



CEMENT MASONS AND PLASTERERS LOCAL 797 BENEFIT FUNDS

8311 W. Sunset Road, Suite 250 • Las Vegas, NV 89113
P.O. Box 400008 • Las Vegas, NV 89140
Phone (702) 415-2190 • Fax (702) 257-5361

RE: DEPENDENT COVERAGE

Dear Participant:

The following information is necessary to add dependents to your healthcare coverage. Please refer only to the situation which applies to you.

SPOUSE - Coverage for a Spouse can be provided for any Eligible Active Participant, upon full completion of your Vital Information Enrollment Form which will be kept on file at the Benefit Office. **A certified copy of your marriage certificate must be included before coverage will be activated for your spouse.** We also must have any information regarding your Spouse's other insurance coverage through his/her employer, if applicable.

CHILDREN - Only the Active Member's natural unmarried dependent children (up through age 26), and legally adopted children are eligible to be added to your coverage. **A certified copy of each child's birth certificate is required, before coverage will be activated.** We also must have any information regarding other insurance coverage for each dependent, if applicable.

- If the parents of the dependent child/ren are divorced, a full copy of the divorce decree is required in addition to the child's certified birth certificate.
- If the parents of the dependent child/ren were never married, an Order of Support or Affidavit of Parentage is required in addition to the child's birth certificate.

STEP-CHILDREN - are not automatically eligible dependents under the Plan. If you are 100% responsible for the step-children, and their non-custodial parent has relinquished all legal claims and rights to said children, please forward the legal documents to the Benefit Office for review. If this action has not been pursued by the dependent's custodial parent, the Fund cannot be responsible for their primary healthcare coverage. You may, however, submit for our review, any legal documents from the dependent's custodial parent, such as a prior divorce decree, or a Paternity affidavit where the Courts have specifically indicated who is to be responsible for their health care. If the Courts have indicated the non-custodial parent must provide their Health Care coverage, this action by the Courts will not be disputed.

By providing the Benefit Office with any information in regards to other insurance coverage your Spouse and/or children may have in addition to the Cement Masons and Plasterers Local 797 Benefit Funds, you are doing your part in controlling the costs of your Health Plan Benefits.