



# Central Pennsylvania Teamsters GUARDIAN

May 2007

Health and Welfare Special Edition Newsletter



Reading, PA

## Board of Trustees Announces Health & Welfare Benefit Changes

The Board of Trustees of the Central Pennsylvania Teamsters Health & Welfare Fund announces benefit changes to the Health & Welfare Plans. The benefits have been changed to provide participants with coverage that remains competitive with other Teamsters Funds as well

as with other health benefit plans in the region. The following is intended as a summary of the benefits changes only. Please note there are separate summaries of benefit changes for both active and retired participants. Contact the Fund Office if you have additional questions:

### Active Participants in Plans 13 and 14

*(for those Participants under Plan 14 that have the Optional coverage referred to in each section below):*

#### Benefits Effective June 1, 2007:

##### Immunization Benefits

Effective June 1, 2007, all immunizations recommended by the Centers for Disease Control for your eligible children (through age 23 for full-time students) will be covered. If you use a participating provider, the Fund will pay the network amount in full. If you use a non-network provider, the Fund will pay benefits equal to the lesser of the UCR or the billed amount. You will be responsible for any amounts over the UCR schedule. Previously, the Fund only paid immunizations for children under age 6 as stated above. For children age 6 and over, the Fund paid up to a maximum combined benefit of \$25 towards the immunization and office visit.

##### Transplant Benefits

Effective June 1, 2007, transplant benefits have been improved. The Fund will now pay a maximum of \$300,000 for costs related to transplants occurring on or after June 1, 2007, as measured from the date of the transplant surgery, through six weeks from the date of surgery. Thereafter, the patient's claims will be payable under the medical provisions of the Plan (including prescription, hospitalization,

physician office visit, etc.). Previously, the Fund applied a \$200,000 cap on **all costs** related to a specific transplant, regardless of when they were incurred.

##### Wheelchair Benefits

Effective June 1, 2007, the Trustees have removed the \$400 wheelchair cap. The Fund previously set the maximum amount payable for a wheelchair at \$400, subject to Major Medical deductible and co-insurance for durable medical equipment. Keep in mind that the Fund will continue to pay benefits for only one wheelchair per lifetime, subject to deductible and co-pays.

##### Chiropractor Visit Benefits

Effective June 1, 2007, the Trustees increased the benefits for chiropractic visits. The Fund will now pay a maximum of \$25 per visit for up to 20 visits per Benefit Year *per eligible family member*. The maximum benefit was increased to \$500 per person per year. Previously, the Fund limited payments to \$25 per person per visit to an annual maximum of \$400 *per family* per year.

*(Continued on page 2)*

**See Delta Dental Frequently Asked Questions on Page 4**

## Active Participants in Plans 13 and 14

(Continued from page 1)

### Dental Benefits

Effective June 1, 2007, the annual benefit maximum for each eligible family member has been raised from \$750 to \$1,000 for Plan 13. Under Plan 14, if you have dental coverage under Option A, your annual benefit maximum for each eligible family member will increase from \$750 to \$1,000; under Option B, that cap is increased from \$600 to \$800; and under Option C, the cap is increased from \$450 to \$600.

In addition, the Fund has worked with Delta Dental to revise the payment schedule for those patients electing to use non-Delta Dental providers. The Trustees have updated the reimbursement schedule for non-Delta Dental providers for most services. Remember, however, that you receive the greatest dental benefit by using a Delta Dental provider.

### Orthodontic Benefits

For orthodontic claims started after the effective date of June 1, 2007 (for eligible dependent children 18 years of age and under), the orthodontic benefit maximum will be raised from \$2,000 to \$3,000 if you use a Delta Dental provider. The increased benefit amount applies to braces placed on or after June 1, 2007.

If you use a non-Network provider, the benefit maximum remains at \$2,000.

\* \* \*

*Look for a Summary of Material Modifications (SMM) and your new insurance I.D. card with the Emergency Room co-pay information in the mail.*

## For Retired Plans R-4 and R-5

### Benefits Effective June 1, 2007:

#### Immunization Benefits

Effective June 1, 2007, all immunizations recommended by the Centers for Disease Control for your eligible children (through age 23 for full-time students) will be covered. If you use a participating provider, the Fund will pay the network amount in full. If you use a non-network provider, the Fund will pay benefits equal to the lesser of the UCR or the billed amount. You will be responsible for any amounts over the UCR schedule. Previously, the Fund only paid immunizations for children under age 6 as stated

### Effective July 1, 2007:

#### Death and Accidental Death and Dismemberment Benefits

Previously, under Plan 13 and Plan 14 Option A, the Fund paid \$25,000 each for death and accidental death and dismemberment benefits. Effective July 1, 2007, the death and accidental death and dismemberment benefit has been raised to \$35,000 for Plan 13 and for Plan 14 Option A. Benefits under Plan 14 Option B have been raised to \$20,000 and to \$10,000 under Option C. In addition, the benefits payable upon the death of a child were raised from \$1,000 to \$2,000. The benefits payable upon the death of a spouse remain at \$2,000.

#### Emergency Room – New Co-payment

The Trustees have learned that many Participants and their families use a hospital emergency room for services that they should receive from their family physician. Unfortunately, an ER physician cannot give the patient the same level of service and follow-up that is available from a family physician. Moreover, the cost of emergency room services is often four times as much as the same (or better) service from a family physician. **Therefore, effective July 1, 2007, there will be a Fifty Dollar (\$50) co-payment for emergency room visits.** However, if the patient is admitted to the hospital immediately following emergency room care, the co-payment will be waived.

above. For children age 6 and over, the Fund paid up to a maximum combined benefit of \$25 towards the immunization and office visit.

#### Wheelchair Benefits

Effective June 1, 2007, the Trustees have removed the \$400 wheelchair cap. The Fund previously set the maximum amount payable for a wheelchair at \$400, subject to Major Medical deductible and co-insurance for durable medical equipment. Keep in mind that the Fund will continue to pay benefits for only one wheelchair per lifetime subject to deductible and co-pays.

### **Chiropractor Visit Benefits**

Effective June 1, 2007, the Trustees increased the benefits for chiropractic visits. The Fund will now pay a maximum of \$15 per visit for up to 17 visits per Benefit Year *per eligible family member*. Previously, the Fund limited payment to an annual maximum of \$200 *per family* per year, at a maximum per visit fee of \$15.

#### **Benefits Effective July 1, 2007:**

### **Emergency Room – New Co-payment**

The Trustees have learned that many Participants and their families use a hospital emergency room for services that they should receive from their family physician. Unfortunately, an ER physician

cannot give the patient the same level of service and follow-up that is available from a family physician. Moreover, the cost of emergency room services is often four times as much as the same (or better) service from a family physician. **Therefore, effective July 1, 2007, there will be a Fifty Dollar (\$50) co-payment for emergency room visits.** However, if the patient is admitted to the hospital immediately following emergency room care, the co-payment will be waived.

\* \* \*

*Look for a Summary of Material Modifications (SMM) and your new insurance I.D. card with the Emergency Room co-pay information in the mail.*

## **For Retired Plan R-2**

#### **Benefits Effective June 1, 2007:**

### **Immunization Benefits**

Effective June 1, 2007, all immunizations recommended by the Centers for Disease Control for your eligible children (through age 23 for full-time students) will be covered. If you use a participating provider, the Fund will pay the network amount in full. If you use a non-network provider, the Fund will pay benefits equal to the lesser of the UCR or the billed amount. You will be responsible for any amounts over the UCR schedule. Previously, the Fund only paid immunizations for children under age 6 as stated above. For children age 6 and over, the Fund paid up to a maximum combined benefit of \$25 towards the immunization and office visit.

#### **Benefits Effective June 1, 2007:**

### **Emergency Room – New Co-payment**

The Trustees have learned that many Participants and their families use a hospital emergency room for services that they should receive from their family physician. Unfortunately, an ER physician cannot give the patient the same level of service and follow-up that is available from a family physician. Moreover, the cost of emergency room services is often four times as much as the same (or better) service from a family physician. **Therefore, effective July 1, 2007, there will be a Fifty Dollar (\$50) co-payment for emergency room visits for accidents.** However, if the patient is admitted to the hospital immediately following emergency room care for treatment of an accident, the co-payment will be waived.

\* \* \*

*Look for a Summary of Material Modifications (SMM) and your new insurance I.D. card with the Emergency Room co-pay information in the mail.*

## **Have You Completed Your Health Risk Assessment?**

**Visit [www.centralpateamsters.com](http://www.centralpateamsters.com), select the Wellness Links and click on the Central PA Teamsters Wellness Program. It only takes 20 minutes! The secret to good health is knowing your risks and taking action!**

## Central Pennsylvania Teamsters Health and Welfare Fund

### Trustees:

William M. Shappell – Chairman & Union Trustee  
Tom J. Ventura – Secretary and Employer Trustee  
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Beyer-Barber, Health and Welfare Fund Actuary & Consultant  
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Summit Strategies, Investment Consultant  
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### Investment Managers for the

#### Central Pennsylvania Teamsters Health and Welfare Fund:

Aronson+Johnson+Ortiz, LP  
Causeway Capital Management, LLC  
INTECH – Enhanced Investment Technologies, LLC  
Rothschild Asset Mgt., Inc.  
SEI Investments  
Walter Scott & Partners, Ltd.

## How Do I Locate a Network Mental Health Provider?

The Central PA Teamsters Health & Welfare Fund's primary network provider, HealthAssurance, contracts with United Behavioral Health (UBH) as its mental health network provider. All UBH providers are credentialed practitioners.

An up-to-date list of mental health providers is available on the Central PA Teamsters website, [www.centralpateamsters.com](http://www.centralpateamsters.com). Simply click on "Health & Welfare" and then select United Behavioral Health under "Providers."

You may also call UBH at 1-866-369-8362 during the hours of 8 am to 6 pm (Monday through Friday) to find a provider. When calling, please identify yourself as participating in the Central PA Teamsters Health & Welfare Fund. Do not give UBH your Central PA Teamsters ID number. You will be asked to provide your name, birthdate and zip code of the area in which you are seeking a provider.

When making an appointment, please confirm that the provider participates in the United Behavioral Health network.

The emergency 24-hour number is the same: 1-866-369-8362. For the hearing-impaired, the TTY# is 1-877-266-2099.

Visit Our Website at:

[www.CentralPATeamsters.com](http://www.CentralPATeamsters.com)

## Important Information from the Fund Office

### Fund Office Contact Information

Contact the Fund Office directly with any questions on Health and Welfare benefits. The Fund staff is available Monday through Friday from 7:30 a.m. to 4:00 p.m.

### Telephone Numbers:

Health & Welfare

(610) 320-5500

Toll free in PA 1-800-422-8330

Nationwide: 1-800-331-0420

### Reminder-Keep Your Information Current with the Fund Office

Please remember to keep your address, dependent and beneficiary information updated with the Funds. You can call or mail in address changes to the Fund. You can call the Fund offices or visit [www.CentralPATeamsters.com](http://www.CentralPATeamsters.com) to obtain beneficiary change forms to complete and send in to the Fund office.

## Delta Dental Frequently Asked Questions

### How Does the Dental Plan Work?

You can select a dentist who participates in the Delta Dental network or a dentist who does not participate. When you visit a Delta Dental Premier or Delta Dental PPO participating dentist, your dental services are paid without any additional cost to you up to your plan maximum. If you visit a non-participating dentist, you may have an out-of-pocket payment (even if you have not utilized your yearly benefit maximum.)

Claims for services rendered by a non-participating dentist will be processed using a fee allowance established by the Board of Trustees. You are responsible for paying the difference between Delta Dental's payment and the amount billed by non-participating dentists. Some non-participating dentists may require that services be paid in full at the time of service, since Delta Dental will be paying the participant directly if the provider is not a participating Delta Dental provider.

Dentists may have an office policy that requires a written pre-authorization before proposed services are provided. Pre-Authorizations are not required by Delta Dental, but a pre-determination is strongly recommended if the total charges are expected to exceed \$300.

### How Can I Locate a Participating Dentist?

To locate a participating dentist, visit the Central PA Teamsters website, [www.centralpateamsters.com](http://www.centralpateamsters.com), click on Health & Welfare and select "Providers." Click on Delta Dental and select Delta Dental Premier or Delta Dental PPO plan-Dentist Directory. You may also call 1-800-932-0783 to speak to a Delta Dental representative.

### **Central PA Teamsters**

P.O. Box 15223

Reading, PA 19612-5223

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