

# HAWAII TEAMSTERS HEALTH & WELFARE TRUST

## Benefit and Risk Management Services

560 N. Nimitz Highway, Suite 209

Honolulu, HI 96817-5315

December 2008

TO: All **OTS Retirees and Spouses** of the Hawaii Teamsters Health & Welfare Trust enrolled in the COBRA Program

FROM: Board of Trustees

SUBJECT: COBRA PROGRAM RATES

### I. COBRA PROGRAM

#### A. RETIREEES & SPOUSES UNDER AGE 65:

**Effective March 1, 2009**, the following is the schedule of rates for the COBRA continuation of coverage for Retirees and Spouses under age 65:

<u>BENEFIT</u>	<u>PER INDIVIDUAL</u>
<b>Core Coverage</b> - Medical & Prescription Drug only	
Indemnity	\$227.82
Kaiser	\$300.63
<b>Full Coverage</b> - Medical, Prescription Drug, & Vision	
Indemnity	\$229.71
Kaiser	\$302.53

#### B. RETIREEES & SPOUSES AGES 65 AND OVER:

**Effective March 1, 2009**, the following is the schedule of rates for the COBRA continuation of coverage for Retirees and Spouses ages 65 and over:

**BENEFIT****PER INDIVIDUAL****Core Coverage** - Medical & Prescription Drug only

HMSA 65C Plus <sup>i</sup>	\$242.18
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Kaiser	\$217.83
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**Full Coverage** - Medical, Prescription Drug, & Vision

HMSA 65C Plus <sup>ii</sup>	\$244.65
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Kaiser	\$220.30
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<sup>i</sup> HMSA 65C Plus, HMSA Medicare Part D EGWP (fully-insured)

<sup>ii</sup> HMSA 65C Plus, HMSA Medicare Part D EGWP (fully-insured) and self-funded vision

Should you have any questions on the above changes, please contact the Trust Office at (808) 523-0199 or for neighbor islands, toll free at 1 (866) 772-8989.