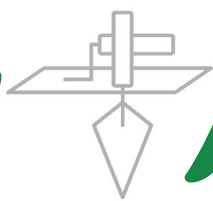
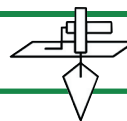


The Cement Mixer



A Quarterly Newsletter for Northern California Cement Masons



Fall 2008 #38

Retired Participants Prescription Drug Coverage and Medicare Part D

Soon you will receive a notice regarding Medicare Part D. This notice will affirm that your prescription drug coverage provided by the Cement Masons Direct Payment Plan is "Creditable." This means that the Cement Masons Plan is expected to pay as much in prescription drug coverage as the standard Medicare prescription drug coverage.

If you enroll in a HMO Medicare Advantage Plan, you are automatically enrolled in a Medicare prescription drug plan. If you enroll in another individual Medicare prescription drug plan, you will be disenrolled from your current Kaiser Senior Advantage Medicare HMO plan.

Enroll for Medicare

If you are close to age 65 and planning to retire, you should apply for Medicare Parts A and B coverage three (3) months before you become 65. You can apply for both Social Security benefits and Medicare Parts A and B coverage at the same time.

To apply, call or visit your nearest Social Security Office or call 1-800-772-1213. Under certain circumstances, you can apply online at www.ssa.gov.

If you plan to retire and do not apply for Medicare Parts A and B three (3) months before you attain age 65 or no later than 3 months after your 65th birthday, you will be required to wait until Medicare's next General Enrollment Period. In addition, you may be required to pay a surcharge for Medicare Part B for the remainder of your life. Further, on the first day of the month in which you or your dependent become eligible for Medicare, the Trust Fund will deduct from its payment benefits payable under Medicare, WHETHER OR NOT YOU HAVE ENROLLED FOR MEDICARE.

In other words, the Trust Fund becomes secondary payor and Medicare primary payor. In addition, you will not be eligible to enroll in Kaiser Senior Advantage.

If you have access to the Internet, you can learn more about Medicare at www.medicare.gov or call 1-800-MEDICARE.

Eye Care

As a rule, you should have your eyes examined at least once every two years. Eye care professionals recommend annual examinations.

Those with a family history of eye disease, diabetes, poor health, or take medications, may require more frequent examinations.

To find a VSP doctor visit: www.vsp.com.

Eye Exam and lenses: every 12 months Frames: every 24 months

Copayments:
Eye exam: \$20
Lenses or frames: \$20

Retiree Optional "Value Plan" with vision benefits is an additional monthly cost of \$14.00.

IMPORTANT

The following notice has been included with this issue of the *Cement Mixer*

Women's Health and Cancer Rights Act of 1998

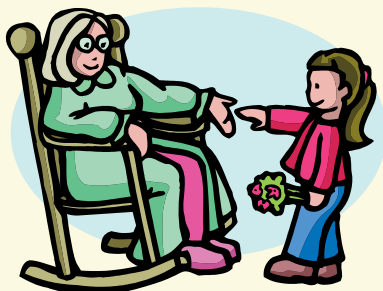


ATTENTION RETIREES

Medical Coverage Marketing Ads

Before you make a decision to enroll in an Individual Medical Plan offered by an HMO, compare “apples to apples”. Compare your current Medical Coverage Plan to the proposed Individual Coverage Plan.

Use the following list as a guide to compare costs and provider services:



- Cost of the Plan
- Copayments/Co-insurance
- Annual Deductible
- Lifetime Maximum
- Doctor Network
- Emergency Room, and
- Plan exclusions.



Use Cement Mason’s Comparison of Benefits summary to assist you in comparing your Medical Coverage Plan and the Individual Medical Plan. This summary is available by calling the Trust Fund Office.

Kaiser Rx Refills

When you have a hectic schedule, the things you need to do can become overwhelming. Kaiser Permanente can save you a trip to the pharmacy when you need to refill a prescription.

Prescriptions can be mailed or picked up. (Mail service is available for any medicine except those containing narcotics or certain liquids that may break, leak, or be affected by temperature changes.)

It’s so easy. You can order refills anytime you want by visiting www.kponline.org or calling the phone number on your prescription label. You need your Kaiser Permanente medical record number, the prescription number for each medication, and credit card number with expiration date. Orders are shipped free and should arrive within 5 to 7 business days.

Direct Payment Plan Prescription Drug Benefit

You may have your prescriptions filled at any contracting pharmacy by presenting your prescription drug card and paying a copayment for generic drugs. If you or your physician choose a brand name drug over a generic, you will be responsible for the difference in cost between the generic and brand name drug in addition to the designated copayment. If generic is not available, you are only responsible for the copayment.

*Prescription coverage is administered by Rx Solutions, Inc. providing Retail and Mail Order services as detailed below:

Retail Pharmacy

Copayment amount:
 \$10 per generic prescription.
 \$25 per brand name prescription, plus any difference in cost.
 Maximum Day Supply - 30 days per prescription.

Mail Order Service

Copayment amount:
 \$20 per generic prescription
 \$50 per brand name prescription, plus any difference in cost.
 Maximum Day Supply - 90 days per prescription.

**Cement Masons enrolled in the Kaiser Plan must obtain their prescription drugs through Kaiser Pharmacies.*

Understanding the Direct Payment Plan

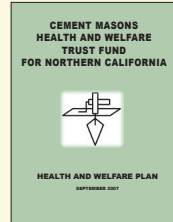
To assist you with understanding the Direct Payment Plan, we offer the following information:

- A summary of the Direct Payment Plan's Coverage on page 28-31 of the Plan Booklet.
- The Trust Fund contracts with Anthem Blue Cross for the use of their Prudent Buyer PPO Network of Providers.
 - Save out-of-pocket costs when you use a provider within this network;
 - Verify that a provider is still under contract with Anthem Blue Cross' PPO Network, **before** you schedule an appointment.
- The Trust Fund contracts with Prescription Solutions for the use of their Pharmacy Network. Prescription Solutions offers Retail and Mail Order services. Service and copayment information as shown on pages 42 and 43 of the Plan Booklet.
- Your Health Plan Identification Card is required for all Health Care services and contracting pharmacies.

For more information about the Direct Payment Plan, visit www.norcalcementmasons.org any time or call us at 707-864-3300 Monday through Friday from 8:00AM to 5:00PM. For the most recent PPO directory log on to Anthem Blue Cross of California's visit: www.anthem.com/cal.

Summary Plan Description Booklet for the Health and Welfare Plan includes:

Information on Eligibility, Coverage under COBRA, Dental and Vision Benefits, Death Benefits, Hospital and Medical Benefits, Utilization Review, Benefits Required by Law, Comprehensive Medical Benefits, Case Management Program, Prescription Drug Benefit, Substance Abuse Treatment Benefits, General Exclusions and Limitations, Third Party Liability, Claims and Appeals Procedures, Privacy of your Health Information required by the Health Insurance Portability and Accountability Act and Employee Retirement Income Security Act of 1974, and the Rules and Regulations of the Direct Payment Plan, and more.



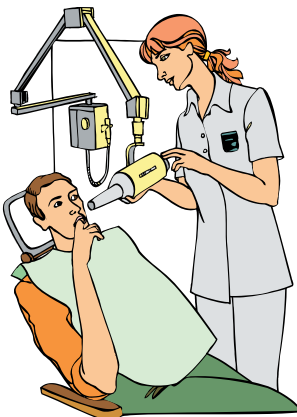
Anthem Blue Cross Prudent Buyer Provider Directory includes:



Physician Specialties, Board Certification and Hospital Codes, Provider Listing and Index of Participating Providers by name.

Delta Dental Preferred Provider Organization (PPO) Benefit

Delta Dental PPO offers a benefit that allows you to save out of pocket costs and stretch your benefits every time you use a PPO dentist. Ever wonder what the advantage is for selecting a dentist from the PPO network?






Consider that orthodontic services (for dependent children only) may be the largest single dental expense a patient incurs in his or her lifetime. By using a Delta Dental PPO orthodontist you can save an average of \$1,200 to \$1,500.

Participants who use the Delta Dental PPO dentists for routine check ups can reduce their costs more than 33%. Participants who don't use Delta Dental dentists in their PPO network will pay more for usual charges with an out of network dentist.

For a list of the most recent PPO dentists in your area, contact Delta Dental or log onto their website at: www.deltadental.org.

Retiree Optional Delta Dental Plan benefits is an additional monthly cost of \$64.00.

CALENDAR

On or About This Date	We Will Mail	You Should
October 29	November 2008 Pension Benefit Check	Retain check stub for your records.
November 25	December 2008 Pension Benefit Check	Retain check stub for your records.
November 27 & 28	Thanksgiving 	The Trust Fund Office will be closed in observance of this Holiday
November 28	Vacation/Holiday Benefit Check	Interested in having future Vacation benefit checks deposited electronically? Contact the Vacation Department at the Fund Office.
December 25	Christmas Day  	The Trust Fund Office will be closed in observance of this Holiday
December 29	January 2009 Pension Benefit Check	Retain check stub for your records.

REMINDER

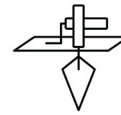
ELIGIBILITY FOR HEALTH AND WELFARE COVERAGE

You *maintain* eligibility when:

- you have a minimum of 300-hours in the hour bank.

You *lose* eligibility when:

- you have less than 300-hours in the hour bank,
- you work for an employer not covered by a Cement Masons' Master Agreement, or
- you enter or re-enter military service full time.



Contacting The Fund Office



Cement Masons Trust Funds
220 Campus Lane
Fairfield, CA 94534-1499



(707) 864 - 3300
or Toll Free
(888) 245 - 5005

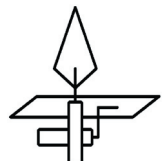


Internet Web site:
www.norcalcementmasons.org

The Cement Mixer is published by the Northern California Cement Masons Funds Administration, Inc. Its purpose is to provide you and your family with information about the various benefits available to eligible participants and how to effectively use those benefits. It is not intended as a substitute for official Plan documents. Your rights as a Plan Participant or Beneficiary can only be determined by consulting the actual text of the Plan Booklet. Please submit any comments or suggestions to the address listed above.

The Cement Mixer
www.norcalcementmasons.org

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for Northern California**
220 Campus Lane
Fairfield, California 94534 -1498
Telephone: (707) 864-3300 or Toll Free (888) 245-5005

**ANNUAL NOTICE
Women's Health and Cancer Rights Act of 1998**

To: ALL PLAN PARTICIPANTS COVERED UNDER THE ACTIVE AND
RETIRED PLANS

The Cement Masons Health and Welfare Trust Fund is required to provide you annually with the following notice that applies to breast cancer patients who elect to have reconstructive surgery in connection with a mastectomy.

Under Federal Law, group health plans, insurers and HMO's that provide medical and surgical benefits in connection with a mastectomy must provide benefits for reconstructive surgery, in consultation with the attending physician for:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to provide symmetrical appearance and;
- Prosthesis and treatment of physical complications at all stages of the mastectomy, including lymphedemas.

This coverage is subject to the Plan's deductibles, coinsurance or copayment provisions.

If you have any questions, please contact the Fund Office at (707) 864-3300 or toll-free at (888) 245-5005 or you may email us at customerservice@norcalcementmasons.org.

Sincerely,

Board of Trustees