



Enrollments and Cancellations

We recognize that it can be very confusing navigating through all of the various rules and regulations with respect to group health coverage eligibility. This is a brief reminder about the general rules for enrolling and cancelling members and dependents.

Open Enrollment Period

During your group's annual open enrollment period, current employees and/or their dependents are provided the opportunity to enroll, cancel, or change products (*if the group is able to offer more than one product – available for groups over 20*) to be effective on the group's renewal date.

Benefit elections (including waiver of coverage) remain in effect throughout the year, unless the applicant experiences what the Internal Revenue Service (IRS) defines as a "change in family status." If your employee has a change in family status, they can change certain benefit elections without having to wait until the next open enrollment period.

Life Status Changes

Examples of family status changes or life status changes are as follows:

- marriage;
- divorce or legal separation;
- birth or adoption of a child;
- death of spouse or child;
- loss of coverage through a spouse; or
- coverage becoming available through a spouse due to a new job or the spouse's open enrollment period.

Effective Dates

Group Level:

- Group Enrollment and Group Changes - 1st of the month
- Group Terminations - Last day of the month

Member Level:

- New Employee Enrollments – Date of eligibility, usually the 1st of the month
- Current Employee/Dependent Enrollment (due to life status change) - First of the month **(however, the change must be reported to the Pennsylvania Medical Society Insurance Agency/Highmark within 31 days of the life status event, or change cannot be made until open enrollment)**
- Termination of Employee/Dependent - Date chosen by group (if timely notice is sent).
- **Retroactive terminations (adds and terminations) cannot exceed the current month less 60 days.**

Billing and Payment for Adjusted Membership

Please always pay as billed, even if the practice has made or is making changes that will ultimately affect the group's invoice. Highmark Blue Shield's invoicing system automatically credits/charges adjustments as soon as the change is recorded within its system.

For further clarification of the rules regarding enrolling and terminating dependents, please contact the Pennsylvania Medical Society Insurance Agency at (866) 441-2392.