Eligible Retiree, Survivor, and Dependent Health Insurance Disenrollment Policy

Eligible health insurance enrollees may voluntarily dis-enroll from health insurance by notifying the Fund, in writing, at least 30 days prior to the first day of the month the coverage is to end. Written requests received less than 30 days in advance will be effective in the following month.

An enrollee will be involuntary dis-enrolled when:

- The enrollee no longer meets eligibility requirements;
- Medicare coverage is lost due to non-payment of premium; or
- On the date following the retiree’s or survivor’s death.

Except in the case of death, coverage ends on the last day of the month in which eligibility is terminated.

Dependent health insurance coverage ends simultaneously with the termination of the retiree’s or survivor’s coverage.

Health insurance enrollees may be eligible for COBRA continuation coverage when coverage is lost due to specific Qualifying Events. COBRA benefits will be provided pursuant to the Fund’s Rules.