

Frequently Asked Questions – Waiver of Medical Coverage

1. What is the waiver of medical coverage policy?

Employees have the ability to waive medical coverage starting on July 1, 2017. All employees may waive medical coverage even if you have an offer for the full employer contribution towards medical coverage. You can waive coverage by giving SEGIP a completed [Waiver of Medical Coverage form](#) and acceptable proof of other coverage within your enrollment period.

If you have partial or no employer contribution you can waive coverage by following the directions included in your enrollment packet. You do not need to complete the waiver form or show proof of other coverage.

2. When can I waive my medical coverage?

Any new hire or existing employee who is eligible for the full employer contribution towards medical coverage may choose to waive it at the time of initial enrollment. If you are currently enrolled, you may waive medical coverage during each annual Open Enrollment or upon a qualified life event.

3. How do I waive medical coverage?

How you waive your medical coverage will depend on the employer contribution you receive. Check with your agency HR department if you do not know the contribution level you receive.

- Full employer contribution: You must submit a completed [Waiver of Medical Coverage form](#) and acceptable proof of other coverage to SEGIP within your enrollment period.
 - Annual Open Enrollment: The completed Waiver of Medical Coverage form and proof of other coverage must be submitted during Open Enrollment.
 - Qualified Life Event: The completed Waiver of Medical Coverage form and acceptable proof of other coverage to SEGIP within 30 days of the qualified life event.
- Partial or no employer contribution: Follow the directions in your enrollment materials. You will not be required to complete a form or provide proof of other coverage.

4. Must I provide proof of other coverage if I receive partial or no employer contribution for my medical coverage?

No. Proof of other coverage and a waiver form are only required from employees who receive the full employer contribution.

5. Is medical coverage the only benefit that requires proof of other coverage to be waived?

Yes, medical coverage is the only insurance benefit that may require proof of other coverage in order to waive it. No proof of other coverage is needed to waive dental or the other optional coverages.

Remember that dental coverage is offered every other Open Enrollment and that enrolling in other optional coverages after your initial enrollment period requires evidence of insurability (proof of good health).

6. What other coverage will be accepted?

To waive coverage you must have a medical coverage (a health plan) in place. Examples of medical coverage that will count include:

- Group health plans sponsored by an employer or other entity such as a trade group
- Veterans Affairs care
- TRICARE
- Part A and/or Part B of Medicare
- Indian Health Services coverage or coverage from a tribal organization
- Public programs

Examples of other coverages that are not accepted include:

- Health reimbursement account (HRA) or a health savings account (HSA) that are not paired with a high deductible health plan (HDHP)
- FSA (flexible saving account)
- Disability coverage
- Long-term care insurance
- Automobile coverage
- Other insurance coverage that does not primarily cover both hospital and medical costs

7. What proof of other coverage will be accepted?

Your proof must be an official document of the coverage provider demonstrating you have acceptable medical coverage at the time of the waiver. Some options are:

- Other group coverage (including another employer): Letter on that employer's/group's letterhead, dated and signed by a company official within the last 30 days.
- VA care: A copy of your membership card.
- Medicare coverage: A copy of your membership card showing both Parts Medicare A and B effective dates.
- Medicaid: Official Medicaid letter dated within the last 30 days.
- TRICARE: [Official proof of TRICARE Coverage](#) dated within the last 30 days.
- Your spouse or parent who is enrolled in medical coverage offered through SEGIP: Provide the name and employee ID number of the employee who will cover you on the Waiver of Medical Coverage form. SEGIP will verify your enrollment.

If you choose to waive your state employee medical coverage it is up to you to ensure the other coverage is in effect and adequate for your needs.

8. Once I have waived medical coverage, how often do I need to show proof of other coverage?

You will be required to show proof of other coverage each year during Open Enrollment beginning in the fall of 2018.

9. If I waive medical coverage, will I be able to enroll in SEGIP administered medical coverage at a later date?

Yes. If you waive your state-sponsored employee medical coverage and later decide you would like to enroll in the state's health plan, you are able to do so during Open Enrollment or upon a qualified life event.

You can see a full list of qualified life events in the SEGIP [Summary of Benefits](#) (see Special enrollment periods) or in [Your Employee Benefits booklet](#) (see Adding, canceling and changing coverage). If you have any questions about enrolling or what qualified life events, the SEGIP staff is happy to assist.

10. Will I automatically be enrolled in medical coverage if I do not submit both the Waiver of Medical Coverage form and proof of other coverage on time?

Yes, all employees eligible for the full employer contribution must submit the [Waiver of Medical Coverage form](#) and acceptable proof of other coverage by the deadline or they will be automatically enrolled in single medical coverage.

11. What is my deadline?

Your deadline is a specific date and is determined based on your circumstances:

- As a new hire, your deadline is the date shown on your enrollment form or 35 days from the date printed on the bottom of the enrollment form, whichever is later.
- To waive during Open Enrollment the [Waiver of Medical Coverage form](#) must be in the SEGIP office during the Open Enrollment period. Waivers outside the Open Enrollment period will be returned.
- If you are newly eligible for the full employer contribution you have 30 days from the date of your eligibility.

In all cases your waiver form must be in the SEGIP office by 11:59 p.m. on your deadline. You may submit your documentation electronically, by mail, fax, or in person. SEGIP contact information is at the bottom of this page.

12. What is a qualified life event?

A qualified life event is a specific change in your situation that can make you eligible to enroll in health insurance outside the annual Open Enrollment, such as getting married or the birth of a child.

You can see a full list of qualified life events in the SEGIP [Summary of Benefits](#) (see Special enrollment periods) or in [Your Employee Benefits](#) (see Adding, canceling and changing coverage). The SEGIP staff is available to assist you with questions about enrolling and qualified life events.

13. If I waive my medical insurance do I still qualify to make an election for the Medical Dental Expense Account (MDEA)?

Yes. You are eligible to participate in the MDEA even if you are not enrolled in medical coverage.

14. Am I eligible for the state's retiree medical coverage if I waived my medical coverage and am not enrolled in the Advantage Plan at the time of my retirement?

No. You must be enrolled in medical coverage at the time of your retirement to continue medical coverage as a retiree.

15. Where can I find more information?

Contact SEGIP to obtain more information about waiving your medical coverage:

Phone: 651-355-0100

Email: segip.mmb@state.mn.us

Website: <https://mn.gov/mmb/segip/>

Address: 400 Centennial Office Building
658 Cedar Street
Saint Paul, Minnesota 55155