

TWIN HORSE CRIER

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Understanding Your Explanation of Benefits Statement

Each time the Health & Welfare Fund processes a claim on your behalf, you will receive an Explanation of Benefits (EOB) detailing how the claim was processed. This is not a bill, rather a statement explaining how your benefits were applied to that particular claim.

See the example below which explains how in-network benefits were paid for an out-patient x-ray. The numbers in red are defined in the legend below the EOB.

Once you receive an EOB, it's a good idea to compare it to the statement your provider sends you to see what portion of the amount due was paid to

the health care provider and what portion, if any, you are responsible for. Any outstanding balances are always due to the provider and not the Fund.

As information, in compliance with HIPAA laws, when a claim is processed on a participant's spouse or any dependent age 18 or older, the Fund issues the EOB addressed to that specific dependent. Underage dependents' EOBs are addressed to the participant.

If you're still having trouble understanding your Explanation of Benefits, feel free to contact the Claims Department at the Fund Office for more information.

MEMBER FROM DATE THRU DATE	SERVICE DESCRIPTION	MEMBER ID SUBMITTED CHARGES	PATIENT DISCOUNT	ALLOWED AMOUNT	BIRTH DATE COPAY AMOUNT	PROVIDER NAME		PLAN %	PREPAID	PAYABLE AMOUNT	RMK CD		
						NOT PAYABLE	DEDUCTIBLE				PATIENT RESPONSIBLE	CLAIM #	
JANE DOE 10/4/2017	RAD OUT PAT	80109999 \$118.00	ELLIE DOE \$66.86	\$51.14	11/20/2008 \$0.00	MEDICAL IMAGING OF RICHMOND \$66.86 \$26.57		90	\$0.00	\$22.11	A	AA1111	
1	2	3	4	5	6	7	8	9	10	11	12	13	14
TOTALS		\$118.00	\$66.86	\$51.14	\$0.00	\$66.86	\$0.00		\$0.00	\$22.11	\$29.03		
Comments/Denial:													
A. Your 2017 annual deductible has been satisfied.													
Total Payment:										\$22.11			

Legend for Explanation of Benefits

- 1. From Date/Thru Date** - dates in which service was performed
- 2. Service Description** - type of service that was provided, i.e., out-patient radiology
- 3. Submitted Charges** - dollar amount billed by the provider
- 4. Discount** - dollar amount to be written off by the provider for participating in the Anthem BlueCross BlueShield PPO Network
- 5. Allowed Amount** - difference between the submitted charges and the discount; amount considered for payment by the Fund
- 6. Copay Amount** - dollar amount specified in the Schedule of Benefits payable by the patient
- 7. Not Payable** - dollar amount not considered for payment by the Fund
- 8. Deductible** - dollar amount applied towards the annual deductible
- 9. Plan %** - payment based on the percentage specified in the Schedule of Benefits, after the deductible is satisfied
- 10. Prepaid** - dollar amount paid by the primary carrier, in cases where the Fund is the secondary carrier
- 11. Payable Amount** - payment made by the Fund
- 12. Patient Responsible** - the submitted charges less any discount, deductible, copays, co-insurances, primary carrier payments (if applicable) and payment by the Fund
- 13. Remark Code** - refers to any pertinent information relating to the claim such as deductible information or non-covered charges
- 14. Claim #** - combination of letters and numbers assigned by the Fund Office to identify the claim

H&W NOTICES

Flu Shot Covered Benefit by the Fund

Flu shots received at a doctor's office are subject to the office visit copay.

Flu shots administered elsewhere, such as a pharmacy or health fair, are subject to the out-of-network deductible. Simply mail a copy of the receipt to the Fund Office for reimbursement.

Women's Health Act and Cancer Rights Act of 1998 (WHRCA)

Patients diagnosed with breast cancer and who have had or are going to have a mastectomy, may be entitled to certain benefits under the Women's Health Act and Cancer Rights Act of 1998 (WHRCA).

Coverage will be provided in a manner determined in consultation with the attending physician and the patient, for the following:

- reconstruction of the breast that was removed by mastectomy;
- surgery and reconstruction of the other breast to make the breasts look symmetrical or balanced after mastectomy;
- any external breast prostheses (breast forms that fit into your bra) that are needed before or during the reconstruction; and
- any physical complications at all stages of mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Consult your Schedule of Benefits for specific information regarding your coverage.

If you would like more information on WHCRA benefits, contact the Fund Office.



This is a summary of the annual report of the Teamsters Joint Council No. 83 Of Virginia Health & Welfare Fund, EIN 54-0556299, Plan No. 501, for period January 01, 2016 through December 31, 2016. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Teamsters Joint Council No. 83 of Virginia Health & Welfare Fund has committed itself to pay all claims incurred under the terms of the plan.

Insurance Information

The plan has a contract with Amalgamated Life Insurance Company to pay stop loss claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2016 were \$421,886.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$60,690,310 as of December 31, 2016, compared to \$58,095,638 as of January 01, 2016. During the plan year the plan experienced an increase in its net assets of \$2,594,672. This increase includes unrealized appreciation and 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 \$55,034,919, including employer contributions of \$48,591,718, employee contributions of \$1,941,743, earnings from investments of \$4,500,388, and other income of \$1,070.

Plan expenses were \$52,440,247. These expenses included \$3,645,026 in administrative expenses, and \$48,795,221 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:

- * an accountant's report;
- * financial information;
- * information on payments to service providers;
- * assets held for investment;
- * transactions in excess of 5% of the plan assets;
- * insurance information, including sales commissions paid by insurance carriers;
- * information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Teamsters Joint Council No. 83 of Virginia Health & Welfare Fund in care of Michael McCall who is Executive Director at 8814 Fargo Road, Suite 200, Richmond VA 23229, or by telephone at (804) 282-3131. The charge to cover copying costs will be \$2.10 for the full annual report, or \$0.03 per page for any part thereof.

You also have the right to receive from the Executive Director, 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 Executive Director, 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 (Teamsters Joint Council No. 83 of Virginia Health & Welfare Fund, 8814 Fargo Road, Suite 200, Richmond VA 23229) 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: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Fund Facts:

The Health & Welfare Fund just turned 65 yrs old on November 11, 2017.

The Pension Fund celebrated its 60th anniversary on September 1, 2017.

PENSION NEWS

Federal Income Tax Withholdings for Pensioners

When you first applied for pension benefits, you were given the opportunity to have federal income taxes withheld from your monthly payment. If we did not receive instructions from you in regard to the taxes you wanted withheld, taxes were withheld as though you were married and eligible for three (3) exemptions.

The Fund can withhold Virginia State taxes and provide you with the necessary forms to have this tax withheld. However, we cannot withhold state taxes from any other state.

Federal Law requires federal income tax be withheld from pension and survivor benefits unless you elect an exempt status. The Internal Revenue Service may penalize you for not withholding enough federal taxes.

To change your withholdings, please contact the Fund Office.

Montly Retiree Meeting for Local 171

Retirees of Local 171 are invited to meet with fellow retirees every 2nd Saturday of most months at 10 AM. Meetings are held at the local union hall at 2550 West Main Street in Salem.

The May and September meetings are held on the 3rd Saturday, and will include a picnic with active members of Local 171. The December meeting will be a Christmas dinner.

For more information, please contact Tim Vermillion at deeedoll@aol.com.



Disqualifying Employment and Suspension of Benefits Under the Pension Plan

If you are retired and considering returning to work, be sure to submit a Post-Retirement Employment Approval Form to the Fund Office as certain jobs are considered Disqualifying Employment under the Pension Plan. Your monthly benefit will be suspended and withheld for any month in which you are employed or self-employed in Disqualifying Employment. The following defines what is considered Disqualifying Employment at certain ages:

Before Normal Retirement Age (usually 65 years old)

- Employment with an Employer who pays into the Plan (a Contributing Employer), unless
 - you work less than 40 hours in a calendar month for a Contributing Employer that pays contributions at or above the prevailing National Master Freight agreement casual rate for each day you work, or
 - you become permanently disabled to perform the duties of your covered occupation while working in Covered Employment, you may return to work for your former Contributing Employer in non-covered employment, or
- Employment with an employer who competes with a Contributing Employer.

After Normal Retirement Age but before 70½ years old (usually between 65 and 70½)

- Working 40 or more hours per month:
 - in an industry whose employees were covered by the Plan as of the date you retire or your Normal Retirement Age, and
 - in the geographic area covered by the Plan as of the earlier of the date you retired or your Normal Retirement Age, and
 - in a trade or craft, including supervisory work in which you were working at any time under the Plan.

After age 70½ years old

There is no employment that is considered disqualifying after age 70½.

You must notify the Fund in writing within 15 days after starting any job that may be Disqualifying Employment, regardless of how many hours you plan to work or have worked. The Fund has the right to request additional information before making a ruling. As always, if you disagree with the Fund's ruling, you have the right to appeal to the Board of Trustees.

The applicable United States Department of Labor Regulations may be found in 29 C.F.R., Section 2530.203-3. You may also refer to Sections 4.11 through 4.13 of the Pension Plan Document.

The Fund would like to recognize the following Participants on their recent retirement:

Local 22

Charlie F. Mitchell
Thomas P. Poey
Charles L. Sellers
Freddie J. Taylor
Charles W. Wright
Richard A. Wyatt

Local 29

Thomas A. Brake
Timothy D. Oylor
Mark E. Pearson
Michael O. Robinson

Local 171

Richard L. Bryant
Ronald W. Jones
Richard B. King
William C. Parks
Billy R. Reynolds
Charles E. Roberts
Joseph D. Rothgeb, Jr.
William H. Smith

Local 322

Frederick A. Cooper
Kenneth A. Freeman
James A. Green
Herbert C. Lewis, Jr.
James Monger
Glenda F. Price
Joseph S. Woddy, Jr.
Roger L. Landstrom

Local 592

Johnny Atwell
Keith Claiborne
Rudolph A. Crocker
Brian S. Ford
Brenard T. Howery, Sr.
Sylvia Lambert
Stephen I. Pettry
Aldo Succetti
Dexter Taylor
Kathy W. Toombs
Ronald H. Trent
James Tuppince, Jr.

Local 822

Natalie Cherry
James E. Cotterell



Fund Office Contact Info

Phone:

(804) 282-3131 - local
800-852-0806 - toll free

Fax:

(804) 288-3530

Web:

www.tjc83funds.org

Email questions and comments:

yourfund@tjc83funds.net

Email documents and forms:

documents@tjc83funds.net

Please be aware that unencrypted, unauthenticated internet e-mail is inherently insecure. Email message may be corrupted, incomplete, or may incorrectly identify the sender. To secure your message, try using a free secure email such as SAFe-mail. If you have questions regarding HIPAA regulations or how to assure the security of your protected health information, please contact the Fund Office.



Teamsters Joint Council No. 83 of Virginia
Health & Welfare and Pension Funds
8814 Fargo Road
Suite 200
Richmond, VA 23229

Know your Risk, Know Your Cholesterol Numbers

Cholesterol is a waxy, fat-like substance that travels through the blood on proteins called lipoproteins. Your body needs cholesterol, but too much cholesterol can build up on the walls of your blood vessels. These deposits are called plaque. As your blood vessels build up plaque deposits over time, the inside of the vessels narrow and allow less blood to flow through your heart and other organs.

When plaque buildup totally blocks a coronary artery carrying blood to the heart, it causes a heart attack. Another cause of heart attack is when a plaque deposit bursts and releases a clot in a coronary artery.

Cholesterol comes from two sources

It's made by your body and used to do important things, like make hormones and digest fatty foods.

Cholesterol is also found in many foods, like egg yolks, fatty meats, and cheese.

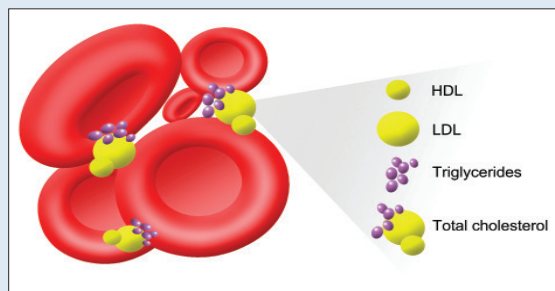
LDL and HDL: "Bad" and "Good" Cholesterol

- Total cholesterol is a measure of the total amount of cholesterol in your blood and is based on the HDL, LDL, and triglycerides numbers.
- LDL cholesterol makes up the majority of the body's cholesterol. LDL is known as "bad" cholesterol because having high levels can lead to plaque buildup in your arteries and result in heart disease and stroke.
- HDL cholesterol absorbs cholesterol and carries it back to the liver, which flushes it from the body. HDL is known as "good" cholesterol

because having high levels can reduce the risk for heart disease and stroke.

- Triglycerides are a type of fat found in your blood that your body uses for energy. The combination of high levels of triglycerides with low HDL cholesterol or high LDL cholesterol can increase your risk for heart attack and stroke.

There are no signs or symptoms of high LDL cholesterol. That is why it's so important to get your cholesterol checked. Talk to your doctor about what your numbers mean for you.

**Who needs to get their cholesterol checked?**

Cholesterol should be monitored just like blood pressure. You may want to talk to your health care team about what's best for you, but generally, all adults need to have their cholesterol checked.

If you are 20 years or older and have not been diagnosed with heart disease, it is recommended that your cholesterol be checked every 5 years.

All children and adolescents should have their cholesterol monitored at least once between the ages of 9 and 11 years, and again between ages 17 and 21 years.

Content source: National Center for Chronic Disease Prevention and Health Promotion, Division for Heart Disease and Stroke Prevention, 10/5/2017

Courtesy of Hines & Associates