

Benefits Services University Payroll and Benefits Office of Business and Financial Services

# What I Need to Know About My Insurance Coverage & Payment of Premiums While on Leave

State of Illinois Employees Group Insurance coverage administered by Central Management Services (CMS) provides for coverage while employees are on a leave of absence in two categories, State Paid or Non-State Paid depending on type of Leave.

**State-paid eligible** means the state will continue to pay the same portion of the premium as when the employee was active on payroll. An exception is made for part-time employees on Occupational Disability in which case the employee must be treated the same as a full-time employee for insurance purposes.

**State-paid ineligible** means the employee is required to pay 100% of the state and employee portion of the premium.

State Paid Leaves Employer Paid Premiums	Maximum Coverage Period	Non State Paid Leaves Employer Does Not Pay Premiums	Maximum Coverage Period
FMLA	12 weeks	Personal Leave	24 months
Educational Leave/Sabbatical	24 months (Lifetime)	Seasonal Layoff except during the months of June, July and August	Part-time premiums required all year
Dock-Suspension ≤ 30 days	30 days	Dock Suspension > 30 days	23 months
Disability/w SURS Benefit	None	Permanent Layoff – Life only	12 months
Disability/w No SURS Benefit	24 months	Family Military	1 month
Workers Compensation	None	Family Leave – non medical or FMLA leave expired	12 months
University Annual Summer Break for Faculty and Civil Service Employees (June, July, August)	3 months		
Military Leaves	None		

#### **State Paid Leaves: Insurance Options**

#### 1. Make No Changes

- 2. Opt-Out of Heath/Dental/Vision (full-time EE) by providing proof of other non-State of Illinois group insurance coverage.
  - Employees can retain their opt-out status after returning to work as long as insurance coverage continues.
- 3. Waive Heath/Dental/Vision (part-time EE), but are ineligible to be a dependent on a spouse's State of Illinois group insurance coverage.
  - a. Employees can continue to waive coverage as long as they remain part-time.
- 4. Terminate Dependent(s) Coverage:
  - a. Employees and their dependents must be re-enrolled in health/dental, and, or life, using NESSIE prior to or within 60 days of returning to work. (See rules and policies below)
  - b. Employees who fail to re-enroll will be defaulted into the Quality Care Health/Dental Plans with no dependents or optional life coverage.
- 5. Reduce or terminate Employee or Dependent Optional Life Insurance.
  - a. Statement of Health approval required for reinstatement of coverage.
- 6. Health Carrier changes are permitted only when employee is moving out of their HMO/OAP coverage area, e.g. out of state or country.

## **Non-State Paid Leaves: Insurance Options**

- 1. Make No Change.
- 2. Opt-Out of Heath/Dental/Vision (full-time EE) by providing proof of other group insurance coverage.
  - Employees can retain their opt-out status after returning to work as long as insurance coverage continues.
- 3. Terminate all coverage without proof of other insurance.
  - a. State insurance for monthly employees will be effective the 1<sup>st</sup> day of the month following the return to work date.
  - b. State insurance for bi-weekly employees will be effective on either the 1<sup>st</sup> or the 16th day of the month following the return to work date.
- 4. Waive Heath/Dental/Vision (part-time EE).
- 5. Terminate Dependent Health/Dental/Vision, and, or Life coverage.
- 6. Reduce or Terminate Employee or Dependent Optional Life Insurance (Statement of Health approval required for reinstatement).
- 7. Employee may be eligible to become a dependent on a State of Illinois-Employed spouse's insurance plan until the employee physically returns to work.

### **CMS Leave Rules and Policies:**

- 1. The effective date of a coverage change will be the date the Leave begins or the date of the request.
  - a. Changes made on or before the first day of the Leave will be effective on the first day of the Leave.
  - b. Changes made within 60 days after the Leave begins are effective the date of the request.
- 2. Employees, full or part time, who terminate coverage, must contact the Urbana campus UPB office prior to their return to work to re-enroll or go to NESSIE make election. Employees who fail to re-enroll will be defaulted into the Quality Care Plans with no dependent coverage.
- 3. Full-time and part-time academic (monthly paid) employees eligible for coverage during the academic summer break will **automatically** receive group insurance through 8/31.
  - If the employee does not wish to continue coverage through 8/31, they may request termination of coverage.
  - b. The effective date of the termination would be the date of the request or a future date.
- 4. Monthly billing statements are mailed out by CMS to employees' mailing addresses on file.
  - a. Failure to submit payment by the due date may result in a current termination of coverage and/or the filing of an involuntary withholding order to collect the unpaid premium.
- 5. Employees are required to update MAILING addresses using NESSIE.
- 6. Contact the Urbana Campus UPB Fiscal Control and Management office to report your return to work date by contacting Marion Feller at 217-244-1047, email <a href="mailto:mfeller@uillinois.edu">mfeller@uillinois.edu</a> or Margaret Caston at 217-265-6342, email <a href="mailto:caston@uillinois.edu">caston@uillinois.edu</a>.
- 7. Employee must be actively at work to participate in Dependent Care Assistance Plan.
- 8. Employees must be actively at work to participate in the Medical Care Assistance Program.
  - a. A COBRA election can be made to continue this plan.
  - b. Contributions may be pre-tax if the Urbana campus UPB office is notified before the last paycheck otherwise post-tax contributions would be sent directly to CMS.
  - c. Employees may re-enroll in either plan when employee returns to work.