

# TRI-STATE JOINT FUND

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## 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

June 2022

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 **2022 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 Immediately:**

### **Eligibility Rule Amendment for a Spouse or Dependent**

The eligibility rule of the Plan E Post-Employment Benefit was amended to allow for a Spouse or Dependent to be added to the Plan after the Participant's effective date as long as they can show that they had creditable coverage between the time they were first eligible to enroll and when they intend to enroll. Previously, a participant and a spouse or dependent were required to begin coverage at the same time. A Spouse or Dependent who is added at a later date will only have the remainder of coverage based on the participant's effective date.

**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