

# CMTA-IAM JOINT RETIREE HEALTH AND WELFARE TRUST FUND

---

4160 DUBLIN BLVD., SUITE 400 | DUBLIN, CALIFORNIA 94568-7756

TELEPHONE (866) 889-7313 | FAX (925) 588-7121

[www.AITrustFunds.org](http://www.AITrustFunds.org)

November 1, 2018

**TO: ALL RETIRED PARTICIPANTS**

**FROM: BOARD OF TRUSTEES  
CMTA-IAM JOINT RETIREE HEALTH AND WELFARE FUND**

**RE: ADVANCE NOTICE OF RETIREE CONTRIBUTION RATES  
EFFECTIVE JANUARY 1, 2019**

---

Dear Retiree:

This is to inform you that the Board of Trustees adopted the enclosed Retiree Self-payment rates effective January 1, 2019.

This notice of the Retiree rate change is being sent to advise you of when the new rate will be applied based on your method of payment. Please refer to the following:

- ◆ **Pension Deductions:** the new rate will be deducted from your January 1, 2019 pension check from the Automotive Industries Pension Fund.
- ◆ **Self-payments:** the new rate will be reflected on your January 2019 self-payment coupon\*.
- ◆ **Automatic Payment (EFT):** the debit will occur around January 15, 2019.

\*If you are interested in making your monthly retiree self-payment by Automatic Payment (EFT) from your checking or savings account please contact the Trust Fund Office to request an Authorization Form.

If you have any questions, please call the Trust Fund Office at 1-866-889-7313.

(Rate Sheet Enclosed)

**CMTA-IAM JOINT RETIREE HEALTH AND WELFARE TRUST  
FINAL RETIREE NON-SUBSIDIZED CONTRIBUTION RATES  
EFFECTIVE JANUARY 1, 2019**

EXHIBIT

	KAISER CALIFORNIA			KAISER CALIFORNIA			KAISER HAWAII			KAISER OREGON		
	2018	2019	% Change	2018	2019	% Change	2018	2019	% Change	2018	2019	% Change
<b>Non-Medicare (HMO)</b>												
single	\$1,353	\$1,351	-0.1%							\$961	\$962	0.1%
two-party	2,705	2,702	-0.1%							1,921	1,924	0.2%
family	3,817	3,813	-0.1%							2,867	2,871	0.1%
<b>Non-Medicare (DHMO)</b>												
single	\$1,027	\$1,026	-0.1%									
two-party	2,054	2,052	-0.1%									
family	2,895	2,893	-0.1%									
<b>Medicare Risk</b>												
	\$10 Office Visit Plan			\$20 Office Visit Plan								
single	\$512	\$532	3.9%	\$388	\$422	8.8%	\$425	\$443	4.2%	\$326	\$337	3.4%
two-party	1,023	1,064	4.0%	776	844	8.8%	851	886	4.1%	652	674	3.4%
3-party, all medicare	1,520	1,579	3.9%	1,149	1,252	9.0%						
<b>Medicare Risk</b>												
	\$10 Office Visit, Hearing Aid & Dental Plan			\$20 Office Visit, Hearing Aid & Dental Plan								
single	\$534	\$554	3.7%	\$410	\$445	8.5%						
two-party	1,067	1,108	3.8%	820	890	8.5%						
3-party, all medicare	1,586	1,646	3.8%	1,216	1,320	8.6%						
<b>Medicare Risk Combination</b>												
	\$10 Office Visit Plan			\$20 Office Visit Plan								
1 w/ risk, 1 w/o (HMO)	\$1,864	\$1,883	1.0%	\$1,740	\$1,774	2.0%	N/A	N/A	N/A	\$1,287	\$1,299	0.9%
1 w/ risk, 1 w/o (DHMO)	1,538	1,558	1.3%	1,415	1,449	2.4%						
1 w/ medicare, 2 w/o (HMO)	2,976	2,993	0.6%	2,852	2,884	1.1%						
1 w/ medicare, 2 w/o (DHMO)	2,380	2,398	0.8%	2,256	2,289	1.5%						
1 w/ medicare, 3 w/o (HMO)	2,976	2,993	0.6%	2,852	2,884	1.1%						
1 w/ medicare, 3 w/o (DHMO)	2,380	2,398	0.8%	2,256	2,289	1.5%						
2 w/ medicare, family (HMO)	2,135	2,173	1.8%	1,888	1,955	3.5%						
2 w/ medicare, family (DHMO)	1,865	1,904	2.1%	1,617	1,685	4.2%						
Adults (1w, 1wo (HMO)), med child	2,361	2,399	1.6%	2,114	2,180	3.1%						
Adults (1w, 1wo (DHMO)), med child	2,035	2,074	1.9%	1,788	1,855	3.7%						
<b>Medicare Risk Combination</b>												
	\$10 Office Visit, Hearing Aid & Dental Plan			\$20 Office Visit, Hearing Aid & Dental Plan								
1 w/ risk, 1 w/o (HMO)	\$1,886	\$1,905	1.0%	\$1,763	\$1,797	1.9%						
1 w/ risk, 1 w/o (DHMO)	1,560	1,580	1.3%	1,437	1,472	2.4%						
1 w/ medicare, 2 w/o (HMO)	2,998	3,016	0.6%	2,875	2,907	1.1%						
1 w/ medicare, 2 w/o (DHMO)	2,402	2,421	0.8%	2,279	2,312	1.4%						
1 w/ medicare, 3 w/o (HMO)	2,998	3,016	0.6%	2,875	2,907	1.1%						
1 w/ medicare, 3 w/o (DHMO)	2,402	2,421	0.8%	2,279	2,312	1.4%						
2 w/ medicare, family (HMO)	2,179	2,218	1.8%	1,932	2,001	3.6%						
2 w/ medicare, family (DHMO)	1,909	1,948	2.0%	1,662	1,731	4.2%						
Adults (1w, 1wo (HMO)), med child	2,405	2,444	1.6%	2,158	2,226	3.2%						
Adults (1w, 1wo (DHMO)), med child	2,079	2,118	1.9%	1,832	1,901	3.8%						

**CMTA-IAM JOINT RETIREE HEALTH AND WELFARE TRUST  
FINAL RETIREE NON-SUBSIDIZED CONTRIBUTION RATES  
EFFECTIVE JANUARY 1, 2019**

EXHIBIT

	UNITEDHEALTHCARE						KAISER WASHINGTON **			HEALTH NET		
	2018	2019	% Change	2018	2019	% Change	2018	2019	% Change	2018	2019	% Change
	<b>HMO</b>			<b>PPO/SENIOR SUPPLEMENT</b>			<b>HMO</b>					
<b>Non-Medicare</b>	<b>Plan UBB</b>			<b>Non-Medicare</b>								
single	\$2,114	\$2,179	3.1%	*	*	N/A						
two-party	4,228	4,358	3.1%	*	*	N/A						
family	6,327	6,520	3.1%	*	*	N/A						
<b>Medicare</b>	<b>Medicare Risk - Plan O6G</b>			<b>Medicare Supplement - Standard Plan C</b>			<b>Medicare</b>			<b>Medicare</b>		
single	\$514	\$501	-2.5%	\$682	\$664	-2.6%	\$395	\$408	3.3%	\$452	\$471	4.2%
two-party	1,029	1,002	-2.6%	1,363	1,328	-2.6%	789	816	3.4%	904	942	4.2%
3-party, all medicare	1,528	1,489	-2.6%	2,030	1,976	-2.7%	1,169	1,207	3.3%	1,341	1,397	4.2%
<b>Medicare Combination</b>	<b>Non-Medicare HMO Plan UBB/Plan O6G</b>			<b>Non-Medicare PPO/Standard Plan C</b>								
1 w/ medicare, 1 w/o	\$2,628	\$2,680	2.0%	N/A	N/A	N/A						
1 w/ medicare, 2 w/o	4,728	4,843	2.4%	N/A	N/A	N/A						
2 w/ medicare, family	3,128	3,166	1.2%	N/A	N/A	N/A						
<b>MedicareRx Plans (Drug only)</b>	<b>\$10/\$20/\$35</b>			<b>\$5/\$20/\$40</b>								
single	\$370	\$362	-2.2%		*							
two-party	741	724	-2.3%									

\* No rate is provided due to no enrollment

\*\* Formerly Group Health Cooperative