

TIPS TO LOOSE WEIGHT

Do you want to get your body to burn off several pounds this year? Here are a couple of ways to get there. Eat 100 fewer calories a day for the next year. Increase your physical activity by burning at least another 100 calories a day for the next year. Making one or both of these changes in your lifestyle can result in a ten (10) pound or more weight loss by year's end. Here are samples of how to drop 100 calories per day from your diet and burn an additional 100 calories with increased activity.

Foods Containing 100 Calories

1 can (12 ounces) "light" beer	1/3 cup half-and-half
2 tablespoons Ranch dressing	1/2 cup pasta or rice
1 jigger (1_ ounces) 80 proof gin, vodka or whiskey	3 tablespoons sour cream
1 tablespoon blue cheese dressing	1 ounce prime beef steak
1 cup (8 ounces) regular soft drink	1 scoop (1/3 cup) ice cream
_ bagel or biscuit	3 slices bacon
1 ounce ping-pong ball-size cheese	1 tablespoon butter, margarine or oil
12 tortilla chips	10 M&Ms with peanuts

Activities burning 100 calories (if you weigh about 150 pounds)

30 minutes of moderate-paced walking
10 minutes of racquetball or high-intensity aerobics
15 minutes of swimming
1 hour of playing with your children

MEDICARE PART B ENROLLMENT REQUIREMENT FOR RETIRED OR DISABLED PARTICIPANTS OR SPOUSES

As of July 1, 2004, the Trustees now require all retired or disabled participants or spouses to enroll in Part B of Medicare immediately upon becoming eligible for Medicare. Retired participants or spouses that are covered by Medicare now, but have not enrolled in Part B of Medicare yet, will be required to enroll in Medicare Part B during a general enrollment period. The general enrollment period for Medicare Part B began January 1, 2005 and continues through March 31, 2005, with Part B coverage becoming effective July 1, 2005. Be certain to confirm with Medicare, during enrollment, that you were covered under St. Paul Electrical Construction Medical Reimbursement Plan because you may be able to avoid a penalty on the Part B premium due to late enrollment.

Proof of Part A and Part B Medicare enrollment will be required of all retired participants, spouses and disabled

retired participants and spouses no later than July 1, 2005. This proof of enrollment must be supplied to the Plan office.

Following this enrollment into Medicare Part B, the Trustees will require each eligible individual to enroll in the Medicare Prime Solution Plan now being offered to all St. Paul Electrical Workers that are eligible for Medicare. There will be a special meeting held in early June 2005 to present information on benefit coverage under Prime Solution and to assist in completing the application for coverage. Those individuals affected by this change that will need to attend this seminar will be contacted directly by the Plan office shortly before the special meeting.

For more information on Medicare eligibility and enrollment go to www.medicare.gov or call 1-800-MEDICARE. For information on your medical coverage contact the plan office.

LONG TERM DISABILITY BENEFITS

The Trustees have changed the Long Term Disability benefits so that eligible disabled participants will receive medical premium benefits from the Retirement Medical Funding Plan. Participants that are determined to be permanently and totally disabled on and after October 1, 2004, will now receive Retirement Medical Funding Plan benefits to continue medical coverage for the participant and eligible dependent family members. This benefit was previously provided under the Medical Reimbursement Plan's Long Term Disability Plan.

FINANCIAL STRATEGIES WORKSHOP

The annual **investment seminar** sponsored by Smith Barney and to be held at the St. Paul Campus of St. Thomas University has been scheduled for **April 30, 2005**. A host of professionals in the investment industry will conduct workshops on various aspects of investing for your retirement. Please mark your calendar now to save the date. Registration information will be mailed directly to you shortly before the Seminar.



Saint Paul Electrical Workers

BENEFITS NEWS

VACATION BENEFIT CHANGES FOR 2006

Following a request from the Union membership, the Trustees reviewed the calculations for determining the number of vacation days eligible members receive.

Beginning with the 2006 Vacation Benefit Period the following changes will take place:

- 1) Each eligible participant will receive the total number of days of vacation the member is eligible for at five (5) days per week regardless of the actual number of hours worked by the participant.
- 2) Each eligible participant working less than 1500 hours during the Vacation Accrual Period (October through September) will receive dollar-value vacation vouchers based on the existing benefit calculations, plus zero-dollar vouchers for the remaining days in each week up to five (5) days per week.
- 3) Each eligible participant receiving zero-dollar vouchers will be able to choose to take time off by utilizing the zero-dollar vouchers or may continue to work and not utilize the zero-dollar vouchers. Zero-dollar vouchers not utilized during the Vacation Benefit Period will be forfeited at the end of that period.
- 4) Only participants eligible for more than three (3) weeks of vacation may bank vacation vouchers. Only fourth and fifth vacation periods can be banked. **ITO vacation may not be banked.**
- 5) The annual administrative fee will apply to all eligible participants in the Plan at the end of the Fiscal period, regardless of that participant's account value. If the value of the participant's account is less than the established fee, the fee shall equal the participant's account.

MEDICAL PLAN BENEFIT REMINDERS

The Trustees made changes to the Plan in 2004 that may affect benefits you receive in 2005 and thereafter.

Effective January 1, 2005 for the fourth quarter carryover benefit for deductibles and out-of-pocket expense was eliminated. Future deductible and out-of-pocket calculations will be based strictly on the calendar year.

The Trustees lowered the Lifetime Maximum Benefit to \$300,000.00 effective January 1, 2005. Please see the special enclosure for more information on this benefit change.

The Trustees have issued a clarification on benefits for surgeon's fees and anesthesiologist fees. Coverage for surgical procedures and the associated anesthesiologist expenses are covered at 80% of eligible charges for outpatient claims and 90% of eligible charges for inpatient claims. These outpatient and inpatient coverages apply to either network or non-network providers.