# Central Pennsylvania Teamsters Health and Welfare Fund

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MARTIN L. CULLEN, Assistant Administrator

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## CENTRAL PENNSYLVANIA TEAMSTERS HEALTH AND WELFARE FUND

SUMMARY ANNUAL REPORT FOR PERIOD JANUARY 1, 2023 TO DECEMBER 31, 2023

TO:

**ALL PLAN PARTICIPANTS** 

FROM:

THE TRUSTEES

DATE:

NOVEMBER 7, 2024

This is a summary of the annual report for the Central Pennsylvania Teamsters Health and Welfare Fund, Employer Identification Number 23-6263170, Plan No. 501, for the period January 1, 2023 to December 31, 2023. The annual report has been filed with the Employee Benefits Security Administration as required under the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

### **INSURANCE INFORMATION**

The Fund has a contract with the Lincoln National Life Insurance Company to provide certain benefits. The premiums paid under the contracts for the year ended December 31, 2023 were \$627,340.

#### SELF ADMINISTERED INFORMATION

The Fund provides certain medical, prescription, disability, vision, dental, hearing, mental, drug, alcohol, physical therapy, transplant, and childhood immunization claims incurred under terms of the plan. The Fund self pays these benefits, which totaled \$122,625,020 during the year ended December 31, 2023.

#### BASIC FINANCIAL STATEMENT

Benefits under the plan are provided by a trust (benefits are provided in whole from trust funds). Plan expenses were \$135,049,824. These expenses included \$9,435,078 in administrative expenses and \$125,614,746 in benefits paid to participants and beneficiaries.

The value of plan assets, after subtracting liabilities of the plan, was \$166,401,565 as of December 31, 2023 compared to \$160,190,264 as of January 1, 2023. During the plan year, the plan experienced an increase in its net assets of \$6,211,301. This increase includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value

of the plan's assets at the end of the year and the value of the plan's assets at the beginning of the year or the cost of assets acquired during the year. The plan had total income of \$141,261,125 including employer contributions of \$126,451,697, employee contributions of \$4,009,843, a realized gain of \$1,261,781 from the sale of assets, earnings from investments of \$8,614,324 and other income of \$923,480.

#### YOUR RIGHTS TO ADDITIONAL INFORMATION

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- 1. an accountant's report;
- 2. financial information and information on payments to service providers;
- 3. assets held for investment;
- 4. transactions in excess of 5% of plan assets; and
- 5. insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report or any part thereof, write or call the office of Board of Trustees, Central Pennsylvania Teamsters Health and Welfare Fund, 1055 Spring Street, Wyomissing, Pennsylvania 19610, (610) 320-5500. The charge to cover copying costs will be \$.24 per page.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of the income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan (Board of Trustees, Central Pennsylvania Teamsters Health and Welfare Fund, 1055 Spring Street, Wyomissing, Pennsylvania, 19610), and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, DC 20210.