

PENSION

ELIGIBILITY

Vested status is required to qualify for a Pension benefit, payable once the age and service requirements of a Regular, Early Retirement or Service Pension are met.

CREDITED SERVICE

- The *Plan Credit Year* is February 1 through January 31 of the following year.
- Pension Credits measure the time worked in employment covered by the Plan.
- Credited Service is used for vesting purposes based on hours worked within a Plan Credit Year.
- 870 hours in Covered Employment within the Plan Credit Year yields one Year of Credited Service.
- To prevent a *Break in Service*: work at least 300 hours in Covered Employment during a Plan Credit Year.

VESTING

- Minimum 10 years of Credited Service required for Pension at age 55.
- Minimum 5 years Credited Service required for Pension at age 65.
- Vested status earns the participant a non-forfeitable right to a Pension benefit.

BENEFIT UNITS

One Benefit Unit is earned when you work 1,200 or more hours in a Plan Credit Year. Benefit Units are used to calculate a pension benefit amount.

BENEFIT AMOUNT

The monthly benefit of a Regular Pension (payment amount) is based on:

- Amount payable for the total number of Benefit Units earned.
 - ◊ \$50 for each Benefit Unit or fraction earned between February 1, 1959 through February 1, 1980, *plus*
- Percent of Contributions made for work performed.
 - ◊ Applicable percent of contributions made for hours worked beginning February 1, 1980, unless the participant failed to work 300 hours.
- Amount of supplemental benefit.

PENSION BENEFIT REQUIREMENTS

- *Regular*: Age 65, with 5 Years of Credited Service.
- *Early Retirement*: Age 55 – 64, with 10 Years of Credited Service.
- *Service Pension*: Ages 55-61, with 25 Benefit Units, or ages 62-64 with 20 Benefit Units.
- *Disability Pension*: Disabled, under age 65, with 10 Years of Credited Service.
- *Pro Rata Pension*: Combined Credited Service or Combined Benefit Units (700 hours with contributions) earned in this Plan and in a Related Plan.

DISABILITY

- Credited Service and Benefit Units are still earned for temporary disability under Workers' Compensation or State Disability.
- Receive 8 hours of credit for each day of disability.

SUSPENSION OF PENSION BENEFITS

- Pensioners, under age 65, must not work in any employment covered by the Collective Bargaining Agreement with the District Council of Plasterers and Cement Masons or at any other building trade in the Building and Construction Industry.
- Pensioners between the ages of 65-70 and 1/2 are prohibited from working 40 or more hours in a month in a trade or craft in the Building and Construction Industry.

DEATH BENEFITS

- *Pre-retirement Surviving Spouse* - lawful spouse receives survivor benefits.
- *Husband-and-Wife* - lawful spouse receives benefits should the participant die after retirement and if married on the date of retirement for no less than one year prior to death.
- Pensioner's *Lump-Sum Death Benefit* - sum payment of \$100 for each Benefit Unit earned. Payable to surviving spouse, if any, or eligible surviving relatives in the following order: children, parents, siblings or estate of deceased pensioner.

VACATION/HOLIDAY

ELIGIBILITY

Work for an employer covered by the Collective Bargaining Agreement that makes contributions to the Cement Masons Vacation/Holiday Trust Fund for Northern California

REQUIREMENT

Enrollment Form with your current address must be on file at the Trust Fund office.

STATEMENT OF ACCOUNT

- Lists reported hours and Employers who paid into the Vacation/Holiday benefit during the year.
- Retain all copies of Statements and paycheck stubs to verify all hours the participant worked.
- This Statement is mailed:
 - ◊ March (hours worked August through January).
 - ◊ September (hours worked August through July).

PAYMENT SCHEDULE

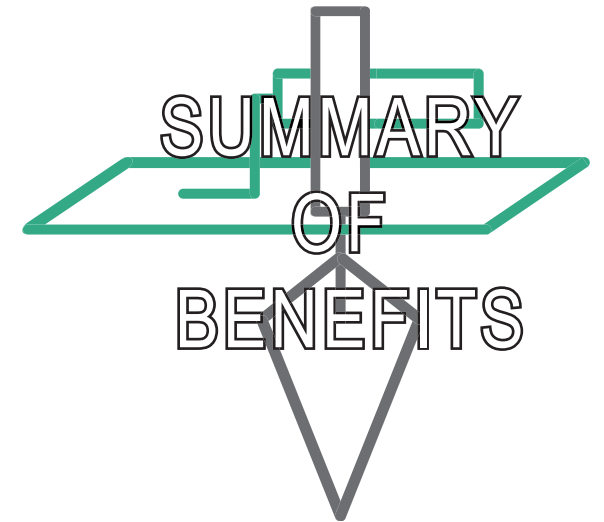
- November 30

BENEFIT AMOUNT

Amount of contributions made to Vacation/Holiday account, less supplemental union dues, in a twelve-month period:

- November check (hours worked August 1 - July 31).

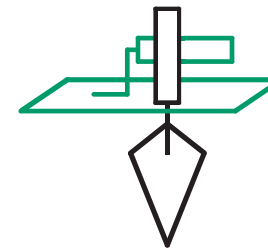
CEMENT MASONS TRUST FUNDS FOR NORTHERN CALIFORNIA



HEALTH & WELFARE (Active Plan) PENSION VACATION/HOLIDAY

DISCLAIMER

This *Summary of Benefits* is a brief introduction of benefits available from the various benefit plans of the Cement Masons Trust Funds of Northern California. This summary is not a complete list of all benefits available, nor does it include the rules and regulations that govern the plans. There are exclusions to medical care coverage under the Health and Welfare Plan, even if a physician recommends a service or procedure. All Plan rules should be reviewed before seeking medical attention. Detailed descriptions of all benefits and the rules and regulations of the plans are available in the Summary Plan Description Booklets.



www.norcalcementmasons.org

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INTRODUCTION

This *Summary of Benefits* will introduce you to the benefits that are available to eligible participants and their dependents under the Cement Masons Trust Funds for Northern California. These benefits are made possible by monthly contributions paid by signatory employers as a result of collective bargaining between Employer Associations and the Northern California District Council of Plasterers' and Cement Masons. Employers currently pay contributions to the following trust funds: Health & Welfare, Pension, and Vacation/Holiday.

HEALTH & WELFARE

ELIGIBILITY

Eligibility begins the first day of the second calendar month, after 300 hours are accumulated in the hour bank. A monthly deduction of 100 hours is subtracted from the hour bank for coverage.

Eligibility is maintained when:

- There is a minimum of 300-hours in the hour bank.

Eligibility is lost when:

- The hour bank balance falls below the 300-hour minimum.
- Work is performed for an employer not covered by a Cement Mason's Master Agreement.
- You enter or re-enter military service full time.

MEDICAL

There are two choices for Medical Coverage:

- The Fund's **Direct Pay Plan**, Cement Masons Health and Welfare contracts with Blue Cross' Prudent Buyer Plan, *or*
- The Kaiser Permanente Plan.

You may change your coverage at any time, for a maximum of two times in one calendar year.

PREFERRED PROVIDER ORGANIZATION (PPO)

A PPO is a network of doctor and hospital providers that contract with Blue Cross' Prudent Buyer Plan.

DIRECT PAY PLAN (PPO)

You are free to use any doctor. For lower out-of-pocket costs, you should use a *PPO* provider from the list of network providers.

- \$20 copayment: office visit.
- \$100 copayment: hospital emergency room visit.
- \$150 per person (\$450 maximum per family) Plan Year deductible.

COMPREHENSIVE MEDICAL BENEFIT

PPO

- 80% of the negotiated rate for medically necessary service.

NON-PPO

- 60% of "usual and customary" charges.

INPATIENT HOSPITAL BENEFIT

Authorized Inpatient Hospital confinements:

PPO

- 80% of the first \$15,000 negotiated rate and 100% thereafter for up to 30 days of hospitalization per period of disability.

NON-PPO

- 60% of the first \$15,000 covered amount and 100% thereafter for up to 20 days of hospitalization per period of disability.

CHIROPRACTIC BENEFIT

- 20 visits maximum per Plan Year.
- \$40 per visit.
- \$300 maximum payable for x-rays per Plan Year.

HEALTH & WELFARE

HEALTH MAINTENANCE ORGANIZATION (HMO)

A HMO is a network of doctors who participate in the HMO. HMO participants pay a standard copayment for services and/or visits.

KAISER PERMANENTE (HMO)

- \$20 copayment per office visit.
- \$10 copayment per generic prescription.
- \$25 copayment per brand name prescription.
- \$100 copayment per hospital emergency room visit.
- Doctor and hospital benefits provided by *Kaiser* only.

DENTAL

You have three choices for Dental care: 1) **Delta Dental Premier** and **Delta Dental (PPO)**, 2) **DeltaCare/PMI (HMO)**, or 3) **Pacific Union Dental (HMO)**.

You may change your Dental Plan September 1 of each year.

DELTA DENTAL PREMIER

- \$100/individual up to \$300/family deductible per Plan Year.
- \$2,000 maximum allowance per person per Plan Year.

DELTA DENTAL (PPO)

The same as *Delta Dental Premier*. The difference is that dentists in the *Delta Dental PPO* network charge lower fees, resulting in less out of pocket costs.

DELTA CARE / PMI PLAN (HMO)

- \$0 deductible.
- Minimal copayments on certain procedures.
- Service provided by *Delta Care* network Dentists only.

PACIFIC UNION DENTAL (HMO)

- \$0 deductible.
- Minimal copayments on certain procedures.
- Coverage with *Pacific Union Dental* network of Dentists only.

PRESCRIPTION DRUG

RETAIL (PARTICIPATING PHARMACY)

- Copayment for a 30 day supply/prescription.
 - ◊ \$10 per generic prescription.
 - ◊ \$25 per formulary brand name prescription*.

MAIL SERVICE PHARMACY

- Copayment for a 90 day supply/prescription.
 - ◊ \$20 per generic prescription.
 - ◊ \$50 per formulary brand name prescription*.

** You pay the difference in cost if brand name is chosen when generic is available.*

VISION - (VSP Value Plan):

- Eye exam and lenses every 12 months.
- Frames every 24 months.

Copayments:

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

DEATH, ACCIDENTAL DEATH, AND DISMEMBERMENT

- \$7,500 - Mason's death.
- \$2,500 - \$5,000 - Mason's dismemberment.
- \$5,000 - (additional) Mason's accidental death.
- \$2,000 - Spouse's death.
- \$100 to \$500 - Dependent child(ren)'s death.