

Community Consolidated School District 59

Important Notice about Group Health Plan Special Enrollment Rights

This notice is being provided so that you understand your right to apply for group health plan coverage outside of the open enrollment period. You should read this notice regardless of whether or not you are currently covered under the CCSD #59 Plan.

You may have the right to enroll in the health plan options if certain events (listed below) occur at any time during the year:

- Health plan options where applicable and offered such like examples of medical, dental, and/or vision are subject to HIPAA's portability requirements. You can always contact, HR for specific coverage options available to you.

The following are the events for which you may have a special enrollment right:

Loss of Other Group Health Plan Coverage or Health Insurance

If you decline coverage for yourself or your dependents because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in any of the group health plan options for which you are eligible if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within **30 days** after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

Marriage, Birth or Adoption

If you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents in any of the group health plan options for which you are eligible. However, you must request enrollment within **30 days** after the marriage, birth, adoption or placement for adoption.

Loss of Coverage under Medicaid or State Children's Health Insurance Program

If you decline coverage for yourself or your dependents while Medicaid coverage or coverage under a state children's health insurance program is in effect, you may be able to enroll yourself and your dependents in any of the group health plan options for which you are eligible if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within **[60 days]** after your or your dependents' coverage under Medicaid or state children's health insurance program ends.

Eligibility for State Premium Assistance Subsidy

If you or your dependents become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to group health plan coverage under this Plan, you may be able to enroll yourself and your dependents in any of the group health plan options for which you are eligible. However, you must request enrollment within **60 days** after your or your dependents' determination of eligibility for such assistance. More information about these subsidies is included in "Important Notice about Free or Low-Cost Health Coverage for Children and Families under Medicaid and the Children's Health Insurance Program" below.

To request special enrollment or obtain more information, contact HR.