

Cement Masons

Benefit Bulletin

Assisting you in understanding your benefits

Semi-Annual Statement of Account

In September the Fund Office will mail a Statement of Account to each active Cement Mason whose employers reported hours for the period of February 1, 2007 through July 31, 2007.

The Statement of Account is one of the most important documents mailed to you. The statement is a record of the hours you worked during the six-month period stated above. The hours worked and the contributions reported and paid by your employers establish your eligibility for health and welfare, pension, and vacation-holiday benefits.

Review your statement to make sure that all your work hours have been reported. If you believe any information is incorrect or missing, contact the Fund Office. It is recommended that you keep your statement with your other Trust Fund documents.



Is your Address Current?

Informing the Fund Office of a change in address will prevent delays in receiving benefits or information.

- Vacation-Holiday benefit check,
- Pension benefit check,
- Benefit Plan changes.

If you have recently moved or plan to move, update your address with the Fund Office.

Change of Address forms are available at the Fund Office and your Local Union.

Delta Wire Newsletter



Dental Wire is an online dental health information newsletter offered by Delta Dental. This newsletter contains useful information such as:

- Dental health tips,
- How to maximize Delta Dental benefits
- Finding a dentist or using online services,
- Helpful dental terminology,
- Relevant health care industry news,
- Benefits and eligibility information,
- Specifics on coverage, including deductibles, annual maximums, copayments and benefit levels,
- Oral health and wellness tips, etc.

To register for *Dental Wire* visit <http://www.deltadentalca.org>, then select "Sign up for Dental Wire" as shown below.

▶ Just for Delta enrollees!
Sign up for *Dental Wire*, our online dental health newsletter.

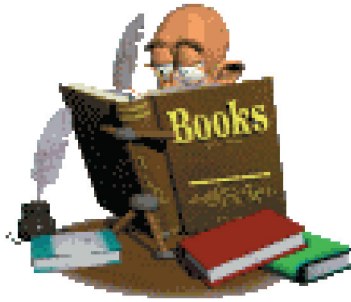


Benefit Field Representative

Effective August 1, Yesenia Vasquez will become the Fund's new bilingual Benefit Field Representative. Yesenia will help participants with benefit claims, completing Trust Fund forms and any other issues that participants may need help with.

If you have a general question or need specific help with a benefit problem, call your Local Union to make an appointment with her.

Plan Terms and Definitions



Blue Cross (PPO) - A network of doctor and hospital providers that contract with Blue Cross under its Prudent Buyer Plan.

Network Provider - A doctor, hospital, and other health care provider contracted to provide services to the members of a group health plan at reduced negotiated rates.

Out-of-Network Provider - A doctor, hospital, or other health care provider that is not part of a contract group. Services with an out-of-network provider increases your out-of-pocket expense.

Health Maintenance Organization (HMO) - A network of doctors who participate in an HMO system similar to Kaiser Permanente. Doctor and hospital benefits are provided by the HMO only.

Health Plan Options

Did you know that active participants can change Medical Plans at any time during the calendar year (maximum of two times)?

Active participants have two medical plans to choose from:

1. The Fund's Direct Payment Plan utilizes *Blue Cross of California's Prudent Buyer Plan*. Under this Plan you have the option to use any doctor of your choice, however, it is to your advantage to select one from the current list of Prudent Buyer Plan network providers. This helps reduce your out-of-pocket costs.
2. Kaiser Permanente is a network of doctors who participate in an HMO system. Under this plan, your hospital and doctor benefits are provided by Kaiser staff at Kaiser locations only.



Designated Beneficiary Changes

It is important that all participants keep their designated beneficiary information up-to-date. Your beneficiary is the person or persons you name to receive payment of your Death or Accidental Death Benefit.

IMPORTANT

Without an Enrollment Form on file, the Fund cannot pay a death benefit to a designated beneficiary. In this case payment is made to a spouse, child, mother or father, brother or sister, or estate.

To change your designated beneficiary information, complete a new Enrollment Form which is available at the Fund Office and your Local Union.

BENEFIT CONTACT INFORMATION



Delta Dental Premier
800-765-6003
www.deltadentalca.org

DeltaCare USA (HMO)
800-422-4234
www.deltadentalca.org

Pacific Union Dental
800-999-3367
www.pacificuniondental.com

Rx Solutions
800-562-6223
www.rxsolutions.com

Vision Service Plan
800-877-7195
www.vsp.com

**Kaiser Permanente
Senior Advantage**
800-464-4000
www.kaiserpermanente.org