

**DEPARTMENT OF ADMINISTRATIVE SERVICES, OREGON
EDUCATORS BENEFIT BOARD**

DIVISION 40

ENROLLMENT RULES

111-040-0050

Declination of coverage

As used in this section:

“Opting out of coverage” means that an individual elects not to enroll in a medical plan and is eligible to receive a portion of the cash contribution or other type of remuneration as provided for under a collective bargaining agreement, **documented district policy**, or employment contract.

“Waiving benefits” means that an individual elects not to enroll in any of the benefit plans available under the OEGBB-sponsored benefits program and is not eligible to receive any portion of a cash contribution or other type of remuneration.

(1) Unless otherwise specified in a collective bargaining agreement, formal district-wide policy or employment contract in effect on July 1, 2008, an eligible employee may opt out of the OEGBB-sponsored medical benefit plans. Eligible employees electing to opt out must:

- (a) Maintain coverage under another employer-sponsored group medical benefit plan;
- (b) Meet the requirements of the district opt out program in which they are participating.
- (c) Submit their election to opt out through the OEGBB benefit management system; and
- (d) If requested, provide proof of current coverage under another employer-sponsored group medical benefit plan;

(2) Eligible employees electing to opt out of the OEGBB-sponsored medical benefit plans may enroll in the dental and vision benefit plans.

(3) The level and type of funds and allowances retained by eligible employees and districts as a result of opt out programs are determined through collective bargaining agreements and formal district-wide policies.

(4) A participating district will provide OEGBB with a written description of its opt out program upon request.

(5) An eligible employee may waive **medical, dental and vision benefits provided under the OEGB-sponsored benefits program.**

(6) Elections to opt out of the medical benefit plans or waive benefits **must** be made at the time of hire, when initially meeting eligibility, during an open enrollment period, or following a midyear benefit plan change.

(7) **An eligible employee previously opting out of coverage or waiving benefits may enroll in benefit plans consistent with a midyear benefit plan change or during an open enrollment period.**

(a) Coverage for previously eligible employees or a previously eligible dependent enrolling in the dental and/or vision plans during an open enrollment period will be limited to routine and preventive care for the first 12 months and subject to a 24-month waiting period for orthodontia coverage.

(b) Eligible employees who enroll in the dental or vision plans, or add previously eligible dependents to the dental and vision plans, due to an involuntary loss of other coverage will not be subject to waiting periods.

Stat. Auth.: ch.7, OL 2007

Stats. Implemented: section 3, chapter 7, Oregon Laws and section 13, chapter 7, Oregon Laws 2007