

## HIPAA NOTICE OF SPECIAL ENROLLMENT RIGHTS

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires group health plans to provide a special enrollment opportunity to an employee (or COBRA enrollee) upon the occurrence of specific events. This Chart summarizes the qualifying events and the corresponding special enrollment rights. This notice is being provided to ensure that you understand your right to apply for the Blue Valley Schools USD #229 Group Health Care Plan. You should read this notice even if you plan to waive coverage at this time.

EVENT	SPECIAL ENROLLMENT RIGHT
Acquisition of New Dependent(s) due to Marriage	<ul style="list-style-type: none"> <li>➤ Employee may enroll the employee (if not previously enrolled).</li> <li>➤ Employee may also enroll newly-eligible spouse and/or newly-eligible stepchild(ren).</li> </ul>
Acquisition of New Child due to birth or adoption (including placement for adoption)	<ul style="list-style-type: none"> <li>➤ Employee may enroll the employee (if not previously enrolled).</li> <li>➤ Employee may also enroll spouse and/or newly-eligible child(ren).</li> </ul>
Gain Eligibility for Premium Assistance Subsidy under Medicaid or CHIP	<ul style="list-style-type: none"> <li>➤ Employee may enroll the employee and the spouse or child(ren) who have become eligible for the premium assistance.</li> </ul>
Loss of Other Health Coverage if due to: <ul style="list-style-type: none"> <li>➤ Loss of eligibility.               <ul style="list-style-type: none"> <li>○ Death of spouse; divorce, legal separation</li> <li>○ Child loses status (e.g. reaches age limit)</li> <li>○ Employment change (e.g. termination, reduction in hours, unpaid FMLA)</li> </ul> </li> <li>➤ Expiration of COBRA maximum period</li> <li>➤ Moving out of HMO plan's service area</li> <li>➤ Other employer terminates its plan (or discontinues employer contributions)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Employee may enroll the employee (if not previously enrolled).</li> <li>➤ Employee may also enroll spouse and/or children who have lost other health coverage.</li> </ul> <p>Note: Person losing the Other Health Coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>
Loss of Medicaid or CHIP coverage	<ul style="list-style-type: none"> <li>➤ Employee may enroll the employee and the spouse or child(ren) who have lost Medicaid/CHIP entitlement.</li> </ul>

**Notes:**

1. HIPAA Special Enrollees must be given 31 days (from the date of the event) to enroll.
2. For events related to Medicaid/CHIP, the special enrollment period is 60 days.
3. Special enrollment, if elected, must take effect no later than the first day of the month following the enrollment request. If the event is the birth or adoption of a child, the special enrollment must take effect retroactively on the date of birth or adoption (or placement for adoption).

To request special enrollment or obtain more information, please contact:

Blue Valley Benefits Help Center

Phone: 1 (844) 239-0434

Dated: October 1, 2018