



ON THE **Move**



**QUICK CONNECT**

# 60-day deadline for all group coverage changes

Here's a quick reference guide and reminder of our policies for changing your group coverage. All you need to remember is **60-days**: the deadline for all changes to coverage.

## Changes in coverage

We must receive all requests for changes in coverage **within 60 days after the date of the event regardless of method of submission (Group Administrative Form, group portal or through your broker)**. What happens if we don't receive a request for change in coverage within 60 days? The subscriber, spouse or dependent will need to wait until the next Open Enrollment period.

Here are reasons for a Special Enrollment Period (SEP), by Qualifying Life Events (QLE):

- New hires
- Marriage
- Birth of a child/newborns
- Stepchildren
- Adoption/legal guardianship
- Involuntary loss of coverage
- Qualified medical child support order (QMCSO)
- Change in family status or amount of coverage
- Employee loses eligibility under spouse's coverage

(All, except new hires and birth of child, need supporting documents.)

## Additions (new hire)

All coverage additions must be received **with-in 60 days of the effective date**. If the change is not received by Alliant within 60 days, the subscriber, spouse or dependent will need to wait until the next Open Enrollment period or QLE to enroll in coverage.

## Termination

- Notify Alliant immediately of an employee termination due to coverage ending at midnight of the termination date.
- When we are notified of a termination after 60 days, we will retroactively cancel coverage to the requested date but we will only refund two months of premium.

**We encourage you to review your invoices for accuracy to make sure that your requested changes are reflected.**

## Questions?

For additional information, please contact your Broker/Client Relations Representative at 877-668-1015