

August 1, 2010

TEAMSTERS' NATIONAL BENEFIT PLAN NOTICE

Prescription Drug Card Improvement

We are pleased to advise that the Plan's Trustees recently approved changes to the Plan's Prescription Drug Card effective August 1, 2010.

More than one year ago, the Trustees improved benefits by extending prescription drug coverage to drugs not on the B.C. Pharmacare formulary. However, the Plan's prescription drug card could not be used for the "non-formulary" drugs. Members were required to submit manual claims to the Plan's office by filling out a claim form and attaching receipts.

Effective August 1, 2010 the manual submission of these claims will no longer be required. **The Plan's prescription drug card will now be accepted for both "formulary" and "non-formulary" prescription drugs.** These are drugs approved for sale in Canada for the treatment of illness or disease which are available only by prescription and when prescribed by a Physician.

Drugs determined to be "Lifestyle" drugs such as, but not limited to, those for weight loss, vaccines, smoking cessations, vitamins, erectile dysfunction and those for cosmetic purposes continue to be excluded from coverage.

Even with this change, it is very important for you, as a member of the Plan, to understand the difference between prescription drugs which are on the B.C. Pharmacare "**formulary**" and those which are not, "**non-formulary**".

Formulary Drugs

When you have a prescription for a "**formulary**" drug filled at the pharmacy, the cost of the drug **is applied** toward your B.C. Pharmacare deductible (based on income). When you reach this deductible B.C. Pharmacare begins paying 70% of your prescription drug expenses. If you have reached your B.C. Pharmacare deductible but have not yet reached your maximum benefit under the Plan (currently \$2,500.00 per person) the Plan will pay the remaining 30% leaving you with only the \$2.00 per prescription charge.

Non-formulary Drugs

When you have a prescription for a "**non-formulary**" drug filled at the pharmacy, the cost of the drug **is not applied** toward your Pharmacare deductible (unless you have applied for and received "Special Authority" from Pharmacare). To illustrate the point, if a member was prescribed and purchased only "**non-formulary**" drugs and reached the \$2,000.00 per family maximum under the Plan, **there would be no coverage available through Pharmacare.** In this situation, the member would be responsible for 100% of the cost of their prescription drugs for the remainder of the calendar year.

We encourage you to contact the Plan's office with your questions.