



HAWAII TEAMSTERS TRUST FUNDS

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Hawaii Truckers-
Teamsters Union
Pension Plan

• Teamsters Health &
Welfare Trust Fund

• Teamsters Legal
Services Plan

• Teamsters Training
and Opportunity
Program

March 17, 2003

TO: All OAHU Participants of the Hawaii Teamsters Health & Welfare Trust
Eligible for the Indemnity Prescription Drug Plan

FROM: Board of Trustees

SUBJECT: **INDEMNITY PRESCRIPTION DRUG PLAN
CHANGES EFFECTIVE APRIL 1, 2003**

EFFECTIVE APRIL 1, 2003, the Indemnity Prescription Drug plan benefits will change as follows. PLEASE READ THE FOLLOWING CAREFULLY. If you do not use the following programs as outlined, you may have a higher out-of-pocket cost.

- **For long-term prescriptions,** (prescription drugs taken for more than 15 days), you may obtain your prescriptions through the Central Fill (Times Pharmacies) Program.
- **For short-term prescriptions,** (prescription drugs taken for up to 15 days), you may obtain your prescriptions through the Point of Service (POS) Program

****LONG-TERM PRESCRIPTIONS****

Central Fill (Times Pharmacies) Program

Under the Central Fill (Times Pharmacies) program, you may fill your **long-term prescriptions** from any Times pharmacy by following the steps below:

- Step 1: Obtain a prescription from your doctor.
- Step 2: Go to the nearest Times pharmacy (see attached pharmacy listing) and present your prescription and HMA identification card.
- Step 3: If this is the **first time** you are taking this drug or dosage of this drug, the Times pharmacist will fill your prescription for 15 days and you pay the following co-payment:

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15-day supply limit (1st time fill)

Generic drugs	\$ 5.00
Brand Name drugs	\$15.00

Step 4: If you and your doctor decide to continue to use this drug, you may obtain a **refill** for up to 60 days supply. Call the Times pharmacy refill phone number (see attached pharmacy listing) at least three (3) days before your prescription supply runs out. Request a refill.

Step 5: Go to the Times pharmacy you called and pick up your prescription refill for a 60 days supply and make the following co-payment:

60-days supply limit (Refills)

Generic drugs	\$ 8.00
Brand Name drugs	\$24.00

****SHORT-TERM PRESCRIPTIONS****

Point of Service (POS) Program

Under the Point of Service (POS) Program, you may obtain your **short-term prescriptions** from any participating POS pharmacy or Times Pharmacy (see attached pharmacy listing), and you pay only the co-payment.

Generic drugs	\$ 5.00
Brand Name drugs	\$15.00

Effective April 1, 2003, the following important change applies:

	<u>Current</u>	<u>Effective 4/1/03</u>
Days Supply Limit	21 or 30 days supply limit per prescription	15 days supply limit * per prescription

*For prescription drugs that can only be dispensed in "unbreakable" packages, (e.g., creams, ointments, certain inhalers), the days supply limit shall be equivalent to the package size days supply, not to exceed a 30 days supply, with a single copay charged to the member.

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Other Programs

In addition to the above programs, you may continue to use the Direct Reimbursement Program to obtain short-term prescriptions from any licensed pharmacy. You pay in full at the time of purchase and submit your claim to HMA, Inc. within 90 days from the date of purchase. There is no change to the Direct Reimbursement Program.

A Hawaii-based mail order program is also available. Effective April 1, 2003, mail order prescriptions will be filled by Caremark Pharmacy located in Kailua, Oahu. If you would like to use the mail order program, please contact HMA to obtain a mail order form and instructions.

The above changes do not apply to members covered under the Trust Fund's Kaiser Drug Plan.

Should you have any questions on the above changes or how to use any of the above programs, contact the HMA Honolulu office at 951-4640 or 951-4621. If you have further questions, contact the Trust Fund office at 847-0886.

Hawaii Teamsters Health & Welfare Trust

PARTICIPATING TIMES PHARMACIES

	<u>Times Pharmacy Location and Address</u>	<u>To Call for a Refill</u>	<u>Hours of Operation</u>
Aiea	99-115 Aiea Heights Dr.	483-3075	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Beretania	1290 S. Beretania St.	522-5086	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Kahala	1173 21 st Ave.	733-2035	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Kailua	590 Kailua Rd.	266-2704	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Kaneohe	45-934 Kamehameha Hwy.	233-4605	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Koolau	47-388 Hui Iwa St.	239-8827	9-7 M-F, 9-5 Sat, Closed Sun
Liliha	1425 Liliha St.	522-5082	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
McCully	1772 S. King St.	973-5860	9-7 M-F, 9-5 Sat, Closed Sun
Royal Kunia	94-615 Kupuohi St.	677-6703	9-7 M-F, 9-5 Sat, Closed Sun
Waimalu	98-1264 Kaahumanu St.	483-3082	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun
Waipahu	94-766 Farrington Hwy.	671-7276	8:30-7 M-F, 8:30-5 Sat, 9-5 Sun

Other Oahu Participating (POS) Pharmacies

HONOLULU

AINA HAINA PMCY 850 W. Hind Dr.
 APO'S FARMACIA 634 Kalihi St., #204
 COSTCO PHARMACY 525 Alakawa St.
 COSTCO PHARMACY 333 "A" Keohole St.
 DAIEI PHARMACY 801 Kaheka St.
 GULICK PHARMACY 2070 N. King St.
 K MART PHARMACY 500 Nimitz Hwy.
 K MART PHARMACY 4561 Salt Lake Blvd.
 KAPIOLANI PHCY 1319 Punahou St.
 KUHIO PHARMACY 2330 Kuhio Ave.
 SAFEWAY PHARMACY 1121 S. Beretania St.
 SAV MOR DRUGS 2295 N. King St.
 STAR MARKET PHCY 2470 S. King St.
 STAR MARKET PHCY 1620 N. School St.
 STRAUB PHARMACY 888 S. King St.

LEEWARD / CENTRAL

CENTER PHARMACY 302 California Ave.
 COSTCO PHARMACY 94-1331 Ka Uka Blvd.
 D A PHARMACY 55-510 Kam. Hwy.
 DAIEI PHARMACY 94-144 Farrington Hwy.
 K MART PHARMACY 94-825 Lumiaina
 K MART PHARMACY 500 Kamokila Blvd.
 NORTH SHORE PHCY 56-119 Pualalea St.
 STAR MARKET PHCY 91-919 Fort Weaver Rd.
 WAIPAHU DRUG 94-748A Hikimoe St.
 WAIPAHU TOWN PHCY 94-307 Farrington Hwy.
 WAL-MART PHARMACY 94-595 Kupuohi St.
 WAL-MART PHARMACY 1000 Kam. Hwy.

WINDWARD

DAIEI PHARMACY 345 Hahani St.
 SAFEWAY PHARMACY 200 Hamakua Dr.