Training & Legal

Fund

Understanding Your Benefits:

Health

SEIU

October

2026

Mood Check!



Training & Legal Fund

This is a new fund available to all eligible SEIU Local 1 members!



- **YOU** negotiated this benefit into your contract
- SEIU Local 1 members with Janitor Master contracts and BOMA Security members are eligible
- Employers have paid for this service -- it's time to use it!

Contact Us: 312-233-8794, TLFund@seiu1benefits.org

Training & Legal Fund

This is a new fund available to all eligible SEIU Local 1 members!

Training



- ESL (English as a Second Language) Classes on Zoom
- Green Janitor Education Program
- Understanding Your Benefits
- Financial Literacy
- Digital Literacy

Legal Services



- Immigration
  - U.S. Citizenship
  - Immigration Information Desk
- Real Estate
  - Buying/Selling
- Estate Planning
  - Wills
  - Power of Attorney

Contact Us: 312-233-8794, TLFund@seiu1benefits.org

Today You Will Learn...



- What union benefit funds are
- Why they are important to you
- What health benefits you have
- When and how to use your health benefits
- Who to contact when you need help

Union v. Fund Office

The Union and the Fund office are two seperate things



The Union - An organization that represents workers

- Organizes workers
- Negotiates wages, benefits, working conditions
- Protects and fights for worker rights

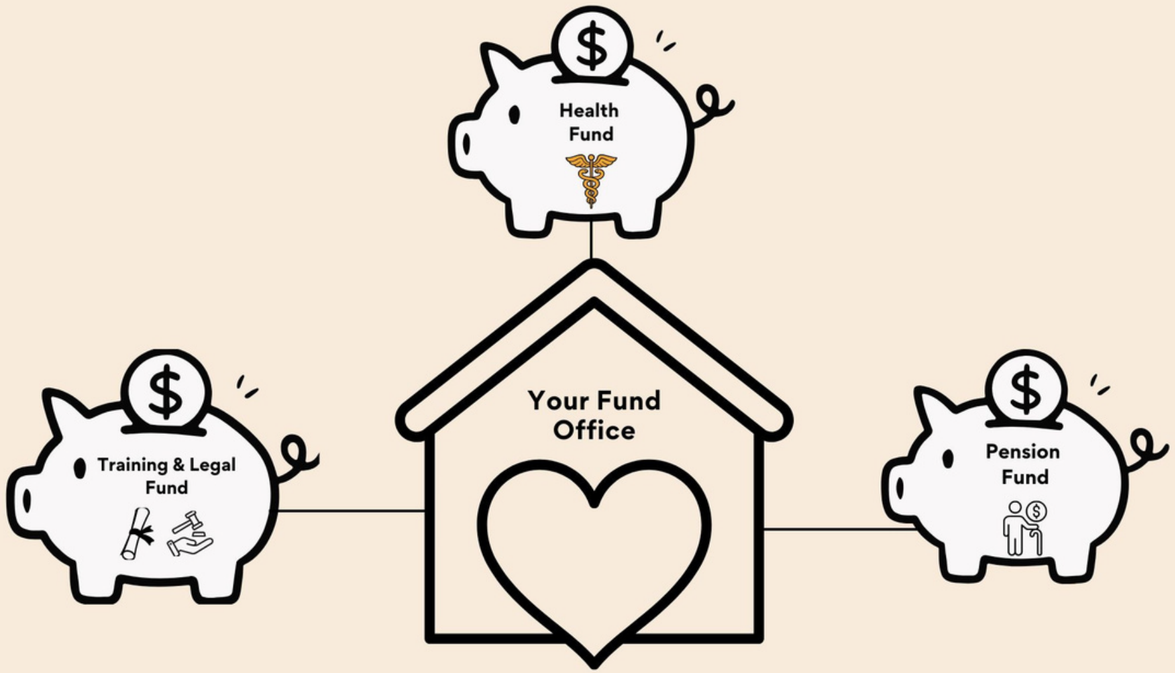


The Fund Office - An organization that manages employee benefits

- Health, pension, Training & Legal benefits
- Provides information about your benefits
- Proccesses payments & maintains elegibility

What Are Union Benefit Funds?

Your benefits are paid for by your employer and held in union benefit funds.



- Employers pay money into the funds every month
- The money pays for your health, pension, 401K (suburbs), training and legal benefits
- The funds are run by the union and employers
- The *law protects this money so it can only be used for you

*Taft Hartley & ERISA are the laws that setup and protect these funds

Why These Benefits Matter to You

Your union benefits help protect you and your family



You get **health care** , **income if you're hurt** , and **money when you retire**



Your benefits **stay with you when you change jobs, but stay with a participating employer**



The money is only used for **members' benefits** **— not company profits**



These benefits help you **build security now** and in the **future**

The Fund Office is Your Help Center

The Fund Office helps you use and understand your benefits



The Fund Office Can...

- Enroll you and your family for benefits
- Answer benefit questions
- Replace health insurance ID cards
- Answer questions about medical bills
- Help when you are hurt or disabled
- Help you apply for retirement
- Connect you to training and legal services

When Should I Call the Fund Office?

Call the Fund Office if you...



- Move or change your phone number or email
- Get married, divorced, or have a baby
- Lose or need a copy of your health insurance ID cards
- Have an unpaid medical bill
- Become disabled and cannot work
- Are thinking about retiring

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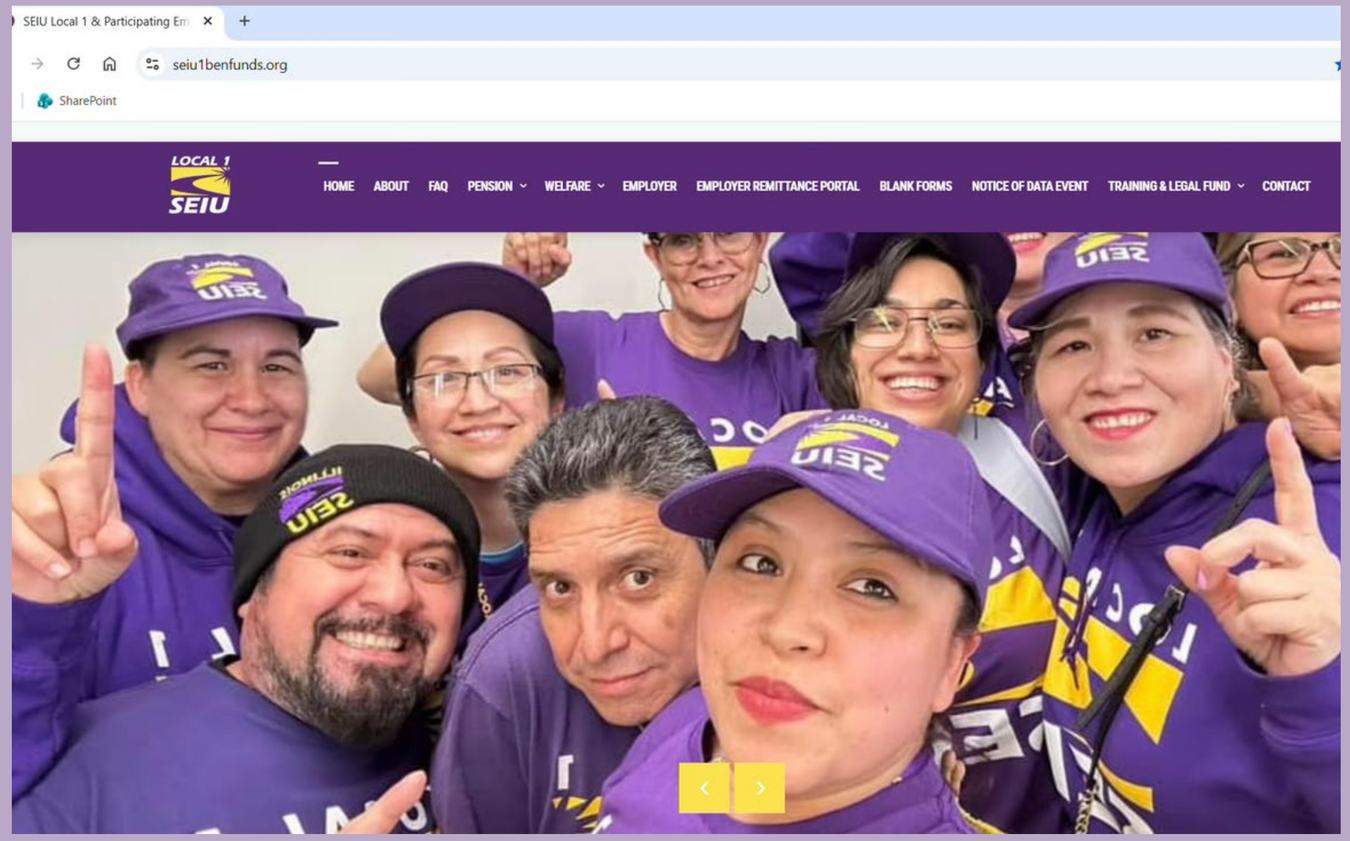
Contact Information for Fund Office



seiu1benfunds.org

(312) 233 -8888

Spanish and Polish help available

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Let’s Practice

Look at a few different scenarios and answer yes or no (or thumbs up/down) to when you should call the fund office:

I Should Call the Fund Office.....

1. I lost my health insurance ID cards.
2. I want to file a complaint against my employer.
3. I just had a baby.
4. I recently moved and have a new address.
5. I want to apply for another position in my company.
6. I have an unpaid medical bill.
7. I didn’t get paid the right amount.
8. I’m thinking about retiring.

Your Health Benefits

Medical & Vision Care

UHS
UNION HEALTH SERVICE

Dental Care

BlueCross BlueShield of Illinois

Prescription Drugs

Optum Rx®

Short -term Disability

SEIU Local 1 Fund office

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When Am I Eligible for Benefits?

Eligibility

You will become initially eligible on the first day of the Benefit Month corresponding to the Work Month in which you first accumulate at least 173.32 Credited Hours of employment for which an employer or employers are required to make a contribution to the Fund on your behalf. For example, if your employer makes contributions for you of at least 173.32 Credited Hours for work performed in January, your coverage will start on April 1.

Once you become eligible, you will remain eligible if you meet the requirements described below. The minimum Credited Hour requirement for continuing eligibility during a Work Month is 173.32 hours per month. The following table shows how Work Months correspond to Benefit Months.

Credited Hours	Worked During **(Work Month)**	Provides Eligibility **(Benefit Month)**
173.32	October 2017	January 2018
173.32	November 2017	February 2018
173.32	December 2017	March 2018
173.32	January 2018	April 2018
173.32	February 2018	May 2018
173.32	March 2018	June 2018
173.32	April 2018	July 2018
173.32	May 2018	August 2018
173.32	June 2018	September 2018
173.32	July 2018	October 2018
173.32	August 2018	November 2018
173.32	September 2018	December 2018

Eligibility begins the **1st day of the fourth month of employer contributions.**

If you have any questions about your eligibility, call member services: 312 -233 -8888

What is Union Health Service? (UHS)

Your main place for medical and vision care



- UHS opened in 1955
- The clinic was built with the help of union members who gave part of their wage increase to create a building fund

UHS provides 100% coverage for clinic services and referred care;

NO CO -PAY when you use the plan correctly!

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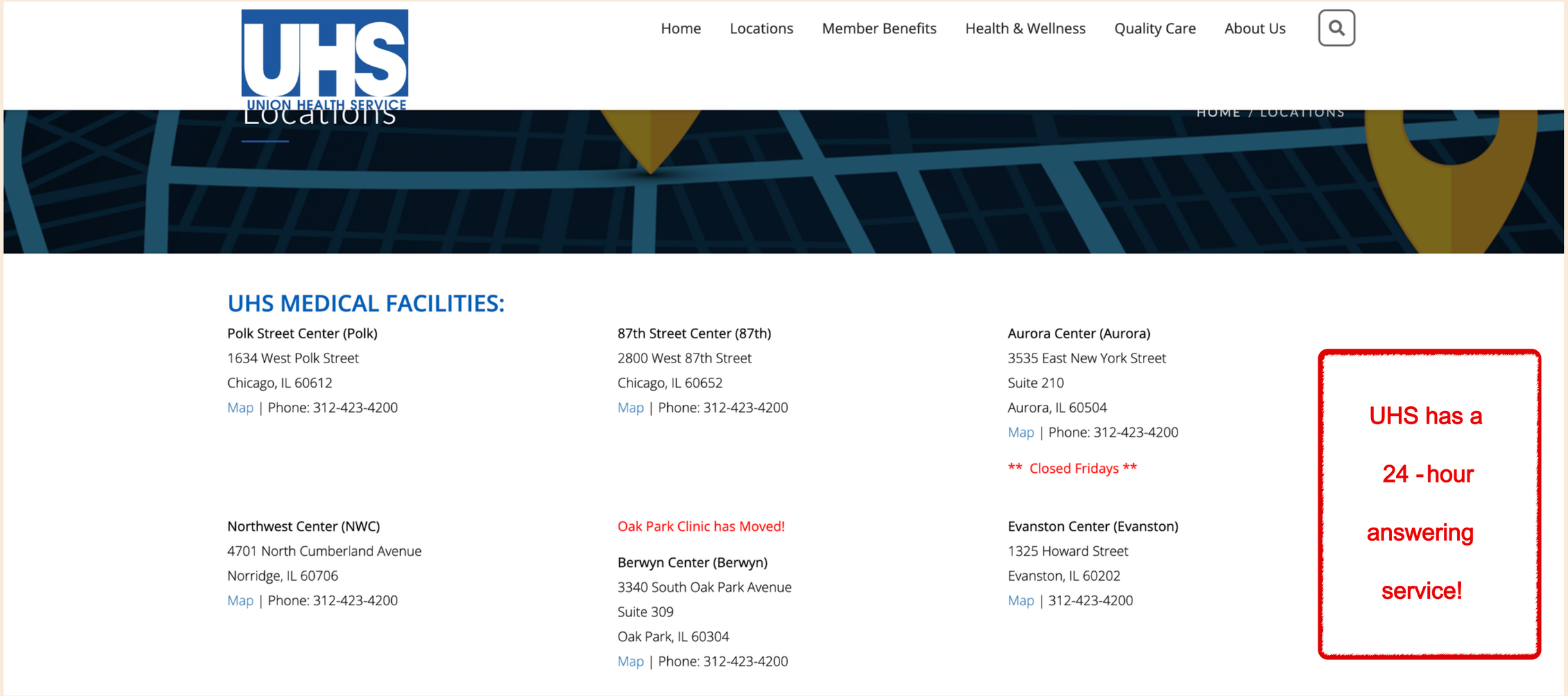
Union Health Service Locations

UHS operates 6 facilities throughout Chicagoland providing primary and specialty care



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Union Health Services (UHS)



What UHS Provides:

- Primary care doctors
- Specialist physician care
- No-appointment sick visits
- X-rays, ultrasound, and mammograms
- Referrals for all services needed outside of the clinics
- 24/7 emergency answering service

UHS provides 100% coverage for clinic services and referred care -- NO CO-PAY



What UHS Does NOT Provide:

- Out-patient surgery services
- In-patient hospitalization
- Some specialty physician care
- Life threatening emergency services

These require a referral from UHS!

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How to Use Your Medical Benefits to Make Sure You Don't Have Medical Expenses

UNION HEALTH SERVICE

- Call UHS, **312-423-4200** **ext. 7997** and register
- Pick a primary doctor
- Schedule regular checkups

Always start care at UHS

Call UHS within 48 hours

after emergencies

UHS provides 100% coverage for clinic services and referred care -- **NO CO-PAY**

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Let's Practice

Read the following scenarios. What should Maria do?

1.Maria woke up with a cold and needs to go to the doctor. What should she do?

a. Call the Fund Office
b. Call UHS. They will help her make an appointment or have her come in for a same day sick visit.
c. Call Walgreens

1. Maria needs a mammogram. What should she do?

a. Call UHS. They will help her make an appointment.
b. Call the fund office.
c. Call her local hospital.

1.Maria broke her arm and went to the emergency room. What should she do?

a. She needs to sleep .
b. She needs to call the fund office .
c. She needs to call UHS as soon as possible to report the emergency visit.

1.Maria woke up on a Sunday with a fever. UHS is closed . What should she do?

a. Call UHS. A representative will help her.
b. Go to her nearby doctor's office.
c. Call the Fund office.

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Dental Benefits

Covered through BCBS of Illinois



- You have **BlueCare Dental HMO**
- It’s a managed care plan
- You must choose your own dentist
- You can change dentists anytime

For help choosing a provider:

Call the Participant Assistant Line

(866) -431 - 1594

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Benefits Schedule

BlueCross BlueShield of Illinois

SEIU Local 1 Participating Employers Health Trust

BlueCare Dental™
HMO Plan 740

BENEFITS SCHEDULE

ADA Code	Procedure	Patient Copay
D0120	Periodic Oral Evaluation - Established Patient	$0
D0140	Limited Oral Evaluation - Problem Focused	0
D0145	Oral Evaluation for a Patient Under Three Years of Age and Counseling with Primary Caregiver	0
D0150	Comprehensive Oral Evaluation - New or Established Patient	0
D0160	Detailed and Extensive Oral Evaluation - Problem Focused, by Report	0
D0170	Re-Evaluation - Limited, Problem Focused (Established Patient; Not Post-Operative Visit)	0
D0180	Comprehensive Periodontal Evaluation - New or Established Patient	0
D0210	Intraoral - Complete Series of Radiographic Images	0
D0220	Intraoral - Periapical First Radiographic Image	0
D0230	Intraoral - Periapical Each Additional Radiographic Image	0
D0240	Intraoral - Occlusal Radiographic Image	0
D0251	Extra-Oral Posterior Dental Radiographic Image	0
D0270	Bitewing - Single Radiographic Image	0
D0272	Bitewings - Two Radiographic Images	0
D0273	Bitewings - Three Radiographic Images	0
D0274	Bitewings - Four Radiographic Images	0
D0277	Vertical Bitewings - Seven to Eight Radiographic Images	0
D0320	Temporomandibular Joint Arthrogram, Including Injection	0
D0330	Panoramic Radiographic Image	0
D0340	2D Cephalometric Radiographic Image - Acquisition, Measurement and Analysis	0
D0350	2D Oral/Facial Photographic Image Obtained Intra-orally or Extra-orally	0
D0460	Pulp Vitality Tests	0
D0470	Diagnostic Casts	0
D0473	Accession of Tissue, Gross and Microscopic Examination, Preparation and Transmission of Written Report	0
D0474	Accession of Tissue, Gross and Microscopic Examination	0
D0999	Unspecified Diagnostic Procedure, by Report	0
D1110	Prophylaxis - Adult	0
D1120	Prophylaxis - Child	0
D1208	Topical Application of Fluoride - Excluding Varnish	0
D1310	Nutritional Counseling for Control of Dental Disease	0
D1330	Oral Hygiene Instructions	0
D1351	Sealant - Per Tooth	0
D1352	Preventive Resin Restoration in a Moderate to High Caries Risk Patient - Permanent Tooth	0
D1353	Sealant Repair - Per Tooth	0
D1354	Interim Caries Arresting Medicament Application - Per Tooth	0
D1510	Space Maintainer - Fixed, Unilateral - Per Quadrant	0
D1516	Space Maintainer - Fixed - Bilateral, Maxillary	0
D1517	Space Maintainer - Fixed - Bilateral, Mandibular	0
D1520	Space Maintainer - Removable, - Unilateral - Per Quadrant	0
D1526	Space Maintainer - Removable - Bilateral, Maxillary	0
D1527	Space Maintainer - Removable - Bilateral, Mandibular	0
D1551	Re-Cement or Re-Bond Bilateral Space Maintainer - Maxillary	0
D1552	Re-Cement or Re-Bond Bilateral Space Maintainer - Mandibular	0
D1553	Re-Cement or Re-Bond Unilateral Space Maintainer - Per Quadrant	0
D1556	Removal of Fixed Unilateral Space Maintainer - Per Quadrant	0
D1557	Removal of Fixed Bilateral Space Maintainer - Maxillary	0
D1558	Removal of Fixed Bilateral Space Maintainer - Mandibular	0
D1575	Distal Shoe Space Maintainer - Fixed, - Unilateral - Per Quadrant	0
D2140	Amalgam - One Surface, Primary or Permanent	0
D2150	Amalgam - Two Surfaces, Primary or Permanent	0
D2160	Amalgam - Three Surfaces, Primary or Permanent	0
D2161	Amalgam - Four or More Surfaces, Primary or Permanent	0
D2330	Resin-Based Composite - One Surface, Anterior	0
D2331	Resin-Based Composite - Two Surfaces, Anterior	$0
D2332	Resin-Based Composite - Three Surfaces, Anterior	0
D2335	Resin-Based Composite - Four or More Surfaces or Involving Incisal Angle (Anterior)	0
D2390	Resin-Based Composite Crown, Anterior	0
D2391	Resin-Based Composite - One Surface, Posterior	0
D2392	Resin-Based Composite - Two Surfaces, Posterior	0
D2393	Resin-Based Composite - Three Surfaces, Posterior	0
D2394	Resin-Based Composite - Four or More Surfaces, Posterior	0
D2510	Inlay - Metallic - One Surface	225
D2520	Inlay - Metallic - Two Surfaces	225
D2530	Inlay - Metallic - Three or More Surfaces	225
D2542	Onlay - Metallic - Two Surfaces	225
D2543	Onlay - Metallic - Three Surfaces	225
D2544	Onlay - Metallic - Four or More Surfaces	225
D2610	Inlay - Porcelain/Ceramic - One Surface	225
D2620	Inlay - Porcelain/Ceramic - Two Surfaces	225
D2630	Inlay - Porcelain/Ceramic - Three or More Surfaces	225
D2642	Onlay - Porcelain/Ceramic - Two Surfaces	225
D2643	Onlay - Porcelain/Ceramic - Three Surfaces	225
D2644	Onlay - Porcelain/Ceramic - Four or More Surfaces	225
D2650	Inlay - Resin-Based Composite - One Surface	225
D2651	Inlay - Resin-Based Composite - Two Surfaces	225
D2652	Inlay - Resin-Based Composite - Three or More Surfaces	225
D2662	Onlay - Resin-Based Composite - Two Surfaces	225
D2663	Onlay - Resin-Based Composite - Three Surfaces	225
D2664	Onlay - Resin-Based Composite - Four or More Surfaces	225
D2710	Crown - Resin-Based Composite (Indirect)	105
D2712	Crown - 3/4 Resin-based Composite (Indirect)	105
D2720	Crown - Resin with High Noble Metal	225
D2721	Crown - Resin with Predominantly Base Metal	225
D2722	Crown - Resin with Noble Metal	225
D2740	Crown - Porcelain/Ceramic Substrate	225
D2750	Crown - Porcelain Fused to High Noble Metal	225
D2751	Crown - Porcelain Fused to Predominantly Base Metal	225
D2752	Crown - Porcelain Fused to Noble Metal	225
D2753	Crown - Porcelain Fused to Titanium and Titanium Alloys	225
D2780	Crown - 3/4 Cast High Noble Metal	225
D2781	Crown - 3/4 Cast Predominantly Base Metal	225
D2782	Crown - 3/4 Cast Noble Metal	225
D2783	Crown - 3/4 Porcelain/Ceramic	225
D2790	Crown - Full Cast High Noble Metal	225
D2791	Crown - Full Cast Predominantly Base Metal	225
D2792	Crown - Full Cast Noble Metal	225
D2794	Crown - Titanium and Titanium Alloys	225
D2799	Provisional Crown - Further Treatment or Completion of Diagnosis Necessary Prior to Final Impression	70
D2910	Re-Cement or Re-Bond Inlay, Onlay, Veneer or Partial Coverage Restoration	0
D2915	Re-Cement or Re-Bond Indirectly Fabricated or Prefabricated Post and Core	0
D2920	Re-Cement or Re-Bond Crown	0
D2921	Reattachment of Tooth Fragment, Incisal Edge or Cusp	0
D2929	Prefabricated Porcelain/Ceramic Crown - Primary Tooth	0
D2930	Prefabricated Stainless Steel Crown - Primary Tooth	65
D2931	Prefabricated Stainless Steel Crown - Permanent Tooth	0
D2932	Prefabricated Resin Crown	0
D2933	Prefabricated Stainless Steel Crown with Resin Window	0
D2934	Prefabricated Esthetic Coated Stainless Steel Crown - Primary Tooth	0
D2940	Protective Restoration	0
D2941	Interim Therapeutic Restoration - Primary Dentition	0
D2949	Restorative Foundation for an Indirect Restoration	0
D2950	Core Buildup, Including any Pins when Required	0
D2951	Pin Retention - Per Tooth, in Addition to Restoration	0
D2952	Post and Core in Addition to Crown, Indirectly Fabricated	0
D2953	Each Additional Indirectly Fabricated Post - Same Tooth	0
D2954	Prefabricated Post and Core in Addition to Crown	0
D2957	Each Additional Prefabricated Post - Same Tooth	0
D2980	Crown Repair Necessitated by Restorative Material Failure	0
D2981	Inlay Repair Necessitated by Restorative Material Failure	0
D2982	Onlay Repair Necessitated by Restorative Material Failure	0

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Prescription Benefits

Covered through OptumRx



Generics

30 - Day Supply	$5
31 to 60 - Day Supply	$10 $10
61 to 90 - Day Supply	$12.50

Brand Name

30 - Day Supply	$20
31 to 60 - Day Supply	$40
61 to 90 - Day Supply	$50

Contact OptumRx

Member Services Hotline:

(866)207 - 5623

www.optumrx.com

Short - Term Disability

Provided when a member is considered to be totally disabled and unable to work.



The Maximum period that benefits are payable per period of disability is 26 weeks:

- $400/week (first 13 weeks)
- $200/week (next 13 weeks)

Federal Insurance Contributions (FICA) taxes are withheld from this benefit and paid directly to the federal government . Your employer pays the matching FICA tax amounts .

Contact:

Claims Department

312-233-8877

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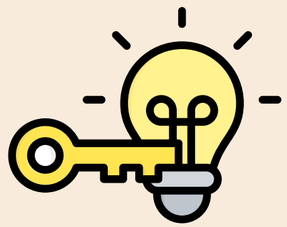

Key Takeaways

Your benefits are valuable —use them!

Always start with UHS for Medical & Vision .

The Fund Office is there to help you.

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Questions

Before You Go...

Give us your feedback! Take a few minutes to complete our survey

