

Coverage Issue Reasons

The following are some reasons why a participant may experience a coverage issue:

- Late premium remittance for a Retired or COBRA participant
- Solution Late premium remittance for an active employee on Leave Without Pay
- Underpayment of premiums
- Move money required
- Timing of a Qualified Status Change (QSC) enrollment
- Approved Retroactive Change

Emergency Versus Non-Emergency Requests

Reinstatements are only processed for participants who require services during the current coverage month.

- Non-emergency requests are for participants who do not require services within the next 24 hours.
- Emergency requests are for immediate (within 24 hours) services or prescriptions.

Non-Emergency Reinstatement Process

- 1. Participant contacts the People First Service Center to notify of coverage issue.
- 2. Specialist researches to determine cause of coverage issue and determines if coverage can be reinstated at this time.
 - If yes, continue.
 - If no, specialist explains reason coverage can not be reinstated at this time.
- 3. Specialist completes a Reinstatement Request form and routes to appropriate Reinstatement folder.
- 4. Request is processed and faxed to the appropriate carrier by the Reinstatement Team within 24 hours of receipt.

Did You Know?

- Most reinstatements require that all premiums owed have been paid.
- Exception reinstatements may be processed prior to payment of premiums, but are tracked to ensure that premiums are remitted. The HR Office is contacted if premiums are not remitted.

Emergency Reinstatement Process

An Emergency Reinstatement normally takes approximately 1-2 hours to complete.

- 1. Participant contacts the People First Service Center to notify of coverage issue.
- Specialist researches to determine cause of coverage issue and determines if coverage can be reinstated at this time.
 - If yes, continue.
 - If no, specialist explains reason coverage can not be reinstated at this time.
- 3. Specialist transfers call to the Reinstatement Team for immediate processing.
- 4. Reinstatement Team completes Reinstatement Request form and faxes immediately to the appropriate carrier.
- 5. Reinstatement Team contacts carrier to confirm receipt of request and verify emergency reinstatement has been completed.
- 6. Reinstatement Team notifies employee, if requested, that coverage has been reinstated.

NOTE: If the participant is at a health care facility, s/he will be contacted there.

Exception Emergency Reinstatement Process (Employee and/or Employer Premiums Are Owed)

When there is an immediate medical need, but premiums are owed, the following Exception Process can be used by the University HR Office.

 The University HR Office sends an email to <u>eer.process@convergys.com</u> stating that there is an immediate medical need and that all required premiums (employee and employer portions) will be submitted through their normal premium submission process.

NOTE: If the employee contacts People First, s/he is referred to the University HR Office if premiums are owed.

- 2. The Reinstatement Request is then processed as an exception following the Emergency Reinstatement procedures.
- 3. The requesting HR Office is notified by email once reinstatement has been completed.