## **UFCW Local 496**

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# **Sick Benefit Plan**

## **Eligibility**

The UFCW Professional Hair Care Division Sick Benefit Plan is designed to provide short-term income replacement for participants totally disabled due to illness or accidental injury. As an Eligible Member of the United Food and Commercial Workers International Union, Professional Hair Care Division, you become a Participant in the Plan by completing and forwarding to your Local UFCW office a Plan enrollment card and paying the required premium. Once you become a Participant, you become eligible to claim benefits for disabilities that occur after six (6) months of

participation in the Plan. In other words, there is a six-month waiting period between the date you enroll in the program-your Enrollment Date-and when you become eligible to draw benefits-your Benefit Date.

The number of units of coverage purchased determines the benefit payable while totally disabled. Each unit of coverage provides a benefit of \$20.00 per week for up to nine (9) weeks of disability during any 52-week period. A Participant may purchase as many as fifteen (15) units or as few as one (1). The maximum lifetime benefit is 90 weeks of benefits.

If you are disabled on the date you would otherwise become eligible to draw benefits, your Benefit Date will be delayed to the first day of your return to active employment in the trade.

If you have a medical condition that exists on the date that you enroll in the Plan and that condition later causes you to become disabled, benefits for that disability will not be paid until you have been a Participant in the Plan for 12 consecutive months following your Enrollment Date.

Once enrolled, you may reduce the number of units you are purchasing at any time by completing a Drop Card; units may be added at only two (2) specific times during the year, January 1 and July 1. The Benefit Date for added units is six (6) months after the Enrollment Date:

Enrollment Date: January 1 Benefit Date: July 1

Enrollment Date: July 1 Benefit Date: January 1

### <u>Benefits</u>

Benefits provided by the Plan are paid from the first day of a disability brought about as the result of accidental injury or one requiring in-patient hospitalization. When disability is caused by an illness not requiring a hospital confinement, benefits will be paid from the eighth day of continuous disability. To qualify for benefits you must be treated by your doctor at least every seven (7) days, unless you are Chronically Disabled. Partial weeks, less than seven (7) consecutive days of absence due to disability, do not qualify for benefit payment.

To initiate a claim for benefits, the Plan's standard claim form must be completed by both the Participant and the individual's attending physician and submit-ted to your local UFCW office when disability ceases, or after then (10) weeks of continuous disability but no later than one year-365 days-after disability ceases or when the individual is able to return to active employment in the trade.

Any UFCW member who is a Participant in the pro-gram is eligible to draw benefits with the following exceptions:

1. A member not having his dues, assessments or fines paid during the month in which disability occurs and prior to becoming sick or disabled.

2. Any Participant who is not under the regular care of a duly-licensed physician at least once every seven (7) days, except in the case of a member who becomes invalid or is otherwise Chronically Disabled.

3. Participants who have collected the maximum lifetime benefit, i.e. 90 weeks of benefits.

4. Any member who presents a fraudulent claim.

### **Questions & Answers**

The following questions and answers will provide additional information and clarification of the Plan's provisions and administrative procedures.

#### Q: Who may participate in the Plan?

**A:** Eligible members of the UFCW who are members in good standing and who are actively employed as a barber or cosmetologist, or by a company that provides goods or services used primarily by barbers or cosmetologists in their trade, may participate in this program.

#### Q: Is participation in the Plan mandatory?

**A:** No! The UFCW Sick Benefit Plan is a voluntary program—the benefits of which are paid from contributions made by Plan Participants.

#### Q: How do I become a Participant in the Plan?

**A:** If eligible, you become a Participant by completing the Plan's enrollment form and paying the monthly premium.

#### Q: What benefits are provided by the plan?

A: Benefits are called units of protection. A unit provides a benefit of \$20.00 per week in income.

#### Q: What is the cost for this protection?

A: Each unit up to eight (8) units costs \$1.00 per month. Each unit thereafter costs \$1.25 per month. (Table below.)

#### Q: How many units of protection may I purchase?

A: A Participant may purchase as many as fifteen (15) units, or as few as one (1) unit.

#### Q: Is there a waiting period between the date I enroll and the date that I can begin to receive benefits?

**A:** Yes. You must be a Participant in the Plan for six (6) continuous months after you enroll in the Plan before you are eligible to claim benefits.

# Q: What happens if I enroll in the program but am disabled on the date my benefits would otherwise become available to me?

A: Your eligibility for benefits—your Benefit Date—will be postponed until you return to regular work.

# Q: Can I participate in this program if I have a pre-existing condition; that is, a condition that exists at the time I enroll in the Plan?

**A:** Yes. However, the Benefit Date for that condition will be the first of the month following 12 consecutive months of participation after your Enrollment Date.

#### Q: How long must I be disabled to qualify for benefits?

**A:** Benefits are payable from the first day of a disability caused by an accident or if you are hospitalized; the eighth day in case of illness not requiring hospitalization.

#### Q: Must I see a doctor to qualify for benefits?

A: You must see your doctor at least once every seven (7) days, or, in the case of long-term disability, he must attest to the fact that you are Chronically Disabled, as defined by the Plan.

#### Q: If I am disabled, when will I collect bene-fits?

**A:** You can collect benefits at the end of your disability; that is, your disability ceases and you return to active employment, or after ten (10) consecutive weeks of disability.

#### Q: How do I collect benefits?

**A:** You must submit a completed Plan-approved claim form to your local UFCW office at the termination of your disability. **You** and your doctor must provide all information necessary for processing a claim.

#### Q: Is there and deadline date by which I must submit my claim?

A: Yes. Any claim received more than 365 days after disability ceases or your return to active employment will be denied.

#### Q: Is there a maximum that I may receive in benefits?

A: Yes. You may receive a maximum of nine (9) weeks of benefits during any 52 week period, up to 90 weeks of benefits in a lifetime.

#### Q: What if I become Chronically Disabled?

**A:** If you become Chronically Disabled, as defined by the Plan, you may receive benefits for the claim that established your status as a Chronically Disabled Participant; however, you will not be eligible for any additional benefits unless you recover from that disability and return to active employment in the trade.

#### Q: May I add units of coverage?

**A:** You may enroll for additional units if you have fewer than the maximum, fifteen (15). Units may be added January 1 and July 1, only.

#### Q: How are additional units secured?

A: You must complete the Plan's Add/Drop Card and return it to your local UFCW office.

#### Q: When do the added units become effective?

A: You may enroll for additional units on January 1 or July 1 of any year. You become eligible to claim benefits from these additional units for disabilities that begin six (6) months after the Enrollment Date; that is, six (6) months after July 1, or January 1 following addition of these units.

#### Q: May units be dropped?

A: Units may be dropped at any time, but you must complete the Plan's Add/Drop card to make such a change.

#### Q: How long will I remain eligible to participate in this program?

**A:** You will remain eligible for participation in the Plan so long as you are a member of the UFCW, are actively employed as a hair care professional or in an allied industry, your dues are paid, and you pay the required premium.

#### <u>Premiums</u>

Weekly Benefit Monthly Cost Total (with dues) \$20/week benefit= \$1/month= \$34.00 \$40/week benefit= \$2/month= \$35.00 \$60/week benefit= \$3/month= \$36.00 \$80/week benefit= \$4/month= \$37.00 \$100/week benefit= \$5/month= \$38.00 \$120/week benefit= \$6/month= \$39.00 \$140/week benefit= \$7/month= \$40.00 \$160/week benefit= \$8/month= \$41.00 \$180/week benefit= \$9.25/month= \$42.25 \$200/week benefit= \$10.50/month= \$43.50 \$220/week benefit= \$11.75/month= \$44.75 \$240/week benefit= \$13.00/month= \$46.00 \$260/week benefit= \$14.25/month= \$47.25 \$280/week benefit= \$15.50/month= \$48.50 \$300/week benefit= \$16.75/month= \$49.75

## Please contact us to apply: 504-828-7942