ILWU-PMA Welfare Plan  
Medical Program Choice Form  
For Northern California Locals 10, 18, 34 (SF), 34 (Stockton), 54, 75, 91,  
Southern California Locals 13, 26, 29, 46, 63, 94, Portland/Vancouver Locals 4, 8, 40, 92,  
and Retirees living in Northern and Southern California and Oregon areas where a  
qualified HMO (group practice) plan is available  
CHECK (✓) YOUR CHOICE AND SIGN BELOW  

MEDICAL PROGRAM  
Kaiser Health Plan  
Kaiser Group Enrollment/Change Form  
must be returned along with this form.  

ILWU-PMA Coastwise Indemnity Plan  
Coastwise Indemnity Plan Enrollment Form must  
be returned along with this form.  

CHECK (✓) YOUR CHOICE AND SIGN BELOW  

Member's Name – PLEASE PRINT  

Member's Signature  

Date                           Local               Registration No.  

(                             )  
Telephone Number               

Street  

City   State  Zip  

MEDICAL PROGRAM CHOICE  
Eligible families in Northern and Southern California and Oregon Port Locals where the Kaiser HMO plan is  
available, and retirees residing in areas where the Kaiser HMO plan is available are offered a choice of medical  
plans. The July 1, 2008 Memorandum of Understanding between the ILWU and PMA provides that new  
registrants in Northern and Southern California and Oregon Choice Ports shall be assigned Kaiser HMO Plan for  
the first 24 months of registration. After 24 months, those registrants who have qualified for continued  
eligibility under Mid-Year/Annual Review hours requirement will have a choice of medical plans. Plans may be  
changed during Annual Enrollment each year, in May. In addition to the May Annual Enrollment period,  
members may change their health plan once at any time during the Plan Year (July 1-June 30). You must give  
the Benefit Plans office written notice of your change. The Benefit Plans office will provide written  
confirmation of the change and notice of the effective date. Retirees are also offered a choice when they  
move into a new area where more than one medical plan is available.  

If you are a new eligible with a choice of medical plans, or if you are changing medical plans, please complete  
and mail this form to:  

ILWU-PMA Benefit Plans  
1188 Franklin Street, Suite 101  
San Francisco, CA  94109  

EFFECTIVE DATE  
If you have just become eligible for ILWU-PMA Welfare Plan benefits, your medical coverage begins the same  
date as your Welfare Plan eligibility. Enrollment forms will be sent to your address of record.  

If you are a new registrant, your medical coverage begins on the first of the month following registration.  

(OVER)
If you are already eligible, but are changing medical plans during the May Annual Enrollment period, your coverage under the new plan begins July 1. If you are changing medical plans during the Plan Year, your coverage under the new plan will begin as soon as possible following receipt of your request in the benefit plans office.

If you are a retiree moving to a new area, your coverage under the new medical plan will coincide as nearly as possible with your move.

**BENEFITS**

Benefits under both medical plans include, but are not limited to, hospital, medical and surgical benefits, prescription drugs and vision care. You will be furnished with a Supplemental Summary Plan Description for the medical plan you choose. If you wish to examine plan descriptions before making your choice, they are available upon request at the Locals, the Benefit Plan office or your Area Welfare Director.

The Kaiser Plan is a group practice plan which provides all member services (except emergency services and authorized referrals) at its own facilities.

The ILWU-PMA Coastwise Indemnity Plan is a self-funded indemnity plan which allows you to obtain services from any licensed doctor or hospital. Claims are filed for reimbursement according to a Schedule of Allowances under Basic Benefits, and, in addition, under Major Medical Benefits. By selecting a Doctor, Hospital, or other provider that is a participant in the Preferred Provider Organization (PPO) you are guaranteed the maximum benefit, generally 100% of the PPO charge, for covered services.