



## Local 513 - Fringe Benefit Funds

International Union of Operating Engineers, AFL-CIO

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### *Spouse or Dependent Coverage*

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

***Spouse*** — Coverage for a spouse can be provided for any Eligible Active Participant, however, we request that a ***“Beneficiary Designation Card”*** be completed and kept on file at our office. **A copy of your official Marriage License must be included before coverage will be activated for your spouse.** We also must have any information regarding your Spouse’s Employer and Insurance Coverage.

***Children*** — Only the Active Participants’ natural dependent children (under age 26), and legally adopted children are eligible to be added to your family file. There is no requirement that your child be unmarried, enrolled as a full-time student or live with or be supported by you. **A copy of each child’s Birth Certificate containing a State Seal is required before coverage will be activated.**

- ~ If the parents of the dependent child/ren are divorced, a full copy of the divorce decree is required.
- ~ If the parents of the dependent child/ren were never married, **Order of Support or Affidavit of Parentage** is required.

***Stepchildren*** — Are not automatically eligible dependents under the plan. If you are 100% responsible for the stepchildren, and their non-custodial parent has relinquished all legal claims and rights to said children, please forward the legal documents to our office for review. If this action has not been pursued by the dependent’s custodial parent, the Fund cannot be responsible for their *Primary Health Care* 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 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 Fund office with any information regarding other Insurance coverage your Spouse and/or children may have in addition to the Engineers Local 513 Health and Welfare Fund, you are doing your part in controlling the escalating costs of your Health Plan Benefits.***