

# GUARDIAN

Reading, Pennsylvania

HEALTH AND WELFARE/PENSION GUARDIAN NEWSLETTER



From the Central  
Pennsylvania Teamsters  
Health & Welfare and  
Pension Funds!

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### \*IMPORTANT NOTICE\*

PLEASE BE SURE TO REVIEW THE UPDATED PREFERRED BRAND NAME DRUGS LIST FOUND ON PAGES 9-10 WHICH IS EFFECTIVE JANUARY 1, 2021.

PLEASE CONTINUE TO CHECK [WWW.CENTRALPATEAMSTERS.COM](http://WWW.CENTRALPATEAMSTERS.COM) FOR IMPORTANT INFORMATION UPDATES ON OFFICE HOURS AND OTHER IMPORTANT ANNOUNCEMENTS DURING THIS TIME.

THIS NEWSLETTER CONTAINS AN INSERT WITH IMPORTANT INFORMATION REGARDING CHANGES TO THE DEFINED BENEFIT AND RETIREMENT INCOME PLAN. THE INSERT SHOULD BE RETAINED WITH YOUR SPD FOR FUTURE REFERENCE.

THIS NEWSLETTER CONTAINS INSERTS WITH IMPORTANT INFORMATION REGARDING CHANGES TO PLANS 13, 13Y, 14, 16 AND R7/R7-65. THE INSERTS SHOULD BE RETAINED WITH YOUR ACTIVE PLAN DOCUMENT FOR FUTURE REFERENCE.

## The Fund Office Updates

Out of necessity we have shifted all member service interactions to be supported remotely by Phone or email. Mail can be left in the front door mail receptacle. You may contact the Fund office by phone between 8:00 a.m. to 3:00 p.m., Monday through Friday by calling 610-320-5500 and selecting the department that you are trying to reach when prompted.

- For the Health & Welfare department, Press 1
- For the Pension department, Press 2
- For the Cash Receipts department, Press 3
- For the Precertification department, Press 4
- For Prescriptions, Press 5
- For Coordination of Benefits, Press 6

Participants can leave a voicemail message on the general phone line if you are unable to wait for a phone representative or you are calling after hours. You can also reach us by email through our contact section located on our website. Please continue to check out website for any important changes for the opening of our Lobby services. We will be including an update in our Winter Newsletter on the reopening of the Lobby for our members. Please stay tuned.

**CENTRAL PENNSYLVANIA TEAMSTERS  
HEALTH & WELFARE FUND  
NOTICE OF NONDISCRIMINATION**

The Central Pennsylvania Teamsters Health & Welfare Fund ("Fund") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Fund does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Central Pennsylvania Teamsters Health & Welfare Fund:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact Joseph J. Samolewicz, Administrator.

If you believe that the Fund has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Joseph J. Samolewicz, Administrator, 1055 Spring Street, Wyomissing, PA 19610-1747, Toll Free in PA: 1-800-422-8330; Toll Free in USA: 1-800-331-0420, email address: [jjsamolewicz@CentralPaTeamsters.com](mailto:jjsamolewicz@CentralPaTeamsters.com). You can file a grievance in person or by mail or email. If you need help filing a grievance, Mr. Samolewicz is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-868-1019, 800-537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

1-610-320-5500. لكل رفوت، ان اجم، ةي وغللا ةدعاسملا تامدخ، ةي برعلا ةغللا شحتت تنك اذا: ةي بننت.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-610-320-5500

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-610-320-5500.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-610-320-5500.

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-610-320-5500.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-610-320-5500.

ध्यान दें: यदि आप हंदी बोलते, भाषा सहायता सेवाओं, नि: शुल्क, आप के लिए उपलब्ध है। 1-610-320-5500 कहते हैं।

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-610-320-5500.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-610-320-5500 번으로 전화해 주십시오.

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-610-320-5500.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-610-320-5500.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-610-320-5500.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-610-320-5500.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-610-320-5500.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-610-320-5500.



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1



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2



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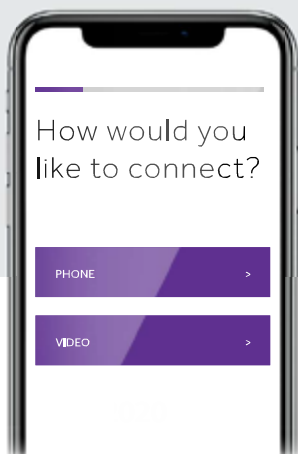
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# Central Pennsylvania Teamsters Health and Welfare Fund Prescription Benefit Plans

## Plans 13, 14P, R7 and R7/65

<b>RETAIL *</b>	<b>Generic</b> for up to a 34 day supply	\$5
	<b>Brand Preferred</b> for up to a 34 day supply	\$15
	<b>Brand Non-Preferred</b> for up to a 34 day supply	\$30
<b>MAIL ORDER</b>	<b>Generic</b> for up to a 90 day supply	\$15
	<b>Brand Preferred</b> for up to a 90 day supply	\$30
	<b>Brand Non-Preferred</b> for up to a 90 day supply	\$60
<b>SPECIALTY</b>	<b>Retail</b> up to a 30 day supply	\$150
	<b>Mail Order</b> up to a 90 day supply	\$300

## Plan 13Y

<b>RETAIL *</b>	<b>Generic</b> for up to a 34 day supply	\$10
	<b>Brand Preferred</b> for up to a 34 day supply	\$30
	<b>Brand Non-Preferred</b> for up to a 34 day supply	\$50
<b>MAIL ORDER</b>	<b>Generic</b> for up to a 90 day supply	\$30
	<b>Brand Preferred</b> for up to a 90 day supply	\$60
	<b>Brand Non-Preferred</b> for up to a 90 day supply	\$100
<b>SPECIALTY</b>	<b>Retail</b> up to a 30 day supply	\$150
	<b>Mail Order</b> up to a 90 day supply	\$300

## Plans 14 and 16

<b>RETAIL *</b>	<b>Generic</b> for up to a 34 day supply	Option A \$5	Option B \$10	Option C \$10
	<b>Brand Preferred</b> for up to a 34 day supply	\$15	\$20	\$30
	<b>Brand Non-Preferred</b> for up to a 34 day supply	\$30	\$40	\$50
<b>MAIL ORDER</b>	<b>Generic</b> for up to a 90 day supply	\$15	\$30	\$30
	<b>Brand Preferred</b> for up to a 90 day supply	\$30	\$40	\$60
	<b>Brand Non-Preferred</b> for up to a 90 day supply	\$60	\$80	\$100
<b>SPECIALTY</b>	<b>Retail</b> up to a 30 day supply	\$150	\$150	\$150
	<b>Mail Order</b> up to a 90 day supply	\$300	\$300	\$300

\*Effective January 1, 2016, **any** drug that costs \$3,000 or more per month will be classified as a "Specialty or High Cost Drug."

\*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.





# 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](http://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, methotrexate, and xeljanz.

## 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
<b>ALZHEIMER'S DISEASE</b>	DONEPEZIL GALANTAMINE RIVASTIGMINE & ALL OTHER GENERICS	ARICEPT EXELON NAMENDA RAZADYNE
<b>ANGIOTENSIN RECEPTOR BLOCKERS (ANTIHYPERTENSIVES)</b>	CANDESARTAN EPROSARTAN IRBESARTAN LOSARTAN TELMISARTAN VALSARTAN & ALL OTHER GENERICS	ATACAND AVAPRO BENICAR BYVALSON COZAAR DIOVAN EDARBI MICARDIS
<b>ANTI-DEPRESSANTS</b>	BUPROPION HCL CITALOPRAM DESVENLAFAXINE DULOXETINE ESCITALOPRAM FLUOXETINE NEFAZODONE SERTRALINE TRAZODONE VENLAFAXINE & ALL OTHER GENERICS	APLENZIN BRINTELLIX CYMBALTA EFFEXOR FETZIMA FORFIVO XL KHEDEZLA LEXAPRO PRISTIQ PROZAC SPRAVATO TRINTELLIX VIBRYD WELLBUTRIN ZOLOFT
<b>ANTI-GLAUCOMA EYE PREPARATIONS</b>	APRACLOPIDINE HCL BETAXOLOL BRIMONIDINE CARTEOLOL DORZOLAMIDE LATANOPROST LEVOBUNOLOL METIPRANOLOL PILOCARPINE TIMOLOL & ALL OTHER GENERICS	ALPHAGAN AZOPT BETIMOL BETOPTIC COMBIGAN COSOPT IOPIDINE ISTALOL LUMIGAN PHOSPHOLINE SIMBRINZA TIMOPTIC TRAVATAN TRUSOPT XALATAN XELPROS ZIOPTAN
<b>ANTIPSYCHOTICS</b>	CLOZAPINE OLANZAPINE QUETIAPINE RISPERIDONE ZIPRASIDONE & ALL OTHER GENERICS	ABILIFY - Evidence of "medical necessity" must include documentation of failure of all other therapies, including non-drug intervention

<b>BETA-ADRENERGIC BLOCKERS</b> (ANTIHYPERTENSIVES)	ACEBUTOLOL ATENOLOL BETAXOLOL BISOPROLOL NADOLOL PINDOLOL PROPRANOLONOL SOTALOL TIMOLOL & ALL OTHER GENERICS	BYSTOLIC
<b>CALCIUM CHANNEL BLOCKERS</b> (ANTIHYPERTENSIVES)	AMLODIPINE ATORVASTATIN AMLODIPINE BESYLATE AMLODIPINE VALSARTAN DILTIAZEM FELODIPINE ISRADIPINE NICARDIPINE NIFEDIPINE NISOLDIPINE VERPAMIL & ALL OTHER GENERICS	ADALAT CADUET CALAN CARDENE CARDIZEM CARTIA XT EFIDITAB EXFORGE NORVASC PROCARDIA XL SULAR TIAZAC ER VERELAN
<b>CONTRACEPTIVES</b>	All Generic Contraceptives	All Brand Contraceptives
<b>DIABETES</b>	ACARBOSE GLIMEPIRIDE GLIPIZIDE GLYBURIDE JANUMET JANUVIA METFORMIN PIOGLITAZONE REPAGLINIDE & ALL OTHER GENERICS	INVOKANA JARDIANCE JENTADUETO KAZANO QTERN SEGLUROMET STEGLATRO STEGLUJAN TRADJENTA
<b>NARCOTIC ANALGESICS</b>  <b>NOTE:</b> 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 OXYMORPHONE TRAMADOL & ALL OTHER GENERICS	APADAZ ARYMO DEMEROL DOLOPHINE LORTAB NORCO NUCYNTA OPANA OXYCONTIN PERCOCET TYLENOL WITH CODEINE ULTRACET ULTRAM VICODIN XTAMPZA
<b>OSTEOPOROSIS</b>	ALENDRONATE CALCITONIN-SALMON IBANDRONATE RALOXIFENE RISEDRONATE & ALL OTHER GENERICS	ACTONEL ATELVIA BINOSTO BONIVA EVENITY EVISTA FOSAMAX MIACALCIN PROLIA





## Step Therapy

*Continued*

<b>RHEUMATOID ARTHRITIS</b>	HIGH DOSE IBUPROFEN AND NAPROXEN (PRESCRIPTION STRENGTH) CELECOXIB NABUMETONE PIROXICAM DIFLUNISAL INDOMETHACIN KETOPROFEN ETODOLAC PREDNISONE CYCLOPHOSPHAMIDE CYCLOSPORINE AZATHIOPRINE METHOTREXATE XELJANZ & ALL OTHER GENERICS	ACTEMRA CIMZIA ENBREL HUMIRA INFLECTRA KEVZARA KINERET OLUMIANT ORENCIA RENFLEXIS SIMPONI STELARA TALTZ
<b>URINARY AGENTS</b>	TOVIAZ FLAVOXATE OXYBUTYNIN TOLTERODINE TROSPIMUM & ALL OTHER GENERICS	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.

<b>ADD &amp; ADHD</b>	AMPHETAMINE SALTS D-AMPHETAMINE ER DEXMETHYLPHENIDATE DEXTROAMPHETAMINE METHAMPHETAMINE METHYLPHENIDATE & ALL OTHER GENERICS	ADDERALL ADHANSIA XR ADZENYS CONCERTA COTEMPLA XR DAYTRANA DESOXYN DEXEDRINE EVEKEO FOCALIN JORNAY METADATE METHYLIN PROCENTRA QUILLIVANT RELEXXII RITALIN VYVANSE ZENZEDI
<b>ANTI-MIGRAINE</b>	DIHYDROERGOTAMINE ERGOTAMINE-CAFFEINE TABLET NARATRIPTAN RIZATRIPTAN SUMATRIPTAN ZOLMITRIPTAN & ALL OTHER GENERICS	AAIMOVIG AJOVY AMERGE CAFERGOT D.H.E.45 EMGALITY ERGOMAR FROVA IMITREX MAXALT MIGERGOT MIGRANAL RELPAK REYVOW SUMAVEL

		TOSYMRA TREXIMET UBELVY ZEMBRACE SYMTOUCH ZOMIG
<b>ANTI-CONVULSANTS</b>	CARBAMAZEPINE CLONAZEPAM DIVALPROEX ETHOSUXIMIDE FELBAMATE FOSPHENYTOIN GABAPENTIN LAMOTRIGINE LEVETIRACETAM OXCARBAZEPINE PHENYTOIN PRIMIDONE TIAGABINE TOPIRAMATE VALPROATE VALPROIC ACID ZONISAMIDE & ALL OTHER GENERICS	APTIOM BANZEL CARBATROL CELONTIN CEREBYX DEPACON DEPAKENE DEPAKOTE DILANTIN EPIDIOLEX FANATREX FELBATOL FYCOMPA GABITRIL KEPPRA KLONOPIN LAMICTAL MYSOLINE NAYZILAM NEURONTIN ONFI OXTELLAR PEGANONE PHENYTEK QUDEXY SYMPAZAN TEGRETOL TOPAMAX TRILEPTAL TROKENDI VALTOCO VIMPAT ZARONTIN ZONEGRAN
<b>PROTON PUMP INHIBITORS</b>	OVER THE COUNTER ("OTC"): LANSOPRAZOLE DR OTC NEXIUM OTC OMEPRazole OTC OMEPRazole-BICARB OTC PREVACID OTC PRILOSEC OTC ZEGERID OTC	ACIPHEX DEXILANT ESOMEPRazole NEXIUM OMEPRazole-BICARB PANTOPRAZOLE PREVACID PRILOSEC PROTONIX ZEGERID
<b>ULCERATIVE COLITIS</b>	AZULFIDINE BALSALAZIDE MESALAMINE SULFASALAZINE & ALL OTHER GENERICS	APRISO ASACOL COLAZAL DELZICOL DIPENTUM ENTYVIC HUMIRA LIALDA PENTASA SIMPONI STELARA

## RX NEWS



To locate a pharmacy in  
your area please contact  
Global Pharmaceutical  
Benefits (formerly GPP)  
at 1-800-341-2234

Effective 4/1/2020  
rev. 3/3/2020



# PREFERRED BRAND NAME DRUG LIST

**\*\*PLEASE GIVE TO YOUR PHYSICIAN\*\***

**EFFECTIVE DATE: January 1, 2021**

**VERY IMPORTANT**

Please note that this drug list is subject to change without notice.

## **ANALGESICS**

### ***Anti-Migraine***

Aimovi  
Emgality

### ***Opioid Agonist***

Xtampza ER

### ***Misc***

Depen  
Ridaura Caps

## **ANTI-ADDICTIVE AGENTS**

Suboxone  
Zubsolv

## **ANTI-INFECTIVES**

### ***Hepatitis Agents***

Epclusa  
Harvoni  
Mavyret  
Sovaldi  
Vosevi

### ***Miscellaneous Anti-infectives***

Emverm

## **ANTINEOPLASTIC**

Trexall

## **CARDIOVASCULAR**

### ***Angiotensin Receptor Blockers & Combinations***

Entresto

### ***Anti-adrenergic Agents***

Bystolic

### ***Anti-Arrhythmics***

Lanoxin Tabs  
Norpace CR 100mg,  
150mg Caps

### ***Anti-hyperlipidemics***

Livalo  
Praluent  
Repatha

### ***Beta Blockers & Combinations***

Bystolic

## ***Diuretics***

Carospir 25mg/5ml sus

## ***Nitrates***

Nitro-Bid 2% ointment

## **CNS AGENTS**

### ***Attention Deficit Disorder Treatment***

Vyvanse

### ***Multiple Sclerosis Agents***

Aubagio  
Avonex  
Gilenya  
Plegridy Pen & Syr  
Tecfidera

### ***Miscellaneous CNS agents***

Nuedexta Caps

## **DERMATOLOGICALS**

### ***Anti-bacterial Agents***

Mirvaso

### ***Hemorrhoidal Preparations:***

Proctofoam HC

### ***Psoriasis & Eczema Agents:***

Eucrisa 2% ointment

## **EARS, NOSE & THROAT**

### ***Nasal Products, Antihistamines***

Dymista

### ***Otics***

Ciprodex OTIC

## **ENDOCRINE**

### ***Androgens/Estrogens***

Androderm Patch

### ***Corticosteroids***

Medrol 2mg Tablet  
Millipred Tabs 5mg

### ***Gout***

Colcrys

### ***Growth Hormones***

Norditropin Flexpro

## ***Hyperglycemics Dipeptidyl Peptidase-4 & Combos***

Janumet  
Janumet XR  
Januvia  
Jentadueto  
Jentadueto XR  
Tradjenta

### ***GLP-1 Recep. Agonist***

Bydureon  
Bydureon BCise Autoinj  
Byetta  
Ozempic  
Rybelsus Tab  
Trulicity  
Victoza

### ***Insulins***

Humalog  
Humulin  
Lantus/Solostar  
Levemir/Flextouch  
Novolin  
Novolog  
Relion Novolin  
Soliqua  
Toujeo Solostar  
Toujeo Max Solostar  
Tresiba Vial, Flextouch

### ***Sodium-Glucose Co Transporter 2 Inhib***

Glyxambi  
Invokamet  
Invokamet XR  
Invokana  
Jardiance  
Synjardy  
Synjardy XR

### ***Thiazolidinediones***

Avandia

### ***Miscellaneous***

Baqsimi Spray  
Glucagen Kit  
Glucagon Kit  
Symlinpen

# PREFERRED BRAND NAME DRUG LIST

**\*\*PLEASE GIVE TO YOUR PHYSICIAN\*\***

**EFFECTIVE DATE: January 1, 2021**

**VERY IMPORTANT**

Please note that this drug list is subject to change without notice.

## GASTROINTESTINAL AGENTS

### *Anti-ulcer*

Pylera

### *Digestants*

Creon

Zenpep DR

### *Gastric Acid Secretion Reducers*

Dexilant

### *Miscellaneous Products,*

### *Gastrointestinal*

Apriso

Linze

Movantik

Symproic Tab

Viberzi Tabs

## HEMATOLOGY

### *Anti-Coagulants,*

### *Direct Factor X*

Eliquis

Xarelto

### *Miscellaneous*

Pradaxa

### *Anti-Platelet*

Brilinta

### *Miscellaneous Agents*

Aranesp

Neulasta

Udenyca

Zarxio

## IMMUNOSUPPRESSANTS

Dupixent

Enbrel

Humira

Otezla

Skyrizi

Stelara

Trexall

## OB/GYN

### *Estrogenics*

Climara Pro Patch

Divigel Packets

Duavee

Estring

Menest 0.3 mg

Premarin

Premarin vaginal cream

Premphase

Prempro

### *Topical Anti-Infectives*

Cleocin Vaginal Ovules

### *Miscellaneous*

Orilissa Tab

## OPHTHALMIC AGENTS

### *Anti-histamines*

Pazeo

### *Anti-infectives*

Moxeza

### *Glaucoma Agents:*

Alphagan P 0.1%, 0.15%

Azopt

Combigan

Lumigan

Rhopressa

Rocklatan

Simbrinza

Travatan Z

Xelpros

### *Miscellaneous*

Prolensa

Restasis

Xidra

## RESPIRATORY AGENTS

### *Anti-muscarinic and Combos*

Incruse Ellipta

Spiriva Handihaler

Spiriva Respimat

### *BetaAdrenergic & Combos*

Anoro Ellipta

Combivent

Proair HFA

Proair Respiclick

Serevent Diskus

Stiolto Respimat

Symbicort

Trelegy Ellipta

Ventolin HFA

### *Glucocorticoids, Inhalation*

Arnuity Ellipta

Flovent Diskus

Flovent HFA

Pulmicort Flexhaler

QVAR redihaler

Symbicort

## UROLOGICAL AGENTS

### *Anesthetics*

Elmiron

### *Antispasmodics*

Myrbetriq

\* Please note, certain drugs contained in this list are subject to Step Therapy. Please refer to the Step Therapy List of drugs on page 5-8 of this newsletter.

\*\* Preferred Brand Formulary Drugs that cost in excess of \$3,000 are subject to a \$150 copay.

## 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 can assist you with your Application over the phone. Please be sure to review your benefit options on your paperwork so that you are familiar with them prior to calling.

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, your Power of Attorney must provide the Fund with a copy of the Durable Power of Attorney before any information. The Pension Fund also requires, the Power of Attorney’s to contact the Pension Fund Office and provide their mailing address and your physical address. As Power of Attorney, you must sign the Participant’s name first and your name as Power of Attorney. For example – John J. Smith, Jane J. Smith, POA.

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. All new Retirees are required to have their checks directly deposited.

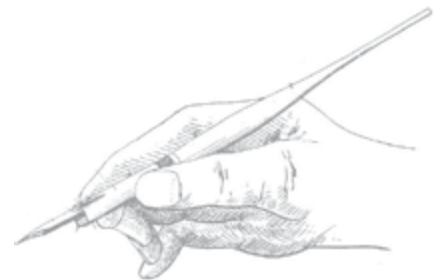
6. **Website** – Please visit the website for Summary Plan Descriptions, Forms and Notices, Important Items to Remember or to view your RIP 1987 balance.

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.



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Now more than ever is the time to consider moving to direct deposit instead of receiving your check in the mail. You can find a direct deposit form under the Pension forms section on the website.



## 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 Active Plan Document 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 non-covered 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.

Visit our website at [www.CentralPATeamsters.com](http://www.CentralPATeamsters.com)



## Open Enrollment

If you are eligible to enroll in Central Pennsylvania Teamsters Health and Welfare Fund and did not do so, you may enroll yourself and/or your eligible dependents during the Open Enrollment period, November 1, 2020 to December 31, 2020.

Please remember that, if you enroll yourself, you must also enroll all of your eligible dependents, unless your collective bargaining agreement allows for "dependent opt-out".

Enrollment forms and plan descriptions are available by calling the Central Pennsylvania Teamsters Health and Welfare Fund at 610-320-5500.

**2021 Summaries of Benefits and Coverage ("SBC's") are now listed on [www.CENTRALPATEAMSTERS.com](http://www.CENTRALPATEAMSTERS.com)**



# Retirees Approved for Pensions August 2020 through September 2020

**Name Local Employer**

## August 2020

BRINER JR, BYRON E	429	ARAMARK UNIFORM & CAREER APPAR
CASSATT, FRED K	776	ARKANSAS BEST FREIGHT SYS INC
CORROW, LARRY A	229	CONSOLIDATED FREIGHTWAYS
DALEY, JAMES J	429	DEAN DAIRY FLUID LLC
DANAS SR, DAVID E	773	EASTERN INDUSTRIES INC
DEBRODY, CHARLES A	764	SCHNEIDER-VALLEY FARMS INC
DELUSSEY, SUSAN K	429	ASSOCIATED WHOLESALERS INC
DITZLER, RICHARD A	429	LEHIGH VALLEY DAIRIES INC
EISELE, ERIC S	429	J C EHRLICH CO INC
FEINAUER, TODD H	429	SINGER EQUIPMENT CO INC
GREEN JR, ROBERT W	773	A-P-A TRANSPORT CORPORATION
HAAS, DUWAYNE A	764	NEW PENN MOTOR EXPRESS INC
HINKLE, DAVID C	773	EASTERN INDUSTRIES INC DIV OF
JOHNSON, KIM D	429	ASSOCIATED WHOLESALERS INC
KITZMILLER, LISA	776	YORK COUNTY TRANSP AUTHORITY
KLINE, KATHLEEN M	429	ARKEMA INC
KOLASA, THOMAS G	776	CONSOLIDATED FREIGHTWAYS
LOPEZ, ALFONSO G	429	SUPERVALU INC
MCDANIELS JR, FRANK S	776	HESS TRUCKING COMPANY
MOORER, VICTOR	429	ASSOCIATED WHOLESALERS INC
MUSHALLA, ANTHONY	401	ACME MARKETS INC
MYERS, STEVE W	776	ANDERSON LOGISTICS
OLIVER, CAROL A	429	RDG REGIONAL AIRPORT AUTHORITY
PAWLYK, JAMES	229	CONSOLIDATED FREIGHTWAYS
PEREZ, MICHAEL A	771	ENERGY FLEET RESOURCES INC
PURCELL, JOSEPH	429	POLLOCK-READING INC
RANDALL, AUSTIN	776	UNITED PARCEL SERVICE INC
ROHRBAUGH, BRYAN K	776	ASSOCIATED WHOLESALERS INC
ROYAL, TERRANCE D	429	DEAN DAIRY FLUID LLC
SANTARSIERO, JOHN J	229	DEFAZIO EXPRESS INC
SCHAEFFER, THOMAS E	429	LEHIGH VALLEY DAIRIES DIV OF
SHAY, ROBERT	776	YRC FREIGHT
SNAVELY JR, ROY	776	YRC FREIGHT
STASIAK, JERZY	776	YRC FREIGHT
STOFKO, THERESA A	429	MAIERS BAKERY
STONE, CLAY	771	YRC FREIGHT
THOMPSON, JODY J	401	SHAWNEE READY MIX CONCRETE CO
TOLBERT, DOUGLAS W	771	YELLOW FREIGHT SYSTEM INC
TOWNSLEY, MICHAEL S	776	LEVINSON STEEL COMPANY
TROUTMAN III, ROBERT S	429	COTT BEVERAGES WYOMISSING INC
VILLAGOMEZ, JUAN MANUEL	773	EASTERN INDUSTRIES INC
WATERS, RANDALL E	773	SILVER LINES INC
WILTROUT, KENNETH L	429	BERKS PRODUCTS CORP
WOLF, JEAN L	776	ASSOCIATED WHOLESALERS INC
WONDERLY, KEITH G	773	EASTERN INDUSTRIES INC DIV OF
WRENN, HOLLY	429	POWER PACKAGING, AN EXEL CO

**Name Local Employer**

## September 2020

BALLIETT, MICHAEL J	429	GROCERY HAULERS INC
BANKS, BECKY	776	YORK COUNTY TRANSP AUTHORITY
BAUDER JR, EDWIN A	773	T B A SUPPLY CO
BESHORE, CRAIG	776	UNITED PARCEL SERVICE INC
BLEY, RICHARD J	773	W S REICHENBACH & SON INC
BOBB, DAVID A	776	ADAM WHOLESALERS INC
BORTZ, DALE W	429	SUPERVALU INC
BORZOK, WALTER J	429	LEHIGH VALLEY DAIRIES INC
BRENSINGER, RICKY D	429	BERKS PRODUCTS CORP
BROWN, MICHAEL T	776	METALS USA
BUTCHKO, JOSEPH R	429	PLYMOUTH ROCK TRANSPRTATN CORP
CHAPPELL, ROBERT W	776	ARKANSAS BEST FREIGHT SYS INC
CHOPKO, GEORGE J	229	CONSOLIDATED FREIGHTWAYS
DANIELS, KEVIN S	429	COTT BEVERAGES WYOMISSING INC
DUKE, JEFFREY W	771	LEROY E DUKE DISTRIBUTOR
EVASTON, SHAWN P	771	THE SICO COMPANY
FODNESS, PHILIP	429	UNITED PARCEL SERVICE INC
GIRARD, DEBORAH	776	YRC FREIGHT
HECKMAN, DALE L	429	SINGER EQUIPMENT CO INC
HILDEBRAND, RANDY M	429	ARAMARK UNIFORM & CAREER APPAR
HOCKENBERRY, JAMES L	776	YRC FREIGHT
HOUSER, THOMAS W	776	ROADWAY EXPRESS INC
HOWELL, MATTHEW	401	ACME MARKETS INC
KIRKHOFF, DEAN A	429	CLOVER FARMS DAIRY
LEVAN JR, PAUL B	429	DIETRICH'S MILK PRODUCTS
MENNOR, MARK L	771	YELLOW FREIGHT SYSTEM INC
MEYER, STANLEY W	429	ASSOCIATED WHOLESALERS INC
MILLER, KEVIN J	429	EXIDE CORPORATION
MILLER, SCOTT A	776	NATIONS WAY TRANSPORT SERVICES
NOLT, LEVERNE K	776	RANGER TRANSPORTATION INC
OGDEN, RICHARD C	771	THE SICO COMPANY
ORT, PAUL H	776	CONSOLIDATED FREIGHTWAYS
OSWALD, DUANE S	229	YRC FREIGHT
PADUHOVICH, JOHN M	776	ARKANSAS BEST FREIGHT SYS INC
PARKS, CRAIG J	773	UNITED PARCEL SERVICE INC
RAKER, RONALD	776	UNITED PARCEL SERVICE INC
ROSETTI, LARRY L	229	CONSOLIDATED FREIGHTWAYS
ROWE JR, JACK C	429	DAIRY FARMERS OF AMERICA INC
ROWLANDS, KEVIN J	229	CONSOLIDATED FREIGHTWAYS
SEREDYCH, ROBIN J	776	YORK COUNTY TRANSP AUTHORITY
SHERBO, B MIKEL	776	ARKANSAS BEST FREIGHT SYS INC
SHOLL, JEFFEREY LYNN	429	COTT BEVERAGES WYOMISSING INC
SMITH, ELMER E	773	GENERAL SUPPLY COMPANY
STASIAK, JERZY	776	YRC FREIGHT
STAVISH, GARY	229	TOPPS CHEWING GUM INC
WOOD, DAVID W	776	ANDERSON LOGISTICS
ZIEGENFUSS, JAMES	773	UNITED PARCEL SERVICE INC



## LifeMart<sup>®</sup> Employee Discount Program

LifeMart is one of the largest members-only online discount shopping websites in the market. It helps employees manage their health, as well as meet their personal needs and save money.

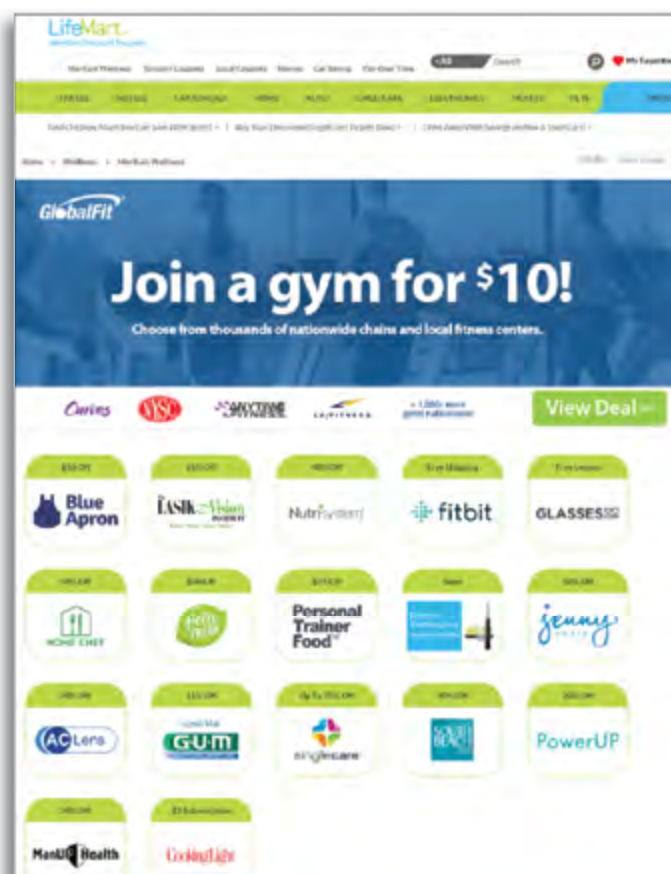
Employees can access LifeMart anywhere, anytime, on any device by visiting <http://meritain.lifemart.com>. It's the fast and easy way to:

- Save on their health and wellness needs, from gyms, to diet plans and groceries, and everything in between.
- Find deals on everyday needs, such as travel, tickets, car rentals, electronics and more.
- Get great deals for the family—on pet products, childcare discounts, products for aging loved ones and more!
- Save time with instant, one-stop shopping—with no need to run out to the store or search the web.
- Have fun discovering exclusive new deals on the brands they love—and offers are updated regularly.

Plus, employees have access to LifeMart discounts anywhere, anytime, with the LifeMart mobile app. They simply download the app and can browse major savings on the go. The app is available for download in the Google Play Store and iTunes Store.

By offering LifeMart alongside your benefits plan, you can thank your employees for their hard work, while also helping them keep more of their paycheck.

**If you would like more information on LifeMart, contact your Meritain Health representative.**



## SEPTEMBER 2020 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 9-month period ending September 30, 2020. The net investment 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	Approximate Net Investment Return
RIP 1987	-1.4% YTD

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](http://www.CentralPATeamsters.com). Click on Pension Fund and then "Reports and Notices."

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## CDC Thanksgiving guidelines:

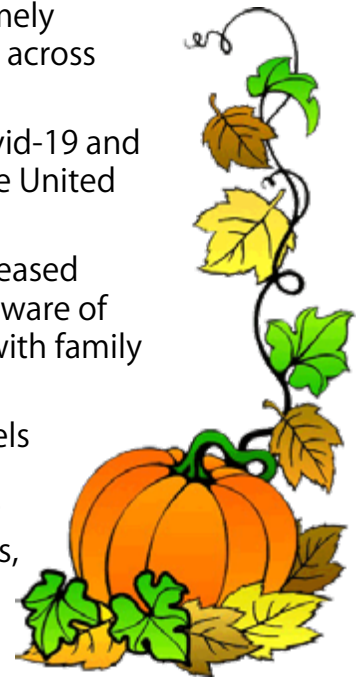
### How to stay safe and coronavirus-free over the holiday:

**T**hanksgiving is right around the corner -- and if public health agencies have their way -- celebrations this year promise to be extremely different from past years, as the coronavirus surges in states across the country.

Infectious disease experts are warning of a convergence of Covid-19 and influenza as the temperature drops and colder weather sets in. The United States is already seeing an uptick in infections.

The US Centers for Disease Control and Prevention recently released guidance on holiday gatherings and what Americans need to be aware of before traveling, hosting or attending parties -- or just gathering with family and friends over the Thanksgiving holiday.

The main guidance, according to the CDC, is assessing the levels of Covid-19 infections in communities to determine whether to postpone, cancel or limit the number of people at a celebration or whether to attend certain activities. If there are high infection rates, the agency recommends limited gatherings. Read more at CNN Health.



SOURCE: <https://www.cnn.com/2020/10/16/health/thanksgiving-cdc-covid-guidelines-wellness/index.html>

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

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**Central Pennsylvania Teamsters Pension Fund and  
Central Pennsylvania Teamsters Health and Welfare Fund**

**Trustees:**

William M. Shappell  
*Chairman & Union Trustee*

Kevin Bolig  
*Union Trustee*

Bryan A. Swaim  
*Employer Trustee*

Howard W. Rhinier  
*Union Trustee*

Kenneth A. Ross  
*Employer Trustee*

Daniel W. Schmidt  
*Employer Trustee*

Charles Shafer  
*Union Trustee*

Mark Gladfelter  
*Employer Trustee*

Jim Geise  
*Union Trustee*

Joseph J. Samolewicz  
*Administrator*

Martin L. Cullen  
*Assistant Administrator*

**Professional Advisors:**

Beyer-Barber  
*Health & Welfare Fund Actuary  
& Consultant*

CBIZ Retirement Plan Services  
*Pension Fund Actuary & Consultant*

Morgan Lewis  
*Legal Co-Counsel*

Novak Francella, LLC  
*Certified Public Accountants*

Investment Performance Services  
*Investment Consultant*

Stevens & Lee  
*Legal Co-Counsel*

Willig, Williams and Davidson  
*Legal Co-Counsel*

**Investment Managers for the  
Central Pennsylvania Teamsters  
Health and Welfare Fund**

Causeway Capital Mgmt., LLC

Northern Trust Investments, Inc.

SEI Investments

Walter Scott & Partners, Ltd.

William Blair & Company, LLC

**Investment Managers for the  
Central Pennsylvania Teamsters  
Pension Fund**

Ashmore Group, LLC

Boyd Watterson Asset Mgmt., LLC

Causeway Capital Mgmt., LLC

Loomis, Sayles & Company

Northern Trust Investments, Inc.

PGIM Real Estate

Principal Financial Group

Segall Bryant & Hamill

Siguler Guff & Company, LP

Tortoise Capital Advisors, LLC

Walter Scott & Partners, Ltd.

Wellington Trust Company, NA

Westfield Capital Mgmt. Co., LLC

William Blair & Company, LLC

**IMPORTANT INFORMATION  
FROM THE FUND OFFICE**

**Fund Office Contact Information**

Contact the Fund Office directly with any questions on Health and Welfare or Pension benefits. The Fund staff is available Monday through Friday from 8:00 a.m. to 3:00 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 office or visit [www.CentralPATeamsters.com](http://www.CentralPATeamsters.com) to obtain beneficiary change forms to complete and send in to the Fund Office.

Visit Our Website at: [www.CentralPATeamsters.com](http://www.CentralPATeamsters.com)