AFL Hotel & Restaurant Workers Health & Welfare Trust Fund Benefit and Risk Management Services 560 N. Nimitz Highway, Suite 209 Honolulu, HI 96817-5315

April 2009

TO: All Kaiser Bargaining Unit Actives and Non-Medicare Retirees < 65

AFL Hotel and Restaurant Workers Health and Welfare Trust Fund

FROM: Board of Trustees

SUBJECT: COMPREHENSIVE MEDICAL PLAN, INDEMNITY PRESCRIPTION

DRUG PLAN, REVISED COBRA PROGRAM RATES, AND VISION

CARE PROVIDERS

I. COMPREHENSIVE MEDICAL PLAN

A. <u>Human Papilloma Virus (HPV) Vaccine</u>

Effective January 1, 2008, the Human Papilloma Virus Vaccine is revised to <u>include</u> coverage for the following:

"When the third dose is administered at 13 years of age or later, the third dose will be covered at 50% of Eligible Charges."

NOTE: There is no change to the current coverage of HPV immunization benefits for females 11 through 12 years of age.

II. INDEMNITY PRESCRIPTION DRUG PLAN

- A. Central Fill Program (Oahu and Neighbor Islands)
 - 1) Effective March 1, 2009, the following pharmacies were added as participating providers under the Central Fill Program:

OAHU

1) Safeway-Beretania 1121 S. Beretania Street Honolulu, Hawaii 96814

(808) 592-6487

2) Safeway-Kapahulu

888 Kapahulu Avenue Honolulu, Hawaii 96816 (808) 732-2606

3) Safeway-Kailua

200 Hamakua Drive Kailua, Hawaii 96734 (808) 266-5220

MAUI

1) Safeway-Kahului

170 E. Kaahumanu Avenue Kahului, Hawaii 96732 (808) 893-0606

2) Safeway-Kihei

277 Piikea Avenue Kihei, Hawaii 96753 (808) 891-9130

3) Paia Pharmacy

96 Hana Highway Paia, Hawaii 96779 (808) 579-6466

KAUAI

1) Safeway-Kapaa

831 Kuhio Highway Kapaa, Hawaii 96746 (808) 822-2191

MOLOKAI AND LANAI

1) Molokai Drugs

28 Kamoi Street Kaunakakai, Hawaii 96748 (808) 533-5790

2) Lanai Family Health Center

(Straub Lanai) 628-B 7th StreetLanai City, Hawaii 96763

B. Point-of-Service Program (Oahu and Neighbor Islands)

1) Effective March 1, 2009, the following pharmacies were added as participating providers under the Point-of-Service Program:

OAHU

1) Safeway-Beretania

1121 S. Beretania Street Honolulu, Hawaii 96814 (808) 592-6487

2) Safeway-Kapahulu

888 Kapahulu Avenue Honolulu, Hawaii 96816 (808) 732-2606

3) Safeway-Kailua

200 Hamakua Drive Kailua, Hawaii 96734 (808) 266-5220

MAUI

1) Safeway-Kahului

170 E. Kaahumanu Avenue Kahului, Hawaii 96732 (808) 893-0606

2) Safeway-Kihei

277 Piikea Avenue Kihei, Hawaii 96753 (808) 891-9130

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KAUAI

1) Safeway-Kapaa 831 Kuhio Highway Kapaa, Hawaii 96746 (808) 822-2191

MOLOKAI AND LANAI

1) Molokai Drugs 28 Kamoi Street Kaunakakai, Hawaii 96748 (808) 533-5790

2) Lanai Family Health Center (Straub Lanai) 628-B 7th Street Lanai City, Hawaii 96763

Attached, for your information, are the updated Central Fill and Point-of-Service pharmacy listings for Oahu and the Neighbor Islands.

III. REVISED COBRA PROGRAM RATES

Effective **February 1, 2009**, the COBRA coverage and rates offered by the Trust Fund are revised as follows:

A. ACTIVES – Full Coverage¹
Kaiser with HDS Dental \$673.97

Kaiser with Gentle Dental \$654.49

¹ Full coverage includes medical, prescription drug, dental, vision, EAP and death benefits.

IV. VISION CARE PROGRAM

A. New Vision Care Providers

Effective June 1, 2009, the following vision care providers will be added as participating providers under the vision care program. The provider's name, address, telephone number and type of services available are as follows:

Provider's Name & Address

Fong Eyecare Center, LLC 725 Kapiolani Blvd., Suite C-204 Honolulu, Hawaii 96813 Phone: (808) 593-8939

2. Glaucoma Center of Hawaii 1441 Kapiolani Blvd., Suite 1403 Honolulu, Hawaii 96814 Phone: (808) 945-2222

 Paradise Optical Company Pearlridge Center 98-1005 Moanalua Rd., Suite 501 Aiea, Hawaii 96701 (808) 488-6869

4. Reid K. Saito, LLC 1029 Kapahulu Ave., Suite 402 Honolulu, Hawaii 96816 (808) 735-7633

Services Available

Eye Examinations,
Eyeglasses,
Contact Lenses and
Therapeutic
Pharmaceutical Agents

Eye Examinations and Eye Surgeries

Lenses, Frames and Contact Lenses

Eye examinations, Lenses, Frames and Contact Lenses

You are free to use any licensed vision care provider of your choice and receive the Trust Fund's allowance for covered services and supplies. However, by receiving services and supplies from a participating provider, you limit your out-of-pocket cost for covered services. For a complete list of participating vision care providers, contact the Trust Fund Office.

REMINDER

All vision claims must be filed within ninety (90) days from the date of service

Should you have any questions, please contact the Trust Fund Office at (808) 523-0199.