Effective April 1, 2013, the Plan has been modified to better describe the circumstances in which a Pensioner and Eligible Dependent may re-enroll in the Pensioners & Surviving Spouses Plan (the “Plan”).

This amendment replaces the language in Section 7, subsection B(i) of the Summary Plan Description (Termination of Health & Welfare Coverage for Pensioner) as follows:

Pensioner coverage will terminate on the earliest of the following dates:

i) The first day of the month following 30 days from the date the Fund Office received a written request by the Pensioner to terminate coverage. If coverage is terminated for this reason, the Pensioner and Eligible Dependent will not be permitted to re-enroll in the Plan, unless the Pensioner and Eligible Dependent are:

a. Continuously enrolled in a Medicare Advantage Plan (HMO, PPO or Private Fee-For-Service plan) or a Medicare Supplemental (Medigap) plan; or
b. Continuously enrolled in an employer-sponsored or governmental plan, provided such plan provides benefits that are at least equivalent to a Medicare Advantage plan or Medicare Supplemental (Medigap) plan.