

Central Pennsylvania Teamsters

GUARDIAN

Health and Welfare/Pension Guardian Newsletter



Reading, Pennsylvania



October 2016

Fall Greetings from the Central Pennsylvania Teamsters Health & Welfare and Pension Funds!

IMPORTANT INFORMATION INSIDE: SUMMARY OF MATERIAL MODIFICATIONS ON PAGES 13 & 15 FOR PARTICIPANTS IN THE DEFINED BENEFIT PLAN AND RETIREMENT INCOME PLAN 1987

Voluntary Life Insurance Available through The Hartford Limited Time Opportunity—Enroll Before November 23, 2016

Until November 23, you have the opportunity to enroll in guaranteed acceptance LIFE INSURANCE up to the following amounts. This is in addition to any death benefits that may be provided by the Fund under your collective bargaining agreement:

Look for your enrollment packet mailed to your home!

- Up to \$200,000 for yourself
- Up to \$50,000 for your spouse
- Up to \$10,000 for your child

THEY MEAN SO MUCH TO YOU - HELP PROTECT THEM

Your decisions today could mean a lot to your loved ones

Life insurance products can help secure your loved ones' future if you no longer can. Day in, day out, you work hard to provide for your loved ones. But who will care for them if something happens to you?

Though you'd like to think that nothing can happen to you, the unexpected is all too commonplace.

That's why it's important to learn about life insurance and understand the options available to you. By doing so, you can help provide financial protection for your family and gain peace of mind knowing that they'll be at a financial advantage to face the uncertainty of the future.

Plan today to help secure their financial future

Life insurance can be an integral part of your financial planning. In the event of your death, it can provide financial resources for your family. If you should pass away, it can help pay for many expenses like:

- Uninsured medical expenses
- Funeral costs

- Estate taxes
- Child care
- Monthly bills, such as the mortgage or rent, car payments, credit cards and utilities
- College tuition
- Saving for retirement

Your spouse may need additional resources to finance a move or find a job. That's why it's so important to have adequate life insurance coverage to help replace your lost income and maintain your dependents' current lifestyle if you die unexpectedly.

This flexible plan designs allow you to:

- Choose the coverage amount that fits your needs and budget
- Elect coverage up to a specified amount without medical underwriting.¹

Find out about your benefit options by visiting MyTomorrow®, an interactive decision-support tool: WWW. THEHARTFORD.COM/BENEFITS/CENTRALPA

Prepare. Protect. Prevail. With The Hartford.®

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries including issuing companies Hartford Life Insurance Company and Hartford Life and Accident Insurance Company. Home office is in Hartford, CT. All benefits are subject to the terms and conditions of the policy. Policies underwritten by the issuing companies listed above detail exclusions, limitations, reduction of benefits and terms under which the policies may be continued in force or discontinued.

¹Assumes you enroll when first eligible to do so. Late enrollments and higher amounts of coverage require medical underwriting.

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Additional Benefits Offered through The Hartford

If your collective bargaining agreement includes Death/Accidental Death and Dismemberment benefits through the Central Pennsylvania Teamsters Health and Welfare Fund, your plan now offers the following additional benefits through The Hartford:

- **Funeral Planning and Concierge Services** offers funeral planning assistance to family members through Everest. Round-the clock assistance is available for funeral planning issues, including information on funeral home price comparisons and Express Pay, an innovative claims payment service that can deliver benefits to pay funeral expenses in as little as 48 hours.
- **Beneficiary Assist Counseling Services** offer professional help after a loved one's loss or terminal illness. Benefits include legal advice, financial planning and emotional counseling for up to one year after a loss.
- EstateGuidance® Will Services helps you create a simple, legally binding will on-line.
- Travel Assistance and ID Theft Protection Services offers you and your family access to Emergency Medical Assistance when you are travelling more than 100 miles from home for 90 days or less. You are also offered Identity Theft Assistance prevention, detection and resolution services.

The information above briefly summarizes your Death/AD&D supplemental benefits package. Be sure to visit the Central Pennsylvania Teamsters website, select Health and Welfare Fund, and click on "Active Death/AD&D Benefits" to view a complete description of the above benefits.

Important Information on the Health and Welfare Fund's Subrogation Program

This article provides important information about the Fund's Subrogation Program. According to the documents that govern the Fund, this Program applies whenever a member or dependent: (1) suffers injuries, (2) receives benefits from the Fund to treat those injuries, and (3) then receives compensation from an outside source for those injuries. In such circumstances, the Fund will "subrogate" against the third-party recovery and require the member, dependent, or both, to reimburse the Fund for a portion of the benefits paid by the Fund.

You can find the specific rules that cover the Subrogation Program in your Summary Plan Description, which you can find in the Health and Welfare Section on our website at www.CentralPATeamsters.com. You and your lawyer must take the Subrogation Program into account if you file or consider filing a workers' compensation claim, lawsuit, or other legal claim that seeks compensation for injuries for which you have already received benefits from the Fund.

The Fund may ask you to sign a Subrogation Agreement that recognizes your obligations under the Subrogation Policy. However, that Policy will apply regardless of whether you sign such an agreement.

The Fund will reduce a subrogation claim by up to 20 percent to cover the legal fees that you incur in obtaining compensation from an outside source. The Fund strictly applies this limit in workers compensation cases, in which the 20 percent cap is established by law. The Fund realizes that lawyers typically charge higher fees for lawsuits. If your lawyer charges a higher fee, he or she should contact the Fund Office and request negotiations on this issue.

PLEASE DO NOT RESOLVE A WORKERS COMPENSATION CLAIM, LAWSUIT, OR ANY OTHER CLAIM FOR COMPENSATION UNLESS YOUR LAWYER (OR YOU, IF YOU HAVE NO LAWYER) HAS CONTACTED THE FUND AND RESOLVED THE SUBROGATION CLAIM. Such action could subject you, your lawyer, and others to litigation and an obligation to pay the Fund's attorneys fees in that litigation. Also, the applicable plan documents permit the Fund to deduct the amount of money that an active member has failed to pay the Fund under the Subrogation Policy from the benefits due the member.

The Subrogation Policy saves the Fund several hundred thousand dollars each year. All that money is used to serve the primary purpose of the Fund: To pay benefits to members and dependents -- all of whom benefit from the Policy.

THE HEALTH AND WELFARE FUND'S NETWORK PROVIDER TO CHANGE EFFECTIVE JANUARY 1, 2017

Effective on January 1, 2017, the Health and Welfare Fund's network provider will change to Aetna. There will be minimal change in providers from the current HealthAmerica/Aetna network. Participants will receive a mailing in late October/early November which will include new ID cards and information on new precertification requirements. Look for updates on the Fund's website and in future editions of the Guardian.

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're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, 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, 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, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't 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, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2016. Contact your State for more information on eligibility –

ALABAMA – Medicaid	FLORIDA – Medicaid
Website: http://myalhipp.com/	Website: http://flmedicaidtplrecovery.com/hipp/
Phone: 1-855-692-5447	Phone: 1-877-357-3268
ALASKA – Medicaid	GEORGIA – Medicaid
The AK Health Insurance Premium Payment Program	Website: http://dch.georgia.gov/medicaid
Website: http://myakhipp.com/	- Click on Health Insurance Premium Payment (HIPP)
Phone: 1-866-251-4861	Phone: 404-656-4507
Email: CustomerService@MyAKHIPP.com	
Medicaid Eligibility:	
http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	
ARKANSAS – Medicaid	INDIANA – Medicaid
ARKANSAS – Medicaid Website: http://myarhipp.com/	INDIANA – Medicaid Healthy Indiana Plan for low-income adults 19-64
	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com Phone 1-800-403-0864 IOWA — Medicaid Website: http://www.dhs.state.ia.us/hipp/
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447) COLORADO – Medicaid	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com Phone 1-800-403-0864 IOWA — Medicaid

KANSAS – Medicaid	NEW HAMPSHIRE – Medicaid
Website: http://www.kdheks.gov/hcf/ Phone: 1-785-296-3512	Website: http://www.dhhs.nh.gov/oii/documents/hippapp.pdf Phone: 603-271-5218
KENTUCKY – Medicaid Website: http://chfs.ky.gov/dms/default.htm Phone: 1-800-635-2570	NEW JERSEY – Medicaid and CHIP Medicaid Website: http://www.state.nj.us/humanservices/ dmahs/clients/medicaid/ Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710
Website: http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1-888-695-2447	NEW YORK – Medicaid Website: http://www.nyhealth.gov/health_care/medicaid/ Phone: 1-800-541-2831
MAINE – Medicaid Website: http://www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 1-800-442-6003 TTY: Maine relay 711	NORTH CAROLINA – Medicaid Website: http://www.ncdhhs.gov/dma Phone: 919-855-4100
MASSACHUSETTS – Medicaid and CHIP Website: http://www.mass.gov/MassHealth Phone: 1-800-462-1120	NORTH DAKOTA – Medicaid Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-844-854-4825
MINNESOTA – Medicaid Website: http://mn.gov/dhs/ma/ Phone: 1-800-657-3739	OKLAHOMA – Medicaid and CHIP Website: http://www.insureoklahoma.org Phone: 1-888-365-3742
MISSOURI – Medicaid Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005	OREGON – Medicaid Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075
MONTANA – Medicaid Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084	PENNSYLVANIA – Medicaid Website: http://www.dhs.pa.gov/hipp Phone: 1-800-692-7462
NEBRASKA – Medicaid Website: http://dhhs.ne.gov/Children_Family_Services/AccessNebraska/Pages/accessnebraska_index.aspx Phone: 1-855-632-7633 NEVADA – Medicaid	RHODE ISLAND – Medicaid Website: http://www.eohhs.ri.gov/ Phone: 401-462-5300 SOUTH CAROLINA – Medicaid
Medicaid Website: http://dwss.nv.gov/ Medicaid Phone: 1-800-992-0900	Website: http://www.scdhhs.gov Phone: 1-888-549-0820

SOUTH DAKOTA - Medicaid	WASHINGTON – Medicaid
Website: http://dss.sd.gov Phone: 1-888-828-0059	Website: http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/premium-payment-program Phone: 1-800-562-3022 ext. 15473
TEXAS – Medicaid	WEST VIRGINIA – Medicaid
Website: http://gethipptexas.com/ Phone: 1-800-440-0493	Website: http://www.dhhr.wv.gov/bms/Medicaid%20Expansion/Pages/default.aspx Phone: 1-877-598-5820, HMS Third Party Liability
UTAH – Medicaid and CHIP	WISCONSIN – Medicaid and CHIP
Website: Medicaid: http://health.utah.gov/medicaid CHIP: http://health.utah.gov/chip Phone: 1-877-543-7669	Website: https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf Phone: 1-800-362-3002
VERMONT– Medicaid	WYOMING – Medicaid
Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427	Website: https://wyequalitycare.acs-inc.com/ Phone: 307-777-7531
VIRGINIA – Medicaid and CHIP	
Medicaid Website: http://www.coverva.org/programs_premium_assistance.cfm Medicaid Website: http://www.coverva.org/programs_premium_assistance.cfm CHIP Phone: 1-855-242-8282	

To see if any other states have added a premium assistance program since July 31, 2016, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration www.dol.gov/ebsa 1-866-444-EBSA (3272)

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services www.cms.hhs.gov 1-877-267-2323, Menu Option 4, Ext. 61565

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104–13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

CENTRAL PENNSYLVANIA TEAMSTERS HEALTH AND WELFARE FUND PRESCRIPTION BENEFIT PLANS

Plans 13, 14P, R7 and R7/65

	10 20, 2 11, 11, and 11, / 0	
RETAIL*	Generic	ф Б
	for up to a 34 day supply	\$ 5
	Brand Preferred	
	for up to a 34 day supply	\$ 15
	Brand Non-Preferred	
	for up to a 34 day supply	\$ 30
MAIL ORDER		
	Generic	
	for up to a 90 day s <mark>up</mark> ply	\$ 15
19.1	Brand Preferred	
	for up to a 90 day supply	\$ 30
	Brand Non-Preferred	
	for up to a 90 day supply	\$ 60
SPECIALTY		
	RETAIL	
	up to a 30 day supply	\$ 150
	MAIL ORDER	
	up to a 90 day supply	\$ 300

*NOTE: These copayments are applicable to 15-day scripts for drugs classified as "Class II" Pain Medications by the FDA. Also, effective January 1, 2016, the copayment for all Zohydro prescriptions will be \$150 per script.

Plan 13Y

RETAIL	Generic	
	for up to a 34 day supply	\$ 10
	Brand Preferred	
	for up to a 34 day supply	\$ 30
100	Brand Non-Preferred	\$ 50
7	for up to a 34 day supply	
MAIL ORDER		
-	Generic	
	for up to a 90 day supply	\$ 30
	Brand Preferred	
	for up to a 90 day supply	\$ 60
- 4	Brand Non-Preferred	
-	for up to a 90 day supply	\$ 100
SPECIALTY		
	RETAIL	\$ 150
	up to a 30 day supply	
	MAIL ORDER	
	up to a 90 day supply	\$ 300

*NOTE: These copayments are applicable to 15-day scripts for drugs classified as "Class II" Pain Medications by the FDA. Also, effective January 1, 2016, the copayment for all Zohydro prescriptions will be \$150 per script.

Plans 14 and 16

	1917	OPTION A	OPTION B	OPTION C
RETAIL	Generic for up to a 34 day supply	\$ 5	\$ 10	\$ 10
-	Brand Preferred for up to a 34 day supply	\$ 15	\$ 20	\$ 30
	Brand Non- Preferred for up to a 34 day supply	\$ 30	\$ 40	\$ 50
MAIL ORDER				
	Generic for up to a 90 day supply	\$ 15	\$ 30	\$ 30
	Brand Preferred for up to a 90 day supply	\$ 30	\$ 40	\$ 60
	Brand Non- Preferred for up to a 90 day supply	\$ 60	\$ 80	\$ 100
SPECIALTY				- 3
	RETAIL up to a 30 day supply	\$ 150	\$ 150	\$ 150
*NOTE. Th.	MAIL ORDER up to a 90 day supply	\$ 300	\$ 300	\$ 300

*NOTE: These copayments are applicable to 15-day scripts for drugs classified as "Class II" Pain Medications by the FDA. Also, effective January 1, 2016, the copayment for all Zohydro prescriptions will be \$150 per script.

Know Your Pension Plan

The Pension Fund frequently receives questions on the topics below. Additional information on these and other topics is available by visiting the Pension section of the website. When you are ready to apply for your pension, please refer to the "Important Items to Remember" section of the website under Pension for additional information.

- 1. Beneficiary Updates/Change in Marital Status Please review your beneficiary designation if you change
 your marital status. Please notify the Fund if you get
 married, divorced, or become widowed. If you get
 divorced, please forward a copy of the divorce decree.
 You will need to complete a new beneficiary form for
 your Pension Benefits after your divorce is finalized.
 If you become widowed, you will need to forward a
 copy of the death certificate and also complete a new
 beneficiary form. Downloadable beneficiary forms are
 available on the Fund's website. You cannot name your
 pet as a beneficiary.
- 2. **Retirement Applications** Contact the Pension Fund three months prior to your retirement date to begin the application process (6 months if you have time in another Fund and are applying for a reciprocal pension). The Pension Fund offers appointments to assist you with completing your Application for Pension paperwork. Please be sure to review your benefit options on your paperwork so that you are familiar with them prior to your appointment.
- 3. **Your Retirement Income Plan (RIP) 1987** balance is updated by the 15th of each month and subject to net gains or losses through the last day of the month in which your application is approved for payment.
- 4. **Power of Attorney** If you cannot handle your own affairs, you must provide the Fund with a Durable Power of Attorney before any information can be given to the person who you designate to handle your affairs.
- 5. **Pension Checks** Your checks from the Defined Benefit Plan (or monthly installments from the Retirement Income Plan if elected) are dated the first of each month. If you elect direct deposit, your check will be deposited on the first business day of the month. For example, if the first of the month falls on Sunday, your check will be deposited on Monday.
- 6. **Website** Please visit the website for Summary Plan Descriptions, Forms and Notices, Important Items to Remember or to view your RIP 1987 balance.
- 7. **Signatures on Fund Documents** Please sign all Fund documents with your legal name, which must match what is on file with the Fund Office. Please be sure to use your full name (no nicknames) and suffix (Jr., Sr., III), if applicable.

Know Your Health & Welfare Plan

The Health and Welfare Fund frequently receives questions on the topics below. Additional information on these topics is available in your Summary Plan Description or by visiting the Fund website.

- 1. **Dental Implants** All requests for dental implants must be submitted for pre-determination for review under the implant policy. Failure to do so could mean higher out of pocket expenses.
- 2. **Health Savings Accounts for Dependents** If your spouse (or eligible dependent) is covered under a high-deductible health plan with a health savings account (HSA), this spouse or dependent may not be covered under the Central PA Teamsters Health and Welfare Plan. If your employer pays on a Component basis, the Employer will not be responsible for contributions for this spouse or dependent.
- 3. **Motor Vehicle Accidents** -The Fund will consider payment of medical expenses only after the benefits from the auto insurance carrier have been exhausted. In addition, the Fund will not provide coverage for Short Term Disability Benefits (except for the first 5 days of missed work). Contact your auto insurance carrier to make sure that your policy includes payment for missed work due to injuries sustained in an auto accident.
- 4. **Illegal Acts** -The Fund does not cover medical services rendered as a result of your committing an illegal act (misdemeanor or felony). This includes driving while intoxicated (DUI).
- 5. **Change in Family Status** Please review your beneficiary designation if there is a change in your family status. Please notify the Fund if you get married, divorced, are widowed or have a child. The Fund does not allow divorced spouses to continue to be covered under the member's coverage.
- 6. **Moonlighting** -The Fund does not cover participants or eligible dependents for illness or injuries that occur as a result of performing noncovered employment for wage or profit.
- 7. **Dependent Daughter Pregnancies** -The Fund does not cover medical expenses associated with a dependent's pregnancy.
- 8. **Address Change:** Please remember to contact the Fund office if your address changes.

STEP THERAPY

NOTE: The medications in each category are subject to change. Please make sure to check with the Fund (Phone: Toll Free in PA: 1-800-422-8330; Toll Free in USA: 1-800-331-0420) or on the Fund's website (www. centralpateamsters.com) for updates to this chart before beginning a course of medication.

Please note: all brand contraceptives are covered under Step II medications and are not subject to grandfathering.

Effective March 8, 2016, the following generic drugs are now added to the Step 1 Rheumatoid Arthritis step therapy: high dose ibuprofen and naproxen (requiring a prescription), celecoxib, nabumetone, piroxicam, diclofenac, diflunisal, indomethacin, ketoprofen, etodolac, prednisone, cyclophosphamide, cyclosporine, azathioprine, and methotrexate

STEP THERAPY CATEGORIES NOT SUBJECT TO GRANDFATHERING:

Effective January 1, 2016, the Fund will **NOT** provide benefits for medications in Step II unless you have documented that you have tried and failed on a Step I medication and your physician has submitted documentation demonstrating that the Step II medications are "medically necessary" under the Fund's criteria.

CATEGORY	STEP I	STEP II
ALZHEIMER'S DISEASE	DONEPEZIL GALANTAMINE RIVASTIGMINE	ARICEPT EXELON NAMENDA RAZADYNE
ANGIOTENSIN RECEPTOR BLOCKERS (ANTIHYPERTENSIVES)	CANDESARTAN EPROSARTAN IRBESARTAN LOSARTAN TELMISARTAN VALSARTAN	ATACAND AVAPRO BENICAR COZAAR DIOVAN EDARBI MICARDIS TEVETEN
ANTI-DEPRESSANTS	BUPROPION HCL DESVENLAFAXINE DULOXETINE ESCITALOPRAM FLUOXETINE NEFAZODONE SERTRALINE TRAZODONE VENLAFAXINE	APLENZIN BRINTELLIX CYMBALTA EFFEXOR FETZIMA FORFIVO XL KHEDEZLA LEXAPRO OLEPTRO PRISTIQ PROZAC VIIBRYD WELLBUTRIN ZOLOFT
ANTI-GLAUCOMA EYE PREPARATIONS	APRACLONIDINE HCL BETAXOLOL BRIMONIDINE CARTEOLOL DORZOLAMIDE LATANOPROST LEVOBUNOLOL METIPRANOLOL PILOCARPINE TIMOLOL TRAVOPROST	ALPHAGAN AZOPT BETIMOL BETOPTIC COMBIGAN COSOPT IOPIDINE ISTALOL LUMIGAN PHOSPHOLINE RESCULA

ANTI-GLAUCOMA EYE PREPARATIONS (con't)		SIMBRINZA TIMOPTIC TRAVATAN TRUSOPT XALATAN ZIOPTAN
ANTIPSYCHOTICS	CLOZAPINE OLANZAPINE QUETIAPINE RISPERIDONE ZIPRASIDONE	ABILIFY - Evidence of "medical necessity" must include documentation of failure of all other therapies, including non-drug intervention
BETA-ADRENERGIC BLOCKERS (ANTIHYPERTENSIVES)	ACEBUTOLOL ATENOLOL BETAXOLOL BISOPROLOL METOPROLOL NADOLOL PINDOLOL PROPRANONOL SOTALOL TIMOLOL	BYSTOLIC
CALCIUM CHANNEL BLOCKERS (ANTIHYPERTENSIVES)	AMLODIPINE ATORVASTATIN AMLODIPINE BESYLATE AMLODIPINE VALSARTAN DILTIAZEM FELODIPINE ISRADIPINE NICARDIPINE NIFEDIPINE NISOLDIPINE VERPAMIL	ADALAT CADUET CALAN CARDENE CARDIZEM CARTIA XT EFIDITAB EXFORGE NORVASC PROCARDIA XL SULAR TIAZAC ER VERELAN
CONTRACEPTIVES	All Generic Contraceptives	All Brand Contraceptives
DIABETES	ACARBOSE GLIMEPIRIDE GLIPIZIDE GLYBURIDE JANUMET JANUVIA METFORMIN PIOGLITAZONE REPAGLINIDE	INVOKANA JARDIANCE JENTADUETO KAZANO TRADJENTA
NARCOTIC ANALGESICS NOTE: BENEFITS WILL BE PROVIDED ONLY FOR NARCOTIC ANALGESICS PRESCRIBED AT THE MANUFACTURERS RECOMMENDED SCRIPT LEVEL.	ACETAMINOPHEN-CODEINE HYDROCODONE-ACETAMINOPHEN HYDROMORPHONE MEPERIDINE METHADONE MORPHINE SULFATE OXYCODONE OXYCODONE-ACETAMINOPHEN OXYCODONE-ASPIRIN	DEMEROL DOLOPHINE LORTAB NORCO NUCYNTA OPANA OXYCONTIN PERCOCET PERCODAN

NARCOTIC ANALGESICS (con't)	OXYMORPHONE TRAMADOL	TYLENOL WITH CODEINE ULTRACET ULTRAM VICODIN VICOPROFEN
OSTEOPOROSIS	ALENDRONATE CALCITONIN-SALMON BANDRONATE RALOXIFENE RISEDRONATE	ACTONEL ATELVIA BINOSTO BONIVA EVISTA FORTICAL FOSAMAX MIACALCIN PROLIA
RHEUMATOID ARTHRITIS	HIGH DOSE IBUPROFEN AND NAPROXEN (PRESCRIPTION STRENGTH) CELECOXIB NABUMETONE PIROXICAM DICLOFENAC DIFLUNISAL INDOMETHACIN KETOPROFEN ETODOLAC PREDNISONE CYCLOPHOSPHAMIDE CYCLOSPORINE AZATHIOPRINE METHOTREXATE XELJANZ	ACTEMRA CIMZIA ENBREL HUMIRA KINERET ORENCIA SIMPONI STELARA
URINARY AGENTS	TOVIAZ FLAVOXATE OXYBUTYNIN TOLTERODINE TROSPIUM	ENABLEX GELNIQUE MYRBETRIQ OXYTROL VESICARE

GRANDFATHERED DRUGS: Effective January 1, 2016, any NEW prescriptions for the medications in the chart below are subject to the Step Therapy requirements set forth above. If, however, you are currently taking a medication in one of these categories, the Fund will continue to provide benefits for your medication.

CATEGORY	STEP I	STEP II	
ADD & ADHD	AMPHETAMINE SALTS D-AMPHETAMINE ER DEXMETHYLPHENIDATE DEXTROAMPHETAMINE METHAMPHETAMINE METHYLPHENIDATE	ADDERALL CONCERTA DAYTRANA DESOXYN DEXEDRINE EVEKEO FOCALIN METADATE METHYLIN PROCENTRA QUILLIVANT RITALIN VYVANSE ZENZEDI	

ANTI-MIGRAINE	DIHYDROERGOTAMINE ERGOTAMINE-CAFFEINE TABLET ISOMETHEPT-CAFF-APAP ISOMETHEPT-DICHLORALP-APAP NARATRIPTAN RIZATRIPTAN SUMATRIPTAN ZOLMITRIPTAN	ALSUMA AMERGE AXERT CAFERGOT D.H.E.45 ERGOMAR FROVA IMITREX MAXALT MIGERGOT MIGRANAL RELPAX SUMAVEL TREXIMET ZOMIG
ANTI-CONVULSANTS	CARBAMAZEPINE CLONAZEPAM DIVALPROEX ETHOSUXIMIDE FELBAMATE FOSPHENYTOIN GABAPENTIN LAMOTRIGINE LEVETIRACETAM OXCARBAZEPINE PHENYTOIN PRIMIDONE TIAGABINE TOPIRAMATE VALPROATE VALPROIC ACID ZONISAMIDE	APTIOM BANZEL CARBATROL CELONTIN CEREBYX DEPACON DEPAKENE DEPAKOTE DILANTIN FANATREX FELBATOL FYCOMPA GABITRIL KEPPRA KLONOPIN LAMICTAL MYSOLINE NEURONTIN ONFI OXTELLAR PEGANONE PHENYTEK POTIGA QUDEXY TEGRETOL TOPAMAX TRILEPTAL TROKENDI VIMPAT ZARONTIN ZONEGRAN
PROTON PUMP INHIBITORS	OVER THE COUNTER ("OTC"): LANSOPRAZOLE DR OTC NEXIUM OTC OMEPRAZOLE OTC OMEPRAZOLE-BICARB OTC PREVACID OTC PRILOSEC OTC ZEGERID OTC	ACIPHEX DEXILANT ESOMEPRAZOLE LANSOPRAZOLE OMEPRAZOLE LANSOPRAZOLE NEXIUM OMEPRAZOLE OMEPRAZOLE OMEPRAZOLE OMEPRAZOLE

PROTON PUMP INHIBITORS (con't)		PREVACID PRILOSEC PROTONIX ZEGERID
ULCERATIVE COLITIS	AZULFIDINE BALSALAZIDE SULFASALAZINE SULFAZINE	APRISO ASACOL COLAZAL DELZICOL DIPENTUM GIAZO LIALDA PENTASA

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. 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.

Questions on accessing Fund website by scanning the QR code should be directed to the Fund's Information Resources Department.



A SUGGESTION FROM THE HEALTH & WELFARE FUND

Compare any provider bills with your Explanation of Benefits (EOB) before you pay an outstanding balance. When you receive a doctor's or dentist's bill reflecting a balance due, please compare the bill with the Explanation of Benefits (EOB) you receive from the Fund. Do not pay any balances until after you have received and reviewed the EOB. The estimated balance on a bill generated before the claim is paid by the Fund may not be correct.

Please note: the EOB reflects any co-pay amounts associated with the medical treatment, whether or not the co-pays were actually paid at the time of treatment.

If you have any questions about a claim, be sure to contact the Health & Welfare Fund.

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.

August 2016 Retirement Income Plan (RIP) Investment Return

The following is the approximate net investment return for the Central PA Teamsters RIP 1987 retirement plan for the 8 month period ending August 31, 2016. The net investment return equals the gross investment return less investment and administrative expenses plus the reallocation of forfeited account balances from terminated nonvested participants who incurred a 5-year break in service.

Plan Approximate Net Investment Return RIP 1987 5.8%

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 results, visit the Central Pennsylvania Teamsters website, www.CentralPATeamsters.com. Click on Pension Fund and then "Reports and Notices."

TO ELIGIBLE PARTICIPANTS COVERED UNDER THE CENTRAL PENNSYLVANIA TEAMSTERS PENSION FUND'S DEFINED BENEFIT PLAN

Summary of Material Modifications

October 2016

We are pleased to present you with this Summary of Material Modifications ("SMM"), which provides a descriptive summary of a recent change to the Central Pennsylvania Teamsters Defined Benefit Plan ("Plan").

On June 15, 2016, the Board of Trustees unanimously adopted an amendment to the Plan, summarized here as follows:

- Beginning on August 1, 2014 and ending on July 31, 2015, for the portion of any contributions made at a rate above \$10.145 per hour (or its \$1,758.47 monthly equivalent), the Future Service benefit shall include an accrual at the rate of 1.25% without regard to the application of any Cap in effect for the applicable Plan Year.
- This amendment is effective on the **later date** of: August 1, 2015 or the effective date of the collective bargaining agreement or participation agreement which requires contributions at a rate above \$10.145 per hour (or its monthly equivalent).
- Below are two examples of the calculation of the Future Service benefit accruals for the applicable Plan Years.
 - 1. The Future Service benefit accrual for a Participant who is credited with a total of 2,080 hours in 2015, but at different contribution rates (1,213 hours from January 1 to July 31 at a pension contribution rate of \$10.545 per hour, and 867 hours from August 1 to December 31 at a pension contribution rate of \$11.045 per hour), will be calculated as follows:

```
1.25\% \times \$10.145 \times 2,080 = \$263.77 (capped at $140), plus 1.25\% \times \$0.40 \times 1,213 = \$6.07 (uncapped based on the prior amendment effective beginning August 1, 2014 and ending July 31, 2015), plus 1.25\% \times \$0.90 \times 867 = \$9.75 (uncapped based on this amendment) Total 2015 Accrual = \$140.00 + \$6.07 + \$9.75 = \$155.82
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2. The 2016 Future Service benefit accrual for a participant who is credited with a total of 2,080 hours (1,213 hours from January 1 to July 31) at a pension contribution rate of \$11.045 per hour will be calculated as follows:

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1.25% x $10.145 x 2,080 = $263.77 (capped at $140), plus 1.25% x $0.90 x 1,213 = $13.65 (uncapped) Total 2016 Accrual = $140.00 + $13.65 = $153.65
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*NOTE: In example 2, **ONLY** hours accumulated before August 1, 2016 can be considered for accruals in excess of the \$140 Cap, because this Amendment does not affect Benefit accruals on or after that date.

If you have any questions, please contact the Pension Fund Office.

The Board of Trustees, Central Pennsylvania Teamsters Pension Fund



Ready to Retire (or just thinking about it)?

When you are ready to retire or have questions about retiring, contact the Central Pennsylvania Teamsters Pension Fund at 1-800-422-8330. Pension Fund representatives can help you with eligibility questions and get you started with the Pension Application process.

Your final benefit amounts cannot be determined until you declare your date of retirement. Your date of retirement for pension benefit purposes is always the 1st day of the month. Refer to your annual pension benefit statement for benefit estimates.

Request for Application Packet (sometimes referred to as the "1st Set of Papers")

Once you have chosen a retirement date, call the Pension Fund three to six months prior to your anticipated retirement date. A Fund representative will check your eligibility, answer your questions, and arrange to have your Request for Application Packet (or "1st set of papers") mailed to you. You must declare your retirement date (always the 1st day of the month) as well as provide your birth certificate and your spouse's birth certificate, marriage certificate, divorce decree or spouse's death certificate, if applicable. Clean copies are acceptable.

Application (2nd Set of Papers)

After you have sent in the above information, the Fund will calculate your final retirement benefits, based on your declared retirement date. This process can take six to eight weeks. Your Retirement Application (sometimes referred to as the "2nd set of papers") will then be mailed to you. These papers will provide your benefit amounts and options for receiving your benefits.

After you have reviewed your application, you can contact the Pension Fund to arrange for assistance in completing your paperwork. You can schedule an appointment at the Fund Office (appointments are usually offered twice daily) or arrange to complete your application over the phone. All appointments should be arranged through the Pension Fund at 1-800-422-8330.

Your completed Application must be approved for payment. This generally occurs on about the 15th of the month. You will then receive a letter stating that your pension has been approved.

When Will I Receive My Pension Check after My Pension has been Approved?

Your checks from the Defined Benefit Plan (or monthly payments from the Retirement Income Plan 1987 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 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 day of the month after your application is approved.

Please allow several days after the first day of the month for your check to arrive by mail. If you do not receive your check by the 10th of the month, you may contact the Fund to place a stop payment and have a reissued check mailed to you.

Direct deposit is available if you wish to be certain that your pension benefit will be available to you on the first business day of the month. You must complete a direct deposit form (available by calling the Pension Fund or by downloading a form from the Fund website) and submit it to the Pension Fund.

If you are electing to have your monthly pension benefit deposited directly 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 the direct deposit to go into effect.

TO ALL PARTICIPANTS COVERED UNDER THE CENTRAL PENNSYLVANIA TEAMSTERS PENSION FUND'S DEFINED BENEFIT PLAN

Summary of Material Modifications October 2016

The Board of Trustees eliminated the lump sum benefit for certain very small benefits in the Defined Benefit Plan. Effective November 30, 2015, all benefits under the Defined Benefit Plan are paid in an annuity form.

The Board of Trustees, Central Pennsylvania Teamsters Pension Fund

Please note: The following notices apply to participants in the Fund's Defined Benefit Plan and Retirement Income Plan 1987. The same rules apply to participants in the Fund's Health and Welfare plans and will be included in the "Active Plan Document" which will be distributed to participants in the Health and Welfare Fund.

SPECIAL NOTE CONCERNING PENSION BENEFITS

A participant or beneficiary dissatisfied with the denial of a claim may appeal that denial to the Trustees. After deciding the appeal, the Trustees will send the claimant a Claim Review Opinion that explains their decision. A claimant dissatisfied with a Claim Review Opinion has the legal right to challenge the Trustees' decision in court by initiating litigation as allowed by law. The Trustees recently adopted Plan amendments that establish deadlines for filing a lawsuit to overturn a Claim Review Opinion. Important information about these Plan amendments appears below:

TO THE ELIGIBLE PARTICIPANTS COVERED BY THE CENTRAL PENNSYLVANIA TEAMSTERS DEFINED BENEFIT PLAN

The following Summary of Material Modifications ("SMM") describes a change recently made to that Plan: On March 9, 2016, the Trustees of the Plan unanimously adopted an amendment to the Defined Benefit Plan summarized as follows:

A participant or beneficiary dissatisfied with a decision set forth in a Claim Review Opinion may seek relief by initiating litigation as allowed by law. Any such litigation must be filed within one-calendar year of the date on which such participant knew or should have known of the decision in the Claim Review , otherwise, any such litigation will be time-barred. The Administrator shall promulgate rules for determining whether particular litigation has been commenced within this one-year period.

TO THE ELIGIBLE PARTICIPANTS COVERED BY THE CENTRAL PENNSYLVANIA TEAMSTERS RETIREMENT INCOME PLAN 1987

The following Summary of Material Modifications ("SMM") describes a change recently made to that Plan: On March 9, 2016, the Trustees of the Plan unanimously adopted an amendment to the Retirement Income Plan 1987 summarized as follows:

A participant or beneficiary dissatisfied with a decision set forth in a Claim Review Opinion may seek relief by initiating litigation as allowed by law. Any such litigation must be filed within one-calendar year of the date on which such participant knew or should have known of the decision in the Claim Review, otherwise, any such litigation will be time-barred. The Administrator shall promulgate rules for determining whether particular litigation has been commenced within this one-year period.



What Everyone Needs to Know About Opioid Overdoses

The U.S. is in the midst of an epidemic of opioid overdoses. Drug overdose is the leading cause of accidental death in the U.S., according to the American Society of Addiction Medicine, and in 2014, 40 percent of the 47,055 fatal drug overdoses that occurred were related to prescription pain relievers. In fact, 78 people in the U.S. die every day from an opioid overdose, according to the Centers for Disease Control and Prevention. In addition to fentanyl, opioids include prescription pain relievers such as oxycodone, hydrocodone, codeine and morphine, as well as the illicit drug heroin. "There is a higher risk of overdose with fentanyl because it is 100 times more potent than morphine and 50 times more potent than heroin," says Dr. Michael Weaver, professor and medical director of the Center for Neurobehavioral Research on Addiction at the McGovern Medical School at the University of Texas Health Science Center-Houston. "The higher the potency, the higher the risk of overdose, because you need a higher dose to get an effect." Here are five things everyone should know about the risks of opioid overdose and how to handle it:

1. You don't need to have an opioid addiction to be at risk for an overdose

"Opioid overdose can happen to anyone, anytime and anywhere," says Dr. Anita Gupta, vice chair and associate professor of pain medicine in the department of anesthesiology at Drexel University. That said, the higher the potency and the higher the dose, the greater the risk of overdose is. In addition, if people take benzodiazepines (like Valium of Xanax) or sleep aids (such as Ambien, Sonata or Lunesta); if they abuse other drugs (like heroin or marijuana); or if they drink alcohol while taking a prescription opioids, the combined use can have deadly consequences. "Anything that slows down breathing increases the risk," Gupta says. "And

people who have kidney disease or liver disease are at higher risk because they may not break down the drugs the way they should."

2. When opioids are taken as prescribed by a physician to manage pain, overdose is unlikely

"Opioids can treat pain really effectively but you need to know how to use them safely," Gupta says. Trouble can set in when people begin taking more pills than prescribed or taking them more often than recommended. The risk of overdose also increases when people take drugs for reasons other than pain relief - to help them sleep, for instance, or to selfmedicate anxiety or depression. "People who have pain can't sleep – it's a huge problem [because] doctors often prescribe sleep meds with opioids," Gupta says, which increases the risk of excessive sedation and overdose. Moreover, "when people who have been taking opioids stop taking them, their tolerance decreases; then, if they restart opioids at the same dose as they had previously, they are at high risk for overdose," notes Dr. Chinazo Cunningham, associate chief of general internal medicine at the Montfiore Health System and Albert Einstein College of Medicine in the Bronx. The same is true of someone who has been taking a particular opioid, then switches to another that's stronger than the previous one.

3. If someone you know is taking a prescription opioid, be alert to the warning signs of an overdose

If the person's breathing slows down, his pupils become tiny, his lips or fingernails develop a bluish tint, his skin becomes slow or irregular – these are signs of a possible overdose. "People may look like they're sleeping – if you try to rouse them and they're not responding, call 911," Gupta says. In the meantime, it's important to know that....

4. An opioid overdose can be treated with the right medication

"Naloxone is an opioid antagonist or blocker that temporarily reverses the effects of opioids for 20 to 30 minutes," Weaver says. "Naloxone is not something that is given and then the person who overdosed is fine — [he or she] must still get to the emergency department for medical treatment." In other words, naloxone buys a bit of time while someone calls 911, but it's not a complete antidote. The drug comes in a nasal spray that can be squirted into the person's nose or as an injection (into a muscle) by a friend or family member. In addition, naloxone can be administered

intravenously by paramedics who arrive at the scene or in a hospital setting. "If naloxone is going to work, it works in minutes," Gupta says, "but sometimes people need a second dose." There is a major push nationwide to improve access to these opioid antagonists. Doctors are increasingly prescribing naloxone when they prescribe opioids, and now it's available without a prescription at some drugstores across the country.

5. It's best to address suspected opioid abuse before tragedy strikes

If you believe someone you care about is abusing opioid painkillers or using them for things other than pain – to help the person get to sleep, relax, relieve stress or lift a bad mood – intervene before things get out of hand.

Start by talking to your primary care physician, who can guide you to the most appropriate help, Gupta suggests. Narcotics Anonymous, a 12-step program modeled after Alcoholics Anonymous, is also a great resource, as is the Substance Abuse and Mental Health Services Administration. "People do quit on their own, but it's much easier with help — and there is help available," Weaver says. If the person is addicted to an opioid, as part of medication-assisted therapy, slowly tapering down the dose or substituting a different opioid for the one being abused can prevent withdrawal symptoms that can lead to relapse, Weaver adds.

Excerpts taken from Pharmaceutical Update, General Prescription Programs, Inc. May/June 2016

Attention Retirees:

If you plan to be away from home for an extended period, please change your address directly through the Pension Fund. **The Post Office will not honor forwarding requests for certain mail such as tax documents. This is especially important during the winter months.** The Fund mails a Form 1099R to each retiree in January for tax filing purposes. The Post Office will not honor a forwarding request for Form 1099R and instead will return it to the Fund.

For example, Mary receives a monthly pension check from the Fund. Each January through March, Mary relocates to Florida to visit her daughter. Last year, Mary requested that the Post Office forward her mail to her daughter's home in Florida. The Fund mailed Mary's Form 1099R to her home. The Post Office had a forwarding request on file for Mary. Since the Form 1099R is a tax document, the Post Office was unable to forward it, and instead returned the Form 1099R to the Pension Fund. Mary did not have her Form 1099R available when she was ready to file her tax return.

This year, Mary will change her address to her daughter's home in Florida by contacting the Fund directly. The Fund will mail Mary's Form 1099R to her daughter's address in Florida, and Mary will receive her Form 1099R in time to file her tax return.

EMPLOYER GROUP COVERAGE REQUIREMENTS UNDER USERRA

The Uniformed Services Employment and Reemployment Rights Act (USERRA), prohibits discrimination against persons because of their service in the Armed Forces Reserve, the National Guard, or other uniformed services.

USERRA requires that employees who are called up to active service and who are eligible for their employer's group health coverage be allowed to continue their health coverage for themselves, their spouse and their dependent children. Individuals electing continuation of coverage on or after December 10, 2004 can elect coverage for up to 24 months. Prior to December 10, 2004, eligible individuals could elect coverage for up to 18 months.

The Act also requires that employers provide an annual notice of USERRA rights and obligations to employees entering military service. This notice requirement can be met by posting the notice in a location where the employer customarily places notices to employees. The requirement also applies to unions that operate hiring halls.

Please call your employer or the Fund Office if you have questions about your USERRA rights.

Retirees Approved For Pensions June 2016 through September 2016

June 2016		July 2016			
		Employer		_	Employer
			ASHBY, RANDALL	776	YRC FREIGHT
ALTLAND, CHARLES R. BENDER SR., DONALD G.	776 776	FLEMING COMPANIES INC. CAROLINA FREIGHT CARRIERS CORP.	BAILEY, SANDRA A.	429	BERKS PRODUCTS CORP.
BISHOP, JAMES A.	776	JONES MOTOR CO INC.	BARTRON, PAUL L.	764	D/B/A VALLEY FARMS DAIRY
BLACK, MICHAEL S.	776	NEW PENN MOTOR EXPRESS INC.	BEDNAREK, JAMES	229	CONSOLIDATED FREIGHTWAYS
BLUMENSCHEIN, DONALD WAYNE	776	ARKANSAS BEST FREIGHT SYS INC.	BOSLEY, JACK D.	771	PENNCAST CORPORATION
BOLTZ, LYNN V.	429	NEW PENN MOTOR EXPRESS INC.	BOWSER, DAVID E.	776	ARKANSAS BEST FREIGHT SYS INC.
BONNO, MARGARET M.	229	C&S WHOLESALE GROCERS	BREIDENSTEIN, DENNIS	771	YELLOW FREIGHT SYSTEM INC.
CAPOOCI, DAVID J.	229	NEW PENN MOTOR EXPRESS INC.	CARSON JR., WALTER N.	771	MUSHROOM TRANSPORTATION CO INC.
CASTELLANO, JOSEPH	229	CONSOLIDATED FREIGHTWAYS	CHRISTINE, RANDY	776	CONSOLIDATED FREIGHTWAYS
CLAY, TERRY L.	429	SCHROCK CABINET COMPANY	COLLINS, DANIEL A.	429	ASSOCIATED WHOLESALERS INC.
CLEVENGER, DONALD R.	429	APEX EQUIPMENT COMPANY	CONSHUE, RALPH V.	429	WEINER IRON & METAL CORP.
CRITCHFIELD, HAROLD V.	776	HESS TRUCKING COMPANY	DAVIS, JAMES D.	999	ARKANSAS BEST FREIGHT SYS INC.
DIETRICH, JAMES R.	429	CLOVER FARMS DAIRY	DEEDS, JOHN A.	429	LENTZ MILLING COMPANY
FILIPKOSKI, RONALD	229	HARPER COLLINS PUBLISHERS INC.	DREXEL, JOY L.	429	CENTRAL PENNSYLVANIA TEAMSTERS
GONZALEZ, GUY	773	ASHLAND CHEMICAL COMPANY	DWIN, RICHARD J.	429 429	STROEHMANN BAKERIES L. C.
HELMINIAK, TIMOTHY L.	764	UNITED PARCEL SERVICE INC. SCHNADIG CORPORATION	EAGER JR., CHARLES R. EDDY, GREG	776	SCHROCK CABINET COMPANY UNITED PARCEL SERVICE INC.
HODOBA, WALTER L. KAHLER, ROGER	764 771	YRC FREIGHT	EISENHOFER, DENNIS	429	BRENNTAG NORTHEAST INC.
KURNIK SR., SAMUEL C.	776	CAROLINA FREIGHT CARRIERS CORP.	ESPEY, RANDALL L.	999	ARKANSAS BEST FREIGHT SYS INC.
LANGEN, JOHN J.	773	MAIERS BAKERY	FEDAK, FRANK CARL	401	OLEY INDUSTRIES LLC D/B/A
LANGJAHR, SUSAN L,	429	VICTUS LTD.	GALANTINI, ENRICO	229	ROADWAY EXPRESS INC,
MARTINEZ, FERNANDO	429	DAIRY FARMERS OF AMERICA INC.	HACKETT, MARK S.	764	VALLEY FARMS TRANSPORT INC.
MATHIAS, KENNETH L.	429	LENTZ MILLING COMPANY	HOROSCHAK, JOHN D.	776	ROADWAY EXPRESS INC.
MEAD, DONNA M.	229	SUPER MARKET SERVICE CORP.	HOUGH, KEVIN N.	429	SCHROCK CABINET COMPANY
MENDSEN, JEFFREY P.	773	MACK TRUCKS INC NVSSC	JORDAN, MARTIN	776	YRC FREIGHT
MERKEL, LINWOOD J.	429	CARL R BIEBER INC.	KRAMER, KEENE N.	773	MARTY'S EXPRESS INC.
MILLER, RUSSELL K.	429	SCHROCK CABINET COMPANY	LENKER, MICHAEL L.	776	UNITED PARCEL SERVICE INC.
MILLER JR., EARL	773	YRC FREIGHT	LINDERMAN, GREGORY	429	POWER PACKAGING AN EXEL CO.
NEHILA, JOHN F.	773	BIMBO BAKERIES USA INC.	MARINO, JOHN M.	776	YRC FREIGHT
NOEL-STAUB, LISA	776	KEYSTONE DISTRIBUTION CTR INC.	MARK, BARBARA L.	776	UNITED PARCEL SERVICE INC.
NYE, MARTIN LEE	429	NEW PENN MOTOR EXPRESS INC.	MAUS, DEBRA J.	429 773	BRENNTAG NORTHEAST INC.
ORTIZ, TERRY C.	429 429	POWER PACKAGING AN EXEL CO. EAGLE DISTRIBUTING COMPANY	MILLER, ALAN F. MOLINARO, JOHN J.	229	DURKEE FAMOUS FOODS HARPER COLLINS PUBLISHERS INC.
PARZANESE, ANTHONY P. PAWELSKI, RAYMOND L RICK	429	D/B/A ALL STAR DISTRIBUTING	MONYER, RICK L.	429	GROCERY HAULERS INC.
PAYNE, PHAON W.	999	ARKANSAS BEST FREIGHT SYS INC.	MUSSER, KENNETH LARRY	771	THE SICO COMPANY
PORTER, CHRISTINE	229	SCRANTON SEWER AUTHORITY	PADINSKE, JOSEPH J.	429	BRENNTAG NORTHEAST INC.
PRUTZMAN, DARRALL S.	429	BOYERTOWN AUTO BODY WORKS INC.	PATTON, DOUGLAS L.	776	YORK DRILLING CO INC.
REEVER, WILLIAM LEE	771	A-P-A TRANSPORT CORPORATION	PAWLIK, JAMES C.	429	SUPERVALU INC.
RIVERA, MARK	429	BERKS PRODUCTS CORP.	RESAVY, KENNETH	229	DEFAZIO EXPRESS INC.
ROBERTSON II, HOWARD M.	229	CONSOLIDATED FREIGHTWAYS	RICHELDERFER JR., LEONARD C.	771	BABYS DY-DEE SERVICE
SEMENOWITZ, LOURDES	773	YELLOW FREIGHT SYSTEM INC.	SMITH, KENNETH R.	429	ARROW CARRIER CORPORATION
SEWARD, LLEWELLYN	776	YRC FREIGHT	STOUT, MICHAEL R.	776	ARKANSAS BEST FREIGHT SYS INC.
SINKOVITZ, CHARLES	776	YRC FREIGHT	SWINEHART, DONALD E.	771	MILLER & HARTMAN INC.
SKOBEL, STEPHEN F.	429	POWER PACKAGING AN EXEL CO.	TOMCYKOSKI, ALFRED	229	KENNEDY BEER DISTRIBUTION CO.
SONON, MICHAEL W.	429	DIETRICHS MILK PRODUCTS INC.	VARNER, HARRY L.	999	ARKANSAS BEST FREIGHT SYS INC.
STRACKBEIN, CATHY	229	C&S WHOLESALE GROCERS	WALSH, DOROTHY A. WELT, MICHAEL ARTHUR	229 776	SUPER MARKET SERVICE CORP. UNITED PARCEL SERVICE INC.
STYER, TERRY L. SWOPE JR., KENNETH L.	429 429	EASTERN INDUSTRIES INC. ASSOCIATED WHOLESALERS INC.	WINGLE, DENNIS G.	429	SCHROCK CABINET COMPANY
TAYLOR, TIMOTHY S.	776	CONSOLIDATED FREIGHTWAYS	WOODARD, EDWARD C.	776	BROCKER REBAR CO INC.
TEMPLIN, DONALD E.	776	HESS TRUCKING COMPANY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Breeker Hebrie
THOROGOOD, GEORGE J.	776	ROADWAY EXPRESS INC.	Λ.,	สแล	+ 2016
TWOMBLY, KENNETH	776	ROADWAY EXPRESS INC.		_	st 2016
TYLER, RANDY L.	776	UNITED PARCEL SERVICE INC.	<u>Name</u> <u>l</u>	Local	<u>Employer</u>
UMBENHAUER, JAMES J.	429	COTT BEVERAGES WYOMISSING INC.	ADAMS, DALE A.	773	W S REICHENBACH & SON INC.
VIVALDI, JAMES R.	429	J C EHRLICH CO INC.	ADAMS, RONALD C.	429	SCHROCK CABINET COMPANY
WENTZEL JR., RALPH L.	429	BRENNTAG NORTHEAST INC.	BANUS, CHRISTINA M.	773	TEAMSTERS LOCAL UNION 773
WHITE, WILLIAM H.	773	YRC FREIGHT	BARSHINGER, KEITH G.	776	PRESTON TRUCKING CO INC.
WITMER, STEVEN R.	776	NEW PENN MOTOR EXPRESS INC.	BENDEL, THOMAS	771	HERMAN R EWELL INC.
			BRENSINGER, MARL JAMES	429	CLOVER FARMS DAIRY
			BURKEY, LARRY E.	776	NATIONS WAY TRANSPORT SERVICES

Retirees Approved For Pensions June 2016 through September 2016

CHILSON, HERMAN	764	MCCORMICK DRAY LINE INC.
COLOSIMO, ANTHONY	229	PEPSI COLA BOTTLING
COMSTOCK, DIANA M.	229	C&S WHOLESALE GROCERS OCEAN LG
CRUZ, JUANA	773	ABM INDUSTRIES
DAVIDSON, GARY W.	776	YRC FREIGHT
DUNCAN, THOMAS H.	773	DEDICATED DELIVERY SERVICE INC.
ELICKER, RICHARD L.	776	PRESTON TRUCKING CO INC.
ERDMAN, CHARLES E.	776	ARKANSAS BEST FREIGHT SYS INC.
ETZWEILER, EUGENE G.	776	ROADWAY EXPRESS INC.
EYSTER, WAYNE L.	776	WILSBACH DISTRIBUTORS INC.
FISCHER, DENNIS M.	771	READY MIXED CONCRETE CO.
GEYER, RICHARD G.	429	MAIERS BAKERY
HAILE, MICHAEL J.	764	UNITED PARCEL SERVICE INC.
HARTUNG, MICHAEL L.	773	P I E NATIONWIDE INC.
HOCH, GREGORY	773	PENSKE TRUCK LEASING CO LP.
HOOVER, WILMER S.	771	HERMAN R EWELL INC.
HOWELL SR., VICTOR L.	771	YELLOW FREIGHT SYSTEM INC.
KEIPER, ROSS L.	773	INTERNATIONAL DISTR CENTER INC.
KRAFT, TABATHA V.	384	MATLACK INC.
KRAMER, ARTHUR A,	429	SINGER EQUIPMENT CO INC.
KROMER, RICHARD R.	773	OLDCASTLE APG INC.
LAMONA, RICKY L.	773	EASTERN INDUSTRIES INC.
LANDIS, BYRON R.	765	SUSQUEHANNA VALLEY FARMS DAIRY
LISK SR., JOHN R.	776	YRC FREIGHT
LONG JR., GEORGE W.	776	ARKANSAS BEST FREIGHT SYS INC.
LOPEZ, EDWIN	429	COTT BEVERAGES WYOMISSING INC.
MACIEJEWSKI, MELANIE	229	HARPER COLLINS PUBLISHERS INC.
MARTENS, WERNER R.	429	ARKEMA INC.
MCEWEN SR., DAVID B.	771	YRC FREIGHT
MELUSKY, FRANCIS E.	429	PETRO OIL
MILLER, DANIEL L.	776	YRC FREIGHT
MILLER SR., JEFFREY M.	429	POWER PACKAGING AN EXEL CO.
MOYER JR., RICHARD G.	429	J C EHRLICH CO INC.
OHL., KENNETH D.	773	SILVER LINES INC.
PARRY, LYNN A.	229	AKZO NOBEL SALT INC.
PEIFFER, GLENN D.	773	EASTERN INDUSTRIES INC.
PREKUP, LINDA M.	429	VICTUS LTD.
RITTER, LYNN L.	773	PEOPLE FIRST
SCHAVNIS, JOSEPH H.	771	JOHN S EWELL INC.
SCHNECK, WILLARD S.	429	ASSOCIATED WHOLESALERS INC.
SHAFFER, BRIAN	776	UNITED PARCEL SERVICE INC.
SHULTZ, GERALD L.	776	JONES MOTOR CO INC.
STRYKER, RICK A.	776	YRC FREIGHT
SWEPPENHEISER, HARRY	401	KEYSTONE COCA-COLA BOTTLING CO.
VRACARICH, TONY J.	429	ASSOCIATED WHOLESALERS INC.
WEBER, DANIEL M.	429	SCHROCK CABINET COMPANY
WEBER, ELVIN L.	429	J C EHRLICH CO INC.
WENTZ, RICKIE P.	773	INTERNATIONAL DISTR CENTER INC.
WERNER, JAMES M.	429	CLOVER FARMS DAIRY
WILDER, EUGENE J.	229	TOPPS CHEWING GUM INC.
WITHERS, JAN E.	429	PENSKE TRUCK LEASING CO LP.
ZIMMERMAN, SCOTT	229	ROADWAY EXPRESS INC.

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Name	Local	<u>Employer</u>	
BACKUS, ALLEN J.	229	CRYSTAL SODA WATER CO.	
BECK JR., LEROY M.	776	UNITED PARCEL SERVICE INC.	
BEERS JR., WALTER F.	771	YRC FREIGHT	
BEITER, JOHN R.	401	WISE FOODS	
BEST, LINDA M.	773	TEAMSTERS LOCAL UNION 773	
BIONDI, MARK D.	229	ROADWAY EXPRESS INC.	
BLOSSER, CRAIG A.	776	DRIVERS INC.	

BONSTEIN, ROBERT	773	ASHLAND CHEMICAL COMPANY
BOYCE, MICHAEL W.	764	B & D TRANSFER
CAPRI, JOSEPH A.	229	BURSCHEL DAIRY COMPANY
CORNELL, BARRY M.	776	UNITED PARCEL SERVICE INC.
DIEHL, RICHARD A.	771	WEYERHAEUSER COMPANY
DREISBACH, RICHARD O.	764	MCCORMICK DRAY LINE INC.
FLORES, RONALD D.	776	YRC FREIGHT
FOSTER, TIMOTHY	429	UNITED PARCEL SERVICE INC.
FRYBERGER, ROBERT	776	YORK CONCRETE CO.
GIBSON, SHELLY	429	LENTZ MILLING COMPANY
GODSEY, BART R.	776	UNITED PARCEL SERVICE INC.
GUSTIN, MICHAEL N.	776	UNITED PARCEL SERVICE INC.
HELMINIAK, TIMOTHY L.	764	UNITED PARCEL SERVICE INC.
HENRY, KURT L.	429	EAGLE DISTRIBUTING COMPANY
HOLLEY, SUSAN M.	429	LEHIGH VALLEY DAIRIES INC.
HORNER III, RICHARD	776	YRC FREIGHT
HUGHES, ROBIN S.	776	YRC FREIGHT
KUSHLA, MICHAEL S.	776	CONSOLIDATED FREIGHTWAYS
LEACH, JACK C.	776	ARKANSAS BEST FREIGHT SYS INC.
LESINSKI, ALAN S.	229	NORTHEASTERN TRAINING INST.
MANLEY, MARK P.	776	UNITED PARCEL SERVICE INC.
MARAS, RONALD E.	429	CLOVER FARMS DAIRY
MCCALISTER, PAUL E.	776	ANDERSON LOGISTICS
MCDONALD, MICHAEL E.	776	YORKTOWNE PAPER MILLS INC.
MCNAUGHTON, JOHN E.	776	CAROLINA FREIGHT CARRIERS CORP.
MILLER, TRACEY J.	764	MARY MACINTOSH OF PA INC.
MURPHY SR., GARY L.	771	YRC FREIGHT
NAPLES, DAVID J.	776	UNITED PARCEL SERVICE INC.
NESS, STEVEN E.	776	YORK GROUP INC.
NEW-DAY, PAUL J.	776	ARKANSAS BEST FREIGHT SYS INC.
OAKLEY JR., DONALD D.	401	R F TRUESDELL COMPANY INC.
OESTERLING, CRAIG R.	429	INTERSTATE CONTAINER LLC.
PALFREY, BARRY S.	229	NEW PENN MOTOR EXPRESS INC.
PISKORSKI, HENRY	771	YRC FREIGHT
REAM, BRUCE S.	429	WINDSOR SERVICE TRUCKING
RIDALL, CLEE A.	776	YRC FREIGHT
ROMICH, DAVID SCOTT	429	UNITED PARCEL SERVICE INC.
ROTHAMEL, NORMA L.	429	CLOVER FARMS DAIRY
SANDIDGE, WILLIAM L.	771	YELLOW FREIGHT SYSTEM INC.
STARR, GARY	776	YRC FREIGHT
STEMPHOSKI, ROBERT J.	401	WYOMING QUALITY BEVERAGE
TAYLOR, RUSSELL	229	TOPPS CHEWING GUM INC.
YEAGER JR., DAVID F.	776	YRC FREIGHT
YEAGER SR., GARY L.	429	SINGER EQUIPMENT CO INC.



Central PA Teamsters

P.O. BOX 15223 Reading, PA 19612-5223

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Lehigh Valley, PA Permit No. 1

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 7:00 a.m. to 4:00 p.m.

Telephone Numbers:

Health & Welfare

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

Pension

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

REMINDER

Keep Your Information Current with the Fund Office

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

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 Bolig

Union Trustee
Eric Bucheit
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

Joseph J. Samolewicz Administrator Martin L. Cullen Assistant Administrator

Professional Advisors:

Beyer-Barber Health and 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 SEI Investments Tortoise Capital Advisors, LLC Walter Scott & Partners, Ltd. Westfield Capital Management, LLC William Blair & Company, LLC

Investment Managers for the Central Pennsylvania Teamsters Pension Fund

Aronson+Johnson+Ortiz, LP Causeway Capital Management, LLC Income Research & Management Loomis, Sayles & Company LSV Asset Management Northern Trust Investments Inc. Oakbrook Investments Parametric Portfolio Associates, LLC Penn Capital Management PGIM Real Estate Pictet Asset Management Ltd. Principal Financial Group Segall Bryant & Hamill Tortoise Capital Advisors, LLC Walter Scott & Partners, Ltd. Westfield Capital Management Company, LLC William Blair & Company, LLC