

# Puget Sound Electrical Workers Healthcare Trust

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Administered by  
Welfare & Pension Administration Service, Inc.

June 11, 2019

**TO: All Plan Participants**  
**Puget Sound Electrical Workers Healthcare Trust**

**RE: Plan Benefit Changes**

*This is a summary of material modification describing benefit changes adopted by the Board of Trustees.*

*Please be sure that you and your family read it carefully and keep this document with your Summary Plan Description Booklet.*

**The Board of Trustees of the Puget Sound Electrical Workers Healthcare Trust has adopted the following Plan provisions regarding Delayed Enrollment for Retiree Coverage.**

## **Delayed Enrollment for Retiree Coverage**

If you are eligible for retiree coverage through the Puget Sound Electrical Workers Healthcare Trust's Retiree Medical Plan, you may request an enrollment application from the Administration Office. After you receive a notice of eligibility and application, you have 30 days in which to elect to be enrolled. Thereafter, enrollment is closed. The Administration Office will, upon receipt of your completed application, advise you of the effective date of coverage.

If you are eligible based on NEBF or IBEW Pacific Coast retirement payments only, you must request an application from the Trust within 30 days of the effective date of retirement. After you receive the application, you have 30 days in which to elect to be covered.

You and/or your spouse may choose to delay your enrollment in the Retiree Medical Plan because you are currently covered by another group health plan or because you have coverage through a state exchange individual plan that provides minimum essential coverage. If you wish to delay enrollment, you must provide the Trust with proof of your other coverage at the time you opt out.

If you opt-out, you may be able to enroll at a later date provided the following conditions are satisfied:

- You have not had a lapse in coverage;
- You lost the other coverage due to loss of eligibility for a reason other than failure to pay premiums (for example, exhaustion of COBRA, termination of spousal coverage, or eligibility for Medicare);
- If your other coverage was an individual plan through the state exchange, you are seeking enrollment in the Retiree Medical Plan during the state exchange normal annual open enrollment period; and
- You have requested enrollment in the Retiree Medical Plan within 30 days of the loss of other coverage.

Please keep this summary of material modification with your Plan booklet for future reference. If you have any questions regarding your benefits, please contact the Administration Office at (866) 314-4239, option 1.

**Board of Trustees**  
**Puget Sound Electrical Workers Healthcare Trust**