

HEALTH & WELFARE FAQ'S

Q: How many hours do I need for health coverage?

A: 140 hours per month* are necessary to maintain health coverage.

*If you are a new member who has never qualified before, the 140 hours may be accumulated over a two-month period, *provided your two-month total is equal to or greater than 200 hours.*

Q: How are hours applied?

A: Hours may be used for coverage the month after they are reported. See below.

Hours Accumulated in	Reported In	Coverage for
January	February	March
February	March	April
March	April	May
April	May	June
May	June	July
June	July	August
July	August	September
August	September	October
September	October	November
October	November	December
November	December	January
December	January	February

All hours reported after the last Sunday of the month will be included on the following month's report

Q: What happens to my hours if I work more than 140 hours in one month?

A: Any hours worked in excess of 140 will be credited to your hour bank*, which acts as a reserve in the event of a deficit.

*Hour bank may not exceed 840 hours

Q: What happens if I do not work 140 hours to maintain my coverage?

A: If you have already qualified for health coverage, the administrator would deduct the necessary hours from your bank to compensate.

Q: What happens if I have already qualified, only work 100 hours and have zero bank hours to compensate?

A: In order to maintain coverage, you would need to pay the 40-hour difference at the hourly contribution rate of the plan you are participating in. If you do not pay the difference, you forfeit the 100 hours worked* and would need to work 140 hours the next month to re-qualify.

*Partial hours will *not* be credited to your hour bank

Q: Will hours worked outside of Orange County be reported to Local 441?

A: Provided you are signed up on ERTS (Electronic Reciprocal Transfer System), hours will be reported to Orange County's administrator, *eventually*. This process can sometimes take up to two months. If you have a healthy hour bank, it will cover the deficit until your hours are posted, at which point your bank hours will be replenished. If you don't have enough bank hours to cover the lapse, you will appear ineligible and will need to contact the Business Manager to verify your eligibility.

*If you are working out of county and unsure of whether or not you are signed up on ERTS, contact our office M-F, 8am – 12pm, 1pm -4pm.

NECA-IBEW Family Medical Care Plan: 877-937-9602

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