

before or after your retirement (see the section entitled "*Loss of Retiree Coverage Eligibility*").

- ◆ The date your spouse is no longer married to you.
- ◆ Three years from your retirement date if you're eligible for Medicare when you retire (and all other eligibility requirements have been met).

IMPORTANT: It is your responsibility to notify the Fund immediately when you or your spouse becomes eligible for Medicare.

Loss of Retiree Coverage Eligibility Voluntary Withdrawals

You and your spouse could lose eligibility for Retiree Benefit Plan coverage if there is a voluntary withdrawal by your employer from the Fund.

If your last health and welfare contribution from active employment is from an employer that voluntarily withdraws from the Health Fund, you will lose all credit from that employer towards eligibility for the Retiree Benefit Plan. Your eligibility for the Retiree Benefit Plan will be determined without regard to any contributions from the withdrawing Employer.

A voluntary withdrawal will occur whenever an Employer is no longer required to contribute to and withdraws from the Fund because of acts or omissions in which its employed bargaining unit Participants participate, including:

- ◆ Decertification or removal of the Union as bargaining agent.
- ◆ Ratification or other acceptance of a Collective Bargaining Agreement that permits a complete or partial withdrawal of the bargaining unit from the Fund.
- ◆ Failure by any Employer to submit a Collective Bargaining Agreement for renewal of participation which, in form and substance, complies with participation standards of the Fund and the termination (as a result of that failure) of the Employer as an Employer participating in the Fund.

IMPORTANT: If, on the voluntary withdrawal date, you were already eligible or receiving Retiree Health Plan coverage, you will be given the option to continue coverage at the prevailing full cost for benefits. Your previous monthly contribution rate will no longer be valid.

Forced or Involuntary Transfers

If you fail to meet the eligibility requirements for the Retiree Benefit Plan only because your employment was transferred into or out of the Fund's geographical area, or there was a change in or dispute over your union's jurisdiction, or a similar situation beyond your control, the Fund may be able to waive the requirements for you. If you think one of these situations applies to you, you should contact your Local Union and write a detailed description to:

Central States Health and Welfare Fund
Research and Correspondence Dept.
P.O. Box 5111
Des Plaines, IL 60017-5111

