

★★ IMPORTANT NOTICE TO PARTICIPANTS ★★

April 2018

To All Covered Persons:

This Notice is to inform you of changes to the contribution and self-payment rates, effective June 1, 2018.

CONTRIBUTION AND SELF-PAYMENT RATES – EFFECTIVE JUNE 1, 2018

We have completed our annual review of Fund expenses, including projected expenses for the upcoming 12 months, and find increases are necessary to the contribution and self-payment rates for active employees and retirees, effective June 1, 2018.

As a result the employer contribution rate will increase from \$8.45 to \$9.00 per hour and the required monthly hours will increase from 130 hours to 135 hours. The monthly self-payment rate for active employees will increase to \$1,215.00, effective with hours worked June 1, 2018 (eligibility month of August). The rate for the Reduced Cost Option will increase by 7% to \$763.00. The self-payment rates for non-Medicare-eligible retirees, spouses, and dependents will increase to \$1,215.00 per month. There will be a 7% increase to the current rates for retirees who are Medicare-eligible and whose dependents, if any, also are Medicare-eligible. The contribution amount for Optional Dental Care and Vision Care Benefits will remain at \$105.00 per month.

Please refer to the attached schedule for the new contribution and self-payment rates. The new amounts will be reflected in the self-payment and remittance notices applicable to this month.

If you have any questions, please call the Fund Office at (952) 854-0795, or toll-free at 1-800-535-6373.

Yours very truly,

THE BOARD OF TRUSTEES