Effective January 1, 2011, the following changes became effective under the Central Pennsylvania Teamsters Health and Welfare Plans due to passage of the recent health care reform legislation, the Patient Protection and Affordable Care Act (PPACA):

- Pre-existing condition exclusion based on health status for dependent children up to age 19 is eliminated;
- Lifetime and annual dollar limits are eliminated on “essential services”;
- Coverage for adult children is extended to the end of the month in which the child turns age 26, provided the child does not have health coverage available through his or her employer.

Information regarding health care reform was mailed to all participants in late November. A Q&A – Important Information about How the Patient Protection & Affordable Care Act (PPACA) Will Affect Benefits for You and Your Family – was included in the mailing and is available on the Fund’s website under Health & Welfare – Health Care Reform.

Also included in the mailing were enrollment forms for those participants who wish to enroll their adult children over age 19 and up to age 26. These forms are also available on the website under Health and Welfare Fund – Health Care Reform.

Please note that you must fill out the enrollment form in its entirety. Be sure to include all eligible dependents. The Adult Child Eligibility Affidavit must be completed and notarized for each child over age 19 and under age 26, even if they are currently covered due to their status as a full time student.

When your adult child reaches age 26 or gains access to other group health coverage, it is your responsibility to inform the Central Pennsylvania Teamsters Contributions/Eligibility Department and your employer within 31 days of the child’s change in status.

Failure to inform the Fund in a timely manner may result in the loss of the adult child’s eligibility for COBRA coverage and repayment of benefits. The Fund will request a refund of all benefits paid after the adult child no longer meets the eligibility requirements.

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**Benefits Payable under the Plan for Emergency Room Care**

What does the Plan mean by the term “Emergency”? The term “Emergency” under the Plan means an unforeseeable condition or complaint of pain that causes a reasonable person to fear serious injury, illness or death. You should think of emergencies as conditions such as heart attacks, strokes, accidental injuries, etc. Conditions such as colds and the flu are not emergencies under the Plan.

Do I have to pay a copayment if I go to the emergency room for treatment? 

A $50 copayment is required for Emergency Room Services. However, this fee will be waived if you are admitted to the hospital immediately following emergency room treatment.

**Accidental Injuries**

If you suffer an accidental injury that requires emergency care and you use a network hospital emergency room within 48 hours of the injury, the Plan will pay benefits for Medically Necessary Emergency Room Services, less any required copayment. These services include physician services and prescription drugs. If you use a non-network emergency room, and the condition for which you seek treatment is an “Emergency,” the Plan will pay the claims, less the emergency room copayment. If you seek treatment from a non-network facility for a condition that is not an “Emergency” as defined by the Plan, the Plan will provide benefits under the Major Medical provisions of the Plan less any Emergency Room copayment.

**Illnesses**

If you suffer from an illness requiring Medically Necessary

(Continued on page 2)
Retirees: Direct Deposit Makes Sense!

Would you like to be sure that your pension check is available to you on the first business day of each month? You can be certain if you use direct deposit! Eliminate the worries of delayed mail delivery, postponed trips to the bank because of bad weather or other commitments, lost or stolen checks, standing in long lines at the bank, or waiting for your check to clear at the bank.

It’s easy to sign up! Just call the Pension Department or visit the Pension Section of the Central PA Teamsters website www.CentralPATeamsters.com (click on “Forms”) to get the form. Fill it out and return it to the Fund Office. It takes about 30 days to complete the process. Then relax and enjoy the comfort of knowing that your pension check is available to you each month without delay.

Important: If you are currently using direct deposit and your bank name and/or account changes, please notify the Pension Fund immediately and request a new direct deposit form to complete (even if your bank informs you that no notification is needed.) If you change banks and need to complete a new form, simply call the Pension Fund or visit www.CentralPATeamsters.com (click on “Forms”) to get a new form. Please note that direct deposit changes usually take 30 days to become effective after you notify the Fund. After you request a change, your first check may be mailed to your home. Thereafter, your check will be directly deposited to your bank account.

Benefits for Emergency Room Care (Continued from page 1)

Emergency care and you use a Network Hospital Emergency Room, the Plan will pay benefits in full, less any required copayment. If you use a non-network emergency room, the Plan will provide benefits under the Major Medical provisions of the Plan, less any required copayment.

What If I am out of town and seek treatment for an illness or injury that is not considered an emergency?

If you seek medical care for a non-emergency, your out-of-pocket expenses will generally be less if you utilize a network provider. If you need assistance locating an in-network provider, please call the Health and Welfare Fund at the number listed on the back of your ID card.

Visit Our Website

Members and their families, as well as contributing employers, can access the Fund website, www.CentralPATeamsters.com for benefits information, announcements, reports and notices, investment reports, forms, wellness information and provider network links.

Participants in the Retirement Income Plan (RIP) 1987 can view their account balances (updated monthly) by visiting the Pension Web Portal page. You must register first before you can access your account information.

Motor Vehicle Accidents: How Are Medical and Wage Loss Benefits Paid by the Health and Welfare Fund?

The Fund Office receives many questions regarding coverage provided by the Fund when the claim is the result of an injury due to a motor vehicle accident. In accordance with Plan provisions, the Fund will only cover medical expenses on a subrogated basis once the maximum liability has been paid by the motor vehicle insurance carrier. In other words, the Fund will consider the payment of medical expenses only after benefits from the automobile insurance carrier have been exhausted.

The subrogation rules above also apply if you are injured while repairing your car or by any other contact with your car. In addition, the Fund will not provide coverage for short-term disability benefits (except for the first 5 days of missed work) for injuries sustained in a motor vehicle accident. The only time the Fund will pay more than 5 days of short-term disability benefits is when written proof is submitted verifying that the state in which you reside does not allow you to purchase wage loss protection from your motor vehicle insurance carrier. The state of Pennsylvania allows residents to purchase wage loss protection. It is recommended that you contact your motor vehicle insurance carrier to evaluate the extent to which you are covered for wage loss benefits resulting from a motor vehicle accident. Check with your motor vehicle insurance carrier to ensure that your policy carries at least the minimum coverage required by the state in which you reside.

Do not wait until you have an accident to find out you have no wage loss coverage under your policy. Payment for the first 5 days of short-term disability benefits does not apply to motorcycle accidents. There are no short-term disability benefits payable for injuries sustained as a result of a motorcycle accident.
Central Pennsylvania Teamsters Health and Welfare Fund Prescription Drug Benefits

Negative Formulary List*

<table>
<thead>
<tr>
<th>Aciphex</th>
<th>Cymbalta</th>
<th>Lunesta**</th>
<th>Pristiq</th>
<th>Trilipix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advicor</td>
<td>Daypro</td>
<td>Luvox</td>
<td>Protonix</td>
<td>Valturna</td>
</tr>
<tr>
<td>Allegra</td>
<td>Deprizine</td>
<td>Mevacor</td>
<td>Prozac</td>
<td>Vioomo</td>
</tr>
<tr>
<td>Altoprev</td>
<td>Dexilant</td>
<td>Nexion</td>
<td>Relenza</td>
<td>Vitorin</td>
</tr>
<tr>
<td>Ambien**</td>
<td>Diflucan</td>
<td>Oleptro</td>
<td>Rozerem</td>
<td>Vytorin</td>
</tr>
<tr>
<td>Axic</td>
<td>Edluar</td>
<td>Oravig</td>
<td>Sarafem</td>
<td>Xyzal</td>
</tr>
<tr>
<td>Bextra</td>
<td>Effexor</td>
<td>Paxil</td>
<td>Sonata*</td>
<td>Zantac***</td>
</tr>
<tr>
<td>Cambia</td>
<td>Fibricor</td>
<td>Pepcid***</td>
<td>Sporanox</td>
<td>Zegerid</td>
</tr>
<tr>
<td>Celebrex</td>
<td>Lamisol</td>
<td>Pexeva</td>
<td>Symbyax</td>
<td>Zetia</td>
</tr>
<tr>
<td>Celexa</td>
<td>Lexapro</td>
<td>Pravachol</td>
<td>Tagamet</td>
<td>Zipsor</td>
</tr>
<tr>
<td>Clarinex</td>
<td>Lipitor</td>
<td>Prevacid</td>
<td>Tamiflu</td>
<td>Zocor</td>
</tr>
<tr>
<td>Crestor</td>
<td>Livalo</td>
<td>Prilosec**</td>
<td>Trepadone</td>
<td>Zoloft</td>
</tr>
</tbody>
</table>

And All Injectables (excluding Insulin and Imitrex)

Effective February 1, 2011, Gilenya, Simcor, Silenor and Tekamlo will be added to the Negative Formulary List.

*Please note that this listing is subject to change. Participants will receive notification (via newsletter, mailings, etc.) of additions and/or deletions.
**By law, controlled substances cannot be mail ordered.
***Over the counter dosages are not covered.
****Effective 1/1/09, all new prescriptions for proton pump inhibitors (PPI’s) will be subject to a Step Therapy Program. This means that the plan will cover only over-the-counter PPI's as a first step in treatment. If the OTC is ineffective, ask your doctor to write a letter (addressed to the Fund) stating the reason that you must have a prescription PPI.

Prescription Plan Benefits Under Plans 13, R4, R5 and R7

MAIL ORDER COPAYMENTS
- $15 Generic for up to a 90 day supply
- $30 Brand for up to a 90 day supply
- $60 Negative Formulary up to a 90 day supply

RETAIL PHARMACY COPAYMENTS
- $5 Generic for up to a 34 day supply
- $15 Brand for up to a 34 day supply
- $30 Negative Formulary up to a 34 day supply

Prescription Plan Benefits Under Plans 14, 16 and R6 (continued)

RETAIL PHARMACY COPAYMENTS
<table>
<thead>
<tr>
<th>Generic for up to a 34 day supply</th>
<th>Option A</th>
<th>Option B</th>
<th>Option C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brand for up to a 34 day supply</td>
<td>$5.00</td>
<td>$10.00</td>
<td>$10.00</td>
</tr>
<tr>
<td>Negative Formulary up to a 34 day supply</td>
<td>$15.00</td>
<td>$20.00</td>
<td>$30.00</td>
</tr>
</tbody>
</table>

Prescription Plan Benefits Under Plan 13Y

MAIL ORDER COPAYMENTS
- $30 Generic for up to a 90 day supply
- $60 Brand for up to a 90 day supply
- $100 Negative Formulary up to a 90 day supply

RETAIL PHARMACY COPAYMENTS
- $10 Generic for up to a 34 day supply
- $30 Brand for up to a 34 day supply
- $50 Negative Formulary up to a 34 day supply
The Health and Welfare Fund does not cover participants or their eligible dependents for illnesses or injuries that arise as a result of performing non-covered employment for wage or profit. Any time such service is rendered for wage or profit, there are no benefits (i.e. medical, short-term disability, etc.) payable by the Fund. Non-covered employment means any employment for which contributions are not made to the Fund. Unfortunately, in the past, there have been cases where an individual was performing odd jobs, i.e. painting, roofing, etc. for which they received payment. The individual was injured while performing the job and as a result, all bills and short-term disability benefits were denied. If you or your spouse intend to render services or be self-employed in any capacity for which a wage or profit is received, you must have the appropriate liability coverage to cover any injuries or illnesses which arise as a result of performing such services.

1. Your application should not be signed and dated more than sixty (60) days prior to the date that is entered in the space entitled “Date Electing to Retire.”
2. If you are electing to have your monthly check(s) sent to the bank, your FIRST (or next if you are already receiving checks) monthly check will be sent to your home address. It takes 30 days for direct deposit to go into effect.
3. The date of notarization must be the same date you signed the applicable forms in the presence of the Notary Public.
4. If the Pension Fund requests a participant’s signature on a form, the form must be signed by the participant. No one other than the participant is permitted to sign forms on a participant’s behalf, unless a Power of Attorney is on file with the Fund Office.
5. If you are electing to rollover a lump sum balance, the financial institution receiving the rollover needs to provide a Direct Rollover Acceptance Form or a Letter of Acceptance. In order for the rollover forms to be acceptable, please note the following points:
   a. The acceptance forms must contain the name of the correct plan from which the money is coming. The funds are either coming from the Defined Benefit Plan or the Retirement Income Plan.
   b. If you are electing a partial rollover, the acceptance paperwork must also be marked as a partial rollover.
   c. You do NOT have an Individual Retirement Annuity (“IRA”) or a 401(k) with the Central Pennsylvania Teamsters Pension Fund. The Retirement Income Plan is a qualified retirement plan (QRP) or a 401(a).
   d. The acceptance forms must be signed by an authorized representative of the financial institution. The signatures must be original.
   e. All acceptance forms must be originals. Copies or faxes will not be accepted.
   f. If the acceptance letter references an attached document, the Pension Fund requires the attached document to also be included.
6. Your Retirement Income Plan balance is subject to net gains or losses through the last day of the month in which your application is approved for payment.
7. Your checks will begin on the first of the month following approval of your Retirement Application by the Board of Trustees. Retirement checks are issued on the first business day of the month and represent benefits for the previous month. For example, if your retirement date is October 1, you will receive your first check dated November 1, representing benefits for the month of October. If your retirement date is retroactive, your retroactive payment will be paid in a separate check on the first business day of the month after your application is approved.
8. Please make arrangements to receive all your mail from the Fund on a regular basis if you are away from home for an extended period of time. Failure to do so could result in a delay in receiving your monthly pension check or the 1099-R form that you need to complete your federal tax return. To avoid interruptions of receipt of your mail from the Pension Fund, it is suggested that you contact the Fund directly to temporarily change your address while you are away for an extended period.
How Do I Qualify for a Disability Pension?

If you become totally disabled, you may be eligible to receive a Disability Retirement Benefit, provided that at the time you apply, you:

• Meet the eligibility requirements under the Plans for a Disability Pension. Please refer to the Defined Benefit Plan and Retirement Income Plan 1987 Summary Plan Descriptions for details on eligibility. Special rules apply if you are entitled to or have received Worker’s Compensation benefits with respect to the injury causing your disability.

• Have been awarded disability benefits by the Social Security Administration, provided that, in the case of benefits under the Retirement Income Plan, you are vested under the Plan or, in the case of benefits under the Defined Benefit Plan, you have 15 years of Service and the date that the Social Security Administration determines as the onset of your disability is no more than 18 months from the date on which you were last credited with an Hour of Service under the Plan.

In order for the Fund to determine if you qualify for a Disability Pension, you will be required to submit a copy of your Social Security Administration Retirement, Survivors and Disability Notice of Award.

The Fund cannot accept a copy of the Fully Favorable Decision, computerized print outs or a copy of your Notice of Award for Supplemental Security Income (SSI) as verification of your disability with the Social Security Administration. Important: Keep your original award notice in a safe place. Many of our members have experienced resistance from the Social Security Administration when requesting another copy of the award. You may experience a considerable delay in receiving an additional copy, which may delay your retirement application.

How Do I Qualify for the Combined Minimum Monthly Benefit (CMMB)?

To qualify for the Combined Minimum Monthly Benefit (CMMB), you must be at least 57 years old, have completed 25 years or more of Benefit Service, not be working in suspendable employment, and retire from covered employment on or after November 1, 2002 (October 1, 2002 for eligible Participants who are UPS employees).

In addition, you must satisfy the following four requirements:

1. The “Two Year” Rule:
   a. your employer must have been obligated to make contributions on your behalf for at least 1,000 hours of service in any two consecutive 12-month periods that end on or after you first became eligible for the CMMB, or
   b. if you fail to satisfy (a) above, due solely to your disability or layoff, you may meet the “Two Year” Rule by returning to covered employment and by earning contributions for the number of hours of service for which you are short.

2. The “45-day” Rule:
   a. if your employer is a monthly contributor, it must have been obligated to make contributions on your behalf for at least two of the four months immediately preceding the later of the date that you attain age 57 or the date that you first became eligible for the CMMB.
   b. if your employer is an hourly contributor, it must have been obligated to make contributions on your behalf for at least 200 hours in at least three of the four months immediately preceding the later of the date you attain age 57 or the date you first became eligible for the CMMB.

3. You have not previously withdrawn any portion of your RIP 1987 Account Balance, except pursuant to a Qualified Domestic Relations Order or in an amount necessary to satisfy a minimum distribution due to attainment of age 70½.

4. You may not be receiving benefit payments from the Plan unless such payments are made pursuant to a Disability Retirement Pension or in order to satisfy a minimum distribution due to age 70½.

The above information is intended to be an overview of the Disability Benefit and CMMB eligibility requirements. For additional information on CMMB, please contact the Pension Fund.
Where’s the Salt?

Sodium can come from natural sources or can be added to foods. Most foods in their natural state contain some sodium. However, the majority (up to 75 percent) of sodium that Americans consume comes from sodium added to processed foods by manufacturers. While some of this sodium is added to foods for safety reasons – the amount of salt added to processed foods is clearly above and beyond what is required for safety and function of the food supply.

Major food sources of sodium are:
- Tomato sauce
- Soups
- Condiments
- Canned foods
- Prepared mixes

Call it what you will

When you buy prepared and packaged foods, read the labels. You can tell the sodium content by looking at the Nutrition Facts panel of a food. Listed are the amount for sodium, in milligrams (mg), and the “% Daily Value.” Also read the ingredient list to watch for the words “soda” (referring to sodium bicarbonate, or baking soda), “sodium” and the symbol “Na” to see if the product contains sodium.

Furthermore, some products include terms related to sodium. Here are some common terms and their meanings:
- Sodium-free – less than 5 milligrams of sodium per serving
- Very low-sodium – 35 milligrams or less per serving
- Low-sodium – 140 milligrams or less per serving
- Reduced sodium – usual sodium level is reduced by 25 percent
- Unsalted, no salt added or without added salt – made without the salt that’s normally used, but still contains the sodium that’s a natural part of the food itself.

The U.S. Food and Drug Administration and U.S. Department of Agriculture state that an individual food that has the claim “healthy” must not exceed 480 mg sodium per reference amount. “Meal type” products must not exceed 600 mg sodium per labeled serving size.

Sodium equivalents

- ¼ teaspoon salt = 600 mg sodium
- ½ teaspoon salt = 1,200 mg sodium
- ¾ teaspoon salt = 1,800 mg sodium
- 1 teaspoon salt = 2,300 mg sodium
- 1 teaspoon baking soda = 1,000 mg sodium

Sodium in medications

Some drugs contain high amounts of sodium. Carefully read the labels on all over-the-counter drugs. Look at the ingredient list and warning statement to see if the product has sodium. A statement of sodium content must be on labels of antacids that have 5 mg or more per dosage unit (tablet, teaspoon, etc.). Some companies are now producing low-sodium over-the-counter products. If in doubt, ask your doctor or pharmacist if the drug is OK for you.

Reducing sodium in your diet

High-sodium diets are linked to an increase in blood pressure and a higher risk for heart disease and stroke. Reducing the amount of sodium you consume can help lower high blood pressure or prevent it from developing in the first place. Keeping your blood pressure at healthy levels is important, because high blood pressure can lead to heart attacks or stroke.

The American Heart Association recommends that you choose and prepare foods with little or no salt to reduce the risk of cardiovascular disease. Aim to eat less than 1,500 mg of sodium per day.

Reducing sodium in our food supply

Americans on average consume 3,436 mg sodium daily. Many experts now believe that lowering daily consumption to no more than 1,500 mg of sodium daily would be an effective way to prevent or lower high blood pressure. However, the amount of sodium and salt used in the U.S. food supply makes this goal difficult to achieve for most Americans.

Tips for reducing sodium in the diet

- Choose fresh, frozen or canned food items without added salts.
- Select unsalted nuts or seeds, dried beans, peas and lentils.
- Limit salty snacks like chips and pretzels.
- Avoid adding salt and canned vegetables to homemade dishes.
- Select unsalted, lower sodium, fat-free broths, bouillons or soups.
- Select fat-free or low-fat milk, low-sodium, low-fat cheeses and low-fat yogurt.
- Learn to use spices and herbs to enhance the taste of your food. Most spices naturally contain very small amounts of sodium.
- Add fresh lemon juice instead of salt to fish and vegetables.
- Specify how you want your food prepared when dining out. Ask for your dish to be prepared without salt.
- Don’t use the salt shaker. Use the pepper shaker or mill.

Source: U.S. Food & Drug Administration

Have Health Care Questions? Call NurseLine.

NurseLine is a free service available 24 hours a day, 7 days a week to help you and your family with health issues. Call NurseLine tool-free, at 1-866-491-4462 for help when you are sick, injured or have a health care question.
For the month of November 2010

For the month of November 2010

For the month of November 2010

For the month of December 2010

For the month of December 2010

For the month of December 2010

Visit our website at: www.CentralPATeamsters.com
Central Pennsylvania Teamsters Pension Fund and
Central Pennsylvania Teamsters Health and Welfare Fund

Trustees:
William M. Shappell
Chairman & Union Trustee
Tom J. Ventura
Secretary & Employer Trustee
Kevin M. Cicak
Union Trustee
Tomm Forrest
Employer Trustee
J. Christopher Michael
Employer Trustee
Keith L. Noll
Union Trustee
Howard W. Rhinier
Union Trustee
Kenneth A. Ross
Employer Trustee
Daniel W. Schmidt
Employer Trustee
Keith A. Youst
Union Trustee
Joseph J. Samolewicz
Administrator
Martin L. Cullen
Assistant Administrator

Professional Advisors:
Beyer-Barber
Health & Welfare Fund Actuary & Consultant
Morgan Lewis
Legal Co-Counsel
Novak Francella, LLC
Certified Public Accountants
Summit Strategies
Investment Consultant
Stevens & Lee
Legal Co-Counsel

The Savitz Organization
Pension Fund Actuary & Consultant
Willig, Williams and Davidson
Legal Co-Counsel

Investment Managers for the
Central Pennsylvania Teamsters
Health and Welfare Fund:
Aronson+Johnson+Ortiz, LP
Causeway Capital Management, LLC
INTECH Investment Management, LLC
Rothschild Asset Mgt., Inc.
SEI Investments
Walter Scott & Partners, Ltd.

Investment Managers for the
Central Pennsylvania Teamsters
Pension Fund:
Aberdeen Asset Management, Inc.
Aronson+Johnson+Ortiz, LP
The Boston Company Asset Management, LLC
Causeway Capital Management, LLC
Income Research & Management
LSV Asset Management
Madison Square Investors
Mesirow Financial, Inc.
Oakbrook Investments
Post Advisory Group, LLC
Principal Financial Group
Prudential Insurance Company of America
Rothschild Asset Mgt., Inc.
State Street Global Advisors
Walter Scott & Partners, Ltd.
Western Asset
Westfield Capital Management Company, LLC

Important Information from the Fund Office

Fund Office Contact Information
Contact the Fund Office directly with any questions on Health and Welfare or Pension benefits. The Fund staff is available Monday through Friday from 7:30 a.m. to 4:00 p.m.

Telephone Numbers:

Health & Welfare
(610) 320-5500
Toll free in PA: 1-800-422-8330
Nationwide: 1-800-331-0420

Pension
(610) 320-5505
Toll free in PA: 1-800-343-0136
Nationwide: 1-800-331-0420

Reminder – Keep Your Information Current with the Fund Office
Please remember to keep your address, dependent and beneficiary information updated with the Funds. You can call or mail in address changes to the Fund. You can call the Fund offices or visit www.CentralPATeamsters.com to obtain beneficiary change forms to complete and send in to the Fund Office.

Note: The Fund Office has extended its hours on a trial basis from 7:30 a.m. to 5:00 p.m.

Visit Our Website at:
www.CentralPATeamsters.com