

Cement Masons—Employers Health & Welfare Trust



Trust Medical Plan Customer Service:
503-254-4022 or 800-591-8326

PPO Network provided by:



Pharmacy Benefits Provided by Moda Health:
Pharmacy Customer Service:
888-361-1610
Pharmacy ID Card is separate from Medical ID card

Employee Assistance Program (EAP) provided by Canopy:
800-433-2320, text 503-850—7721

Trust Medical Plan Benefits

1/1/2026

Summary of Medical Benefits – Trust Plan

Cement Masons – Employers Health, Welfare & Vacation Trust

503-254-4022 or 1-800-591-8326; email: mita@masonry-trusts.com

All mail and claims submission to be sent to : 9848 E Burnside ST, Portland OR 97216

	In-Network Provider You Pay	Out-of-Network Provider* You Pay
Annual Deductible (Individual/Family) In network deductible will apply to out of network deductible. Plan has Carry-over for calendar year 2022.	\$300 Individual \$900 Family	\$1,000 Individual \$3,000 Family
Annual Out of Pocket (Individual/Family) In-network OOP will apply to out-of-network OOP	\$6,550 Individual \$13,100 Family	\$6,550 Individual \$19,650 Family
Preventive Services		
Periodic Health Exams	100% no cost share	50% after deductible
Routine woman’s exams (pap test, pelvic and breast exam)	100% no cost share	50% after deductible
Immunizations	100% no cost share	50% after deductible
Immunizations - Participating Pharmacies	100% no cost share	50% after deductible
Professional Services		
Office Visits and Home Visits	\$25 copay deductible waived	50% after deductible
Urgent Care Visits	\$50 copay deductible waived	50% after deductible
Maternity Services (Employee and Spouse only)		
Physician Global Delivery	20% after deductible	50% after deductible
Hospital Stay	20% after deductible	50% after deductible
Inpatient Medical Services (Pre-Certification Required)		
Inpatient Medical	20% after deductible	50% after deductible
Skilled Nursing Facility Care (60 days per year)	20% after deductible	50% after deductible
Outpatient Services		
Hospital Visits – Outpatient services	20% after deductible	50% after deductible
Diagnostic X-Ray and Lab	20% Deductible Waived	50% after deductible
Specified Imaging (MRI, CT, CAT, PET scans) (Pre-Certification required)	20% after deductible	50% after deductible
Surgery (Some Pre-Certification required)	20% after deductible	50% after deductible
Mental Health Services		
Inpatient Mental Health (Pre-Certification required)	20% after deductible	50% after deductible
Inpatient Chemical Dependency (Pre-Certification required)	20% after deductible	50% after deductible
Outpatient Chemical Dependency Visits (Pre-Certification required)	\$25 copay deductible waived	50% after deductible
Outpatient Mental Health Visits	\$25 copay deductible waived	50% after deductible
Emergency Services		
Hospital Emergency Visits	20% after deductible	20% after deductible
Emergency Ambulance transports (6 trips annually)	20% after deductible	20% after deductible
Other Covered Services		
Physical, Occupational, and Speech Therapies (Pre-Certification required & 30 visit maximum for each of these services)	\$20 copay deductible waived	50% after deductible
Allergy injections	20% after deductible	50% after deductible
Alternative care: (Chiropractic, Acupuncture, Naturopathic Substances). \$1500 aggregate annual maximum. PT by Chiropractor requires prior authorization.	\$25 copay deductible waived	50% after deductible
Durable Medical Equipment/Prosthetics (Pre-Certification required for charges over \$500)	20% after deductible	50% after deductible
Home Health, Hospice and Respite Care (Pre-Certification required & subject to visit limits)	20% after deductible	50% after deductible

Prescription Drug Benefits are provided by Moda Health. A separate card for these benefits is issued by Moda Health.

*Out-of-Network coverage is subject to Usual and Customary charges for the services. Pre-Certification is obtained through Innovative Care Management (ICM) @ 800-862-3338. This is a benefit summary only. For more details on benefits, please contact the Claims Department @ 503-254-4022 or 1-800-591-8326. www.masonry-trusts.com

Resumen de los Beneficios Médicos del Trust

Albañil de Cemento-Empleador

El Trust de la Salud, Bienestar y Vacaciones

	Proveedor de la red Usted paga	Proveedor fuera de la red Usted paga
Deducible anual (Individual/Familiar) Deducible en la red aplicará al deducible fuera de la red.	\$300 Individual \$900 familiar	\$1,000 Individual \$3,000 familiar
Gastos de Desembolso anuales Gastos de Desembolso de la red aplicará a los gastos de desembolso fuera de la red	\$6,550 Individual \$13,100 familiar	\$6,550 Individual \$19,650 familiar
Servicios Preventivos		
Exámenes médicos rutinarios	100%, sin costo alguno	50% después de deducible
Exámenes médicos de la mujer de rutina (Papanicolaou, de mamas y pélvico)	100%, sin costo alguno	50% después de deducible
Vacunas	100%, sin costo alguno	50% después de deducible
Vacunas con farmacias que forman parte de la red	100%, sin costo alguno	50% después de deducible
Servicios Profesionales		
Consultas en la Oficina y en el Hogar	\$25 copago, no deducible	50% después de deducible
Consultas de Atención de Urgencia	\$50 copago, no deducible	50% después de deducible
Servicios de Maternidad (Empleado y Esposa Solamente)		
Cuidado de la maternidad completo	20% después de deducible	50% después de deducible
Estancia en el hospital	20% después de deducible	50% después de deducible
Servicios Médicos de Atención Hospitalaria (Se requiere Autorización Previa)		
Consultas Médicas de Atención Hospitalaria	20% después de deducible	50% después de deducible
Cuidado en una Instalación de Enfermería Especializada (60 días por año)	20% después de deducible	50% después de deducible
Servicios Médicos de Atención Ambulatoria		
Visitas al Hospital-Servicios de Atención Ambulatoria	20% después de deducible	50% después de deducible
Rayos X de Diagnóstico y Laboratorio	20% , no deducible	50% después de deducible
Tomas Específicas (Resonancia Magnética (MRI), tomografía de CT, CAT, PET) (Se requiere Autorización Previa)	20% después de deducible	50% después de deducible
Cirugías (Se requiere Autorización Previa algunas veces)	20% después de deducible	50% después de deducible
Servicios de Salud Mental		
Salud Mental de Atención Hospitalaria (Se requiere Autorización Previa)	20% después de deducible	50% después de deducible
Tratamiento de la dependencia química (Se requiere Autorización Previa)	20% después de deducible	50% después de deducible
Consultas de Atención Ambulatoria para Dependencia Química (Se requiere Autorización Previa)	\$25 copago, no deducible	50% después de deducible
Consultas de Salud Mental de Atención Ambulatoria	\$25 copago, no deducible	50% después de deducible
Servicios de Emergencia		
Visitas de Emergencia al Hospital	20% después de deducible	20% después de deducible
Transporte de Ambulancia de Emergencias (6 viajes anuales)	20% después de deducible	20% después de deducible
Otros Servicios Cubiertos		
Terapia física, ocupacional, y de lengua y habla (Se Requiere Autorización Previa y de máximo 30 visitas)	\$20 copago, no deducible	50% después de deducible
Inyecciones para Alergias	20% después de deducible	50% después de deducible
El cuidado alternativo (Quiropráctico, Acupuntura, Substancias Naturopáticas). \$1500 el máximo total anual. (Terapia física con un quiropráctico se requiere autorización previa)	\$25 copago deducible renunciado	50% después de deducible
Equipo Médico Durable/Prostéticas (Se requiere Aprobación Previa por cargos más de \$500)	20% después de deducible	50% después de deducible
Visitas de salud al Hogar, Tratamiento para enfermos terminales y Cuidados Temporales (Se requiere certificación previa y está sujeto a límites de visitas)	20% después de deducible	50% después de deducible

Beneficios de Recetas Médicas son provistos por Moda Health. Una tarjeta para los beneficios viene aparte, emitido por Moda.

*Cobertura fuera de la Red es sujeto a los cargos usuales y habituales por los servicios. Autorización Previa se obtiene a través de Innovative Care Management (ICM) al 800-862-3338. Este documento es solo un resumen de los beneficios. Para más información, favor de contactar al departamento de Reclamos al 503-254-

4022 o al 1-800-591-8326. www.masonry-trusts.com : W:\Cement General\Benefit Summaries\2025_Spanish_Version_SummaryofBenefitsTrustPlan.docx

We contract with



to provide a Preferred Provider Network. When you use the First Health PPO you will have access to a national network of doctors, hospital and other health care professionals.

What is a PPO Network?

A PPO contracts with doctors, hospitals and other health care professionals to provide services to plan members at reduced pre-negotiated rates.

Why should I use a First Health Network Doctor or Hospital?

A PPO Network Provider has agreed to treat covered members at a reduced rate. When you use a Network Provider, you pay less out of your own pocket for covered services.

How Can I Find a First Health Network Doctor, Hospital or Other Health Care Professional?

You can use the First Health online provider search tool to find a provider. It's available 24/7 at:

www.myfirsthealth.com at the website pick the "Start now" button and the following criteria:

- Pick a provider type
- Choose to search by Zip Code or State
- You can also pick specific counties or cities
- To include more options, such as provider name, click "show more options"
- Click the "Search now" button

You can also call First Health at 1-800-226-5116 for assistance in locating a First Health provider.

What Happens When at the Doctor's Office or Hospital?

You will usually be asked for your insurance ID card when you register or sign-in. Your ID card says Cement Masons H&W Trust and has the First Health Network logo. If they have questions, the provider can call the number on your ID card.

Can you provide examples of Hospitals in Oregon and SW Washington that are part of the First Health PPO Provider Network?

The Portland Metro area includes the Legacy Hospitals, Portland Adventist Hospital and OHSU Hospital. In the Vancouver area PPO Hospitals include Legacy Salmon Creek and Peace Health Southwest Medical Center.

Other PPO Network Hospitals include:

Columbia Memorial Hospital – Astoria

Good Samaritan Regional Medical Center – Corvallis

Sacred Heart - Springfield

Salem Hospital - Salem

St. Charles Medical Center – Bend, Madras, Prineville & Redmond

Tuality Community Hospital – Hillsboro

Willamette Valley Medical Center – McMinnville

Please search website for a complete listing as the above list is subject to change. This is just a sampling.

Tenemos contrato con



Para proveer una red de Organización de Proveedores Preferidos. Usando la red de PPO, usted tiene acceso a una red nacional de doctores, hospitales y otros profesionales de salud.

¿Qué es la red de Organización de Proveedores Preferidos (PPO)?

Un PPO tiene un contrato con doctores, hospitales y otros profesionales de salud para proveer servicios a los miembros del plan para un precio reducido, pre negociado.

¿Por qué debo ir a un doctor o hospital de la red de First Health?

Los proveedores de la Red han hecho un contrato para dar tratamiento a los miembros cubiertos para un precio reducido. Cuando escoja un proveedor de la Red, usted desembolsará menos por los servicios cubiertos.

¿Cómo encuentro un doctor, hospital u otro profesional de salud de la red de First Health?

Usted puede usar la herramienta del buscador de internet de First Health para encontrar un proveedor. Está disponible 24 horas del día en: www.myfirstthealth.com En el sitio de web escoja el botón de "Start Now" (Empieza ahora) y siga lo siguiente:

- Escoja el tipo de proveedor
- Escoja para buscar por el código postal o el estado donde vive
 - Usted puede escoger también un condado/ ciudad específico
 - Para incluir más opciones, como por ejemplo el nombre de un proveedor, haz clic en "show more options" (mostrar más opciones)
- Haga clic en "Search Now" (Buscar ahora)

Usted también puede llamar al First Health al 1-800-226-5116 para asistencia en buscando un proveedor de First Health.

¿Qué ocurre cuando está en la oficina del doctor u hospital?

Normalmente se le va a pedir su tarjeta de seguro en la registración. Su tarjeta de identificación dice "Cement Masons H&W Trust" y tiene el símbolo de la red de First Health. Si tienen preguntas, el proveedor puede llamar el número de teléfono que está en la tarjeta.

¿Cuáles son unos ejemplos de los hospitales que están en Oregon y Suroeste de Washington que son parte de la Red de Proveedores Preferidos de First Health?

El área Metropolitana de Portland incluye los Hospitales de Legacy, Portland Adventist y OHSU. En el área de Vancouver, los hospitales de la red incluyen Legacy Salmon Creek y Peace Health Southwest Medical Center.

Otros hospitales de la Red de Proveedores Preferidos incluyen:

Columbia Memorial Hospital – Astoria

Good Samaritan Regional Medical Center – Corvallis

Sacred Heart, Eugene & Riverbend, Springfield

Salem Hospital - Salem

St. Charles Medical Center – Bend, Madras, Prineville & Redmond

Tuality Community Hospital – Hillsboro

Willamette Valley Medical Center – McMinnville

Por favor revisar por actualizaciones en internet ya que los proveedores podrían cambiar. Esta es una lista incompleta.



**Cement Masons
2026 Prescription Drug Summary**

How To Use The Prescription Drug Card

To ensure the highest level of benefits please select an Moda Health participating network pharmacy. We can help you find an in-network pharmacy, please visit us online at modahealth.com or call Moda Health Pharmacy Customer Service. Your Moda Health member identification card (ID) will provide participating pharmacies the information necessary to process your claim and allow you to access your pharmacy benefits at the point of service. Please remember to present your Moda Health ID card to ensure your pharmacy has the most current benefit detail loaded in their system.

Drug Type	Retail Per 30-day supply (covers up to a 90-day supply)	Mail-Order 90-day supply	Specialty 30-day supply
Calendar Year Maximum Out of Pocket Limit	In-network: \$2,000 Individual, \$4,000 Family.		
Generic Tier (Tier 1)	\$10.00 copay	\$20.00 copay	\$10.00 copay
Preferred Tier (Tier 2) *	\$50.00 copay	\$100.00 copay	\$75.00 copay
Non-Preferred Tier (Tier 3) *	\$75.00 copay	\$150.00 copay	\$150.00 copay

Generic medications means medications that have been determined by the Food and Drug Administration (FDA) to be therapeutically equivalent to the brand alternative and are often the most effective option. Generic medications must contain the same active ingredients as their brand counterpart and be identical in strength, dosage form and route of administration.

Preferred medications means those medications, including specialty preferred medications, that have been reviewed by Moda Health and found to be safe and clinically effective at a favorable cost when compared to other medications in the same therapeutic class and/or category. Generic medications may be included in this tier when they have not been shown to be safer or more effective than other more cost effective generic medications may be included in this tier.

Non-Preferred medications means brand medications, including specialty brand medications, that have been reviewed by Moda Health and do not have significant therapeutic advantage over their preferred alternatives. These products generally have safe and effective options available under the Value, Generic and/or Preferred tiers.

***Generic Substitution:** Both generic and brand name medications are covered benefits. Regardless of the reason or medical necessity, if a member requests a brand name drug or the treating physician prescribes a brand name drug when a generic equivalent is available, the member will be responsible for the brand copay plus the difference in cost between the generic and brand name drug.

Specialty medications are often used to treat complex chronic health conditions. Specialty treatments often require special handling techniques, careful administration and a unique ordering process. Specialty medications must be prior authorized and medically necessary.

Covered Drug Supply

- Diabetes related supplies such as insulin syringes, needles, glucose tablets and blood glucose test strips are covered.
- Prescription oral contraceptive drugs for birth control and medical treatment are covered under your prescription benefit. Up to a 3-month supply can be dispensed at the initial fill and up to a 12-month supply for subsequent fills. The member or provider must contact Moda customer service before filling a 12-month supply of contraceptives.
- Select immunizations and related administration fees are covered at retail pharmacies (for example, influenza, pneumonia and shingles vaccines). Covered immunizations will be limited to those that are considered the "standard of care" by the local medical community. Immunizations for the sole purpose of travel or to prevent illness which may be caused by your work environment are not covered.

Retail Prescription Benefit

- The benefit covers up to a 90-day supply of a drug or medicine that is medically necessary for the treatment of an illness or injury, that cannot legally be dispensed without a prescription, and that by law must bear the legend "Caution -- federal law prohibits dispensing without prescription."
- Starting January 1, 2022 Walgreens retail pharmacies are in-network pharmacies and CVS retail pharmacies are out-of-network.
- At times you may be required to submit a claim form and applicable receipts for reimbursement. For example, if you fill your prescription at a non-participating pharmacy that does not access Moda Health's claims payment system through Navitus, you will need to submit a receipt. The claim procedure is simple.
 1. Complete the prescription drug claim form. Forms can be found online through your Member Dashboard (modahealth.com/memberdashboard) or by linking directly to the forms page at modahealth.com/members/forms.shtml.
 2. Submit the claim form to: Navitus, PO Box 999, Appleton, WI 54912-0999. Navitus will process the claim request and send reimbursement to you.

Mail Order Pharmacy Benefit

- You have the option of obtaining covered medications through the exclusive mail order pharmacies, PPS and Costco. For more information you can contact PPS (800-552-6694, ppsr.com) or Costco (800-607-6861, pharmacy.costco.com).
- A 90-day supply is available at mail-order. Both generic and brand name medications are covered benefits.
- Mail-order forms can be found online through your Member Dashboard (modahealth.com/memberdashboard) or by linking directly to the forms page at modahealth.com/members/forms.shtml.

Specialty Pharmacy Benefit

- A 30-day supply is available through the exclusive specialty pharmacy. Both generic and brand name medications are covered benefits.
- Certain specialty medications can be covered up to a 90-day supply per fill, with one copay for each month's supply.
- Specialty medications must be accessed through Ardon Health. For a list of eligible medications, please contact Moda Health customer service. Because specialty treatments require special handling techniques, careful administration and a unique ordering process, your program has partnered with Ardon Health to enhance the services you receive. Ardon offers an individualized patient care program, to provide comprehensive support, education and monitoring to help you get the most from your treatment.
- For more information, you can contact Ardon Health directly at 855-425-4085.

Prior Authorization

Certain prescription drugs and/or quantities of prescription drugs may require a prior authorization by Moda Health. Prior authorization programs are not intended to create barriers or limit access to medications. The practice of administering prior authorization provisions is intended to support cost effectiveness, promote proper use of medications and to ensure the safety of our members. Prior authorizations may be placed on medications for a variety of reasons (examples are listed below).

- **Utilization Control Edits:** Medications may have limited use, be prone to overuse or prescribed in quantities outside the recommended FDA indications.
- **Cost Effectiveness:** There may be therapeutically equivalent medications that are less expensive.
- **Prescribing Guidelines:** Medications may require diagnostic testing to ensure safety and efficacy of the treatment.
- **Benefit Coverage:** Medication may be prescribed for conditions that are excluded under the plan.

A list of medications that require a prior authorization can be found online at modahealth.com, through your Member Dashboard, or by contacting Moda Health pharmacy customer service.

Limitations

This program imposes administrative plan edits and provisions that may limit access to medications based on patient demographics, high dollar thresholds, quantity limits and in accordance with the parameters of the prescription as written by your provider.

- Compounded medications (containing at least one covered drug as an ingredient) are covered. Medications over \$150 for a 30 day supply will require authorization by Moda Health.
- New FDA approved drugs are subject to review and may require additional coverage parameters, requirements or limits established by the plan.
- Immunization agents (other than allergy sera).

Exclusions

The following services, procedures and conditions are not covered by the plan, even if otherwise medically necessary or if recommended, referred, or provided by a physician, provider or pharmacy. Please Note: The fact that a physician may prescribe, order, recommend, or approve a drug does not, of itself, make the charge a covered expense.

- Devices including, but not limited to: therapeutic devices and appliances; hypodermic needles and syringes (the plan does not exclude hypodermic needles and syringes for use with insulin or specialty medications). For contraceptive devices, see Covered Drug Supply. See your member handbook for a complete list of covered/ excluded benefits.
- Hair growth legend drugs.
- Medications administered to a covered person in whole or in part while the covered person is a patient in a hospital, sanitarium, rest home, skilled nursing facility, extended care facility, nursing home, or similar institution.
- Prescriptions, refills or quantities that have been dispensed in error by the pharmacy and are not representative of the prescription as written by the provider or the benefit provisions as set forth by the plan.
- Drugs or medicine that are to be taken by or administered to a member in whole or in part while the member is a patient in a hospital, a sanitarium, a rest home, a skilled nursing facility, an extended care facility, a nursing home, or a similar institution are not covered.
- Drugs or services to treat sexual dysfunction.
- Weight loss medications.
- Naturopathic supplies.
- Drugs or services prescribed to treat infertility.
- Medications used for a cosmetic indication.
- Drugs prescribed to treat a medical condition that is not covered under your Medical plan.
- A drug prescribed for purposes other than treating a health condition or disease that is covered by the plan.
- A drug prescribed to treat a medical condition that is not determined as medically necessary.
- Medications available without a prescription, which are classified as over the counter (OTC).
- Any charge in excess of the maximum plan allowance for a drug is not covered.
- Drugs prescribed for or used for non-FDA approved indications, unless approved by the Health Resources Commission.
- Any drug that is determined by Moda Health to be experimental or investigational or that is labeled: "Caution -- Limited by federal law to investigational use"; or Any drug or medicine that is used for an experimental or investigational purpose, even if it is otherwise approved by the federal government or recognized as neither experimental or investigative for other uses or health conditions (e.g., progesterone suppositories).
- A charge for administration or injection of a drug or medicine is not covered, except when administered for selected medications at retail pharmacies.
- Drugs or medicines that are dispensed more than one year after the order of a physician are not covered.

This is a benefit summary only. For a complete description please refer to your member handbook.

modahealth.com

> VACCINATIONS COVERED AT PHARMACIES

Vaccinations are some of the most important tools available for preventing disease, according to the U.S. Centers for Disease Control and Prevention (CDC).

Why get vaccinated?

Vaccinations protect adults and children from developing a potentially serious disease. They also protect the community by reducing the spread of infectious disease. If people are immunized, diseases are less likely to pass through a population.

You can receive convenient immunization services at select network pharmacies through your Moda Health pharmacy benefit. Childhood vaccines are typically provided at their provider's office.

What vaccines are covered?

- **Influenza.** Common influenza causes fever, sore throat, cough, chills, headache, and muscle aches. The best time to get your flu shot is by the end of October, before the height of flu season. However, getting vaccinated later in the season also helps protect against the flu. One vaccination is needed within a flu season (typically a nine-month period). High-dose flu vaccines are covered for specific age ranges, based on FDA guidelines. Please contact Moda Health Pharmacy Customer Service to learn more.
- **Shingles (herpes zoster).** This is a rash that usually appears on one side of the body. It will often blister, lasting up to 30 days, and can be very painful. The newest shingles vaccine, Shingrix®, is routinely recommended for adults 50 years or older to prevent shingles. Shingrix is also recommended for adults aged 19 – 49 years who are immunocompromised. One, two-dose series will be covered for members 18 years or older per lifetime. The CDC prefers Shingrix and recommends that adults receive Shingrix even if they have already received Zostavax.
- **Varicella.** The varicella vaccine is used to prevent chickenpox. Chickenpox is usually mild in children but can have serious consequences or cause fatality in certain populations such as children, pregnant women, or those with a weakened immune system. A two-dose series is recommended for children during childhood and/or adults born in 1980 or after

who have not previously been vaccinated or lack evidence of past infection.

- **Pneumococcal.** Pneumococcal disease can result in serious, sometimes fatal infections of the lungs (pneumonia), the blood and the brain (meningitis). The pneumococcal vaccines, Pevnar®13, Pevnar20™, Vaxneuvance™ and Pneumovax®23, can be given anytime of the year to provide long-term protection. These vaccines are covered for adults 65 years or older and may be appropriate for younger persons with certain chronic conditions such as heart, lung, and liver disease, and those with a weakened immune system. Please talk to your doctor if you feel that you may be considered high-risk.

- **Hepatitis A and hepatitis B.** Hepatitis A is spread through contaminated food or water and contact with infected animals or humans. It is not a life-long disease, but it can cause temporary nausea, vomiting and other serious symptoms. Hepatitis B is spread through contact with blood or bodily fluids from persons who are infected. It is a serious viral disease that can cause liver damage, cancer, and death.

The CDC recommends routine vaccination for hepatitis A during the first few years of life and for adults in certain situations. For hepatitis B, the CDC recommends routine vaccination during childhood and adults aged 19 – 59 years old. There are several different versions of hepatitis A and B vaccines. Please talk to your doctor or pharmacist to learn more.

- **Measles, Mumps, and Rubella.** Measles, a highly contagious virus, can pass from person to person through coughing or sneezing. It can cause rash, fever, cough, runny nose, or pink eye. Mumps can pass through the air, similar to measles, but is not as infectious. Symptoms include muscle soreness, loss of appetite, fever, and sore throat. Rubella is usually spread through coughing and sneezing.

Measles, mumps, and rubella protection is contained in one vaccine called MMR. This vaccine can have some side effects such as a sore arm for a short time after vaccination, fever, or temporary soreness in the joints. However, the CDC advises that a two-dose series be given in childhood as it is much safer than

> VACCINATIONS COVERED AT PHARMACIES

getting these diseases.

- **Polio.** Poliovirus is highly contagious and can be crippling due to paralysis and potentially deadly. A four-dose series is recommended for all children.
- **Meningococcal.** This is a rare but potentially fatal disease that affects the fluid surrounding the brain and spinal cord. Infection can lead to permanent damage such as hearing loss or learning disabilities. It is spread through the exchange of lung and throat secretions from an infected person.

The CDC recommends this vaccine for all preteens, and for adults in some situations, such as those with certain immunosuppressive disease states or medications, or those traveling to areas with epidemic meningococcal disease. Talk to your provider to find out if a meningococcal vaccine is recommended for you.

- **Human papillomavirus (HPV).** Genital HPV is a common sexually transmitted virus that can cause genital warts and cervical cancers. Gardasil® 9 is the only HPV vaccine available in the United States. It is a 2- or 3-dose vaccine series recommended for males and females at age 11 or 12 years. Catch-up vaccination can occur up to age 26 and may be appropriate for some people up to age 45. Gardasil® 9 is covered for both males and females ages nine to 45 years old.
- **Tetanus, diphtheria, and pertussis.** Tetanus is caused by bacteria, which can enter the bloodstream

through a wound opening. It causes muscle tightening and stiffness all over the body and can cause death if left untreated.

Diphtheria is a contagious disease. It spreads through contact with an infected person, usually through coughing or sneezing. It can also be fatal if left untreated.

Pertussis (“whooping cough”) causes excessive coughing fits that can disturb normal breathing. This disease might appear to be a regular cold at first and can last for weeks or months before diagnosis.

One vaccine, known as Tdap, protects against tetanus, diphtheria, and pertussis. It is routinely given to older children, pregnant women, healthcare professionals and those that have close contact with babies. A booster is recommended once every 10 years.

- **Coronavirus Disease 2019 (COVID-19).** COVID-19 is a virus that has caused a worldwide pandemic. It causes fever, chills, cough, difficulty breathing, loss of taste or smell, congestion, runny nose, and diarrhea. The FDA has found two vaccines to be safe and effective, approving Spikevax and Comirnaty®. These COVID vaccines have gone through the same steps as vaccines that are FDA approved for other diseases. Find when and where you can get a COVID vaccine at [vaccines.gov](https://www.vaccines.gov). Questions about COVID-19 vaccines? Visit [cdc.gov/coronavirus/2019-ncov/vaccines/faq.html](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html).

How much will I pay?

Nothing. You will have no copay at an in-network pharmacy.

Network pharmacies

Call ahead of time to make sure the pharmacy has the vaccine you need. Show your Moda Health ID card to the pharmacist for billing before getting a vaccine. Otherwise, it may not be covered.

The following participating chain pharmacies are just a few that can provide vaccines:

- Bartell Drugs
- Costco
- Fred Meyer
- Rite Aid
- Safeway



Innovative Care
Management

Virtual Care

Getting Started

INTRODUCTION

Access board-certified physicians 24/7, 365 days a year **for you and your family!** Doctors will discuss your symptoms, confirm a diagnosis, and prescribe any needed medication. Video and telephone-based visits are available, with an average wait time of just ten minutes.

Consult Fee: \$0

HOW TO ACCESS

01

Sign up with the Recuro Care app or visit the webpage below to access:
["member.recurohealth.com"](https://member.recurohealth.com)

02

Enter your employer member ID

03

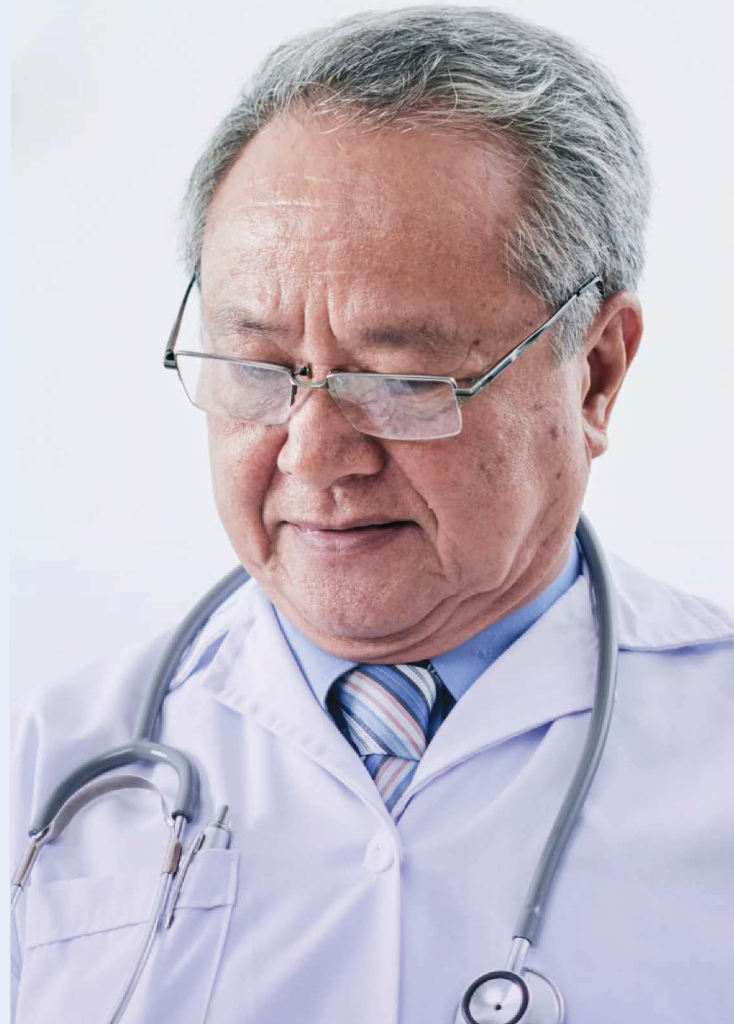
Create your username and password

04

Complete your medical history

05

Schedule your consult



Example Conditions Treated

- Acne / Rash
- Allergies
- Cold / Flu
- GI Issues
- Ear Problems
- Fever
- Insect Bites
- Nausea
- Pink Eye
- Respiratory
- UTI's
- And More...

*Registering your account is not required to use the service, you can call 855.6RECURO anytime for 24/7 access to doctors.



Atención de urgencias virtual

Evite las salas de espera y las molestias de ir a la consulta del médico. Visite a su médico por teléfono, vídeo seguro o una aplicación.

\$0
Copago

Los primeros pasos

Active

01

Acceda a su beneficio de Recuro Care mediante:

Aplicación móvil: **Android** o **Apple**
Teléfono: **1.855.673.2876**

En línea: www.mwgtelemedicine.com

Cree su inicio de sesión

02

Cree sus credenciales de acceso introduciendo su correo electrónico, nombre y fecha de nacimiento, y luego cree su nombre de usuario y contraseña.

Solicite una consulta

03

Ahora está listo para solicitar una consulta con un médico.



Activar ahora

Escanee aquí o busque "Recuro Care" en tu tienda de aplicaciones.

O Visite:

["www.mwgtelemedicine.com"](http://www.mwgtelemedicine.com)

Ejemplo de afecciones que tratamos

- Acné / erupción cutánea
- Alergias
- Resfriado / gripe
- Problemas gastrointestinales
- Problemas de oído
- Fiebre
- Náuseas
- Picaduras de insectos
- Conjuntivitis
- Problemas respiratorios
- Infecciones del tracto urinario
- Pero eso no es todo...





Virtual Behavioral Health

Collaborative Mental Wellness

Comprehensive behavioral health care from therapy and counseling to psychiatry and medication management.



RECURO HEALTH

✓ **Licensed Counseling**
\$0 Copay

✓ **Psychiatry Initial Visit**
\$0 Copay

✓ **Psychiatry Follow-Up Visit**
\$0 Copay

Product Highlights



Holistic

Primary care and behavioral health doctors collaborate closely to ensure coordinated treatment plans that care for the whole patient.



Targeted

Pharmacogenetic (PGx) testing ensures the right behavioral health medication is prescribed, the first time.



Accessible

While today behavioral healthcare is difficult to access for so many, at Recuro it is available and affordable.



NextGen Care

Salud conductual Virtual

Bienestar mental colaborativo

Atención integral de salud conductual desde terapia y asesoramiento hasta psiquiatría y manejo de medicamentos.



RECURO
HEALTH

✓ Psiquiatría

✓ Terapia y Asesoramiento

✓ Evaluación de riesgos para la salud

✓ Estratificación del riesgo

✓ Solicitud de recetas electrónicas

Productos destacados



Holístico

Los servicios de salud conductual de Recuro abarcan tanto la terapia como la psiquiatría.



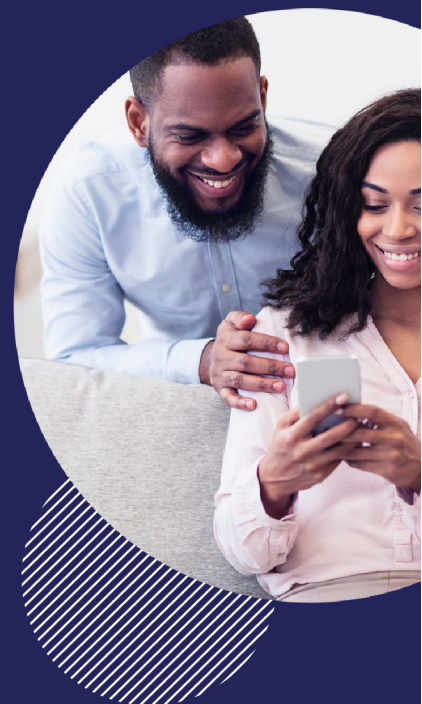
Dirigido

Las evaluaciones de riesgos para la salud conductual y los modelos de estratificación permiten una atención personalizada.



Accesible

Si bien hoy en día para muchos es difícil acceder a la atención de la salud conductual, en Recuro está disponible y es asequible.



RECURO
HEALTH

info@recurohealth.com | 855-6RECURO | www.recurohealth.com | Escanear el código QR



EAP Summary of Services

A benefit for you and your family members provided by Cement Masons - Employers Health, Welfare and Vacation Trust

The Employee Assistance Program (EAP) is a **FREE** and **CONFIDENTIAL** benefit that can assist you and your eligible family members with any personal problems, large or small.

Counseling with an EAP Professional

Five (5) counseling sessions face to face, over the phone, or virtually for concerns such as:

- Relationship conflict
- Conflict at work
- Depression
- Stress management
- Family relationships
- Anxiety
- Alcohol or drug abuse
- Grieving a loss
- Professional development

Resources for Life

Canopy will help locate resources and information related to childcare, eldercare, caregiving, and anything else you may need.

Legal Consultations/Mediation

Contact Canopy for a free thirty-minute office or telephone consultation. A 25% discount from the attorney's/mediator's normal hourly rate is available thereafter.

Financial Coaching

Coaches will provide unlimited financial coaching to help develop better spending habits, reduce debt, improve credit, increase savings, and plan for retirement.

Identity Theft

Up to 60-minute free consultation with a Fraud Resolution Specialist™ (FRS) who will conduct emergency response activities and assist with restoring their identity, good credit, and dispute fraudulent debts.

Home Ownership and Housing Support

Assistance and discounts for buying, selling, and refinancing. Resource retrieval for housing assistance.

Coaching

Five (5) phone or video sessions with a Coach to support goal setting, healthy habits, and personal development.

Pet Parent Resources

Free pet information and support, including pet insurance discounts, new pet parent resources, and bereavement support.

Wellbeing Tools

- Fertility health support
- Online legal tools
- Will kit questionnaire
- Gym membership discounts

Member Site

Innovative educational tools, chat for support, take self-assessments, view videos and webinars, access courses, download documents and more. Access at my.canopywell.com, and register as a new user or log-in. Enter **Cement Masons** for company name when you register.

Crisis Counselors are available by phone **24/7/365**

call: 800-433-2320

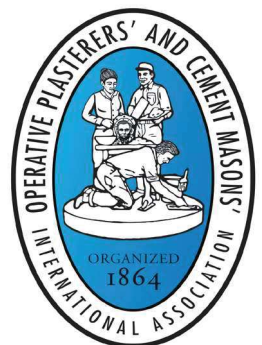
text: 503-850-7721

email: info@canopywell.com



canopy

Canopy is committed to creating a safe, inclusive,
and equitable society for all.



EAP Resumen de Servicios

Una red de Beneficios Para Usted y su Familia por Cement Masons - Employers Health, Welfare and Vacation Trust

El programa de ayuda al empleado (EAP) es un beneficio **GRATIS** y **CONFIDENCIAL** que puede ayudarle a usted y a sus familiares elegibles con cualquier problema personal, grande o pequeño.

Consejería psicológica con un profesional de EAP

Cinco (5) sesiones de consejería cara a cara, por teléfono, o virtualmente para inquietudes como:

- Conflicto relacional
- Manejo del estrés
- Problemas de abuso de alcohol o de drogas
- Conflictos en el trabajo
- Relaciones de familia
- Adaptación cuando hay pérdida de familiares
- Depresión
- Ansiedad
- Desarrollo profesional

Recursos para la vida

Canopy te ayudará a localizar recursos e información relacionados con el cuidado de niños y ancianos, ser cuidador, y cualquier otra cosa que puedas necesitar.

Legal / Mediación

Comunícate con Canopy para obtener una consulta gratuita de treinta minutos por teléfono o en persona. A partir de ese momento, se aplicará un descuento del 25% sobre la tarifa horaria habitual del abogado/mediador.

Asesoramiento Financiero

Asesores brindarán consejería financiera ilimitada para ayudar a desarrollar mejores hábitos de gasto, reducir deudas, mejorar su crédito, aumentar sus ahorros y planificar su jubilación.

Servicios Para Víctimas de Robo de Identidad

Consulta gratuita de hasta 60 minutos con un especialista en resolución de fraudes (FRS) altamente capacitado que llevará a cabo actividades de respuesta de emergencia y ayudará a restablecer tu identidad, buen crédito, y disputar las deudas fraudulentas.

Propiedad y ayuda a la vivienda

Asistencia y descuentos para comprar, vender y refinanciar. Recopilación de recursos para la ayuda a la vivienda.

Coaching

Accede a Cinco (5) sesiones telefónicas o de vídeo con un coach para apoyar el establecimiento de objetivos, hábitos saludables y desarrollo personal.

Recursos para padres de mascotas

Apoyo e información gratuita sobre mascotas, incluyendo descuentos en seguros de mascotas, recursos para nuevos padres de mascotas y apoyo en caso de duelo.

Herramientas para el bienestar

- Apoyo para la salud de la fertilidad
- Kit de preparación para un testamento
- Herramientas legales en línea
- Descuentos de Membrecía para el Gimnasio

Sitio de miembros de EAP

Herramientas educativas innovadoras, chat para obtener ayuda, realizar autoevaluaciones, ver videos y seminarios web, acceder a cursos, descargar documentos y más. Para acceder vaya a www.my.canopywell.com, regístrese como nuevo usuario o inicie la sesión. Ingrese **Cement Masons** para el nombre de la compañía cuando se registre.

Consejeros de crisis están disponibles las
24 horas 7 días por semana, 365 días al año

llame: 800-433-2320

texto: 503-850-7721

correo electrónico: info@canopywell.com

Canopy se compromete a crear una sociedad
segura, inclusiva y equitativa para todos.



canopy



Resources for Life

Legal / Mediation

A free 30-minute consultation with an attorney or mediator. A 25% discount is available thereafter.

Financial Coaching

Unlimited access to reach your financial goals.

Identity Theft Services

Consultation with a Fraud Resolution Specialist™ (FRS).

Home Ownership Program

Assistance and discounts for buying, selling, and refinancing a home.

Resource Retrieval

EAP Specialists will do the research and get back to you within three business days.

Childcare & Eldercare

Canopy will locate caregiving options and resources based on your family's specifications, budget, and location.



call:

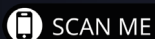
800-433-2320

email:

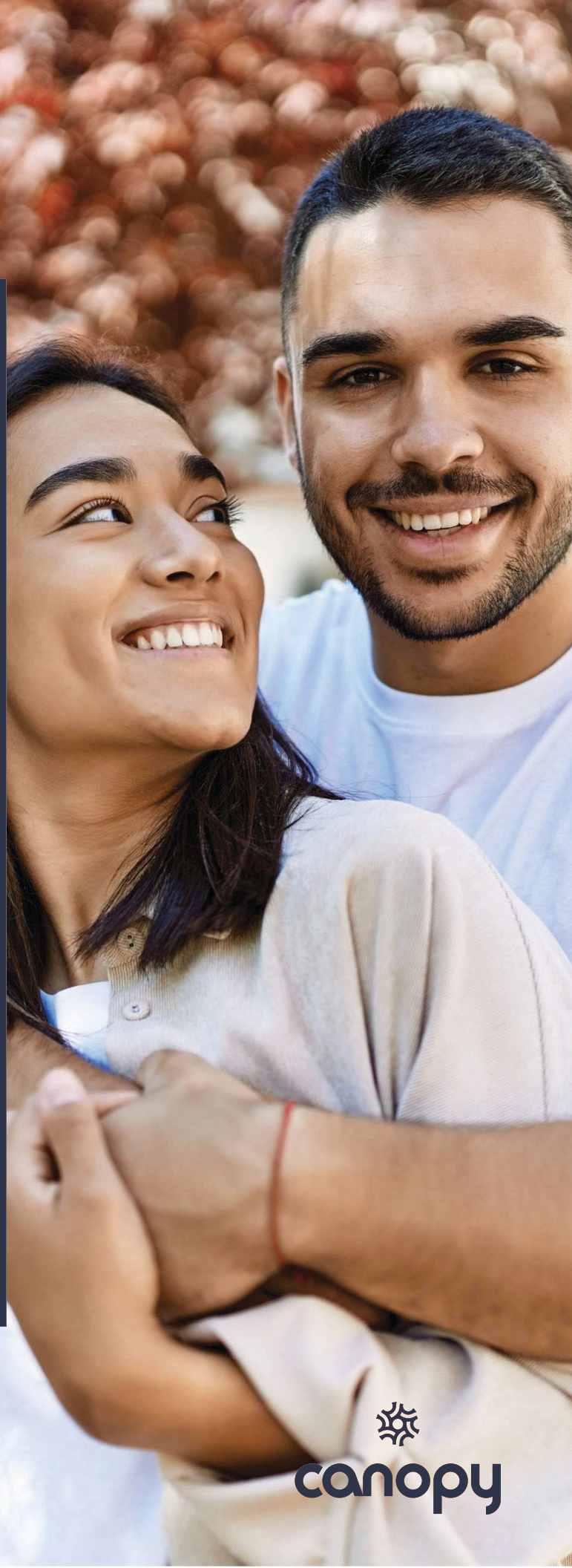
info@canopywell.com

visit:

my.canopywell.com



canopy



Recursos para la vida

Legales/Mediación

Una consulta gratuita de 30 minutos con un abogado o mediador. Después tiene disponible un descuento del 25%.

Asesoría financiera

Acceso ilimitado para alcanzar sus metas financieras.

Servicios para robo de identidad

Consulta con un especialista en resolución de fraudes.

Propiedad y ayuda a la vivienda

Asistencia y descuentos para comprar, vender y refinanciar una vivienda.

Recuperación de recursos

Los especialistas del EAP harán la investigación y le darán respuesta en tres días hábiles.

Cuidado de niños y adultos mayores

Canopy encontrará opciones y recursos de cuidado, basados en las especificaciones, el presupuesto y la ubicación de su familia.



Escanéame

llama al:

800-433-2320

manda un texto:

503-850-7721

visite:

my.canopywell.com



canopy

Cement Masons – Employers Health, Welfare & Vacation Trust

503-254-4022 or 1-800-591-8326

Vision Benefits

Active Members (and Early Retirees who have elected Vision Benefits) have a Vision Benefit that is self-insured and paid by the Trust Office.

Vision Claims need to be submitted to the Trust Office:

Cement Masons – Employers H&W Trust
Attn: Vision Claims
9848 East Burnside
Portland OR 97216
503-254-4022 or toll free 1-800-591-8326
Fax: 503-255-4073

Summary of Vision Benefits:

Exam	The Plan pays \$90 towards an exam every 12 months.
Lenses	The Plan will pay, based on the following schedule, towards one pair of lenses every calendar year: <ul style="list-style-type: none">• \$90 Single vision• \$140 bifocal• \$170 trifocal• \$235 lenticular
Frames	The Plan pays \$150 towards one frame. The frame benefit will renew every 24 months on a calendar year basis.
Contact Lenses	Instead of glasses, \$165 contact lens allowance every calendar year.

Special Note to Members who have selected Kaiser as their Medical Benefit Carrier:

Members with Kaiser as their Medical Carrier have a separate “Routine Eye Exam” benefit through Kaiser for a co-pay. This is separate from the self-insured Vision Benefit through the Trust Office. The Kaiser co-pay *will not* be reimbursed under the self-insured benefit.

Albañil de Cemento – Empleador

El Trust de los beneficios de la Salud, Bienestar y Vacaciones

503-254-4022 or 1-800-591-8326

Beneficios para la Vista

Miembros Actuales (y Jubilados Tempranos quienes han elegido los Beneficios para la Vista) tienen los Beneficios para la Vista que está autoasegurado y pagado por la Oficina del Trust.

Los reclamos para la Vista se envían a la Oficina del Trust:

Cement Masons – Employers H&W Trust
Attn: Vision Claims (Reclamo para la Vista)
9848 East Burnside
Portland OR 97216
503-254-4022 o sin costo al 1-800-591-8326
Mandar por Fax: 503-255-4073

Resumen de los beneficios para la Vista:

Examen	El Plan paga \$90 por un examen cada 12 meses.
Lentes	El plan paga según la siguiente información por un par de lentes cada 12 meses: <ul style="list-style-type: none">• \$90 vision singular• \$140 bifocal• \$170 trifocal• \$235 lenticular
Marcos de los Anteojos	El Plan paga \$150 por un cuadro. La prestación marco se renovará cada 24 meses por año natural.
Lentes de Contacto	En lugar de anteojos, \$165 de asignación para lentes de contacto cada año calendario.

Información especial para los miembros quienes han elegido a Kaiser como su proveedor del plan médico: Los miembros que tienen Kaiser como su proveedor del plan médico tienen otro examen aparte “El Examen Rutina de la vista” como un beneficio a través de Kaiser con un copago. Este es separado del beneficio autoasegurado con la oficina del Trust. El copago de Kaiser *no será* reembolsado bajo el beneficio autoasegurado.

**Cement Masons – Employers
Health, Welfare & Vacation Trust**

503-254-4022 or 1-800-591-8326

Orthodontic Benefits

For Members who have elected **Delta Dental (Moda)** Dental*

Active Members with Delta Dental (Moda) Dental coverage, and Early Retirees who have elected Moda dental Benefits, have an Orthodontic Benefit that is self-insured and paid by the Trust Office.

This benefit is for eligible employees and their covered dependents.

Benefits are paid at 60% to a lifetime maximum of \$1,000.

Orthodontic Claims need to be submitted to the Trust Office:

Cement Masons – Employers H&W Trust
Attn: Ortho Claims
9848 East Burnside
Portland OR 97216
503-254-4022 or toll free 1-800-591-8326
Fax: 503-255-4073

Non-orthodontic dental benefits are through Delta Dental (Moda).

*If you have selected the Kaiser Dental plan or the Willamette Dental plan, then your orthodontic benefits are with that plan.

Albañil de Cemento – Empleador
El Trust de Beneficios de la Salud, Bienestar y Vacaciones
503-254-4022 o al 1-800-591-8326

Beneficios de Ortodoncia –

Para miembros que han elegido el Plan Dental de Moda

Miembros Actuales con la cobertura del plan Dental de Moda (y para Jubilados Tempranos quienes han elegido beneficios dentales) tienen Beneficios de Ortodoncia que están autoasegurados y pagados por la oficina del Trust.

Este beneficio es para los empleados elegibles y sus dependientes cubiertos.

Los beneficios se pagan 60%, a un máximo de por vida de \$1000.

Los reclamos de Ortodoncia se envían a la oficina del Trust:

Cement Masons – Employers H&W Trust
Attn: Ortho Claims (Reclamo de Ortodoncia)
9848 East Burnside
Portland OR 97216
503-254-4022 or toll free 1-800-591-8326
Fax: 503-255-4073

Los beneficios dentales que no son ortodoncia son a través de Moda.

Cement Masons-Employers Health, Welfare & Vacation Trust

9848 East Burnside, Portland Oregon 97216 | 503-254-4022 | 1-800-591-8326 | Fax 503-254-4119

Along with Medical and Dental Coverage, Active Members also have the following benefits when eligible under the Plan:

- **Vision Benefits.** Your Vision Benefits are paid through the Trust Office. Contact the Trust Office at 503-254-4022 or 1-800-591-8326 for information on these routine vision benefits. Coverage includes exam and lenses/frames, or contacts can be chosen instead of lenses/frames. Whether you have chosen The Trust self-insured medical plan or Kaiser, you have the Trust Vision Benefit. **Kaiser provides a separate “Routine Eye Exam” for members who have chosen Kaiser as their medical insurance. If a Kaiser member uses the eye exam through Kaiser, they can submit for their lenses/frames or contacts claim to the Trust.**
- **Orthodontic Benefits:** If you have chosen Delta Dental (Moda) as your Dental insurance, then your Orthodontic Benefits are provided through the Trust Office. Only Orthodontic benefits for Members enrolled in one of the Moda Dental plans is through the Trust Office. Benefits are paid at 60% to a lifetime maximum of \$1,000. Please have your Orthodontic provider contact the Trust Office at 503-254-4022, or 1-800-591-8326. **If Kaiser is your Dental provider, then your Orthodontic benefits are with Kaiser. If Willamette Dental is your Dental provider, then Orthodontia is with Willamette Dental.**
- **Kaiser Member Chiropractic Benefits:** Active Members who have chosen Kaiser as their Medical insurance have a Chiropractic benefit through the Trust Office. The Chiropractic benefits are paid at 50% of reasonable and customary charges to a calendar year maximum of \$500 per individual and \$1,500 family. Members enrolled in the Trust self-insured Medical Plan have a Chiropractic, Naturopathic and Acupuncture benefit provided under that Plan. This benefit is not available to members working while drawing their pension benefits.
- **Employee Assistance Program (EAP) is provided through Canopy:** Canopy offers counseling (in person or virtual), life coaching, legal, child/eldercare support, resource research, housing support, digital self-help resources gym discounts and much more. Contact Canopy at 800-433-2320, or text 503-850-7721 or my.canopywell.com.
- **Life & AD&D Benefit:** The Plan offers a \$10,000 Life and a \$10,000 AD&D benefit to *Active Members*. The Employee must be eligible for benefits under the Plan as of the date of death or dismemberment. These benefits are provided through a contract with LifeMap Assurance Company. Members making COBRA self-payments, and dependents, are not eligible for this benefit.
- **Short-Term Disability (Time-Loss) Benefit:** The Plan offers a Short-Term Disability Benefits for *non-Occupational* injury or illness. The benefit is \$250 per week, for a maximum of 26 weeks per disability. You must be eligible under the Plan at the time of the illness or injury to qualify for this benefit. Contact the Trust Office at 503-254-4022 or 1-800-591-8326 for more information and an application. This benefit is not available to members working while drawing their pension benefits.
- **Disability Waivers:** Disability Waivers are provided by the Plan to extend coverage to a disabled employee without using their Reserve Account and without using contributions from a Contributing Employer. Up to six Disability Waivers are provided per disability. The number of Waivers applied is determined by the length of your doctor certified disability. One Waiver is applied for each 30 days of doctor certified disability. To be eligible, the disability must have occurred while your coverage was in effect under the Plan. Contact the Trust Office at 503-254-4022 or 1-800-591-8326 for an application. This benefit is not available to members working while drawing their pension benefits.

Albañil de Cemento-Empleador El Trust de la Salud, Bienestar y Vacaciones

9848 East Burnside, Portland Oregon 97216 | 503-254-4022 | 1-800-591-8326 | Fax 503-254-4119

Con la cobertura médica y dental, también usted tiene los siguientes beneficios cuando sea elegible:

- **Beneficios para la Vista.** Los beneficios para la Vista son pagados por la oficina del Trust. Contacte a la Oficina del Trust al 503-254-4022 o al 1-800-591-8326 para más información de los beneficios del cuidado rutinario. La Cobertura incluye el examen y anteojos/lentes, o lentes de contacto que se puede escoger en lugar de lentes/marcos. Usted tiene los beneficios de Trust para la Vista, sin importar si ha escogido a Kaiser o Moda. **Kaiser provee otro “Examen rutinario de la vista” para sus miembros quienes han escogido su plan de seguro médico. Si el miembro de Kaiser recibe el examen de la vista a través de Kaiser, podría enviar su reclamo por los lentes/marcos o contactos al Trust.**
- **Beneficios de Ortodoncia:** Si usted ha escogido el plan de seguro dental de Moda, sus beneficios de ortodoncia son provistos a través de la oficina del Trust. Los beneficios de ortodoncia a través de la oficina del Trust son solo para miembros cubiertos en uno de los planes dentales de Moda. Los beneficios se pagan como máximo 60%, de un total de \$1,000. Por favor, informe a su proveedor de ortodoncia contactarse con la oficina del Trust al 503-254-4022, o al 1-800-591-8326. **Si Kaiser es su proveedor dental, entonces sus beneficios de ortodoncia están con Kaiser. Si Willamette Dental es su proveedor dental, entonces Orthodontia es con Willamette Dental.**
- **Beneficios de quiropráctico para los miembros de Kaiser:** Los miembros actuales quienes han escogido a Kaiser por su aseguranza médica tienen los beneficios quiroprácticos a través de la oficina del Trust. Los beneficios quiroprácticos se paga 50% de los cargos razonables y habituales en el año calendario, como máximo de \$500 por individuo y \$1,500 por familia. Para los miembros inscritos en el Plan Médico del Trust, ellos también reciben los beneficios de quiropráctico, naturopatico y acupuntura.
- **El Programa de Asistencia al Empleado (EAP) se proporciona a través de Canopy:** Canopy ofrece asesoramiento (en persona o virtual), coaching de vida, legal, apoyo para el cuidado de niños y ancianos, investigación de recursos, apoyo para la vivienda, recursos digitales de autoayuda, descuentos en gimnasios y mucho más. Comuníquese con Canopy al 800-433-2320, o envía un mensaje de texto al 503-850-7721 o my.canopywell.com.
- **Beneficios de plan de Vida/Muerte Accidental o Desmembramiento (AD&D):** El plan ofrece un seguro de Vida de \$10,000 y beneficio de AD&D de \$10,000 a todos los Miembros Actuales. El empleado tiene que ser elegible para los beneficios en la fecha de la muerte o desmembramiento. Esos beneficios son provistos por un contrato con la compañía de LifeMap Assurance. Los miembros que pagan a COBRA y los dependientes no son elegibles por este beneficio.
- **Beneficios de Discapacidad de Corto Plazo (Accidentes con tiempo perdido):** El Plan ofrece beneficios de discapacidad de corto plazo por lesiones o enfermedades *no-ocupacionales*. El beneficio paga \$250 por semana, con un máximo de 26 semanas por la discapacidad. Usted tiene que ser elegible por el seguro en el momento que le da la enfermedad o lesión para calificar por el beneficio. Favor de contactar a la oficina del Trust al 503-254-4022 o al 1-800-591-8326 para recibir más información y una aplicación.
- **Exención de Discapacidad:** Una exención de discapacidad se provee por el seguro para extender la cobertura a un empleado discapacitado para no usar su cuenta de reserva ni las contribuciones del empleador. Se da hasta 6 exenciones de discapacidades por la discapacidad. El número de exenciones se determina por el tiempo aprobado por su doctor. Una exención se aplica por cada 30 días aprobados por su Doctor. Para ser elegible de recibir el beneficio, la discapacidad tiene que haber ocurrido mientras la cobertura está en efecto. Favor de contactar la oficina del Trust al 503-254-4022 o al 1-800-591-8326 para pedir una aplicación.