

## PLUMBERS AND PIPEFITTERS LOCAL 501 NORTHERN ILLINOIS BENEFIT FUNDS

1295 Butterfield Rd., Aurora, IL 60504-8879 • Ph (630) 978-4600 • Fax (630) 978-4616 • email: benefitfunds@ualocal501.org

## NOTICE TO ALL PARTICIPANTS

- SELF-PAY RATES
- WELL-CHILD CARE BENEFITS

April 2001

To All Northern Illinois Benefit Fund (Health and Welfare) Participants:

## **SELF-PAY RATES**

The Board of Trustees, at their meeting held March 27, 2001, reviewed the costs associated with providing benefits to individuals who self-pay through COBRA and under the Active and Retiree self-pay programs. The Board of Trustees determined that an increase was necessary. Listed below are the rates that will be necessary to provide coverage effective July 1, 2001:

	Old Rate	New Rate Effective 7/1/2001
ACTIVES QUARTERLY SELF-PAY	\$675.00 per quarter	\$900.00 per quarter
RETIREES UNDER AGE 65 MONTHLY SEL		
	\$225.00 per month	\$300.00 per month
RETIREES AGE 65 AND OLDER MONTHLY SELF-PAYMENT		
	\$225.00 per month	\$250.00 per month
COBRA MONTHLY SELF-PAY		
Single, medical only	\$127.65 per month	\$159.00 per month
Family, medical only	\$327.70 per month	\$453.00 per month
Single, medical, dental, vision	\$146.51 per month	\$183.00 per month
Family, medical, dental, vision	\$374.44 per month	\$527.00 per month

## **WELL-CHILD CARE BENEFITS**

IMPROVED WELL-CHILD CARE BENEFIT – The Board of Trustees is pleased to announce that the maximum benefit for routine care has been increased from \$300 to \$450 for dependent children age 0 through 4 years. This maximum applies to each child each calendar year. Covered expenses include routine examinations and preventive services, including immunizations. This Plan increase is effective for covered expenses incurred on and after June 1, 2001.

If you have any questions, please call the Fund Office.