



contract), he or she will no longer be eligible for coverage under your plan (unless he or she is handicapped).

Approximately six weeks prior to your dependent reaching your plan's maximum age, we will send

you a letter reminding you of the approaching coverage termination date.

If your coverage is through an employer - sponsored health plan, don't forget to inform your employer of any membership changes in your family.

COVERAGE OPTIONS FOR YOUR DEPENDENT AFTER LEAVING YOUR PLAN

If your dependent is no longer eligible for coverage under your plan, and your employer is subject to COBRA, you may apply for continuation of coverage for your dependent under the group contract if you do so within 60 days of your dependent's loss of eligibility. Please contact your employer to receive application instructions.

If COBRA coverage is not available, your dependent may apply for Blue Cross and Blue Shield of Nebraska conversion coverage or other individual health coverage.

Application for conversion coverage must be made within 31 days of the dependent's 19th birthday or loss of eligibility.

If you have any questions about the Dependent Eligibility Program, please call our Member Services Department at the number shown on the back of your Blue Cross and Blue Shield of Nebraska I.D. card.

To apply for conversion coverage or inquire about other individual health insurance plans that may be available, please contact:

**Blue Cross and Blue Shield of Nebraska
Individual Marketing Department
(402) 343-3330 or
toll-free 1-800-642-8980**

Please note: Blue Cross and Blue Shield of Nebraska individual (nongroup) coverage is available to Nebraska residents only.



**BlueCross BlueShield
of Nebraska**

An Independent Licensee of the Blue Cross and Blue Shield Association.

Form 92-040 07/11/08

The Dependent Eligibility Verification Program



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Your Blue Cross and Blue Shield of Nebraska membership provides you and your covered family members with important protection against the high cost of health care.

When it comes to your dependent children, we wanted you to be aware of some “milestone” dates regarding their coverage under your health plan:

- What happens when your child turns 18
- What happens when your child turns 19
- How we verify your child’s student status every year
- What happens when your child reaches your plan’s maximum age for dependents
- What coverage options are available

If you have any questions, please contact our Customer Service Center at the telephone number shown on the back of your Blue Cross and Blue Shield of Nebraska I.D. card.

WHAT HAPPENS WHEN YOUR CHILD TURNS AGE 18

You’ve probably heard of HIPAA, which is the acronym for the Health Insurance Portability and Accountability Act of 1996. HIPAA governs how insurance companies like

Blue Cross and Blue Shield of Nebraska use and disclose our subscribers’ Protected Health Information (PHI).

Until he or she turns 18, we communicate directly with you regarding claims, benefit information and other types of PHI pertaining to your child.

When your child reaches the age of 18, this will change. After that time, we will be unable to discuss your dependent’s claims or other PHI with you unless we have a signed Authorization for Release of Protected Health Information form on file allowing us to do so. We will send all claim documents pertaining to your dependent – e.g. Explanation of Benefits forms – directly to your dependent.

Shortly before his or her 18th birthday, we will send both you and your dependent letters reminding you of this change.

Go to the Members section of www.bcbsne.com to download the Authorization for Release of Protected Health Information form.

WHAT HAPPENS WHEN YOUR CHILD TURNS AGE 19

Once your dependent reaches age 19, he or she can continue to be covered under your membership until your plan’s dependent age maximum as long as he or she is unmarried and a full-time student.

Around the time of your dependent’s 19th birthday, we will send you a letter asking for confirmation that he or she continues to be an unmarried full-time student. It is very important that you complete the information we need and return this letter to us as soon as

possible, because if we don’t hear from you, coverage for your dependent will be terminated and claims will be denied.



ANNUAL STUDENT ELIGIBILITY VERIFICATION MAILING

Every July, we mail to all our members with dependents age 19 and older to confirm the dependent’s continued

full-time student status. New members with dependents age 19 and older who enroll after the July mailing will also be sent a student status form to complete and return.

To maintain your dependent’s coverage under your plan, it’s important that you complete the form we send you and return it to us as soon as possible. If we don’t hear from you, coverage for your dependent will be terminated and claims will be denied.

ONCE YOUR DEPENDENT REACHES YOUR PLAN’S MAXIMUM AGE LIMIT

Once your dependent ceases to be an unmarried

full-time student or reaches your plan’s maximum dependent age limit (it varies, so please refer to your Certificate of Coverage/ Summary Plan description booklet or

