



BENEFIT *buzz*

New Benefit Spotlight: Teladoc

We are very excited to introduce our new telemedicine vendor, Teladoc. Teladoc joined the Plan on July 1, 2020. This **FREE** benefit will be available for all Active, Retired and Non-Medicare participants covered under the Plan.

Teladoc offers a quick and convenient option for your general medicine needs without leaving your home. They can help you if you have a cold, strep throat, flu, etc.

When you use telemedicine services provided by Teladoc, these services **will not** be subject to a co-pay, deductible or co-insurance. However, if you use telemedicine services through your own doctor, those visits **will** be subject to co-pays, deductible and co-insurance (unless directly related to an order for a COVID test).

You can access the Teladoc benefit online at www.teladoc.com or by calling 1-800-835-2362. For questions regarding this benefit or other benefits, please call the **Benefit Office** at 314-644.2777 ext. 2.



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St. Louis, MO 63110
(314) 644-2777
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Office Hours

Monday-Friday

7:00 a.m.-4:30 p.m.

Phone Hours

Monday-Friday

7:30 a.m.-4:30 p.m.

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PENSION *buzz*



2020 Pension Check Dates

July 22nd
August 26th
September 23rd
October 28th
November 18th
December 16th

Pension Wall of Fame



Tim Parmenter

He is a member of Local 110 and has been Laboring for 36 years!

After retirement, he is looking forward to relaxing, catching up with family and friends and finally having time for fishing!

**Congratulations
on your
Retirement!**
~Laborers' Benefit Office

PENSION *buzz*



2020 Premium Auto Withdraw Dates

July 24th

August 28th

September 25th

October 30th

November 20th

December 18th

Pension Summary

In the next few days, you will be receiving your Annual Pension Summary in the mail.

Please be sure to take time and review your Pension Summary. If you have any questions regarding your summary, contact the **Benefit Office** at 314-644-2777 ext. 3.

Stay Safe. Stay Well.

Due to the recent closure of our office for walk-ins, we understand it may be more difficult to get your paperwork and/or notarize the required documents. Therefore, we have designated an area at our office that will allow you to drop off and pick up paperwork or get documents notarized without contact.

Simply call our office before coming in and we will guide you through this process. You can reach the pension department at 314-644-2777 ext. 3.

The 2020 Wellness Benefit is back and better than ever!

WELLNESS PROGRAM

We are excited to announce that the Wellness Program with our new vendor, H&H Health Associates, is **NOW OPEN!**

The Wellness Program is available for all eligible members and covered spouses who complete both the **FREE**, one-time H&H Wellness Screening & Wellness Survey. If you complete the Wellness Program no later than December 15, 2020, you will receive a **\$100 Gift Card*** for participating.

If you already participated in the 2020 Wellness Program through Interactive Health, you will not be eligible to participate again until 2021. If you participated through Interactive Health but have not received your results or gift card please call our office as soon as possible.

Test at a Lab is NOW OPEN!

Participate at an approved clinic & complete your wellness survey
by December 15, 2020.

Register online at wellness.hhhealthassociates.com
New User Code: LABORERS

For assistance by phone call H&H Health Associates at 800-832-8302.

**Members and spouses will receive a
\$100 gift card!***

*Only one card per person per year will be awarded.

Members and spouses must be covered under the Plan to be eligible to participate.

Please note: Due to the current COVID 19 situation, all on-site events have been canceled for 2020. This includes the Summer Event on August 8th and the annual Health Fair on September 19th. Stay tuned for 2021 event dates!

Has your prescription been denied recently at the pharmacy?

Have you returned your yearly Coordination of Benefits (COB) form? If you have recently gone to the pharmacy and you were told you have other insurance coverage, but you don't, this usually means that we are needing a COB form. This form is mailed to the member every year during their birthday month.

The reason for this form is to see if anyone in the family has other insurance that could be primary over the Laborers'. **Even if no one in your family has other coverage, the form must be completed and signed every year.** Keep in mind, any dependents who are 18 years or older will have an Adult Child Coordination of Benefits form to complete and sign.

If your birthday has already passed and you have not filled out this form, call the **Benefit Office** at 314-644-2777 ext. 2 to have a form mailed to you. You can also access the form(s) online by visiting stllaborers.com.

Note: This form only pertains to the Active and Non-Medicare Retiree members.

Are you working out of town?

If you are working outside of the St. Louis jurisdiction, your hours will be sent to the Home Fund in the area you are working in. For example, if you are working in St. Charles County your hours will be sent to the Kansas City Fund office.

In order for your hours to be sent back to the **Benefit Office**, you will need to complete a Transfer Authorization form. This form will authorize the Fund in that jurisdiction to transfer your welfare and pension hours back to your Home Fund. **Without this form, hours cannot be transferred back to your Home Fund, which will impact your eligibility.**

Keep in mind if you are working outside of the St. Louis jurisdiction your hours will be prorated based on our Welfare rate and the transferring fund's Welfare rate. What does this mean exactly? If you work in St. Charles County (Local 660), their Welfare rate is lower than our Welfare rate. Therefore, you will need to work more than the 275 hours required to be eligible for coverage. You can view your hours online through I-Site or you can call the Benefit Office at 314-644-2777 ext. 2.

**PENSION AND WELFARE
TRANSFER AUTHORIZATION**

NAME: _____ DATE OF BIRTH: _____
Last (print) First Middle

ADDRESS: _____ SOC. SEC. #: _____
Number and Street

City State Zip PHONE #: _____

MEMBER OF LOCAL #: _____ EMAIL: _____

PRESENT EMPLOYER: _____

WORKING IN JURISDICTION OF LOCAL #: _____
City State Zip

This form authorizes the following Fund(s):
 Construction Industry Laborers (KC) St. Louis Laborers' Welfare and Pension Fund Southern Illinois' Laborers
 Other: _____

To transfer all Pension and Welfare contributions made to them on my behalf by any employers to:
Name and Address of your Home Fund. DO NOT use your Client's address unless it is the same as your Benefit Office.

(Note: For Pension Transfers: No transfers may be made covering periods of more than 1 year before the date you sign this Form.)
 THIS FORM SUBJECT TO CONDITIONS ON REVERSE SIDE HEREOF.
 (Note: For Welfare Transfers: No transfers may be made covering periods of employment for more than six (6) months before the date
 you sign this Form.) THIS FORM SUBJECT TO CONDITIONS ON REVERSE SIDE HEREOF.

SIGNED: _____ DATE: _____
HOME FUND'S COPY - WHITE TRANSFERRING FUND'S COPY - YELLOW EMPLOYEE'S COPY - PINK

LABORERS'

BENEFITS • ST. LOUIS

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Your Member Assistance Program*

800-617-0858

Real people. Real life. Real solutions.

Or log on to liveandworkwell.com
Access code: laborers

*The MAP benefit is for all Active and Non-Medicare eligible members.

July

august

SUN	MON	TUES	WED	THURS	FRI	SAT	SUN	MON	TUES	WED	THURS	FRI	SAT
			1	2	3	4 							1
5	6	7	8 Local 110 Union Mtg.	9	10	11	2 Happy Friendship Day!	3	4	5	6	7	8
12	13	14	15 June Hours Due	16	17	18	9	10	11	12 Local 110 Union Mtg.	13	14	15 July Hours Due
19 Ice Cream Day 	20	21	22 Local 42 Union Mtg. Pensioner Payday	23	24	25	16	17	18	19	20	21	22
26	27	28	29 Chicken Wing Day	30	31 Self Pay Due		23/30	24/31 Self Pay Due (8/31)	25	26 Local 42 Union Mtg. Pensioner Payday	27	28	29

This newsletter is a brief summary of your benefits. The Plan Document has final authority in the case of any conflicts or confusion as to Plan benefits.