

Contractors, Laborers, Teamsters & Engineers

Health & Welfare Benefits At A Glance



YOUR CLT&E BENEFITS

Working Harder for You

BENEFITS FOR THOSE THAT BUILD

You work hard every day. And in return, you expect to be able to provide for yourself and your family. One of the best ways you can do that is to have a benefits program that provides you the security and protection you need.

Your CLT&E Health and Welfare benefits program is designed to do just that – protect you from the unexpected. Things like illnesses and injuries... or even death. But it also helps with the everyday things like check-ups for your kids, dental work, and glasses.

This brochure is designed to give you a brief look at the benefits that are available to you through the CLT&E Health & Welfare Plan. For more information, contact the Fund Office at (402) 491-3751 or refer to the Summary Plan Description for details. Additional information regarding all of the benefits available through the Fund Office can be found at www.cltebenefits.com.

When You Can Join

The Health & Welfare benefits program is available to you after you have worked a minimum of 500 hours. These hours must have been worked within a five-month period, or less. (Please note that before you can be given credit for your hours worked, the Fund Office must receive and record the corresponding contribution from the employer.) Once you have completed your 500 hours, you will be eligible on the first day of the following month.

Here's a chart that shows two examples of how you can meet the 500-hour requirement.

Example 1: Initial Enrollment (500 hours):

Month 1	Month 2	Month 3	Month 4	Month 5	1 st of Month 6
100 hrs	100 hrs	100 hrs	100 hrs	100 hrs	Eligible

Example 2: Initial Enrollment (500 hours)

Month 1	Month 2	Month 3	Month 4	Month 5	1 st of Month 6
120 hrs	200 hrs	200 hrs	Eligible	Eligible	Eligible

Family Member Eligibility

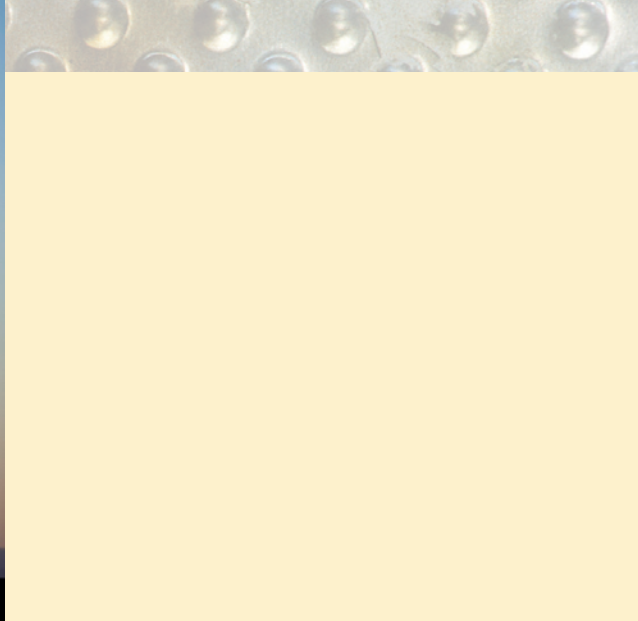
When you enroll, you may also enroll your eligible family members for medical, dental, vision, and life insurance.

Eligible family members include:

- Your spouse (unless you are legally separated)
- Your children under age 26 (including natural children, adopted children, stepchildren, foster children, and children born out of wedlock if you provide proof of paternity).

Please note that you must complete the Enrollment Application to have your dependents added to the Plan. Contact the Fund Office for assistance if necessary.





How to Maintain Participation

You are eligible to continue participating in the Plan as long as you meet one of the following requirements:

- You worked at least 300 hours in the first three months of the last five-month period

Example: Continuous Enrollment (300 hours)

Month 1	Month 2	Month 3	Month 4	Month 5	1 st of Month 6
100 hrs	100 hrs	100 hrs	N/A	N/A	Eligible

- Or, you worked at least 1,200 hours in the first 12 months of the last 14-month period.

Example: Continuous Enrollment (1200 hours)

Month 1	Month 2	Month 3	Month 4	Month 5
100 hrs	100 hrs	100 hrs	100 hrs	100 hrs
Month 6	Month 7	Month 8	Month 9	Month 10
100 hrs	100 hrs	100 hrs	100 hrs	100 hrs
Month 11	Month 12	Month 13	Month 14	Month 15
100 hrs	100 hrs	N/A	N/A	Eligible

Generally, as long as you meet one of these two eligibility requirements, you can continue to participate, provided at least one hour is worked within the last six months.

Medical Benefits

Our Medical Plan gives you two choices when selecting a health care provider:

- See a network doctor or facility and save time and money, or
- Choose any doctor or facility outside the network and pay a higher portion of the cost of care.

Using network providers saves you money because you receive negotiated discounts off their normal rate. In addition, network providers will file claims for you and file for any prior approvals that may be necessary before receiving certain types of care.

For those living near the Omaha/Lincoln metropolitan areas (zip codes beginning with 680, 681, 683, 684, 685) be sure to look for providers within the **Premier Select BlueChoice Network**. This network includes the Methodist Healthcare Systems as well as the University of Nebraska Health Care Systems.

For those living outside the designated network area, look for the broader BlueCard network. Be sure to ask your doctor or provider if they participate in your Blue Cross network. Visit nebraskablue.com and click the "Find a Doctor" link, or call Blue Cross at 1 (800) 810-2583.

The chart below shows the general plan design. The medical and dental benefits associated with the Plan are administered through Blue Cross Blue Shield of Nebraska. The vision and disability plans are administered through the CLT&E fund office.

	If you use network doctors & facilities, you pay...	If you do not use network doctors & facilities, you pay...
Annual Deductible • Per person • Per family	\$750 \$1,500	\$1,500 \$3,000
Out-of-Pocket Maximum • Per person • Per family	\$5,000 \$10,000	\$10,000 \$20,000
Coinsurance	You pay 20% Plan pays 80%	You pay 40% Plan pays 60%
Preventive Care	You pay \$0 Plan pays 100% (no deductible)	You pay 40% Plan pays 60% after deductible
Emergency Room Visits	\$500 coinsurance (waived if admitted)	\$500 coinsurance (waived if admitted)
Prescription Drugs At a Pharmacy (90-day supply) • Generic • Preferred name brand • Non-preferred name brand Mail Order (90-day supply)	Greater of: \$20 or 10% \$80 or 10% \$120 or 10% Same as Pharmacy benefit	 Not covered

Other Pharmacy Benefits

The pharmacy benefit also covers specialty drugs, contraceptives, and prescriptions for nicotine addiction. Learn more in your SPD or by contacting the Fund Office.

Special Benefits for Preventive Care

Most medical benefits are available after you pay the deductible. However, if you need a medical checkup, your benefits start right away. That's right! The Plan will pay 100% of the medical expenses associated with preventative care for you and each eligible dependent. This includes expenses associated with an annual physical exam, Pap smears, mammography exam, and well baby services such as immunizations.



BEFORE RECEIVING MEDICAL CARE

There are times when you need to notify the insurance company that you are scheduled to receive medical treatment. For example, you must contact the insurance company before you have any kind of surgery or treatment. As long as you seek medical treatment within your designated Blue Cross network, the provider will coordinate this for you.

For information regarding an in-network provider in your area, call 1 (888) 592-8961 or visit nebraskablue.com and click "Find a Doctor."

Additional Benefits

Dental

The Plan will pay up to \$2,400 per person for in-network services for you and your dependents, or \$1,200 per person for out-of-network services. Much like the Medical Plan, Blue Cross Blue Shield will administer this program.

The following benefits are administered through CLT&E Fund Office. Claims and inquires should be directed to: 10334 Ellison Circle, Omaha, NE 68134 or by phone at (402) 491-3751.

Vision

Our Vision Plan is simple also. When you need vision care, the Plan will cover 100% of your expense up to \$400 per person for you and your covered dependents per year.

Life Insurance

Life insurance is an important part of the security provided by your CLT&E benefits program. As long as you are a member of the benefits program, you and your family will be covered by the following life insurance coverage:

For You	For Your Spouse	For Each Child
\$20,000	\$3,000	\$1,000*

* Lesser amounts may apply to children less than 6 months of age.

Short-Term Disability

If you are unable to work because you are sick or hurt, you may be eligible to receive short-term disability benefits. Benefits are only available if your sickness or injury is not work related. Work-related disabilities are covered by Workers' Compensation.

Short-Term Disability	
When benefits begin:	
• If you are injured	Immediately
• If you are sick	After one week
Amount you can receive	\$250 per week
How long you can receive benefits	12 weeks per incident





Retiree Benefits

The CLT&E Benefit Office also provides pension benefits to eligible participants. Not all contracts and not all work utilize the CLT&E Pension Plan. Check with your union representative or contact the CLT&E Fund Office to see if you are building a pension with the fund.



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