

Addendum 19-1B (effective 1/1/2022)

Termination due to loss of eligibility or non-payment: Self-pay subscriber

Subscriber is no longer eligible due to which <u>event</u> ?	Was notification provided within 60 days of date of loss ¹ of eligibility or death?	Will you key the SEBB MyAccount termination within the lower limit date ² relative to the <u>event</u> ?	Key termination of coverage...
Subscriber enrolled when not eligible.	Yes or No	Yes or No	The later of the following: <ul style="list-style-type: none"> • The last day of the month of loss of eligibility, or • The last day of the last month the premium and any applicable premium surcharge was paid³ <i>SEBB Continuation Coverage (COBRA) coverage will not exceed the maximum number of months that the subscriber is eligible for.</i>
Death	Yes or No	Yes or No	The last day of the month of death ⁵ <i>Survivor allowed continuation coverage.</i>
Non-payment of full or partial premium	N/A	Yes or No	The last day of the last month the premium and any applicable premium surcharge was paid ³

¹ *Date of Loss – A subscriber’s eligibility for enrollment in health plan coverage ends the last day of the month the subscriber meets the eligibility criteria as described in WAC 182-31-090, 182-31-100, and 182-31-120.*

² *Lower limit date – The lower limit date is 60 days before the current process month. For example: if the current process month is June, 60 days would be April; therefore, the lower limit date for terminations would be April 30.*

³ *Paid – Paid means payment of a month’s premium and any applicable premium surcharges, or a month’s premium and any applicable premium surcharges with only an insignificant shortfall. See WAC 182-30-020 for a description of insignificant shortfall.*

⁴ *Current process month – Identifies the specific period of time for which the insurance system is billing a SEBB Organization. The beginning and end date of a SEBB Organizations current process month depends on which one of the three invoicing cycles the agency is in.*

⁵ *If premiums and any applicable premium surcharges remain unpaid for 60 days after the death of the subscriber, the deceased subscriber’s coverage will be terminated retroactively to the last day of the last month in which the premium or any applicable premium surcharge was paid.*

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Termination due to loss of eligibility: Dependent of self-pay subscriber

Dependent is no longer eligible due to which <u>event</u> ?	Was notification provided within 60 days of date of loss ¹ of eligibility or death?	Will you key the SEBB MyAccount termination within the lower limit date ² relative to the <u>event</u> ?	Key termination of coverage...
Loss of eligibility per WAC 182-31-140 (or) Dependent enrolled when not eligible ⁴ per WAC 182-31-140 (or) The dependent enrolled when the subscriber was not eligible	Yes	Yes or No	The last day of the month of loss of eligibility (Continuation coverage allowed)
	No	Yes	The last day of the month of loss of eligibility (Continuation coverage <u>NOT</u> allowed)
No		The last day of the month of the lower limit date ² for the <u>current</u> process month ³ (Continuation coverage <u>NOT</u> allowed)	
Death	Yes or No	Yes or No	The last day of the month of death

¹ *Date of Loss – A dependent's eligibility for enrollment in health plan coverage ends the last day of the month the dependent meets the eligibility criteria as described in WAC 182-31-130 and 182-31-140.*

² *Lower limit date – The lower limit date is 60 days before the current process month. For example: if the current process month is June, 60 days before would be April; therefore, the lower limit date for terminations would be April 30.*

³ *Current process month – Identifies the specific period of time for which the insurance system is billing a SEBB Organization. The beginning and end date of a SEBB Organizations current process month depends on which one of the three invoicing cycles the agency is in.*

⁴ *Dependent enrolled when not eligible – If a dependent was enrolled when not eligible for SEBB coverage, assume “No” to question “Was notification provided within 60 days of date of loss of eligibility or death?” and key termination of dependent coverage as directed.*