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ark your calendar and join EIT and Local 134 on Saturday, October 22 for the third annual Benefit Fair. Come to the Boyle Auditorium (Union Hall) at 600 West Washington between 9:00

a.m. and 4:00 p.m. to meet several members of the EIT staff and ask benefit questions.


Representatives from the following organizations will also be on hand to provide you with valuable information:

- BlueCross BlueShield
- CIGNA Behavioral Health
- Caremark (formerly Advance PCS)
- VSP (Vision Service Plan)

- Putnam Investments
- The Chicagoland Electrical Credit Union
- Megent Retirement Consultants
- Various state and county agencies

While you're at the Benefit Fair you'll also have a chance to:

- Get a free flu shot (covered members, retirees and covered spouses only)
- Receive a free blood pressure screening
- Shop for Local 134 merchandise
- Pick up your LMCC Certification and your Lockout/Tagout cards
- Enter to win a gift card from Target
- Verify and change your address with both EIT and LU 134
- Verify your contributed hours and insured status

The last two Benefit Fairs were very popular, and participants came away with important information about their benefits. Please join us again this year and help to make it a success. 

To take advantage of the **free flu shot** you must bring your BlueCross BlueShield identification card or some form of photo ID containing your date of birth.



TAKE ACTION TIP!

As the colder weather approaches, colds, coughs and flu bugs sneak up on all of us. Chances are, you may make a visit to your doctor's office in the next couple months. This quarter's *Take Action Tip!* focuses on important questions to ask your doctor the next time you are feeling under the weather or getting your annual check-up.

ASK YOUR DOCTOR SMART QUESTIONS

Be sure to make the most of your next doctor's visit. Ask your doctor about anything you may not understand — or that may impact the cost of your treatment. Depending on your personal situation, some questions you may want to ask include:

- Is this test needed?
- Can my prescription be filled with a generic drug? Does the drug have any side effects?
- Should I avoid other medications, alcohol or certain foods while I take this medication?
- What caused my problem? What can I do to prevent it from happening again?
- Are you certain of the diagnosis, or is this one of many?
- What are other ways to treat this illness?
- What is the time frame for the treatment? How long will it take to recover?
- What are the benefits of this treatment? What are the risks?
- How much does this treatment cost?
- What if this medication doesn't work? Is it safe to stop taking it without warning?

Let your doctor know if you need more time with him or her — or ask if you can speak with a nurse or physician assistant on staff if more questions come up. Remember, making health care decisions should be a joint decision between you and your doctor.

Effective Disability Case Management

On January 1 of last year, your Board of Trustees resolved to significantly increase the amount of the weekly Short Term Disability benefit and the monthly Long Term Disability benefit. As a result, the cost to the Plans skyrocketed.

We are realizing that the days are gone when the doctor would say, "take two aspirin and call me in the morning" for every ache and pain. Medical science has grown by leaps and bounds in the past few years, and there are new discoveries everyday. As a Fund Office, EIT does not have the medical expertise needed to effectively case manage disability claims. Using an independent medical review organization on an ad-hoc basis is costly and impersonal. And while Annette Grango or Sherry Frankenbach is always around to lend a sympathetic ear to our disabled members and guide them through the various stages of the disability application process, they are not equipped to monitor medical advances, trends or treatment plans.

CORVEL HEALTHCARE CORPORATION


Our partner in disability case management

In an effort to streamline and effectively manage the Short Term Disability and Long Term Disability Plans, EIT has retained CorVel Healthcare Corporation to case manage all disability claims. Throughout the past few months all existing claims were transitioned to case management and all new claims started the initial process with CorVel, a publicly traded company with more than 25 years of experience in providing medical cost containment and disability management services.

Case management is a win-win situation for everyone. The participant wins because he will know how long he can expect to receive disability benefits. Knowing this from the start can help the participant to make sound decisions regarding his immediate financial future. The Plan wins because case management will eliminate potential abuse to the system and keep the Disability Plans strong for everyone for generations to come.

CorVel has assigned a dedicated nurse case manager to the EIT account. The case manager will be in regular contact with the participant and the attending physician, working with them to coordinate efforts and to get the participant back on his or her feet and back to work. Because of this personal contact, the frequency of the attending physician having to provide updated written medical reports has been significantly reduced.

Reducing paperwork is only one advantage of personal case management. Another being that the participant will no longer have to contact EIT on a weekly basis in order to receive his disability benefit check. EIT will continue to issue all disability checks, but in a much more efficient manner.

We hope you never have to have firsthand experience with the EIT Disability Plan; however, if you do, we and CorVel Healthcare Corporation are here for you. 

Making Appropriate Health Care Provider Selections

It is important that you continue to incorporate the characteristics of an active health care consumer into your lifestyle. This quarter, consider *choosing a doctor that is right for you and your family.*

Choosing the Right Doctor

Having a doctor you are comfortable with and who knows your medical history reduces the chance for error and helps ensure that you get the right care. Here are some tips to use when selecting the right doctor for you:


■ Review providers available in your plan.

It's important to confirm that your doctor participates in the BlueCross BlueShield PPO network. Why? In-network doctors have contracted with the plan to charge reduced fees for their services, so you'll almost always pay less when you seek care from an in-network doctor. If your doctor is not in the network, you may want to think about switching to an in-network doctor so you can continue to receive the highest level of benefits. If you are satisfied with your current doctor and he or she participates in the network, you may not need to do anything else. However, if you want to choose a new doctor for any reason, keep reading:

■ **Narrow the list.** Decide what you want and need in a doctor. Do you need someone who specializes in a certain area or has experience with a particular condition? Do you prefer a doctor of a particular gender or age? Do you want one doctor for your whole family? Do you want someone who's close to work or close to home?

■ **Call the office.** Call the offices of the doctors you're considering. You may not get to speak with the doctor, but someone there should be available to answer questions. First, find out if the doctor is accepting new patients. In addition, ask questions that matter to you, such as:

- What are your office hours?
- How long does it usually take to get an appointment?
- How many patients do you see in one day? (Your wait time could be affected if it's more than 25 to 30 patients.)
- Do you have a partner in the network who could see me when you're not available?
- Do you help patients with minor problems over the phone?
- How do patients get in touch with you after office hours?
- At which hospitals do you have admitting privileges?

■ **Trust your instincts.** While it's important to make an informed decision, your choice of doctor isn't written in stone. Evaluate your first visit. Were you comfortable asking questions, and was the doctor comfortable answering them? Did the doctor explain things in a way that you understand? If you didn't feel comfortable talking with the doctor, you may want to keep looking. Research shows that people who are comfortable talking with their doctor receive better care and have better outcomes. Make sure you and your doctor have the right chemistry! 

NEW DRUG ID CARDS

In a few weeks, you will receive new Caremark identification cards. Your new unique Caremark identification number will mirror the unique number found on your BlueCross BlueShield health care card. We're taking this step to eliminate your Social Security number from your drug card so your personal information is protected. It's important for you to remember that even though your Caremark and BlueCross BlueShield *identification numbers* are the same, the *group numbers* are different. You cannot use your BlueCross BlueShield card at the pharmacy or your Caremark card at your doctor's office.

BENEFIT NOTICE

By law, we are required to notify our participants on an annual basis that certain mastectomy procedures are covered by the EIT Health & Welfare Plan. These procedures include:

- Reconstruction of the breast on which the mastectomy has been performed,
- Surgery and reconstruction of the other breast to produce a symmetrical appearance, and
- Prosthesis and treatment of physical complications of all stages of mastectomy, including lymphedemas.

Ask EIT


Q: Can I withdraw money from my Pension Plan No. 5?

A: This is a common question, and the answer is no. The funds are yours to use for your retirement, subject to the terms of the Plan. However, there are no provisions that will allow a participant to withdraw funds from Pension Plan No. 5 unless he is qualified, under Plan provisions, to do so.

Pension Plan No. 5 is a multi-employer defined contribution money purchase plan designed for retirement purposes only. You are eligible

to retire with access to your account when you reach age 62 or age 55 if you have at least 10 years of eligible service. If you leave before reaching the retirement age, your funds become available under the terms of the Plan once you have been away from the trade and jurisdiction of Local 134 for a minimum of 24 consecutive months.

There are no provisions that would allow the withdrawal of funds earlier, unless you are disabled and eligible for disability benefits from Social Security or determined to be mortally disabled by the Trustees.

Have you been wondering about something and want to ASK EIT? E-mail your general interest questions to ASKEIT@fundoffice.org or fax them to ASK EIT at **1-312-782-4431**. Direct your questions to Sherry. Please remember that for your privacy and protection, we cannot respond to member specific questions in this column nor can we provide information specific to an individual member via e-mail. 

This newsletter contains information on various benefits, but it does not give you all of the details. The official plan documents have all of the details. If there are any differences between this newsletter and the plan documents, the plan documents will govern. If you have any questions about your benefits, please contact the Fund Office at **1-312-782-5442**.

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