
FOR YOUR BENEFIT

NEWSLETTER OF THE LOCAL 295 IBT EMPLOYER GROUP BENEFIT FUNDS
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ASTHMA

Asthma is one of our leading diseases suffered by participants and dependents in our Fund. Asthma is a condition in which your airways narrow, swell and produce mucous, making breathing difficult and triggering coughing, wheezing and shortness of breath.

Asthma can't be cured, but its symptoms can be controlled. Because asthma changes over time it is important that you work with your doctor to best manage your condition. Asthma symptoms can vary from person to person. Asthma attacks can be infrequent, happen only at certain times, such as exercising, or be present all the time.

Asthma signs and symptoms include shortness of breath, chest tightness or pain, trouble sleeping due to breathing issues, coughing and wheezing when you exhale. Signs that your asthma is worsening include more frequent episodes, increased difficulty breathing which can be measured by a peak flow meter, and the need to use quick-relief inhalers.








For some people, asthma signs and symptoms flare up in certain situations such as exercise induced asthma, which may be worse when the air is cold and dry. Occupational asthma is triggered by workplace irritants such as chemical fumes gases or dust. Allergy-induced asthma is triggered by airborne substances such as pollen, mold or pet dander.

It isn't clear why some people get asthma while others do not. It is probably a combination of environmental and genetic factors. Other risk factors include having a blood relative with the disease, being overweight, smoking or exposure to secondhand smoke or exposure to

occupational triggers such as chemicals or fumes.

Exposure to various irritants and substances can trigger signs and symptoms of asthma.

These triggers can vary from person to person but can include:

-  pollen, dust mites, mold spores, pet dander or cockroach waste
-  cold air
-  physical activity (exercise-induced asthma)
-  smoke
-  certain medications such as aspirin, Ibuprofen (Advil, Motrin) or naproxen (Aleve)
-  stress
-  sulfites and preservatives added to foods such as shrimp, dried fruit, wine and beer

Contact your doctor if you have frequent coughing or wheezing that lasts more than a few days or if you think you might have asthma. Early treatment can prevent lung damage and keep the condition from worsening over time. You may be prescribed both long-term and short-term medications such as a quick relief inhaler. However, it is very important that you do not try to ease your condition by taking more medication without consulting your doctor. Overusing inhalers can cause side effects and make your asthma worse. While there is no way to prevent asthma, by working with your doctor you can design a step-by-step plan for living with your condition and minimizing future attacks. Please see your doctor regularly to do whatever is necessary to control your asthma and improve the quality of your life.

COORDINATION OF BENEFITS

Some participants have health care coverage under two plans. When this happens, the two plans coordinate their benefit payments so that the combined payments do not exceed the actual expenses. This process, known as coordination of benefits (“COB”), establishes which plan pays first and which one pays second.

Primary plan and secondary plan... The plan that pays first is known as the “primary” plan. The plan that pays second is known as the “secondary” plan. The primary plan will pay your claim first and the secondary plan will pay for the remaining expenses up to the maximum of the allowable charges for the covered services. The amount of benefits paid by the Local 295 Employer Group Welfare Fund will never exceed the amount which would have been paid if there were no other plan involved.

Should file claims with both... If you have coverage in two plans, you should file claims with both so that you receive all the benefits available to you. When you submit claims to the Local 295 Employer Group Welfare Fund, you must include information about other coverage available to you. The Welfare Fund will then be able to coordinate your benefits with your other coverage. When claims are filed for your spouse or any covered adult son or daughter, the Welfare Fund will always ask for information about any other coverage being in effect.

The primary/secondary rules... Here are the rules for determining when a plan is primary or secondary:

- If one of the two plans does not have coordination-of-benefits provisions, it is the primary plan.
- The plan covering a person as an employee is the primary plan for that person. If your spouse or child has his or her own coverage, their plan is primary for their claims.
- The plan covering a person as a dependent is the secondary plan for that person.
- The Local 295 Plan is always the secondary plan for any eligible retiree or dependent who has coverage provided or available through their employer or another multiemployer welfare plan,

even if they have to pay for the coverage.

- If a dependent child is covered by both parents’ plans, the birthday rule applies. The plan of the parent whose birthday occurs earlier in a calendar year is the primary plan and the plan of the parent whose birthday is later in the calendar year is the secondary plan.
- When the parents are divorced and there is a court decree that states that one parent is responsible for the child’s health care expense, the plan of that parent will be the primary plan.
- If the parents are divorced or separated and there is no court decree, the plan of the parent with custody is primary and the plan of the parent without custody is secondary.
- If the parent with custody of the child has remarried, the plans should pay in the following order: 1) the plan of the parent with custody; 2) the plan of the step-parent; 3) the plan of the parent without custody.

Automobile insurance coverage... Group or individual automobile insurance coverage that provides medical coverage, including no-fault insurance, is always considered as primary coverage, and this Plan will only provide secondary coverage regardless of whether an individual actually enrolls in the automobile insurance medical coverage. This means that, even if an active employee or a retiree or a dependent opts out of the medical coverage available under his or her automobile insurance policy, the Plan will only provide coverage to that individual to the extent it would have if the individual had not opted out of the available automobile insurance medical coverage.



Coverage coordinated with Medicare...

The Welfare Plan applies the Medicare Secondary Payer program rules to determine how its benefits are coordinated with the benefits of Medicare. If a Medicare-eligible person is covered under the active employee Plan of the Welfare Fund, the Welfare Fund is the primary plan and Medicare is the secondary plan.


Coordination of benefits saves your Welfare Fund a lot.


If you have any questions about coordination of benefits, please contact the Welfare Fund Office at 212.308.4200.


WHEN IS THE BEST TIME TO RETIRE


Everybody who works hard for a living, dreams of retirement. No more punching a clock, no more having to be at a certain place at a certain time, no more physical labor and no more boss. But is retiring early the right thing for you? The answer depends on many factors and is different from person to person. If you need to retire for health reasons, then obviously that is different than just wanting to quit. When you should retire depends on many factors and is a very personal decision. No one time is right for everyone.


Some of the factors going into your decision as to when to retire are health, finances and your plans. Let's assume for the rest of this discussion that you are healthy enough to continue to work. The main upside of retirement is that you are now in control of your time. How you spend it is up to you. Watch TV, travel, spend time with friends, spend time with family, go fishing – it's all your choice. The initial period following retirement has been named the "sugar rush" due to all its benefits. However, studies show that this "sugar rush" is temporary while the effects of an early retirement are permanent. You need to think this through very carefully. Some reasons you may not want to retire early are:


 **Finances** – The longer you work the better off you will be financially not only because you are earning a salary for an extended period but also because you are not relying on your retirement nest egg for those years

 **Increased pension benefits** – In the Local 295 IBT Employer Group Pension Fund there is no cap on the number of years that count for your pension. Work additional years and your pension is increased

 **Your health insurance continues** – We all know how expensive health insurance these days and it will probably only get worse in the future. While you are still at work you, your spouse and your dependents continue to enjoy the benefits of the Welfare Fund. When you retire, and if you have the required service, you may be eligible for the pre-Medicare coverage offered by the Fund but there is a substantial monthly premium for this coverage. Also, if you want your spouse covered then they must pay the monthly premium as well. Your dependent children will no longer be covered.

 **You are closer to Social Security and Medicare.** The longer you wait to begin receiving Social Security benefits the bigger they are. Delaying the start of these benefits can make a big difference in your monthly check. Medicare starts at age 65. If you continue to work past the time you are eligible to retire you will be that much closer to the benefit.

 **Many studies show that people who retire early do not live as long as those who continue to work.** This can, of course, be skewed by people with health conditions who are forced to retire early but many of these studies are done on healthy populations and most come to the same conclusion – people who retire too early generally do not live as long as those who retire at a later date.

 **You need something to do.** While it is a fantasy to think that just lolling around doing nothing is the "Life of Riley", some people miss the social interaction and structure of work.

When you should retire is a personal and complex question. Please consider all the implications of your decision. Talk it over with your spouse and family and hopefully you will come up with the right decision for you.

LOCAL 295 IBT EMPLOYER
GROUP PENSION TRUST FUND AND
EMPLOYER GROUP WELFARE FUND
Sixty Broad Street, 37th Floor
New York, New York 10004



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GET SOME SLEEP

With the exception of diet and exercise, there is no more important factor in your general well-being than getting good, restful, rejuvenating sleep. All of our needs are different but by and large very few of us gets sufficient quality sleep. This leads to many health issues such as general malaise and edginess. Of course, being well-rested is especially important in our industry. There are many things that interfere with a good night's sleep. This article will deal with some of them.

Blue-Light Insomnia - Almost all modern electronics such as TV's and smart phones emit a blue light. Try to get some quiet time before you go to sleep to avoid this problem.

Stealth Caffeine Insomnia - We all know coffee but there is caffeine in many things besides tea, chocolate and dark sodas. Avoid them.

Bed Confusion Insomnia - Activities that stimulate the brain, such as reading or watching TV in bed can disrupt natural sleep patterns. Don't do them in bed.

Alcohol Induced Insomnia - Alcohol interrupts regular sleep patterns and can make you tired when you wake.

Prescription Insomnia - While we all have to take our prescribed medications, ask your doctor about the best time to take them. If you can take them earlier in the day try to do so.

Medical Insomnia - Insomnia is both a symptom and a disease. If you have difficulty falling asleep on a regular basis, you may have a treatable condition. Talk to your doctor if sleep problems are affecting your life. There may be treatments that can help.