

Employee Benefits Division Policy Memorandum

Number: Policy Memo 147

Date Issued: January 11, 2022

Subject: Waiving Late Enrollment Waiting Periods When One or More Dependents Experiences a Qualifying Event

PURPOSE:

To clarify that Late Enrollment Waiting Periods are waived for an employee or retiree when they request to newly enroll in coverage or add previously eligible dependents to existing coverage coincident with a dependent becoming newly eligible.

BACKGROUND:

With the publication of Policy Memo 145 in 2018, the Employee Benefits Division (EBD) altered its policy on adding previously eligible dependents to existing family coverage. Prior to 2018, enrollees with family coverage could add their previously eligible dependents to coverage at any time, and the dependent would not be subject to a late enrollment waiting period. With the publication of PM-145, EBD imposed a waiting period for all previously eligible dependents, regardless of whether the enrollee was carrying individual coverage or family coverage at the time of the request. This was deemed more equitable since it did not favor enrollees with family plans over enrollees with individual plans.

This change has created questions on how waiting periods should be applied for an employee or retiree who requests to enroll in coverage or add previously eligible dependents to existing coverage when one of their dependents is newly eligible (or was previously eligible but experiences a qualifying event to newly enroll, such as a loss of other coverage).

POLICY:

Late enrollment waiting periods are to be waived when the timely request for coverage coincides with the addition of a dependent who experienced a qualifying event to newly enroll in coverage without a waiting period. This policy applies to new enrollments in coverage, changes from individual to family coverage, or the addition of dependents to existing family plans, and the policy extends to all New York State Health Insurance Program (NYSHIP) enrollees, including employees and retirees of New York State, Participating Agencies, and Participating Employers. This could be a newly eligible dependent, such as a newborn child or a new spouse, or a previously eligible dependent who experienced a qualifying event that allows them to enroll in coverage without a waiting period, such as a loss of other coverage. All requests for coverage must be made within 30 days of the qualifying event. Requests made more than 30 days after the qualifying event will be subject to late enrollment waiting period rules.