

CITY OF	<b>Manchester Employees' Contributory Retirement System Member's Acknowledgement of Rights Pursuant to Chapter 41 Laws of 2005</b>
MANCHESTER	
EMPLOYEES'	
CONTRIBUTORY	
RETIREMENT	
SYSTEM	

Chapter 41 Laws of 2005 provides members of the Manchester Employees' Contributory Retirement System, (MECRS) with a health insurance subsidy based upon their number of years of creditable service. Chapter 41 does not provide any benefits to surviving spouses or dependents of retirees.

It is important to note that while provisions of Chapter 41 provides a subsidy for retiring members, that the entitlement to the benefit is contingent upon meeting certain requirements imposed by the City. Generally, a retiring member must elect to become or remain affiliated with the City's health insurance plan at retirement. Only qualifying life changes can entitle a retiring member of the MECRS to join the group at a later point if they do not elect to become affiliated at retirement time. (See Chapter 218:28 Laws of 1974 as amended for details.)

Please check one of the lines below and complete the bottom portion.

I have health insurance benefit entitlements through the City by virtue of direct payment of premiums and wish to claim my subsidy entitlement.

\* I have health insurance benefit entitlements through the City by virtue of spousal affiliation in the New Hampshire Retirement System and wish to claim my subsidy entitlement. (Spouse's Name, Dept and SS# required below:)

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\* I have health insurance benefit entitlements through the City by virtue of spousal affiliation with a present City Employee who carries me as their spouse and I wish to claim my subsidy entitlement. (Spouse's Name, Dept and SS# required below:)

\_\_\_\_\_.

Although I do not presently have health insurance through the City, I believe that I have become eligible at this time and wish to enroll under *life change* eligibility provisions.

I hereby decline participation in the City Health Insurance Group at this time and acknowledge that I may be subject to limitations imposed by the City should I desire to participate at a later date.

\* I agree to notify MECRS should I elect to leave coverage on my spouse's insurance plan.

Member's name \_\_\_\_\_ Subsidy entitlement \$ \_\_\_\_\_ per month

Member's social security number \_\_\_\_\_

Member's effective date of retirement \_\_\_\_\_

Member's signature \_\_\_\_\_ Date \_\_\_\_\_

**Employees' Contributory Retirement System**  
**Listing of “Life Events” which qualify a member to join Health Insurance Group**

**Life Events**

- ◆ Retirement of the member from their vocation with the City.
- After retirement, death or retirement of a prospective participant’s spouse when primary coverage had been through that spouse but the member was otherwise qualified to join the City sponsored group at retirement.
- After retirement, divorce which disqualifies a prospective participant from receiving continued coverage on the estranged spouse’s employer sponsored plan when the member was otherwise qualified to join the City sponsored group at retirement.
- Secondary retirement by the MECRS retiree from private sector employment where health insurance was provided until the time of the secondary retirement.
- A fundamental change in pension subsidy legislation which allows a member to qualify for subsidy previously not available to them.

**Not Life Events**

- ◆ A retiree who has previously declined an opportunity to participate but who has changed their mind. This applies even if the premium was not originally deemed to be affordable but the retiree’s financial circumstances have improved.