



NOTICE OF OPEN ENROLLMENT FOR EMPLOYEES OF

Fairborn City Schools

IT IS IMPERATIVE THAT YOU READ THIS DOCUMENT IN IT'S ENTIRELY SO YOU DO NOT MISS IMPORTANT ENROLLMENT DEADLINES.

During the month of September any eligible employee who is not already covered may enroll in our Anthem medical and dental coverage or add dependents to their current coverage for an October 1st 2010 effective date. This is an annual opportunity and, other than a “qualifying event”*, the only opportunity to join the plan UNTIL NEXT September 2011 for an October 1, 2011 effective date.

During the open enrollment period, Anthem must accept all enrollees regardless of their medical conditions. Even though the insurance carrier is required to cover all employees/dependents that request enrollment and meet eligibility requirements, pre-existing condition limitations may apply to those age 19 or older. Pre-existing limitations for those age 19 or older may be waived by supplying proof of prior insurance coverage (pregnancy is not considered a pre-existing condition) through a Certificate of Creditable Coverage from the prior insurance carrier.

To enroll for coverage or to add dependents, your application must be returned to Patsy Trippensee during the month of September for a 10/01/2010 effective date. Applications received during October 2010 will be effective 11/1/2010. Applications received after October 31, 2010 will be considered late and the applicant will have to wait until our next open enrollment period to join the plan. Currently, the open enrollment period is September of each year.

ADDITIONAL ENROLLMENT OPPORTUNITY FOR DEPENDENTS

Fairborn City Schools is providing a special enrollment period from September 1, 2010 through September 30, 2010 for dependents who were previously removed from the plan for reaching the plan limiting age if they meet the below criteria. To add this dependent back to coverage please complete an Anthem application and return it to Patsy Trippensee during September 2010. To add a dependent between the ages of 26 and 28 complete the Anthem application AND the Anthem Affidavit form. Note: When adding dependents age 26-28 the Affidavit must be completed, notarized and returned to Patsy Trippensee along with the enrollment form during September 2010.

If you have a dependent who graduated or who met the plan limiting age after April of this year Anthem will continue to keep them on the plan until Age 26 if they meet the new eligibility criteria.

RECENT STATE AND FEDERAL LAWS FOR DEPENDENT COVERAGE OPPORTUNITIES

Recent State and Federal laws have provided the opportunity for dependents to continue dependent status through your coverage. To continue coverage under **FEDERAL** law **up to the age of 26**, the dependent must meet the following requirements:

- The dependent can be married or unmarried. (However, coverage is not extended to spouses or children of dependents i.e. grandchildren.)
- The child of the employee is that defined in your benefit booklet.
- The dependent does not have his/her own employer-sponsored coverage
- The law does not require the child to live with or be financially dependent upon the parent.

Once the dependent has reached **the age of 26**, he/she may continue coverage **AT THE EMPLOYEE'S REQUEST** under **STATE** law **up to the age of 28**, as long as he/she meets the following requirements:

- The dependent is UNMARRIED.
- The dependent is the natural child, stepchild or adopted child of the employee.
- The dependent is a resident of this state OR a full-time student at an accredited public or private institution of higher education.
- The dependent is not employed by an employer that offers any health benefit plan under which the child is eligible for coverage.
- The dependent is not eligible for Medicare or Medicaid.
- The law does not require the child to live with or be financially dependent upon the parent.

AT THIS TIME, THE ABOVE LAWS ONLY APPLY TO MEDICAL COVERAGE AND NOT TO DENTAL, VISION, ETC.

***ADDITIONAL IMPORTANT REMINDERS REGARDING CHANGES IN FAMILY STATUS AND/OR LOSS OF OTHER MEDICAL COVERAGE**

Additional opportunities to elect coverage for you and/or your qualified dependents are available as a result of "qualifying events." Those qualifying events are loss of other coverage, birth, and adoption of a baby and/or marriage. You and your dependents will be eligible for coverage under the current group medical plan at our company as long as application is made in writing before the 31st day following the qualifying event. Please see company contact for assistance and the proper forms. The effective date of the coverage will be the date of the qualifying event.

IF YOU FAIL TO ENROLL DURING THAT 31-DAY PERIOD OF TIME, THE NEXT OPPORTUNITY TO ENROLL MAY BE OUR OPEN ENROLLMENT in September 2011 for an October 2011 effective date. Newly enacted legislation allows those with loss of coverage under Medicaid or the Children's Health Insurance Program (CHIP) a 60-day special enrollment period.

LOSS OF COVERAGE

Qualifying events can also trigger the loss of coverage and subsequent COBRA rights. You must provide us with notification of life change events such as legal separation, divorce, and dependent children who are no longer eligible for coverage. Federal legislation allows you 60 days to notify us of the occurrence of one of those events. If you fail to notify us of a qualifying event in a timely fashion, you or your dependent may lose important continuation rights and/or you may lose premium contributions that you've paid after the qualifying event.

REMEMBER: IT IS YOUR RESPONSIBILITY TO PROVIDE US WITH NOTIFICATION WHEN YOU OR ONE OF YOUR DEPENDENTS INCURS A QUALIFYING EVENT. FAILURE TO DO SO COULD MEAN THE LOSS

OF VALUABLE BENEFITS.

HIPAA PRIVACY

Fairborn City Schools complies with the HIPAA Privacy Regulations. If you would like a copy of our HIPAA Privacy policy, please contact Patsy Trippensee.

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