



Messenger



Message from MCTWF's Executive Director

Dear Teamster Families:

Greetings from Trumbull Avenue; home away from home of a lot of dedicated people, on both sides of the street, focusing their considerable skills on serving your interests.

By the time you read this Fall issue of the *Messenger*, Thanksgiving Day, certainly one of the more cheerful, civilized and secular products of the Pilgrim/Puritan experience (more than say...witch burning and other forms of excessive public humiliation), will be just a mellow memory, soon to be swept up in the Holiday Season tidal wave of marketing manipulated frenzy...in celebration, of course, of peace, joy, good will, humility and faith. It must be a confusing time of the year to be a kid.

MCTWF welcomes the many new groups that have entrusted themselves to our care since the publication of the Summer *Messenger*, including the employees of the City of Marietta, Ohio (Local 627, Zanesville, OH); Bark River Board of Education (Delta County, U.P. – Local 486, Saginaw, MI); Cintas Corporation (Angola, South Bend and Ft. Wayne, IN, and Midland, MI locations) and Pepsi Cola General Bottlers of Indiana (Ft. Wayne, IN – Local 414, Ft. Wayne, IN); Strack & Vantill (Highland, IN – Local 142, Gary, IN); National Garages (Birmingham and Detroit, MI locations – Local 283, Wyandotte, MI); and Akzo Nobel Coatings (Columbus, OH – Local 284, Columbus, OH). We wish you well. Please do not hesitate to contact our customer service representatives if any problems arise, or if you simply seek information on your benefit plan.

On November 7th, we hosted about 40 representatives of 14 local unions in a conference to review and discuss various MCTWF rules, procedures, and tools and to address issues raised by the local unions. We reviewed the many electronic links available through MCTWF's website for network provider locations, access to personal claims histories for prescription drugs and dental services, a wealth of general information about wellness and health conditions by way of articles, CDs, DVDs and access to individualized feedback and follow-up in response to your electronic submission of BlueHealthConnection's Health Risk Assessment. We also informed the representatives of new electronic tools to come in 2008, including a fully secure web portal from which you will be able to access your membership and eligibility information, your benefit plan description, the payment status of employer contributions on your behalf, the number of your remaining benefit bank weeks, your claims record, aggregate incurred benefit dollars and your aggregate annual out-of-pocket expense, instant messaging for inquiries to MCTWF, plus a number of other interactive features. We'll be implementing these functions in two phases during the next year. Details will be published in upcoming *Messenger* issues. Many thanks to the local unions for their input and support.

I urge you to carefully review this *Messenger*. As always, it may provide information that affects your benefit entitlements. It also contains MCTWF's most recent Summary Annual Report for the plan year ending March 31, 2007, the successful culmination of the Trustees' measured, five year plan to restore MCTWF's financial health and stability in the face of unpredictable market forces and an improving but still dysfunctional health care system.

On behalf of the Trustees and the staff, I wish you health and happiness for the Holidays.

Richard Burker

Inside this issue:

SUMMARY ANNUAL REPORT	2
Coverage to Correct Complications from Non-Covered Procedures	3
Change in Family Status Notification Time Limits	3
Reinstatement of Coverage Following 26 Week Break	3
MCTWF Smoking Cessation Programs, Therapies and Online Resources Available to Participants	4
Educational DVDs/Videos through BlueHealthConnection	5
Influenza Vaccination	5
Deadline Reminders	6

Editor's Note:

For simplicity, unless otherwise stated, the *Messenger* uses the masculine form to refer to male and female individuals and uses the term "participants" to refer to both participants and their eligible dependents.

If in reviewing any Explanation of Benefits provided to you from MCTWF, or any of its vendors, you identify possible fraud, please contact the appropriate toll free **Anti-fraud Hotline** as follows:

For MCTWF Claims	800-637-6907
For Delta Dental or Optical Claims	800-524-0147
For BCBSM Hospital Claims	800-482-3787

Summary Annual Report

Michigan Conference of Teamsters Welfare Fund

Plan year Ended March 31, 2007

This is a summary of the annual report of Michigan Conference of Teamsters Welfare Fund (hereafter the Plan), EIN 38-1328578 for the plan year ended March 31, 2007. The annual report has been filed with the Employee Benefits Security Administration of the U.S. Department of Labor as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The plan provides health, dental, optical, prescription drug, short and long term disability, and death benefits for its participants.

BASIC FINANCIAL STATEMENT

The value of plan assets, after subtracting liabilities of the Plan was \$213,941,298 as of March 31, 2007 compared to \$193,969,757 as of April 1, 2006. During the plan year, the Plan's net assets increased by \$19,971,541. This increase includes unrealized appreciation and 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 assets at the beginning of the year or the cost of assets acquired during the year. During the plan year, the Plan had total income of \$219,377,124 including, but not limited to, employer contributions of \$190,480,863, participant contributions of \$8,140,981 earnings from investments of \$16,795,329 rental income of \$14,134 and other income of \$3,945,817.

Plan expenses were \$199,405,583. These expenses included \$188,061,000 in benefits paid on behalf of participants and beneficiaries, and \$16,983 in premiums paid to insurance carriers for the provision of benefits, as reflected below, and \$11,327,600 in administrative expenses.

Insurance Information - The Plan has a policy with Prudential Insurance Company of America to pay long-term disability claims on behalf of salaried staff of the Plan. The total premiums paid on this policy for plan year ended March 31, 2007 was \$16,983.

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 below are included in that report:

- an accountant's report
- financial information and information on payments to service providers
- assets held for investment
- transactions in excess of five percent of plan assets
- insurance information, including sales commissions paid by insurance carriers information regarding any common or collective trusts, pooled separate accounts, master trusts, or 103-12 investment entities in which the plan participates

TO OBTAIN ADDITIONAL INFORMATION

To obtain a copy of the full annual report, or any part thereof, your request should be addressed to: Executive Director, Michigan Conference of Teamsters Welfare Fund, 2700 Trumbull Avenue, Detroit, Michigan, 48216-1269. The charge to cover copying costs will be \$.15 per page. You also have the right to receive, at no charge, the annual report's statement of assets and liabilities and accompanying notes or a statement of income and expenses and accompanying notes, or both. If you request a copy of the full annual report, these two statements and accompanying notes will be included, at no cost, as part of that report.

You will also have the legally protected right to examine the annual report at the offices of the Michigan Conference of Teamsters Welfare Fund in Detroit, Michigan and at the U.S. Department of Labor in Washington D.C. To obtain a copy from the U.S. Department of Labor, your request should be addressed to:

Public Disclosure Room N 1513
Employee Benefits Security Administration
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210

Coverage to Correct Complications from Non-Covered Procedures

Your Summary Plan Description excludes all coverage in connection with treatments deemed by MCTWF as primarily for cosmetic purposes or for those which it deems experimental, investigational, or otherwise not reasonable or customary treatment.

Effective May 24, 2007, the Trustees have resolved to further exclude coverage for services to correct complications arising out of cosmetic procedures, even when such corrective services are medically necessary. However, the Trustees have also resolved to cover medically necessary services to correct complications arising out of experimental, investigational or otherwise not reasonable or customary treatment.



Change in Family Status Notification Time Limits

In the Winter 2006-2007 issue of the *Messenger*, it was announced that MCTWF was extending the time for notification of a new dependent (i.e., due to marriage, birth, adoption or placement for adoption) to 60 days following the date of the event, and failure to timely notify MCTWF would prevent retroactive eligibility.

Effective June 5, 2007, the Trustees have resolved to eliminate the time limit to notify MCTWF of a new dependent (i.e., spouse or child) of those participants whose employers contribute under the standard “composite” contribution rate structure. Accordingly, in such case, upon receipt of notification and the required documentation, coverage will be provided retroactive to the date of the event. Those participants whose employers contribute under a “tiered” contribution rate structure remain bound by the 60-day notification requirement.

Reinstatement of Coverage Following 26 Week Break

In the Summer 2006 issue of the *Messenger*, MCTWF advised participants of the following change to the reinstatement of coverage rule:

“Coverage is reinstated upon the return to work (i.e. as of the first day of the week for which contributions resume) of laid off employees who were eligible for coverage at the time of layoff, regardless of the duration of layoff. This exception to MCTWF’s general reinstatement rule (reinstatement of coverage following a break of 26 weeks requires nine weeks of employer contributions during any consecutive 13 week period, with coverage retroactive to the first Sunday of the ninth week) applies only so long as the employee has retained his seniority rights.”

The Trustees have further amended the rule. Effective October 1, 2007, coverage for participants who are laid off by employers in industries that provide no seniority recall rights will be reinstated upon their return to work with that employer, if they return to work within 18 months of the last date of coverage following the layoff.

MCTWF Smoking Cessation Programs, Therapies and Online Resources Available to Participants

Blue Cross Blue Shield of Michigan's Quit the Nic Program

As a provider network for MCTWF, Blue Cross Blue Shield of Michigan offers MCTWF participants a free smoking cessation program called Quit the Nic. This program is offered through BlueHealthConnection, which has a proven track record for helping participants give up tobacco for good.

Under the Quit the Nic program, participants receive telephone support, educational materials, and opportunities to speak with a health coach about how to kick the habit. The health coach will help you develop a plan of action and establish a quit date. They also serve as a support system by offering encouragement, answering questions and evaluating progress.

To begin the program simply call 1-800-775-2583 and follow the telephone prompts until you reach the Quit the Nic program.

Here's how it works

During the first call, the health coach will discuss your readiness to quit smoking and set an action plan, including a quit date and how to prepare for that day.

The health coach will then guide you through a series of motivational topics. During your counseling sessions, the health coach will discuss relapse prevention. Each session is designed to help you deal with the urge to smoke and to help you develop alternative coping responses.

Tools to help

As an enrollee, you will receive several educational items and tools to help you. They include:

- Set Yourself Free - a pamphlet from the American Cancer Society
- Coping Pack - a cigarette-sized pack that contains coping responses and methods of dealing with the urge to smoke
- Calendar - a 60-day calendar for you to track your progress

Remember: To enroll, call 1-800-775-2583

Prescription Drug Therapies

As part of your smoking cessation program you may be required to obtain a prescribed medication to assist you

in quitting. Included under MCTWF's prescription drug benefit, the below table lists the smoking cessation prescription drug categories that are covered under the benefit (subject to your applicable co-payment for a maximum continuous drug therapy of 180 days per 12 month period and a lifetime maximum of two years of therapy), as well as some examples of commonly prescribed medications.

Drug Category	Commonly Prescribed Medications
Oral	Zyban, Chantix, Budeprion SR, Buprion HCL
Gum	Nicorette, Nicotine Gum, Committ Lozenges
Inhaler	Nicotrol Inhaler
Patch	Nicotrol, Nicoderm CQ, Nicotine Transdermal System
Spray	Nicotrol NS

Please Note: If any prescription smoking cessation product becomes available over-the-counter, it will no longer be covered.

ValueOptions Online Resources

Throughout the month of November a special topic titled "No to Nicotine" will be featured on the home page of ValueOptions (MCTWF's behavioral health network) Achieve Solutions website, which allows you to reach a library of articles, quizzes and news articles about tobacco cessation. More information about tobacco cessation can be found throughout the year from the home page of Achieve Solutions in the Alcohol and Other Drugs section under the "Tobacco" topic.

* Lung Cancer – Know the Facts

Over 213,000 people will be diagnosed with lung cancer this year. 15% of those diagnosed will survive 5 years; early detection dramatically improves survival.

Symptoms of lung cancer include chronic cough, hoarseness, coughing up blood, weight loss and loss of appetite, shortness of breath, fever without a known reason, wheezing, repeated bouts of bronchitis or pneumonia and chest pain. See your doctor if you experience these symptoms. You may have lung cancer or another serious lung disease that can be treated, especially if diagnosed at an early stage.

* according to and published by the American Lung Association



Educational DVDs/Videos through BlueHealthConnection

BlueHealthConnection provides MCTWF participants with a comprehensive health care management program designed to help you get healthy, stay healthy and lead a better life.

BlueHealthConnection's registered nurse health coaches will provide you with the information, assistance and decision making tools you need to work with your doctor and take charge of your health care needs. The nurse health coach can provide you with health education materials on a number of different categories, including educational DVDs/videos on the below listed subjects:

Breast Cancer
Major Joint Arthritis
Heart Disease
Shared Decision-Making

Colon Cancer
Prostate Disorders
Weight Management
End-of-Life Decisions

Back Pain
Women's Health
Mental Health
Chronic Conditions

To speak to a nurse health coach, call BlueHealthConnection at 800-775-2583. The nurse health coach will help you select the DVD/video that is appropriate to your needs and will follow-up with you to make sure you understand the content.

Influenza Vaccination

Yes, it's that time of the year again; time to get your influenza vaccination. Influenza is a serious disease that can peak anywhere from December through March according to the Department of Health and Human Services' Centers for Disease Control and Prevention. According to the American Lung Association, this year there is more vaccine available than ever before. If you were unable to get your vaccine in October it is not too late. Getting vaccinated in November or even into December or January will still provide protection. The American Lung Association also provides valuable information on the influenza vaccination, through their newsletter titled *Flu News* that is available for free by subscribing online at www.lungusa.org.

To locate a flu clinic in your area, go to www.flucliniclocator.org and enter your zip code into the Flu Clinic Locator. You will get the date, times, address, and phone number of the clinics

offering flu shots near you, as well as a map showing where the clinic is located. The American Lung Association updates the locator daily. Be sure to choose a BCBS PPO provider.

For adults age 19 and older, flu vaccinations are covered as a medical benefit, subject to plan deductibles and coinsurance charges. For children ages 6 months to 18 years, the flu vaccination is covered as a wellness benefit.



If you use an out-of-network provider and are required to pay at the time you receive your vaccination, send your itemized receipt to MCTWF for reimbursement, subject to MCTWF's maximum allowable benefit schedule and applicable plan deductible and coinsurance, or co-payment charges.

The *Messenger*, published quarterly, notifies you of changes to your plan of benefits. Please retain all issues of the *Messenger*, along with your SPD booklet and other plan materials, for future reference.

MICHIGAN CONFERENCE OF
TEAMSTERS WELFARE FUND

2700 TRUMBULL AVE.
DETROIT, MICHIGAN 48216
313-964-2400
Toll Free 1-800-572-7687



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Deadline Reminders

As yet another year is ending, please be reminded of the following important deadline dates as they pertain to your coverage with MCTWF:

- **Flexible Dependent Coverage Program-**

The Flexible Dependent Coverage Program provides a medical expense reimbursement account for participants with covered dependents who wish to waive their dependents' medical and prescription drug coverage under their MCTWF plan in favor of other group health plan coverage. Program details are provided in your Summary Plan Description. To enroll you must complete and submit to MCTWF, the Flexible Dependent Coverage Election Request form (available at www.mctwf.org or from our Customer Service Department) **beginning November 1st. It must be received by MCTWF no later than December 31st.** Once

your dependents are enrolled in the Program, enrollment will continue until you duly inform MCTWF that your dependents are no longer covered under the other health plan. You may also otherwise terminate enrollment in the Program during the annual November 1st through December 31st window.

- **Calendar Year Restorations** – Each January 1st, benefits that are subject to annual maximum frequency or dollar limits are restored. As to frequency, this includes wellness exams and certain screenings, certain medical supplies, inpatient and outpatient mental health and substance abuse services, vision exams and correction, and certain dental services. As to dollar limits, this includes chiropractic services, extended benefits, additional services and supplies, transplant follow-up benefits and Dental Plan I benefits. Lifetime dollar maximums are annually partially restored for extended benefits and additional services and supplies. Also, annual out-of-pocket maximums are restored each January 1st.