



Regence BlueCross BlueShield of Utah is an Independent Licensee of the Blue Cross and Blue Shield Association

PORTABILITY STATEMENT

What is portability?

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) provides rights and protections for participants in group and individual health plans. In many cases, eligibility is guaranteed for individuals and their covered family members who meet the qualifications for obtaining coverage.

Under HIPAA, pre-existing conditions that may be excluded for a period of time are those for which medical advice, diagnosis, care or treatment was recommended or received within the 6-month period before your enrollment date. (Your enrollment date is your first day of coverage, or if there is a waiting period to get coverage, the first day of the waiting period). Under group health plans, pre-existing condition waiting periods cannot be applied to pregnancy regardless of whether the woman had previous health coverage.

Am I eligible for coverage under a group health plan

In general, a group health plan is a benefit plan established by an employer that provides medical care to its employees (both current and former) and/or their dependents. If you meet the eligibility requirements set forth under the group health plan (i.e. employee, work hours, etc), you are eligible for coverage under the plan.

Am I eligible for coverage under an individual health plan?

If you meet the following qualifications, eligibility for individual coverage under either an individual policy issued by an insurer or a policy issued by the Utah Comprehensive Health Insurance Pool (HIPUtah) is guaranteed:

- Had eighteen (18) months or more of creditable coverage; and
- Had his/her most recent Creditable Coverage under a group health plan, government plan, or church plan (or health insurance in connection with any of these plans); and
- Is not eligible for coverage under any group health plan, Part A or B of Medicare or Medicaid or any successor program; and
- Does not have other health insurance coverage; and
- Did not lose his/her most recent coverage as a result of fraud or intentional misrepresentation of material fact by that plan's plan

sponsor, or as result of the plan sponsor's failure to pay premiums or contributions in terms of the coverage; and

- Elected and exhausted the maximum continuation period of any COBRA continuation coverage or state extension program (Utah mini-COBRA) which was offered to him/her.
- Submits application for coverage within 63 days after the day his/her group health coverage or continuation coverage ends.

Note: It is the responsibility of the Member seeking credit for prior coverage to provide Regence BCBSU the applicable certification(s) of coverage from prior plans. Regence BCBSU will assist the Member in obtaining certifications of prior coverage if necessary.

For further information on our group and individual/family health plans, you may either view them on this Web site or contact our Sales Department.

- Group Sales 1 (801) 333-2520 or toll free 1 (800) 624-6519
- Individual Sales 1 (801) 333-2510 or toll-free 1 (800) 662-9585