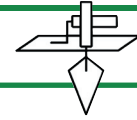


The Cement Mixer

A Quarterly Newsletter for Northern California Cement Masons



Fall 2009 #42

Divorce Affects Retirement Benefits

If you become divorced, the benefits you earned while you were married to your former spouse may be divided as part of your marital settlement agreement. Dividing your benefits with a former spouse requires a court order referred to as a Qualified Domestic Relations Order (QDRO). There are certain legal requirements and restrictions that must be satisfied before a court order is determined to be "Qualified". The Trust Fund Office provides a model and guidelines for drafting a QDRO but, does not provide legal advice.

Once the Trust Fund Office is provided a copy of an order that is considered to be "Qualified" and endorsed by a Court, the Trust Fund Office is required to comply with the order. It may direct that a portion of your retirement benefits be awarded and paid to your former spouse as her marital property share at the time of your retirement or prior to your retirement. In fact, the rights of your former spouse to any share of your retirement benefits as set forth under the QDRO, will take precedence over any claims of your current spouse at the time of your retirement or death. It is recommended that you contact the Trust Fund Office regarding your Pension and Annuity Plans' QDRO procedures.



Breast Cancer Risk Factors



A "risk factor" is anything that increases your risk of developing breast cancer. Risk factors you cannot control include age, family history, and medical history. Risk factors you can control include your weight, physical activity, and alcohol consumption.

If you are curious or concerned about cancer risk factors, talk with your doctor. If there are steps you can take to lower your risk of breast cancer, your doctor may be able to help you come up with a plan.

Complete screenings as directed by your doctor and to adapt your lifestyle to reduce your risk factors.



Designated Beneficiary Changes

A beneficiary is the person or persons you name to receive the payment of your Death or Accidental Death Benefit.

It is important to update Beneficiary information for all significant life events such as

- Marriage,
- Divorce,
- Birth or Adoption, and
- Death.



To designate or change beneficiary information, complete an Enrollment Form, available from the Trust Fund Office.

IMPORTANT

In this issue of the *Cement Mixer*:

- Medicare Part D Creditable Coverage Notice*
- Women's Health and Cancer Rights Act of 1998 Notice*

*Notice may not pertain to you.



Reminder

Health and Welfare Eligibility

You maintain eligibility when:

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

You lose eligibility when:

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



Plan Year Deductible

The amount you pay out-of-pocket in a Plan Year before the Direct Payment Plan starts paying medical expenses

Plan Year Deductible:
\$150 per person, up to
\$450 per family.

Plan Year begins on
September 1 of each year.

Divorce and Health and Welfare Benefit Coverage



If you divorce, your former spouse is no longer covered under the Health and Welfare Plan. It is important to remove your spouse from the Plan as soon as the divorce is final. To remove a former spouse, complete a new Enrollment Form and provide a copy of the Final Dissolution of Marriage to the Trust Fund Office.

Soon after, you or your former spouse will receive a COBRA notification letter as required by law. Your former spouse has the option to continue Plan coverage for up to 36-months by making self payments.

If payment is made on any claim for your former spouse after the divorce is final, you will be held responsible for repayment of that claim.

Eating the Right Foods for All-Day Energy



Having plenty of energy to meet the demands of your job and personal life, start with your diet. To maintain your energy level, your body breaks down the food you eat into glucose (blood sugar) the body's main fuel and sends a steady stream of it to your cells.

Fact: "To feel energized throughout the day, your blood glucose level should stay within a certain range," says Neva Cochran, M.S., R.D., a nutrition consultant. "If your blood glucose drops too low, which can happen if you go too long without eating, you're going to feel lightheaded and lethargic." With this in mind, here's how to eat for all day energy and keep your blood glucose level stable. Don't skip meals. Not eating meals is one of the fastest routes to low blood sugar.

To keep your blood glucose from dipping, and thus zapping your physical and mental energy, eat three meals or six smaller meals a day consistently and don't go more than four hours without eating something.

Make sure your meals include a mix of complex carbohydrates such as grain products, fresh vegetables and fruit, beans, lentils and other legumes, protein and some fat. If you experience an energy low that makes you feel shaky or keeps you from focusing on your work, opt for a carbohydrate rich snack, such as a whole grain breakfast bar or a glass of fruit juice.



Direct Payment Plan Prescription Drug Program

Generic vs. Brand Name



Using Prescriptions Solution's *Mail Service Pharmacy* (if you take medications on a continual basis) or purchasing generic drugs over brand name drugs will save you money.

Generic drugs are reviewed and approved by the United States Food and Drug Administration (FDA) and are required to have the same active ingredients, quality, strength, purity,

and stability as brand name drugs. Basically, generic drugs are copies of brand name drugs.

Generic drugs do not take longer to work in the body. Generic drugs do deliver the same active ingredient, in the same amount of time as brand name drugs. Ask your pharmacist or doctor if there is a generic version of the medication you are prescribed.

Retail (Participating Pharmacy)*

1 copayment = 30-day supply

Copayment:

\$10 generic

\$25 formulary brand name

Mail Service

2 copayments = 90-day supply

Copayment:

\$20 generic

\$50 formulary brand name

**When using a Retail Pharmacy, the copayment for the fourth prescription fill and thereafter, will double for the same 30-day supply.*

If a generic equivalent is available and Participant or Physician prefer brand name, Participant is responsible for the difference in cost between generic and brand name in addition to the copayment.

Vacation/Holiday Payout

Participants covered under the Vacation/Holiday Trust Fund receive a "Statement of Account" every March and September listing work hours for a six month period.



We suggest you keep all your paycheck stubs, and review the Vacation/Holiday "Amount in Dollars" listed on the Statement for accuracy. Contact the Trust Fund Office should you notice any errors.

Please note that the dollar amount in the Vacation/Holiday column will be *less supplement dues* if you have authorized such to be deducted.

The Vacation/Holiday check mail date is November 30.

Medicare Part D Creditable Coverage

Retired Participants

Your prescription drug coverage provided by the Direct Payment Plan is considered "creditable".

This means that the Direct Payment Plan pays as much in prescription drug coverage as the standard Medicare prescription drug coverage.

If you are enrolled in an HMO Medicare Advantage Plan, you are automatically enrolled in a Medicare prescription drug plan.

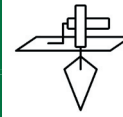
If you enroll in another individual Medicare prescription drug plan, you will be disenrolled from your current (Kaiser Senior Advantage) Medicare HMO plan.

You can find more information about Medicare Part D at the Medicare Web site at www.medicare.gov.



CALENDAR

<i>On or About This Date</i>	<i>We Will Mail</i>	<i>You Should</i>
October 28, 2009	November 2009 Pension Benefit Check	Retain check stub for your records.
November 24, 2009	December 2009 Pension Benefit Check	Retain check stub for your records.
November 26-27, 2009	 <i>Thanksgiving</i>	The Trust Fund Office will be closed in observance of this Holiday
November 30, 2009	Vacation/Holiday Benefit Checks	Complete a Change of Address Form if you have recently moved.
December 25, 2009	 <i>Christmas Day</i>	The Trust Fund Office will be closed in observance of this Holiday
December 29, 2009	January 2010 Pension Benefit Check	Retain check stub for your records.



Contacting The Fund Office



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



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

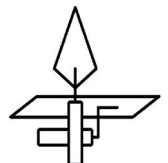


Internet Web site:
www.norcalcementmasons.org

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.

www.norcalcementmasons.org
The Cement Mixer

Northern California Cement Masons
Funds Administration, Inc.
220 Campus Lane
Fairfield, CA 94534



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NOTICE OF CREDITABLE PRESCRIPTION DRUG COVERAGE

This document is to serve as your Notice of Creditable Prescription Drug Coverage, as required by law.

To: All Participants of Cement Masons Health and Welfare Trust Fund for Northern California

This Notice is for individuals with Medicare. If you or any of your eligible family members are now or will become eligible for Medicare during the next 12 months, read this Notice carefully and keep it where you can find it. If you are not currently eligible for Medicare or will not be eligible for Medicare during the next 12 months, you may disregard this Notice.

This Notice has information about your current prescription drug coverage with the Cement Masons Health and Welfare Trust Fund and prescription drug coverage available to individuals **with Medicare**. It also explains options you have under Medicare's Prescription Drug Program (i.e. Medicare Part D), which may help you decide whether or not you want to enroll in Medicare Part D.

IMPORTANT POINTS TO KEEP IN MIND:

1. Medicare prescription drug coverage first became available in 2006 to all individuals eligible for Medicare. Coverage was made available through Medicare Prescription Drug Plans and Medicare Advantage Plans **that offer prescription drug coverage**, such as Kaiser Senior Advantage. All Medicare Prescription Drug Plans provide at least a standard level of coverage set by Medicare. Some plans may offer more coverage for a *higher monthly premium*.
2. The Cement Masons Health and Welfare Trust Fund has determined that the prescription drug coverage provided by the **Direct Payment Plan** is "creditable". Creditable means that the value of the prescription drug benefits offered by the **Direct Payment Plan** is, on average for all Plan Participants, at least as good as standard Medicare prescription drug coverage. That means the **Direct Payment Plan** is expected to pay as much in prescription drug coverage as the standard Medicare prescription drug coverage.
3. **Retired Cement Masons and Dependents Enrolled in Kaiser Senior Advantage offered through the Cement Masons Health and Welfare Trust Fund:**

IMPORTANT INFORMATION

As enrollees in a Medicare Advantage Plan (i.e. Senior Advantage), you are automatically enrolled in a Medicare Prescription Drug Plan. **Caution: If you enroll in another, individual Medicare Prescription Drug Plan, you will be disenrolled from the Kaiser Senior Advantage Plan. You may not be enrolled in a secondary Medicare Prescription Drug Plan in addition to the Kaiser Senior Advantage Plan. If you are interested in another Medicare Prescription Drug Plan, you should call the Trust Fund Office to see what effect it will have on your current medical coverage before you make the decision.**

4. Remember, if you are a Retired Cement Mason or a dependent of a Retired Cement Mason, you must enroll in Medicare Parts A and B **once you are Medicare eligible**. If you do not, you will not receive the maximum hospital and medical benefits, regardless of which health plan you choose.

Because your existing prescription drug coverage under the **Direct Payment Plan** is, on average, at least as good as standard Medicare prescription drug coverage, you can keep your prescription drug coverage under the **Direct Payment Plan** and you **do not need to enroll in the Medicare Prescription Drug Program (Medicare Part “D”)**. If you decide to enroll in Medicare Part D coverage at some future time, you will not be required to pay a higher premium because you had a Prescription Drug Plan (i.e. under the **Direct Payment Plan**) that was “**creditable**.” As long as you are enrolled in a creditable Prescription Drug Plan when you initially became eligible for Medicare and **you maintain that coverage**, you will not be penalized with a higher premium once you do enroll in Medicare Part D. **Exception - See Below: “What happens if you lose or drop your coverage in the Cement Masons Plan.”**

Individuals can enroll in a Medicare Prescription Drug Plan when they first become eligible for Medicare and every year thereafter between November 15th and December 31st. Beneficiaries whose group coverage expires may be eligible for a Special Enrollment Period to sign up for a Medicare prescription drug coverage.

YOUR CHOICES IF YOU ARE ENROLLED IN THE DIRECT PAYMENT PLAN ARE:

1. **DO NOTHING.** You can keep your current prescription drug coverage with the Cement Masons Health and Welfare - **Direct Payment Plan**. You do not have to enroll in a Medicare Prescription Drug Plan.
2. **ENROLL IN ONE MEDICARE PART D PLAN.** You can keep your current prescription drug coverage under the **Direct Payment Plan** and enroll in **one** Medicare Prescription Drug Plan (**remember**, though, this does not apply if you are enrolled in the Senior Advantage Plan). **If you decide to enroll in a Medicare Prescription Drug Plan, you should understand that you must pay the Part D premium out of your own pocket.** Further, there will be no reduction in the monthly premium you pay for hospital/medical/prescription drug coverage through the Trust Fund. The Trust Fund will not separate the cost of prescription drug coverage from the total premium you pay for the **Direct Payment Plan**. If you are interested in enrolling in a Medicare Prescription Drug Plan, you should compare your current coverage, including the drugs covered, with the coverage and cost of individual Medicare Prescription Drug Plans in your area.

WHAT HAPPENS IF YOU LOSE OR DROP COVERAGE IN CEMENT MASONS HEALTH AND WELFARE TRUST FUND AND YOU DO NOT ENROLL IN A MEDICARE PART D PRESCRIPTION DRUG PLAN?

If you lose or drop your coverage in the Cement Masons Health and Welfare Trust Fund and you do not enroll in a Medicare Prescription Drug Plan, **you may be required to pay a higher premium as explained below:**

If you lose or drop coverage in Cement Masons Health and Welfare Trust Fund and you wait 63 days or longer before enrolling in a prescription drug coverage that is at least as good as Medicare’s prescription drug coverage, your monthly premium will increase at least 1% per month for every month you did not have that coverage.

For example, if 19 months pass without your having **creditable** prescription drug coverage, your monthly premium for Medicare (Part D) prescription drug coverage will be at least 19% higher than what you would have paid had you obtained coverage **before the 63 day lapse**. In addition, you may be required to wait until the next November to enroll.

FOR MORE INFORMATION CONCERNING THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE CONTACT THE TRUST FUND OFFICE:

You will receive this Notice annually and at other times in the future (such as before the next period you can enroll in Medicare prescription drug coverage, or if the coverage provided by the Cement Masons Health and Welfare - **Direct Payment Plan** changes). You may also request a copy of this Notice at any time.

MORE INFORMATION CONCERNING YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE:

More detailed information on Medicare plans that offer prescription drug coverage is available in the Medicare and You Handbook. All persons enrolled in Medicare will receive a copy of the handbook in the mail each year from Medicare. Medicare beneficiaries may also be contacted directly by Medicare approved Prescription Drug Plans. For more information on Medicare Prescription Drug Plans:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program for personalized help. (See your copy of the Medicare & You handbook for the telephone number.)
- Call 1-800-MEDICARE (1-800-633-4227). TTY USERS SHOULD CALL 1-877-486-2048.

For people with limited income and resources, extra help paying for a Medicare Prescription Drug Plan is available. Information about this extra help is available from the Social Security Administration (SSA) online www.socialsecurity.gov, or call at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Notice. If you enroll in one of the new Medicare approved Prescription Drug Plans, you may be required to provide a copy of this Notice when you enroll to show that you are not required to pay a higher premium.

Date: October 15, 2009

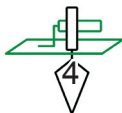
Name of Sender: Cement Masons Health and Welfare Trust Fund for Northern California

Contact: Mr. Edward Smith, Fund Manager

Address: 220 Campus Lane, Fairfield, CA 94534-1499

Phone Number: 707-864-3300 or Toll-Free 888-245-5005

In all cases, the Cement Masons Health and Welfare Trust Fund for Northern California reserves the right to modify benefits at any time, in accordance with applicable law.



MEDICARE PART "D" - CREDITABLE COVERAGE NOTICE
INSERTED WITH *THE CEMENT MIXER* - OCTOBER 2009

Cement Masons Health and Welfare Trust Fund for Northern California
220 Campus Lane
Fairfield, California 94534-1499
Telephone: (707) 864-3300 or Toll Free (888) 245-5005

**WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998
ANNUAL NOTICE**

To: All Plan Participants Covered under the Active and Retired Plans

Annually, the Cement Masons Health and Welfare Trust Fund is required to provide you with notification 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 and 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