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TEAMSTERS UNION 25 HEALTH SERVICES & INSURANCE PLAN

16 SEVER STREET – SULLIVAN SQUARE • CHARLESTOWN, MASSACHUSETTS 02129-1305
Telephone: 617-241-9220 • Within MA: 800-442-9939 • Outside MA: 800-225-6135 • Fax: 617-241-8168

SUMMARY ANNUAL REPORT FOR TEAMSTERS UNION 25 HEALTH SERVICES & INSURANCE PLAN

This is a summary of the annual report for the Teamsters Union 25 Health Services & Insurance Plan, EIN 04-6374631, Plan No. 501 for the period September 1, 2016 to August 31, 2017. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Board of Trustees has committed itself to pay directly for weekly accident and sickness, hospital, medical, surgical, dental, vision care, prescription drug, retiree health benefits, hearing care and diagnostic health screening claims incurred under the terms of the Plan.

INSURANCE INFORMATION

The Plan has contracts with the United of Omaha Life Insurance Company, Fallon Health and Blue Cross Blue Shield of Massachusetts to pay life insurance, long term disability, accidental death and dismemberment claims and health claims incurred under the terms of the Plan. The total premiums paid for these contracts were \$92,675,734. Because the Blue Cross Blue Shield of Massachusetts contract is a so called "experience-rated" contract, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the fund year ending August 31, 2017, the premiums paid under such "experience-rated" contracts were \$80,701,729 and the total of all claims paid under these "experience-rated" contracts during the year were \$93,096,371.

BASIC FINANCIAL STATEMENTS

The value of plan assets, after subtracting liabilities of the Plan was \$170,683,968 as of August 31, 2017, compared to \$152,097,208 as of September 1, 2016. During the plan year, the Plan experienced an increase in its net assets of \$18,586,760. This increase includes unrealized appreciation or depreciation in the value of the 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 the assets acquired during the year. During the plan year, the Plan had total income of \$155,041,908, including employer contributions of \$130,114,089, participant contributions of \$7,102,549, realized gains of \$60,452 from the sale of assets, earnings from investments of \$14,792,949 and other income of \$2,971,869.

Plan expenses were \$136,455,148. These expenses included \$3,631,881 in administrative expenses and \$132,823,267 in benefits paid on behalf of 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 and information on payments to service providers;
- Assets held for investment;
- Transactions in excess of 5% of plan assets;
- Insurance information, including sales commissions paid by insurance carriers; and
- Information regarding any common or collective trusts, pooled separate Accounts, master trust or 103-12 investments 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 the Plan at 16 Sever Street, Charlestown, MA 02129-1309, (617) 241-9220. The charge to cover copying costs will not exceed 25 cents per page.

You also have the right to receive from the Plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or both. If you request a copy of the full annual report from the Plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover the 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 at 16 Sever Street, Charlestown, MA 02129-1309, (617) 241-9220 and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from U.S. Department of Labor upon payment of copying costs. Request to the Department should be addressed to: Public Disclosure Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, NW, Washington, D.C. 20210.

Additional Information

Teamsters Union 25 Health Services & Insurance Plan has a Notice of Privacy Practices which is posted at www.teamsterscare.com. The Notice contains information about how the plan ensures the privacy of your Protected Health Information (PHI). You may request a paper copy by writing to the TeamstersCare Privacy Official at 16 Sever Street, Charlestown, MA 02129.