

TRI-STATE JOINT FUND

Executive Director
203-250-2604

Claims Administrator
203-250-2606

Fax
203-250-1232

Accounting
203-250-2602

Information Technology
203-250-2603

Retiree Benefits
203-250-2601
800-292-8340

Important Information Summary of Recent Changes to Your Benefits Under the Teamsters Plan E and the Teamsters Plus Plan for Plan E Post-Employment Benefit (PEB) Retired Participants

May 2021

With this notice, the Board of Trustees announces the following changes to the Plan of Benefits of the Teamsters Plan E and the Teamsters Plus Plan for Plan E Retired Participants.

Please read this notice carefully.

This notice makes certain changes to your benefits and amends the provisions of your Summary Plan Descriptions (SPDs). Please keep a copy with your SPDs and share it with your family.

The required annual notice concerning reconstructive surgery after a mastectomy and reminder to complete your **2021 Annual Information Request (AIR) Form (as well as other reminders and notices) are also included in this mailing (see below).**

The following change is effective for PEB Retired Participants as of July 1, 2021:

Maximum Period of PEB Coverage Extended

PEB coverage is extended for up to 20 years for all PEB Participants who are currently receiving health benefits as of July 1, 2020 and thereafter.

PEB is 80% subsidized by the affiliated Plan – the former employee only pays the remaining 20% for his or her coverage in the year of retirement and this rate remains unchanged through the tenth year of PEB coverage. The rate in years 11-20 change each year and are based on the rate for new retirees in each year for years 11-20.

Vision Benefits

The non-Plan frame allowance was increased to \$300.00, previously the allowance was \$150.00. Non-plan frames (outside the Davis Vision network options) must be obtained from a Davis Vision provider.



Vision benefits for spouses will be at the same level as the retired employee allowing a spouse to receive up to two (2) pairs of eyeglasses or contacts, or three (3) pairs in lieu of bifocals every 24 months.

Eye exams are currently covered every 12 months for both retired employees and spouses.

THE FOLLOWING REMINDERS ARE FOR YOUR INFORMATION ONLY
These are NOT changes to your Plan.

❖ **HIPAA Privacy Notice**

You and your dependents each may request a new copy of the HIPAA notice of privacy practices, free of charge by contacting the Tri-State Joint Fund Office at (203) 250-2601.

❖ **Home Health Equipment Benefit**

The Plan provides certain **Durable Medical Equipment** at no cost to you, with a prescription from your physician. Even if the equipment you've been prescribed is not available at no cost, it may be covered under the Major Medical Expense Benefit. Prior authorization is required for coverage of Durable Medical Equipment under the Major Medical Expense Benefit. Please contact either the **Home Health Equipment Department** at **1-203-250-2601 x109** or the **Teamsters Medical Review Program** at **1-800-888-9255** for more information.

❖ **Annual Notice Concerning Benefits for Reconstructive Surgery after a Mastectomy**

The Plan is required to inform you that coverage is provided for the reimbursement of expenses associated with reconstructive surgery following a mastectomy, expenses for reconstructive surgery on the other breast to achieve symmetry, the cost of prostheses and costs for treatment of physical complications at any stage of the mastectomy including lymphedemas. The Plan deductible, co-payments and out-of-pocket limits apply.

****Please remember to always include your Participant ID Number (TSJ number) on any correspondence sent to the Tri-State Joint Fund Office.****

Board of Trustees