

Petition to Add Frequently Asked Questions

Please read the information below carefully before completing a Petition to Add form.

If I lose coverage under another insurance policy, can I enroll in the school's plan?

Yes, if you waived the Student Health Insurance Plan and then lose coverage under that plan due to a qualifying event (see specific question below) you may submit a Petition to Add form. Make sure you read the form carefully as it contains very specific information on the Petition to Add process, including required documentation to show proof of loss. We will need to confirm your plan eligibility with your school before processing your request. Petition to Add forms are processed within 5-7 business days after confirming plan eligibility with your school.

Am I eligible to Petition to Add?

You need to meet the definition of your plan's eligibility statement which you can find in your school's FAQ or in the plan brochure. To access these documents, click the "My Benefits and Plan Information" located on the left-hand side of this homepage.

Students who enroll on a voluntary basis are not eligible to petition to add and will need to wait until the enrollment period for the next plan coverage period in order to purchase coverage.

What is considered a qualifying event?

- Reaching the age limit of another health insurance plan (**Example: turning Age 26**)
- Loss of health insurance through a marriage or divorce
- Involuntary loss of coverage through my parent/guardian's health insurance plan
- Involuntary loss of coverage through my employer

What other information do I need to submit with the Petition to Add form?

You must include documentation from your insurance company (for example a letter on the company's letterhead or Confirmation of Coverage form) confirming your loss of coverage and indicating your last date of coverage. The following are supporting documentation requirements:

- Must have the student's full name
- Must have the last date of your coverage (termination date)
- COBRA eligibility letters can only be accepted if the letter states the student's full name and termination date. **A COBRA letter is not an official termination letter. COBRA eligibility letters are sent to you prior to losing coverage.**

Also please note the following:

- Supporting documents need to be in PDF format; they cannot be in Word doc or email format for authenticity reasons.
- Screenshots will not be accepted.

Will I have a break in coverage?

You will not have a break in coverage if the Petition to Add form and applicable documents are received within 31 days of your qualifying event. If the Petition to Add form and required documentation are not received within 31 days of your qualifying event, the effective date will be the date this form and applicable documentation are received at Gallagher Student Health.

Will the premium be pro-rated?

The premium is not pro-rated. Your plan has designated coverage periods and the premium you pay is determined by the coverage period in which the date of your Qualifying Event occurs. You will be responsible for paying the full premium for the coverage period.

Please reference the example below (your school's dates may be different):

Coverage Plan Effective Date	Date of Qualifying Event	Applicable Premium
Annual: 8/15/19-8/14/20	11/16/19	Annual Premium
Spring Semester: 1/15/20-8/14/20	4/5/20	Spring Semester Premium

Please refer to the brochure or the Frequently Asked Questions under 'My Benefits and Plan Information' for the effective dates of each coverage period and the applicable premium for each coverage period. Once your petition has been processed, coverage cannot be cancelled except for eligibility reasons.



Brown University Student Health Insurance Plan Notification of Qualifying Event

BROWN

(Please print clearly)

Student Name _____ **Brown Banner ID** _____

Last Name First Name

Address _____ **Date of Birth** _____ **Gender** _____

Campus Box # City State Zip Code (mm/dd/yyyy) (male or female)

Telephone Number _____ **E-mail Address** _____ **Student Status** _____

(area code) (undergraduate, medical, or graduate student)

Qualifying Events

Once the waiver deadline has passed, there are a few situations that allow students to change their status in the student health insurance plan. These situations are called Qualifying Events and include the following:

After initially waiving the student health insurance plan, a student can request to add coverage if their current coverage is lost due to:

- Reaching the age limit
- Policyholder's death
- Change in employment status
- Divorce or Marriage

There will be no pro-rata of premium for students whose request to add coverage is approved. The full premium for the period of coverage in which the qualifying event occurs will be charged.

If enrolled in the student health insurance plan, a student and/or dependent can request to terminate coverage if the student and/or dependent becomes eligible for coverage due to:

- A change in employment status
- Marriage
- Initial dependent eligibility through a change in a parent/guardian's employment status
- Student's dependent departure from the U.S.

There will be a pro-rata refund of premium for students whose request to terminate coverage is approved.

If you have experienced a qualifying event and want to submit a request to add or terminate your coverage, you must complete this form and return it along with the required additional documentation to Gallagher Student Health at the email address below within 31 days of the qualifying event. **If this form is not received within 31 days of the qualifying event, your request will be denied.** If your request is approved, your enrollment date or your termination date will be the date your coverage changed due to your qualifying event. Additional documentation will be required when the change in coverage date does not coincide with the date of the qualifying event.

Qualifying Event Request: Add Coverage _____ Terminate Coverage _____ Date of Qualifying Event _____

Briefly explain the qualifying event: _____

Required Documentation The required documentation must be applicable to the qualifying event. Please attach a copy of the appropriate documentation.

- Certificate of marriage, divorce or death when applicable
- To add coverage, a letter from the current insurance carrier or the employer's Benefits Office must be submitted stating the reason for the end of the policy and the termination date.
- To terminate coverage, a letter from the employer's Benefits Office must be submitted stating the student has become eligible for coverage and the effective date of coverage, or stating that due to a change in employment or marital status, the employee has become eligible for employee and dependent coverage and the effective date of coverage.

This form will not be processed without the appropriate documentation.

Student's Signature _____ **Date** _____

Please email completed form to: EnrollmentTeam@gallagherstudent.com