



Plumbers & Steamfitters Local Union 52

NEWS – January, 2019

www.ualocal52.org

****IMPORTANT NOTICE CONCERNING UNION DUES AND TRAVEL EXPENSES**

-While Local 52 encourages you to get the advice of your tax professional, it is our understanding that the Tax Cuts and Jobs Act passed in 2017 suspends all miscellaneous itemized deductions that are subject to the 2 percent of adjusted gross income floor. This change affects un-reimbursed employee expenses such as uniforms, **union dues** and the deduction for **business-related** meals, entertainment and **travel**. **In other words, union dues and un-reimbursed travel expenses are no longer deductible for the purposes of income tax for tax years beginning after December 31, 2017. Therefore, you will not receive a 2018 dues payment statement.**

Wages and Fringe Benefits - At the union meeting in December, the membership voted to allocate the January 1, 2019 raise. The raise was allocated as follows:

\$.75 to Wages – \$28.60 per hour

Reallocation of \$.45 per hour from Health & Welfare fund (due to premium decrease):

\$.35 to Pension fund - \$5.60 per hour

\$.10 to Apprenticeship fund - \$.90 per hour

2019 Dues and Assessments – Dues for 2019 remain the same.

Death Assessments are \$20.00 each, due upon receipt of notice and payable before dues. **The Annual Sick Fund Assessment** of \$20.00 is due before 03/01/2019. If you are enrolled in monthly bank draft, the sick assessment will be deducted on 03/10/19, along with your union dues. Please note: If you are retired, disabled or on reduced dues, you do not pay the sick assessment.

EMAIL ADDRESS – Most communications, including receipts, from the Local are now sent by Email and Robocall. If you have an email address, please be sure we have it on file so that you stay informed. We also try to post all communications and updates on the website.

WELDERS: CONTINUITY FORMS MUST BE SUBMITTED EVERY 6 MONTHS TO KEEP YOUR CERTS CURRENT. YOU ARE RESPONSIBLE FOR SENDING THE FORM BY MAIL, EMAIL OR FAX.

Payment Options

We accept Credit/Debit cards as payment for union dues and assessments. A 2.5% fee applies. Monthly bank draft is also available.

UNION MEETINGS are held the second Saturday of each month at 9:00 am. All members are encouraged to attend. **The more we are involved in our union, the more we act like a union, and the more effective we are as a union.**

PLEASE BE SURE TO KEEP YOUR ADDRESS AND PHONE NUMBER UPDATED.

BENEFITS



Had any life changes lately? Marriage, divorce or new baby? If so, please contact the benefit office immediately, you may need to change your beneficiaries or add/terminate dependents to your health insurance coverage.

HEALTH & WELFARE

We are very pleased to announce, that due to lower claims experience for 2018, the monthly health insurance premium will **decrease** to \$1017.00 effective January 1, 2019. Premium rates are directly affected by the claims incurred each year. The higher the usage of the Plan, the more rates may increase from year to year. Therefore, it is very important that each member and their families continue take an active approach when seeking treatment. Eliminating unnecessary charges will reduce the overall claims and help the Plan maintain a comprehensive benefits package. Please partner with us in controlling the claims costs.

2019 Health, Dental and Vision benefit booklets and summary of benefits and coverage are available to review and print on the Local 52 website under the documents section, health benefits.

Blue Cross Blue Shield of Alabama health insurance- There were no changes to copays or deductibles for 2019. All benefits remain the same with the exception of: Rehabilitative and Habilitative services. Rehabilitative occupational, physical and speech therapy will be limited to a combined maximum of 30 visits per member per calendar year. Habilitative occupational, physical and speech therapy will be limited to a combined maximum of 30 visits per member per calendar year. Please refer to the BCBS Benefit booklet for complete coverage details. You may contact Blue Cross Blue Shield of Alabama at 1-800-292-8868 or online at www.bcbsal.com. Many services are available on the website; view and file claims, find a doctor, manage prescriptions, compare drug costs and find a pharmacy. Blue Cross now offers an APP for mobile devices that includes many of the online services.

Addition of Tel-A-Doc - Teladoc gives you 24/7/365 access to U.S. board-certified doctors through video or phone visits. It does not replace your primary care physician (PCP) but is an affordable option for quality care. **Treat conditions such as • Cold & flu symptoms • Allergies • Bronchitis • Urinary tract infection • Respiratory infection • Sinus problems • And more!** Talk to a doctor, anytime, anywhere. 1-855-477-4549 or Teladoc.com/Alabama.

Dental and Vision coverage remains the same for 2019. These benefits are fully funded by the Plan. There are no additional premiums charged to your hour bank. Guardian Dental - 1-800-541-7846 www.guardiananytime.com
VSP Vision - 1-800-877-7195 www.vsp.com
VSP does not issue id cards. Simply let your network provider know you are covered by VSP and they will verify coverage.

How Can You Help Reduce Costs?

- Ask your doctor before he prescribes a drug; What is the cost? Is there a generic substitute? Doctors will prescribe the most current drug on the market, which will be the most expensive. Normally there is a less expensive drug that will work as effective. **Generic drugs are reimbursed at 100% with no deductible, compared to the Brand name that is reimbursed at 80% after a \$500 deductible.** Several pharmacies also offer many generic drugs for only \$4.00. Doctors have samples of many medications, don't be afraid to ask.

- Make sure you understand how any test, x-ray, mri or procedure relates to the diagnosis and treatment of your illness. And ask if it is necessary for your treatment.

- Don't be afraid to ask your doctor questions. It keeps you informed about your health and may keep your costs down.

- If you are planning a hospital stay, ask your doctor if routine tests can be performed before you are admitted to the hospital.

- Use the Emergency room for Emergencies ONLY. Emergency room costs are almost double that of a visit to your regular doctor or urgent care clinic. Please visit your regular doctor for everyday illnesses.

- Review bills from doctors and hospitals. Ask the hospital for an itemized statement. Bills may contain mistakes. If you find an error, please contact the provider immediately.

- Have outpatient surgery when the procedure can be safely and effectively performed as part of your treatment. Outpatient surgery can spare you a hospital stay, letting you recover in your own home.

- **If you have a chronic disease such as diabetes, asthma, coronary artery disease or congestive heart failure, consider participating in Blue Cross' Care Management program.** This program focuses on managing these conditions to improve your health and wellness.

Health & Welfare Hour Bank and Premiums effective January 1, 2019 - The health & welfare benefit rate of \$6.46 per hour is based on working 160 hours each month to cover the health premium of \$1017.00. For covered members, premiums are deducted from your hour bank on the 1st of each month for the following month (ex: on 01/01/19, premium for 02/01/19 is deducted). Local Contractors are required to remit hours to the Plan by the 15th of the month following the work month (ex: January work hours should be received in February).

Premium notices are mailed around the 15th of each month if your hour bank is depleted. If you receive a premium notice, please do not disregard it...you are receiving the notice because 1) you have been out of work and your hour bank is depleted or 2) you are working out of town and your hours have not been received. Please call the Benefit Office immediately so we can contact the Contractor or Local. However, please note that your health & welfare hour bank insurance coverage is based on **hours received...not hours worked**. Therefore, if you are working out of another Local, have not worked enough hours or hours have not been received by the plan... and you receive a premium notice, you must pay the premium for your health insurance coverage to continue.

IMPORTANT NOTE: When working through another Local, it is normally 2-3 months, sometimes longer, for the Plan to begin receiving hours worked. The health & welfare rate per hour is different for each Local. Therefore, based on that rate you may need to work more/less hours to cover the premium each month. If the rate for that Local is less, then you would need to work more hours to cover the monthly premium. This lower rate could cause a reduction in your hour bank balance and over time may cause you to owe premium out of your pocket. If the rate for the Local is more, then you would need fewer hours to cover the monthly premium and this should help increase your hour bank balance.

The Local 52 website, www.ualocal52.org, contains helpful information about the Local, Training, Health & Welfare, Pension and more. All forms are available for download under the Documents section.

Plumbers & Steamfitters Local Union 52
P.O. Box 211105
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PENSION PLAN

The Rules and Provisions of the Pension Plan remain the same. A Question and Answer Booklet is available on the Local 52 website under Documents/Pension.

Vested Participants may access their account online at workplace.schwab.com, click **Register Now**, and complete the secure user registration process (you will need your hire date) or call Participant Services at **1-800-724-7526**. Representatives are available Monday through Friday, 6 a.m. to 10 p.m. CT.

You can:

- Change your investment elections.
- Reallocate your assets.
- Access retirement planning videos and market insights
- Get professional help for your Plan account.



For additional assistance with investment and retirement options, the Plan has retained the services of a registered investment advisor to assist you in making crucial investment decisions. Please contact Greg Fiore, with Clearview Advisory, at 1-404-477-0593.

How does Retirement under the Pension Plan affect my Health Insurance Coverage?

A **Retired Participant** under the Health & Welfare Plan, is a participant who has received a distribution under the provisions of the Local 52 Defined Contribution Pension Plan. A **Retired Participant** having reached age 65 no longer qualifies to continue health coverage under the Plan, unless he/she is actively employed. To be considered Actively Employed, you must work 160 hours per month. If the Qualified Retired Participant has an Hour Bank Account balance, he may elect it to be used for the following:

- payment of life insurance premiums
- payment of medicare supplement premiums
- payment of medicare supplement premiums for spouse **
- spouse's continued health coverage, in accordance with the Trust **

**The spouse must have been an eligible dependent and covered by the Plan at the time of the Participant's retirement and termination from the Plan.

APPRENTICES – NEXT SCHEDULED CLASSES ARE:

FEBRUARY 16 - 17

FEBRUARY 23 – 24

MARCH 9 - 10

MARCH 23 - 24

APRIL 13 – 14

