CEMENT MASONS' LOCAL 526 COMBINED FUNDS, INC.

ADMINISTRATORS—CEMENT MASONS'

- WELFARE
 - PENSION
 - RETIREMENT
 - DUES DEDUCTION
 - SUPPLEMENTAL INCOME
 - INDUSTRY ADVANCEMENT

FUNDS



1900 ANDREW ST. SUITE 201 MUNHALL, PA 15120-2554 (412) 761-6166 FAX: (412) 761-0318

Dear Member:

Cement Masons Local 526 is continuing its effort to provide you with meaningful Group Insurance Benefits. Please take some time to review the enclosed material carefully.

All Colonial Life products are eligible for payment through your Welfare Account pending eligibility. If you do not have sufficient funding in your member account, you may elect to self-pay for these benefits.

The following products are available as of October 1, 2023:

Accident Plan – Provides both on and off the job payments for anything from cuts and burns to broken bones, ER visits, and hospital stays. There are no medical questions to answer. Spouse and dependent coverage is available.

Short Term Disability – At the time you first become eligible for this coverage, Colonial Life makes this plan available on a guaranteed issue basis for new participants: this is a huge advantage. Should a new participant decide to not take this coverage now and apply at a later time, you will be subject to medical underwriting and may not be eligible for coverage.

<u>STD</u> provides a monthly benefit to replace monthly income if you are unable to work due to a covered disability. You can purchase up to 60% of your monthly income; 6-8 weeks of maternity included. This coverage is available for the employee only. There are medical questions to answer and a twelve (12) month pre-existing condition clause.

Hospital Confinement – This benefit provides lump sum payments of \$500 or \$1000 for inpatient stays; outpatient surgery lump sum payments up to \$1500/year per insured; daily confinement payable \$100/day; \$100/day for rehab unit for up to 15 days; \$750/year for diagnostic testing; 2 observation rooms visits per year per insured. This coverage requires answering medical questions & has a (12) month pre-existing condition clause. Spouse & dependent coverage available.

Cancer Coverage - Expands your treatments options by paying you directly for various steps in the treatment process of any type of cancer diagnosis whether your health insurance covers it or not. \$100/year Return on Premium per insured is paid when a qualified wellness test is done. This coverage requires anyone previously diagnosed to be treatment free for 5 years to apply. Spouse & dependent coverage available.

<u>Critical Illness Coverage</u> \$10,000 is sent to you tax free upon diagnosis of Heart Attack, Stroke, Major Organ Failure, End Stage Renal Failure, Blindness, Occupational HIV/ Occupational Hepatitis B, C or D, Coronary Artery Bypass Graft Surgery. \$50/year <u>Return on Premium</u> per insured is paid when a qualified wellness test is done. (12) month pre-existing condition clause applies. Spouse & dependent coverage available

In order to sign up for any of the coverage offered by Colonial Life or you have questions, or would like to meet with our Colonial Life representative, please **give Tammy Morgart a call at 412-605-9451.**

Sincerely, Cement Masons Local 526 Welfare Fund



Colonial Life. Cement Masons Local 526 Combined Funds Please call 412-605-9451 to enroll

Accident Coverage (available to members and family)

Monthly Rates

Individual	\$17.81
Full Family	\$52.18
Husband/Wife	\$30.00
One parent Family	\$39.99

Short Term Disability Coverage (available to members only)

- Coverage begins the first day of an accident and after the 7th day of an illness
- Coverage lasts for 12 months
- Plan eligibility is determined by annual income

Plan	\$/Month	Ages 17-49	Ages 50-69	Annual Income
Α	\$2,700	\$144.45	\$180.90	\$60,000
В	\$2,200	\$117.70	\$147.40	\$40,000
С	\$1,700	\$90.95	\$113.90	\$32,000
D	\$1,600	\$85.60	\$107.20	\$30,000
Ε	\$1,000	\$53.50	\$67.00	\$19,000
F	\$800	\$42.80	\$53.60	\$15,000
G	\$600	\$32.10	\$40.20	\$12,000

Hospital Confinement Indemnity Insurance (available to members and family) \$500/\$1,000 Inpatient Level

Monthly Rates	Ages 17-49	Ages 50-59	Ages 60-64	Ages 65-75	
Individual Coverage	\$31.65/\$37.35	\$40.90/\$48.75	\$53.30/\$64.10	\$65.45/\$79.85	
Member & Spouse	\$59.60/\$70.45	\$77.20/\$92.10	\$100.75/\$121.25	\$123.80/\$151.15	
Member & Children	\$41.55/\$49.25	\$50.85/\$60.70	\$63.20/\$76.00	\$75.35/\$91.75	
Family	\$69.55/\$82.40	\$87.10/\$104.00	\$110.65/\$133.15	\$133.70/\$163.05	

Cancer Coverage (available to members and family)

Monthly Rates

Level 3 with \$100 Health Screening Benefit

Individual \$26.65
Full Family \$44.85
Husband/Wife \$44.40
One parent Family \$27.10

<u>Critical Illness Coverage (available to members and family)</u> with subsequent diagnosis coverage and health screening benefit

Monthly Non-Tobacco Rates \$10,000 Benefit

Issue Age	Individual	Husband/Wife	One Parent Family	Full Family
17-24	4.55	6.90	4.55	6.90
25-29	5.25	8.10	5.25	8.10
30-34	6.05	9.40	6.05	9.40
35-39	8.45	13.00	8.45	13.00
40-44	10.05	15.40	10.05	15.40
45-49	13.05	20.00	13.05	20.00
50-54	16.65	25.60	16.65	25.60
55-59	20.55	31.50	20.55	31.50
60-64	25.45	39.10	25.45	39.10
65-70	28.85	44.30	28.85	44.30

Monthly Tobacco Rates \$10,000 Benefit

Issue Age	Individual	Husband/Wife	One Parent Family	Full Family
17-24	5.55	8.50	5.55	8.50
25-29	6.85	10.50	6.85	10.50
30-34	8.55	13.20	8.55	13.20
35-39	11.85	18.20	11.85	18.20
40-44	15.35	23.60	15.35	23.60
45-49	19.75	30.30	19.75	30.30
50-54	24.85	38.10	24.85	38.10
55-59	31.55	48.50	31.55	48.50
60-64	37.95	58.30	37.95	58.30
65-70	43.35	66.70	43.35	66.70