

HOW THE NEW HEALTH CARE REFORM BILL IMPACTS YOUR BENEFITS

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Please note that there is important information about your rights in this issue. Please read and retain the information for future use.

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On March 23, 2010 the Patient Protection and Affordable Care Act (PPACA), better known as the Health Care Reform Act, was signed into law. Among other things, the new law eliminates annual and lifetime maximums on essential benefits, provides coverage for children until age 26, no cost sharing for preventive care and immunizations, and no pre-existing condition exclusion permitted for children under 19 with the age limit eliminated in 2014. Over time, the law penalizes employees of a certain size that do not provide health care coverage to their employees. The law also creates Health Care Exchanges where individuals and small groups can choose from a marketplace of insurance products, provides for a limited reimbursement to funds which provide retiree health care coverage.

The many provisions of the new law become effective over several years. Contrary to what you may have seen or read in the news, provisions such as coverage for children under 26 and the elimination of lifetime and annual caps do not take effect right away. The law specifies that the effective date of these provisions is the "first day of the plan year beginning after September 23, 2010". Our Fund's plan year begins on September 1st of each year, which means our next plan year beginning after September 23, 2010 is September 1, 2011. Accordingly, the provisions of the law such as coverage for adult children until age 26 (if they have no other coverage available) and the elimination of annual and lifetime benefit maximums do not take effect until September 1, 2011.

Many of the new mandates are currently being provided for in our existing benefits package. For instance the Fund already does not charge the 20% coinsurance for most preventive care services and pays all qualified emergency room visits in full after the emergency room deductible. We also currently do not have any exclusions for pre-existing conditions.

The long range goal of the new law to remove the inequities in the health care system is a good one. The hope is that over time more people will be covered under employer or government subsidized plans, and eventually the per capita cost of medical coverage will come down because everyone will be paying into the system. However, in the short term, many of the mandates such as coverage for adult children under 26 and the removal of lifetime and annual maximums will have a monetary cost to the Fund with no additional revenue. Consultants estimate that just the cost of covering adult children up to age 26 will increase the Fund's cost by 4%. We are still calculating the total increased cost to the

Fund for other provisions such as the removal of annual and lifetime maximums. Along with these increased costs is the cost of medical inflation which was over 7% last year and was consistently over 10% for the previous years.

The Trustees of the Fund are working hard every day to provide health care benefits at an affordable cost. The Fund has consistently lowered its administrative cost over the last several years. In spite of the many challenges ahead, we will continue our efforts to find cost effective ways to deliver your health care benefits.

For more information on the Pension Protection and Affordable Care Act (PPACA) visit www. Healthcare.gov or call the Fund office at 516-560-8500.

### *Effective August 1, 2010 Empire will expand both its HMO and PPO/EPO & Indemnity Reference Laboratory Networks*

August 2, 2010 – New York - Empire BlueCross BlueShield, New York's largest insurer by medical membership, announced today that, effective August 1, 2010, it will significantly expand its HMO and PPO/EPO & Indemnity Reference Laboratory Networks. This expansion ensures broader choices for members and physicians, creates an environment in which labs compete on service, quality and choice, and reduces the need for members to spend more of their health care dollars using out-of-network laboratories.

Specifically, Empire is:

>>> Expanding its HMO Reference Laboratory Network to include Laboratory Corporation of America® Holdings (LabCorp®), DIANON Systems and Centrex Clinical Labs (both LabCorp subsidiaries) for all markets. In addition, for the areas of Brooklyn and Queens, Shiel Medical Laboratory will also be added.

>>> Expanding its PPO/EPO and Indemnity Reference Laboratory Network to include Laboratory Corporation of America Holdings (LabCorp), DIANON Systems, Centrex Clinical Labs, BioReference Laboratories, Inc., Enzo Clinical Laboratories, and Sunrise Medical Laboratories.

In addition to patient service centers, these labs offer courier pick-up services for specimens collected in provider offices, offering another convenient option to Empire members.

### Post-Mastectomy Reconstructive Surgery\*

The Road Carriers Local 707 Welfare Fund covers Post-Mastectomy Reconstructive Surgery. Briefly described, any participant or dependent receiving mastectomy-related benefits will be covered, in a manner determined in consultation with the attending physician and the patient, for: Reconstruction of the breast on which the mastectomy was performed; Reconstruction of the breast on which the mastectomy was not performed in order to produce a symmetrical appearance; Prostheses; and Treatment of physical complications at all stages of the mastectomy, including lymphedema.

Coverage for all reconstructive surgery described here will be subject to the normal copayments, deductibles and co-insurance consistent with the Plan's terms as described in the applicable Summary Plan Description.

\*Federal Law requires that we provide this notice to you annually.

#### SUMMARY ANNUAL REPORT FOR ROAD CARRIERS LOCAL 707 WELFARE FUND

This is a summary of the annual report for the ROAD CARRIERS LOCAL 707 WELFARE FUND, (Employer Identification No.11-2159859, Plan No. 501) for the period September 1, 2008 to August 31, 2009. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information: The plan has contracts with Empire Health Choice HMO, Inc., Hartford Life Insurance Co., and Metropolitan Life Insurance Co. to pay the following types of claims incurred under the terms of the plan: All HMO, prescription drug, temporary disability, ad&d and life insurance claims. The total premiums paid for the plan year beginning September 1, 2008 and ending August 31, 2009 were \$2,524,497

BASIC FINANCIAL STATEMENT: The value of plan assets, after subtracting liabilities of the plan, was \$3,535,536 as of August 31, 2009 compared to \$9,598,669 as of September 1, 2008. During the plan year the Plan experienced a decrease in its net assets of \$6,063,133. This decrease includes unrealized appreciation or 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 \$16,131,229. This income included employer contributions of \$16,102,513, employee contributions of \$1,797,432, realized losses of \$1,525,075 from the sale of assets,earnings from investments of \$-275,210, and other income of \$31,569. Plan expenses were \$22,194,362. These expenses included \$1,365,150 in administrative expenses and \$20,829,212 in benefits paid to participants and beneficiaries.

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 listed below are included in that report:

- 1. An accountant's report;
- 2. Financial information and information on payments to service providers;
- 3. Assets held for investment;
- 4. Transactions in excess of 5 percent of the plan assets; and
- 5. Insurance information including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of: Board of Trustees, Road Carriers Local 707 Welfare Fund, 14 Front Street, Hempstead, NY 11550, (516) 486-7100. The charge to cover copying costs will be \$10.00 for the full report, or \$0.25 per page for any part thereof. You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge. You also have the legally protected right to examine the annual report at the main office of the plan: Board of Trustees Local 707 Welfare Fund, 14 Front Street, Hempstead, NY 11550 and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to:

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

<u>Union Trustees</u> Kevin McCaffrey, C.E.B.S. Vincent Cangelosi

Kevin McCaffrey, C.E.B.S. *Phone* (516) 560-8500 ~ 1-800-366-3707 Road Carriers Local 707 Welfare and Pension Plans 14 Front Street, Ste. 301 ~ Hempstead, New York 11550 *Website* ~ www.roadcarriers707.com

**Interim Fund Manager** 

<u>Employer Trustees</u> Peter Hassler Tom J. Ventura

# Medicaid and the Children's Health Insurance Program (CHIP) Offer Free Or Low-Cost Health Coverage To Children And Families

Some States have premium assistance programs that can help pay for health coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for employment-sponsored health coverage, but need assistance in paying their health premiums.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or log on to **www. insurekidsnow.gov** to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, your current health plan is required to permit you and your dependents to enroll in the plan – as long as you and your dependents are eligible, but not already enrolled in the employer's plan. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**.

If you live in one of the following States, the premium assistance program may be available to you. The following list of States is current as of April 16, 2010. You should contact your State for further information on eligibility.

ALADAMA Madigaid	CALIEODNIA Madigaid
ALABAMA – Medicaid Website: http://www.medicaid.alabama.gov	CALIFORNIA – Medicaid Website: http://www.dhcs.ca.gov/services/Pages/
Phone: 1-800-362-1504	TPLRD CAU cont.aspx
11000.1-800-502-1504	Phone: 1-866-298-8443
ALASKA – Medicaid	COLORADO – Medicaid and CHIP
Website: http://health.hss.state.ak.us/dpa/programs/medicaid/	Medicaid Website: http://www.colorado.gov/
Phone (Outside of Anchorage): 1-888-318-8890	Medicaid Phone: 1-800-866-3513
Phone (Anchorage): 907-269-6529	CHIP Website: http:// www.CHPplus.org
	CHIP Phone: 303-866-3243
ARIZONA – CHIP	
ARIZONA – CHIP Website: http://www.azahcccs.gov/applicants/default.aspx	
Phone: 1-877-764-5437	
ARKANSAS – CHIP Website: http://www.arkidsfirst.com/	FLORIDA – Medicaid Website: http://www.fdhc.state.fl.us/Medicaid/index.shtml
Neuronal Arte 0275	
Phone: 1-888-474-8275	Phone: 1-866-762-2237
GEORGIA – Medicaid	MONTANA – Medicaid
Website: http://dch.georgia.gov/	MONTANA – Medicaid Website: http://medicaidprovider.hhs.mt.gov/clientpages/
Click on Programs, then Medicaid	clientindex shtml
Phone: 1-800-869-1150	Telephone: 1-800-694-3084
1100. 1-800-802-1150	Telephone. 1-800-074-5084
IDAHO – Medicaid and CHIP	NEBRASKA – Medicaid
IDAHO – Medicaid and CHIP Medicaid Website: www.accesstohealthinsurance.idaho.gov	NEBRASKA – Medicaid Website: http://www.dhhs.ne.gov/med/medindex.htm
Medicaid Phone: 1-800-926-2588	Phone: 1-877-255-3092
CHIP Website: www.medicaid.idaho.gov	
CHIP Phone: 1-800-926-2588	
INDIANA – Medicaid	NEVADA – Medicaid and CHIP
Website: http://www.in.gov/fssa/2408.htm	Medicaid Website: http://dwss.nv.gov/
Phone: 1-877-438-4479	Medicaid Phone: 1-800-992-0900
	CHIP Website: http://www.nevadacheckup.nv.org/
IOWA – Medicaid	CHIP Phone: 1-877-543-7669
Website: www.dhs.state.ia.us/hipp/	
Phone: 1-888-346-9562	
KANSAS – Medicaid	NEW HAMPSHIRE – Medicaid
Website: https://www.khpa.ks.gov	Website: http://www.dhhs.state.nh.us/DHHS/
Phone: 800-766-9012	MEDICAIDPROGRAM/default.htm
1 HOHC. 000-700-7012	
KENTUCKY – Medicaid	Phone: 1-800-852-3345 x 5254 NEW JERSEY – Medicaid and CHIP Medicaid Website: http://www.state.nj.us/humanservices/
KENTUCKY – Medicaid Website: http://chfs.ky.gov/dms/default.htm	Medicaid Website: http://www.state.nj.us/humanservices/
Phone: 1-800-635-2570	dmahs/clients/medicaid/
	Medicaid Phone: 1-800-356-1561
LOUISIANA – Medicaid Website: http://www.la.hipp.dhh.louisiana.gov	CHIP Website: http://www.njfamilycare.org/index.html
	CHIP Phone: 1-800-701-0710
Phone: 1-888-342-6207	CHIF FHORE. 1-600-701-0710

### **SEPTEMBER 2010**

MAINE – Medicaid	NEW MEXICO – Medicaid and CHIP
Website: http://www.maine.gov/dhhs/oms/	Medicaid Website: http://www.hsd.state.nm.us/mad/index.html
Phone: 1-800-321-5557	Medicaid Phone: 1-888-997-2583
	CHIP Website:
MASSACHUSETTS – Medicaid and CHIP	http://www.hsd.state.nm.us/mad/index.html
	Click on Insure New Mexico
Medicaid & CHIP Website: http://www.mass.gov/MassHealth	
Medicaid & CHIP Phone: 1-800-462-1120	CHIP Phone: 1-888-997-2583
MINNESOTA – Medicaid	NEW YORK – Medicaid
Website: http://www.dhs.state.mn.us/	Website: http://www.nyhealth.gov/health care/
Click on Health Care, then Medical Assistance	medicaid/
Phone: 800-657-3739	Phone: 1-800-541-2831
Phone: 800-037-3739	Phone. 1-800-541-2851
MISSOURI – Medicaid	NORTH CAROLINA – Medicaid
Website: http://www.dss.mo.gov/mhd/index.htm	Website: http://www.nc.gov
Phone: 573-751-6944	Phone: 919-855-4100
NORTH DAKOTA – Medicaid Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/	UTAH – Medicaid Website: http://health.utah.gov/medicaid/
	Website: http://health.utah.gov/medicaid/
Phone: 1-800-755-2604	Phone: 1-866-435-7414
OKLAHOMA – Medicaid Website: http://www.insureoklahoma.org	VERMONT- Medicaid Website: http://ovha.vermont.gov/
website: http://www.insureokianoma.org	website: http://ovna.vermont.gov/
Phone: 1-888-365-3742	Telephone: 1-800-250-8427
OREGON – Medicaid and CHIP Medicaid & CHIP Website:	VIRGINIA – Medicaid and CHIP Medicaid Website: http://www.dmas.virginia.gov/rcp-HIPP.htm
http://www.oregonhealthykids.gov	Medicaid Phone: 1-800-432-5924
Medicaid & CHIP Phone:	CHIP Website: http://www.famis.org/
1-877-314-5678	CHIP Phone: 1-866-873-2647
PENNSYLVANIA – Medicaid	WASHINGTON – Medicaid
Website: http://www.dpw.state.pa.us/partnersproviders/medicalassistance/	Website: http://hrsa.dshs.wa.gov/premiumpymt/Apply.shtm
doingbusiness/003670053.htm	Phone: 1-877-543-7669
Phone: 1-800-644-7730	
RHODE ISLAND – Medicaid	WEST VIRGINIA – Medicaid Website: http://www.wvrecovery.com/hipp.htm
Website: www.dhs.ri.gov	
Phone: 401-462-5300	Phone: 304-342-1604
SOUTH CAROLINA – Medicaid Website: http://www.scdhhs.gov	WISCONSIN – Medicaid Website: http://dhs.wisconsin.gov/medicaid/publications/p-10095
Phone: 1-888-549-0820	htm
TEXAS – Medicaid	Phone: 1-800-362-3002 WYOMING – Medicaid
a state so introdución	in a strait (S infoutouru
Website: https://www.gethipptexas.com/	Website: http://www.health.wyo.gov/healthcarefin/index.html

To see if any more States have added a premium assistance program since April 16, 2010, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor Employee Benefits Security Administration <u>www.dol.gov/ebsa</u> 1-866-444-EBSA (3272) U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services <u>www.cms.hhs.gov</u> 1-877-267-2323, Ext. 61565



## **CUSTOMER SERVICE**

For information regarding the Pension and Welfare Fund, please call our office during business hours, 8:30 am to 4:00 pm, Monday through Friday. The phone number is 516-560-8500.

#### **PEMG Routine Physicals**

The Trustees of Local 707 Road Carriers knows that a healthy union begins with the individual health of its union members and their families. Health care costs are on the rise and one of the best ways of controlling those costs is to detect and manage medical problems early. We cannot stress enough the importance of having a physical examination each year. In our continuing efforts to provide you with the best medical coverage possible, we are pleased that Professional Evaluation Medical Group (PEMG) will continue to provide you and your family with the annual physical examination benefit. All eligible union members and their dependents are encouraged to have a physical examination at PEMG.

PEMG has three medical facilities, one located in Manhattan on the first floor at 395 Hudson Street, one located in Hicksville, Long Island, and our new office located in Forest Hills, Queens. Appointments can be scheduled by calling PEMG at (516) 935-4378 or 1-800-811-PEMG weekdays between 9:00am and 5:00pm. Advantages to utilizing PEMG are:

- One co-payment
- The exam is performed entirely at one convenient location.
- You will receive a fully dictated medical report.

- Extensive Examination Profile: Comprehensive Physical, Hearing Test, SMAC/CBC Blood Workup, PSA Blood Work, EKG, Sigmoidoscopy, Stool for Occult Blood, Urinalysis, Chest X-Ray and Pulmonary Function Test. (Depending on sex, age, medical indications).

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