



BENEFITS

MEDICAL *

Each eligible member or widow, in good standing of the CBA, is entitled to \$40 per day starting with the first day that a member or widow is hospitalized or receives a same day outpatient medically required procedure, as listed in the Schedule of Outpatient Procedures, in a hospital or medical facility. There is a maximum benefit of \$800 within a calendar year.

Each eligible member or widow, in good standing of the CBA, is entitled to \$40 per day starting with the first day that a member or widow receives same day outpatient chemotherapy, radiation, dialysis treatment. There is a maximum benefit of \$400 within a calendar year. This benefit will be counted against the maximum hospitalization benefit of \$800.

Each eligible widow of a deceased member, in good standing of the CBA, shall be entitled to a benefit of \$40 toward her outpatient mammogram and bone density scan within a calendar year.

***WE MUST HAVE THESE DATES: ADMITTED AND DISCHARGED.**

DENTAL **

Each eligible member or widow, in good standing of the CBA, shall be entitled to a benefit of \$200 toward his or her out-of-pocket dental bills within a calendar year.

EYE EXAMINATION/GLASSES OR CONTACTS **

Each eligible member or widow, in good standing of the CBA, shall be entitled to a benefit of \$50 toward his or her out-of-pocket expenses for an eye examination by an Ophthalmologist or a Optometrist within a calendar year. Each eligible member or widow, in good standing of the CBA, shall be entitled to a benefit of \$50 toward his or her out-of-pocket expenses for prescription eye glasses or contacts once every two (2) calendar years.

HEARING **

Each eligible member or widow, in good standing of the CBA, shall be entitled to a benefit of \$50 toward his or her out-of-pocket costs for a hearing examination by an ear, nose, & throat Doctor or a licensed Audiologist within a calendar year.

PODIATRY **

Each eligible member or widow, in good standing of the CBA, shall be entitled to a benefit of \$50 toward his or her out-of-pocket costs for diabetic foot treatment by a Podiatrist within a calendar year.

BLOOD **

Each eligible member, in good standing of the CBA, or his widow and eligible children shall be paid \$35 per pint of blood received, not to exceed \$70 per each eligible individual of out-of-pocket cost within a calendar year.

****WE MUST HAVE SERVICE DATES AND PAYMENT DOCUMENTAION LISTING OUT-OF-POCKET COSTS.**



BENEFITS (Continued)

FUNERAL

Each eligible member, in good standing of Cardozo Lodge, or his wife and dependent eligible children at the time of death are entitled to interment in an In Line Plot except as provided in by-law section 6.6. The remaining spouse may reserve the adjacent plot (if available) at the prevailing price (\$600.00 plus applicable taxes and deed fees).

DEATH

Each eligible member, in good standing of Cardozo Lodge, or his wife is entitled to a \$200 death benefit.

PURCHASE OF PLOTS

Each member of Cardozo Lodge is entitled to purchase plots from the CBA at considerably under market value. The current price is \$600 plus a 15% State Tax (on the current market value as determined by the Cemetery), a \$275 Cemetery Registration Deed Fee, and \$50 CBA Grounds Fee. Final prices will be determined at the time of purchase. Plots are also available for purchase by other non-dependent family members and friends of members at a cost of \$1,000 plus taxes and fees referred to above. Contact any member of the cemetery committee to make a purchase.

Complete details of benefit eligibility are found in the full text of the CBA By-Laws. Any member who is in arrears with his Cardozo or CBA dues for a period of at least 3 months is not in good standing and not eligible for any privileges, rights or benefits of the CBA.

**In order to qualify for payment of benefits, all bills MUST be submitted to the CBA treasurer no later than six (6) months from the date services were rendered.
Dates of services must be rendered on all bills.**

I read the list of benefits above and have decided to pay the CBA overage dues as follows: Age 40-44 \$10, Age 45-49 \$20, Age 50-54 \$40, Age 55-59 \$60, Age 60-65 \$100. These overage dues will be paid every year to maintain your eligibility for benefits.

Name: _____ Birth Date: _____ Fee: _____

Signature: _____ Date: _____

OR

I, _____, the undersigned hereby waive for myself, my wife, and my dependent children, any and all rights, privileges, and benefits of the Cardozo Benevolent Association of Fair Lawn. I further release Benjamin N. Cardozo Lodge #163/157 Knights of Pythias, of Fair Lawn, NJ of any and all claims for such benefits.

Signature: _____ Date: _____

Witness: _____ Date: _____