



CHICAGO TRANSIT AUTHORITY—RETIREE HEALTH CARE TRUST

c/o Group Administrators, Ltd. • 935 American Lane, Suite 100, Schaumburg, IL, 60173

ATTESTATION AND SIGNATURE – DESIGNATED HRA ENROLLEE MUST SIGN

I attest that (check applicable statement):

- I am a CTA retiree or former CTA Employee and I did not qualify for RHCT medical coverage.
- I am a CTA Retiree or former CTA Employee and I qualified for RHCT medical coverage but I have never enrolled in RHCT medical coverage and I would rather enroll in the HRA. I understand that if I enroll in the HRA, I will never be allowed to enroll in the RHCT Retiree Healthcare Plan, even if I am otherwise eligible.
- I am the surviving spouse of a CTA Retiree or former CTA Employee and neither my spouse nor myself have ever enrolled in health coverage from the RHCT.

I certify that, to the best of my knowledge, the information provided on this form is true and accurate and that any dependents listed are eligible for HRA coverage using the criteria below.

I understand that whether I enroll in the HRA or not, an annual fee of \$25 will be deducted from my HRA balance beginning on December 31, 2018 and every year thereafter.

I authorize Group Administrators to enroll me in the Healthcare Reimbursement Account (HRA).

Signature:

Date:

Eligible Dependents

The term "spouse" refers to a person of either gender with whom a former CTA employee or retiree has a legal marriage recognized by the State of Illinois. If you dissolve your spousal relationship, your spouse will lose eligibility as of the last day of the month of the date of dissolution.

A spouse is eligible for surviving spouse coverage in the HRA only if you had been legally married to your spouse for at least one year prior to separating from CTA employment and have been continuously married to that spouse until your death.

A child is eligible if the child is:

- The retiree's or former employee's natural, adopted (or placed for adoption) or stepchild through age 25, who:
 - Is unmarried;
 - Resides with the retiree (if the child is age 19 or older)*; and
 - Is dependent upon the retiree for over half of his or her financial support.
 - A child named as an alternate recipient in a child support order, if the Plan Administrator determines the support order to be a Qualified Medical Child Support Order ("QMCSO"). You may contact the Claims Administrator to obtain a free copy of the Plan's QMCSO procedures.
- The retiree's or former employee's dependent child of any age who was disabled prior to age 26 and who, due to disability:
 - Is incapable of self-sustaining employment; and
 - Is dependent upon the retiree or other care provider for lifetime care and supervision because of the disability.

* A child who is temporarily away at school but continues to have the same permanent address as the retiree is considered to reside with the retiree.