



October 2020

**MEMORANDUM**

**To: CONTRIBUTING EMPLOYERS**

**From: Pauline Hann  
Benefits Manager**

**Re: Flat Rate Health and Welfare Plan**

The Carpenters Health and Welfare Trust Fund offers a special "Flat Rate" Plan to signatory Employers who wish to provide Health and Welfare coverage to non-contractual employees at group rates.

The Plan is opened one time each year to allow Employers the opportunity to enroll their non-contractual employees; this year the Open Enrollment period is November 1, 2020 to November 30, 2020, with an effective date of January 1, 2021. A contributing employer may elect to participate in the Flat Rate Plan outside the normal open enrollment period by submitting a Flat Rate Plan Subscriber Agreement and proof of prior continuous Health & Welfare coverage for all newly enrolled non-bargaining unit employees.

Effective January 1, 2021, the Plan, which also covers eligible dependents, offers participants a choice of two medical providers: Kaiser or the Indemnity Plan. Dental, Prescription Drug, and Vision Benefits are also provided.

Effective January 1, 2021, the Flat Rate Plan monthly fee is \$1,534.35 per eligible employee. January 2021 contributions are due in December 2020, on the reporting form for November 2020 work hours.

Please refer all questions regarding the Flat Rate Plan to:

- [benefitservices@carpenterfunds.com](mailto:benefitservices@carpenterfunds.com)
- Jessica Pedroza, Benefits, Lead Supervisor (510) 639-3945
- Lisa Richardson, Benefits Supervisor (510) 639-3950
- Pauline Hann, Director of Benefit Services (510) 639-4301

## **FLAT RATE QUESTIONS & ANSWERS**

**Q) *Which employers can participate in the Flat Rate Health and Welfare Program?***

Only employers that are currently signatory to the Carpenters 46 Counties Master Agreement, or a Subscribers Agreement with the Carpenters Health and Welfare Trust Fund for California can participate, if they have reported at least one bargaining unit employee for at least 135 hours within the past six months with the exception of newly signatory employers which would need to report such within the first six months.

**Q) *Which employees can be enrolled for participation in the Health and Welfare plan?***

All clerical and/or full time non-bargaining unit employees excluding non-bargained employers performing a type of work covered by a construction bargaining agreement.

**Q) *What is a non-bargaining unit employee?***

An employee whether salaried or non-salaried, who is performing a type of work not covered by any construction industry collective bargaining agreement.

**Q) *Can an employer elect which of his/her employees are to be enrolled?***

No, if the Flat Rate Subscriber Agreement is signed, ALL full time clerical and/or full time non-bargaining employees must be enrolled, including the employer/owner.

**Q) *Can an employee choose to waive their option for enrollment into the plan?***

No, if the Flat Rate Subscriber Agreement is signed contributions must be made for ALL full time clerical and/or full time employees.

**Q) *Can part time employees be enrolled?***

No, only full time employees can participate. Full time employees are clerical and non-bargaining unit employees who work 17.5 or more hours per week. Upon signing of the subscriber agreement all full time employees require enrollment.

**Q) *Can an employer elect to discontinue participation in the Flat Rate program?***

Yes, however, once a contributing employer ceases to include its clerical and non-bargaining unit employees the employer shall not be given the opportunity to re-enroll in the Flat Rate Program without consent of the Health and Welfare Board of Trustees.

**Q) *How are payments made to the Trust Fund?***

Contributions for Flat Rate benefits are submitted the month before coverage on the monthly Carpenter's Contribution Report.

**If your company is interested in more information about the Flat Rate Plan, please contact the Fund Office at:**

**Benefit Services:**

**Toll Free: (888) 547-2054**

**Direct Dial: (510) 633-0333**

**Email: [benefitservices@carpenterfunds.com](mailto:benefitservices@carpenterfunds.com)**