

ALASKA TEAMSTER-EMPLOYER WELFARE TRUST

RETIREE MONTHLY SELF-PAYMENT RATES	
<i>Effective January 1, 2021</i>	
Medicare Retirees – Supplemental Medical (Plan F)	\$215.00
Medicare Retirees – Part D	\$166.70
Medicare Retiree Life Insurance	\$30.00

COBRA SELF-PAYMENT RATES	
<i>Effective March 1, 2020</i>	
Single Individual – (Employee; Spouse; or Child)	\$1045.00
Employee & Spouse	\$2032.00
Employee & Child(ren)	\$1725.00
Employee, Spouse & Children	\$2882.00

<p style="text-align: center;"><u>2021 Tiered HOURLY Rates</u></p> <p>\$1,204.00/month EE Only</p> <ul style="list-style-type: none"> • 2020 Rate - \$1,120.00 • 2019 Rate - \$1,042.00 <p>\$1,804.00/month EE Plus (M/S) or (M/D)</p> <ul style="list-style-type: none"> • 2020 Rate- \$1,678.00 • 2019 Rate - \$1,561.00 <p>\$2,406.00/month – Family</p> <ul style="list-style-type: none"> • 2020 Rate \$2,238.00 • 2019 Rate - \$2,082.00 	<p style="text-align: center;"><u>2021 COMPOSITE Rate</u></p> <p>\$1,951.00/month (automatic FAMILY coverage)</p> <ul style="list-style-type: none"> • 2020 Rate - \$1,815.00 • 2019 Rate - \$1,688.00 	<p style="text-align: center;">**For reference only**</p> <p style="text-align: center;"><u>2017/2018 COBRA Rates</u></p> <p>\$861.35 – Individual \$1,636.57 – EE/Children \$1,722.70 – EE/SPS \$2,497.92 – Family</p> <p style="text-align: center;"><u>2019 COBRA Rates</u></p> <p>\$935.00 – Individual \$1,741.00 – EE/Children \$1,566.00 – EE/SPS \$2,623.00 – Family</p>
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<ul style="list-style-type: none"> • 2021 Part D (Rx) LIS - \$31.90 ○ 2020 Part D (Rx) LIS - \$29.80 ○ 2019 Part D (Rx) LIS - \$31.60 ○ 2018 Part D (Rx) LIS - \$31.20 	<ul style="list-style-type: none"> • OE Period (2021) = 10/19/2020 – 11/21/2020 (Coverage 1/1/2021) • OE Period (2020) = 10/21/2019 – 11/22/2019 (Coverage 1/1/2020) • OE Period (2019) = 10/22/2018 - 11/24/2018 (Coverage 1/1/2019) • OE Period (2018) = 10/09/2017 – 11/17/2017 (Coverage 1/1/2018)
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