



Central Pennsylvania Teamsters

GUARDIAN

Health and Welfare/Pension Guardian Newsletter



Reading, Pennsylvania



October 2012



Healthy Living

Want to Quit Smoking? Need Help?

Are you thinking about quitting smoking? Currently trying to quit? Are you looking for some support to help you through the rough spots? The

Health & Welfare – Wellness Links section of the Central PA Teamsters Health & Welfare and Pension Fund website, www.CentralPATeamsters.com, has valuable information to help you.

You can link directly from the Fund website to smokefree.gov to get support and information on issues relating to quitting smoking. You can also access live help from the National Cancer Institute through text messaging and phone, download the QuitGuide mobile app, set up a “Craving Journal,” or get information on medications that can help you quit.

Smokefree.gov is available free of charge to anyone who wants to quit smoking. Take the first step by visiting smokefree.gov today to see how it can help you!

Flu Season is Coming. Get Your Flu Shot!

With flu season about to arrive and incidences of Swine Flu appearing throughout the country, it's important that you get a flu shot this season.

The Fund's Health and Welfare plans cover flu shots under the *Medical Plan* (not through the Prescription Plan.) *If you get your flu shot at a pharmacy, you must pay for your flu shot at the time you receive it, and submit your receipt to the Health and Welfare Fund for reimbursement.*

If you receive your flu shot at an in-network physician's office, the physician's office will generally submit your flu shot claim to the Health and Welfare Fund for payment. ■



Financial Fitness

Identifying financial goals

You probably won't achieve every financial goal. But you can go further than you think.

What are your top three financial objectives?

Most people, when asked that question, answer with general goals, such as achieving financial security.

The fact is, many of us haven't thought much about which financial objectives really matter most. Instead, we muddle through our financial lives, spending to meet the day-to-day expenses that dominate our attention.

That approach risks leaving your most important objectives unfulfilled.

That's what this lesson is all about: helping you identify the financial goals that matter most to you and making sure they happen.

That's not as easy as it sounds, since financial goals continually collide with one another. Paying for a child's braces may rob money that would otherwise go into his college fund, for example. And saving effectively for your kids'

(Continued on Page 2)

Financial Fitness

(Continued from Page 1)

college can wipe out any hope of putting aside adequate money for your own retirement.

That's why to get what you want most you must 1) decide which goals will take priority and 2) work toward the lesser goals only after the really important ones are well provided for.

Fortunately, you have at least one ally in meeting your long-range goals: time. That's an advantage because of the power of compounding – the fact that even a small amount of money can earn interest, and that each year that interest gets applied to a growing sum of money.

Suppose, for example, you put aside only the cost of a single candy bar – about 65 cents – each day. Invested in a tax-deferred account paying 5% a year compounded monthly, that string of savings would grow to \$3,073 in just

10 years and to \$16,470 in 30 years.

For other examples of the way that money can grow over time, try CNNMoney.com's Savings Calculator.

To put the power of compounding on your side, you have to start early. Suppose there are two siblings who both invest in Individual Retirement Accounts earning 8% a year.

The sister starts at age 20, and for the next 10 years she stuffs \$3,000 a year into her IRA. At age 30, though, she stops and never adds another penny.

Her brother waits until age 30 to get started, but then dutifully salts away \$3,000 a year for the rest of his life. Which sibling do you think will be better off?

In this case, the early bird will always be ahead. The sister reaches age 65 with more than \$642,000, while her brother will have a little under \$518,000 – about 20% less.

Of course, it's far better to start early AND keep it up. If both siblings started

saving \$3,000 a year in an IRA at 20, and kept it up until retirement, each would end up with nearly \$1.2 million.

The point is that to put time on your side, you need to decide early which of the many possible financial goals are really worth pursuing – and start working toward them.

To get started, make a list of all the things that you'd need to feel secure, happy or fulfilled.

Here are some common goals you may want to consider:

- Accumulating enough savings to handle an emergency situation
- Buying a house
- Getting out of debt – and staying out
- Ensuring that your parents are comfortable and well taken care of in their old age
- Paying for your children's college education
- Amassing enough wealth to retire comfortably

Source: CNNMoney.com ■



The following are some reminders from the Pension Fund regarding direct deposit, completing pension documents, and completing Designation of Beneficiary Forms.

Direct Deposit

You may request that your monthly Pension check(s) be directly deposited into your bank account. Direct Deposit Authorization forms are available by calling the Pension Fund or by downloading a copy from the Fund website (Pension-Forms-Direct Deposit Form).

If you are electing to have your monthly check(s) sent to the bank, your FIRST (or next if you already receive

checks) monthly check will be sent to your home address. It takes 30 days for direct deposit to go into effect.

Your check(s) will be deposited into your bank account on the *first business day of each month*. Business days do not include weekends and bank holidays.

Correct Signatures Required on Pension Documents

The Fund requires that you use your legal name and signature when completing and signing pension documents. Please do not use nicknames. All documents must be signed by the actual participant unless otherwise noted.

Completing Beneficiary Forms

Please be sure to keep your beneficiary designation form up to date with the Fund. If you get married or become widowed or divorced, please remember to update your beneficiary information.

Please be sure to complete the applicable sections on both sides of the form.

If you are married and wish to designate a beneficiary or beneficiaries other than your spouse, your spouse must complete Section D and sign in the presence of a Notary Public.

If you have any questions about completing the Designation of Beneficiary Form, please contact the Pension Fund. ■

Central Pennsylvania Teamsters Health and Welfare Fund Prescription Drug Benefits

Negative Formulary List*

| | | | | |
|-----------|------------|------------------|-----------|-----------|
| Aciphex | Dexilant | Lunesta** | Protonix | Trilipix |
| Advicor | Diflucan | Luvox | Prozac | Valturna |
| Altoprev | Edluar | Mevacor | Relenza | Victrelis |
| Ambien** | Effexor | Nexium | Rozerem | Vimovo |
| Axid | Fibricor | Olepto | Sarafem | Vioxx |
| Bextra | Gilenya | Oravig | Silenor | Vytorin |
| Cambia | Incivek | Paxil | Simcor | Xyzal |
| Celebrex | Intermezzo | Pepcid*** | Sonata** | Zantac*** |
| Celexa | Juvisync | Pexeva | Sporanox | Zegerid |
| Clarinox | Lamisil | Pravachol | Symbyax | Zetia |
| Crestor | Latuda | Prevacid | Tagamet | Zipsor |
| Cymbalta | Lexapro | Prevacid-Solutab | Tamiflu | Zocor |
| Daypro | Lipitor | Prilosec**** | Tekamlo | Zoloft |
| Deprizine | Livalo | Pristiq | Trepadone | Zolpimist |

And All Injectables (excluding Insulin and Imitrex)

*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

MAIL ORDER COPAYMENTS

| | Option A | Option B | Option C |
|--|----------|----------|----------|
| Generic for up to a 90 day supply | \$15.00 | \$30.00 | \$30.00 |
| Brand for up to a 90 day supply | \$30.00 | \$40.00 | \$60.00 |
| Negative Formulary up to a 90 day supply | \$60.00 | \$80.00 | \$100.00 |

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

RETAIL PHARMACY COPAYMENTS

| | Option A | Option B | Option C |
|--|----------|----------|----------|
| 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 up to a 34 day supply | \$30.00 | \$40.00 | \$50.00 |

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

PLAN 13, PLAN 13Y, PLAN 14, and PLAN 16*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 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 October 15th through December 7th.

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 | Option B | Option C |
|--|----------|----------|----------|
| Generic for up to a 90 day supply | \$15.00 | \$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 supply | \$60.00 | \$80.00 | \$100.00 |

RETAIL PHARMACY COPAYMENTS

| | Option A | Option B | Option C |
|--|----------|----------|----------|
| 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 day supply | \$30.00 | \$40.00 | \$ 50.00 |

This Fund also offers medical benefits:

Plan 13 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.

Plan 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.

Plans 14 and 16 provide the following core benefits: physician office visits, 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, 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 www.medicare.gov
- 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 www.socialsecurity.gov, 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: October 1, 2012
Name of Entity/Sender: Central Pennsylvania Teamsters Health & Welfare Fund
Contact – Position/Office: Prescription Department
Address: 1055 Spring Street,
Wyomissing, PA 19610
Telephone Number: Toll Free In PA 1-800-422-8330
Toll Free in USA 1-800-331-0420 ■

CREDITABLE COVERAGE NOTIFICATION

PLAN R4, PLAN R5, PLAN R7, and PLAN R7-65

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, 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 October 15th through December 7th.

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 www.medicare.gov
- 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 www.socialsecurity.gov, 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: October 1, 2012
Name of Entity/Sender: Central Pennsylvania Teamsters Health & Welfare Fund
Contact – Position/Office: Prescription Department
Address: 1055 Spring Street,
Wyomissing, PA 19610
Telephone Number: Toll Free In PA 1-800-422-8330
Toll Free in USA 1-800-331-0420 ■

Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your State may have a premium assistance program that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for these programs, but also have access to health insurance through their employer. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs,

you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you are not already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance.** If you have questions about enrolling in your employer plan, you can contact the Department of Labor electronically at www.askebsa.dol.gov or by calling toll-free 1-866-444-EBSA (3272).

If you live in one of the following States listed on page 8 of this newsletter, you may be eligible for assistance paying your employer health plan premiums. The following list of States is current as of July 31, 2012. You should contact your State for further information on eligibility.

ALABAMA – Medicaid

Website: <http://www.medicaid.alabama.gov>
Phone: 1-855-692-5447

ALASKA – Medicaid

Website: <http://health.hss.state.ak.us/dpa/programs/medicaid/>
Phone (Outside of Anchorage): 1-888-318-8890
Phone (Anchorage): 907-269-6529

ARIZONA – CHIP

Website: <http://www.azahcccs.gov/applicants>
Phone (Outside of Maricopa County): 1-877-764-5437
Phone (Maricopa County): 602-417-5437

COLORADO – Medicaid

Medicaid Website: <http://www.colorado.gov/>
Medicaid Phone (In state): 1-800-866-3513
Medicaid Phone (Out of state): 1-800-221-3943

FLORIDA – Medicaid

Website: <https://www.flmedicaidprecovery.com/>
Phone: 1-877-357-3268

GEORGIA – Medicaid

Website: <http://dch.georgia.gov/>
 Click on Programs, then Medicaid, then Health Insurance Premium Payment (HIPP)
Phone: 1-800-869-1150

IDAHO – Medicaid and CHIP

Medicaid Website: www.accessstohealthinsurance.idaho.gov
Medicaid Phone: 1-800-926-2588
CHIP Website: www.medicaid.idaho.gov
CHIP Phone: 1-800-926-2588

INDIANA – Medicaid

Website: <http://www.in.gov/fssa>
Phone: 1-800-889-9949

IOWA – Medicaid

Website: www.dhs.state.ia.us/hipp/
Phone: 1-888-346-9562

KANSAS – Medicaid

Website: <http://www.kdheks.gov/hcf>
Phone: 1-800-792-4884

KENTUCKY – Medicaid

Website: <http://chfs.ky.gov/dms/default.htm>
Phone: 1-800-635-2570

LOUISIANA – Medicaid

Website: <http://www.lahipp.dhh.louisiana.gov>
Phone: 1-888-695-2447

MAINE – Medicaid

Website: <http://www.maine.gov/dhhs/OIAS/publicassistance/index.html>
Phone: 1-800-977-6740 • TTY 1-800-977-6741

MASSACHUSETTS – Medicaid and CHIP

Website: <http://www.mass.gov/MassHealth>
Phone: 1-800-462-1120

MINNESOTA – Medicaid

Website: <http://www.dhs.state.mn.us/>
 Click on Health Care, then Medical Assistance
Phone: 1-800-657-3629

MISSOURI – Medicaid

Website: <http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
Phone: 573-751-2005

MONTANA – Medicaid

Website: <http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml>
Phone: 1-800-694-3084

NEBRASKA – Medicaid

Website: www.ACCESSNebraska.ne.gov
Phone: 1-800-383-4278

NEVADA – Medicaid

Medicaid Website: <http://dwss.nv.gov/>
Medicaid Phone: 1-800-992-0900

NEW HAMPSHIRE – Medicaid

Website: <http://www.dhhs.nh.gov/oii/documents/hippapp.pdf>
Phone: 603-271-5218

NEW JERSEY – Medicaid and CHIP

Medicaid Website: <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>
Medicaid Phone: 1-800-356-1561
CHIP Website: <http://www.njfamilycare.org/index.html>
CHIP Phone: 1-800-701-0710

NEW YORK – Medicaid

Website: http://www.nyhealth.gov/health_care/medicaid/
Phone: 1-800-541-2831

NORTH CAROLINA – Medicaid

Website: <http://www.ncdhhs.gov/dma>
Phone: 919-855-4100

NORTH DAKOTA – Medicaid

Website: <http://www.nd.gov/dhs/services/medicalserv/medicaid/>
Phone: 1-800-755-2604

OKLAHOMA – Medicaid and CHIP

Website: <http://www.insureoklahoma.org>
Phone: 1-888-365-3742

OREGON – Medicaid and CHIP

Website: <http://www.oregonhealthykids.gov>
<http://www.hijosaludablesoregon.gov>
Phone: 1-877-314-5678

PENNSYLVANIA – Medicaid

Website: <http://www.dpw.state.pa.us/hipp>
Phone: 1-800-692-7462

RHODE ISLAND – Medicaid

Website: www.ohhs.ri.gov
Phone: 401-462-5300

SOUTH CAROLINA – Medicaid

Website: <http://www.scdhhs.gov>
Phone: 1-888-549-0820

SOUTH DAKOTA – Medicaid

Website: <http://dss.sd.gov>
Phone: 1-888-828-0059

TEXAS – Medicaid

Website: <https://www.gethipptexas.com/>
Phone: 1-800-440-0493

UTAH – Medicaid and CHIP

Website: <http://health.utah.gov/upp>
Phone: 1-866-435-7414

VERMONT – Medicaid

Website: <http://www.greenmountaincare.org/>
Phone: 1-800-250-8427

VIRGINIA – Medicaid and CHIP

Medicaid Website: <http://www.dmas.virginia.gov/rcp-HIPP.htm>
Medicaid Phone: 1-800-432-5924
CHIP Website: <http://www.famis.org/>
CHIP Phone: 1-866-873-2647

WASHINGTON – Medicaid

Website: <http://hrsa.dshs.wa.gov/premiumpymt/Apply.shtm>
Phone: 1-800-562-3022, ext. 15473

WEST VIRGINIA – Medicaid

Website: www.dhhr.wv.gov/bms/
Phone: 1-877-598-5820,
 HMS Third Party Liability

WISCONSIN – Medicaid

Website: <http://www.badgercareplus.org/pubs/p-10095.htm>
Phone: 1-800-362-3002

WYOMING – Medicaid

Website: <http://health.wyo.gov/healthcarefin/equalitycare>
Phone: 307-777-7531

To see if any more States have added a premium assistance program since January 31, 2012, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
 1-866-444-EBSA (3272)
 OMB Control Number 1210-0137 (expires 09/30/2013)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
 1-877-267-2323, Ext. 61565

CENTRAL PENNSYLVANIA TEAMSTERS PENSION FUND

IMPORTANT ITEMS TO REMEMBER

(Please note that this list is updated frequently)

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 the 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 roll over 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. The Retirement Income Plan is a qualified retirement plan (QRP) or a 401(a). You do **NOT** have an Individual Retirement Annuity ("IRA") or a 401(k) with the Central Pennsylvania Teamsters Pension Fund.
- 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 1987 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 from the Defined Benefit Plan (or monthly installment payments from the Retirement Income Plan if elected) 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. Lump sums from the Retirement Income Plan 1987 are paid no earlier than the 15th of the month and no later than the last working day.
9. Even if you do not wish to have federal income tax withheld from your defined Benefit checks, the W-4P Withholding Certificate must be completed and returned.

Summary of Benefits and Coverage to be Mailed to All Participants

The new health care reform legislation, the Patient Protection and Affordable Care Act (PPACA), requires that health plans distribute a Summary of Benefits and Coverage (SBC) to all participants. The SBC outlines your benefits in an 8-page format that is consistent with all plans across the country. Look for your SBC to be mailed out by the end of the year.

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 toll-free, at **1-866-491-4462** for help when you are sick, injured or have a health care question.

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.

Smart phone users can access the website by using the scanning feature on their phones. Users must first download a bar code or QR reader app to their smart phone. Simply scan the code and you will be directed to the website.



Moonlighting/ Self-employment

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. ■



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.

August 31, 2012 Retirement Income Plan (RIP) Return

The following is the approximate net return for the Central PA Teamsters RIP 1987 retirement plans for the 8 month period ending August 31, 2012. The net return equals the gross investment return 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.

**Plan
RIP 1987**

**Approximate Net Return
9.8%**

You may also view your RIP 1987 balance on the Fund website through the Pension Fund Web Portal. Click on the Pension section and then "Pension Fund Web Portal." You must register first before you can access your account information.

For more information on investment returns, visit the Central Pennsylvania Teamsters website, www.CentralPATeamsters.com. Click on Pension Fund and then "Reports and Notices."

Retirees Approved For Pensions July 2012 through August 2012

For the month of July 2012

| Name | Local | Employer |
|-----------------------------|-------|----------------------------------|
| APPNEL, JR., JOHN | 229 | TOPPS CHEWING GUM, INC. |
| BAILEY, DONALD | 401 | PREFERRED DEVELOPMENT CORP. |
| BAUMGARDNER, MICHAEL S. | 764 | UNITED PARCEL SERVICE, INC. |
| BEERS, RAYMOND G. | 773 | J D M MATERIALS CO., INC. |
| BEIN, CHRISTINE | 229 | C&S WHOLESALE GROCERS |
| BERGER, SR, KENNETH R. | 773 | ARAMARK SERVICES |
| BILLMAN, HARRY W. | 773 | MYERS MEN, INC. |
| BITLER, ROGER E. | 776 | RYDER TRUCK RENTAL OF PA, INC. |
| BORDER, JOHN P. | 429 | UNISOURCE READING |
| BOYER, KERRY | 776 | YRC FREIGHT |
| BROOMHALL, TERRY L. | 429 | SUPERVALU, INC. |
| BRUGGER, PAUL D. | 776 | CENTRAL STORAGE & TRANSFER CO. |
| BRUNO, JR., JAMES D. | 776 | DRIVERS, INC. |
| BUTLER, JR., ROY E. | 776 | YRC FREIGHT |
| BYERS, KEITH ALLEN | 776 | NEW PENN MOTOR EXPRESS, INC. |
| CIECIORKA, MARK | 229 | TOPPS CHEWING GUM, INC. |
| COMONIE, ALICE M. | 229 | C&S WHOLESALE GROCERS |
| CONAHAN, MICHAEL P. | 776 | ST JOHNSBURY TRUCKING CO., INC. |
| COOPEY, KENNETH | 229 | TOPPS CHEWING GUM, INC. |
| CORRELL, RENEE | 229 | TOPPS CHEWING GUM, INC. |
| CUSTIS, JR., ROY E. | 429 | VICTUS LTD |
| DAVIS, CHERYL | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| DOUGHERTY, THOMAS A. | 776 | YRC FREIGHT |
| ELMY, GEORGE | 401 | RAYMON R HEDDEN & CO. |
| ENTZMINGER, WILLIAM F. | 773 | PEOPLE FIRST |
| FONTANA, PAUL S. | 429 | BIRDSBORO BOROUGH |
| FORD, JANE | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| FREEMAN, RONALD H. | 229 | PEPSI COLA BOTTLING |
| FRIDLEY, ROBERT M. | 229 | CRYSTAL SODA WATER CO. |
| GALLOWAY, DAVID M. | 429 | CENTRAL DOOR & PLYWOOD CO. |
| GOLDEN, CAROL A. | 229 | C&S WHOLESALE GROCERS |
| GORDON, JR., ELVIN D. | 776 | METALS USA |
| GREENFIELD, VERNON | 776 | TOSE-FOWLER, INC. |
| HAAS, LARRY A. | 776 | UNITED PARCEL SERVICE, INC. |
| HANEY, BRADLEY C. | 773 | PENSKE TRUCK LEASING CO., LP |
| HERNANDEZ-SANCHEZ, DARIO | 429 | POWER PACKAGING, AN EXEL CO. |
| HOFFERT, HARVEY I. | 429 | SCHROCK CABINET COMPANY |
| HOFFMAN, HAZEL | 229 | C&S WHOLESALE GROCERS |
| HOHOL, STEPHEN J. | 776 | ROADWAY EXPRESS, INC. |
| HOLLENBACH, RICKY L. | 773 | EASTERN INDUSTRIES, INC. |
| HOSSLER, JR., ERNEST R. | 776 | FLEMING COMPANIES, INC. |
| HOUSTON, GERARD J. | 229 | THE SCRANTON TIMES |
| HUNLEY, JOHN P. | 764 | UNITED PARCEL SERVICE, INC. |
| INCAVIDO, FRANCIS | 229 | HARPER COLLINS PUBLISHERS, INC. |
| ISBELL, BENJAMIN G. | 776 | UNITED PARCEL SERVICE, INC. |
| JOSEPH, RICHARD L. | 776 | NATIONS WAY TRANSPORT SERVICES |
| KLINEDINST, SCOTT H. | 776 | LEVINSON STEEL COMPANY |
| KRAMER, JR., RUSSELL H. | 773 | ROCK HILL MATERIALS CO. |
| LENTZ, RANDY L. | 771 | YELLOW FREIGHT SYSTEM, INC. |
| LINDSAY, HARRY J. | 776 | CENTRAL STORAGE & TRANSFER CO. |
| MAHER, MILDRED ANN | 229 | SUPER MARKET SERVICE CORP. |
| MARKS, FREDERICK T. | 429 | AIRCO GASES DIV OF BOC GRP, INC. |
| MILLER, BARRY LEON | 429 | G W SEYFERT ENTERPRISES, INC. |
| MOSTOLLER, GARY L. | 771 | YELLOW FREIGHT SYSTEM, INC. |
| MURDOCK, MARK S. | 429 | LENTZ MILLING COMPANY |
| NIEDER, THOMAS R. | 429 | QUAKER MAID KITCHENS |
| PEFFLEY, MARY | 771 | YELLOW FREIGHT SYSTEM, INC. |
| PELONERO, GARY M. | 773 | UNITED PARCEL SERVICE, INC. |
| POTTORFF, SR., HOWLEN V. | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| QUIGLEY, THOMAS | 429 | MAIERS BAKERY |
| RAMIREZ, FRANCISCO | 773 | ABM INDUSTRIES |
| RHOADS, TERRY LEE | 776 | HIGHWAY FILM DELIVERY, INC. |
| RODGERS, JR., WILLIAM P. | 776 | USF RED STAR |
| SCHELL, ROSS E. | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| SCHLENKER, PAUL R. | 429 | DIETRICH MILK PRODUCTS, INC. |
| SCHROETTNER, ELEANOR M. | 773 | ABM INDUSTRIES |
| SHAULIS, JAMES D. | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| SHELTON, MICHAEL | 229 | ROADWAY EXPRESS, INC. |
| SIER, JR, ROBERT E. | 776 | FLEMING COMPANIES, INC. |
| STEMPIEN, HELEN | 229 | TOPPS CHEWING GUM, INC. |
| SULLENBERGER, JR, DONALD H. | 771 | ARAMARK UNIFORM SERVICES, INC. |
| SWETLAND, ROY A. | 429 | GENERAL COMMODITIES WAREHOUSE |
| SWISHER, ROBERT C. | 429 | ARKEMA, INC. |
| THOMAS, BEVERLY | 229 | C&S WHOLESALE GROCERS |
| TOME, DARLENE D. | 776 | ASSOCIATED WHOLESALERS, INC. |
| TOTH, JOSEPH J. | 229 | AFFILIATED FOOD DISTR., INC. |
| WAKEFIELD, RALPH | 776 | YRC FREIGHT |
| WHITE, AUDREY L. | 776 | YORK COUNTY TRANSP. AUTHORITY |
| WHITED, JOSEPH J. | 776 | ST JOHNSBURY TRUCKING CO., INC. |
| WILSON, RONALD | 776 | ANDERSON LOGISTICS |
| ZELEDONIS, ROBERT C. | 429 | SCHROCK CABINET COMPANY |
| ZELKO, JOHN F. | 773 | SPECTOR FREIGHT SYSTEM, INC. |
| ZELLER, MARY ANN | 229 | TOPPS CHEWING GUM, INC. |
| ZIDIK, ANTHONY JOSEPH | 429 | MCLEAN TRUCKING CO. DOCK |

For the month of August 2012

| Name | Local | Employer |
|----------------------------|-------|-----------------------------------|
| ADAMS, RONALD M. | 429 | READING HEATER & SUPPLY CO. |
| ALBERTSON, EDWARD M. | 764 | INTERSTATE MTR FREIGHT SYS., INC. |
| ALBRIGHT, H. MITCHELL | 776 | MAIERS BAKERY |
| ARTHUR, ROBERT A. | 429 | ASSOCIATED WHOLESALERS, INC. |
| BALASTER, DENNIS P. | 429 | DAIRY FARMERS OF AMERICA, INC. |
| BENSON, JR., CHARLES R. | 429 | BERKS PRODUCTS CORP. |
| BIDDLE, BRANCH | 764 | BRANCH MOTOR EXPRESS CO. |
| BODNARI, JOHN | 773 | EASTERN INDUSTRIES, INC. |
| BORGER, DENNIS R. | 773 | SILVER LINES, INC. |
| BRALLIER, JR., CLARENCE D. | 776 | YRC FREIGHT |
| BREIDIGAN, JR., RAYMOND W. | 429 | LEHIGH VALLEY DAIRIES, INC. |
| BRIGHT, BEVERLY | 429 | GOODMAN VENDING SERVICE |
| BROBST, RICHARD B. | 429 | SCHROCK CABINET COMPANY |
| BROWN, SIDNEY W. | 773 | W S REICHENBACH & SON, INC. |
| CARBONE, THOMAS J. | 229 | C&S WHOLESALE GROCERS |
| CAREY, JR., HAROLD A. | 999 | ARKANSAS BEST FREIGHT SYS., INC. |
| CHO, TAEHO | 776 | PRESTON TRUCKING CO., INC. |
| COOPER, JR., CLINTON T. | 429 | BRANCH MOTOR EXPRESS CO. |
| CORTAZAR, PATRICK J. | 229 | C&S WHOLESALE GROCERS |
| CUBIDES, JUAN A. | 429 | POWER PACKAGING, AN EXEL CO. |
| DAVIDSON, DARLA D. | 229 | CONSOLIDATED FREIGHTWAYS |
| DEGUIDA, DOMINICK | 999 | ALLIED SYSTEMS LTD. |
| DELELLIS, DAVID G. | 429 | SCHROCK CABINET COMPANY |
| DEMSKIE, DAVID P. | 776 | UNITED PARCEL SERVICE, INC. |
| DONTON, JIMMY A. | 429 | EXIDE CORPORATION |
| DREY, ROBERT D. | 429 | QUAKER MAID KITCHENS |
| DUNLEVY, DAWN A. | 776 | USF RED STAR |
| ECK, LARRY W. | 773 | MAKOVSKY BROTHERS, INC. |
| EDMONDSON, JAMES R. | 229 | C&S WHOLESALE GROCERS OCEAN LG |
| FLETCHER, BRIAN | 771 | YRC FREIGHT |
| FOEHLINGER, ANDREW J. | 776 | YRC FREIGHT |
| FRANK, MICHAEL D. | 429 | SWANN OIL, INC. |
| GREEN, JR., ROBERT W. | 773 | A-P-A TRANSPORT CORPORATION |
| GUCCINI, JR., LEONARD D. | 773 | J D M MATERIALS CO., INC. |
| GULES, ARLINE M. | 776 | CONSOLIDATED FREIGHTWAYS |
| HAMM, ROBERT A. | 773 | SPECTOR FREIGHT SYSTEM, INC. |
| HARVEY, JOHN W. | 429 | EXIDE CORPORATION |
| HINTON, CHARLIE L. | 776 | CONSOLIDATED FREIGHTWAYS |
| JENKINS, DAVID A. | 401 | FRIEDMANS EXPRESS, INC. |
| JOHNSON, RICHARD C. | 764 | BRANCH MOTOR EXPRESS CO. |
| JONES, BARBARA A. | 229 | C&S WHOLESALE GROCERS |
| JONES, WARREN L. | 429 | UNITED PARCEL SERVICE, INC. |
| JUNKER, THOMAS | 776 | USF HOLLAND, INC. |
| KATZENMOYER, STEVEN S. | 429 | RDG COCA COLA BOTTLING WORKS |
| KEISER, DENNIS R. | 773 | ROCK HILL TRUCKING CO., INC. |
| KRATZER, GERALD | 776 | YRC FREIGHT |
| KUHNS, DENNIS J. | 773 | MYERS MEN, INC. |
| LANDIS, ALTHA R. | 771 | YRC FREIGHT |
| LASH, JR., CURTIS E. | 429 | BERKS PRODUCTS CORP. |
| LAZOWSKI, DONNA M. | 229 | TOPPS CHEWING GUM, INC. |
| LECHLEITNER, KENNETH H. | 773 | ROCK HILL TRUCKING CO. |
| LUCKETT, ROY M. | 776 | ARKANSAS BEST FREIGHT SYS., INC. |
| MCCLOY, KEVIN J. | 429 | SUPERVALU, INC. |
| MINKER, STEPHEN H. | 429 | MINKER STEEL PRODUCTS CORP. |
| MYERS, ROBERT | 776 | METALS USA |
| NESTICO, JOSEPH J. | 776 | YRC FREIGHT |
| OAKMAN, ALBERT L. | 771 | ARAMARK UNIFORM SERVICES, INC. |
| OXENREIDER, RANDY F. | 429 | THE BACHMAN COMPANY |
| PAULINO, MARYANN F. | 229 | TOPPS CHEWING GUM, INC. |
| PELCZYNSKI, TIMOTHY M. | 764 | UNITED PARCEL SERVICE, INC. |
| REILLY, JR., PHILIP H. | 999 | ALLIED SYSTEMS LTD. |
| RICKER, DAVID P. | 429 | CARL R BIEBER, INC. |
| RUNKLE, THOMAS | 776 | MOTOR FREIGHT EXPRESS, INC. |
| SAUNDERS, DONNA | 771 | MILLER & HARTMAN, INC. |
| SAYLOR, MICHAEL G. | 771 | HERMAN R. EWELL, INC. |
| SEMMELE, DWAIN G. | 429 | POWER PACKAGING, AN EXEL CO. |
| SHEAFFER, JR., JACOB E. | 776 | CENTRAL STORAGE & TRANSFER CO. |
| SHIPE, CRAIG A. | 764 | YELLOW FREIGHT SYSTEM, INC. |
| SHOSTEK, ROBERT W. | 401 | KEYSTONE COCA-COLA BOTTLING CO. |
| SHOVLIN, DONALD | 229 | TOPPS CHEWING GUM, INC. |
| SINCLAIR, JAMES A. | 999 | CAROLINA FREIGHT CARRIERS CORP. |
| SINDELAR, THEODORE C. | 764 | TRANSAMERICAN FREIGHT LINES, INC. |
| SMITH, JR., HENRY J. | 771 | YRC FREIGHT |
| STERN, IRENE M. | 429 | COTT BEVERAGES WYOMISSING, INC. |
| STUCK, DONALD B. | 776 | UPS CARTAGE SERVICES, INC. |
| SWEIGART, BRUCE | 771 | UNITED PARCEL SERVICE, INC. |
| TROUTMAN, SR., TIMOTHY W. | 776 | YRC FREIGHT |
| WAGNER, SHARON L. | 429 | POWER PACKAGING, AN EXEL CO. |
| WARNER, GARY | 229 | C&S WHOLESALE GROCERS |
| WEISTER, STANLEY K. | 776 | CONSOLIDATED FREIGHTWAYS |
| WELDON, BRADLEY K. | 771 | YRC FREIGHT |
| WERLEY, RUSSELL | 429 | UNITED PARCEL SERVICE, INC. |
| WRENN, HOLLY | 429 | POWER PACKAGING, AN EXEL CO. |
| YETTER, DENNIS K. | 776 | YRC FREIGHT |
| ZERBE, GREGORY D. | 429 | BRENNTAG NORTHEAST, INC. |
| ZIDIK, GREGORY E. | 429 | ASSOCIATED WHOLESALERS, INC. |
| ZUMBRUM, LARRY L. | 776 | YORK DRILLING CO., INC. |

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

Non-Profit Org.
U.S. POSTAGE
PAID
Reading, PA
Permit No. 144

Important Information from the Fund Office

Fund Office Contact Information

Please note new Fund Office Hours: Contact the Fund Office directly with any questions on Health and Welfare or Pension benefits. The Fund staff is available Monday through Thursday from 7:00 a.m. to 5:00 p.m.; Friday from 7:00 a.m. to 4:15 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.

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
Tomm Forrest
Employer Trustee
J. Christopher Michael
Employer Trustee
Howard W. Rhinier
Union Trustee
Kenneth A. Ross
Employer Trustee
Daniel W. Schmidt
Employer Trustee
Charles Shafer
Union Trustee
Jeff Strause
Union 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
Tortoise Capital Advisors, LLC
Walter Scott & Partners, Ltd.

Investment Managers for the Central Pennsylvania Teamsters Pension Fund:

Aronson+Johnson+Ortiz, LP
The Boston Company Asset
Management, LLC
Causeway Capital Management, LLC
Entrust Capital, Inc.
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.
Segall Bryant & Hamill
Tortoise Capital Advisors LLC.
Walter Scott & Partners, Ltd.
Western Asset
Westfield Capital Management
Company, LLC