NEW YORK STATE TEAMSTERS COUNCIL
HEALTH AND HOSPITAL FUND

SUMMARY ANNUAL REPORT

This is a summary of the annual report for New York State Teamsters Council Health and Hospital Fund (the "Plan"), EIN 15-0551885, Plan No. 501, for the Plan year ended December 31, 2024. 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 certain hospital, surgical, medical, dental, vision, disability, death, legal service, prescription drug, and other health related claims incurred under the terms of the Plan.

Insurance Information

The Plan has contracts with Moyer Russi and Randall, PC, Excellus Health Plan, Inc. (d/b/a Excellus BlueCross BlueShield Central New York Region), Davis Vision, Inc., Medco-Express Scripts, The Standard, and Union Labor Life Insurance Company to pay certain legal, health, vision, disability and death claims incurred under the terms of the Plan. The total premiums paid for the Plan year ended December 31, 2024, were $5,264,813.

Basic Financial Statement

The value of Plan assets, after subtracting liabilities of the Plan, was $690,370,363 as of December 31, 2024, compared to $663,053,392 as of December 31, 2023. During the year, the Plan experienced an increase in its net assets of $27,316,971. This increase includes unrealized appreciation of $36,751,879 in the value of the Plan's 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 assets acquired during the year.

During the Plan year, the Plan had a total income of $250,213,808, including employer contributions of $202,874,777, participant contributions of $846,449, realized gain of $2,011,636 from the sale of assets, earnings from investments of $7,404,934, unrealized appreciation of $36,751,879 as discussed above, and other income of $324,133. Plan expenses were $222,896,837. These expenses included $14,167,189 in administrative expenses, and $208,729,648 in benefits paid to 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, upon request. The items listed below are included in that report.

1. An accountant's report;
2. Financial information and information on payments to service providers;
3. Assets held for investment;
4. Fiduciary information, including non-exempt transactions between the Plan and parties-in-interest (that is, persons who have certain relationships with the Plan);
5. Transactions in excess of 5% of Plan assets;
6. Insurance information including sales commissions paid by insurance carriers; and

7. Information regarding any common or collective trusts 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 New York State Teamsters Council Health and Hospital Fund, P.O. Box 4928, Syracuse, New York 13221-4928, (315) 455-9790. The charge to cover copying costs will be $.25 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 a statement of income and expenses 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 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 office of the New York State Teamsters Council Health and Hospital Fund, 151 Northern Concourse, Syracuse, New York 13212, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs.

Requests to the Department should be addressed to:

Public Disclosure Room, N1513
Employee Benefits Security Administration
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210