

Cement Masons & Plasterers Trust Funds

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Administered by
Welfare & Pension Administration Service, Inc.

ELIGIBILITY REQUIREMENTS FOR PARTICIPATION IN THE RETIREE HEALTH & WELFARE PLAN

The following is a list of the requirements necessary to participate in the Retiree Health Plan. **At the time of your retirement, the Administration Office will advise you if you meet the qualifications stated below.**

Participants with a retirement effective date on or after October 1, 2019 must satisfy the following requirements to be eligible for Retiree Coverage.

- The Retiree must be at least 55 years of age, or under age 55 and disabled. For purposes of eligibility for Retiree Coverage, a Retiree is considered disabled if the Retiree is entitled to Medicare due to disability; and
- The Retiree must qualify for retirement from the Cement Masons and Plasterers Retirement Plan or the Washington-Idaho Cement Masons-Employers Retirement Plan, and no longer qualify as an Active Participant in this Plan. If the Retiree was promoted to a position within the International Union, the Retiree must terminate all employment with the International Union; and
- The Retiree must have coverage in either this Plan or another group health plan in the month immediately preceding the month Retiree Coverage begins; and
- The Retiree must satisfy at least two of the three following criteria:
 1. During the 60-month period immediately preceding the Retiree's retirement effective date (or during the 60 month period immediately preceding the promotion date to the International Union staff) the Retiree accumulated 3,750 hours in work for which contributions are required to this Plan; or
 2. During the 60-month period immediately preceding the Retiree's retirement effective date (or during the 60 month period immediately preceding the promotion date to the International Union staff) the Retiree had at least 48 months of Plan eligibility; or
 3. Immediately preceding the Retiree's retirement effective date (or during the 60 month period immediately preceding the promotion date to the International Union staff) the Retiree had at least 10,000 hours reported to the Plan.

If the Retiree worked under an Alaska collective bargaining agreement or under a Local 72 or 478 collective bargaining agreement, hours for which contributions were required to the Washington Idaho Cement Masons-Employers Retirement Plan or the Alaska Trowel Trades Pension Trust may be used to help satisfy the above-requirements. Associate participation will be calculated based on hours reported each month. For disabled Retirees only, 1 and 2 above will be counted from the earlier of the retirement effective date or the date Social Security determines the Retiree was disabled

Enrollment

Retiree Coverage is not automatic. Eligible Retirees must apply for coverage by the later of:

- The 10th day of the month following the Retiree's retirement effective date under the Cement Masons and Plasterers Retirement Plan or the Washington-Idaho Cement Masons-Employers Retirement Plan;
or
- The first of the month after Active coverage or COBRA coverage runs out.

If, before the application period ends, the Retiree notifies the Administration Office in writing that Retiree Medical Coverage is being declined because of other group health insurance coverage, the Retiree and Dependents may enroll within 30 calendar days after the other group coverage ends.

Dollar Bank Run Out

- You may have a remaining dollar bank balance in your Dollar Bank when you initially retire. If that balance is less than the cost of one month of coverage (the deduction rate), you will be notified of your right to make a partial self-payment. A partial self-payment will allow you to use the remaining balance in your Dollar Bank to extend your Active coverage for one additional month.

COBRA

- Following your partial self-payment as described above, you will receive a letter from the Administration Office notifying you of your right to continue your Active coverage by making COBRA payments.
- You can make COBRA payments for up to 18 months; however, if you meet the eligibility requirements for the Retiree Health Plan, you may transfer your coverage directly to the Retiree Health Plan without electing COBRA.
- You should compare the COBRA contribution rates and benefits to the Retiree Health Plan rates and benefits to determine which course of action is best in your situation.

Retiree Health Plan

- The Trust offers two enrollment levels in the Retiree Health Plan.
 1. You may enroll for full benefits, which include Medical, Prescription Drug, Dental, Vision & Life coverage, or
 2. You may enroll for Medical and Prescription Drug & Life coverage only (excludes Dental and Vision coverage).
- If you are Medicare eligible you may choose to enroll in the Medicare Part D Prescription plan through a Medicare Part D vendor not associated with this Trust Fund. If you enroll in a Medicare Part D Prescription Drug plan, you will permanently forfeit the prescription drug benefits afforded through the Trust, and your contribution rate for your Trust provided coverage will be reduced.

Deferral of Retiree Health Plan Coverage

- If you have other insurance coverage, such as through a spouse employer plan, you may defer your participation in this Trust's Retiree Health plan and re-enroll later.
- In order to be eligible to re-enroll later, you cannot have a break in coverage between termination of the other plan and reinstatement in this Plan.
- Within 31 days of the termination of the other group insurance plan, you must submit proof from that plan verifying that you have maintained continuous coverage with them between the date that you deferred coverage on the Cement Manson and Plasterers Health and Welfare Trust Fund and the date you re-enroll with the Trust Fund.

Medicare Requirements

- If you or your spouse becomes entitled to Medicare while participating in this Trust, or are entitled to Medicare when you retire, you must provide a copy of your Medicare card to the Administration Office immediately.
- When you enroll in Medicare, you must enroll in both parts A and B of Medicare.
- Claims payments will be adjusted as though you enrolled in both parts A and B, even if you fail to enroll.

This is a brief summary of the rules describing the eligibility requirements to participate in the Retiree Health and Welfare Plan. Please refer to your Plan booklet for more details. If you have any questions concerning the benefits described above, contact the Administration Office at the address and phone number listed above.