

HIPAA Special Enrollment Rights for Medical Plan Coverage

Loss of Eligibility for Other Health Coverage

If you are declining medical plan enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in the Company Medical Plan, or switch health benefit options under this plan, if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other non-COBRA coverage). However, you must request enrollment within 31 days after the date your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage). Loss of eligibility for coverage includes:

- Loss of eligibility as a result of legal separation, divorce, cessation of dependent status (such as attaining the maximum age to be eligible as a dependent child under the plan), death of an employee or partner, termination of employment, reduction in the number of work hours of employment
- A situation in which a plan no longer offers any benefits to the class of similarly situated individuals that includes the individual, and
- In the case of an individual who has COBRA continuation coverage, at the time the COBRA continuation coverage is exhausted.

However, loss of eligibility for other coverage **does not include** a loss of coverage due to:

- The failure of the employee or dependent to pay premiums on a timely basis
- Voluntary disenrollment from a plan, or
- Termination of coverage for cause (such as making a fraudulent claim or an intentional misrepresentation of a material fact in connection with the plan).

When coverage begins. If you enroll yourself, your spouse/domestic partner and/or your eligible dependent child(ren) in a group health plan due to a loss of eligibility for coverage event described above, coverage under this plan will begin the date eligibility was lost.

Gaining a New Dependent

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 a Company Medical Plan. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

In addition, if you are not enrolled in the Company Medical Plan as an employee, you also must enroll in the plan when you enroll any of these dependents. And, if your spouse is not enrolled in the health

plan, you may enroll him or her and any other eligible dependents in the plan when you enroll a child due to birth, adoption or placement for adoption.

When coverage begins. In the case of marriage, coverage will begin on the date of marriage as long as you notify the Company within 31 days of the event. In the case of birth, adoption or placement for adoption, coverage is retroactive to the date of birth, adoption or placement for adoption.