

I.B.E.W. LOCAL NO. 683 HEALTH AND WELFARE PLAN

P.O. Box 8010, Columbus, OH 43201
(614) 421-0600 or (800) 345-5905

IMPORTANT NOTICE

June 1, 2018

This is an important notice to all Participants in the I.B.E.W. Local No. 683 Health and Welfare Plan (the "Plan"). Due to the rising costs of health care and prescription coverage, the Plan's Board of Trustees (the "Trustees") recognized that funding for retiree health benefits under the Plan was not currently sustainable without adversely impacting the Plan's overall longevity. However, the Trustees also realized the importance of continuing retiree benefits for dedicated I.B.E.W. Local 683 members and their families.

After informed consultation with benefits professionals and comprehensive discussions, the Trustees decided to change the monthly premium rates for existing and future retirees effective July 1, 2018. Please review the rates described below carefully.

Monthly Retiree Self-Pay Rates for Retirements on and after July 1, 2018 Per Individual Retiree and/or Individual+Spouse*			
Years of Service	Medicare	Non-Medicare	Disabled with Medicare/Non-Medicare
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5 to 9	\$224/\$448	\$801/\$1,602	\$397/\$794
10 to 14	\$182/\$364	\$651/\$1,302	\$323/\$646
15 to 19	\$140/\$280	\$501/\$1,002	\$249/\$497
20 to 24	\$98/\$196	\$351/\$702	\$174/\$348
25+	\$56/\$112	\$200/\$400	\$99/\$198

*Add new monthly premium of \$100 for each Eligible Dependent child effective July 1, 2018.

Monthly Rates for Senior Retirees (over age 65) Retiring Before July 1, 2018	Per Month
Self Only	\$60.00
Self and Spouse over age 65	\$120.00
Self (over age 65) and Spouse (under age 65)	\$315.00
Add for each Eligible Dependent child	\$100.00
Monthly Rates for Early/Normal/Disabled Retirees Retiring Before July 1, 2018	Per Month
Self Only – No Medicare	\$300.00
Self Only – With Medicare	\$210.00
Self and Spouse (under age 65) – No Medicare	\$600.00
Self (under age 65) with Spouse (over age 65) – With Medicare	\$315.00
Self (Disabled with Medicare) and Spouse (under age 65)	\$465.00
Add for each Eligible Dependent child	\$100.00

If you have questions, please call the Plan Administrator at 800-345-5905. Additionally, if you or your spouse have retiree status changes, such as eligibility for Medicare (making the Plan your secondary coverage which results in lower retiree premiums), notify the Plan Administrator.

Rates are subject to periodic review and change at the discretion of the Plan's Board of Trustees.