

# HAWAII TEAMSTERS HEALTH & WELFARE TRUST FUND

ALL ELIGIBLE ACTIVE PARTICIPANTS

OPEN ENROLLMENT

The Annual Open Enrollment period for the Hawaii Teamsters Health & Welfare Trust Fund is **July 1, 2016 through July 31, 2016, effective September 1, 2016**. If you wish to change plans, please visit, [www.teamsterstrustbenefits.com](http://www.teamsterstrustbenefits.com). You may also visit your Trust Fund Office, Benefit & Risk Management Services (BRMS) at 560 N. Nimitz Hwy., Suite 209, Honolulu, Hawaii 96817-5315, or our Satellite office (located in the Union Hall); or contact 523-0199; neighbor islands (866) 772-8989, for further assistance.

## Medical Plans

Two (2) choices are available – **Teamsters Self-Funded Comprehensive Medical PPO Plan** and the **Teamsters Self-Funded Comprehensive Medical HMO Plan**. The Teamsters Self-Funded Medical PPO Plan is a preferred provider or “freedom of choice” plan. You may receive services from the doctor of your choice and payments are based on a percentage of Eligible Charges. Under this plan, your out-of-pocket costs are usually lower when you receive services from a participating provider. Under the Teamsters Self-Funded Comprehensive Medical HMO Plan, you must receive services from the Core Facility at Queen’s Health Systems (Queen’s Medical Center and Affiliated Companies) and Core Physician Base (Queen’s physician base and other independent physicians and physician groups who have privileges to practice at Queen’s managed facilities (on Oahu). Your co-payment is usually a fixed dollar amount. The plan will not pay for services from a Non-Queen’s Health System, except when referred or if emergency care is required.

## Dental Plans

Two (2) choices are available – **Hawaii Dental Service (HDS)** and **Gentle Dental (formerly Dental Care Centers of Hawaii)** Plan. The HDS Plan offers you freedom to choose your own dentist. You may select from a network of over 96% of the dentists statewide. Payments are based on a percentage of eligible fees. Visiting an HDS Member Dentist will lower your out-of-pocket costs. National coverage is also available through Delta Dental Plans Association, the largest dental benefits provider in the nation. The Gentle Dental Plan is a “dental HMO” plan. You must receive services at one of the following HFDC clinics: GMS Dental and Healthy Smiles Family Dental. Your copayment is usually a fixed dollar amount. The Plan will not pay for services from a non-Gentle Dental dentist, except when referred or if emergency care is required.

A Summary of Benefits and Coverage for the medical plan(s) are enclosed along with a comparison sheet for the dental providers.

Benefit & Risk Management Services, Inc.  
Trust Administrator  
On behalf of the  
Board of Trustees

Enclosures  
June 2016