

TWIN HORSE CRIER

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Health Care
Reform?



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TJC83 Fund News

- ❖ We would like to take this opportunity to welcome our newest member of the Board of Trustees, William “Bill” Strickland. Mr. Strickland was appointed Trustee in September and replaces Lindsay Marshall. He is employed by United Parcel Service as member of their finance team and is a graduate of Georgia College.
- ❖ The Fund is committed to protecting your privacy. As part of our daily operation, we create and receive information about your physical or mental health. By law, we are required to maintain the privacy of your health information and to protect your information from inappropriate use or disclosure. To request a full copy of the Privacy Regulations, contact us at (804)282-3131.
- ❖ As a reminder, failure to contact SHPS within the first trimester of pregnancy will result in a \$500 penalty.
- ❖ Pension statements will be mailed out at the end of January. Please be sure to review your statement for accuracy, especially your first year of credit. If you find a discrepancy, please call the Fund Office. If we are unable to determine that a mistake has been made, you may need to contact your employer’s Human Resources Department.

New Programs Through Prescription Solutions

Last month, notification was sent to all Participants regarding new programs created by Prescription Solutions. Below is a further description of the programs and how they work.



Step Therapy Program

Using food as an illustration, the Step Therapy Program is designed to ensure the lower level (“hamburger”) drug is first used to address your need for a medication. If it works, both you and the Fund pay less than you would if you were using another medication available to treat your condition. If your doctor then prescribes you the higher level (“sirloin”) drug, you should be able to fill it without an authorization as Prescription Solutions is aware that you’ve tried the “hamburger” level already. If the “sirloin” is the first drug prescribed, there may be a delay in your ability to fill the prescription while Prescription Solutions works with your doctor to ensure such a drug is necessary without trying others first. Examples of drugs that will be reviewed include Benicar, Diovan, Singulair and Flomax. For a full list of the impacted medications, contact the Fund Office.

Quantity Limit Program

Ever found your doctor prescribing one 10 mg pill per day and then changing the dosage to two 10 mg pills because the original prescription wasn’t effective? Were you aware that 20 mg pills were available so you could continue to take only one pill per day? Were you aware that the cost of the 20 mg pills may be the same as or close to the cost of the 10 mg pills? This new program alerts you to this fact so that you can reduce your out-of-pocket cost, which also impacts the cost to the Fund.

The Quantity Limit Program also looks for situations where more pills than can safely be taken are prescribed. For example, some pain relievers contain a combination of narcotics and acetaminophen. Prescription Solution’s clinical pharmacy team has informed us that they have noted prescriptions written for ten of these pills per day when, in fact, the body can only properly process eight pills per day.

If you currently use Step Therapy or Quantity Limit medicines that are impacted by these programs, you should have already received a letter from Prescription Solutions advising you of the next steps necessary to take advantage of these programs and to put more money in your pocket.

The Patient Protection and Affordable Care Act: How does it affect your benefits?

As we all know, healthcare reform has been a hot topic of discussion lately. Many of you have called the Fund Office with questions regarding the Patient Protection and Affordable Care Act (referred to as the “Affordable Care Act”.) Below are highlights of the Act and the changes affecting your benefits. All changes are effective January 1, 2011.

Dependent Coverage Extension to Adult Children Under the Age of 26

The Fund will offer Qualifying Children under the age of 26 access to health insurance benefits. By law, the only eligibility requirements to meet the definition of Qualifying Child are age and relationship to the participant. Refer to the information below to determine if your child(ren) will be eligible to receive benefits from the Fund. To add a Qualifying Child, a Dependent Enrollment Form must be completed and submitted to the Fund Office, along with the documentation listed in the chart below.

If your child(ren) previously terminated because they did not meet the guidelines of The Working Families Tax Relief Act (WFTRA), turned age 19, and/or were no longer a full time student, a Dependent Enrollment Form must be completed to request reinstatement. The documentation listed below is not required if it is already on file.

Please note, if your child(ren) participate(s) in or has/have been offered group health coverage through his or her employer, he or she is not eligible for coverage through the Fund.

To Add:	Documentation required:
a qualifying child born to you	qualifying child’s birth certificate identifying you as the parent or legal paternity documentation
an adopted qualifying child	qualifying child’s birth certificate & adoption papers
a qualifying stepchild	qualifying child’s birth certificate & your marriage certificate
a qualifying child for which you have legal custody	qualifying child’s birth certificate, a copy of custody papers and a statement that neither parent lives with you

Prohibition on Lifetime Dollar Limits for Essential Benefits

All lifetime dollar maximums for essential benefits will be converted to annual maximums as shown in the chart below. Lifetime and annual maximums will be removed for transplant benefits. Orthodontic benefits (for dependents under age 18) are excluded from this change and will remain subject to the lifetime maximum.

Plan	Current	2011	2012	2013
Plan 7	No current members. Plan will be eliminated.			
Plans 8A, 8B, and 8B (ACME)	\$600,000	\$750,000	\$1.25 million	\$2 million
Plan 8C	\$800,000	\$800,000	\$1.25 million	\$2 million
Plan 9	\$1 million	\$1 million	\$1.25 million	\$2 million
Plan 11	\$2 million	\$2 million	\$2 million	\$2 million
Plan 11-2	Unlimited	Unlimited	Unlimited	Unlimited
Plan 12	\$2 million	\$2 million	\$2 million	\$2 million

The impact of the Affordable Care Act on retiree healthcare is still under legal analysis. Additional information will be provided soon.

Pre-existing Condition Exclusions

All pre-existing condition exclusions for children and adults will be eliminated.

If you have questions regarding the Patient Protection and Affordable Care Act and how it affects your benefits, please do not hesitate to call the Health & Welfare Department at the Fund Office.

COBRA: How it Works and When You Qualify

Have you experienced a recent divorce or separation? Have a dependent who is turning 19, but not a full-time student? COBRA, the Consolidated Omnibus Budget Reconciliation Act of 1985, allows you and/or your eligible dependents the option to temporarily extend health coverage if benefits terminate. The maximum amount of time you can extend your health coverage varies and depends on the reason coverage is lost.

When electing COBRA coverage, you may choose the benefit plan under which you were last covered or you may move to a less costly plan. Life insurance and disability are not included in the COBRA benefits, but COBRA does allow you to purchase either medical benefits only or medical benefits plus dental and optical, as the plan provides. The cost to extend health coverage depends on the plan and package you select.

If one of the below “qualifying events” occurs, you and/or your dependent must notify us. We will accept notice of termination of employment or a reduction in hours from your employer through a timely filed contribution report. Notification of the qualifying event must be in writing (email or fax accepted) and received within 60 days of the date the event took place. If we do not receive notification within the 60 day time limit, the right to COBRA continuation coverage for this “qualifying event” is no longer available.

Effective through December 31, 2010

- Divorce
- Separation (in cases involving a Participant’s stepchild)
- Qualifying child turns 19 and is not a full time student
- Qualifying child between the ages of 19 and 23 ceases to be a full time student (certain exemptions apply)
- Qualifying child who is a full time student turns 23
- Death of employee

Effective January 1, 2011

- Divorce
- Separation (in cases involving a Participant’s stepchild)
- Qualifying child turns 26
- Death of employee

To request a package including additional COBRA information and the cost to continue this coverage, please call the Fund Office at (804)282-3131 or toll free at 800-852-0806.

Breast Cancer Screenings: They Could Save Your Life!



Courtesy of BHS October 2010 Newsletter

Breast cancer causes a lump or the change in size or shape of a woman’s breast. The following are 3 different screenings that may be performed to determine whether or not a woman needs further tests to rule out breast cancer:

Mammogram. X-ray of the breasts. This is the best method for detecting breast cancer early. It is strongly recommended that every woman over the age of 40 get a mammogram once every 1 or 2 years.

Breast self exam. Checking on your own for lumps or changes in the size/shape of the breast or in the underarm area. Women should begin self exams in their 20s.

Clinical exam. Performed by a nurse or doctor to feel for any lumps or changes in the breast. Women should begin clinical exams in their 20s or 30s.

What's the Status of the Pension Fund?

by Michael M. McCall, President & CEO

"I'm happy to report that we are not losing money" is my answer in such volatile times. After posting a 17% investment return in 2009, the Fund has earned .3% through the eight months ending August 31, 2010. Although short of the 7.5% annual expectation, the Fund has topped the \$400 million mark again.



How has this affected the proposed recovery plan otherwise known as a Rehabilitation Plan mentioned in the March 2010 edition of this newsletter? As it stands, the proposal to eliminate access to 25 and 30-and-out benefits for those with less than 20 years of benefit accrual service as of December 31, 2009 has become the Fund's certified Rehabilitation Plan required by the Pension Protection Act. For those impacted, please refer to Appendix I, found in the Fund's Plan Document for details regarding the benefits available.

Has there been any Congressional relief from the Senator Casey/Representative Pomeroy effort? There has, although it is so complex that experts able to help us understand what the relief means for our Fund are still waiting for federal agency guidance. I hope to explain the impact of this good news to you in an upcoming edition of the newsletter.

In summary, while recent investment challenges and the Pension Protection Act have caused the Trustees to implement historical changes, the Plan has weathered many challenges over its 50+ year history. Continued participation in the Fund by all involved and use of modern investment tools, techniques and professionals will again allow this Fund to be the envy of most union and private retirement funds in existence.

Disqualifying Employment and Suspension of Benefits

Are you retired and considering returning to work? If so, be sure to submit a Post-Retirement Employment Approval Form to the Fund Office, as certain jobs are considered Disqualifying Employment under the Pension Plan. The Pension Fund will suspend and permanently withhold your monthly benefit for any month in which you are employed or self-employed in Disqualifying Employment. The chart to the right outlines what is considered Disqualifying Employment.

You must notify the Fund in writing within 15 days after starting any job that may be Disqualifying Employment, regardless of how many hours you plan to work or have worked. The Fund has the right to request additional information before making a ruling. As always, if you disagree with the Fund's ruling, you have the right to appeal to the Board of Trustees.

The applicable United States Department of Labor Regulations may be found in 29 C.F.R., Section 2530.203-3. You may also refer to Sections 4.12 through 4.14 of the Pension Plan Document.

Age	Work Considered Disqualifying
Before Normal Retirement Age (usually 65)	<ul style="list-style-type: none"> Employment with an Employer who pays into the Plan (a Contributing Employer), unless <ul style="list-style-type: none"> you work less than 40 hours in a calendar month for a Contributing Employer that pays contributions at or above the prevailing NMF agreement casual rate for each day your work, or you become permanently disabled to perform the duties of your covered occupation while working in Covered Employment, you may return to work for your former Contributing Employer in non-covered employment, or Employment with an employer who competes with a Contributing Employer.
After Normal Retirement Age but before 70½ years old (usually between 65 and 70½)	Working 40 or more hours per month: <ul style="list-style-type: none"> in an industry whose employees were covered by the Plan as of the date you retire or your Normal Retirement Age, and in the geographic area covered by the Plan as of the earlier of the date you retired or your Normal Retirement Age, and in a trade or craft, including supervisory work in which you were working at any time under the Plan.
After 70½	None

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Teenage depression: What signs to look for

Most teenagers are moody from time to time. But about 20 percent suffer serious mental health problems, including depression and anxiety disorder. If untreated, the consequences can be serious—even fatal.

What should parents watch for? Keep your eyes open for these troubling symptoms:

- Disturbances in sleeping patterns—insomnia, or excessive sleep
- Lack of energy—your teen seems tired all the time
- Feelings of guilt and/or worthlessness
- Loss of interest in activities he or she once enjoyed, such as sports, school activities, friendships, etc.
- Difficulty concentrating or making decisions
- Change in appetite—eating significantly more or less than normal
- Withdrawal from friends and family members
- Frequent outbursts of anger or frustration
- Crying for no reason
- Thoughts of suicide



If your child expresses any of these symptoms for a long period—up to six months—he or she may be in need of help. Talk to your child about what you've observed, without judgment, and consult your family doctor to explore treatment options.

Also, keep in mind that Business Health Services (BHS) provides 6 free visits per person, per issue, per year. For more information on how to utilize this benefit, contact BHS at 800-327-2251.