



Health Care Plan Information Sheet Instructions

THE ATTACHED FORM IS REQUIRED WHETHER YOU ARE SINGLE OR HAVE DEPENDENTS; AND IS REQUIRED ON AN ANNUAL BASIS AS WELL AS WHEN CHANGES OCCUR.

In order for your dependents to become eligible for health care coverage we required copies of the following documents (if your family is new to the plan or you are a returned member and there have been changes to your family):

To Add Spouse:

- Certified Marriage Certificate
- Spouse Coverage Verification Form

To Add Child(ren):

- Birth Certificate for each dependent child, if adding a newborn we can accept the Certificated Birth Record
- Adoption Paperwork
- Adult Dependent Enrollment Application for dependents between the ages of 19 and 26
- Other Insurance Questionnaire (if applicable)

If you wish to add a new spouse or dependent to the plan because of marriage, birth or adoption you need to provide notice to the plan within 180 days of the event. If you fail to provide the needed information within the time limit you may still add the new spouse or child(ren) to the plan; however the coverage will be effective only as of the date that the required documents are received in our office.

Please returned the completed form(s) to us in the enclosed envelope, via fax at 763-416-6196 or email to enrollment@ibew292benefits.org.

Thanks you!