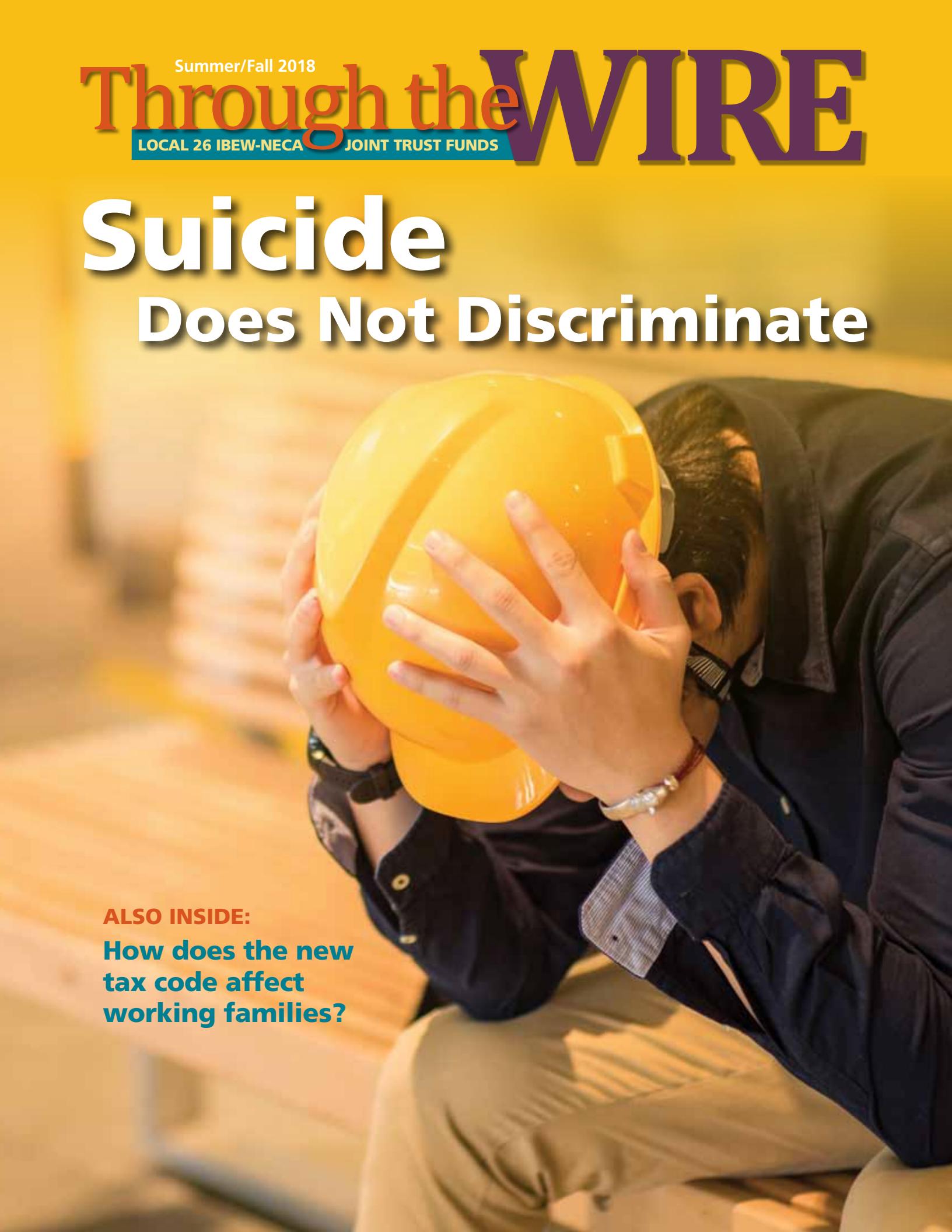


# Suicide Does Not Discriminate



**ALSO INSIDE:**

**How does the new  
tax code affect  
working families?**

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## Dear Participant,

Life can be stressful but I hope you know that the EWTF is here to help. Navigating a medical condition can induce unimaginable stress, on an individual and on a family. It's a cruel irony that in a person's greatest time of need, medical expenses and paperwork abound only creating stress upon stress. Enter the EWTF.

While the role of the EWTF is to ensure that the health plan you have earned works to its full capacity, we are also here to be your best resource on your road to a stress-free, full recovery. Brother Mark Lizzi stands as proof of what the EWTF can do for you. (Please read his story on page 8.) And, we hope there are many others who stand as proof as well.

If you have had an exceptional experience with the Benefits Office, we would love to hear from you! It is always good to know what's working well!

Most importantly, though, please know that we are here to help you in any way possible on your journey to better health. Please do not let stress derail your plans to live your best and healthiest life yet.

Yours in good health,

Peter Klein  
Fund Manager

*Through the Wire* is a publication of the Local 26 IBEW-NECA Joint Trust Funds  
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Writer/Editor: Jennifer Shure  
Graphic Design: GO! Creative, LLC,  
[www.go-creative.net](http://www.go-creative.net)  
Printing: Kelly Press, Inc.



For more information,  
go to [www.ewtf.org](http://www.ewtf.org)  
<http://www.ewtf-wellnessworks.org>

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and on  
Twitter by searching IBEW26TrustFund



# Before It's Too Late

**Suicide is a national public health crisis and no family, no community is immune.**



**T**here are some things that do not discriminate. Suicide is one of them.

Old, young, male, female, Caucasian, African American, Hispanic, Asian, wealthy, poor. Suicide can claim the life of anyone.

This spring the suicide deaths of a famous female fashion designer and a well-known male television personality/chef, within a week of each other, dominated the headlines. It was shocking that two people who seemed to have it all—family, friends, wealth, fame, career success—took their own lives. This has always been the story line with famous people who have com-

mitted suicide—the appearance of living the good life until they tragically take their life. Family and friends are left grieving; wondering why and reflecting on warning signs they may have missed.

Now consider the fact that every year almost 45,000 Americans die by suicide, according to the American Foundation for Suicide Prevention. This is more than those

these 45,000 are ever brought to the public's attention each year; the rest are everyday people, not the rich and famous. While they may not have shared the same life's story while here on Earth as the famous fashion designer or television personality, they certainly shared the same ending, which illustrates that suicide does not discriminate.

Caucasian males account for about 70 percent of all suicides, particularly middle-age males between the ages of 45-54.

who die from motor vehicle crashes according to the Centers for Disease Control (CDC). Only a very few of

It is hard to believe that 45,000 Americans take their own life each year. That's about 123 suicides per ▶

day. And, for every one suicide, the American Foundation for Suicide Prevention says there are 25 suicide attempts. Based on these numbers few would disagree that suicide is a national epidemic.

Researchers believe that those who commit or attempt to commit suicide may react to events differently, causing them to make choices others would not.

While suicide does not discriminate, there are some groups that are more prone to suicide than others. Caucasian males account for about 70 percent of all suicides, particularly middle-age males between the ages of 45-54. In fact, suicide is the second leading cause of death for men age 25-54. After Caucasians, the second highest rate of suicide occurs with American Indians and Alaska Natives, followed by Asians, Pacific Islanders and African Americans. Statistics also show that firearms account for more than half of all suicide deaths.

Suicide and mental illness go hand-in-hand which is why people who suffer from mental illness such as depression, bipolar disorder, schizophrenia, traumatic brain injury and/or anxiety are at high risk for suicide. Other high risk health, environmental or historical factors include:

- History of substance abuse
- Previous suicide attempts
- Prolonged exposure to stress such as harassment, bully-



ing, relationship problems or unemployment

- Stressful life events such as divorce, financial crisis and/or loss of a loved one
- Family history of mental health or substance abuse disorder
- Family history of suicide

► Family violence, such as physical and sexual abuse, particularly childhood abuse

- Access to lethal means such as firearms or drugs
- Being in jail
- Being exposed to others' suicidal behavior
- Medical illness

## The SOCIAL MEDIA OUTLET



Social media has become a forum for many to express their feelings about almost anything—social issues, political issues, likes and dislikes, etc. It has also become the place where some have expressed their suicidal thoughts, sometimes overt and sometimes cryptic.

Pay attention to posts your social media "friends" may be sharing and call 911 if you suspect they may be thinking of suicide. Many social media sites use filters to identify posts that may be concerning but don't rely on an app's analytics to save a person's life. Go with your gut feeling if you notice a suicidal message.

Of course, just because a person has one or more of the above risk factors does not mean he or she will commit suicide. Researchers believe that those who commit or attempt to commit suicide may react to events differently, causing them to make choices others would not. This is why mental illness is so intricately tied to suicide.

In the aftermath of a suicide, family and friends are often left wondering if they missed warning signs that would have given them an opportunity to get their loved one the help they needed. There are, in fact, a number of classic warning signs that could help you recognize when someone is in need of help before it's too late. They include:

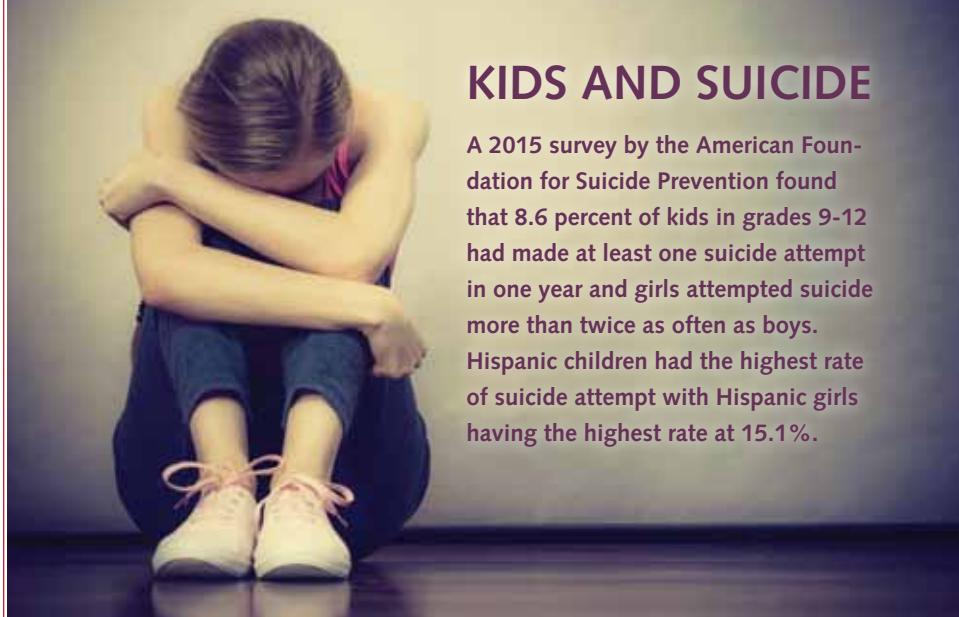
- Talking about wanting to die or wanting to kill oneself
- Talking about feeling empty, hopeless, or having no reason to live
- Planning or looking for a way to kill oneself, such as searching online, stockpiling pills or acquiring potentially lethal items such as firearms or ropes
- Talking about great guilt or shame
- Talking about feeling trapped or feeling that there are no solutions
- Feeling unbearable pain, both physical and emotional
- Talking about being a burden to others
- Using alcohol or drugs more
- Acting anxious or agitated

## Suicide in the DMV

How do the District, Maryland and Virginia compare to the national averages on suicide? Fortunately, DC, Maryland and Virginia all fall below the national suicide average of 13.42 per population of 100,000, but suicide still ranks in the top three leading causes of death in each state for people 15-34 years of age and in the top six leading causes of death in each state for people 35-54 years of age. In D.C., on average one person dies by suicide every nine days, in Maryland, one person dies of suicide every 15 hours and in Virginia one person dies of suicide every eight hours.

- Withdrawing from family and friends
  - Changing eating and/or sleeping habits
  - Showing rage or talking about seeking revenge
  - Taking risks that could lead to death such as reckless driving
  - Talking or thinking about death often
  - Displaying extreme mood swings suddenly shifting from very sad to very calm or happy
  - Giving away important possessions
  - Saying goodbye to family and friends
  - Putting affairs in order, making a will
- The construction industry is considered high risk for suicide, in the top nine occupations at risk, in fact. There are many reasons for this including the culture of bravado and stoicism that exists in construction, creating workers who ►

There are, in fact, a number of classic warning signs that could help you recognize when someone is in need of help before it's too late.



## KIDS AND SUICIDE

A 2015 survey by the American Foundation for Suicide Prevention found that 8.6 percent of kids in grades 9-12 had made at least one suicide attempt in one year and girls attempted suicide more than twice as often as boys. Hispanic children had the highest rate of suicide attempt with Hispanic girls having the highest rate at 15.1%.

are afraid to ask for help for fear of looking weak. There is also all of the physical pain construction workers endure in their physically demanding jobs which can create chronic pain, post-traumatic stress or burnout. And, one cannot overlook the cyclical nature of construction work that can result in uncertainty about employment and long periods without work or, on the other end of the spectrum, extreme pressure to get a project completed quickly. Construction workers are also prone to abnormal hours that can cause mental and physical exhaustion. Adding to all of this is the fact that substance abuse problems have historically plagued the construction industry.

One of the most dangerous myths about attempted suicide or talking about suicide is that it is just an effort to seek attention. **All discussion about suicide or attempts to commit suicide should be taken seriously. Threatening suicide is not a normal reaction to stress and should not be passed off as nothing.**

Asking a person if they are thinking about suicide could create the opportunity that person has been waiting for to ask for help. Contrary to what some believe, asking a person if they are feeling suicidal will not put the idea in their head. That is a just a myth.

Not sure what to say to someone you think might be experiencing suicidal thoughts? Fearing that you

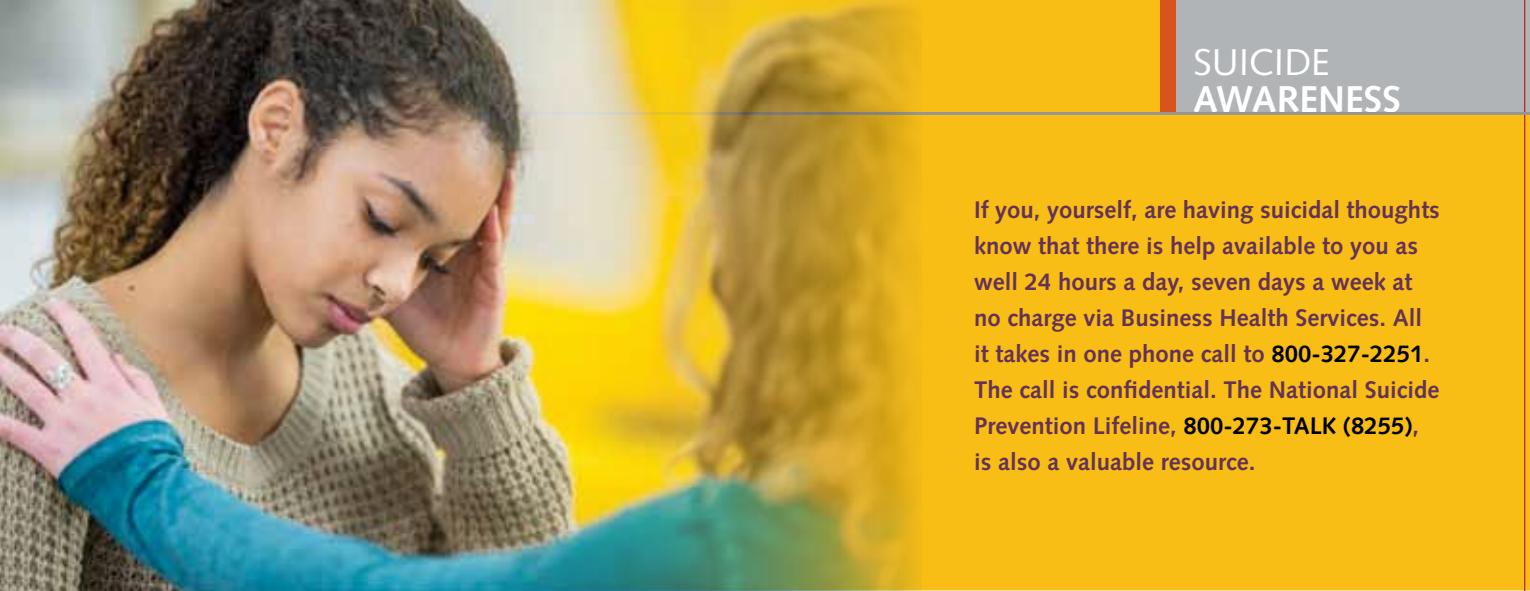
might say the wrong thing or being altogether scared is normal. First, let the person know that you have noticed specific behaviors and you are worried. Then ask them if they have been experiencing suicidal thoughts and reassure them that you can understand those feelings. Next, be sure to let them know that you are on their team, that you have some ideas that might help them and you appreciate them placing their trust in you.

All discussion about suicide or attempts to commit suicide should be taken seriously.

You should also seek help for that person immediately with a health care professional. Ask trusted family and friends to help you. Never leave a suicidal person alone and remove all access to firearms or

A culture of bravado and stoicism exists in construction, creating workers who are afraid to ask for help for fear of looking weak.





other means of harming themselves. Do not promise them that you will keep their suicidal thoughts a secret.

Business Health Services, our employee assistance provider, can also help. Mental health experts are available at no charge 24 hours a day, seven days a week at 800-327-2251, to confidentially answer questions you may have and provide resources you may use to help someone you believe to be suicidal.

Asking a person if they are feeling suicidal will not put the idea in their head.

If you, yourself, are having suicidal thoughts know that there is help available to you as well 24 hours a day, seven days a week at no charge via Business Health Services. All it takes in one phone call to 800-327-2251. The call is confidential. The National Suicide Prevention Lifeline, 800-273-TALK (8255), is also a valuable resource.

If you are in the presence of someone threatening to commit suicide,

do not attempt to help them on your own. Call 911 immediately!

There is absolutely no shame in getting help for yourself or someone you care about, or even

just learning more about suicide prevention in the event that one day you may be able to save a life. Remember, suicide does not discriminate. ●



## Grieving After a Suicide

If you are grieving the loss of someone you know to suicide, be sure to take care of your own mental well being by talking to someone or considering joining a support group. Be kind to yourself by accepting that your loved one's suicide was not your fault and give yourself plenty of time to grieve. Try to keep a normal routine and take care of your good health through proper eating, exercise, getting enough sleep and finding ways to relieve stress.

Unlike other deaths, suicide can leave survivors with unanswered questions, questions that may never be resolved, and feelings of guilt, self-blame, rage, anger and disappointment. Survivors themselves can fall into depression or endure post-traumatic stress disorder. Take the advice you would have given your loved one who died and reach out for help from professionals, family and friends.

## The EWTF provided the service one member needed in his greatest time of need.

When our members have access to the best providers to help them maintain their good health or are able to seek the services of top notch medical specialists in their time of need, all without financial concern, we know our health plan is working the way it was designed to. When our members can focus strictly on getting healthy and staying healthy, we consider our plan a success. Brother Mark Lizzi would certainly agree.

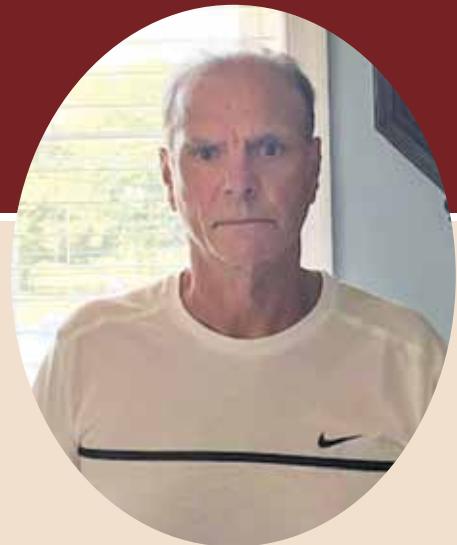
Last issue we asked you to let us know of a time when the benefits plans served you or your family members well. Brother Mark Lizzi is a medical miracle and our health plan helped him achieve this title.

In 2000, Brother Lizzi was feeling awful and after numerous trips to the doctor he was misdiagnosed three times as having pneumonia. He was given a prescription antibiotic and sent on his way. Four weeks later he was still feeling awful, not being able to breathe and enduring intense night sweats every night. Finally his girlfriend took him to Annapolis Hospital where a specialist was waiting for him. He had about a quart of fluid pumped out of his lung and after a week of tests, he was diagnosed with cancer—non-Hodgkin's lymphoma. He later discovered that his inability to breath and the night sweats he had prior were because he only had one working lung—his lung capacity had been cut in half.

His new doctor came to Brother Lizzi with the difficult news but also came to him with a plan—laid out in a binder—of how, together, they were going to rid Mark of this cancer. By this time the cancer had spread into other parts of his body. The plan was a seven-year plan. That's right, seven years!

The plan began with four months of radiation as a preventive measure, just in case the cancer had spread into his brain. He was also prescribed prescription pills to help drain the fluids. Each pill was \$100 and he took three to four a day for a month. Radiation was eventually paired with chemotherapy in the first four years since the cancer evolved into more than the doctor initially diagnosed. After seven long years, Brother Lizzi was declared cured.

At the beginning of his treatment plan he mistakenly received a bill for the chemotherapy from the chemotherapy drug provider claiming his treatment had not been autho-



rized. That one bill alone was for over \$20,000! He called the Benefits Funds office and Maryjane told Brother Lizzi that she would handle it all and he should just focus on getting better. And, that's what happened—Maryjane resolved the bill and Brother Lizzi got better.

By his estimation, the total cost for his cancer treatments was about \$700,000, money Brother Lizzi would not have been able to afford if not for the EWTF. "We have a good plan—a Cadillac plan," he said. "Our plan is a steal!" He added that he retired at age 57 but if he had to pay for his medical expenses he would still be working today. "I'm so grateful I had good insurance. Before this, I had never really been a sick a day in my life, not like this."

And as for the help he received from the Benefits Funds office, he can't express his appreciation enough. "Every time I called I received the help I need. They were so respectful," he said. "They are on our side." ●



# Want a Voice? VOTE!

**Don't forget that the midterm elections are just around the corner—November 6th.**

But, you can't vote if you aren't registered! Voter registration deadlines differ between the District of Columbia, Maryland and Virginia. Each state has its own deadlines and procedures.

In the **District of Columbia** you may register to vote:

- **In-Person:** Visit the Board of Elections office, any DC DMV location or any of the following agency offices up until Early Voting begins: Office on Aging, Department of Human Services, Department of Health, Department of Corrections, Department of Youth Services or Department of Developmental and Rehabilitative Services. You will need a proof of residency. Same-day registration also takes place Election Day, with proof of residency, by visiting your regular polling place.
- **By Mail:** Fill out and mail form found on [www.dcboe.org](http://www.dcboe.org) or found at designated locations such as the DC Board of Elections, public libraries, Metropolitan Police Department precincts or fire stations. Include a copy of your current proof of residence. Form and residency proof must arrive to Board of Elections 21 days prior to Election Day
- **Online:** Complete and submit form online at [www.vote4dc.com](http://www.vote4dc.com) or download the free mobile app Vote4DC. Form must be submitted at least 21 days before the election.

In **Maryland** you may register to vote:

- **In-Person:** Register to vote 21 days before Election Day at your local Board of Elections, the State Board of Elections, Department of Health and Mental Hygiene, Department of Social Services, Motor Vehicle Administration, Offices on Aging, all public institutions of higher education, U.S. Armed Forces recruitment offices; or during early voting between 13 to 5 days before Election Day.
- **By Mail:** Submit a voter registration application to your local Board of Elections or State Board of Elections 21 days before Election Day
- **Online:** Register online via Maryland's Online Voter Registration System—[www.elections.maryland.gov](http://www.elections.maryland.gov)—21 days before the election.



In **Virginia** you may register to vote:

- **In-Person:** Register to vote in person 22 days before Election Day at State or local government offices when applying or re-certifying for Aid to Dependent Children, Food Stamps, WIC, Medicaid, or Rehabilitation Services; government offices in the State that provide State-funded programs primarily engaged in providing services to persons with disabilities; Armed Forces recruitment offices; public libraries; Virginia Department of Elections offices; Department of Motor Vehicles offices; voter registration drives

- **By Mail:** Registration must be received 22 days before Election Day to any official registration office, which are listed on the Virginia Department of Elections webpage—[www.elections.virginia.gov](http://www.elections.virginia.gov).
- **Online:** Register online 22 days before Election Day through the Citizen Portal on the Virginia Department of Elections webpage.

If you have moved since the last election, double check that your voter registration information is correct and if you moved across state lines, don't forget to register in the state in which you now reside.

**Be part of the democratic process and make sure you are registered to vote. It matters!**

# Hearing Damage

## The Slow, Silent Jobsite Hazard

### WHAT DID YOU SAY? I DIDN'T HEAR WHAT YOU SAID CAN YOU SPEAK UP?

Contrary to what many may think, hearing loss isn't simply a factor of getting older. It's not the aging process that reduces our ability to hear; it's our exposure, over the course of our lifetime, to loud noises that causes hearing loss. And, anyone who has ever been on a jobsite for even one day can attest that working in construction can be both consistently and erratically noisy, even deafening at times. Consider how many hours our members have spent on a jobsite, or will have spent, over the course of their career and it's easy to understand why hearing loss is one of the most prevalent jobsite health hazards. In fact, about 26 million Americans between the ages of 20 and 69 have high frequency hearing loss due to

exposure to loud noises at work or at leisure.

Hearing loss is an especially dangerous hazard because you simply do not realize it's coming. After all, sounds are all around on a construction site and you get used to the daily noise levels, even if they are significantly higher than what is considered safe. You are still able to work even as your hearing is being compromised and you are typically unaware of hearing loss until you leave a job-

site, where you have been exposed to high noise levels for eight hours or more, or until years down the road when accumulated hearing loss gets in the way of daily life. Hearing loss is not an obvious jobsite hazard that most workers think about, like falls or electrocution. It's not a hazard that could take your life but it is a hazard that is degenerative and permanent.



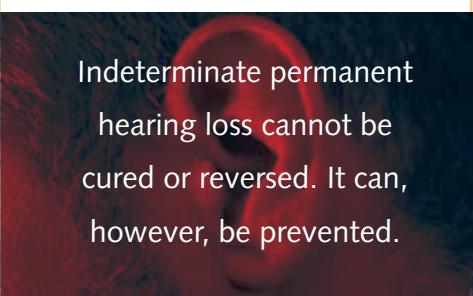


If you think you may be suffering from some hearing loss, a visit to an audiologist is recommended.

Noise is measured in decibels or dBA for short. The Occupational Safety and Health Administration recommends that employees not be exposed to noise levels greater than 85 dBA. For reference, a whispered voice is about 30 dBA and a normal conversation is about 60 dBA. However a nail gun is about 97 dBA and chainsaw is about 110 dBA. Changes in decibels affect both the noise intensity and the amount of time in which it is safe to be exposed to that noise. For example, if a noise level increases by just a few decibels, that doubles the amount of noise your ears are exposed to and reduces the recommended exposure time by about half.

It is important to remember though that it's not just the dBA that is important in determining the danger of loud noises; it's also the length of time that you are exposed to those noises. A one-time loud noise, like an explosion, can cause instant hearing loss that will likely recover but prolonged loud noises, like those experienced while working day in and day out on a construction site, slowly and permanently impair hearing capabilities. Unfortunately, permanent hearing loss cannot be cured or reversed. It can, however, be prevented.

While it would be impossible to eliminate all jobsite noise on a construction site, there are ways to reduce the noise levels on the job. There are actually ways in which to reduce the noise coming from equipment, such as asking your employer to purchase or rent quieted tools or even retrofitting existing tools by replacing faulty or worn parts to reduce the noise emitting from such equipment. This could be as simple as changing seals, lubricating parts, using sharp blades and bits or installing mufflers. Even erecting a temporary barrier between you and major sources of noise could cut down on your exposure to dangerous noise levels. You could place a temporary wood box over a generator or place that generator on soil or sand to absorb some noise. Of course, simply moving as far away as possible from the source of the noise or moving loud equipment away from you by using extension cords will also significantly reduce noise exposure.



Indeterminate permanent hearing loss cannot be cured or reversed. It can, however, be prevented.

Protecting your ears on the job is also an important part of general safe work practices and something that all workers can and should do on their own. OSHA states that earmuffs and foam earplugs provide the best noise reduction but any protective device will offer some reduction and therefore provide some protection.

To perform a quick self test of the effect of jobsite noise on your hearing, on your drive to work put the radio on a barely audible level before turning the car off. Upon returning to your car at the end of the day, turn the radio on without turning on the engine and see if you are still able to hear the radio at the volume you set at the beginning of the day before starting work. If you can't hear the radio you know that you have experienced prolonged exposure to higher than acceptable noise levels.

If you think you may be suffering from some hearing loss, a visit to an audiologist is recommended. You may need to be fit for hearing aids, which will be able to help improve your hearing but will not be able to fully restore hearing. Our Health Plan covers audiologists visits and hearing aids. A referral may be required so be sure to contact the Funds Office to discuss your eligibility. The first hearing aid is covered up to a maximum of \$3,000 and the second hearing aid is covered up to a maximum of \$1,000. Furthermore, through VSP, our vision care provider, our participants have access to a discount hearing aid program called TruHearing which includes savings on hearing aids, discounted yearly exams, three included exams for fittings, manufacturer's coverage for one-time loss or damage, a three-year repair warranty, and batteries. For more information, contact TruHearing at 844-291-5528.

Remember, you only get one set of ears and hearing damage cannot be reversed. Be your best advocate by making the jobsite adjustments and using the protective devices necessary to live your life in full volume. ●

## EWTF & VENDORS

Ever wonder how the EWTF works? The following chart helps explain who our vendors and providers are. The partnerships we have forged are designed to work for you!

**UNITEDHEALTHCARE (UHC)  
CHOICE PLUS NETWORK**  
Also includes:  
**CARE Programs (Medical Utilization Management)**  
**Healthy Pregnancy**

Network leased by EWTF to provide discounts from participating medical providers  
<http://directory.uhis.com>  
**301-731-1050 or 800-929-EWTF** (providers only)



**BARIATRIC RESOURCES SERVICES (BRS)**

Weight loss surgery for qualified patients

**888-936-7246**

**BUSINESS HEALTH SERVICES (BHS)**

Employee assistance provider.  
Mental health and substance abuse benefit navigation

[www.bhsonline.com](http://www.bhsonline.com)  
**800-765-3277**



**VISION SERVICE PLAN (VSP)**

Network for vision services

[www.vsp.com](http://www.vsp.com)  
**800-877-7195**

## ELECTRICAL WELFARE TRUST FUND (EWTF)

Processes and pays your benefits

[www.EWTF.org](http://www.EWTF.org)

**301-731-1050 or 800-929-EWTF**

**CVS CAREMARK**

Pharmacy benefit management

[www.caremark.com](http://www.caremark.com)  
**800-386-0329**



**CIGNA DENTAL**

Network leased by EWTF to provide discounts from participating dental providers

[www.cignadentalsa.com](http://www.cignadentalsa.com)  
**800-797-3381**

**EPLAN**

Negotiates discounts for non-network providers

[www.eplanllc.com](http://www.eplanllc.com)



**CONIFER HEALTH SOLUTIONS**

Case and disease management services

[www.coniferhealth.com](http://www.coniferhealth.com)  
**800-459-2110 x2288**



These days you don't need to be logged in to your clunky computer to access certain information, such as banking records. If you have a smartphone or tablet, as most people do, you have access to all of the information you would normally search for on your computer, and it can be even faster and easier to find what you are looking for. Smartphones and tablets are like mini computers and through apps for these devices, companies, like Fidelity, are making it easy for customers to get questions answered and stay on top of their personal finances.

Fidelity's NetBenefits mobile app gives customers, such as our IA Plan participants, access to their accounts (including other personal accounts not associated with the IA Plan) anywhere, anytime, 24 hours a day, seven days a week. That's right; you can manage your Fidelity account and/or get questions answered while sitting on the beach on vacation, or on your lunch hour from the break room, or at 2 a.m. on a sleepless night.

The NetBenefits app allows you to:

- ➡ See all of your Fidelity accounts
- ➡ Monitor account balances
- ➡ Review and change investments
- ➡ Update your contribution amount
- ➡ Get your personal rate of return and Fidelity Retirement Score
- ➡ Compare your account performance with your peers in your age group and area

# FIDELITY Has an App for That!



- ➡ Access articles, videos, and podcasts in the NetBenefits Library

The app is available for download via the Apple App Store, Google Play or the Microsoft Store online. If you have an iPhone or iPad, you should download the app via the Apple App Store. If you have an Android smartphone or tablet, download the app via Google Play and if you use the Microsoft Surface tablet, the app can be found through the Microsoft Store online.

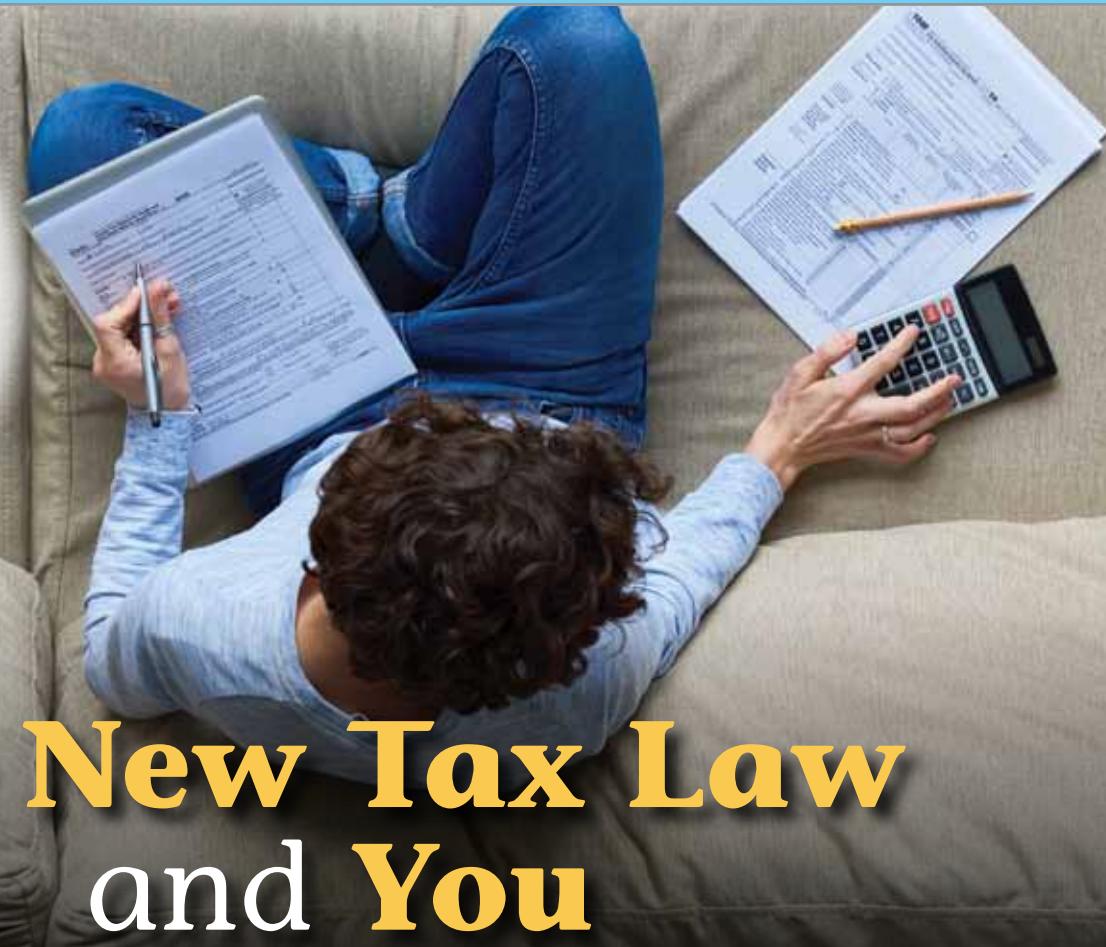
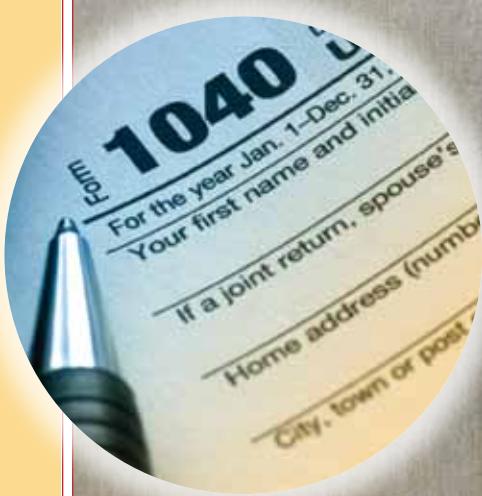
Your account information can still be found by using a Web browser on any mobile device and visiting NetBenefits.com. The NetBenefits app simply makes it easier to get to the NetBenefits site.

And, while you are online at the NetBenefits website, you can sign up for eDelivery of your Fidelity statements and correspondences. With eDelivery you will receive

an email when your documents are ready and you can view, print, or save those documents. If you switch to eDelivery and later decide you prefer a paper copy of your documents mailed to you, you can change your delivery preference at any time.

To sign up for eDelivery, log in to [www.netbenefits.com/atwork](http://www.netbenefits.com/atwork). Once logged in, click on "profile" to update your communication preferences. Signing up for eDelivery is one more way to make your Fidelity account accessible to you at anytime, at anywhere, at your fingertips.

If you should have any questions about your Fidelity-based IA Plan or any other Fidelity account, you can still call Fidelity at 866-84-UNION Monday through Friday 8 a.m. to midnight EST or stop into any Fidelity branch, many located throughout the Local 26 jurisdiction. ●



# The New Tax Law and You

No doubt you know that a new tax law was passed in 2017 with many of the changes implemented this year. But, what you may not know is how the new tax law affects working families—you!

The official name of the bill that created the law is the Tax Cuts and Jobs Act of 2017. It passed with a relatively slim margin in the House—227 to 205—and an even tighter margin in the Senate—51 to 49.

The law was advertised as a means to lower taxes for all. However, opponents say that the new tax law will create an even larger national deficit and further spread the gap between the wealthiest Americans and middle-class Americans.

While there has been a lot of criticism that the new law dispropor-

tionately benefits the rich, in the short term the law does offer some benefits to the middle-class, categorized as those earning \$49,000 to \$86,000, and the upper middle class, categorized as those earning \$86,000 to \$149,000. Middle-class earners will see an average tax cut of about \$930 for 2018 and upper middle-class earners will see an average tax cut of about \$1,810 in 2018. The tax cuts for these earning brackets will continue to go down a little in 2025 but by 2027 these two earning brackets will either see no tax cut or may even incur a tax increase, while the top 1% of wage earners will see a significant tax cut come 2027, a cut many argue that the wealthy do not need.

Most notably, the new law nearly doubles the standard deduction

taxpayers are allowed to take without individually itemizing all of their expenses. The standard deduction for singles increased from \$6500 to \$12,000 while the standard deduction for couples increased from \$13,000 to \$24,000. These increases will likely cause the number of filers itemizing their deductions to dramatically decrease.

One major downside to the new tax law is the disappearance of the personal exemption write off of \$4150 for each taxpayer and each dependent. A doubling of the child tax credit to \$2000 and increasing the threshold at which it phases out (now \$200,000 for singles and \$400,000 for couples) was implemented to offset the removal of the personal exemption write-off.

It is important to note that these individual provisions are not permanent. They are set to expire in 2025.

Another temporary provision in the tax law is the adjustment to the level at which you may deduct medical expenses. Prior to the new law, medical expenses more than 10% of your income could be deducted; the new law lowers that threshold to medical expenses more than 7.5% of your adjusted gross income. This provision only applies to the 2017 and 2018 tax years, which means taxes filed in 2018 and 2019.

The new tax law also has a significant impact on homeowners, particularly those who own or are looking to own a home in an area where real estate is expensive and taxes are high. The new law lowers the threshold at which homeowners can deduct mortgage interest to \$750,000 and allows homeowners to deduct a total of \$10,000 from their federal tax bill, including income, property and other taxes owed to state and local governments. States that see high real estate prices and high taxes are often coastal states, which include Maryland and Virginia, as well as states like California and New York. Additionally, the law eliminates tax deductions on home equity loans unless that loan is used to buy, construct or improve the taxpayer's residence.

When it comes to the new tax law's claim of boosting retirement, much of that is based on speculation that major corporate tax breaks will result in a boost to corporate profits, making stocks look more attractive.

Presumably, attractive stocks would cause the stock market to rise and therefore swell pensions and other retirement funds. Of course, this is all based on speculation that companies would use their tax savings to boost their corporate profits. There are many prominent business leaders, such as Bill Gates and Warren Buffet, who have opposed

this new tax law saying that businesses do not need any more tax breaks.

The provisions of the Tax Cuts and Jobs Act of 2017 will come to light as you file your 2018 tax returns next April. If you should have any questions, you may want to seek the help of a tax professional. ●



The new tax law also makes adjustments to the tax brackets that define percentages of taxable income. This infographic illustrates the new 2018 tax brackets versus those of the previous tax code.

## Changes to the tax brackets

New tax brackets reflect different percentages of taxable income.

### Filing as single

TAXABLE INCOME	2017 TAX BRACKET	2018-25 TAX BRACKET	TAXABLE INCOME
\$418,400	39.6%	37%	\$500,000
\$416,700	35%	35%	
\$191,650	33%	32%	\$200,000
\$91,900	28%	24%	\$157,500
\$37,950	25%	22%	\$82,500
\$9,325	13%	12%	\$37,950
\$0	10%	10%	\$9,525
			\$0*

### Filing as jointly/married

TAXABLE INCOME	2017 TAX BRACKET	2018-25 TAX BRACKET	TAXABLE INCOME
\$470,4700	39.6%	37%	\$600,000
\$416,700	35%	35%	
\$233,350	33%	32%	\$400,000
\$153,100	28%	24%	\$315,000
\$79,900	25%	22%	\$165,000
\$18,650	13%	12%	\$77,400
\$0	10%	10%	\$19,050
			\$0*

\*Chart does not account for the Medicare surtax on high earners.

SOURCES: House of Representatives, Tax Cuts and Jobs Act, Fidelity

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Maybe you were able to get into a specialist thanks to the quality of the Health Plan. Maybe you are able to live quite comfortably in retirement because of the Pension or Individual Account Plan. We want to hear how the benefits plans are working for you!

*Send us your story to [TTW@ewtf.org](mailto:TTW@ewtf.org) and we'll contact you to feature your experience in a future issue of Through the Wire.*

