

Highlights of TeamstersCare Eligibility



TeamstersCare Membership

You become eligible for TeamstersCare benefits in one of two ways:

- you begin working for an employer who is already participating with Teamsters Local 25 (or some other participating Local or organization) and who is contributing to Teamsters Union 25 Health Services & Insurance Plan (TeamstersCare)—in this case, you become an active participant as soon as you fulfill the eligibility requirements

or

- you are already working for an employer who begins participating with Teamsters Local 25 (or some other participating Local or organization) and begins contributing to TeamstersCare—in this case, you become an active participant when your employer contributes to TeamstersCare an amount equal to the remittance rate times the required number of hours *and* you fulfill the eligibility requirements.

Eligibility Requirements: How You First Become Eligible

To become eligible for benefits once you're covered by a contract requiring contributions on your behalf, you have to work a total of 400 or more hours over a period of any three consecutive months. When you reach 400 hours during that three-month period, you become eligible to enroll in the Plan. After you enroll, coverage for you and your eligible dependents begins on the first day of the next month following the accumulation of the 400 hours.

Eligibility Requirements: How You Continue to Remain Eligible

After you've become eligible for the first time (regardless of what month your eligibility starts), you remain eligible through the next January 31, or April 30, or July 31, or October 31—whichever date comes first. These dates are called ***eligibility review dates*** and they are used to determine your continuing eligibility.

Note: under a special Plan provision, the first time you become eligible, you're entitled to no less than three months coverage. Thus, if the period between the day you first become eligible to enroll and the following ***eligibility review date*** is less than three months, your eligibility automatically extends to the next following ***eligibility review date***.

On each ***eligibility review date***, we look at the number of hours you've worked during a fixed three-month period. So long as you worked 400 or more hours during that fixed three-month ***eligibility determination period***, you continue to be eligible, from the review date on, for the next three months going forward. If you do not have 400 or more hours, you may continue eligibility if *your employer has made contributions of 1800 or more hours in the previous 12 months, and you have worked at least one hour in the current eligibility determination period, and we have proof that you continue to work for a contributing TeamstersCare employer.* Here's how the eligibility cycle works:

Your eligibility is reviewed on:	If you worked at least 400 hours during the preceding:	Or, if you worked 1800 hours during the preceding 12 months*:	You continue to be eligible for the next:
January 31	Oct., Nov. & Dec.	Jan. 1 thru Dec. 31	Feb., March, & April
April 30	Jan., Feb. & March	April 1 thru March 31	May, June, & July
July 31	April, May & June	July 1 thru June 30	August, Sept., & Oct.
October 31	July, Aug. & Sept.	Oct. 1 thru Sept. 30	Nov., Dec., & Jan.

*You must provide proof of continued employment in either the month before the eligibility coverage period or the first month of the new eligibility coverage period to be eligible for the 1800 hour look-back rule.

Important Note: If you're a UPS part-timer and you work at least 225 hours (but less than 400) in a fixed three-month period, you're eligible for all TeamstersCare benefits except weekly disability, life, dependent life, and AD&D. If you work 400 or more hours, you're eligible for all benefits, just as though you were a full-time employee.

☞ See reverse side of this sheet for other Eligibility Highlights.

If You Fall Short of 400 Hours in a Fixed Three-Month Period, or You Do Not Have 1800 hours in the 12 month Look-Back:

We look to see if you worked more than the required 400 hours in each of three consecutive calendar quarters, but then fell short of 400 hours in the most recent quarter. If this happens, you're eligible to continue coverage by "buying-up" for the number of hours you need to remain eligible.

To be eligible for the buy-up, the following conditions must apply:

- you must have worked at least 400 hours in each of the three consecutive quarters immediately preceding the quarter in which you have the shortfall;
- you must work at least one hour in the quarter you're buying up;
- you must provide proof of continued employment in either the month before the eligibility coverage period or the first month of the new eligibility coverage period;
- the buy-up rate is your employer's contracted hourly remittance rate that is in place during the quarter you have the shortfall;
- the amount you pay is your buy-up rate times the number of hours you fall short of the required 400 hours;
- there's a \$1,000 maximum on the amount you're required to pay in order to buy-up in any given quarter—once you reach this \$1,000 cap, you do not have to pay any additional amount for that quarter; and
- you pay for your hours, by check or money order, directly to TeamstersCare.

Once you buy-up for a particular quarter, you cannot count that same quarter as the first in a new series of consecutive three-month periods. In other words, once you buy-up for one quarter, you must then work—and have remittances paid on your behalf by your employer—for three consecutive quarters before you again have the opportunity to buy-up.

If you are not eligible under the 400 hour rule, the 1800 hour look-back or the buy-up option, you may have the option to continue coverage under COBRA.

How to Reinstate Lost Eligibility:

If for some reason you do not meet the eligibility requirements and you are not eligible to buy-up (or you decline), then you lose TeamstersCare coverage. In order to reinstate your eligibility, you must work at least 400 hours in a rolling three-month *reinstatement period* that occurs either before or within 12 months after you've lost coverage. Once you're ineligible for more than 12 months, you have to reinstate just as though you were a new member. (See *How You First Become Eligible* on the reverse side of this sheet.)

When reinstating, you can work your 400 hours before or after the date on which your eligibility ends. The number of months you lose coverage, and the number of months of eligibility you earn when you reinstate, both depend on the relationship between the date you lose eligibility and the three-month rolling *reinstatement period* when you work your 400-hours. Once you become ineligible, you must always lose at least one month of coverage before you can regain eligibility.

How to Reinstate Lost Eligibility:

If you lose your eligibility on April 30th, regardless of how or when you reinstate, you must lose coverage for at least the month of May. The earliest three-month period you can use to reinstate is February/March/April. So, on April 30th, you look back at those three months; if you reached 400 hours during that period, you lose coverage for May, but reinstate as of June 1st.

However, if you *don't* make your 400 hours in February/March/April, you then "roll" forward to the next three-month period, March/April/May. On May 31st, you look back on that period to see if you've worked 400 or more hours. If yes, your eligibility reinstates on June 1st; if no, then you "roll" forward to the next three-month period, April/May/June...and so on, from one three-month period to the next, until you work 400 or more hours in any three-consecutive month period.

***For more detailed information on eligibility or reinstatement,
call Charlestown Member Services at
617-241-9220 (local), 800-442-9939 (in MA), or 800-225-6135 (outside MA).***

