



BENEFIT *buzz*

2357 59th Street
St. Louis, MO 63110
(314) 644-2777
(800) 489-0228
Fax: (314) 646-4440
www.stllaborers.com
benefits@stllaborers.com

Office Hours
Monday-Friday
7:00 a.m.-4:30 p.m.
Phone Hours
Monday-Friday
7:30 a.m.-4:30 p.m.

Required Medical Claim Forms

Why do we need an Injury/Illness Claim Form?

We receive this question often, so we wanted to explain the reason this form is so important.

When we receive a claim from your medical provider, we only receive the diagnosis (for example, "foot pain") with no explanation for the reason for the visit. Completing the Injury/Illness Claim Form gives us the additional information we need to properly process your claim.

If you continue to receive treatment for your injury or illness, an updated Injury/Illness Claim Form must be completed every six months.

Self-Funded Plan

We are a self-funded plan, which means your employer contributes to the Fund for every hour you work. It is our responsibility to ensure these contributions are used appropriately so we can continue providing quality benefits to all members.

Determining Responsibility

We understand that being a laborer is hard on your body. However, without a completed Injury/Illness Claim Form, we cannot determine if someone else may be at fault. *For example, were you in a car accident?*

Subrogation and Reimbursement Form

Depending on the circumstances of your injury or illness, you may also be required to complete a Subrogation and Reimbursement Form.

This form allows the Plan to pay your medical claims while you are waiting for payment or settlement from a third party, helping prevent your provider account from going into collections. If the third party denies the claim completely, the Plan may reconsider payment of the claim.

By signing the Subrogation and Reimbursement Form, you agree to pay back the Fund for all claims related to the injury or illness if you receive a settlement.

Please make sure the injured party signs the back of the form. If the dependent is under age 18, the member or legal guardian must sign. You can mail, fax, or email the form to claims@stllaborers.com. For questions, call (314) 644-2777.

May 2026 Issue

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- ADDICTION
- MENTAL HEALTH
- SUPPORT

844-691-5326

Laborers' Supporting Laborers'
Available 24/7
100% Confidential



PENSION *BUZZ*



Pension Wall of Fame



Mark Sneed

He's a proud Local 110 member with 43 years of hard work behind him.

As he begins his retirement, he's excited to spend more time with his family, take bike rides, and travel across America in an R.V.—truly “Living the Dream!”



Chester Weller

He's a proud Local 42 member with 16 years of hard work behind him.

In retirement, he's looking forward to spending time with his grandkids, watching wrestling and soccer, and enjoying a slower pace of life. He also plans to spend more time with his son, who recently graduated from Southern Illinois University Carbondale with a degree in Agricultural Business.

*Congratulations on your
Retirement!
-The Laborers' Benefit Office*

2026 Pension Check Dates

May 27th

June 24th

July 22nd

August 26th

September 23rd

October 28th

November 18th

December 16th

Joe Leritz: *Leritz Contracting*

After serving **32 years** on the Pension Board, Joe Leritz will be stepping down as a trustee on the Pension Board. We would like to thank Joe for his dedication, leadership, and years of service to our members.

His guidance and commitment have played an important role in continuing to strengthen our Pension Fund and helping make the best decisions for our members—*both now and for the future.*



Thank you for 32 years of service!

Don't forget we have a mobile app!



The mobile app allows you to have access to your health benefits at your fingertips as well as keeps you informed of important events and benefit news.



To get started, it's simple!

Download the Viveka Health app using the QR Code or in the App Store.



Laborers' Local 42 and 110

WELLNESS PROGRAM

REGISTER ONLINE

wellness.hhhealthassociates.com

NEW Users Code: **LABORERS**

EXISTING Users: Username (email)
& Password

- Click the link in your email to activate your account.
- Choose your location (approved walk-in clinic or on-site event).
- Complete the wellness survey.

ANYTIME

TEST AT
A LAB

at an Approved
Walk-In Clinic

OR BY PHONE



800.832.8302

(M-F, 8:30-5pm CST)



REGISTER!

3 WAYS TO PARTICIPATE

- Approved Walk-In Clinics
- On-Site Events
- Marathon Health Centers—Call H&H before making an appt!*

FREE

The Wellness Program
is FREE to...

All Eligible Active
Members, Retirees,
Medicare Members &
All Covered Spouses.

EASY

Your FREE wellness
screening takes just a
few minutes and is
available at over
1,600 approved,
walk-in clinics
nationally!

\$100 GIFT CARD

All eligible members
& covered spouses
who complete BOTH
their FREE wellness
screening and
wellness survey will
receive a Gift Card!

Please Note: Only one gift card per person per calendar year will be awarded. You must be an eligible member or covered spouse under the Plan. The Benefit Office is not responsible for lost or stolen gift cards.

*Marathon Health Centers are only available for Active and Non-Medicare Retirees. Participants must register with H&H Health Associates first.

Why was my prescription denied?

There are a couple of reasons this may happen. The pharmacy may be using incorrect insurance information, or we may be waiting on required forms from you.

Verify Your Insurance Information

If the pharmacy tells you that you are **not insured**, first make sure they are using the correct (which is located on the back of your insurance card):

- Rx Group Number—SLCLWF
- BIN Number—610011
- PCN Number—IRX

Coordination of Benefits (COB) Form

If you recently visited the pharmacy and you were told you have **other insurance coverage**—but you do not—this usually means that we have not received your Coordination of Benefits “COB” form. We mail the form annually during the member’s birthday month.

Even if no one in your family has other coverage, you are still required to complete and return the form every year. Keep in mind that any dependents who are 18 years or older will have an Adult Child Coordination of Benefits (ACOB) 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 online by visiting stllaborers.com.

APRIL RECAP: *Physical Therapy at Marathon*

If you’re dealing with chronic or acute pain in your neck, back, arms, or legs—you need to call Marathon Health. They’re here to get you moving again with **NO out-of-pocket costs!**

Their physical therapist will evaluate your condition, provide personalized care to help you self-manage your condition, and offer targeted therapy techniques to aid in your recovery. ***Best of all, you do not need a referral to make an appointment!***

AVAILABLE SERVICES

- Acute and Chronic Injury Care
- Pain Management
- Strengthening and Conditioning
- Prevention-based Assessments
- General Worksite and Ergonomic Evaluation
- Occupational Health Assessments and Testing

Marathon Health offers a convenient, all-inclusive healthcare option with **no out-of-pocket costs for all Active and Non-Medicare covered members and their families**. They also offer same-day or next-day appointments and 24/7 access to your Marathon Health physician for urgent needs.

To schedule an appointment call (314) 380-3014 or visit my.marathon.health. And don’t forget to download the Marathon Health app for even easier access to care!



Note: Marathon Health Centers are only available for Active and Non-Medicare Retirees.

LABORERS'

BENEFITS • ST. LOUIS

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- MENTAL HEALTH
- SUPPORT



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SUN	MON	TUES	WED	THURS	FRI	SAT
	1	2	3	4	5	6
7	8	9	10 Local 110 Union Mtg.	11	12	13
14	15 May Hours Due	16	17	18	19 	20
21 Happy Father's Day!	22	23	24  Local 42 Union Mtg.	25	26	27
28	29	30 Self Pay Due				

SUN	MON	TUES	WED	THURS	FRI	SAT
			1	2	3	4 
5	6	7	8 Local 110 Union Mtg.	9	10	11
12	13	14	15 June Hours Due	16	17	18
19	20	21	22  Local 42 Union Mtg.	23	24	25
26	27	28	29	30	31 Self Pay Due	

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.