



November 24, 2008

Announcing 2009 Premium Changes

Dear Member:

Our records indicate you are enrolled under the **SAMBA Dental and Vision Care Plan** and you have a child(ren) enrolled in the **SAMBA Dependent Children Health Benefit Plan (DHBP)**. This notice is to inform you of changes in the premiums for these two Plans effective January 4, 2009. (See charts below.)

Dental and Vision Care Plan Biweekly Rates		
Type of Enrollment	2009 Premium	Premium Change
Self Only	\$17.08	(\$3.92)
Self + One	\$34.16	\$5.16
Self + Family	\$46.16	\$11.16

Dependent Children Health Benefit Plan Biweekly Rates		
Type of Enrollment	2009 Premium	Premium Change
One Child	\$99.00	\$14.00
Each Additional Child	\$99.00	\$59.00

This notice updates the premiums listed in the DHBP Summary Plan Description previously issued.

Enclosed you will find a personalized SAMBA Payroll Allotment Form 299. This form lists your current coverage(s) and also includes the premium changes notated above. **Please sign and date this form and return it to SAMBA by December 12, 2008.** Return your signed Allotment form in the enclosed pre-addressed envelope or send it to fax number 301-816-0191. Should you want to change or cancel coverage, please note your request in "Section 6" of the enclosed form and return it to SAMBA as indicated above.

Additional Announcements:

- Eligibility to enroll in SAMBA plans has been extended to all federal employees and annuitants.
- The SAMBA Terrorism Insurance Policy that has been provided "free of charge" to SAMBA members enrolled in the SAMBA Health Benefit Plan, Group Term Life Insurance, and Disability Income Protection Plan, will be discontinued as of January 1, 2009.
- Our online web services continue to expand. Visit www.SambaPlans.com where you can download Dental and Vision Care Plan and Dependent Children Health Benefit Plan
(over, please)

brochures (Summary Plan Descriptions), claim forms for dental, vision, or health, find plan participating providers, check your claim history, and much more.

If you have any questions, please contact us at 1-800-638-6589 or email us at Insurance@SambaPlans.com.

Sincerely,

A handwritten signature in black ink that reads "Walter E. Wilson". The signature is written in a cursive style with a large, stylized 'W' and 'L'.

Walter E. Wilson
Executive Director

Enclosures