Enter School Address Here

Memorandum

TO: COBRA Participants – MASE Trust Group Health Plan

FROM:

DATE:

RE: 2016 Health Plan Premiums & Plan Election Opportunity

You are receiving this notification because you are currently enrolled for COBRA continuation coverage under the _____ (MASE Trust) Group Health Plan. This is the time of year when the Plan renewal is completed and all enrolled individuals are given an opportunity to make a new plan selection for January 1, 2016.

This also means that your monthly COBRA premiums *will increase* as of January 1, 2016. At this time, you can also select a new PPO plan (to be effective January 1, 2016) at your own discretion.

We are also taking this opportunity to let you know about a new website portal available to you as a MASE Trust COBRA member. The secure web portal will let you view important information related to your continuation coverage. Information you receive in the future from the Trust COBRA administrator, BenefitAdvantage, will provide you with information required to access the site. General access to the portal will be through the primary site at www.benefitadvantage.com.

Enclosed is the new pricing for January 1 and a side-by-side comparison of the options available. As a reminder, PPO 1 includes a separate annual out-of-pocket limit for in-network pharmacy benefits. This annual limit is separate from the medical out-of-pocket limit and the two do not comingle.

PPO 2 and PPO 3 are both IRS-qualified high deductible health plans that you can partner with your own individual health savings account (HSA.)

If you are not making a plan change for 2016, you DO NOT need to complete the Plan Election Form and your current coverage will remain unchanged. If you would like to enroll in a different plan choice for January 1, YOU MUST complete the 2016 Plan Election Form in its entirety and return it to me no later than_____.

You may fax this sheet back to me at _____or mail it in the enclosed self-addressed envelope. Please contact me if you have any questions regarding the information.

Thank you.

Your coverage is issued by a multiple employer welfare arrangement. The multiple employer welfare arrangement may not be subject to all of the insurance laws and regulations of Indiana. State insurance guaranty funds are not available for your multiple employer welfare arrangement.