

Michigan Conference of Teamsters Welfare Fund



Messenger



VOLUME 27, ISSUE 4

FALL 2009

Message from MCTWF's Executive Director

Dear MCTWF Family;

Well, here we are, picking our way through the post-apocalyptic rubble of industrial America, more than a little anxious and disoriented, and finding it hard to see our way forward while constantly looking over our shoulders. But, this too shall pass, and meanwhile, we are all brothers, and brothers look out for each other.

Fall will soon turn to winter and with it, our annual Holiday lunch for the staffs of MCTWF and the nearby Teamster affiliates. This year, in the spirit of brotherhood and sisterhood and in light of these blighted conditions, we would like to invite about 100 of you who are out of work to join us at our Holiday lunch on December 23rd starting at 1:00 p.m., in our Union meeting hall; first come, first serve until the food runs out.

We have devoted much of this issue of the *Messenger* to reviewing with you some of the screens available on our online *Participant Web Portal*. A significantly growing number of participants are accessing the Portal on a regular basis to check on their eligibility, plan benefits, claim adjudication details, benefit accruals and plan limits on benefits and out-of-pocket expenses, and to update their account information. We urge you to read the article and then check out the Portal. It's easy to access, navigate and understand and will prove to be a valuable tool for you and your family for maintaining your benefit records and understanding and tracking your entitlements.

A number of plan improvements are discussed in this issue. The most significant change is a structural simplification, effective January 1, 2010, to MCTWF's SOA, TIF, PEP and I&S medical plans that merges all categories of medical benefits, eliminates category based benefit caps, deductibles and out-of-pocket coinsurance expense caps, and sets plan-wide, aggregate out-of-pocket caps. MCTWF has also liberalized its full-time student eligibility rule by extending filing dates and by eliminating the rule's retroactive coverage termination provisions.

For our retirees, MCTWF is now making available, as a supplement to its Retiree Medical Program, a rider that provides coverage for hearing, optical, and dental benefits. Please review the details within, as well as those regarding MCTWF's liberalization of its retiree spouse contribution rule.

Welcome to the many new groups that have joined us since the last *Messenger* publication (or are scheduled to do so shortly), including several Local 337 production companies - Dean River Productions, Next Door Productions, Highland Park, Game of Death Productions, Vanishing Film, Royal Oak Films, Master Class, Northland Productions, A Year in Mooring, Trust Productions and Prospect Park Productions, the Compass Group at locations under Locals 7, 364 and 406, Industrial Transport under Locals 332, 580, and 614, the Sutphen Corporation under Local 284, the Dairy Farmers of America under Local 364, and under Local 214 the City of Clare, Arenac County Road Commission, Berrien County Mental Health Authority, the City of Three Rivers, and the Schoolcraft County Road Commission. Thanks for coming on board. We are intent on surpassing your highest expectations of service.

The Fund staff, Trustees, and I wish you Happy Holidays, good health and a much improved new year.

Richard Burker

Inside this issue:

SUMMARY ANNUAL REPORT	2
Participant Web Portal Features	3-4
SOA, TIF, PEP and I&S Medical Plans Simplification	5
Full-Time Student Eligibility Rule	5
Extended Retiree Spouse Retiree Contribution Rate Rule	6
Retiree Supplemental Benefits Rider	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.

Summary Plan Descriptions Coming Soon!

MCTWF is pleased to inform you that newly updated Summary Plan Description booklets and schedules of benefits will be mailed to all participants during the first quarter of 2010.

Summary Annual Report

Michigan Conference of Teamsters Welfare Fund

Plan year Ended March 31, 2009

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, 2009. 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 \$178,337,008 as of March 31, 2009 compared to \$217,381,585 as of April 1, 2008. During the plan year, the Plan's net assets decreased by \$39,044,577. This decrease includes unrealized 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 \$150,914,293 including, but not limited to, employer contributions of \$178,903,907, participant contributions of \$8,546,610, loss from investments of \$40,658,560, rental income of \$14,640 and other income of \$4,107,696.

Plan expenses were \$189,958,870. These expenses included \$178,329,668 in benefits paid on behalf of participants and beneficiaries, and \$19,013 in premiums paid to an insurance carrier for the provision of benefits, as reflected below, and \$11,610,189 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 the Plan's salaried staff. The total premiums paid for this policy for plan year ended March 31, 2009 were \$19,013.

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, 48216-1296. 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



Participant Web Portal Features

In the Spring 2009 issue of the *Messenger* we announced enhancements to MCTWF's *Participant Web Portal*, which provides you access to your protected health information maintained by MCTWF through a fully secured personal account. We are pleased to note that since the beginning of this year many new personal accounts have been established, most of which have been revisited several times. For those of you who have not yet created an account and learned how useful this tool is, here's a look at some of its screens (using fictional participants and data):

Michigan Conference of Teamsters Welfare Fund Participant Portal

Login Welcome Marcus MCTWF Forms
 You have (0) unread message(s).

Participant Family Eligibility History Plan Limits Claims Account Maintenance

Marcus - 3/17/1964	Eligibility Date *	Termination Date	Employer	Local	Benefit Plan	Notes
	10/05/2008	Open Ended	Best Company Ever, LLC.	406	302	
	03/04/2007	10/04/2008	Best Company Ever, LLC.	406	100	
	01/21/2007	03/03/2007	Best Company Ever, LLC.	406		2
	01/01/2006	01/20/2007	Best Company Ever, LLC.	406	100	

* By plan and employer on or after 1/1/2006.

Notes:
 (2) Click 2 to view MCTWF policy regarding coverage provided by Benefit Bank weeks.

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This is the **Eligibility History** screen. There are separate screens for each family member. It displays all periods of eligibility on or after January 1, 2006. Periods of eligibility are separated by changes in benefit plan, or employer, or by a lapse in eligibility. A link is provided for any codes that appear in the "Notes" column, which is also footnoted at the bottom of the screen. By clicking on the named benefit plan in the "Benefit Plan" column you can view the applicable Schedule of Benefits in its most current form.



This is the **Claims** screen. There are separate screens for each family member. It reflects the status of your medical, prescription drug, dental, vision, mental health & substance abuse, short term disability, total & permanent disability and death claims. You may search this screen by selecting from a number of options. You may enter a specific date of service or a range of dates of service, a claim number, a provider name, the patient name, or claim type, or by combinations of these options, which are located at the top of the screen. Accessible claims are those that have been paid or rejected, with dates of service for the current calendar year and the two years prior. By clicking on the "View" link to the left of each claim line you can access a detailed explanation of benefits.

Michigan Conference of Teamsters Welfare Fund Participant Portal

Login Welcome Marcus MCTWF Forms
 You have (0) unread message(s).

Participant Family Eligibility History Plan Limits Claims Account Maintenance

Enter data into one or more search fields and then click the 'Search' button.

Date of Service (Start Date): Provider: All
 Date of Service (End Date): Patient Name: All
 Claim Number: Service Type: All

Search NOTE: Search results are limited to adjudicated claims only.

Click on any column heading to sort by that column. Click again to sort in the other direction.

View	Date Of Service	Patient Name	Date of Birth	Claim Number	Provider	Billed	Allowed	Paid	Date Paid
View	08/14/2009	Marcus	03/17/1964	092324412919	ABC Laboratories	\$281.20	\$281.20	\$166.89	08/25/2009
View	08/14/2009	Marcus	03/17/1964	963187228880	John Smith, M.D.	\$135.00	\$108.00	\$108.00	08/24/2009
View	08/02/2009	Marcus	03/17/1964	09222261314732	Generic Drugs Pharmacy	\$101.07	\$101.07	\$91.07	08/07/2009
View	07/27/2009	Kimberly	08/30/1999	961087259640	John Smith, M.D.	\$85.00	\$69.63	\$69.63	08/03/2009
View	07/21/2009	Michael	11/26/1997	09206184604725	Generic Drugs Pharmacy	\$2.14	\$2.14	\$0.00	07/23/2009
View	07/21/2009	Michael	11/26/1997	09206983504116	Generic Drugs Pharmacy	\$1.78	\$1.78	\$0.00	07/23/2009
View	07/20/2009	Michael	11/26/1997	0908105545158	MacFlays Family Dentistry	\$190.00	\$161.00	\$161.00	08/14/2009
View	07/20/2009	Richard	11/02/1992	0908105545201	MacFlays Family Dentistry	\$198.00	\$180.00	\$180.00	08/14/2009
View	07/20/2009	Kimberly	08/30/1999	0908105545054	MacFlays Family Dentistry	\$164.00	\$137.00	\$137.00	08/14/2009
View	07/15/2009	Marcus	03/17/1964	09198994204235	Generic Drugs Pharmacy	\$112.10	\$112.10	\$102.10	07/15/2009

1 2 3 4 5 6 7 8 9 10 ...

Continued on page 4



These are portions (due to space limitations) of the **Plan Limits** screen, which, according to your plan of benefits, display your family and individual accruals for the current and prior calendar year toward -

- lifetime and calendar year dollar limits available and used for applicable medical and dental benefits;
- calendar year frequency limits available and used for applicable medical, dental and vision benefits; and
- calendar year cost sharing expenses

Michigan Conference of Teamsters Welfare Fund
Participant Portal

Login
Welcome **Marcus**
You have (0) unread message(s).
MCTWF Forms

Participant
Family
Eligibility History
Plan Limits
Claims
Account Maintenance

Select Benefit Year: 2009 2008
Benefit Year: 2009

Please be advised that this Portal is reflective only of that information that has been reported to and processed by MCTWF as of the prior business day and therefore, may not be current. Please be further advised that all accumulated amounts stated in this Portal, including those accumulating against benefit and out-of-pocket maximums, are subject to timing and classification discrepancies and therefore should be considered as mere indicators that should be reviewed carefully before relying on their accuracy.

All limits are "per person" unless noted otherwise. To view your current plan's schedule of benefits, click [here](#).

Patient and Family Cost Sharing

Deductible - Individual	
BCBS PPO NETWORK MAXIMUM:	\$100.00
NON-BCBS PPO NETWORK MAXIMUM:	\$300.00
USED	
Marcus - (3/17/1964)	\$100.00
Ruth - (9/27/1966)	\$22.00
Michael - (11/26/1997)	\$78.00

Calendar Year 2009	
Deductible - Family	
BCBS PPO NETWORK MAXIMUM:	\$200.00
NON-BCBS PPO NETWORK MAXIMUM:	\$600.00
USED	
\$200.00	

Family Annual Out of Pocket Coinsurance Maximum	
BCBS PPO NETWORK MAXIMUM:	\$1,500.00
NON-BCBS PPO NETWORK MAXIMUM:	\$2,500.00
USED	
\$1,516.71	

Medical Benefit Limits								
Calendar Year 2009	Chiropractic Benefits							
	MAXIMUM: \$1,000.00 USED							
	Ruth - (9/27/1966) \$359.01							
	Richard - (11/2/1992) \$33.93							
	Michael - (11/26/1997) \$44.58							
Lifetime	Overall Medical Benefits							
	OVERALL MAXIMUM: \$5,000,000.00 USED							
	Marcus - (3/17/1964) \$7,570.99							
	Ruth - (9/27/1966) \$12,155.95							
	Richard - (11/2/1992) \$1,926.19							
	Michael - (11/26/1997) \$1,631.45							
	Kimberly - (8/30/1999) \$559.33							
Vision Benefit Limits								
Calendar Year 2009	Vision Benefit							
	One option of vision correction services per year per covered individual with the exception of Option 3 Laser Surgery, which is available once per eye per lifetime.							
			Option 1		Option 2		Option 3	
	Covered Individual	Exam	Frames	Lenses	Contact Lenses	Laser Surgery		
	Marcus - (3/17/1964)	Utilized	Utilized	Utilized				
	Ruth - (9/27/1966)	Utilized	Utilized	Utilized				
	Richard - (11/2/1992)	Utilized	Utilized	Utilized				
	Michael - (11/26/1997)	Utilized	Utilized	Utilized				
	Kimberly - (8/30/1999)	Utilized	Utilized	Utilized				
	Dental Benefit Limits							
Calendar Year 2009	Overall Dental Benefits							
	Delta Premier Maximum: \$2,000.00							
	Delta PPO Maximum: \$2,100.00 USED							
	Richard - (11/2/1992) \$501.00							
	Michael - (11/26/1997) \$615.00							
	Kimberly - (8/30/1999) \$237.00							
	Ruth - (9/27/1966) \$825.00							
	Marcus - (3/17/1964) \$66.00							
	Dental Cleanings							
	OVERALL MAXIMUM: 2 USED							
	Richard - (11/2/1992) 2							
	Michael - (11/26/1997) 2							
	Kimberly - (8/30/1999) 2							
Ruth - (9/27/1966) 2								
Marcus - (3/17/1964) 1								



By clicking on the available link, this screen also allows you to view your current plan's *Schedule of Benefits* and, as with all screens, to MCTWF's *Forms* page.

Note: For purposes of this article a Key 1 plan was used.

SOA, TIF, PEP and I&S Medical Plans Simplification

Currently, under MCTWF's SOA, TIF, PEP and I&S Plans, medical benefits are categorized as -

- "Basic" benefits - which includes any medical benefit that does not fall under "extended" benefits or "additional services and supplies."
- "Extended" benefits - which includes infusion therapy, chemotherapy, radiation therapy, dialysis, injections, hyperalimentation, home health care, durable medical equipment and medical supplies (and lab and diagnostic testing under the I&S Plan); or
- "Additional Services and Supplies"- which includes prosthetics, orthotics, dietary counseling, respite care and physical, occupational and speech therapies.

Each category is subject to individual benefit caps, cost sharing structures and out-of-pocket limits and as such, has proven to plan participants confusing and difficult to track. In an effort to simplify these Plans, the Trustees have modified them, as described below. The modifications will be reflected in MCTWF's new SPDs for these plans and on the *Schedule of Benefits* page of MCTWF's website.

Effective with dates of service on or after January 1, 2010, the Plans are modified as follows:

- All current medical benefit categories will be eliminated.
- The current separate lifetime benefit caps for Extended benefits and Additional Supplies and Services will be eliminated and all such benefit expenses will be accrued under the Plans' overall medical benefits lifetime maximum of \$5,000,000 per person.
- The current deductible for Extended benefits will be eliminated.
- The current separate annual out-of-pocket family caps for all current categories will be eliminated and all such expenses will be accrued under the Plans' new annual out-of-pocket family caps, as follows:

SOA, TIF & PEP Plans

\$2,000 per family in-network

\$4,000 per family out-of-network

I&S Plan

\$2,500 per family in-network

\$5,000 per family out-of-network

The Trustees have also modified the Additional Services and Supplies lifetime benefit cap for all the above affected plans, increasing the current \$20,000 lifetime per person cap to \$50,000 lifetime per person, retroactive to January 1, 2009, until the above January 1, 2010 modifications go into effect for active participants. Participants of these plans (and the TIF2 plan) with COBRA qualifying events in 2009 will continue to be limited to the \$50,000 cap under their COBRA plans.

Full-Time Student Eligibility Rule Liberalization

Under all MCTWF Plans other than the Retiree Medical Program, extended coverage is available for eligible dependent children age 19 through the end of their 24th birthday month, provided that the child is enrolled in a degree or certification program offered by an accredited academic institution or accredited vocational school (except where they fall under the non accredited exception rule; please see the Fall 2006 issue of the *Messenger*), as documented by a completed *Full-Time Student Eligibility Verification Form*.

Currently, the completed Form must be received by MCTWF by no later than October 10th for the Fall semester and by February 15th for the Winter/Spring semester to maintain extended coverage until the earlier of the end of the child's 24th birthday month or the date of graduation. Failure to meet those deadlines results in retroactive termination of coverage to August 31st or December 31st, respectively, and has been the cause of confusion and irritation.

Effective immediately, the deadlines for receipt of the *Full-Time Student Eligibility Verification Form* are extended and coverage termination is prospective only. Specifically, the Form must be received by MCTWF by the first Saturday in November for the Fall semester and by the first Saturday in March for the Winter/Spring semester or coverage will be terminated effective midnight of that date. Should MCTWF receive the completed Form thereafter, coverage will be reinstated effective the first Sunday following receipt.



We're on the Web!!
www.mctwf.org

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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 800-572-7687



MICHIGAN CONFERENCE OF TEAMSTERS WELFARE FUND

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

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Extended Retiree Spouse Retiree Contribution Rate Rule Liberalization

Retirees and their spouses may retain their eligibility under the Retiree Medical Program (Program) until reaching their 65th birthday or becoming eligible for Medicare. Furthermore, the otherwise eligible spouse of a retiree who has ceased participation in the Program due to such limitations, or due to his death, can continue to participate in the Program as an "extended retiree spouse" at the retiree's contribution rate, unless or until five years has elapsed from the date that the retiree's Program coverage began, after which, for so long as she remains eligible, the spouse may continue to participate at the Program's cost based rate.

Effective October 1, 2009, the Trustees have changed this rule as it applies to the cessation of the retiree's Program participation due to his death. In doing so, the Trustees have mirrored the more liberal rule that applies to the cessation of the retiree's Program participation due to early age (disability) Medicare eligibility. Thus, now, if a retiree dies while participating in the Program, his otherwise eligible spouse can continue to participate in the Program as an "extended retiree spouse" at the retiree's contribution rate, unless or until five years has elapsed from the date that the retiree's Program coverage began or until the date the retiree would have attained age 65, after which, for so long as she remains eligible, the spouse may continue to participate at the Program's cost based rate.

Retiree Supplemental Benefits Rider

Effective January 1, 2010, MCTWF will make available to eligible retirees and spouses a rider that supplements the Retiree Medical Program with MCTWF's hearing, optical and Dental Plan 2 benefits.

The Retiree Rider is offered at a monthly cost-based contribution rate (rather than at a subsidized rate, as are the Retiree Medical Program benefits) of \$124 (covering both the retiree and the spouse) and will remain at that contribution rate for 15 months, through March 31, 2011.

After the Retiree Rider is elected, it may be dropped effective March 31st of any year, following at least one year of Retiree Rider coverage.

For example, if the Retiree Rider coverage commences January 1, 2010, it first may be dropped effective March 31, 2011, and if the retiree chooses not to drop it then, it may be dropped effective any March 31st thereafter. To do so, the retiree must notify MCTWF in writing by February 20th of that year. Once the Retiree Rider coverage is dropped, it will not be available to the retiree and spouse again.

All current Retiree Medical Program participants have been notified of the availability of this Rider.

Fall 2009

If you are married please be sure to share this communication with your spouse.