Message from MCTWF’s Executive Director

Dear Teamster Families:

Like most people, I’m as uncomfortable talking about my medical experiences as hearing about theirs, but for the sake of encouraging your use of our free wellness screening benefits, I’ve decided to share with you my recent experience. About 25 years ago, my mother was treated for colon cancer and, since it already appeared that I was the recipient of my parents’ least desirable genes, I figured that some day I would have to subject myself to that most loathsome of screening procedures, ... the colonoscopy. As my 50th birthday came and went, the matter became ever more real and oppressive. From time to time, I would visualize Lady Justice (thankfully, blindfolded) holding that set of scales and that big sword; weighing the relative merits of dumb but happy avoidance and responsible path until, in a fleeting moment of clarity and maturity, ... I scheduled it.

Weakened in body and spirit by the requisite prior day fast and associated "cleansing", but still far from accepting the inevitability of going through with this, I was prepped with surprising consideration and discretion, then hooked up to an IV (the possibility of backing out was clearly dimming) and wheeled into the procedure room where I was disconcertingly greeted by a far too enthusiastic medical team. However, the anesthesiologist put an end to any final, lingering hope of escape.

Time froze, as it seemed that the very next second I awoke, feeling slightly befuddled, but amazingly well rested, with my wife amusedly clutching photos of my absolutely perfect colon and the doctor looking very much forward to seeing me again in five years. I went home, ate like someone who hadn’t eaten in a couple of days, and shamelessly allowed myself to be catered to for the rest of the day.

So, it turned out to be no big deal after all. If the colonoscopy had revealed polyps, they would have been removed at once and most likely they would have proven harmless. The problems arise when they are not found and removed. The risk of developing colon polyps increases as you age beyond 50, or if you are overweight, sedentary, a smoker, eat a high-fat, low-fiber diet, have an inflammatory intestinal condition, or have a family history of colon cancer or polyps. If the polyps are small, you’re unlikely to have symptoms, which is why regular screening is so valuable. If you are 50 or more and have not had this procedure within the last five years, please give it your serious consideration. It’s safe, quick, free (if performed by a BCBS PPO physician), and, of course, it can save your life.

Moving from private matters to public ones, please take note of the important communication to participants on page 2 of this Spring Messenger concerning MCTWF’s exclusion of The Kroger Co. from its pharmacy network, effective July 1st. MCTWF’s Trustees resolved to take this action in light of Kroger's callous, ill-considered decision to terminate its warehousing and distribution relationship in Livonia, MI resulting in financial injury to the Fund and catastrophic loss to several hundred Fund participants. The Trustees are hopeful that this action, in conjunction with strategies being pursued and planned by Labor and spearheaded locally by Teamsters Local Union 337, will cause Kroger to capitulate. But regardless of the outcome, the network is broad and deep, as is MCTWF’s intent to refrain from supporting the business of vendors that do it and its participants harm. Another serious issue is the struggle being led by Teamsters Local Union 332 on behalf of 1,000 registered nurses, at Genesys Regional Medical Center in Grand Blanc Township, MI, for fair and appropriate labor contract terms. Nurses are the heart, soul, and backbone of our health care system. They lead arduous, self-sacrificing existences. They deserve our loyalty and support.

Please review the rest of this Messenger issue, as well. MCTWF’s child immunization program now covers the rotavirus vaccine that protects against an infection that causes severe diarrhea, while the adult program now covers the zoster vaccine for the prevention of shingles and removes the prior imposed age restriction on the varicella vaccine for the prevention of chicken pox. Important issues regarding dependent eligibility are also addressed, including ongoing coverage for full time graduate school students.

Of final, significant note is the addition to the MCTWF Board of Trustees of two highly qualified and respected gentlemen, Dennis Hands, who is Michigan Teamsters Joint Council #43 Freight Director and Assistant to Joint Council President Larry Brennan and Earl Ishbia, co-founder and CEO of the innovative and successful Sherwood Food Distributors. We will surely benefit from their service and appreciate their willingness to do so.

On behalf of the Trustees and staff of MCTWF, I wish you good fortune and the best of health.

Richard Burker
WalkyTalk™

A brisk-paced walk can help you look and feel better, increase energy, and pick up your spirits. Walking can work to improve your health, too. A daily walking routine can help you lose weight, lower cholesterol, strengthen your heart, and reduce the likelihood of serious health problems down the road. And with America spending more than ever on preventable health problems like heart disease, osteoporosis, type 2 diabetes, and conditions associated with obesity such as arthritis, every step counts.

Walking is a great way to improve your health and lose weight. It also decreases your chances of contracting certain diseases and boosts your overall physical and mental well-being.

WalkyTalk will help you plan, track and maintain a regular walking program, using information you provide to create a personalized log of your progress.

There are no rules to follow. You can walk:

- Indoors or outdoors
- Alone or with a friend
- At any time of day
- For as long or short as your time allows.

In addition to using WalkyTalk to log your progress, you can:

- Read up on walking essentials, such as the best footwear or pedometers
- Learn about safety tips and basic guidelines for great results
- Find suggested music playlists for your iPod (or other portable music player)
- Visit the forum to share ideas and gain support from fellow WalkyTalkers

You’ll have access to Jodi Davis’s Blog - an online chronicle of how Jodi lost 162 pounds through walking and the Eating Right section for walking-related health and medical questions.

Reprinted from walkytalk.com, with permission from Blue Cross Blue Shield of Michigan. To access WalkyTalk go to www.walkytalk.com.

Kroger Exclusion From MCTWF Pharmacy Network

This is to inform you that effective July 1, 2008, and until further notice, The Kroger Company will be excluded from the Caremark retail pharmacy network for all MCTWF participants and beneficiaries. MCTWF’s Trustees have taken this step in light of the consequences of Kroger’s decision to terminate its contract with Advantage Logistics – Michigan, Inc., in Livonia, to provide warehousing and distribution services to Kroger. That decision has caused more than 300 MCTWF participants to lose their jobs and their health and welfare benefits. The Trustees hope that by their action and those being taken and planned by the Teamsters and other affected unions, locally (the Coalition to Save Michigan Jobs) and nationally, sufficient economic pressure will be brought to bear on Kroger to cause it to reconsider its decision and restore those 300 Teamsters to their jobs and to their participation in MCTWF.

The Caremark network is comprised of over 62,000 retail pharmacies nationally, with network pharmacy alternatives within reasonably close proximity to almost every Kroger store location; so, while we regret any inconvenience caused, you should experience no difficulty in finding an equally accessible network pharmacy. If a Kroger pharmacy is in possession of your prescription with a remaining refill entitlement, ask the pharmacist to transfer it to a network pharmacy of your choosing, or contact your physician to call in a replacement prescription to a network pharmacy of your choosing. If you continue patronizing a Kroger pharmacy, as with any non-network pharmacy, you risk significant out-of-pocket expense, since MCTWF will reimburse you only up to the amount it would have paid a network pharmacy, less the applicable copay. To determine the network pharmacies in your area, please contact MCTWF’s Customer Service Department, or access www.caremark.com directly or through MCTWF’s web site at www.mctwf.org.
In the Event of Divorce…

There have been many instances in which MCTWF has not been informed of a divorce and the divorced spouse continues to utilize plan benefits, which MCTWF ultimately must pursue for recovery. Dependent spouse eligibility continues only through the date of divorce, as fixed by the Judgment of Divorce, and ceases at midnight of that day. It is the responsibility of both the participant and the divorced dependent spouse to notify MCTWF of the divorce immediately and to submit a copy of the Judgment. MCTWF will pursue both the participant and the divorced spouse for recovery of any post divorce, dependent spouse benefit expenses incurred by MCTWF, resulting from their failure to provide immediate notification of the divorce.

In the Event of Death…

If you are eligible for death benefits under a MCTWF plan, you may designate any one or more people as your beneficiary and apportion the benefit to those multiple beneficiaries, as you wish. Please be aware, however, that in order for MCTWF to pay the death benefits in the case of a designated beneficiary who is a minor, it may do so only to a guardian or conservator with full authority to access, receive and dispose of the named minor’s assets, as so appointed by Order of the Probate Court. Beneficiary designations may be changed by completion of a Change of Beneficiary form available on our website at www.mctwf.org or by contacting MCTWF’s Customer Service Department at 800-572-7687.

Coordination of Benefits For Dependent Children

MCTWF’s Coordination of Benefits (COB) policy applies when a person has health care coverage under more than one plan. If your eligible dependent child has coverage under another group health plan, benefits under this plan will be coordinated with benefits under the other plan. Such group health plans include government insurance plans provided for, or required, by law and group insurance plans, such as those provided by your spouse’s employer. The plan that pays first is the primary plan. When you submit a claim for benefits, the primary plan pays applicable covered expenses first and the secondary plan pays the remaining covered expenses. The Summary Plan Description (SPD) does not specifically address each situation in which a parent is responsible for a dependent child’s health care expenses or health care coverage. Therefore, MCTWF has expanded its policy as follows, but has remained consistent with its rules as stated in the SPD:

- The plan of the parent whose birth date falls earlier in the calendar year is the primary plan when:
  a. the parents are married;
  b. the parents are living together (regardless of whether they ever have been married);
  c. a court decree states both parents are responsible for the dependent child’s health care expenses or health care coverage; or
  d. a court decree awards joint custody but does not specify which parent is responsible for the dependent child’s health care expenses or health care coverage.

  *(If both parents have the same birth day, the plan that has covered the parent the longest is the primary plan.)*

- If a court decree designates only one of the parents as responsible for the dependent child’s health care expenses or health care coverage, that parent’s plan is the primary plan. If that designated parent has no health care coverage but his/her spouse does, that parent’s spouse’s plan is the primary plan.

- If no court decree allocates responsibility for the child’s health care expenses or health care coverage, the order of benefit determination is as follows:
  1. the plan covering the custodial parent;
  2. the plan covering the custodial parent’s spouse;
  3. the plan covering the non-custodial parent;
  4. the plan covering the non-custodial parent’s spouse.
DetlaVision®
MCTWF’s Vision Network

The DeltaVision® nationwide network of quality eye care professionals was made available to all MCTWF optical plan participants, effective October 1, 2007 (please see the Summer 2007 issue of the Messenger). Through the network, participants are covered in full for eye examinations and single, bifocal and trifocal lenses, with substantially improved coverage for frames and contact lenses, and benefits for laser vision correction and polycarbonate lenses for children.

To determine whether a provider participates in the network, you may link to the provider search available at www.mctwf.org on the Provider Networks page or contact MCTWF’s Customer Service Department at 800-572-7687.

Please be sure to inform the provider that you are covered by DeltaVision®. By doing so, participating providers will submit the claim on your behalf and any out-of-pocket expense you incur will reflect all discounts to which you are entitled.

Weekly Accident & Sickness Benefit

Definition of an Accident or Sickness

MCTWF’s Weekly Accident & Sickness benefits provide you with weekly short term disability (loss of time) benefits if you are disabled due to a non-occupational or non-auto related sickness or accident while you are covered by the Plan as an active participant.

Weekly Accident & Sickness benefits commence the first day following medical attention after the last day worked in the event of an accident and on the eighth day following medical attention after the last day worked in the event of a sickness.

To more clearly define whether a short term disability is the result of an accident or a sickness, MCTWF has adopted the following definitions:

**Sickness** - means any disorder of the body or mind (but not an injury) and pregnancy (including abortion, miscarriage, or childbirth).

**Accident** - means a bodily injury that:
1. is the direct result of an accident;
2. is not related to any cause other than the accident; and
3. results in immediate disability.

Utilizing Non-BCBS PPO Network Providers

As a general rule, your use of a non-BCBS PPO Network provider will result in additional out-of-pocket expense for covered medical services under MCTWF’s medical plans. To receive the higher, “in-network” level medical benefits, you must use a BCBS PPO Network provider, unless you qualify for a non-access exemption, or use a provider to whom you are referred by a BCBS PPO Network provider, or use a provider in one of the following categories: ambulance providers, ambulatory surgical centers, certified nurse anesthetists, certified nurse midwives, certified nurse practitioners, durable medical equipment suppliers, ESRD facilities, hearing aids suppliers, home health care providers, hospice providers, private duty nursing providers and prosthetic and orthotic suppliers, or if you are provided services in an inpatient or outpatient hospital setting by a provider in one of the following categories: ambulance, anesthesiology, radiation therapy, radiology, laboratory, pathology, emergency room physician and nuclear medicine. Non-BCBS PPO Network providers include BCBS Traditional network and MultiPlan network providers, as well as all other providers not affiliated with the BCBS PPO Network. Please remember that non-BCBS and non-MultiPlan network providers are not subject to contractually fixed service fees and thus, participants are exposed to balance billing for charges in excess of MCTWF’s maximum allowable benefit schedule.

Providers include practitioners and facilities (e.g., urgent care centers, surgical centers, hospitals, etc.). Provider affiliations change from time to time, and so you should always confirm, prior to receiving the provider’s services, that the provider is presently participating in the BCBS PPO Network. To locate a participating BCBS PPO Network provider you can:

- link to the provider search from the Provider Networks page on MCTWF’s website at www.mctwf.org;
- contact MCTWF’s Customer Service Department at 800-572-7687; or
- contact the after hours provider referral phone number listed on your MCTWF Networks Card or your Blue Cross ID card at 800-810-Blue (2583).
Immunizations received in accordance with MCTWF’s recommended schedules (which follow the recommendations of the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices) are covered, subject to applicable limits, by all MCTWF plans with medical coverage. Please refer to your schedule of benefits for specifics. Below is a summary of the 2007-2008 Recommended Adult Immunization Schedule and the 2008 Recommended Child and Adolescent Immunization Schedule. Please take note of the following changes from the last published schedules:

- For adults, the Varicella vaccine has been extended thorough all age groups and the Zoster vaccine has been added for adults age 60 and over.
- For children and adolescents the Rotavirus vaccine has been added for children ages 2 months to 6 months.

### 2008 Adult Immunization Schedule

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>19-26 Years</th>
<th>27-49 Years</th>
<th>50-60 Years</th>
<th>61-64 Years</th>
<th>65 Years and Older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tetanus diphtheria pertussis (Td/Tdap)</td>
<td>1 dose Td booster every 10 years</td>
<td>Substitute 1 dose of Tdap for Td</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human papillomavirus</td>
<td>One series (females only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles, Mumps, Rubella (MMR)</td>
<td>1 or 2 doses</td>
<td>2 doses (0, 4-8 wks)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella</td>
<td>2 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influenza</td>
<td>1 dose annually</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumococcal (Polysaccharide)</td>
<td>1 - 2 doses</td>
<td>1 dose</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>2 doses (0, 6-12 months or 0, 6-18 months)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>3 doses (0, 1-2, 4-6 months)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meningococcal (Polysaccharide)</td>
<td>1 or more doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zoster</td>
<td>1 dose</td>
<td></td>
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</tbody>
</table>

For a detailed statement including the CDC’s risk based recommendations, please refer online to [http://www.cdc.gov/vaccines/recs/schedules/downloads/adult/07-08/adult-schedule.pdf](http://www.cdc.gov/vaccines/recs/schedules/downloads/adult/07-08/adult-schedule.pdf)

For persons in this category who meet the age requirements and who lack evidence of immunity (e.g., lack documentation of vaccination or have no evidence of prior infection) □

Recommended if some other risk factor is present (e.g. on the basis of medical, occupational, lifestyle, or other indications) □

### 2008 Child and Adolescent Immunization Schedule

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Birth</th>
<th>1 mo</th>
<th>2 mos</th>
<th>4 mos</th>
<th>6 mos</th>
<th>12 mos</th>
<th>15 mos</th>
<th>18 mos</th>
<th>19-23 mos</th>
<th>2-3 yrs</th>
<th>4-6 yrs.</th>
<th>7-10 yrs</th>
<th>11-12 yrs</th>
<th>13-18 yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B</td>
<td>Hep B</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB</td>
<td>HepB Series</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotavirus</td>
<td>Rota</td>
<td>Rota</td>
<td>Rota</td>
<td>Rota</td>
<td>Rota</td>
<td>Rota</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>DTaP</td>
<td>DTaP</td>
<td>DTaP</td>
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<td>DTaP</td>
<td>DTaP</td>
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<td>DTaP</td>
<td>DTaP</td>
<td>Tdap</td>
<td>Tdap</td>
<td></td>
</tr>
<tr>
<td>Haemophilus Influenza Type b</td>
<td>Hib</td>
<td>Hib</td>
<td>Hib</td>
<td>Hib</td>
<td>Hib</td>
<td>Hib</td>
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<tr>
<td>Pneumococcal</td>
<td>PCV</td>
<td>PCV</td>
<td>PCV</td>
<td>PCV</td>
<td>PCV</td>
<td>PCV</td>
<td>PPV</td>
<td>IPV</td>
<td></td>
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<tr>
<td>Inactivated Poliovirus</td>
<td>IPV</td>
<td>IPV</td>
<td>IPV</td>
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<td>IPV</td>
<td>IPV</td>
<td>IPV</td>
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<td>IPV</td>
<td>IPV</td>
<td>IPV</td>
<td>IPV Series</td>
<td></td>
</tr>
<tr>
<td>Influenza</td>
<td>Influenza (annually)</td>
<td>Influenza (annually)</td>
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<tr>
<td>Measles, Mumps,</td>
<td>MMR</td>
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<td>MMR</td>
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<td>MMR</td>
<td>MMR Series</td>
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<tr>
<td>Varicella</td>
<td>Varicella</td>
<td>Varicella</td>
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<td>Varicella</td>
<td>Varicella</td>
<td>Varicella</td>
<td>Varicella</td>
<td>Varicella</td>
<td>Varicella Series</td>
<td></td>
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<tr>
<td>Hepatitis A</td>
<td>HepA (2 doses)</td>
<td>HepA Series</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Meningococcal</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>MCV4</td>
<td>HPV (3)</td>
<td></td>
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<tr>
<td>Human Papillomavirus</td>
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</tbody>
</table>

**Range of recommended ages**

**Catch-up immunization**

**Certain high-risk groups**

For a detailed statement, please refer online to [http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm](http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm)
If you are married please be sure to share this communication with your spouse.

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Full-Time Graduate Students Eligibility Verification

Under all MCTWF Plans, 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 an 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.

MCTWF’s Trustees have determined that such extended coverage applies to students who are enrolled in full-time graduate studies as well, through the end of their 24th birthday month. To receive uninterrupted extended coverage beyond the college/university graduation date, the student must provide MCTWF with the graduate school’s letter of acceptance and an Affidavit of Enrollment in Graduate School attesting to the student’s intention to attend a full-time program at the graduate school and stating the school’s minimum requirement for full-time status. For the first semester and each semester thereafter, a Full-Time Student Eligibility Verification Form must be completed and submitted to MCTWF immediately following the graduate school’s drop deadline date. Failure to do so will result in the termination of dependent coverage retroactive to the college/university graduation date. In such case, MCTWF will seek recovery, from both the participant and the child, of benefits paid past the said graduation date.

The Affidavit of Enrollment in Graduate School and the Full-Time Student Eligibility Verification Form are available from the Forms page of MCTWF’s website at www.mctwf.org or by contacting MCTWF’s Customer Service Department at 800-572-7687.