

## GUARDIAN

Reading, Pennsylvania

HEALTH AND WELFARE/PENSION GUARDIAN NEWSLETTER



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

our Union,  
Label Here

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## THIS NEWSLETTER CONTAINS THE 2024 ANNUAL FUNDING NOTICE FOR THE CENTRAL PENNSYLVANIA TEAMSTERS DEFINED BENEFIT PLAN.

### \*IMPORTANT NOTICE\*

PLEASE BE SURE TO REVIEW THE UPDATED PREFERRED BRAND NAME DRUGS LIST FOUND ON PAGES 6-7 WHICH IS EFFECTIVE APRIL 1, 2025.

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

## IMPORTANT CHANGES HAVE BEEN MADE TO THE CENTRAL PENNSYLVANIA TEAMSTERS HEALTH & WELFARE PLANS!

1. Elimination of Mail Order Program Effective April 1, 2025: The Trustees have amended the Plans to eliminate the Prescription Mail Order Program. If you have any questions about obtaining medications that you previously obtained through the Mail Order Program, please contact the Health and Welfare Fund Prescription Department. If you are receiving your medications through the Alliance 340B Program you will not be affected. The Alliance 340B program is different than the mail order program that used to run through the Alliance PA Pharmacy.
  2. Elimination of Step Therapy for Prescription Medications Effective April 1, 2025: The Fund has required Step Therapy for patients starting a new drug therapy, requiring that the patient try a lower-cost, proven medication before advancing to newer or more costly drugs. The Trustees, after carefully evaluating the costs and benefits of this program, have elected to eliminate the Step Therapy program. The Fund will continue to pay only for those medications that are "medically necessary" as determined by the Fund's Medical Advisors and Pharmacy Benefit Manager.
  3. The Fund will continue to cover over-the-counter Proton pump inhibitors or "PPI"s. Please present the over-the-counter medication and your physician script to the pharmacist at your local participating pharmacy. Your pharmacist will provide up to a 90-day supply at a \$0 copayment.
  4. Enhanced Chiropractic Benefits Effective January 1, 2025: The Trustees have increased chiropractic benefits. The Fund will now pay 80% of charges for up to 25 visits or a maximum of \$2,000 per year, whichever comes first. Participants will be responsible for a 20% coinsurance payment per visit. This is a new benefit for R7 Participants!
- Please contact the Health and Welfare Fund at **610-320-5500** or **Toll Free at 1-800-331-0420** if you have any questions about your benefits or the changes described above.

**PLEASE REMEMBER TO USE THE NEW BENEFIT CARDS THAT WERE SENT TO ALL PARTICIPANTS IN JANUARY 2025. PLEASE PRESENT YOUR NEW BENEFIT CARD TO YOUR MEDICAL PROVIDER WHEN RECEIVING MEDICAL SERVICES ONLY. THE PRESCRIPTION, DENTAL AND VISION PROVIDER NETWORKS REMAIN UNCHANGED AND YOU SHOULD NOT USE YOUR HIGHMARK ID CARD FOR THESE TYPES OF SERVICES.**

**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 رفوتت، اناجم، ةيوعلل اءءعاسمل اءامءء، ةيبرعلا ةغلل اءءءءء تنك اذا ءيبنء.

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 हद्दी 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.

## Special Rules for Dental Implants:

If the Fund's dental advisor determines that an implant is necessary to maintain a Patient's dental health and function the Plan will pay the cost of the implant under the Medical Provisions of the Plan. Services related to implants, including but not limited to extractions and abutments, will remain subject to the rules for Dental Benefits.

**IMPORTANT NOTE:** A Provider, Participant, or Patient should submit a claim for implants to the Plan's dental advisor for determination of eligibility before installation of the implants. Failure to do so could leave the Provider and Patient with no source of payment of the implants if the plan's dental advisor subsequently determines that the implants do not qualify for coverage as a Medical Benefit. Please note that Delta Dental will administer the payment of the dental implants as a medical claim and pay the claim outside of the annual maximum in order to utilize the Delta Dental network discounts.

**The key points of the Fund's dental implant policy are as follows:**

- 1) ALL requests for dental implants must be submitted for pre-determination. If you or your provider do not submit the procedure for predetermination, the Fund will only pay up to your annual dental limit for the implant, and all related dental implant services, and will not consider the claim for payment under the medical provisions of the plan.
- 2) If the Fund and its dental advisor determine that the documentation submitted by your dentist demonstrates that the only mode of treatment available to maintain dental health and function is an implant-supported crown, bridge, partial or full denture, the implant claim will be paid under the medical provisions of the plan, and not under the dental provision of the plan.
- 3) On the other hand, if the Fund and its dental advisor determine that the documentation submitted by your dentist demonstrates that a regular bridge, partial or full denture can adequately maintain your dental health and function, the implant and all related expenses will be paid under the annual dental maximum set forth in your plan.
- 4) Finally, if the implant is sought for cosmetic or aesthetic purposes, payment for the implant will only be made under the annual dental maximum set forth in your plan.

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

The Fund Office receives many questions regarding coverage provided by the Fund when the claim is the result of an injury due to a motor vehicle accident. In accordance with Plan provisions, the Fund will only cover medical expenses on a subrogated basis once the maximum liability has been paid by the motor vehicle insurance carrier. In other words, the Fund will consider the payment of medical expenses only after benefits from the automobile insurance carrier have been exhausted.

In addition, the Fund will not provide coverage for short-term disability benefits (except for the first 5 days of missed work) for injuries sustained in a motor vehicle accident. The only time the Fund will pay more than 5 days of short-term disability benefits is when written proof is submitted verifying that the state in which you reside does not allow you to purchase wage loss protection from your motor vehicle insurance carrier. The state of Pennsylvania allows residents to purchase wage loss protection. It is recommended that you contact your motor vehicle insurance carrier to evaluate the extent to which you are covered for wage loss benefits as a result of a motor vehicle accident. Check with your motor vehicle insurance carrier to ensure that your policy carries at least the minimum coverage required by the state in which you reside.

**Do not wait until you have an accident to find out you have no wage loss coverage under your policy.** Payment for the first 5 days of short-term disability benefits does not apply to motorcycle accidents. There are no short-term disability benefits payable for injuries sustained as a result of a motorcycle accident.

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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 90 day supply	\$0
	<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>Specialty</b>	<b>Retail</b> up to a 30 day supply	\$150

Plans  
14 and 16

<b>RETAIL*</b>	<b>Generic</b> for up to a 90 day supply	<b>Option A</b> \$0	<b>Option B</b> \$0	<b>Option C</b> \$0
	<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>Specialty</b>	<b>Retail</b> up to a 30 day supply	\$150	\$150	\$150



### RX News

The Board of Trustees of the Central Pennsylvania Teamsters Health and Welfare Fund increased the Epi Pen max to allow 3 packages (6 Epi Pens) per year.

The Central Pennsylvania Teamsters Health and Welfare Fund updated the Prescription benefits to allow a \$0 copayment for up to a 90-day supply on all generic prescriptions retail effective 10/1/2023.

\*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 copayments for all Zohydro prescriptions will be \$150 per script.

\*NOTE: CVS and Walgreens are not participating pharmacies.

# Health for all seasons

**Make your health a year-round focus.** It's always a good time to take the next step towards better health.

## Eat better

Follow the balanced plate method



50%

non-starchy vegetables

25%

whole grains, starchy vegetables, fruits or dairy

25%

lean protein



Enjoy the flavors of in-season produce from your garden, a local market or farm share co-op



Add frozen fruits, mint and other herbs to your water to help you sip all day long

## Move more

Switch up your routine with new activities



tennis or pickleball



walking or hiking



yoga or tai-chi

Get moving before 10am or after 3pm



- Watch your sun exposure
- Stay hydrated
- Check the weather

Add movement to your daily routine



- Take the stairs
- Host a walking meeting
- Park farther away

## Stay well

### Wear sunscreen



Apply a generous amount to face and body **15-30 minutes** before you head out

### Take a break



If you feel dizzy, nauseous or tired outdoors, check if you need **water, food or rest**

### Picnic smart



Throw out any perishable foods that have been left out for **more than two hours**

**Let Teladoc Health help support you on your wellness journey.**

To sign up or learn more, go to [TeladocHealth.com](https://TeladocHealth.com)

# PREFERRED BRAND NAME DRUG LIST

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

**EFFECTIVE DATE: April 1, 2025**

**VERY IMPORTANT**

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

## ANALGESICS

### *Anti-Migraine*

Aimovig  
Ajovy  
Emgality 100, 120, 300 MG  
Nurtec ODT  
Qulipta  
Reyvow  
Ubrelvy

### *Opioid Agonist*

Nucynta ER  
Xtampza ER

## ANTI-INFECTIVES

### *Anti-infectives*

Dificid 200 MG Tab/40 MG Susp

### *Anti-Virals*

Lagevrio Caps  
Paxlovid

## AUTONOMIC

Auvi-Q

## CARDIOVASCULAR

### *Angiotensin Receptor Blockers & Combinations*

Entresto

### *Anti-arrhythmics*

Multaq

### *Anti-hyperlipidemics*

Nexletol  
Nexlizet

### *Nitrates*

Nitro-Bid 2% Ointment

### *Miscellaneous Cardiovascular*

Corlanor 5MG/ML Oral Solution  
Verquvo

## CNS AGENTS

### *Anti-anxiety/Sedative- Hypnotics*

Belsomra

### *Anti-convulsants*

Aptiom

### *Anti-psychotic Agents*

Rexulti  
Vraylar

### *Attention Deficit Disorder Treatment*

Azstarys Cap

### *Miscellaneous CNS Agents*

Sunosi Tab

## DENTAL

Fluoridex Sensitivity Relief  
Fluorimax 5000 1.1% Paste  
Prevident 5000 Enamel Protect  
Prevident 5000 Sensitive Paste

## EAR, NOSE, & THROAT

### *Otics*

Cipro HC Otic Suspension

## ENDOCRINE

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

Janumet  
Janumet XR  
Januvia

### *GLP-1 Recep. Agonist*

Ozempic  
Rybelsus Tab  
Trulicity

### *Insulins*

Fiasp Flextouch, Vial, Penfill  
Humalog cart, Kwikpen, vial  
Humalog jr Kwikpen  
Humalog mix Kwikpen, vial  
Humalog tempo pen  
Humulin 70/30 Kwikpen, vial  
Humulin N Kwikpen, vial  
Humulin R Kwikpen, vial  
Lyumjev Kwikpen, vial  
Lyumjev tempo pen  
Novolin 70/30 flexpen, vial  
Novolin N flexpen, vial  
Novolin R flexpen, vial  
Novolog flexpen, vial, penfill  
Novolog mix flexpen, vial

Relion novolin 70/30 flexpen, vial  
Relion novolin N flexpen, vial  
Relion novolin R flexpen, vial  
Relion novolog flexpen, vial  
Relion novolog mix flexpen, vial  
Soliqua  
Toujeo Solostar  
Toujeo Max Solostar  
Tresiba Vial, Flextouch  
Xultophy

# PREFERRED BRAND NAME DRUG LIST

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

**EFFECTIVE DATE: April 1, 2025**

**VERY IMPORTANT**

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

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

Glyxambi  
Jardiance  
Synjardy  
Synjardy XR  
Trijardy XR  
Xigduo XR

## ***Miscellaneous***

Baqsimi Spray  
Kerendia  
Mounjaro  
Zegalogue

## **GASTROINTESTINAL AGENTS**

### ***Digestants***

Creon  
Zenpep DR

### ***Miscellaneous Products, Gastrointestinal***

Cortifoam 10% Aerosol  
Movantik  
Symproic Tab  
Trulance 3 MG Tab  
Viberzi Tabs  
Xifaxan 550 MG Tab

## **HEMATOLOGY**

### ***Anti-Coagulants, Direct Factor X***

Eliquis  
Xarelto

### ***Anti-Platelet***

Brilinta

## **IMMUNE SYSTEM**

Myhibbin 200 MG/ML Suspension

## **NUTRITION**

### ***Electrolyte Modifiers***

K-Phos #2 Tab  
Lokelma 5 & 10 GM Pow Pkts  
Velporo 500 MG Chew Tab  
Veltassa Pow Pkts

## **OB/GYN**

### ***Estrogenics***

Climara Pro Patch  
Duavee  
Premarin Tab  
Premphase  
Prempro

### ***Miscellaneous***

Myfembree Tabs  
OriaHnn Caps  
Orilissa Tab

## **OPHTHALMIC AGENTS**

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

Ciloxan 0.3% Ointment  
Zylet Eye Drops

### ***Glaucoma Agents:***

Lumigan  
Simbrinza

### ***Miscellaneous***

Natacyn 5% Eye Drops

## **RESPIRATORY AGENTS**

### ***Anti-muscarinic and Combos***

Atrovent 17 MCG HFA Inhaler  
Incruse Ellipta  
Spiriva Respimat

### ***BetaAdrenergic & Combos***

Anoro Ellipta  
Breztri  
Combivent  
Dulera  
Serevent Diskus  
Stiolto Respimat  
Trelegy Ellipta 100-62.5-25

### ***Glucocorticoids, Inhalation***

Arnuity Ellipta  
Asmanex HFA & Twisthaler  
QVAR redihaler

## **WEIGHT MANAGEMENT**

Saxenda  
Wegovy  
Zepbound

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



Say hello to our  
mobile app



Download the Davis Vision mobile app



### Find an eye care professional

Easily find an eye care professional based on your current location, city / ZIP code or search by name.



### Check your eligibility & benefits

Quickly check your current or future eligibility status. Need a little more detail? You can also review your benefit.



### Request an ID card

Need your member information? Find it and personalize it with your photo (optional).



### Review your claims & status

Check out your current claims and history. Plus, upload a photo of your receipt to easily submit an out-of-network claim.



### Other tools & resources

Be sight-savvy with these calculators, a frame try-on tool, a vision blog and more.

For more information,  
visit [davisvision.com/app](https://davisvision.com/app)

# 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 including xrays and narrative. 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)



**T**he Health Reimbursement Arrangement (“HRA”) feature is a negotiated benefit that could be as part of your Collective Bargaining Agreement. If you're enrolled in a Health Reimbursement Arrangement (HRA) through the Fund, it's important to keep track of your account balance. You can check your balance anytime on the MemberXG portal located on [www.centralpateamsters.com](http://www.centralpateamsters.com). Remember, reimbursement requests must include proper documentation of eligible expenses and should be submitted within one year of the service or purchase date. Don't let your balance go unused. If you have questions about your Central Pennsylvania Teamsters Health and Welfare Fund benefits or about using the website, please call the Fund Office at (800) 331-0420. The Fund Office staff are available to help you Monday through Friday from 7:30 a.m. to 3:30 p.m. Eastern Time.



# Where's my ID card?

You don't need a Delta Dental ID card when you visit the dentist. Just provide your **name**, **birth date** and **enrollee ID** or **Social Security number**.

Have dependents on your plan? They'll need to use your details.

## Still want one?



### On your computer

You can download and print an ID card from computer.

- Log in to your Delta Dental account at **deltadentalins.com**.
- Click on **Get ID card** and then **Print ID card**.



Scan to visit  
**deltadentalins.com**



### On your phone

You can use your ID card in the app or add your ID card to your phone's mobile wallet.

- Download the **Delta Dental Mobile App** from the App Store or the Google Play Store.
- Log in to your **deltadentalins.com** account in the app. Your ID card information will be on the front page.

# HIPAA Privacy Rule Notice

In accordance with the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA), the Central Pennsylvania Teamsters Health and Welfare Fund has adopted and implemented policies and procedures that protect your private health information. These policies and procedures were described in a Notice originally distributed to you in April 2003 and updated in 2013. If you would like a copy of this Notice, you can find it on our website at [www.CentralPATeamsters.com](http://www.CentralPATeamsters.com). Select “Health & Welfare Fund” from the menu at the top of the screen. From there, select “HIPAA.” If you would like us to send you a paper copy of the Notice, please contact us. You can reach us by phone at 610-320-5500; Toll Free 1-800-331-0420 or by fax at 610-320-9209.

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## The Women’s Health and Cancer Rights Act of 1998

Under a federal law called the Women’s Health and Cancer Rights Act of 1998, the Fund is required to provide you with an annual notice of your rights under this Act. Please consider this information as the annual notice for 2025 of your rights under this important federal law.

The Women’s Health and Cancer Rights Act requires the Fund to provide benefits for mastectomy-related services, including reconstruction of the breast on which the mastectomy was performed and surgery to achieve symmetry between the breast, prostheses, and complications resulting from a mastectomy, including lymphedema. Any Fund deductibles and co-payments that apply to other conditions also apply to the treatment related to the mastectomy. You should feel free to contact the Fund Administrator if you have any questions about your coverage. You can reach the Fund Administrator at **610-320-5500**.

The coverage is available under all plans of the Central Pennsylvania Teamsters Health and Welfare Fund and is subject to the relevant plan’s deductibles and co-insurance provisions.

If you have any questions regarding this coverage, please contact the Fund Office.

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## 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 for up to 24 months. Even if you don’t elect to continue coverage during your military service, you have the right to be reinstated in your employer’s health plan when you are reemployed, generally without any waiting periods or exclusions, except for service-connected illnesses or injuries. For assistance in filing a complaint, or for any other information on USERRA, **contact VETS at 1-866-4-USA-DOL** or visit its website at <http://www.dol.gov/vets>. An interactive online USERRA Advisor can be viewed at <http://www.dol.gov/elaws/userra.htm>.

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.

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# Retirees Approved for Pensions November, 2024 through February 2025

Name	Local	Employer
<b>November 2024</b>		
ADONIZIO, JOHN ANTHONY	229	PEPSI COLA BTLG OF SCRANTON
ALVORD, GARY F	771	MILLER & HARTMAN INC
ANDREWS, KEITH L	771	UNITED PARCEL SERVICE INC
ANTONACCI, JOSEPH J	229	NEW PENN MOTOR EXPRESS INC
BACON, MARLYN L	776	UNITED PARCEL SERVICE INC
BAILOR, KENNETH E	776	YRC FREIGHT
BARBER, STEVE A	776	UNITED PARCEL SERVICE INC
BARLIP, DAVID C	429	CLOVER FARMS DAIRY
BRENIZER, JULIE ANN	776	ARKANSAS BEST FREIGHT SYS INC
CLARK, JAMES B	776	YRC FREIGHT
DAUBERMAN, DOUGLAS E	764	CENTRAL BUILDERS SUPPLY CO
DODDS, KEVIN J	776	ROADWAY EXPRESS INC
ERNST, LORI A	229	SUPER MARKET SERVICE CORP
FERRI, SARAH S	229	SUPER MARKET SERVICE CORP
FILLERS JR, W J	776	ARKANSAS BEST FREIGHT SYS INC
FLINCHBAUGH, ROBERT J	776	CONSOLIDATED FREIGHTWAYS
GILL, GARY E	429	ASSOCIATED WHOLESALERS INC
GOOD, BRYAN D	229	CONSOLIDATED FREIGHTWAYS
GOODELL, TAMI D	764	LOYALSOCK TOWNSHIP
GREEN, SCOTT O	776	CONSOLIDATED FREIGHTWAYS
GUTIERREZ, JEFFREY P	429	BERKS PRODUCTS CORP
HAAS, STEPHEN A	776	ANDERSON LOGISTICS
HARRIS, RALPH A	776	ARKANSAS BEST FREIGHT SYS INC
HETTINGER, LARRY M	429	DAIRY FARMERS OF AMERICA INC
HEVERLING, COREY A	429	ASSOCIATED WHOLESALERS INC
JOHNSON, ROBERT J	764	CENTRE CONCRETE COMPANY
KANAVY, SEAN P	229	HARPER COLLINS PUBLISHERS INC
KLINE, CHRISTOPHER	773	UNITED PARCEL SERVICE INC
LEGGORE, TODD A	771	UNITED PARCEL SERVICE INC
LEONARD, THOMAS	229	YRC FREIGHT
LINE, HARRY E	776	ARKANSAS BEST FREIGHT SYS INC
LONG, FORREST A	429	MAIERS BAKERY
MCLAIN, SANDRA J	771	LANCASTER COUNTY NEWS CO
MCMASTER, MICHAEL A	776	YORK CONCRETE SEPTIC TANKS CO
METRI, WILLIAM J	429	BIMBO BAKERIES USA
MORRIS, JOHN	401	KEYSTONE COCA-COLA BOTTLING CO
MULL SR, BRYON L	776	UNITED PARCEL SERVICE INC
MUNIZ, JOEL	776	YORK COUNTY TRANSP AUTHORITY
NEISWENDER, LARRY E	429	BIMBO BAKERIES USA
NYCE, WILLIAM A	773	UNITED PARCEL SERVICE INC
OBERTO, VINCENT M	401	SCHULTZ'S INC.
PRZYBYLKIOWICZ, HENRIK A	773	COCA-COLA BTLNG CO LEHIGH VLLY
REISS, DENNIS K	773	EASTERN INDUSTRIES INC DIV OF
RITTER, TODD R	773	RIS PAPER CO INC
SCHOFIELD, PATRICK G	229	HARPER COLLINS PUBLISHERS INC
SEYLER, TODD R	776	ARKANSAS BEST FREIGHT SYS INC
SPECK, BRIAN K	776	YRC FREIGHT
STARR, DAVID J	764	UNITED PARCEL SERVICE INC
STORCH, JOHN B	776	USF RED STAR
SUGLIA, VICKI	429	RACHLIN FURNITURE INC
SWOPE II, JACOB C	776	HESS TRUCKING COMPANY
UNGER, GRETCHEN L	773	PEOPLE FIRST
WALSH, JAMES P	229	HARPER COLLINS PUBLISHERS INC
WATHEN JR, WILLIAM T	776	YRC FREIGHT
WILSON, MARK D	771	MILLER & HARTMAN INC
WOLF, DARREL P	776	NEW PENN MOTOR EXPRESS INC

<b>December 2024</b>		
ARMENT, KENNETH A	771	YRC FREIGHT
AUSTIN, JEFFERY M	429	CLOVER FARMS DAIRY
BARTON, DAVID F	401	DARON BLOCK INC
BRICKER, MICHAEL S	776	GENLYTE THOMAS LLC
BURKHOLDER, KENNETH P	429	WINDSOR SERVICE TRUCKING
CRUZ, DALE A	776	ARKANSAS BEST FREIGHT SYS INC
CZONSTKA JR, EDWIN J	773	YRC FREIGHT
DEWALL, DAVID R	773	ANR FREIGHT SYSTEM
DRY, CRAIG D	776	UNITED PARCEL SERVICE INC
ESPOSITO, CARMINE	429	STROEHMANN BAKERIES L. C.
FASIG, BRIAN S	429	ASSOCIATED WHOLESALERS INC
FIELDS, MICHAEL G	429	SUPERVALU INC

Name	Local	Employer
FINKBEINER, KENT J	773	GENERAL SUPPLY COMPANY
GROVE, DAVID W	776	UNITED PARCEL SERVICE INC
HARTMAN, JEFFREY S	771	UNITED PARCEL SERVICE INC
HAWN, WILLIAM T	776	UNITED PARCEL SERVICE INC
HENRY, CHARLES	776	UNITED PARCEL SERVICE INC
HIGGINS, RICHARD D	776	BOARD OF COMMISSIONERS
JORDAN, KIMBERLY	764	ROADWAY EXPRESS INC
KAHLER, ROGER L	771	YRC FREIGHT
KNOCHE JR, JAMES E	776	YRC FREIGHT
KUMOR, KAREN A	229	C&S WHOLESALE GROCERS
LABANIC, LINDA	229	C&S WHOLESALE GROCERS
LAUFFER, JO ANN	776	ARKANSAS BEST FREIGHT SYS INC
LIGHT, STEVEN A	776	UNITED PARCEL SERVICE INC
MALETESTINIC, CHARLES J	776	UNITED PARCEL SERVICE INC
MALLON, WAYNE P	776	ARKANSAS BEST FREIGHT SYS INC
MCCULLOUGH, MICHAEL D	776	ARKANSAS BEST FREIGHT SYS INC
MOYER, RICKY LEE	773	PA SUPPLY & MANUFACTURING CO
MURPHY, PATRICK M	429	BERKS PRODUCTS CORP
O'BRIEN, LISA	773	EASTERN INDUSTRIES INC
PATRICK, ALLAN J	401	RIDGLEY VIBRATED BLOCK INC
POWERS, MICHAEL J	429	NEW PENN MOTOR EXPRESS INC
RADLE, KATHLEEN	229	C&S WHOLESALE GROCERS
RIESER, JEFFREY R	773	UNITED PARCEL SERVICE INC
ROHRER, BARBARA L	771	READY MIXED CONCRETE CO
RUSH III, JOHN W	776	ANDERSON LOGISTICS
SCHEIB, RANDY A	776	ARKANSAS BEST FREIGHT SYS INC
SHILLABEER, RICHARD W	401	FALCONE BEVERAGE
SMALLWOOD, NATHAN L	776	CARNATION CO/NESTLE USA INC.
SNYDER, BARRY A	401	PEPSI-COLA BOTTLING COMPANY
SPATZ, ALLEN K	429	LUDENS INCORPORATED
SPECK, LESTER W	999	ARKANSAS BEST FREIGHT SYS INC
TEMPLETON, LEO	401	UNITED PARCEL SERVICE INC
WEAVER, EDWARD A	776	YRC FREIGHT
WRIGHT, MICHAEL D	771	HERMAN R EWELL INC

<b>January 2025</b>		
ALTEMOSE, DANIEL A	776	UNITED PARCEL SERVICE INC
BARSHINGER, ALAN L	776	FLEMING COMPANIES INC
BEHM, JOHN S	429	BRENNTAG NORTHEAST LLC
BEITLER, ROBIN	773	EASTERN INDUSTRIES INC
BELL, JEFFERY L	764	UNITED PARCEL SERVICE INC
BRETZ, LARRY P	776	CARNATION CO/NESTLE USA INC.
CASTELLANO, VINCENT	229	PEPSI COLA BTLG OF SCRANTON
COOK, KAREN C	776	USF RED STAR
COOLBAUGH, CHARLES	401	PREFERRED DEVELOPMENT CORP
CROFTON, ROBERT T	773	UNITED PARCEL SERVICE INC
DEBONIS, ANTHONY J	771	MILLER & HARTMAN INC
ETTINGER, RICHARD V	773	UNITED PARCEL SERVICE INC
FLANNERY JR, THOMAS A	401	PEPSI-COLA BOTTLING COMPANY
FREDERICK, ROBERT SCOTT	771	MILLER & HARTMAN INC
GANGWERE, MARK R	429	SCHROCK CABINET COMPANY
GIPE, HARRY D	776	YRC FREIGHT
GROFF JR, JOHN G	771	YELLOW FREIGHT SYSTEM INC
GROSS, GLENN A	771	YRC FREIGHT
HAYDT, RALPH TROY	773	ROADWAY EXPRESS INC
HILLEGAS, JAMES B	773	UNITED PARCEL SERVICE INC
JOHNSON JR, LAWRENCE A	764	MCCORMICK DRAY LINE INC
KEMMERER, DONALD E	429	SCHROCK CABINET COMPANY
KNOLL, ROGER T	776	CAROLINA FREIGHT CARRIERS CORP
KULAGA, RICHARD L	429	LENTZ MILLING CO LLC
LANGHORN, JAMES A	773	UNITED PARCEL SERVICE INC
MACCIA, PATRICK J	773	YRC FREIGHT
MARTIN, KENNETH R	764	WILLIAMSPORT MOVING CO INC
MASON, WILLIAM T	229	KEYSTONE COCA-COLA BTLG CO INC
MICAL, CARMEN C	429	COTT BEVERAGES WYOMISSING INC
NARDELLI, MICHAEL A	229	ROADWAY EXPRESS INC
NEARHOOD, RICHARD W	776	USF HOLLAND INC
O'BRIEN JR, AUSTIN	776	ARKANSAS BEST FREIGHT SYS INC
PARSLEY, RICHARD O	776	UNITED PARCEL SERVICE INC
REIMERT, PATRICK S	429	LENTZ MILLING CO LLC
REINERT, GARY E	776	ARKANSAS BEST FREIGHT SYS INC

# Retirees Approved for Pensions November, 2024 through February 2025

Name	Local	Employer	Name	Local	Employer
REYES, JULIO	229	HARPER COLLINS PUBLISHERS INC	GOODYEAR, JEFFREY L	776	UNITED PARCEL SERVICE INC
RIEGEL JR, CHARLES W	429	WINDSOR SERVICE TRUCKING	GOWER, LORRAINE	776	USF RED STAR
RISHEL, RICHARD C	776	ROADWAY EXPRESS INC	GRIGIONI, JOHN	771	YRC FREIGHT
RITTER, MICHAEL H	776	UNITED PARCEL SERVICE INC	GRUBBS III, GEORGE D	776	ARKANSAS BEST FREIGHT SYS INC
SEREDYCH, JENNY J	776	YORK COUNTY TRANSP AUTHORITY	GUTIERREZ, ALLAN J	776	PRESTON TRUCKING CO INC
SMITH, CLARE L	771	UNITED PARCEL SERVICE INC	HANNAN, JOSEPH C	764	UNITED PARCEL SERVICE INC
SMITH, MARK A	401	YRC FREIGHT	HENAHAN, BRYAN L	401	YAH INC T/A ESJAY DIST CO
SMITH, MARTIN R	776	ARKANSAS BEST FREIGHT SYS INC	HICKERNELL, TEDD M	429	CLOVER FARMS DAIRY LLC
SPICER, MICHELLE	776	NEW PENN MOTOR EXPRESS INC	HILL III, EUGENE R	229	CONSOLIDATED FREIGHTWAYS
STANKEVICH, ELAINE M	229	HARPER COLLINS PUBLISHERS INC	HORN, GEORGE D	773	MACINTOSH LINEN & UNIFORM
STOUGH, STUART E	776	ARKANSAS BEST FREIGHT SYS INC	KERN JR, HAROLD P	429	WETTERAU FOOD SERVICES INC
TARAS, MATTHEW J	401	UNITED PARCEL SERVICE INC	KESSLER, THEODORE J	229	A-P-A TRANSPORT CORPORATION
TRATE, JEANETTE M	429	CENTRAL PENNSYLVANIA TEAMSTERS	KUNTZ, ANDREW J	776	W & L SALES COMPANY INC
WITMER, STEVEN R	776	NEW PENN MOTOR EXPRESS INC	LANDIS, LUKE K	776	YORK DRILLING CO INC
WOOTON, EDWARD F	429	E J BRENNEMAN	LEWIS, RALPH C	429	WETTERAU FOOD SERVICES INC
WRIGHT, SHANNON P	776	YRC FREIGHT	LEWIS, SHARON K	776	ASSOCIATED WHOLESALERS INC
<b>February 2025</b>			MARCINKO, PATRICK J	776	ARKANSAS BEST FREIGHT SYS INC
ARMSTRONG, ALAN J	229	TOPPS CHEWING GUM INC	MERCK, RICHARD E	776	BOARD OF COMMISSIONERS
BAKANOWSKI, DAVID JAMES	429	BRENNTAG SOLUTIONS & SERV	MICKAVICZ, LOUIS W	229	LWR LACKAWANNA VLY SANITARY AU
BARLET, DONNA L	429	SCHROCK CABINET COMPANY	MOORE, DAVID J	776	YRC FREIGHT
BARNARD, ALAN W	229	YRC FREIGHT	OGDEN, KEITH A	776	YRC FREIGHT
BIEBER, ROBERT A	429	POWER PACKAGING	ORR, DOUGLAS C	776	PRESTON TRUCKING CO INC
BURKETT, DAVID	771	UNITED PARCEL SERVICE INC	PREGMON, DONALD W	229	HARPER COLLINS PUBLISHERS INC
CALLIHAN, DANNY P	776	CAROLINA FREIGHT CARRIERS CORP	RACAVICH, JOSEPH R	229	C&S WHOLESALE GROCERS OCEAN LG
CAREY, THOMAS F	229	SCRANTON SEWER AUTHORITY	REIMERT, MARK A	429	SUPERVALU INC
CONWAY, VICTOR A	776	UNITED PARCEL SERVICE INC	ROBB, JOHN	429	NEW PENN MOTOR EXPRESS INC
CRIDER, SHARON A	776	ASSOCIATED WHOLESALERS INC	RODENHAUSER, HANS D	771	YRC FREIGHT
CUMMINGS SR, MICHAEL L	429	JOHN PFROMMER LLC	ROYLES SR, JEFF W	429	ALL STAR DISTRIBUTING INC
DEPUY JR, WILLIAM R	229	CONSOLIDATED FREIGHTWAYS	SHERMAN, GEORGE H	776	UNITED PARCEL SERVICE INC
DRENNEN, JEFFREY L	771	UNITED PARCEL SERVICE INC	SNYDER JR, NORMAN R	429	SUPERVALU INC
ECKENRODE, JOHN T	771	KUNZLER & COMPANY INC	STONER JR, BARRY L	429	CONSOLIDATED FREIGHTWAYS
ELLER, DAVID S	771	UNITED PARCEL SERVICE INC	TOKASH, FRANK G	401	KEYSTONE COCA-COLA BOTTLING CO
FATCHALINE JR, JOHN R	764	WOOD-MODE INC	TREVORAH, ROBERT	773	BIMBO BAKERIES USA, INC
FEHR, DENNIS A	429	ARKANSAS BEST FREIGHT SYS INC	VANHART, LAWRENCE A	776	ASSOCIATED WHOLESALERS INC
FICK, ARTHUR	401	UNITED PARCEL SERVICE INC	VERGONI, WALTER T	229	PEPSI COLA BOTTLING
FLORES, PROVIDENCIA	773	ABM INDUSTRY GROUPS LLC	WHEELER, MYRON M	429	EXETER TOWNSHIP BD OF SUPV
FLUKE, TERRY A	776	ARKANSAS BEST FREIGHT SYS INC	WHITMAN, MICHAEL E	776	YRC FREIGHT
FORTNEY, BRADLEY A	776	ROADWAY EXPRESS INC	WILHIDE, JEFFREY O	776	ROADWAY EXPRESS INC
			WILKINSON SR, CHRISTOPHER R	229	ROADWAY EXPRESS INC

## FEBRUARY 2025 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 2 month period ending February 28, 2025. 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 Calculator. Click on the Pension section and then "Pension Calculator." 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."



## 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 15<sup>th</sup> 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. Balances can be checked on the fund’s pension calculator.

**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 1987 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 and Important Items to Remember. You can also access the Fund’s Pension Calculator to view your pension benefits, including your RIP 1987 account balance, if applicable.

**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.



**Form 1099-Rs were mailed January 28, 2025. Form 1099-Rs can now be found on the Pension Calculator-My Retirement site or requested by contacting the Pension Department.**

If you are providing the Central Pennsylvania Teamsters Pension Fund with a Power of Attorney, it must be **dated, signed by the principal, witnessed by two adults, and notarized**. Pennsylvania law does require a notice, and an acknowledgment provision, that must be included at the beginning of any POA. This is a legal document, and it is best to have legal counsel assist in creating this document. If these requirements are not met the document will be denied.

**IMPORTANT:** ALL deaths MUST be reported promptly, the failure to do so is a violation of Plan Rules, and the ongoing collection of benefits following a participant’s death is considered fraudulent. The Fund is required by Federal Law to recover such invalid payments from spouses, beneficiaries, and Estates.



# Central Pennsylvania Teamsters Pension Fund

JOSEPH J. SAMOLEWICZ, Administrator

MARTIN L. CULLEN, Assistant Administrator

**Board of Trustees:**

WILLIAM M. SHAPPELL, Chairman and Trustee  
DANIEL W. SCHMIDT, Secretary and Trustee  
KEVIN M. BOLIG, Trustee  
ADAM CROSSEN, Trustee  
JIM GEISE, Trustee  
MARK GLADFELTER, Trustee  
ASHLYNNE HART, Trustee  
KENNETH A. ROSS, Trustee  
BRYAN A. SWAIM, Trustee  
EDGAR H. THOMPSON, Trustee



**MAILING ADDRESS:** P.O. Box 15223  
Reading, PA 19612-5223  
1055 Spring Street, Wyomissing, PA 19610  
[www.CentralPATeamsters.com](http://www.CentralPATeamsters.com)  
Phone: 610-320-5500  
TOLL FREE: 1-800-331-0420  
FAX: 610-320-9239

April, 2025

Dear Participant:

As you may be aware, Congress and the IRS require specific funding and participant notices under the Pension Protection Act of 2006 ("PPA"), as amended by the Multiemployer Pension Reform Act of 2014 ("MPRA"). The purpose of this letter is to give you a brief introduction explaining the notice you are now provided by law under PPA.

## Required Actuarial Certification

Under PPA, the Plan's Actuary must perform a series of tests to certify the Plan's "zone status". Plan participants, plan beneficiaries, the bargaining parties, the Pension Benefit Guaranty Corporation, and the Secretary of Labor must then be notified of the Plan's certification results.

Per the Annual Funding Notice included in this newsletter, the Plan was certified in the "green" or "safe zone" in 2024 because the Plan's PPA funded percentage was 98.01%. For 2025, the Trustees are once again pleased to inform you the Plan is certified in the "green" or "safe zone".

## Annual Funding Notice

A notice entitled "**Annual Funding Notice for the Central Pennsylvania Teamsters Defined Benefit Plan**" is included in this newsletter. This notice is also required under PPA and it is meant to provide useful information in understanding the Plan's funded status.

In accordance with the regulations for preparing the Annual Funding Notice, the Funded Percentage on page one is a snapshot of the Plan as of January 1, 2024 and does not reflect the Plan's 2024 investment return. The impact of this investment performance will be reflected in next year's Annual Funding Notice.

We encourage you to read the attached notice in its entirety. If, after reviewing the notice, you have any questions or concerns, please feel free to contact the Fund Administrator:

Joseph J. Samolewicz, Administrator  
Central Pennsylvania Teamsters Pension Fund  
P.O. Box 15223  
Reading, PA 19612-5223

Toll-free in USA 1-800-331-0420

**Board of Trustees,**

**Central Pennsylvania Teamsters Defined Benefit Plan**

ANNUAL FUNDING NOTICE  
For  
**Central Pennsylvania Teamsters Defined Benefit Plan**  
Introduction

This notice includes important information about the funding status of your pension plan (“the Plan”) and general information about the benefit payments guaranteed by the Pension Benefit Guaranty Corporation (“PBGC”), a federal insurance agency. All traditional pension plans (called “defined benefit pension plans”) must provide this notice every year regardless of their funding status. This notice does not mean that the Plan is terminating. It is provided for informational purposes, and you are not required to respond in any way. This notice is for the plan year beginning January 1, 2024 and ending December 31, 2024 (“Plan Year”). However, it relates to the Plan’s funded status as of January 1, 2024 and does not reflect the Plan’s preliminary return on assets of 9.5% for the Plan Year ending December 31, 2024. *It also does not reflect the Plan’s funded status as of January 1, 2025 (as of which the Plan is in the green zone).*

How Well Funded Is Your Plan

Under federal law, the plan must report how well it is funded by using a measure called the “funded percentage.” This percentage is obtained by dividing the Plan’s assets by its liabilities on the Valuation Date for the plan year. In general, the higher the percentage, the better funded the plan. Your Plan’s funded percentage for the Plan Year and each of the two preceding plan years is set forth in the chart below, along with a statement of the value of the Plan’s assets and liabilities for the same period.

<b>Funded Percentage</b>			
	<b>2024 Plan Year</b>	<b>2023 Plan Year</b>	<b>2022 Plan Year</b>
Valuation Date	January 1, 2024	January 1, 2023	January 1, 2022
Funded Percentage	98.01%	92.20%	94.31%
Value of Assets	\$ 1,460,239,045	\$ 1,344,510,168	\$ 1,287,263,142
Value of Liabilities	\$ 1,489,753,697	\$ 1,458,101,965	\$ 1,364,799,580

Year-End Fair Market Value of Assets

The asset values in the chart above are measured as of the Valuation Date for the Plan Year and are actuarial values. Because market values can fluctuate daily based on factors in the marketplace, such as changes in the stock market, pension law allows plans to use actuarial values that are designed to smooth out those fluctuations for funding purposes. The asset values below are market values and are measured as of the last day of the Plan Year, rather than as of the Valuation Date. Substituting the market value of assets for the actuarial value used in the above chart would show a clearer picture of a plan’s funded status as of the Valuation Date. The fair market value of the Plan’s assets as of the last day of the Plan Year and each of the two preceding plan years is shown in the following table:

	December 31, 2024	December 31, 2023	December 31, 2022
Fair Market Value of Assets	\$1,464,809,070 (unaudited)	\$1,386,099,834	\$1,256,565,553

The December 31, 2024 fair market value of assets disclosed above is reported on an unaudited basis since this notice is required to be distributed before the normal completion time of the audit which is currently in progress.

### Endangered, Critical or Critical and Declining Status

Under federal pension law a plan generally will be considered to be in “endangered” status if, at the beginning of the plan year, the funded percentage of the plan is less than 80 percent or in “critical” status if the percentage is less than 65 percent (other factors may also apply). A plan is in “critical and declining” status if it is in critical status and is projected to become insolvent (run out of money to pay benefits) within 15 years (or within 20 years if a special rule applies). If a pension plan enters endangered status, the trustees of the plan are required to adopt a funding improvement plan. Similarly, if a pension plan enters critical status or critical and declining status, the trustees of the plan are required to adopt a rehabilitation plan. Rehabilitation and funding improvement plans establish steps and benchmarks for pension plans to improve their funding status over a specified period of time. The plan sponsor of a plan in critical and declining status may apply for approval to amend the plan to reduce current and future payment obligations to participants and beneficiaries.

The Plan was not in Endangered, Critical, or Critical and Declining Status for the 2024 Plan Year. In addition, the Plan’s actuary has certified the Plan is not in Endangered, Critical, or Critical and Declining Status for the 2025 Plan Year, nor is the Plan projected to enter Critical Status in any of the succeeding 5 plan years.

### Participant Information

Details on the total number of participants in the Plan as of the end of the 2024 Plan Year and the prior two Plan Years are set forth below.

<b>Participant Counts</b>			
<b>Measurement Date</b>	<b>December 31, 2024</b>	<b>December 31, 2023</b>	<b>December 31, 2022</b>
Actives	5,287	5,424	6,206
Retired or Separated from Service and Receiving Benefits	16,164	16,372	16,761
Retired or Separated from Service and Entitled to Future Benefits	4,151	4,425	4,201
Total	25,602	26,221	27,168

### Funding & Investment Policies

Every pension plan must have a procedure for establishing a funding policy to carry out plan objectives. A funding policy relates to the level of assets needed to pay for benefits promised under the plan currently and over the years. The funding policy of the Plan is, in general, to comply with all funding requirements of the Internal Revenue Code, including Section 432. To view the Plan’s specific funding policy, please visit the Fund’s website at [www.centralpateamsters.com](http://www.centralpateamsters.com). Alternatively, you may contact the Plan Administrator for a copy.

Once money is contributed to the Plan, the money is invested by plan officials called fiduciaries, who make specific investments in accordance with the Plan’s investment policy. Generally speaking, an investment policy is a written statement that provides the fiduciaries that are responsible for plan investments with guidelines or general instructions concerning investment management decisions. The investment policy of the Plan is, to the extent possible, to ensure over the life of the Plan that an adequate level of assets is available to fund the benefits payable to the Plan’s participants and beneficiaries at the time they become payable. In meeting this objective, the Board seeks to achieve a high level of investment return consistent with a prudent level of portfolio risk.

Under the Plan's investment policy, the Plan's assets were allocated among the following categories of investments, as of the end of the Plan Year. These allocations are percentages of total assets:

<b><u>Asset Allocations</u></b>	<b><u>Percentage</u></b>
Stocks	45.54%
Investment grade debt instruments	7.16%
High-yield debt instruments	5.47%
Real Estate	17.89%
Other	23.94%

For information about the plan's investments as described in the chart above, contact the Plan Administrator identified below under "Where to Get More Information about Your Plan."

#### Right to Request a Copy of the Annual Report

A pension plan is required to file with the US Department of Labor an annual report called Form 5500 that contains financial and other information about the plan. Copies of the annual report are available from the US Department of Labor, Employee Benefits Security Administration's Public Disclosure Room at 200 Constitution Avenue, NW, Room N-1513, Washington, DC 20210, or by calling 202.693.8673. For 2009 and subsequent plan years, you may obtain an electronic copy of the plan's annual report by going to [www.efast.dol.gov](http://www.efast.dol.gov) and using the Form 5500 search function. Or you may obtain a copy of the Plan's annual report by making a written request to the Plan Administrator. Individual information, such as the amount of your accrued benefit under the plan, is not contained in the annual report. If you are seeking information regarding your benefits under the plan, contact the Plan Administrator identified below under "Where to Get More Information About Your Plan"

#### Summary of Rules Governing Insolvent Plans

Federal law has a number of special rules that apply to financially troubled multiemployer plans that become insolvent, either as ongoing plans or plans terminated by mass withdrawal. The Plan Administrator is required by law to include a summary of these rules in the annual funding notice. A plan is insolvent for a plan year if its available financial resources are not sufficient to pay benefits when due for that plan year. An insolvent plan must reduce benefit payments to the highest level that can be paid from the plan's available resources. If such resources are not enough to pay benefits at the level specified by law (see Benefit Payments Guaranteed by the PBGC, below), the plan must apply to the PBGC for financial assistance. The PBGC will loan the plan the amount necessary to pay benefits at the guaranteed level. Reduced benefits may be restored if the plan's financial condition improves.

A plan that becomes insolvent must provide prompt notice of its status to participants and beneficiaries, contributing employers, labor unions representing participants, and the PBGC. In addition, participants and beneficiaries also must receive information regarding whether, and how, their benefits will be reduced or affected, including loss of a lump sum option.

#### Benefit Payments Guaranteed by the PBGC

The maximum benefit that the PBGC guarantees is set by law. Only benefits that you have earned a right to receive and that cannot be forfeited (called vested benefits) are guaranteed. Specifically, the PBGC guarantees a monthly benefit payment equal to 100 percent of the first \$11 of the Plan's monthly benefit accrual rate, plus 75 percent of the next \$33 of the accrual rate, times each year of credited service. The PBGC's maximum guarantee, therefore, is \$35.75 per month times a participant's years of credited service.

*Example 1:* If a participant with 10 years of credited service has an accrued monthly benefit of \$600, the accrual rate for purposes of determining the PBGC guarantee would be determined by dividing the monthly benefit by the participant's years of service ( $\$600/10$ ), which equals \$60. The guaranteed amount for a \$60 monthly accrual rate is equal to the sum of \$11 plus \$24.75 ( $.75 \times \$33$ ), or \$35.75. Thus, the participant's guaranteed monthly benefit is \$357.50 ( $\$35.75 \times 10$ ).

*Example 2:* If the participant in Example 1 has an accrued monthly benefit of \$200, the accrual rate for purposes of determining the guarantee would be \$20 (or  $\$200/10$ ). The guaranteed amount for a \$20 monthly accrual rate is equal to the sum of \$11 plus \$6.75 ( $.75 \times \$9$ ), or \$17.75. Thus, the participant's guaranteed monthly benefit would be \$177.50 ( $\$17.75 \times 10$ ).

The PBGC guarantees pension benefits payable at normal retirement age and some early retirement benefits. In addition, the PBGC guarantees qualified preretirement survivor benefits (which are preretirement death benefits payable to the surviving spouse of a participant who dies before starting to receive benefit payments). In calculating a person's monthly payment, the PBGC will disregard any benefit increases that were made under the plan within 60 months before the earlier of the plan's termination or insolvency (or benefits that were in effect for less than 60 months at the time of termination or insolvency). Similarly, the PBGC does not guarantee benefits above the normal retirement benefit, disability benefits not in pay status, or non-pension benefits, such as health insurance, life insurance, death benefits, vacation pay, or severance pay.

For additional information about the PBGC and the pension insurance program guarantees, go to the Multiemployer Page on the PBGC's website at [www.pbqc.gov](http://www.pbqc.gov). Please contact your employer or Plan Administrator for specific information about your pension plan or pension benefit. The PBGC does not have that information. See "Where to Get More Information About Your Plan," below.

#### Where to Get More Information About Your Plan

For more information about this notice, you may contact:

Joseph J. Samolewicz, Administrator  
Central Pennsylvania Teamsters Pension Fund  
P.O. Box 15223  
Reading, PA 19612-5223

Toll-free in USA 1-800-331-0420

For identification purposes, the official plan number is 001, the plan sponsor's name is Trustees of the Central Pennsylvania Teamsters Pension Fund, and the employer identification number or "EIN" is 23-6262789.

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

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Investment Performance Services  
*Investment Consultant*  
**Investment Managers for the  
Central Pennsylvania Teamsters  
Health and Welfare Fund**  
Boyd Watterson Asset Mgmt, LLC  
Chartwell Investment Partners  
Great Lakes Advisors  
Intercontinental Real Estate Corp.  
Northern Trust Investments, Inc.  
Segall Bryant & Hamill

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

Boyd Watterson Asset Mgmt., LLC  
Causeway Capital Mgmt., LLC  
Corbin Capital Partners, LP  
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Washington Capital Mgmt.  
Westfield Capital Mgmt. Co., 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 7:30 a.m. to 3:30 p.m.

#### Telephone Numbers:

##### **Health & Welfare**

(610) 320-5500

Toll Free 1-800-331-0420

##### **Pension**

(610) 320-5505

Toll Free 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.