



# PAMCAH UA LOCAL 675



ADMINISTRATIVE OFFICE • ANNUITY • COOPERATION  
HEALTH & WELFARE • PENSION • TRAINING • VACATION & HOLIDAY

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Date: November 2022

To: Retired Participants  
PAMCAH-UA Local 675 Health and Welfare Fund

From: Erinn L. Liu, Administrator

Re: ***Revision to Change in Contribution Rates for Retiree Health & Welfare Coverage, Effective January 1, 2023***

The amount that Medicare Retirees will need to pay for their Health & Welfare coverage will be decreasing because of the Board of Trustees recent decision to move our Medicare Retiree Plan from Hawaii Medical Service Association (HMSA) Akamai Plan to the Humana Group Medicare preferred provider organization (PPO) plan effective January 1, 2023. This move has helped to reduce plan expenses and those savings will be transferred to our members in reduced contribution rates. If you are already retired, ***your withholdings for coverage will be changed automatically***, unless you decide to terminate your coverage (by calling Wilma at 808-536-4408 by November 30, 2022).

***If You Retired on or After March 1, 2020***

Effective January 1, 2023, monthly contributions will be based on the following schedule for eligible Retirees who retired on or after March 1, 2020.

|                             |                         |                                 | <b><u>Per Person Monthly Contributions</u></b><br><b>(For Retiree or Spouse)</b> |                         |
|-----------------------------|-------------------------|---------------------------------|--|-------------------------|
| <b>Age at Retirement</b>    | <b>Years of Service</b> | <b>% Subsidy (Paid by Fund)</b> | <b>Non-Medicare Retiree</b>  | <b>Medicare Retiree</b> |
| <b>Bargained Employees:</b> |                         |                                 |  |                         |
| Unsubsidized                | --                      | 0%                              | \$876  | \$344                   |
| Less than 55                | 25-29                   | 20%                             | 701  | 275                     |
| Less than 55                | 30+                     | 40%                             | 526  | 206                     |
| At least 55                 | 25-29                   | 60%                             | 350  | 138                     |
| At least 55                 | 30-34                   | 75%                             | 219  | 86                      |
| At least 55                 | 35-39                   | 90%                             | 88   | 34                      |
| At least 55                 | 40+                     | 100%                            | 0  | 0                       |
| Disabled                    |                         | 50%                             | 438  | 172                     |

|                                 |                         |                                 | <b>Per Person Monthly Contributions<br/>(For Retiree or Spouse)</b> |                         |
|---------------------------------|-------------------------|---------------------------------|---|-------------------------|
| <b>Age at Retirement</b>        | <b>Years of Service</b> | <b>% Subsidy (Paid by Fund)</b> | <b>Non-Medicare Retiree</b>   | <b>Medicare Retiree</b> |
| <b>Non-Bargained Employees:</b> |                         |                                 |   |                         |
| Unsubsidized                    | --                      | 0%                              | \$876   | \$344                   |
| Less than 55                    | 20+                     | 40%                             | 526   | 206                     |
| At least 55                     | 15-19                   | 40%                             | 526   | 206                     |
| At least 55                     | 20-24                   | 60%                             | 350   | 138                     |
| At least 55                     | 25-29                   | 75%                             | 219   | 86                      |
| At least 55                     | 30-34                   | 90%                             | 88  | 34                      |
| At least 55                     | 35+                     | 100%                            | 0   | 0                       |
| Disabled                        |                         | 50%                             | 438   | 172                     |

**If You Retired from October 1, 2007 to February 29, 2020**

Effective January 1, 2023, monthly contributions will be based on the following schedule for eligible Retirees who retired from October 1, 2007 to February 29, 2020.

|                                 |                         |                                 | <b>Per Person Monthly Contributions<br/>(For Retiree or Spouse)</b> |                         |
|---------------------------------|-------------------------|---------------------------------|---|-------------------------|
| <b>Age at Retirement</b>        | <b>Years of Service</b> | <b>% Subsidy (Paid by Fund)</b> | <b>Non-Medicare Retiree</b>   | <b>Medicare Retiree</b> |
| <b>Bargained Employees:</b>     |                         |                                 |   |                         |
| Unsubsidized                    | --                      | 0%                              | \$876   | \$344                   |
| Less than 55                    | 25-29                   | 40%                             | 526   | 206                     |
| Less than 55                    | 30+                     | 60%                             | 350   | 138                     |
| At least 55                     | 25-29                   | 60%                             | 350   | 138                     |
| At least 55                     | 30-34                   | 75%                             | 219   | 86                      |
| At least 55                     | 35-39                   | 90%                             | 88  | 34                      |
| At least 55                     | 40+                     | 100%                            | 0   | 0                       |
| Disabled                        |                         | 50%                             | 438   | 172                     |
| <b>Non-Bargained Employees:</b> |                         |                                 |   |                         |
| Unsubsidized                    | --                      | 0%                              | \$876   | \$344                   |
| Less than 55                    | 20+                     | 40%                             | 526   | 206                     |
| At least 55                     | 15-19                   | 40%                             | 526   | 206                     |
| At least 55                     | 20-24                   | 60%                             | 350   | 138                     |
| At least 55                     | 25-29                   | 75%                             | 219   | 86                      |
| At least 55                     | 30-34                   | 90%                             | 88  | 34                      |
| At least 55                     | 35+                     | 100%                            | 0   | 0                       |
| Disabled                        |                         | 50%                             | 438   | 172                     |

**Examples:** If you are a married bargaining employee retiring on January 1, 2023 at age 55 with 30 years of service, and both you and your spouse are not eligible for Medicare, your monthly cost for coverage would be \$438 (\$219 for you and \$219 for your spouse). If instead, only you are eligible for Medicare and not your spouse, your monthly cost for coverage would be \$305 (\$86 for you and \$219 for your spouse). There will be no additional cost for your dependent children.

***If You Retired Prior to October 1, 2007***

For eligible Retirees who retired prior to October 1, 2007, monthly contribution will remain unchanged at \$225 for Retirees that are single, and \$350 if you are married.

Keep this notice with your Health & Welfare Booklet. If you have any questions regarding this announcement, please contact the Fund Office.