

T TEAMSTERS
B BENEFIT
T TRUST

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January 10, 2007

To: **Comprehensive Retiree Plan (CRP), Supplemental Retiree Plan (SRP) and Basic Retiree Plan (BRP)**

Re: **Direct Debit Services Now Available for Retiree Monthly Self-payments**

Dear Participant:

The Trust Fund is pleased to announce that the TBT Plan Administration Office will start accepting applications for direct deposit of monthly self-payments.

NOTE: If your monthly self-payments are paid for each month by your Union or Employer, this notice does not apply to you.

TBT has worked very hard to maintain a quality cost effective prescription benefit for the retirees. The spiraling costs of prescription drugs have made it necessary for a change that will curtail the drug costs if we are to continue to provide the prescription program in the future. The following change to the prescription program will help us achieve this goal without increasing the co-payments.

THE PROGRAM IS EASY TO USE: Call Prescription Solutions at 1-800-562-6223 and they will do all the work. When you call for assistance have your prescription information, including the doctor's name and phone number available. Prescription Solutions will contact the physician to get a new prescription. You may also order using the enclosed prescription order form and enclosing a new prescription for each of your maintenance drugs. Representatives are available seven days a week at 1-800-562-6223, between 5:00 am to 9:00 pm, PST Monday through Friday and 7:00 am to 7:00 pm PST, Saturday and Sunday. For the hearing impaired, please call the (TDH) number at 1-800-498-5428.

CUSTOMER SERVICE: You may call the Prescription Solutions mail order facility customer service unit at (800) 562-6223 if you have questions on how to convert your prescriptions to the mail service program or to make inquiries about percentage co-pay amounts.

If you have any questions regarding this notice, please contact the TBT Plan Administration Office at 800-533-0119 or 510-796-4676 and ask for the Prescription Desk.

Sincerely,

Martin R. Lowy
Fund Manager

MRL/nj

PLEASE NOTE

- This Notice is intended to amend all TBT documents, notices and correspondence, including (but not limited to): *Guide To Your Benefits, Summary of Coverage, Comparison of Medical Benefits, Summary of Material Modifications and Plan Change Notices*, by replacing all references to the retail pharmacy prescription card program, effective April 1, 2004.
- Effective April 1, 2004, you must use the Prescription Solutions Mail Service program for all your maintenance drugs.

PLAN CHANGE NOTICE

**RETAIN WITH YOUR BENEFIT PACKAGE
FOR FUTURE REFERENCE**

EXAMPLE OF MAINTENANCE MEDICATIONS

(Purchased through Mail Service Only)

Examples of medication categories that are considered maintenance include the following but are subject to your specific plan coverage:

- Medications for certain mental health problems or diseases including depression, anxiety, insomnia, psychosis or schizophrenia.
- Medications for diseases of the central nervous system including epilepsy or seizures, Parkinson's disease, dementia, Alzheimer's disease or similar memory problems, etc.
- Medications for some women's health issues including estrogens, progestins, contraceptives, etc.

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- Medications and supplies for diabetes, thyroid problems or osteoporosis.
- Medications for certain heart, circulatory or blood conditions including heart failure, high cholesterol, high blood pressure, stroke, heart attack, blood clots, anemias, etc.
- Medications for some respiratory or lung conditions such as allergies, asthma, etc.
- Medications for certain stomach, bowel or digestive problems including ulcers, heartburn or reflux disease, etc.
- Medications for some male urinary or prostate problems including, enlarged prostate, erectile dysfunction, etc.
- Medications for some painful conditions such as migraine headaches, gout, some types of arthritis, etc.
- Medications to treat conditions of the eye such as glaucoma, etc.
- Medications for certain skin or skin-related conditions such as acne, psoriasis, hair growth, hair removal, etc.
- Medications to prevent rejection of transplanted organs or tissues.
- Medications for certain infectious disease such as tuberculosis and viral diseases such as HIV, hepatitis, etc.
- Selected prescription vitamin or mineral products such as prenatal vitamins, potassium supplements, etc.

You should be aware that after your first fill at retail, you will be required to utilize the Prescription Solutions Mail Service pharmacy. You will receive up to a *180-day supply* at your mail order co-payment.

For your convenience, you can call 1-800-562-6223 and Prescription Solutions will get your prescription straight from your doctor. All they need is your prescription information, and the name and phone number of your doctor. Or, you can have your doctor call Prescription Solutions at 1-800-791-7658 to authorize a new prescription for medication(s) you are taking.

If you chose to mail Prescription Solutions your current maintenance medication prescription, please make sure your doctor provides you with a prescription for the maximum supply your plan permits, plus refills. It's that easy to get started!