Toledo Electrical Welfare Fund

Opt-Out of Participation

Active Member

I hereby opt-out and waive medical, dental, vision and prescription drug coverages under the Toledo Electrical Welfare Fund for myself and any of my covered dependents.

Affirmation of Alternate Coverage

I affirm that myself and all of my covered dependents have group medical coverage under another employer's plan. This alternate coverage is provided though:

Plan Name: _____

Employer: _____

Cardholder Name: _____

Plan Carrier / Administrator: _____

Effective Date: _____

I understand that this election is permitted for a maximum period of 20 months, and will terminate upon the earliest of the following events: (1) my regaining eligibility through reported work hours, (2) my "rolling" of the out-of-work book, or (3) my involuntary loss of this Alternate Coverage, and then only if I elect to opt back in to this coverage within 31 days of the date of the loss of coverage. Please refer to the Fund's Summary Plan Description booklet for additional information.

Signed:

Date:

TOLEDO ELECTRICAL WELFARE FUND
Waiver of Self-Pay Participation for Active Members
Frequency Asked Questions

When a member loses eligibility in the Health Plan and is eligible to make a self-pay to continue health coverage, other health insurance maybe available, such as through a spouse's employer.

The waiver of self-pay participation allows a member to accrue continuous service in the Plan, and not make a self-pay, by going into an alternate insurance.

FAQ

Q – What happens if my spouse loses his/her health insurance?
A – You will be able to rejoin the Toledo Electrical Welfare Fund under the self-pay rules.

Q – Why do the Trustees allow this program?
A – To save the member a self-pay, should coverage be available elsewhere.

Q – Will the Fund pick up out of pocket expenses from the other coverage?
A – No. However, any out of pocket expenses are eligible expenses from the Supplemental Fringe Benefit Fund/VEBA.

Q – If I lose my alternate coverage and come back into the TEWF, do I start from the beginning of the self-pay period?
A – Once coverage is lost due to a reduction in work hours, all extensions of coverage will run simultaneously. For example, if you opt-out to save on self-pays for six (6) months, and then lose the other coverage, you will have 14 of the 20 months allowed for self-pays left.