



Service. Security. Stability.

November, 2011

Premium Rate Changes Effective January 1, 2012

Dear COBRA Participant:

The chart below lists the new monthly COBRA premium rates starting January 1, 2012. Please refer to the chart below for the rate that applies to your plan. If you previously elected and were approved by the Fund Office for the ARRA COBRA Premium subsidy, your new ARRA monthly premium rate is also listed below.

Coverage Type	Single Plan	ARRA Subsidy Reduced Single Plan	Family Plan	ARRA Subsidy Reduced Family Plan
COBRA Plus (Medical, Dental, Drug & Vision)	\$536.00	\$187.60	\$1,324.00	\$463.40
COBRA Core (Medical & Drug Only)	\$472.00	\$165.20	\$1,166.00	\$408.10
COBRA-Apprentice (Medical & Vision Only)	\$402.00	\$140.70	\$993.00	\$347.55

Important: These new rates are applicable to your January, 2012 payment. Failure to pay the correct rate will result in the termination of your coverage.

If you have any questions about this notice, please contact the Fund Office Monday through Friday, between the hours of 8:00 am and 4:30 pm. To speak to one of our Participant Service Representatives, please call (312) 787-9455, Menu Option 3.

Sincerely,

The Board of Trustees

