



DISTRICT COUNCIL 16

Northern California Health and Welfare Trust Fund

P.O. Box 24454 Oakland CA, 94623
(510) 864-6444 or Toll Free (800) 922-9902
Billing and Eligibility Fax: (510) 337-3080

DATE: January 2016

TO: All Active Hourly Participants in the District Council 16 Health & Welfare Trust Fund

FROM: Board of Trustees

SUBJECT: Active Self-Pay Rates Effective January 2016

The Board of Trustees adopted the new Active Self-Pay Rates effective with January 2016 hours for March 2016 coverage. The new Active Self-Pay rate has increased from \$9.90 per hour to \$9.95 per hour.

The Self Payment must be in the form of a check and must be received by the 20th of the month prior to the month of coverage. The total amount needed for coverage is \$1,293.50 per month (which can be a combination of employer contributions, self-payments or draw-down from your cash bank).

It is your responsibility to know the balance of your cash bank and whether or not you have enough to cover your short fall in the number of hours worked in a given month.

You will not be sent a reminder notice if you did not work 130 hours in the prior month and your cash bank is insufficient to make up the short fall.

If you have any questions, please call (510) 864-6444, option 9.

Self-Payments should be mailed to:

DC 16 H&W Trust Fund
P.O. Box 4816
Hayward, CA 94540-4816

The following information must accompany the Self-Payment:

Member Name
Last 4 digits of member's social security number
Identify payment as "Payment for Active Coverage"

Receipt of this notice does not constitute a determination of your eligibility. If you wish to verify eligibility or if you have questions regarding Plan changes, please contact the Trust Fund Office.