WELFARE, ANNUITY AND APPRENTICESHIP SKILL IMPROVEMENT & SAFETY FUNDS

of the

International Union of Operating Engineers Local 15, 15A, 15B, 15C & 15D, A.F.L.-C.I.O.

44-40 11th Street • Long Island City, N.Y. 11101

Employer Trustee MICHAEL SALGO WILLIAM TYSON



<u>Union Trustees</u> THOMAS A. CALLAHAN JOHN W. MCNAMARA

April 1, 2025

COBRA Premium Increase Letter

This notice contains important information about COBRA premiums under the Welfare Fund benefits.

INCREASE IN COBRA PREMIUMS AS OF MAY 1, 2025

We are providing you and your family with this announcement letter to inform you of changes adopted by the Board of Trustees regarding the COBRA premiums the Fund currently charges to individuals who are on COBRA. Under Federal law, plans are allowed to charge COBRA beneficiaries the same amount for the total cost of coverage for active employees, plus a two percent administration fee.

Plans are also allowed to recalculate the COBRA premiums once per year as of their "COBRA determination period", and pass along any change in premiums for COBRA participants at the beginning of each new determination period. The Plan's COBRA determination period is the 12-month period from May 1st through April 30th.

In an effort to maintain the strong financial position of the Welfare Fund, and after extensive deliberation, the Board of Trustees has adopted the following monthly premiums effective May 1, 2025.

	CORE (Medical Only)	CORE PLUS NON-CORE (Medical, Dental, Optical)
Individual Rate	\$935.28	\$964.52
Family Rate	\$2446.78	\$2525.70
Individual Disability Rate	\$1375.42	\$1418.41
Family Disability Rate	\$3598.21	\$3714.27

If you have questions about COBRA continuation coverage under the Plans, please contact the Welfare Fund Office.

The Trustees of the Welfare Fund