



UPDATE

NEWS FROM ROAD CARRIERS LOCAL 707 WELFARE & PENSION FUND • SEPTEMBER 2013

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Please note that there is important information about your rights under the Plan in this issue.

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New Fund Website

The Fund recently updated it's website to provide more information to our members. The new website which is being rolled out in phases will provide you with secure access to your information and give providers the ability to check eligibility. All of this access is available 24 hours a day, 7 days a week.

Currently the website www.roadcarriers707.com contains benefit information about what your plan provides, detailing the coverage including limitations, copays and deductibles. Additionally, it contains back issues of Fund Updates, Fund news and plan changes. It also has the most current Summary Plan Descriptions listed Plan, provider contact information, frequently asked questions and contact information for the Fund.

The website also contains forms which members can download and print out. Some of the forms for the Welfare and Pension Fund are: Change of Address, Enrollment/Beneficiary Designation forms, HIPPA Privacy Statement and Medical Authorization, Pension Applications, W4 Form, Direct Deposit and Request for Social Security Earnings. You can access the website by logging on to www.roadcarriers707.com.

By October 1st, we are planning on having the login portion for members available. This will allow for members after setting up a secure username and password to access their information and view information such as eligibility for benefits, work history, pension credit statements and pension lifetime credit history.

By November 1st, the provider access should be available. This allows providers to verify eligibility even when the fund office is closed.

PARTICIPATING PROVIDERS VS NON PARTICIPAING PROVIDERS

It is your responsibility to determine whether the medical providers you and your family use participate in our network. Check to see that the doctor or other provider you use participated with Empire Blue Cross Blue Shield. If you are referred outside the doctors office for X-rays, blood test or other diagnostic procedures, make sure you are being referred to a in network provider. Network providers are supposed to make their best effort to refer you to another in-network provider. However, the final responsibility is yours. This includes physicians you may see in the hospital or at ER visit. All out of network claims are subject to your plan's annual deductible and coinsurance. To check the participation status of your provider, you can call Empire at 1-800-676-BLUE or visit their website at www.bcbs.com.

ANESTHESIA BENEFIT

We have had quite a number of inquires regarding the Anesthesia benefit and how it is paid out-of-network. Here is the answer to that question:

In-network anesthesia claims are paid at 80% of the PPO Fee (no copay is required).

Out-of-network anesthesia claims are paid at 100% of the PPO Fee for covered anesthesia services that do not exceed \$2,000 and 70% of the PPO Fee for covered anesthesia services that exceed \$2,000, subject to the deductible.

Participants should be aware that the selection of an anesthesiologist generally is at the discretion of the medical facility providing the service and that most anesthesiologists do not choose to participate in the PPO network. Therefore, it is likely that a Participant's anesthesia expenses will be classified as an out-of-network claim.

EMERGENCY ROOM VISITS

Before you decide to go to the Emergency Room for treatment, please be advised that in order for emergency room treatment to be covered, the following conditions must be met:

- 1) there must be a sudden, unexpected onset of a serious illness or medical condition, or an accidental injury occurs; and
- 2) immediate medical care must be necessary to prevent what could reasonably be expected to result in either placing the patient's life in jeopardy or causing serious impairment to the patient's bodily functions.

You will still be responsible for a \$100 co-payment and then the claim will be paid at 100% of the allowed amount.

If these conditions are met, you will be responsible for a \$100 co-payment and then the claim will be paid at 100% of medically necessary and reasonable charges. If these conditions are not met, you may be responsible for paying the entire cost of the ER visit. Almost every community has Urgent Care Centers which are the appropriate treatment centers for all other injuries and illnesses.

UPCOMING CHANGE WITH REGARD TO PENSION BENEFIT CHECKS

All retirees that receive a paper pension benefit check each month will be required to change over to direct deposit by January 1, 2014. If you choose not to change over, a \$10.00 per month fee will be deducted from your monthly pension benefit check. Notices will be sent out October 1st to all pensioners who receive paper pension benefit checks.

CHANGES TO THE WELFARE FUND

All MRI/Cat Scans will need to be pre certified by Alicare effective 1/1/14.

Second Surgical Opinions are no longer required on back surgery, eye surgery, lipectomy, nose surgery, scar revision and vein surgery. However, all of these procedures now require pre-certification by Alicare Medical Management. You can contact them at 1-800-848-9200 for pre certification.

Effective September 1, 2013, two partial hospitalization days for treatment of mental health and substance abuse will be treated the same as one day of inpatient treatment.

A detailed Summary Material Modification will be mailed to you in the near future. If you need detailed information regarding any of these changes, please call our Fund Office.

AFFORDABLE HEALTH CARE

On October 1st, employers are required to send out certain communications to the employees, including one notice entitled "New Health Insurance Marketplace Coverage Options and Your Health Coverage". This notice is to inform employees of the existence of the Marketplaces and to provide information on how they will work. Please be assured that the coverage provided by the fund meets all the individual obligation under the Affordable Care Act and you do not need to purchase any further coverage through Marketplace.

*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.*

Union Trustees

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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

SUMMARY ANNUAL REPORT FOR ROAD CARRIERS LOCAL 707 WELFARE FUND

This is a summary of the annual report for Road Carriers Local 707 Welfare Fund, EIN 11-2159859, Plan No. 501 for the period September 1, 2011 to August 31, 2012. The annual report has been filed with the Employee Benefits Security Administration as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The plan has contracts with Cigna Life Insurance Co. of New York, Empire HealthChoice HMO, Inc. and Hartford Life Insurance Co. to pay certain Health, Life Insurance, Dental, Vision, Temporary Disability, Long-Term Disability and other claims incurred under the terms of the plan. The total premiums paid for the plan year ended August 31, 2012 were \$2,467,907.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$6,584,158 as of August 31, 2012, compared to \$4,895,761 as of September 1, 2011. During the plan year the plan experienced an increase in its net assets of \$1,688,397. This increase 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. The plan had total income of \$17,505,889, including employer contributions of \$15,608,625, employee contributions of \$1,661,817, losses of \$6,400 from the sale of assets, and earnings from investments of \$230,950. Plan expenses were \$15,817,492. These expenses included \$1,122,059 in administrative expenses and \$14,695,433 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% of 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 at Road Carriers Local 707 Welfare Fund at 14 Front Street, Hempstead, NY, 11550, (516) 486-7100. The charge to cover copying cost will be \$9.75 for the full annual report, or \$.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, if any, or a statement of income and expenses of the plan and accompanying notes, if any, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes, if any, will be included as part of that report. The charge to cover copying costs given above does not include a charge for 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 at 14 Front Street, Hempstead, NY, 11550 and at the US Department of Labor in Washington DC, or obtain a copy from the US Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, US Department of Labor, 200 Constitution Avenue, NW, Washington DC 20210.

2013/2014 FLU SEASON

information taken from Center of Disease Control website

What sort of flu season is expected this year?

Flu seasons are unpredictable in a number of ways. Although epidemics of flu happen every year, the timing, severity, and length of the season varies from one year to another.

When will flu activity begin and when will it peak?

The timing of flu is very unpredictable and can vary from season to season. Flu activity most commonly peaks in the U.S. in January or February. However, seasonal flu activity can begin as early as October and continue to occur as late as May.

What should I do to prepare for this flu season?

CDC recommends a yearly flu vaccine for everyone 6 months of age and older as the first and most important step in protecting against this serious disease. While there are many different flu viruses, the flu vaccine is designed to protect against the three main flu strains that research indicates will cause the most illness during the flu season. Getting the flu vaccine as soon as it becomes available each year is always a good idea, and the protection you get from vaccination will last throughout the flu season.

As always, flu shots are available with no co-pays or co-insurance at in-network providers. Also, Road Carriers Local 707 Welfare Fund will reimburse you up to a maximum of \$25.00 if you get your flu shot at any local pharmacy offering flu shots. All you need to do is go to the pharmacy and have the flu shot and pay for it yourself. Ask for a customer receipt and an immunization record card and send both forms to:

Road Carriers Local 707 Welfare Fund
14 Front St., Ste. 301
Hempstead, NY 11550.

Be sure to check that your name and address is correct so we can reimburse you in a timely manner. If you need any further information, call our customer service department at 516-560-8500, Monday through Friday, 8:30 a.m. to 4:00 p.m.

Be sure to protect yourself, your family, your friends and fellow workers ... by avoiding the flu!

2013 CENSUS FORM

In the next couple of weeks we will be mailing participants our Annual Census Form. In order to comply with government regulations, it is imperative that you fill out the form completely, sign and date the form and return to us in a timely manner. *Failure to complete all of the information will result in claims being pended until all your information is received.* Please be sure to check your name, address, phone number to be sure they are correct. **All enrolled adult children between the ages of 19-26 must be enrolled annually.**

These forms must be returned to:

Road Carriers Local 707 Welfare Fund
14 Front Street, Ste. 301
Hempstead, NY 11550

If you need any further information, please contact our Customer Service Department at 516-560-8500.

**Road Carriers Local 707
Welfare & Pension Funds
14 Front Street, Ste. 301
Hempstead, New York 11550**



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***PRIVACY NOTICE REMINDER**

As you may remember, on or about April 14, 2003, the Road Carriers Local 707 Welfare Fund (“Fund”) sent its HIPAA Notice of Privacy Practices (“Notice”) to you. That Notice is still applicable and available for your review, and review by your dependents. You and your dependents can obtain copies as follows:

1. The Notice is available on the Fund’s website at www.roadcarriers707.com.
2. If you would like a hard copy of this Notice sent to you, please submit a written request to:

**HIPAA Contact Person
Road Carriers Local 707 Welfare Fund
14 Front Street, Ste. 301, Hempstead, NY 11550
516.560.8500**

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

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; Protheses; 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.*