunD Stuff—What's Your Safety IQ?

Sun safety is not just for vacation. Are you sun-safe every day? Take the American Cancer Society's quiz and find out.

- 1** I can't get skin cancer because my normal routine (such as drive to work, hobbies and vacations) doesn't include a lot of time outdoors.
☐ True
☐ False
- 2** I should use sunscreen at football games, even though I only go (and get burned) once or twice a year.
☐ True
☐ False
- 3** If I'm wearing sunscreen, I can stay in the sun as long as I want.
☐ True
☐ False
- 4** A sunscreen labeled SPF 15 blocks more UV radiation than one labeled SPF 30.
☐ True
☐ False
- 5** It's safe to let my children stay in the pool all day if they slip on a T-shirt after a couple hours and reapply sunscreen to their faces, arms and legs.
☐ True
☐ False



Answers: 1. False, 2. True, 3. True, 4. False, 5. False



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