



Dear Member,

We were recently notified of your retirement. You may be eligible for health benefits provided by the plan.

To be eligible for retiree coverage you must meet all of the following:

1. Have at least 10 years of service with a contributing National Employees Health Plan employer(s), and
2. Be eligible for a Teamsters pension benefit, or an employer sponsored pension plan as of the date of retirement, and
3. Be at least age 55 on the date of retiring from employment as an active member from an employer that is contributing to the fund for retiree coverage, and
4. Have not attained age 65 on the date of retirement, and are not eligible for Medicare, unless your employer has negotiated supplemental retiree benefits, and
5. Your employer has made continuous contributions to the fund for at least five consecutive years, and
6. You are not eligible to be covered as an active member or dependent of an active member.

Upon meeting the retiree eligibility rules, you may select one of the following options:

- Option 1:       \$125 Per Person Monthly Contribution  
                  \$250 Per Person Annual Deductible  
                  **PPO Medical Plan** with Prescription Drug coverage (20% copay)
- Option 2:       \$125 Per Person Monthly Contribution  
                  No Person Annual Deductible  
                  **HMO Medical Plan** with Prescription Drug coverage (\$10 copay)

Please complete the **National Employees Health Plan Enrollment** form and the appropriate carrier enrollment form.

Failure to complete and return the forms may result in a lapse of coverage for you and/or your spouse. If you have any questions, please feel free to call us at (800) 648-8200.