

Summer 2019

Through the **WI**RE

LOCAL 26 IBEW-NECA JOINT TRUST FUNDS

Celebrating



★ **YEARS** ★

**LOCAL 26 ELECTRICAL WELFARE
TRUST FUND (EWTF)**

Dear Participant,

It is my great honor to be serving you as your Fund Administrator here at the IBEW Local 26-NECA Joint Trust Funds. I am so grateful to have had the experience of working with former Fund Administrator Peter Klein who worked tirelessly to ensure that your benefits funds were comprehensive, stable and well managed and that all of our participants received the very best customer service experience when they reached out to our office. I intend to continue that tradition of working tirelessly to serve our participants while looking ahead at how our funds can best serve your needs in the years to come. Benefits administration is an ever-evolving task—albeit a labor of love—and I am committed to ensuring that you and your family continue to receive the excellent health care coverage and secure retirement plans you deserve.

This year we are celebrating the 70th birthday of the Electrical Welfare Trust Fund. That is a lot to celebrate! And, we are proud to note that we have quite a few retirees today who have been with us from either the very start of our funds or just shortly after we launched. They are living proof, literally, of the success of our benefits funds. They are living vibrant lives thanks to the medical care afforded to them through our health plan and the financial peace of mind afforded to them through our pension and individual account plans. This should make all of you proud as well, to know that you are a member of a union that stands by its word of taking care of its members from the first day on the job through what will hopefully be a very long retirement.

Please know that our offices will continue to be open and available to all of our participants should you have any questions or concerns about your benefits funds. All you have to do is pick up the phone and call or stop in. Thank you for the trust you have placed in me to manage your health plan and retirement plans. In a day and age where benefits are often found on the cutting room for far too many workers, it is not lost on me how important these funds are and how fiercely they need to be protected.

Yours in good health,



Mike McCarron
Fund Administrator

CONTENTS



- 3 Meet Your New Fund Administrator
- 4 Happy Birthday to the EWTF
- 6 The National Crisis of Mental Illness
- 12 Understanding the EWTF
- 14 Filo Freedom Funds

Through the Wire is a publication of the Local 26 IBEW-NECA Joint Trust Funds
Fund Administrator: Michael McCarron
Writer/Editor: Jennifer Shure
Graphic Design: GO! Creative, LLC,
www.go-creative.net
Printing: Kelly Press, Inc.



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

Follow us on

-  Facebook by searching 26JTF
-  Twitter by searching IBEW26TrustFund
-  Instagram by searching IBEW26TrustFund
-  YouTube by searching IBEW26TrustFund





Introducing New Fund Administrator Michael McCarron



Effective April 1, 2019, our IBEW Local 26-NECA Joint Trust Funds has been under the leadership of Michael McCarron, who had been serving as the Trust Funds' Accounting Manager. Michael was appointed to the position of Fund Administrator upon the retirement of former Fund Administrator Peter Klein.

Michael earned an MBA from Loyola University in Maryland and has over 20 years of management experience in finance, accounting, compliance and administration. When he first came on board as Accounting Manager he dedicated himself to understanding the goals of the Fund Office and the joint trust funds themselves. He worked tirelessly at team building within the Fund Office with the goal of expanding the services provided and improving the customer service experience for our participants and their dependents. His comprehensive understanding of the funds and the Fund Office have enabled him to “think outside the box” and create unique ideas to common business challenges.

Applying his proven leadership talents and wealth of experience, Michael has already hit the ground running in his new role as Fund Administrator. When he is not in the office, Michael enjoys spending time with his family, which includes his wife Cristen, five sons and two grandchildren; and coaching high school boys' soccer and leading men's outreach opportunities within his church.

Happy Birthday to the EWTF!

The Electrical Welfare Trust Fund (EWTF), better known as the Local 26 Health Plan, just celebrated its 70th birthday! The Fund was created on June 28, 1949, while the Pension Plan was established in 1961. Today the Health Plan serves more than 24,000 members and beneficiaries combined. More than 5,000 claims are processed per week by 27 staff members who work in the Claims Department alone. The Fund Office has a total of 45 staff members, some logging more than 30 years serving the Local 26 membership and their families, working hard to provide and protect the benefits for which Local 26 members have worked so hard.

But, don't take our word for how great the EWTF really is; here are the words of some of our long-time members who have seen the inner workings of the EWTF through the eyes of a trustee or have enjoyed health benefits through the Plan since its earliest days. ●



Willie “Smitty” Smith,

95 years old, joined Local 26 in 1949, the year the EWTF was created. He had been working for Harper Electric when Local 26 opened its books and took in new members. He retired in 1982 after more than 33 years working as a union electrician. He is proud to have worked on such projects as the Atomic Energy Commission, Walter Reed Medical Center, and the I-395 tunnel, among others.

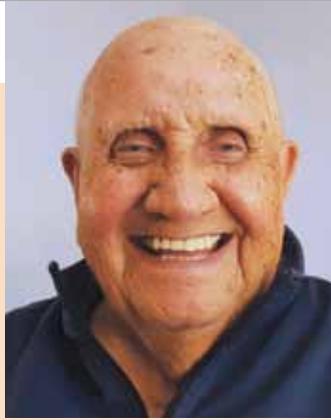
Smitty says that when he joined Local 26, he wasn't thinking about the possibility of getting benefits; he was just happy to have a paying job. He believes this is how most young people think even today. “It's only later in life when you realize that retirement plans and benefits are really important,” he says. “I am so grateful that I signed up at a young age



for a career with a pension and health benefits, even if I didn't truly appreciate their importance at the time.”

He notes that the health benefits have been a necessity for him, having broken his leg, undergone spinal stenosis surgery, and having been treated for melanoma. His wife, who was also covered by the Health Plan, had lymphoma surgery, suffered gradual blindness and endured many hospitalizations. And, between the two of them they took about 20 different prescriptions per day. “We could not have afforded these medications without our health benefits,” he adds. “I didn't think I would live to be 95 and had no idea what ailments I would encounter along the way but I'm grateful that the pension and health benefits were there to take care of me when needed.”

Ferdinand “Mike” Mical, 93 years old, joined Local 26 in 1952 and retired in 1988. He joined Local 26 just a few years after the health plan was established and nearly a decade before the pension plan was created. He says that the Local 26 benefits plans have kept him “above water” in his retirement. “I would be in the poor house if not for the health plan,” he noted. He adds that he takes 12 medications per day and before the EWTF Prescription Drug Plan he was spending \$75 per month on just one prescription. Using CVS Caremark, he pays \$50 per month for three prescriptions, reiterating that the Health



Plan has kept him out of debt. Brother Mical also notes that he would have had a hard time without the health plan while raising his family.

His advice to younger members is to pay into the benefits plans. “It’s my one life preserver,” he remarks. “I know people who are still working at 75. Some of my friends are still scratching for a paycheck because they weren’t in a union.”

“I can’t say enough about our benefits plans. I can’t even find enough words to give it the praise it deserves,” he says. “I am so glad I joined the IBEW.”

Franny Olshefski has been a member of Local 26 since 1962. He retired in 2006 after more than 43 years working for Local 26, serving on the Examining Board, the Executive Board, and as Vice President and President. He served for more than 25 years as a trustee on the Health and Welfare Plan, as well as many years on the Pension and Individual Account Plans.

He says it was important to him to serve as a trustee on the benefits plans because he felt it was another way he could help his fellow members, as well as retirees and future members, live a better life with a secure retirement and without the worries of ill health.

Brother Olshefski admits that, when he joined the local as a young man, he had no idea what he was receiving in the health benefits that he was offered. As a young and healthy man, he just tried not to get sick or injured. After he married and started a family, he quickly realized that the Health Plan gives you tremendous peace of mind. “You never anticipate things but with the Health Plan you are covered,” he notes. He continues to appreciate the health benefits more and more each day, remarking, “Our health benefits lift a huge burden and

make life more secure. Before the inception of our benefits package, members of Local 26 had to purchase their own health insurance and save toward retirement. Now, with the benefits we receive, we can enjoy the security they provide for ourselves and our families.”

He says that he would tell younger Local 26 members that they should appreciate what they have in our Health Plan and to utilize the benefits available, to ensure a more healthy and productive life.

Brother Olshefski adds that the quality of our health plan is also a marketing tool in recruiting and organizing members, perhaps more so to workers with a few years under their belt; but, nevertheless, it’s attractive to potential members. “With the cooperation of both management and labor trustees, we have created affordable and viable benefit plans for our members and their families,” he says.

When asked what is the most remarkable aspect of the Health Plan and, in fact, all of the benefits plans, Brother Olshefski, without hesitation, quickly credits the office staff of the EWTF. “I cannot say enough about the staff of the EWTF,” he says. “They work hard, are caring people and provide very personal customer service to our members.”

MENTAL ILLNESS

A National Crisis Still Under A Shroud of Myths and Misperceptions



When you see someone bleeding you get them a bandage. When you see someone holding their chest in pain you call an ambulance. But, what happens when a very serious medical condition can't be seen and someone is suffering in silence or "under the radar?"

Such hidden suffering is what makes mental illness so very serious, even a national crisis.

Mental illness knows no age, race, gender, socioeconomic, educational, geographic or religious barriers. And, most importantly, it not something to be ashamed of! It doesn't always present itself in the same way and the forms and combinations of mental illness are limitless. Erase all of the preconceived notions you may have about mental illness and recognize that anyone, anywhere—even you or someone you love—could suffer from mental illness.

For all of the benefits of good mental health—helping you reach your full potential, helping you cope with stress, enabling you to be productive at work, helping you make meaningful contributions to your community—the negative impact of mental illness is often exponentially greater. This is what makes an awareness about mental illness so critically important for everyone.

By the Numbers

In general terms, mental illness is a condition that affects a person's thinking, feeling or mood, and could affect a person's ability to relate to others and function each day, according to the National Alliance on Mental Health (NAMI). As devastating as mental illness is, it can also be treated, and *should* be treated, before it is too late.

Consider these statistics from the National Institute of Mental Health:

- ▶ About 1 in 5 adults in the U.S. experience mental illness in a given year.
- ▶ About 1 in 5 youth aged 13-18 experience a severe mental disorder at some point in their life.
- ▶ Only 41% of adults in the U.S. with a mental health condition received mental health services in the past year.
- ▶ Only about half of children aged 8-15 with a mental health condition received mental health services in the previous year.



- ▶ Half of all chronic mental illness begins by age 14, three-quarters by age 24.
- ▶ More than 90% of people who die by suicide show symptoms of a mental health condition.
- ▶ Suicide is the tenth leading cause of death in the U.S. and the second leading cause of death for people aged 10–34.
- ▶ Each day about 20 veterans die by suicide.

Too Many Stereotypes, Too Little Understanding

Mental illness is not what you see in movies (like Jack Nicholson in *One Flew Over the Cuckoo's Nest*) and it's not limited to hardcore criminals and the homeless in back alleys. The person next to you right now could have a form of mental illness, your co-worker or best friend could be in treatment for a mental illness and even someone under your own roof, maybe one of your children or your spouse, could be suffering from a form of mental illness that has yet to be diagnosed in them.



Mental illness does not always manifest itself into psychotic, violent episodes that puts the sufferer and those around them in danger. In fact, only 3%-5% of violent acts are committed by someone suffering from mental illness. And, it's not always in the form of the lady on the street corner shouting random things as people walk by. In fact, mental illness is rarely as obvious, initially, as these scenarios, which is what makes it so difficult to recognize, which is why it takes sufferers and those who love them so long to seek help. There are more than a dozen different mental disorders, including, but not limited to:

- 1 **ADHD (Attention Deficit Hyperactivity Disorder):** a developmental disorder that manifests into attention problems, hyperactivity and acting impulsively
- 2 **Anxiety Disorder:** anxiety that becomes overwhelming and repeatedly impacts a person's life
- 3 **Autism:** a developmental disorder that makes it difficult to socialize and communicate with others
- 4 **Bipolar Disorder:** dramatic highs and lows in a person's mood, energy and ability to think clearly
- 5 **Borderline Personality Disorder:** characterized by severe, unstable mood swings, impulsivity and instability, poor self image and difficult relationships
- 6 **Depression:** more than just feeling sad or going through a rough time, it's low mood, loss



of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration

- 7 **Dissociative Disorders:** a disconnection and lack of continuity between thoughts, memories, surroundings, actions and identity
- 8 **Early Psychosis:** disruptions to a person's thoughts and perceptions that make it difficult for them to recognize what is real and what isn't
- 9 **Eating Disorders:** a preoccupation with food and weight issues to the point that you find it hard to focus on other aspects of life
- 10 **Obsessive Compulsive Disorder:** repetitive, unwanted, intrusive thoughts (obsessions) and irrational, excessive urges to do certain actions (compulsions)
- 11 **Post Traumatic Stress Disorder:** triggered by witnessing or experiencing a terrifying event and can include nightmares, flashbacks, severe anxiety and uncontrolled thoughts about the event ▶



12 Schizophrenia: losing touch with reality, often in the form of hallucinations, delusions and extremely disordered thinking and behavior

13 Schizoaffective Disorder: symptoms of schizophrenia, such as hallucinations or delusions, combined with symptoms of a mood disorder, such as depressive or manic episodes

In many cases, sufferers have more than one disorder, such as depression and anxiety combined, so while the above list is long, it is far from complete. While diagnosing a mental illness should always be the job of a medical professional, it is important to recognize some early warning signs of mental illness so you can get help for yourself or someone you care about. Some of those warning signs are:

- Eating or sleeping too much or too little
- Pulling away from people and usual activities
- Having low or no energy
- Feeling numb or like nothing matters

- Having unexplained aches and pains
- Feeling helpless or hopeless
- Smoking, drinking or using drugs more than usual
- Feeling unusually confused, forgetful, on edge, angry, upset, worried or scared
- Yelling or fighting with family and friends
- Experiencing severe mood swings that cause problems in relationships
- Having persistent thoughts and memories you can't get out of your head
- Hearing voices or believing things that are not true
- Thinking of harming yourself or others

- Inability to perform daily tasks like taking care of your kids or getting to work or school

It's Not Your Fault

The greatest truth about mental illness that must be front and center is that mental illness is not the "fault" of the sufferer. No shame or blame should be attached to mental disorders as their causes are powerful and beyond the sufferer's ability to control.

There are biological, psychological and environmental causes for mental illness. Genetics is one of the most common biological causes of mental disorders. Mental disorders have been found to run in families and studies have shown that it's abnormalities in many genes that are linked to mental illnesses. While these abnormalities do not

GET HELP!

EWTF Employee Assistance Program (24 hours a day, 7 days a week):
800-765-3277

National Suicide Prevention Hotline (24 hours a day, 7 days a week):
800-273-TALK (8255)

Alcoholics Anonymous (24 hours a day, 7 days a week): **888-917-9057**

Narcotics Anonymous: www.na.org

Crisis Text Line: Text **CONNECT** to **741741**



always immediately *cause* mental illness, they can predispose a person to mental illness if exposed to a trigger like stress, abuse or a traumatic event. A genetic mutation alone does not always cause a mental illness.

Even more confounding is that mental illness can present in different ways among family members so no one-size-fits-all approach can be applied even within an affected family. One family member may suffer mild symptoms of a mental illness while another may be completely debilitated.

Infections linked to brain damage are another biological cause to mental illness or the worsening of existing symptoms. One such example is Pediatric Autoimmune Neuropsychiatric Disorder (PANDA) which has been linked to strep infection, a common bacterial infection in children. PANDA has been shown to cause such mental disorders as obsessive-compulsive disorder in some children with strep infection. Prenatal brain damage during development or birth, such as a loss of oxygen to the brain, is also believed to be a cause for mental conditions such as autism.

Other biological contributors to mental illness include long-term substance abuse, which has been tied to anxiety, depression, and paranoia; poor nutrition; and exposure to toxins such as lead

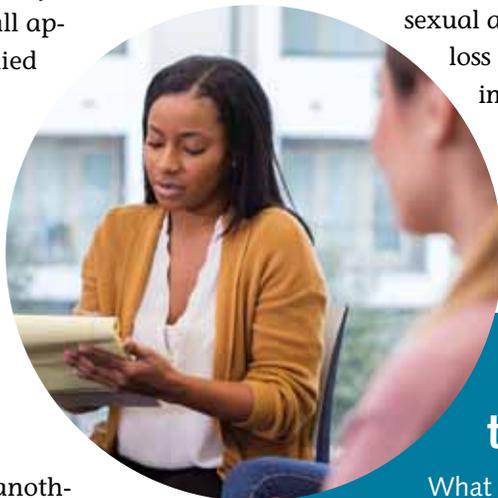
which affects brain development and function. These are biological contributors because they alter the body.

Other causes that can lead a predisposed person to mental illness can be psychological or environmental. Psychological triggers include severe trauma suffered as a child such as emotional, physical or sexual abuse; early loss of someone important such as losing a parent or sibling; neglect; and

inability to relate to others. Environmental triggers can include death or divorce; a dysfunctional family; feelings of inadequacy, low self-esteem, anxiety, anger, or loneliness; changing jobs or schools; social or cultural expectations and pressures; substance abuse by a person or person's parents. (Substance abuse is considered both a biological and environmental factor.)

Treat, Don't Wait

Mental illness is not something that goes away on its own, like a cold or a headache. It is a lifelong condition but it can be controlled and managed through treatment



Who Is the Right Person for the Job?

What is the difference between a psychologist and a psychiatrist or a counselor and a social worker? There are many professionals who are qualified to assess and treat patients suffering from mental illness but there are important differences between them. Some professionals have earned different degrees and some are able to write prescriptions while others are not.

- **Psychologists** have earned a doctoral degree (a Ph.D. or Psy.D. but not an M.D.) in clinical psychology or another specialty area.
- **Counselors, clinicians and therapists** have earned a master's degree (M.S. or M.A.) in a mental health-related field such as psychology, counseling psychology, marriage or family therapy, to name a few.
- **Clinical social workers** have earned a master's degree in social work and are also trained in case management and advocacy services.
- **Psychiatrists** are licensed medical doctors who can diagnose mental health conditions, prescribe and monitor medications and provide therapy.
- **Psychiatric/Mental Health Nurse Practitioners** have earned a master's of science (M.S.) or doctor of philosophy (Ph.D.) in nursing with a specialized focus on psychiatry. They can assess, diagnose, and provide therapy for mental health conditions and in some states, they are qualified to prescribe and monitor medications.

A provider's title and credentials are important because it could affect your ability to be covered by our health plan for mental health services rendered. Know who is treating you or those you love.

and therapies with the guidance of medical professionals. With proper treatment, mental disorders do not have to have a negative impact on a person's life; a vast majority of those with a mental condition live full and active lives with their illness under control.

If you suspect that you or someone you care about might have a mental illness, the first step is to see a primary care physician who can conduct a physical exam; perform lab tests to rule out such things as thyroid malfunction and screen for drugs or alcohol; and conduct

a basic psychological evaluation to examine symptoms, thoughts, feelings and behavior patterns. It would be helpful to bring a list of symptoms you or the person you are concerned about may be experiencing and for how long, a list of personal information such as past

Kids and Mental Health

Millions, that's right, millions, of kids in the U.S. ages 3-17 suffer from a form of mental illness, with attention deficit hyperactivity disorder (ADHD), behavioral problems, anxiety and depression among the most commonly diagnosed. But, diagnosing mental health issues in children is especially challenging because the signs and symptoms often go unnoticed or passed off as "a phase."

Let's be honest; no parent wants their child to have a mental illness so sometimes early warning signs are excused as a phase of development. Frequent out-of-control temper tantrums? It's just an overtired kindergartener. A high-schooler who sleeps all day and spends much of their waking hours alone? It's just a brooding teenager. While these may truly just be phases of development in most kids, what if they are not in some? What if they are an early warning sign of a mental illness?

The warning signs of mental illness in children differ from those in adults. In younger children, some warning signs include:

- Frequent tantrums or intense irritability much of the time
- Often talking about fears or worries
- Complaining about frequent stomachaches or headaches with no known medical cause

- Being in constant motion and unable to sit quietly (*except* when they are watching videos or playing video-games)
- Sleeping too much or too little, having frequent nightmares, or being sleepy during the day
- Uninterested in playing with other children or having difficulty making friends
- Struggling academically or having experienced a recent decline in grades
- Repeating actions or checking things many times out of fear that something bad may happen

Warning signs in older children include:

- Having lost interest in things that they used to enjoy
- Having low energy
- Sleeping too much or too little, or seeming sleepy throughout the day
- Spending more and more time alone, and avoiding social activities with friends or family
- Expressing a fear of gaining weight, or dieting or exercising excessively
- Engaging in self-harm behaviors (e.g., cutting or burning their skin)
- Smoking, drinking, or using drugs
- Engaging in risky or destructive behavior alone or with friends



- Having thoughts of suicide
- Having periods of highly elevated energy and activity, and requiring much less sleep than usual
- Saying that they think someone is trying to control their mind or that they hear things that other people cannot hear

If you suspect that your child may be suffering from a mental illness, talk to their teacher(s) to learn more about their behavior in school, talk to your pediatrician and get a referral for a mental health professional. Treating mental illness can be a scary endeavor for parents because of the many myths about mental illness. Treatment doesn't necessarily mean intense prescription drugs; it could mean therapy, focusing on more positive behaviors, and other non-medicated options. Get your child the help they may need!

or current traumatic events and stressors, and medical information including current medications (including vitamins, herbal products and other supplements).

If it is determined that you or someone you care about has a mental illness, treatment may include a team of professionals and may be a multi-faceted approach involving more than one type of treatment. A team of professionals might include a primary care doctor, nurse practitioner, physician assistant, psychiatrist, psychotherapist, pharmacist, and/or social worker. (The difference between a psychiatrist and a psychotherapist is that a psychiatrist is a medical doctor and a psychotherapist is a psychologist or a licensed counselor.)

Treatment options may include medications, psychotherapy or talk therapy with a mental health professional, and hospital and residential treatment programs, among others. Regardless of the treatment plan prescribed, lifestyle commitments and home remedies help ensure a plan's success.

- **Stick to the treatment plan.** Sometimes a patient will skip therapy sessions or discontinue their medications if they think they are feeling better. Symptoms can come back and withdrawal-like symptoms can come back if medications are altered abruptly.
- **Avoid alcohol and drugs.** Alcohol and recreational drugs can complicate the treatment of mental illness and if a patient is prone to addiction, quitting can be a major challenge.



- **Stay active.** Exercise has been proven to help with symptoms of depression, stress and anxiety. And, as some psychiatric medication can cause weight gain, exercise can help counter that side effect.
- **Make healthy choices** that include getting sufficient sleep, eating healthy and getting regular physical activity, which are all important to mental health.
- **Don't make important decisions when symptoms of mental illness are severe** and the ability to think clearly is compromised.
- **Reassess priorities.** Cut back on obligations and set reasonable goals to manage time and energy.
- **Adopt a positive attitude.** Focus on positive things, accept changes, keep problems in perspective and employ stress management techniques when needed.



The EWTF provides mental health care coverage. The Local 26 Employee Assistance Program (EAP) administered by Business Health Services (BHS) will determine if you or a covered dependent needs care and will help you navigate your benefit coverage. If you are concerned that you or a covered dependent may need mental health treatment, call Business Health Services which will set up an appointment for a face-to-face meeting with an EAP counselor for an assessment and, if necessary, a referral. Remember, EAP counseling services extend to family members living with a covered participant but full mental health benefits as assessed by the EAP are only extended to covered participants.

Outpatient treatment for mental health is paid at 80% of the allowance once the annual deductible has been met and treatment must be provided by an M.D., Ph.D. or a licensed social worker under the supervision of a doctor (M.D. or Ph.D.). The first \$7,000 of eligible expenses for room and board and other covered hospital services are paid in full. Charges exceeding \$7,000 are paid at 80% of the allowance.

The only shame with mental illness are the misperceptions by the general public that far too often lead to sufferers not getting the help they need. Mental illness is not a choice and it is typically bigger than any one person can handle on their own. Don't let anything stand in the way of getting help for yourself or someone you care about who may be suffering with mental illness. ●

Understanding *How the EWTF Works*

You know that your health benefits are administered through the Electrical Welfare Trust Fund (EWTF) but do you know the difference between the EWTF and UnitedHealthcare and the EWTF and our other partners—Cigna Dental, VSP and CVS Health? It's easy to confuse the roles of these well-known insurance providers with the role of your EWTF because these companies work in conjunction with the EWTF to provide you and your family with the very best health care coverage possible.

In simple terms, the EWTF is your health plan provider, as well as your dental, vision and prescription coverage provider. We are not a general insurance company as we are strictly a private plan created for the exclusive use of Local 26 members and their beneficiaries. The EWTF is not available to the

general public but the EWTF is held to the same strict ERISA laws as any major public health plan in the U.S. (ERISA, the Employee Retirement Income Security Act, is a federal law which sets standards for retirement and health plans to protect those covered by these plans.)

The health plan insurers in our EWTF network—UnitedHealthcare, Cigna Dental, VSP and CVS Health—serve to provide us access to their provider networks, with which they have negotiated pricing to lower out-of-pocket expenses. The EWTF has a contract with each of the individual insurance companies, who, given their size, have tremendous negotiating power with health providers, so that we may also benefit from more competitive pricing and pass on a cost savings to our participants. This cost savings only applies to in-network

providers, however, the participating provider networks of these companies are tremendous.

Because UnitedHealthcare is not your health insurance provider, and the same for Cigna Dental and VSP, it can be confusing when your health provider checks your coverage and eligibility. There are specific customer service numbers on your insurance card that your health providers should use to check your coverage and eligibility. If, for example, your provider calls the general UnitedHealthcare number regarding your coverage, they will be told that you do not participate with UnitedHealthcare. And, this would be accurate. You are covered by the EWTF who has a contract with UnitedHealthcare Shared Services for access to their provider network. Your provider would need to contact UnitedHealthcare Shared Services to confirm that you have access to their





provider network. UnitedHealthcare is an insurance company, with which our Local 26 members DO NOT participate, while UnitedHealthcare Shared Services is a provider network that our members DO have access to through their EWTF health plan coverage. To better understand, all of your medical claims are paid by the EWTF, not UnitedHealthcare, Cigna Dental, VSP or CVS Caremark.

The EWTF is your health plan provider, as well as your dental, vision and prescription coverage provider. We are not a general insurance company.

However, the EWTF's role in your health plan as administrator has many other layers. First, the EWTF, under the guidance of its union and employer trustees, customized the plan coverage to best serve the needs of Local 26 members and their families. The EWTF created a

plan that was comprehensive yet affordable, and the EWTF works to ensure that our members are receiving the full coverage of the plan for all of their health care needs while ensuring the plan remains fiscally responsible. When our members need answers about their coverage that can't be found on our website or their personalized My Benefits Center profile, they call our EWTF offices and speak with one of our staff members. This is yet another role of our EWTF—serving as a liaison between those covered under our plan and health care providers.

Additionally, the EWTF is responsible for educating our plan participants on their benefit coverage through the summary plan description and any subsequent plan amendments and through regular communications such as emails and mailings. It is the responsibility of the EWTF to keep our participants abreast of any changes to coverage and maintaining accurate and up-to-date records for all participants as well as ensuring that legal guidelines such as privacy laws are strictly adhered to.

If you should have any questions regarding your health plan, including our dental, vision and prescription drug coverage, the EWTF is always available to help. The EWTF oversees all of the health coverage for Local 26 participants from start to finish and we are here to work for you. ●

New Opioid Prescription Limitations to Protect Adolescent Plan Participants

According to the Centers for Disease Control an average of 130 Americans die each day from an opioid drug overdose. It has become nothing short of an epidemic and some of the areas with the greatest prevalence of opioid abuse are right here in Local 26's jurisdiction. The EWTF is joining forces with CVS Caremark, our prescription plan provider, to help stop this national crisis.



Effective October 1, 2019, plan participants ages 19 and younger who are new opioid prescription recipients will be restricted to a three-day or less supply of short-acting opioids, including immediate release and immediate release combination prescriptions. Covered participants who may need a longer-day supply for ongoing treatment will need to apply for prior authorization. Those being treated for certain chronic conditions such as cancer and sickle cell disease, for example, or for palliative care are exempt and may continue to receive their opioid prescriptions on their regular schedule.

This new strategy the EWTF has adopted with CVS Caremark is an effort to protect our members—our youngest members in particular—from the misuse and abuse of powerful opioid drugs.

Fidelity Freedom Funds

Give You the Freedom to Decide Your Role in Your IA Plan



The old adage “don’t put all your eggs in one basket” can be applied to so many things in life but it is especially sage advice when it comes to your retirement savings. Everyone wants retirement security and the best way to achieve that security is twofold—fund your savings plans as robustly as possible and diversify your investments, that is “don’t put all of your eggs in one basket.”

Our Individual Account Plan is an opportunity for members to be in the driver’s seat of a retirement plan. Although your Individual Account Plan is strictly funded through employer contributions per the collective bargaining agreement, you *can* choose how your money is invested, if you feel confident in your knowledge of investment vehicles. But, if you are not well versed in the investment markets, or you don’t have the time to manage your own investments on a daily basis, or you wish to rely on the services of our Individual Account Plan administrator, Fidelity, investing in a Freedom Fund, also known as a target date fund, might be a good option.

Fidelity’s Freedom Funds are diversified investment funds that feature a mix of stocks, bonds and short-term assets. The percentage of stocks, bonds, and short-term assets in each Freedom Fund is determined by the amount of time that Fund has to grow in order for the funds to be available when you need them in retirement. The most important features of this type of investment are its diversification and how that diversification is allocated.

The difference between stocks, bonds and short-term assets is the amount of risk and yield they carry. Typically, there is a give and take when it comes to different investment options. The investments that yield high rewards quickly often come with a high level of risk. That is, while these options could deliver impres-

sive returns in a short time frame, they could just as easily suffer great losses...quickly.

Putting all of your “eggs” into higher-risk investments may not be a wise decision for an investor who is looking to retire in the near future because should that higher risk investment not work out, this investor would not have the benefit of time to grow their account back. A higher risk investment may be advisable if you have many years before needing that retirement money to weather the ups and downs of the stock market. A more conservative investment that is not so wildly affected by the ups and downs of the markets, such a bond, would be more ideally suited to an older investor who would need the security that their retirement savings is stable and will be fully available when they need it.

Younger investors are generally advised to diversify in the opposite manner and leverage the many years they have until retirement to invest in higher-risk investments that could pay greater returns. A fund that has more stocks and fewer bonds would be just that kind of investment.

Fidelity Freedom Funds are defined, even named, by the date in which the investor intends to draw from the account, presumably his/her retirement date. So, if you intend to retire in 2060, you would look to invest in the Freedom Fund 2060. Each Freedom Fund is

Don’t forget that Fidelity’s NetBenefits app which can be downloaded to any iPhone, iPad, smartphone or tablet





comprised of a different combination of stocks, bonds, and short-term assets based on the level of risk that is advisable with a specific retirement date in mind. Therefore, a Freedom Fund 2060 would bear more risk than a Freedom Fund 2025. A Freedom Fund 2010, which would be about nine years into an investor's retirement, would be almost entirely focused on securing a fixed income versus growth investments to protect from a potential market decline.

If you decide that investing in a Freedom Fund is the right choice for you, all you need to do is select the fund with your anticipated retirement date and let Fidelity oversee it for you. Over the years, the Freedom Fund will reassign its allocations to adjust its risk tolerance as you draw closer to needing those funds in retirement. You will not need to adjust your allocations yourself; the Freedom Fund will do it for you, mov-

ing from higher risk investments to more conservative investments. This is called automatic rebalancing.

If you should have any general questions about your Individual Account Plan feel free to contact the Fund Office at 301-731-1050. If you should have any questions about your investment options within the Individual Account Plan or Freedom Funds in particular, contact Fidelity at 866-84-UNION Monday through Friday 8 a.m. to midnight EST or stop in to any Fidelity branch office. There are many located throughout the Local 26 jurisdiction.

Don't forget that Fidelity's NetBenefits app, which can be downloaded to any iPhone, iPad, smartphone or tablet, also offers a wealth of information via articles, videos and the platform which can help you learn more about your Individual Account Plan. The app also allows you to monitor your account balances, review and change your investments, and compare your account performance with your peers in your age group and area, among a host of other things.

In short, Fidelity Freedom Funds help you grow your savings during your earning years and provide income and stability during your retirement years. Fidelity Freedom Funds take the guesswork out of investing and simplify the sometimes daunting process of saving for retirement. ●



Fidelity Freedom Funds help you grow your savings during your earning years and provide income and stability during your retirement years.



Presort Standard
US Postage
PAID
Southern MD
Permit #139

The member portal is now live... and it's available 24 hours a day, seven days a week!



From the convenience of your computer, tablet or smartphone, you can:

- **Find answers to questions** about your union benefits, such as the status of a medical bill, your eligibility, your work history, or your retirement benefits
- **Update** your contact information or beneficiary information
- **Download** and submit forms

Just visit www.ewtf.org and click "**My Benefits Center**" at the top of the page. You can even view a short how-to video to learn more.