

## Enrollment after Waiving

---

Employees or eligible dependents who have previously waived coverage may enroll in PEBB coverage during a PEBB annual open enrollment period without providing “proof of loss”. The effective date of coverage would be January 1 of the following year.

In addition, the employee may re-enroll after waiving coverage if the employee has a qualifying event that triggers a special open enrollment. See the special open enrollment section of this manual for an explanation.

Re-enrollment must be requested within **60 days** of the event that triggered the special open enrollment. Evidence of the event that creates the special open enrollment may be required. Refer to WAC 182-12-128.

Outside annual open enrollment, agencies should **not** key the enrollment/reinstatement in the insurance system. Copies of the Enrollment/Change form and the proof of loss should be sent to the PEBB program.

- The employee or eligible dependent must provide “proof of loss” of other comprehensive group medical coverage. Proof of loss must be either a letter from the insurance company or the employer identifying the:
  - Individual(s) losing coverage
  - Effective date of coverage
  - Termination date of coverage
- Send the Employee Enrollment/Change form and proof of loss to: HCA, PEBB Outreach and Training, Mail Stop 42684, or fax to 360-923-2608.
- If the individual’s past coverage was through PEBB, send the enrollment form to: HCA, PEBB Outreach and Training, Mail Stop 42684, or fax to 360-923-2608. Proof of loss is not required.

**Approval:** PEBB Outreach and Training will enter the enrollment into the insurance system, retroactive to the first of the month following the loss of coverage.

**Denial:** PEBB Outreach and Training will return the enrollment form to the agency stamped “Disapproved”.