

TURNPIKE AND PUBLIC EMPLOYEES



Teamsters Local Union No. 77

affiliated with the International Brotherhood of Teamsters

JOCK P. ROWE, *Secretary-Treasurer and Business Manager*

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TIMOTHY MIDDLETON, *Trustee*

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July 25, 2005

TO: All Local 77 Bargaining Unit Members

FROM: Jock P. Rowe, Secretary-Treasurer/Principal Officer

Teamsters Local 77 is pleased to announce the establishment of its new Health & Welfare Fund as of August 1, 2005 to provide your Dental and Vision benefits.

The Dental schedule of benefits mirrors the previous benefits provisions. We have improved the Dental coverage by adding a provider (dentist) network to the Plan. This feature should result in a lower out-of-pocket outlay. A MetLife summary of the Dental plan is attached. Questions concerning this benefit should be referred to:

MetLife • Phone: 800-942-0854 • or Log on to: www.metlife.com/mybenefits

The Vision benefits provided through Vision Benefits of America, Inc. (VBA) are not changed, except you will have a new group number. Benefit authorization forms and questions concerning this benefit should be referred to:

VBA • Phone: 800-432-4966

The Pennsylvania Turnpike will contribute to the Teamsters Local 77 Health & Welfare Fund on behalf of each plan participant for the Dental and Vision benefits in accordance with the collective bargaining agreement.

If you have any questions concerning your benefits, please contact the following:

Claims Assistance: Model Consulting, Inc. (our joint broker with Eugene A. King)
Attn: Large Group Administration
Phone: 215-942-7199, or 800-442-1413

Fund Administrator: Diverse Administrators, Inc.
Attn: Julie or Gene King
P.O. Box 676, Richboro, PA 18954
Phone: 215-364-9160, Fax: 215-364-6858

We thank our insurance carriers and advisors for their hard work in making it possible to bring these benefits to you.

Fraternally,

Jock P. Rowe
Secretary-Treasurer
Principal Officer





Dear Teamsters Local 77 Members:

Teamsters Local 77 is always looking for ways to improve your benefits plan and help you maintain a happy and healthy lifestyle. Getting the protection you need shouldn't be difficult or expensive. That's why we're pleased to offer you a new dental benefit plan from MetLife®. With the plan, which features the MetLife Preferred Dentist Program (PDP), you can get dental coverage with real advantages.

Dental coverage designed for the real world

MetLife, an industry leader for more than 40 years, offers easy-to-understand dental coverage that allows you to:

- **Protect** — you and your family from the rising costs of dental care by providing coverage for preventive, basic and complex services that help ensure long-term oral health.
- **Choose** — any dentist you want.
- **Save** — on out-of-pocket expenses by receiving services from one of more than 79,000 participating PDP dentists who agree to charge fees typically 10-35% lower than the average charges in your area.

What you need, when you need it

Your new dental benefits plan becomes effective on August 1, 2005. If you're currently enrolled in the group dental plan, your dental coverage will continue under the new MetLife Dental Benefits Plan without interruption, unless you choose to discontinue coverage. Claims for services rendered prior to August 1, 2005 should be submitted to the Western Pennsylvania Teamsters and Employers Welfare Fund Administrators.

Wait, there's more! We're not content to just provide you with great dental protection — we want you to have a great experience. That's what MetLife's superior service commitment is all about. MetLife processes 85% of claims in five business days or less to get your claim paid faster. And, if you have questions, simply call 1-800-942-0854 or log on to www.metlife.com/mybenefits, to access all the tools and information you will need to be a better-informed user of your dental plan.

Sincerely,



Paul Michael
Vice-President
Dental Product Management

Like most group health insurance policies, MetLife group policies contain certain exclusions, limitations, waiting periods and terms for keeping them in force. Please contact MetLife for complete details.

Coverage Type:

	<u>In-Network</u>	<u>Out-of-Network</u>
Type A - Preventive	Schedule Amount*	Current Schedule**
Space Maintainers	50% of Schedule Amount*	50% of Current Schedule**
Type B - Basic Restorative	Schedule Amount*	Current Schedule**
Periodontal Services	50% of Schedule Amount*	50% of Current Schedule**
Oral Surgery	50% of Schedule Amount*	50% of Current Schedule**
Type C - Major Restorative	Schedule Amount*	Current Schedule**
Type D - Orthodontia	50% of Schedule Amount*	50% of Current Schedule**

Deductible

	<u>In-Network</u>	<u>Out-of-Network</u>
Individual	N/A	N/A
Family	N/A	N/A

Annual Maximum Benefit*:**

	<u>In-Network</u>	<u>Out-of-Network</u>
Per Person	\$1,500	\$1,500

TMJ Lifetime Maximum:

	<u>In-Network</u>	<u>Out-of-Network</u>
Per Person	\$1,500	\$1,500

Orthodontia Lifetime Maximum:

	<u>In-Network</u>	<u>Out-of-Network</u>
Per Person	\$1,500	\$1,500

* "Schedule Amount" is based on the lesser of the current schedule amount or MetLife's PDP Negotiated Fee.

** "Current Schedule" refers to the reimbursement schedule in place prior to MetLife becoming the Dental Administrator

*** All services, with the exception of TMJ and Orthodontia, are subject to the Annual Maximum

An Example of Savings When You Visit a Participating PDP Dentist

Take a look at a hypothetical example that shows how receiving services from a PDP dentist can save you money:

Your Dentist says you need a Crown, a Type C service:

MetLife PDP Fee: \$375 Schedule Amount: \$275

Dentist's Usual Fee: \$600.00

(IN-NETWORK)		(OUT-OF-NETWORK)	
When you receive care from a Participating PDP dentist...		When you receive care from a Non Participating PDP dentist...	
The Schedule Amount*:	\$275	Current Schedule Amount**:	\$275
The PDP Fee is:	\$375	Dentist's Usual Fee is:	\$600
Your Plan Pays:		Your Plan Pays:	
(Lesser of Schedule Amount or PDP Fee)	- \$275	(Schedule Amount)	\$275
Your Out-of-Pocket Cost:	\$100	Your Out-of-Pocket Cost:	\$325

In this example, YOU SAVE \$225 (\$325 minus \$100)

by using a participating PDP dentist!

We strongly encourage you to consider using a participating PDP Dentist in order to get the maximum value from your plan.

Type A - Preventive

Prophylaxis (cleanings)
 Oral Examinations
 Topical Fluoride Applications
 X-rays

How Many/How Often:

- Two cleanings per calendar year, separated by a six-month period.
- Two exams per calendar year, separated by a six-month period.
- One fluoride treatment per calendar year for dependent children up to 19th birthday.
- Full mouth X-rays: one per 60 months.
- Bitewing X-rays: one set per calendar year for adults; two sets per calendar year for children, separated by a six-month period calendar year.
- Space Maintainers for dependent children up to 19th birthday.
- One application of sealant material every 5 years for each non-restored, non-decayed 1st and 2nd molar of a dependent child up to 19th birthday.

Space Maintainers
 Sealants

Type B - Basic Restorative

Endodontics
 General Anesthesia

How Many/How Often:

- Root canal treatment limited to once per tooth per 24 months.
- General Anesthesia when dentally necessary in connection with oral surgery, extractions or other covered dental services.
- Periodontal surgery once per quadrant, every 36 months.
- Periodontal scaling and root planing once per quadrant, every 24 months.
- Total number of periodontal maintenance treatments and prophylaxis cannot exceed four treatments in a calendar year.

Oral Surgery
 Periodontics

Fillings
 Simple Extractions
 Crown, Denture, and Bridge Repair

Type C - Major Restorative

Bridges and Dentures

How Many/How Often:

- Initial placement to replace one or more natural teeth, which are lost while covered by the Plan.
- Dentures and bridgework replacement: one every 10 years.
- Replacement of an existing temporary full denture if the temporary denture cannot be repaired and the permanent denture is installed within 12 months after the temporary denture was installed.
- Replacement: once every 5 years.

Crowns/Onlays

Type D - Orthodontia

- Dependent children are covered until the end of the month of their 19th birthday.
- All dental procedures performed in connection with orthodontic treatment are payable as Orthodontia.
- Payments are on a repetitive basis.
- Benefit for initial placement of the appliance will be made representing 20% of the total benefit.
- Orthodontic benefits end at cancellation of coverage.

How Many/How Often:

The service categories and plan limitations shown above represent an overview of your Plan of Benefits. This document presents the majority of services within each category, but is not a complete description of the Plan. A summary plan description will be made available following your plan's effective date, and will govern if any discrepancies exist between this overview and the actual summary plan description.

Employee Name:
 Social Security #:

Group Name: **Teamsters Local 77 Health and Welfare Fund**
 Group Number: **118963**

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 Social Security #:

Group Name: **Teamsters Local 77 Health and Welfare Fund**
 Group Number: **118963**

Multiple self-servicing channels to get the information you need when you need it.

Visit us online anytime at www.metlife.com/mybenefits to:

- Locate a participating dentist online or over the phone.
- Verify your eligibility and download a copy of your plan design.
- View a list of your covered dependents and have quick links to their coverage description, so you know what procedures are covered before going to your dentist.
- Get real-time benefit estimates in your dentist's office.
- Get treatment faster because your dentist can submit your claim form electronically.
- Access pending claim status or review claim history online or over the phone.
- Track claims online and receive email alerts when a claim has been processed.

Or call us at **1-800-942-0854**.

4 Easy Steps to Optimize Your Dental Benefit

1. Consider using one of more than 79,000 participating PDP dentists to realize even greater savings on your out-of-pocket expenses.
2. Avoid surprises by asking your dentist to submit a pre-treatment estimate. *While you wait*, your dentist can get a real-time pre-treatment estimate online or over the phone in minutes detailing what your plan will cover and at what payment level.
3. Take advantage of your plan's preventive care benefit (Type A) to help avoid more costly procedures later.
4. Keep the Benefit Summary for future reference and provide a copy to your dentist when you visit.

Like most group dental insurance policies, MetLife policies contain certain exclusions, waiting periods, reductions, limitations and terms for keeping them in force. Please contact MetLife for complete details.

MetLife®

Metropolitan Life Insurance Company, NY, NY 10166
L0405LA82(exp0506)MLIC-LD

Mail completed claim forms to:

MetLife Dental Claims
P.O. Box 981282
El Paso, TX 79998-1282

Mail completed claim forms to:

MetLife Dental Claims
P.O. Box 981282
El Paso, TX 79998-1282

Call 1-800-942-0854:

- Monday- Friday, 6 a.m. to 11 p.m., Saturday, 6 a.m. to 4 p.m., Eastern time, to confirm eligibility, order claim forms or request dentist directories

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