

Reading, Pennsylvania

October 2009

Central PA Teamsters Launches New Website

Be sure to visit the new and improved Central Pennsylvania Teamsters website at <u>www.CentralPATeamsters.com</u>.

The website has been updated to give Fund participants current information about their benefits in an easy-to-use format.

Some recent upgrades to the site include:

- Drop-down menus that make navigation of the site user-friendly.
- A "What's New" section on the front page that includes up-to-date Fund information and announcements that are updated regularly.
- The new Pension Web Portal page with a secure link that lets you view your Retirement Income Plan (RIP 1987 and RIP 2000) balance. Balances are updated monthly.

As always, you will find benefits descriptions, downloadable forms, FAQ's, provider network links, wellness information, and much more on the site.

Check back frequently for new information and updates.



2009 Flu Vaccine Update

The flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. Some people, such as older people, young children, and people with certain health conditions (such as asthma, diabetes or heart disease) are at high risk for serious flu complications.

The 2009/2010 flu season could be a particularly severe one. In addition to the seasonal flu that typically begins in October and peaks in January, the new H1N1 virus began infecting Americans this year during the spring, summer and has continued into the fall.

The seasonal flu vaccine, available in September, is not expected to pro-

tect against the H1N1 flu. The H1N1 flu vaccine is currently in clinical trials and is expected to be available in October or November. The Centers for Disease Control and Prevention's (CDC) Committee on Immunization Practices encourages individuals to get a seasonal flu vaccine as soon as it is available and the separate H1N1 vaccine as soon as it is offered.

High risk groups for the seasonal flu are:

- children age 6 months to 19 years,
- pregnant women,
- people 50 years of age and older,
- people of any age with certain chronic medical conditions,
- people who live in nursing home and other long term care facilities, (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 <u>www.CentralPATeamsters.com</u> (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 and/or bank name account changes, please notify the Pension Department 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 Department or visit www.CentralPATeamsters.com (click on "Pension" - "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.

2009 Flu Vaccine Update

Continued from Page 1

• people who live with or care for those at high risk for complications.

The CDC recommends that H1N1 vaccination efforts initially focus on five key populations. The CDC does not expect there will be a shortage of H1N1 vaccine, but availability and demand may be unpredictable. There is some possibility that the vaccine will initially be available in limited quantities. When the vaccine is first available, the CDC recommends that programs and providers try to vaccinate:

- pregnant women,
- people who live with or care for children younger than 6 months of age,
- health care and emergency medical personnel,

The IRS Wants Us To Remind You...

f you have qualified for and received the 65% subsidy for COBRA health insurance, you MUST notify the Fund if you become eligible for other group health coverage or Medicare.

As you may know from prior communication from the Fund, the American Recovery and Reinvestment Act of 2009 ("ARRA") provides a subsidy of 65% of the COBRA health insurance premium for employees (and eligible dependents) who are involuntarily terminated from September 30, 2008 to December 31, 2009. The subsidy requires only 35% of the premium to be paid for COBRA coverage for individuals, and their families, who have involuntarily lost their job and do not have coverage available elsewhere.

If you or a family member who has this subsidized COBRA coverage become eligible for other group health coverage or Medicare, the Fund must be notified IN WRITING of the "other coverage" and that the eligibility for subsidized COBRA coverage has

- people between the ages of 6 months through 24 years of age, and
- people from ages 25 through 64 years who are at higher risk for H1N1 because of chronic health disorders or compromised immune systems.

Once the demand for the priority groups has been met, the H1N1 vaccine will be offered to other groups.

Flu vaccines are a covered expense under the Central PA Teamsters Health and Welfare Fund under Active Plans: Plans 13, 14 and 16; and under Retired Plans: R-4, R-5 and R-7. Flu vaccines are paid in-network at 100% and out-of-network at the lesser of UCR or billed charges.

For more information about getting vaccinated for the two types of flu, contact your health practitioner. For updates on flu vaccine guidelines and availability, visit the CDC's website, www.cdc.gov.

ended. There was a Participant Notification form included in the initial COBRA packet you received from the Fund that can be used for this purpose. If you do not have the Participant Notification form, you may send a letter notifying the Fund that your eligibility for subsidized COBRA coverage has ended.

If you continue to receive the subsidy after you are eligible for other group health coverage, such as coverage from a new job or Medicare, you may be subject to the new IRC § 6720C penalty of 110% of the subsidy provided after you became eligible for the new coverage.

Taxpayers who fail to notify their plan that they are no longer eligible for the COBRA subsidy may selfreport that they are subject to the penalty by calling the IRS toll-free at 800-829-1040. In addition, taxpayers will need to notify their plan that they are no longer eligible for the COBRA premium subsidy.

Clarification of the Health and Welfare Fund's "Experimental" Exclusion for Phase III Clinical Trials for Certain Cancer Treatments

The Trustees have carefully considered a clarification of the Fund's policy of not providing benefits for experimental and investigational treatment. (See the Summary Plan Description or Plan Document for a complete description of this exclusion and the applicable definitions.) Subject to all of the existing Plan provisions, the Trustees will permit the Fund to provide for procedures that meet all of the following criteria. The Trustees will review Plan utilization under this clarification in July 2010.

In addition to all existing Plan provisions, the treatment will have to meet all the following criteria:

- (1) The clinical trial is a cancer care trial; and
- (2) The clinical trial is sponsored by the National Cancer Institute; and
- (3) The clinical trial is double blinded and randomized; and
- (4) The clinical trial is at Phase III (compares therapy that has demonstrated some effectiveness in earlier studies, that is Phase II studies, with the current standard therapy).

Treatment under Phase I or Phase II clinical trials will NOT be considered for payment.

If you have questions about whether your treatment for cancer may be covered under this revised policy, please contact the Fund office to discuss the specific details of your treatment.

Dental Implant Policy Clarification

s was previously described in the November 2008 issue of the *Guardian*, the Health and Welfare Fund has a dental implant policy that allows implants to be paid under the Fund's medical provisions under certain circumstances.

Please be advised that both dental <u>and</u> medical benefits are paid by Delta Dental in order to utilize network discounts on these services. The Health and Welfare Fund Office does not pay medical benefits for implant procedures.

The dental implant policy only applies to participants with dental coverage. If your plan does not offer dental coverage, you do not have coverage for dental implants.

Reminders from the Pension Department

- If you are going through a divorce and your attorney requests information regarding your pension benefits, please ask your attorney to submit a written request to the Pension Department. Phone requests will not be accepted.
- Please be sure to select a retirement date before you contact the Pension Fund to begin the application process. Your retirement must be the first day of a month.
- All pension documents must be signed by the participant unless the Pension Department has a Power of Attorney on file for the participant.
- Notarized forms-please note that the date that a participant signs the notarized form and the date the notary signs the form must be the same date. In the event the notarized form signature dates are different, the Pension Department will not accept the form and a new form will be sent to the participant.
- In most cases, you must terminate employment before benefits begin.

Moonlighting/Self-employment

he 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.

Control Ponnsylvania Teamsters Health and Welfare Fund Prescription Drug Benefits

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

If you are covered under Plan 13, R4 or R5 your prescription information is listed below.

Negative Formulary List*

Aciphex	Lexapro	Sarafem
Advicor	Lipitor	Sonata**
Allegra	Lunesta**	Sporanox
Altoprev	Luvox	Symbyax
Ambien**	Mevacor	Tagamet
Axid	Nexium	Tamiflu
Bextra	Paxil	Trepadone
Celebrex	Pepcid***	Trilipix
Celexa	Pexeva	Vioxx
Clarinex	Pravachol	Vytorin
Crestor	Prevacid	Xyzal
Cymbalta	Prilosec****	Zantac***
Daypro	Pristiq	Zegerid
Diflucan	Protonix	Zetia
Effexor	Prozac	Zocor
Kapidex	Relenza	Zoloft
Lamisil	Rozerem	

And All Injectables (excluding Insulin and Imitrex)
Effective November 1, 2009:
Edluar 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 overthe-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.

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 *If you are covered under Plan 14 or 16 your*

prescription information is listed below.

<u>Plan 14, 16 and R6</u> <u>Option Levels A, B & C</u> Negative Formulary List*

Aciphex	Lexapro	Sarafem
Advicor	Lipitor	Sonata**
Allegra	Lunesta**	Sporanox
Altoprev	Luvox	Symbyax
Ambien**	Mevacor	Tagamet
Axid	Nexium	Tamiflu
Bextra	Paxil	Trepadone
Celebrex	Pepcid***	Trilipix
Celexa	Pexeva	Vioxx
Clarinex	Pravachol	Vytorin
Crestor	Prevacid	Xyzal
Cymbalta	Prilosec****	Zantac***
Daypro	Pristiq	Zegerid
Diflucan	Protonix	Zetia
Effexor	Prozac	Zocor
Kapidex	Relenza	Zoloft
Lamisil	Rozerem	

And All Injectables (excluding Insulin and Imitrex)

Effective November 1, 2009:

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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.

MAIL ORDER COPAYMENTS

	Option A	Option B	Option C
Generi	c for up to a 90 da		
	\$15.00	\$30.00	\$30.00
Brand f	for up to a 90 day		
	\$30.00	\$40.00	\$60.00
Negativ	ve Formulary up t	to a 90 day	supply
	\$60.00	\$80.00	\$100.00
<u>RETA</u>	IL PHARMAC	<u>'Y COPAY</u>	<u>MENTS</u>
<u>RETA</u>		Y COPAY Option B	
	<u>Option A</u> c for up to a 34 da	Option B ay supply	Option C
	<u>Option A</u> c for up to a 34 da	Option B	
Generi	Option A c for up to a 34 da \$5.00 for up to a 34 day	Option B ay supply \$10.00 supply	<u>Option C</u> \$10.00
Generio	Option A c for up to a 34 da \$5.00 for up to a 34 day	Option B ay supply \$10.00	<u>Option C</u> \$10.00
Generio Brand f	Option A c for up to a 34 da \$5.00 for up to a 34 day	Option B ay supply \$10.00 supply \$20.00	<u>Option C</u> \$10.00 \$30.00

\$30.00 \$40.00 \$50.00

Prescription Plan Benefits Under Plan 13Y

If you are covered under Plan 13Y your prescription information is listed below.

<u>Negative Formulary List*</u>

Aciphex	Lexapro	Sarafem
Advicor	Lipitor	Sonata**
Allegra	Lunesta**	Sporanox
Altoprev	Luvox	Symbyax
Ambien**	Mevacor	Tagamet
Axid	Nexium	Tamiflu
Bextra	Paxil	Trepadone
Celebrex	Pepcid***	Trilipix
Celexa	Pexeva	Vioxx
Clarinex	Pravachol	Vytorin
Crestor	Prevacid	Xyzal
Cymbalta	Prilosec****	Zantac***
Daypro	Pristig	Zegerid
Diflucan	Protonix	Zetia
Effexor	Prozac	Zocor
Kapidex	Relenza	Zoloft
Lamisil	Rozerem	

And All Injectables (excluding Insulin and Imitrex)

Effective November 1, 2009: Edluar 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 overthe-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.

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

CREDITABLE COVERAGE NOTIFICATION

PLAN R4, PLAN R5, PLAN R7 AND PLAN R-765

Important Notice from

THE CENTRAL PENNSYLVANIA TEAMSTERS HEALTH & WELFARE FUND About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the Central Pennsylvania Teamsters Health & Welfare Fund ("Fund"). This information can help you decide whether you need to take action regarding joining a Medicare drug plan (also known as Medicare Part D). If you were covered for prescription drug benefits from the Fund last year, the Fund sent you a similar notice to this one.

NOTE: You are only eligible to elect Medicare prescription benefits if you are eligible to elect Medicare.

If you lose the Fund's coverage and you are eligible for Medicare coverage, you can get Medicare drug coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium. This coverage is separate from the coverage you have from the Fund.

The Fund, using the standards established by the federal government, has determined that the prescription drug coverage offered by the Fund is, on average for all plan participants, expected to pay out at least as much as standard Medicare prescription drug coverage pays. The Fund's prescription drug coverage is considered Creditable Coverage. Because your existing coverage is on average at least as good as standard Medicare prescription drug coverage and not pay a penalty of a higher Medicare Part D premium if you later decide to timely enroll in Medicare prescription drug coverage.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November 15th through December 31st.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you are considering electing Medicare Part D coverage, you should compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area. Keep in mind that this Fund provides you with medical benefits that are described in the next section. If you enroll in a Medicare prescription drug plan and you lose your coverage from the Fund (for example, if you drop your coverage under the Fund in order to enroll in a Medicare Part D plan), you and your eligible dependents will lose those other benefits in addition to your prescription coverage and will not be permitted to re-enroll under the Fund's coverage.

The Fund offers the following prescription benefits: PLAN R4, PLAN R5, PLAN R7 and PLAN R7-65 COVERAGE:

MAIL ORDER COPAYMENTS

\$15 Generic for up to a 90 day supply

\$30 Brand for up to a 90 day supply

\$60 Negative Formulary for 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 for up to a 34 day supply

This Fund also offers medical benefits:

Retiree Plans R4, R5, R7 and R7-65 provide benefits for hospitalization, physician office visits, physical therapy, surgical procedures, immunizations, outpatient diagnostics, major medical and certain other limited benefits. In addition to the benefits listed above, Plan R4 provides death benefits, mental health and substance abuse treatment benefits.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

If you don't join when you are first eligible, and don't have creditable prescription coverage, you may have to wait to join a Medicare drug plan and you may pay a higher premium if you join later. You may pay that higher premium for as long as you have Medicare prescription drug coverage if you join later. Be aware that if you drop or lose your coverage with the Fund and don't enroll in Medicare prescription drug coverage after your current coverage ends, you risk paying a higher premium to enroll in Medicare prescription drug coverage later. If there is a break in coverage of 63 days or longer of prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your monthly premium will go up at least 1% per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium will always be at least 19% higher than what many other people pay. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following November to enroll.

However, if you lose creditable prescription drug coverage, through no fault of your own you will be eligible for a two month Special Enrollment Period (SEP) to join a Part D plan. In addition, if you lose or decide to leave the Fund's coverage, you may be eligible to join a Part D plan at that time using an Employer Group Special Enrollment Period.

For more information about this notice or your current prescription drug coverage...

Contact the Fund's Prescription office at Toll Free In PA 1-800-422-8330 or Toll Free in USA 1-800-331-0420.

For more information about your options under Medicare prescription drug coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. For more information about Medicare prescription drug plans:

- Visit <u>www.medicare.gov</u>
- Call your State Health Insurance Assistance Program (see your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at <u>www.socialsecurity.gov</u>, or you can call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this notice. If you enroll in one of the new plans approved by Medicare which offers prescription drug coverage, you may be required to provide a copy of this notice when you join to show that you are not required to pay a higher premium amount.

Date: Name of Entity/Sender:
Contact – Position/Office: Address:
Telephone Number:

September 28, 2009 Central Pennsylvania Teamsters Health & Welfare Fund Prescription Department 1055 Spring Street, Wyomissing, PA 19610 Toll Free In PA 1-800-422-8330 Toll Free in USA 1-800-331-0420

CREDITABLE COVERAGE NOTIFICATION PLAN 13, PLAN 13Y, PLAN 14 AND PLAN 16 Important Notice from

THE GENTRAL PENNSYLVANIA TEAMSTERS HEALTH & WELFARE FUND About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the Central Pennsylvania Teamsters Health & Welfare Fund ("Fund"). This information can help you decide whether you need to take action regarding joining a Medicare drug plan (also known as Medicare Part D). If you were covered for prescription drug benefits from the Fund last year, the Fund sent you a similar notice to this one.

NOTE: You are only eligible to elect Medicare prescription benefits if you are eligible to elect Medicare.

If you lose the Fund's coverage and you are eligible for Medicare coverage, you can get Medicare coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium. This coverage is separate from the coverage you have from the Fund. The Fund, using the standards established by the federal government, has determined that the prescription drug coverage offered by the Fund is, on average for all plan participants, expected to pay out at least as much as standard Medicare prescription drug coverage pays. The **Fund's prescription drug coverage is considered Creditable Coverage.** Because your existing coverage is on average at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a penalty of a higher Medicare Part D premium if you later decide to timely enroll in Medicare prescription drug coverage.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November 15th through December 31st.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you are considering electing Medicare Part D coverage, you should compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area. Keep in mind that this Fund may provide you with medical, dental, vision, and other benefits that are described in the next section. If you enroll in a Medicare prescription drug plan and lose your coverage from the Fund (for example, if you drop your coverage under the Fund in order to take the Medicare Part D plan), you and your eligible dependents will also lose those other benefits in addition to your prescription coverage.

If you elect both Fund coverage and Medicare coverage and you have Fund coverage on account of your own active employment or on account of the active employment of your spouse or parent, the Fund will be the primary payor of benefits and Medicare will be the secondary payor of benefits. You will want to take a careful look at the Fund's coverage (including both the Fund's benefits and any payments you may make toward that coverage) when making your decision about whether to purchase a Medicare Part D plan.

The Fund offers the following prescription benefits: PLAN 13 PRESCRIPTION COVERAGE:

MAIL ORDER COPAYMENTS

\$15 Generic for up to a 90 day supply
\$30 Brand for up to a 90 day supply
\$60 Negative Formulary for 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 for up to a 34 day supply

PLAN 13Y PRESCRIPTION COVERAGE:

MAIL ORDER COPAYMENTS

\$30 Generic for up to a 90 day supply
\$60 Brand for up to a 90 day supply
\$100 Negative Formulary for 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 for up to a 34 day supply

PLAN 14 AND PLAN 16 PRESCRIPTION COVERAGE:

MAIL ORDER COPAYMENTS Option A	ption B	<u>Option C</u>
Generic for up to a 90 day supply		
â î î î î î î î î î î î î î î î î î î î	30.00	\$30.00
Brand for up to a 90 day supply		
\$30.00 \$	40.00	\$60.00
Negative Formulary for up to a 90 day su	vlaar	
\$60.00 \$		\$100.00

RETAIL PHARMACY COPAYMENTS Option A	<u>Option B</u>	<u>Option C</u>
Generic for up to a 34 day supply		
\$5.00	\$10.00	\$10.00
Brand for up to a 34 day supply		
\$15.00	\$20.00	\$30.00
Negative Formulary for up to a 34 days	supply	
\$30.00	\$ 40.00	\$50.00

This Fund also offers medical benefits:

Plans 13 and 13Y offers physician office visits, hospital benefits, inpatient benefits, physical therapy benefits, surgical benefits, prescription benefits, outpatient diagnostic benefits, dental/orthodontic benefits, hearing/ vision benefits, and mental illness/substance abuse benefits, as well as death and accidental death and dismemberment benefits and short-term disability benefits.

Plans 14 and 16 provide the following core benefits: hospital benefits, inpatient benefits, physical therapy benefits, surgical benefits, outpatient diagnostic benefits, transplant benefits, immunization and injection benefits and major medical benefits. Plans 14 and 16 also offer the following benefits on an optional basis, to be selected in collective bargaining and reflected in the contract with the employer: death and accidental death and dismemberment benefits, dental/orthodontic benefits, hearing/vision benefits, prescription benefits, mental illness/substance abuse benefits, physician office visits and short-term disability benefits.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

If you don't join when you are first eligible, and don't have creditable prescription coverage, you may have to wait to join a Medicare drug plan and you may pay a higher premium if you join later. You may pay that higher premium for as long as you have Medicare prescription drug coverage if you join later. Be aware that if you lose your coverage with the Fund and don't enroll in Medicare prescription drug coverage after your current coverage ends, you risk paying a higher premium to enroll in Medicare prescription drug coverage later. If there is a break in coverage of 63 days or longer of prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your monthly premium will go up at least 1% per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium will always be at least 19% higher than what many other people pay. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following November to enroll.

However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a two month Special Enrollment Period (SEP) to join a Part D plan. In addition, if you lose or decide to leave the Fund's coverage, you may be eligible to join a Part D plan at that time using an Employer Group Special Enrollment Period.

For more information about this notice or your current prescription drug coverage...

Contact the Fund's Prescription office at Toll Free In PA 1-800-422-8330 or Toll Free in USA 1-800-331-0420.

For more information about your options under Medicare prescription drug coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. For more information about Medicare prescription drug plans:

- Visit <u>www.medicare.gov</u>
- Call your State Health Insurance Assistance Program (see your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users

should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at <u>www.socialsecurity.gov</u>, or you can call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this notice. If you enroll in one of the new plans approved by Medicare which offers prescription drug coverage, you may be required to provide a copy of this notice when you join to show that you are not required to pay a higher premium amount.

Date: Name of Entity/Sender:	September 28, 2009 Central Pennsylvania Teamsters Health
Contact – Position/Office: Address: Telephone Number:	& Welfare Fund Prescription Department 1055 Spring Street, Wyomissing, PA 19610 Toll Free In PA 1-800-422-8330 Toll Free in USA 1-800-331-0420

Qualified Joint and Survivor Annuities

The Qualified Joint and 50% Survivor Annuity, the Qualified Joint and 75% Survivor Annuity and the Qualified Joint and 100% Survivor Annuity pension benefits are payable upon your death *only to the spouse you named at the time you completed your Retirement Application.* If your spouse at the time of retirement predeceases you, the monthly benefit does not continue to be paid to another beneficiary. If you and your spouse at the time of retirement become divorced, your spouse at the time of retirement would still receive the Qualified Joint and Survivor Annuity benefit you elected for the remainder of his or her lifetime upon your death.

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

"... the Fund will consider the payment of medical expenses only after benefits from the automobile insurance carrier have been exhausted." 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 <u>only</u> 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 <u>not</u> 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 as a result of 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 shortterm disability benefits <u>does not</u> apply to motorcycle accidents. There are <u>no</u> short-term disability benefits payable for injuries sustained as a result of a motorcycle accident.



The Fund intends to continue discussion of retirement planning with a series of articles under the heading of "Retirement 101" in future issues of **The Guardian**.

Applying for Your Retirement Benefits under the Central Pennsylvania Teamsters Pension Plan

When Should I Notify the Fund That I am Planning to Retire?

Contact the Pension Department 90 days prior to your intended retirement date to begin the retirement process. If you had time in another Teamsters Pension Fund and are requesting a reciprocal pension, please contact the Fund about 6 months prior to your intended retirement date. Your retirement date for purposes of receiving your pension benefits must be the first day of a month.

The Pension Department will send you a Request for Pension Application, as well as a Beneficiary Form and Declaration of Retirement Form. You will be asked to complete and return the request, along with copies of your and your spouse's birth certificates (if you are married) as well as a copy of your marriage certificate. If you are divorced from the spouse who is listed on your beneficiary information on file at the Fund Office, you will need to provide a divorce decree. If your spouse on record is deceased, a death certificate must be provided.

The Pension Fund may request a statement from your employer indicating your last day of work. The Fund considers your last day of work to be your last physical day of work and does not include vacation time. However, you will not be eligible to receive your Pension until you have actually terminated your employment. If you are working for a non-contributing employer, you will not need to terminate if your employment has been determined to be non-suspendible. You cannot continue working in the same trade, craft or industry, union or non-union, from which you are retiring and are being paid for more than 56 hours per month. For more information on working after retirement, refer to the Suspension of Benefits section in your Summary Plan Description or contact the Pension Department.

Once you have completed and returned the necessary information

requested by the Pension Department on your retirement application, the Pension Department will provide your benefit amounts and options to you.

What if I Had Time in Another Teamsters Fund?

If you have time in another Teamsters pension fund or funds besides the Central Pennsylvania Teamsters, you will be asked to provide the applicable Teamsters Local Number and/or Teamsters Fund and your approximate dates of employment. The Central PA Teamsters Pension Fund needs this information in order to communicate with the other fund(s) to see if you qualify for a reciprocal pension. You should also contact the other fund(s).

Please remember that, if you had time in another Teamsters Pension Fund and are requesting a reciprocal pension, please contact the Fund about 6 months prior to your intended retirement date.

Can I Withdraw My Pension for Any Reason Prior to My Retirement Date?

You cannot withdraw your pension for any reason prior to your retirement date. There is one exception: you must begin receiving the minimum required amount from the Plan if you continue working beyond age 70½. In this case, your retirement benefit will begin to be paid to you no later than the April 1 of the calendar year following the calendar year in which you reach age 70½.

September 2009 Retirement Income Plan (RIP) Returns

The following are approximate net returns for the Central PA Teamsters RIP 1987 and RIP 2000 retirement plans for the nine month period ending September 30, 2009. The net returns equal gross investment returns less investment and administrative expenses plus the reallocation of forfeited account balances from terminated non-vested participants who incurred a 5-year break in service.

<u>Plan</u> RIP 1987 RIP 2000 Approximate Net Return +16.6% +12.8%

Current market conditions are being monitored closely by the Board of Trustees and Fund Office staff. For updates on investment returns, visit the Central Pennsylvania Teamsters website, <u>www.CentralPATeamsters.com</u>. Click on Pension Fund and then "Reports and Notices."



Healthy Living

Sleep Can Affect Diabetes Odds

People can help lower their risk of developing type 2 diabetes with a good night's sleep, according to a study of 1455 individuals. Patients averaging less than six hours of sleep per night during the week over a number of years had nearly five times the chance of developing diabetes, compared with

individuals who averaged six to eight hours per sleep per night. The study, in which participants reported on their sleep habits, compared fasting glucose levels over a six-year period. The researchers found no major difference in fasting glucose levels or the odds of developing type 2 diabetes between those who averaged six to eight hours of shut-eye weeknights and those who averaged more than eight hours a night. The findings were recently presented at the American Heart Association meeting.

> Source: Pharmaceutical Update, General Prescription Programs, May 2009

Eye Health & Wellness Information Added to the Central PA Teamsters Wellness Website

Did you know that a thorough eve exam can reveal the very first indicators of a number of ocular and systemic diseases? The list includes diabetes, glaucoma, macular degeneration, cataracts, and many more. It is possible for someone to have the beginnings of one of those conditions and not even know it. Too often the results are irreversible vision loss or even blindness.

The Central PA Teamsters Health and Welfare Fund has recently added an Eye Health & Wellness feature to its website. You can access this information by visiting www.CentralPATeamsters.com. Click on the Health and Welfare section and select Wellness Links/ Davis Vision Eye Health & Wellness.

You will find information on eye health conditions including signs, symptoms, risk factors, and treatment summaries as well information on providers who perform routine eve exams and links to additional eye health and related medical web sites on the Eve Health and Wellness site.

Retirees Approved For Pensions June through August 2009

For the month of June 2009

Employer

Local

Name AMBROSE, JR., PAUL ANNUNZIATO, ANTHONY M. AUSTIN, NEIL R. BENNETT, JR., WARD R. **BRUGGER, JEFFREY** CARE, EVÉRETT J. CHARLES, PETER COLE, BONNIE L. CONRAD, FRANK A. COOK, ROBERT DAUBERT, WALTER DAVIS, DIANE DEUTSCH, PETER M. DEZURA, RICHARD J. DIBILIO, MICHAEL A. **DUNLEAVY, STEPHEN F.** EBINGER, WILLIAM G. ECKERT, STANLEY EMIG, BARRY E. EVANS, THERESA FICK, LEROY G. FOX, LLOYD FREY, ROBERT W. GEIB, IRVIN G. **GOODLING, STEVEN GRUMBLING, CHARLES** HARTUNG, RONALD HESKETT, DANIEL J. HESS, CHRISTINE L. HIGH, GALEN HILL, ROBERT J. JACOBS, DONALD KEENEY, RUTH A.

ARKANŠAS BEST FREIGHT SYS., INC. 773 229 CONSOLIDATED FREIGHTWAYS 776 CONSOLIDATED FREIGHTWAYS 764 **CENTRE CONCRETE COMPANY** 773 UNITED PARCEL SERVICE, INC. JONES MOTOR CO., INC. 429 HARPER COLLINS PUBLISHERS, INC. 229 229 TOPPS CHEWING GUM, INC. 771 PENNSY SUPPLY, INC. 229 **C&S WHOLESALE GROCERS** YRC WORLDWIDE 229 229 **GENL DRIVERS & HELPERS** 429 CAROLINA FREIGHT CARRIERS CORP. STROEHMANN BAKERIES L. C. 429 D F BAST, INC. USF HOLLAND, INC. 773 401 429 PACIFIC INTERMOUNTAIN EXP. CO. 776 YRC WORLDWIDE BOARD OF COMMISSIONERS 776 **C&S WHOLESALE GROCERS** 229 429 BERKS PRODUCTS CORP. 429 RDG COCA COLA BOTTLING WORKS 773 R & G AIR FREIGHT, INC. 771 YRC WORLDWIDE 776 YRC WORLDWIDE ARKANSAS BEST FREIGHT SYS., INC. 776 229 YRC WORLDWIDE 429 ROADWAY EXPRESS, INC. 401 WISE FOODS 771 YRC WORLDWIDE YRC WORLDWIDE 229 776 YRC WORLDWIDE

ASSOCIATED WHOLESALERS, INC. 776

For the	mon	th of June 2009
Name	Local	Employer
KEIM-MURRY, MAURITIA	771	YELLOW FREIGHT SYSTEM,
KIMLER, ARTHUR	773	YRC WORLDWIDE
KNEPP, THOMAS RAY	771	MILLER & HARTMAN, INC.
LUNNEY, JR., JOHN J.	401	NORTH PENN TRANSFER, II
MAY, SR., ROBERT T.	773	SILVER LINES, INC.
MCGUIRE, NORMAN	771	YRC WORLDWIDE
MEALS, ROY J.	776	UE&C-CATALYTIC
MELDRUM, DAVID LINUS	776	ARKANSAS BEST FREIGHT S
MILLER, DONALD L.	429	BERKS PRODUCTS CORP.
MURPHY, STEPHEN	771	YRC WORLDWIDE
NEVEL, CLAYTON	401	WISE FOODS
NOLAN, JOHN C.	229	ROADWAY EXPRESS, INC.
OXENREIDER, JR., ELWOOD	H. 429	ASSOCIATED WHOLESALER
PAZDZIORKO, RONALD J.	401	NATIVE TEXTILES
PECK, LARRY	776	USF RED STAR
PERO, ANTHONY	401	UNITED PARCEL SERVICE, I
POWELL, JOSEPH H.	229	SUPER MARKET SERVICE C
RASNAKE, SAMUEL L.	229	ROADWAY EXPRESS, INC.
REICHERT, DONALD E.	771	MILLER & HARTMAN, INC.
RICHARDS, JR., JACK C.	776	WILSON FREIGHT COMPANY
RITCHIE, BARRY L.	771	YELLOW FREIGHT SYSTEM,
ROSADO, JOHN L.	429	E J BRENEMAN L.P.
SALT, DOREEN A.	229	CONSOLIDATED FREIGHTW
SHAFFER, HARRY	776	CONSOLIDATED FREIGHTW
SHEARER, PERRY E.	776	UNITED PARCEL SERVICE, I
SHOOK, JR., PAUL E.	229	ROADWAY EXPRESS, INC.
SHUGHART, STANLEY L.	429	JONES MOTOR CO., INC.
SIZER, KENNETH E.	776	NATIONS WAY TRANSPORT
SNYDER, GERALD L.	764	INTERSTATE MTR FREIGHT
STECKER, JR., HERBERT	229	ROADWAY EXPRESS, INC.
STROHL, WILLIAM R.	773	W S REICHENBACH & SON,
SWARTZ, CHARLES E.	776	PRESTON TRUCKING CO., I
THORNTON, HERMAN L.	771	ENERGY FLEET RESOURCES

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l	Employer
l	YELLOW FREIGHT SYSTEM, INC.
3	YRC WORLDWIDE
l	MILLER & HARTMAN, INC.
l	NORTH PENN TRANSFER, INC.
3	SILVER LINES, INC.
l	YRC WORLDWIDE
5	UE&C-CATALYTIC
5	ARKANSAS BEST FREIGHT SYS., INC.
)	BERKS PRODUCTS CORP.
l	YRC WORLDWIDE
l	WISE FOODS
)	ROADWAY EXPRESS, INC.
)	ASSOCIATED WHOLESALERS, INC.
	NATIVE TEXTILES
5	USF RED STAR
l	UNITED PARCEL SERVICE, INC.
)	SUPER MARKET SERVICE CORP.
)	ROADWAY EXPRESS, INC.
l	MILLER & HARTMAN, INC.
5	WILSON FREIGHT COMPANY
l	YELLOW FREIGHT SYSTEM, INC.
)	E J BRENEMAN L.P.
)	CONSOLIDATED FREIGHTWAYS
5	CONSOLIDATED FREIGHTWAYS
5	UNITED PARCEL SERVICE, INC.
	ROADWAY EXPRESS, INC.
)	JONES MOTOR CO., INC.
5	NATIONS WAY TRANSPORT SERVICES
ŀ	INTERSTATE MTR FREIGHT SYS., INC.
)	ROADWAY EXPRESS, INC.
3	W S REICHENBACH & SON, INC.
6	PRESTON TRUCKING CO., INC.
l	ENERGY FLEET RESOURCES, INC.

TRUPP, RONALD E. VARNER, GERALD VILARDO, BARRY J. VILARDO. PAULETTE P. WALTERS, RICHARD F. WATSON. FREDRICK WILDE, JOHN WISE, DARLENE L. WISE, JR, JACOB YALE, LAURA ZERBE, ROGER W.

429 D J WITMAN OIL COMPANY YELLOW FREIGHT SYSTEM, INC. 771 429 CENTRAL DOOR & PLYWOOD CO. 429 BRANCH MOTOR EXPRESS CO. YRC WORLDWIDE 776 771 YRC WORLDWIDE YRC WORLDWIDE 229 ROADWAY EXPRESS, INC. 229 776 YRC WORLDWIDE UNITED PARCEL SERVICE, INC. 229 429 COTT BEVERAGES WYOMISSING, INC.

For the month of July 2009

Name ADAMS, BENJAMIN H. ANDERSON, ROBERT L. BOND, JAMES EDWARD BOND, WALTER J. **BROWNE, DAVID** CARL, MILTON J. CHEPALONIS, NELSON CHOMO, JOSEPH J. CIOLEK, RONALD F. COCKLEY, RANDALL L. COELLO, CARLOS H. COLBERT, JOSEPH CONCORDIA, JR., DANIEL COOK, SR., VICTOR C. CULVER, LORENZO DAVISON, JOHN F. DEARDORFF, JERRY DUNHAM, RONALD G. EARLLEY, MICHAEL V. ERB, SR., ROBERT E. FLOYD, MICHAEL FREDERICK, KENNETH A. FRITZ, KERRY D. FRYMOYER, ELSIE M. GARD, FRANK GAUMER, BRUCE C. GENSEL, DENNIS GEORGE. JOHN GOOD, DAVID W. GOODLING, DONALD GULDIN, JR., JESSE G. HAINES II, WILLIAM HEEFNER, JEFFREY L. HENRY, WILLIAM S. JONES, THOMAS M. KEATING, THOMAS S. KIEFFER, SR., DAVID P. KROUT. JR., EDWIN D. KYLE, DAVID R. LATWINAS, EDWARD L. MCANDREW, MARIAN MCCLOSKEY, CHARLES MCKINLEY, DALE D. MILLER, JERRY MONEK, JEFFREY R. NEWHARD, SR., ROBERT W. PALUZZI, JOHN REBER, RONALD P. RHOADS, BARRY RICHARDSON, JASON ROBERTS, JAMES E. ROEDER, BRUCE **ROSE I, THOMAS DEWEY** SAGER, MARIANNE SANDRIDGE, RODGER O. SASSO, RONALD SENSENIG, JAY R. SHULL, SR., RICHARD K. SMITH, HARVEY G. SMITH, RICHARD J. SOWERS, CARL CONRAD SPRENKLE, JR., DALE R. STEGMAIER, WILLIAM T.

Local Employer **CONSOLIDATED FREIGHTWAYS** 229 429 GOODMAN VENDING SERVICE 229 YRC WORLDWIDE 229 ROADWAY EXPRESS, INC. 999 ALLIED SYSTEMS LTD 773 LEVEL LINE PENN-EAST, INC. 401 SANTARELLI VIBRATED BLK CO. LLC 401 SCHULTZ'S, INC. 229 TOPPS CHEWING GUM, INC. 776 CONSOLIDATED FREIGHTWAYS 229 YRC WORLDWIDE YRC WORLDWIDE 776 429 BRENNTAG NORTHEAST, INC. PILOT FREIGHT CARRIERS, INC. 776 773 YELLOW FREIGHT SYSTEM, INC. 771 JOHN S. EWELL, INC. YRC WORLDWIDE 776 CONSOLIDATED FREIGHTWAYS 776 TOPPS CHEWING GUM, INC. 229 429 ARKEMA, INC. RYDER TRUCK RENTAL OF PA. INC. 776 ASSOCIATED WHOLESALERS, INC. 429 776 **USF RED STAR** COTT BEVERAGES WYOMISSING, INC. 429 771 YRC WORLDWIDE WELCO/CGI 773 401 SHAWNEE READY MIX CONCRETE CO. TOPPS CHEWING GUM, INC. 229 764 **B & D TRANSFER** 776 ROADWAY EXPRESS, INC. ROADWAY EXPRESS, INC. 229 773 YRC WORLDWIDE USF HOLLAND, INC. 773 MYERS MEN, INC. 773 429 PENSKE LEASING, INC. 776 PRESTON TRUCKING CO., INC. 429 LUDENS INCORPORATED 776 WALTER W ZEIGLERS SONS, INC. WINDSOR SERVICE, INC. 429 MATLACK, INC., TERMINAL 5 HARPER COLLINS PUBLISHERS, INC. 312 229 776 YRC WORLDWIDE FLEMING COMPANIES, INC. 776 776 YORK COUNTY TRANSP. AUTHORITY ROADWAY EXPRESS, INC. 229 PENSKE TRUCK LEASING CO. LP 773 229 YRC WORLDWIDE 429 SUPERVALU, INC. 429 UNITED PARCEL SERVICE, INC. YRC WORLDWIDE 771 FRIEDMANS EXPRESS, INC. 401 773 YRC WORLDWIDE YELLOW FREIGHT SYSTEM, INC. 771 GALLI READY-MIX CONCRETE CO. 401 COTT BEVERAGES WYOMISSING, INC. 429 YRC WORLDWIDE 776 JOHN S. EWELL, INC. 771 **ROADWAY EXPRESS, INC.** 776 429 ROADWAY EXPRESS, INC. 229 YRC WORLDWIDE

For the month of July 2009

<u>Name</u>	<u>Local</u>	Employer
SWIGART, DAVID W.	229	YRC WORLDWIDE
TEEL, RONALD J.	229	NEW PENN MOTOR EXPRESS, INC.
TICKOWSKI, ANN	229	TOPPS CHEWING GUM, INC.
VOGEL, JR., PAUL E.	429	COTT BEVERAGES WYOMISSING, INC.
WEISS, ROBERT	771	YRC WORLDWIDE
WILEY, PATRICK	776	YRC WORLDWIDE
WILLIAMS, WAYNE C.	401	ACME MARKETS, INC.
WILSON, JOAN M.	764	UNITED PARCEL SERVICE, INC.
WINISKO, JR., LEO	429	KANE STEEL COMPANY
WISE, DARLENE	229	ROADWAY EXPRESS, INC.
YERGEY, PAUL R.	773	ARAMARK SERVICES
YONAI, JOHN P.	764	COOPER-JARRETT, INC.

For the month of August 2009

Local <u>Name</u> **ABERS**, WILLIAM BENNICOFF, FRANCIS J. BENZ, JR., JOSEPH E. BLY, JOSEPH A. **BORRELI, LIONEL** COALSON, SHARRELL COOPER, WILLIAM H. COPE, JR., JAMES A. CURRAN, JAMES DELRE, JR., VINCENT C. DOLOGITE, JR., NICHOLAS M. DORAN, JR., JOHN J. ESHLEMAN, JR., JOHN D. FISHER, BERNARD FORD, BARRY L GALLIMORE, JR., LEE R. HARRIS, WILLIE JAMES HECKMAN, STANLEY HELLER, JR., AROLL G. HORNICK, JR., JOHN P. HUNSINGER, HAROLYN A. IRICK, GARY I. JACKSON, LILLIAN JENKS, RÍCHARD KIDD, ALBERT KORNAFEL, JR., MICHAEL LAPE, LARRY L. LENDO, JOAN LINCH, CHARMAINE L. LOEBSACK, WARREN R. LUCAS, ALLEN R. MCWILLIAMS, JOHN MILLER, KARL L. MORRIS, ROBERT C. **OLENICK, EDWARD** PARK, RICHARD L. PEARSALL, THOMAS RAMIREZ, HECTOR REMALY, JAMES W. ROSE, CLYDE R. RUCH, CARL SCHREINER, JOHN R. SHIMKUS, ROBERT J. SMITH, JAMES SMITH, RICHARD C. SMUCKER, MICHAEL E. SNYDER, WILLIAM B. SORBER, DONALD W. STAMBAUGH, JR., IRVIN E. STONER, EDWARD L. STOYER, JOSEPH C. SUMMERS, JR., SHERWOOD T. 312 VAZQUEZ, ROLANDO VIRTUE, DANIEL WOLF. JAMES R. WOODWARD, MICHAEL J. WRIGHT, JR., ROBERT E. YUHASZ, STEPHEN M.

Employer **UNITED PARCEL SERVICE, INC.** 764 BERKS PRODUCTS CORPÓRATION 773 PLYMOUTH ROCK TRANSP. CORP. 429 401 ACME MARKETS, INC. PRESTON TRUCKING CO., INC. 776 771 YRC WORLDWIDE WILSBACH DISTRIBUTORS, INC. 776 773 ATLANTIC TRANSPORT CO. 771 YRC WORLDWIDE **ONE SOURCE** 773 773 WELCO/CGI ASHLAND CHEMICAL COMPANY 773 YELLOW FREIGHT SYSTEM, INC. 771 229 YRC WORLDWIDE YELLOW FREIGHT SYSTEM, INC. 771 776 CONSOLIDATED FREIGHTWAYS CAROLINA FREIGHT CARRIERS CORP. 776 773 YRC WORLDWIDE 773 EASTERN INDUSTRIES, INC. ROADWAY EXPRESS, INC. 229 429 BOYERTOWN AUTO BODY WORKS, INC. 429 PRESTON TRUCKING CO., INC. 429 BOYERTOWN AUTO BODY WORKS, INC. 776 YRC WORLDWIDE CINTAS CORPORATION 773 PRAXAIR DIST. MID-ATLANTIC LLC ASSOCIATED WHOLESALERS, INC. 773 429 429 BERKS PRODUCTS CORP. 776 FLEMING COMPANIES, INC. 773 SCHWERMAN TRUCKING CO. ARKANSAS BEST FREIGHT SYS., INC. 776 YRC WORLDWIDE 773 776 HALLS MOTOR TRANSIT CO. UNITED PARCEL SERVICE, INC. 764 773 YRC WORLDWIDE CONSOLIDATED FREIGHTWAYS 229 771 YRC WORLDWIDE **ONE SOURCE** 773 DEDICATED DELIVERY SERVICE, INC. 773 429 ASSOCIATED WHOLESALERS, INC. YRC WORLDWIDE 771 BEAR DISTRIBUTING CO., INC. 771 229 HARPER COLLINS PUBLISHERS, INC. 229 YRC WORLDWIDE 229 ROADWAY EXPRESS, INC. 771 YELLOW FREIGHT SYSTEM, INC. 776 USF HOLLAND, INC. 771 YRC WORLDWIDE LIQUID CARBONIC SPEC. GAS CORP. 776 CAROLINA FREIGHT CARRIERS CORP. 776 429 POMEROYS, INC. MATLACK, INC., TERMINAL 5 773 **ONE SOURCE TEAMSTERS LOCAL UNION 776** 776 YELLOW FREIGHT SYSTEM. INC. 771 M & J BEVERAGE, INC. 773 776 CONSOLIDATED FREIGHTWAYS **CLOVER FARMS DAIRY** 429

PRESTON TRUCKING CO., INC.

YORK CONCRETE CO.

ROADWAY EXPRESS, INC.

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Central PA Teamsters P.O. Box 15223 Reading, PA 19612-5223 **Return Service Requested**

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 <u>www.CentralPATeamsters.com</u> 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

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

Mark Johnson Employer Trustee Keith L. Noll Union Trustee

Howard W. Rhinier Union Trustee

Michael P. Rys Union Trustee

Daniel W. Schmidt Employer 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

<u>Investment Managers for the</u> <u>Central Pennsylvania Teamsters</u> <u>Health and Welfare Fund:</u>

Aronson+Johnson+Ortiz, LP Causeway Capital Management, LLC INTECH Investment Management, LLC Rothschild Asset Mgt., Inc. SEI Investments Walter Scott & Partners, Ltd.

<u>Investment Managers for the</u> Central Pennsylvania Teamsters Pension Fund:

Aberdeen Asset Management, Inc. Aronson+Johnson+Ortiz, LP The Boston Company Asset Management, LLC **Causeway Capital Management, LLC DSI International Mangement, Inc. INTECH Investment Management, LLC** LSV Asset Management Mesirow Financial, Inc. 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