MICHIGAN CARPENTERS' FRINGE BENEFIT FUNDS

Michigan Carpenters' Health Care Fund Michigan Carpenters' Pension Fund Managed for the Trustees by: TIC INTERNATIONAL CORPORATION

May 2019

IMPORTANT NOTICE

RE: Michigan Carpenters' Health Care Fund (Fund) –Summary of Material Modifications to Self-Payment Rates – Effective June 1, 2019

To: Active Participants, Early Retirees, Medicare Eligible Retirees, Surviving Spouses and Disabled Participants

Dear Participants:

As you know, we routinely review the Fund's finances, benefits provided, and the impact of increases in the cost of providing health care. You were previously notified of a future change regarding self-payment increases.

Effective for the eligibility month of June 2019, the monthly self-payment rate and the monthly amount taken from your dollar bank will increase. However, the number of hours you must work each month in order to continue Fund eligibility will NOT change.

Below are the new monthly self-payment rates and dollar bank amounts:

Contract Type	Monthly Self-Payment/Dollar Bank		
	Current Rate	June 2019 Eligibility Rate	
Active	\$749.00	\$777.00	
Minimum	\$415.00	\$436.00	
Coverage			

	Monthly Self-Payment/Dollar Bank			
Contract Type	Current Rate	June 2019 Rate	Current Rate	June 2019 Rate
	(no dental)	(no dental)	(with dental)	(with dental)
One Person with	\$194.00	\$204.00	\$220.00	\$231.00
Medicare				
	\$388.00	\$408.00	\$414.00 (Member and	\$435.00 (Member and
			Spouse with Medicare)	Spouse with Medicare)
Two Persons with			\$451.00 (Surviving	\$474.00 (Surviving
Medicare			Spouse and Dependent	Spouse and Dependent
			with Medicare)	with Medicare)
Three Persons with	\$580.00	\$609.00	\$658.00	\$691.00
Medicare	φεσσισσ	φουν.	φουσιου	ψυν 1.00

	Monthly Self-Payment/Dollar Bank			
Contract Type	Current Rate (no dental)	June 2019 Rate (no dental)	Current Rate (with dental)	June 2019 Rate (with dental)
			\$947.00 (Member with Medicare and Spouse without Medicare)	\$995.00 (Member with Medicare and Spouse without Medicare)
One or More Person(s) with Medicare and One	\$99 5 00	\$930.00	\$962.00 (Member with Medicare + 2 or more persons without	\$1,011.00 (Member with Medicare + 2 or more persons without
or More Person(s) Without Medicare	\$885.00	\$930.00	Medicare)	Medicare)
Without Medicare			\$962.00 (Member and Spouse with Medicare and Dependent(s) without Medicare)	\$1,011.00 (Member and Spouse with Medicare and Dependent(s) without Medicare)
			\$543.00 (Disabled Participant)	\$571.00 (Disabled Participant)
			\$580.00 (Disabled Participant with Spouse or Dependent)	\$609.00 (Disabled Participant with Spouse or Dependent)
			\$596.00 (Disabled Participant + 2 or more persons without Medicare)	\$626.00 (Disabled Participant + 2 or more persons without Medicare)
Disabled Participant with or without Dependents (First 6 months)	\$518.00	\$544.00	\$596.00 (Disabled Participant and Spouse without Medicare and Dependent with Medicare)	\$626.00 (Disabled Participant and Spouse without Medicare and Dependent with Medicare)
			\$596.00 (Disabled Participant and Dependent without Medicare and Spouse with Medicare)	\$626.00 (Disabled Participant and Dependent without Medicare and Spouse with Medicare)
			\$596.00 (Disabled Participant and Spouse and Dependent with Medicare)	\$626.00 (Disabled Participant and Spouse and Dependent with Medicare)
			\$910.00 (Disabled Participant)	\$956.00 (Disabled Participant)

	Monthly Self-Payment/Dollar Bank			
Contract Type	Current Rate	June 2019 Rate	Current Rate	June 2019 Rate
	(no dental)	(no dental)	(with dental)	(with dental)
			\$947.00 (Disabled	\$995.00 (Disabled
			Participant with Spouse	Participant with Spouse
			or Dependent)	or Dependent)
			\$962.00 (Disabled	\$1,011.00 (Disabled
Disabled			Participant with Spouse	Participant with Spouse
Participant with or	400 = 00	4020.00	and Dependent(s))	and Dependent(s))
without Dependents	\$885.00	\$930.00	40 (40 (7) 11 1	44 044 00 (5) 11 1
(7 months and			\$962.00 (Disabled	\$1,011.00 (Disabled
after)			Participant and Spouse	Participant and Spouse
			without Medicare and	without Medicare and
			Dependent with	Dependent with
			Medicare)	Medicare)
			\$962.00 (Disabled	\$1,011.00 (Disabled
			Participant and	Participant and
			Dependent without	Dependent without
			Medicare and Spouse	Medicare and Spouse
			with Medicare)	with Medicare)
			With Medicare)	With Moderato)
			\$962.00 (Disabled	\$1,011.00 (Disabled
			Participant and Spouse	Participant and Spouse
			and Dependent with	and Dependent with
			Medicare)	Medicare)
			\$910.00 (Early Retiree	\$956.00 (Early Retiree
			only)	Only)
			\$0.47.00 (F. 1. P. ()	\$00 7 00 (F 1 D);
			\$947.00 (Early Retiree	\$995.00 (Early Retiree
			and Spouse or Dependent without Medicare)	and Spouse or Dependent without Medicare)
			without Wedicare)	without Medicare)
			\$951.00 (Early Retiree	\$999.00 (Early Retiree
			Without Medicare and	Without Medicare and
			Spouse with Medicare)	Spouse with Medicare)
Early Retiree with	\$885.00	\$930.00	Spouse with Medicare)	Spouse with Medicare)
or without	ΨΟΟΣΙΟ	ΨΑΟΝΙΟΟ	\$962.00 (Early Retiree +	\$1,011.00 (Early Retiree
Dependents			2 people without	+ 2 people without
F			Medicare)	Medicare)
			\$962.00 (Early Retiree	\$1,011.00 (Early Retiree
			and dependent(s) without	and dependent(s) without
			Medicare and Spouse	Medicare and Spouse
			with Medicare)	with Medicare)

If you have any questions, please contact the Fund Office at (800) 273-5739.
Sincerely, Board of Trustees of the Michigan Carpenters' Health Care Fund
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