

## TOLEDO ELECTRICAL WELFARE FUND

### ELIGIBILITY AND SELF PAY –FAQ

1. Q: Where can I see detailed information on how self-pays work?  
A: Go to: [www.electricalfunds.org](http://www.electricalfunds.org), click on “Forms and Notices”, and then click on Eligibility / Self Payments. On right-hand side, click on “Eligibility and Self Payment Guide”.
2. Q: Why do I need to self-pay?  
A: Eligibility is based on hours. Your hours have fallen below the level needed to maintain eligibility in the HealthPlan. Please refer to your self-pay letter that tells you what month and the amount needed to maintain eligibility.
3. Q: Can I use the money in my Supplemental Fringe Benefit Fund/VEBA to make a self-payment?  
A: Yes. Fill out the form authorizing the Fund Office to take money from your Supplemental Fund to do so.
4. Q: There are two amounts on the Self-pay letter. Why is that?  
A: One amount indicates how much is required as a “full self-payment” to maintain eligibility in the Health Plan. The other amount takes into consideration the self-pay waiver. The Fund Office checks with the referral Hall to determine if you are “on the book” and available for work. If so, you qualify for the self-pay waiver. NOTE: If you are fired, terminated, or roll-the-book, you do not qualify for the waiver.
5. Q: How much is the self-pay waiver?  
A: The current monthly self-payment is \$1,450. The waiver is \$1,116.50 per month, which means the maximum needed to pay is \$333.50per month.
6. Q: My self-pay on the letter is less than \$333.50. Why?  
A: You get credit for any hours worked that determine eligibility. Please see Q & A #1 for more details on this credit.
7. Q: My wife has insurance. Can I go on her policy?  
A: Yes. If you do, you will not have to pay any self-payments. You will also still qualify for dental, vision, life and disability coverage. See

“Waiver of Self-Pay” section under the Health tab under Forms and Notices for more detail.

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8. Q: How long do I have to make self-payments?  
A: Due date is on your self-payment letter. Failure to make a timely payment will cause your coverage to lapse.
9. Q: I am not sick. Why should I self-pay?  
A: Health insurance is protection against the unknown.
10. Q: If my health insurance lapses, can I make retroactive payments?  
A: No. You will need to reestablish eligibility in the plan through hours worked (see Q&A #12).
11. Q: Can I just pay for the month that I get sick in?  
A: No. Coverage must be continuous.
12. Q: If I let my coverage lapse, what happens?  
A: A few things happen: -You will not be covered if you (or family member) get sick. -You will break continuous coverage. Early Retiree (before age 65) and Retirees (after age 65) health benefits depend on years of continuous service. Letting your coverage lapse may affect your retiree health coverage in the future.
13. Q: If I let my coverage lapse, can I become eligible in the Health Plan again?  
A: Yes. Once coverage lapses, you must work at least 300 hours from the time coverage is lost. Coverage begins first of the month following 300 hours worked. These hours must be within three (3) consecutive months. If twelve (12) months pass without reestablishing eligibility, the requirement changes to 420 hours within three (3) consecutive months.
14. Q: I am working in another jurisdiction. Don't those hours count?  
A: Yes, however, be sure you sign up for ERTS and elect to have your health and welfare contributions sent to your home plan. Reciprocity hours take 8-12 weeks to reach us.

15. Q: I am working in another jurisdiction and I still received a self-pay letter. Why?

A: It can take anywhere from 8 to 12 weeks for another Local to send your health and welfare contributions to your home plan. If you make a self-payment and then hours come in from another Local that makes you eligible for the same period, we will refund you the self-payment you made.

16. Q: I also received a COBRA notice. Why?

A: For your first self-payment notice only, we also include a COBRA notice. Federal Law requires you to receive a notice that allows you to pay for health insurance for up to 18 months if you lose coverage. Our Plan is unique that it allows self-payments in lieu of COBRA.

17. Q: I don't think the information is correct. What do I do?

A: Contact the Fund Office at 419-666-4450. You can also e-mail the Fund Office at: [eligibility@electricalfunds.org](mailto:eligibility@electricalfunds.org)