

## Retiree Eligibility Criteria, Hanford Employee Welfare Trust (HEWT) Medical, Effective 10/01/2009

*Retirees over age 65 have the same criteria as listed below with the exception that when the retiree reaches age 65, only the spouse and verified disabled children remain eligible dependents for medical coverage.*

### Points of Contact

Help Line 1-509-376-6962

Email Benefits-HEWT@rl.gov

**Dependents:** Your eligible dependents include your *legal spouse*, as recognized by Washington State law and your *unmarried children*, under age 23/25, (see Age-Specific Criteria below), that you provide over 50 percent of their support and maintenance, provided they are not in the active military service, employed full-time, or eligible for any other group health benefits through their employer. Eligible *children* are: natural children; legally adopted children; stepchildren who reside in your home; and other children where the retiree or spouse has legal guardianship, custody, or conservatorship evidenced by a court order.

**Age-Specific Criteria:** HEWT health coverage that is in effect for dependent children may be continued beyond age 23/25 only as noted below:

**Group Health Options Medical:** Eligible dependent children of retirees may participate to age 25 and may continue to participate beyond age 25 if verified as disabled prior to age 25.

**UnitedHealthcare Medical:** Eligible dependent children of retirees may participate to age 23 and may continue to participate beyond age 23 if verified as disabled prior to age 23 or if they meet the full-time student criteria.

**It is the sole responsibility of the retiree** to verify current dependent eligibility annually at Open Enrollment. Any change in eligibility status must be reported immediately and periodic verification may be required. Failure to provide verification will result in immediate termination of child's coverage retroactive to latest date verified; the retiree may be held responsible for any paid services for the ineligible dependent; and there may not be a refund of premiums.

### Definitions:

- A full-time student is a person who is enrolled in and attending full-time in a recognized course of study or training at one of the following: an accredited high school, college or university; a licensed vocational school, technical school, or similar training school. Full-time student status is determined in accordance with the standards set forth by the educational institution and ceases upon graduation or if child is no longer enrolled and attending on a full-time basis; full-time status continues during periods of regular vacation while continuously attending college.
- A disabled child is not able to be self supporting due to disability and is principally dependent on the retiree for support. Proof of the child's condition and dependence is submitted prior to the date coverage would otherwise have ended and the HEWT may require that the child be examined by a physician chosen by the HEWT at their cost. You may be required to continue to provide proof that the child meets the conditions of incapacity and dependency. If proof is not provided within 30 days of request, coverage for the child may end.

**Other Eligibility Rules:** No person can be covered more than once in a HEWT medical plan. For example, an individual cannot enroll as an employee, retiree, or COBRA participant, and also be covered as a dependent of another employee, retiree, or COBRA participant. No person can be covered as a dependent child of more than one HEWT participant.

**Disqualification for Benefits:** Your eligibility to participate in the applicable Plans will end in accordance with the terms of the applicable *Summary Plan Description*; when the Plan is discontinued or terminated; when you fail to make any required contribution; for an enrolled dependent, when he or she no longer meets the requirements to remain an eligible dependent; or as a result of material misrepresentation, fraud, or omission of information in order to obtain coverage for a participant or others.

Continued health coverage may be available under provisions of the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA) to employees, dependents and former spouses who lose group coverage for reasons including termination or death of the employee, loss of eligibility by a dependent child, or divorce. In the case of divorce or loss of dependent eligibility, COBRA may continue up to 36 months as long as he/she remains eligible and pays the required premium. However, to be eligible for COBRA coverage the employee or qualified beneficiary that is losing coverage must notify the HEWT Plan Administrator within 60 days of the divorce, or dependent's loss of eligibility as an enrolled dependent.

*The above reflects rules for eligibility for HEWT health plans that are currently in effect. Eligibility rules comply with the provisions of the Health Insurance Portability and Accountability Act. Plan coverage provisions, contribution rates and eligibility requirements are subject to change. These eligibility provisions may be different from the certificate of coverage. In those cases, the above rules apply.*