

Laborers' National Health & Welfare Fund

5565 Sterrett Place, Suite 210
Columbia, MD 21044
(800)-235-5805

November 22, 2006

**TO: All Eligible Participants and Dependents of the
Laborers' National Health and Welfare Fund**

Re: Revised COBRA Rates

The Board of Trustees of the Laborers' National Health & Welfare Fund has revised the rates for COBRA coverage effective January 1, 2007 as follows:

<u>PLAN I</u>	<u>Core Only</u>	<u>Core and Non-Core</u>
Single:	\$ 172.78	\$ 186.94
Family:	\$ 466.50	\$ 504.73

<u>PLAN II</u>	<u>Core Only</u>	<u>Core and Non-Core</u>
Single:	\$ 205.31	\$ 234.38
Family:	\$ 554.33	\$ 632.82

If you are currently paying COBRA premiums, please adjust your payments accordingly. If you have paid in advance, the balance for the month is due no later than the end of the month for the appropriate month of coverage.

Sincerely,

Trustees of the Laborers' National Health & Welfare Fund