

CARPENTER FUNDS ADMINISTRATIVE OFFICE OF NORTHERN CALIFORNIA, INC.

carpenterfunds.com

265 Hegenberger Road, Suite 100 Oakland, California 94621-1480 Toll free: (888) 547-2054 Phone: (510) 633-0333

Carpenters Health and Welfare Trust Fund for California Request to Terminate Dependent Coverage

I wish to terminate Carpenters Health and Welfare eligibility for one or more of my Dependents. My Dependent(s) have other coverage through an employer sponsored plan, Medicare, Medicaid, a state Children's Health Insurance Program (CHIP) or other public program, or coverage under another health insurance policy or program (including COBRA Continuation Coverage, or individual insurance), or health coverage through the Affordable Care Act Health Insurance Marketplace or state exchange.

Please terminate for the following Dependent(s):	
	Carpenters Health and Welfare. This date must be a futured.
Signature:	Date:
Print Name:	Relationship to Dependent:
CFAO ID #, UBC # or Social Security Number	;

Should you have any questions regarding this forms or your dependent's benefits please contact the Trust Fund Office.

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The Board of Trustees of the Carpenters Health and Welfare Trust Fund for California believes the Fund's Indemnity medical plan is a grandfathered health plan under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example the elimination of lifetime limits on benefits. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at 1-888-547-2054 or the Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.