



Policy Number: THTELG201

# Benefit Auto-Enrollment V2.0

ENROLLMENT & EXTENDED WAIVER

POLICY EFFECTIVE DATE - 10/01/2021

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## 1.0 Purpose

The main objective of the Teachers Health Trust's auto-enrollment policy is to streamline the process for eligible Clark County School District (CCSD) employees who do not select a health benefit plan within their initial hiring period. This policy not only outlines the procedure for automatic enrollment into a predetermined health benefit plan but also explains how to change or cancel these benefits.

## 2.0 Policy Scope

Eligible educators from the Clark County School District are afforded a grace period of 31 days from their official hire date to make an informed decision about their health coverage plan with THT. If an employee does not make a selection within this window, they will be automatically enrolled in the Signature Medical Health Plan, Dental HMO Plan and Vision Standard Plan. It's essential to note that for these auto-enrolled individuals, their coverage will commence on the first day of the month subsequent to their hiring date.

## 3.0 Process

### 3.1 New Hire Communication

Upon the induction of new educators, CCSD will share a comprehensive list of these individuals with the THT team. This proactive approach allows THT to promptly reach out and provide the new hires with all relevant information concerning their health coverage options, associated premium dues, and the specific methods of enrollment. Additionally, during the orientation process, new hires will be briefed about the stipulations of the "Auto-Enroll Policy."

### 3.2 Auto-Enroll Communication

For employees who find themselves auto-enrolled due to lack of initial communication, the THT team will not leave them in the dark. These members will be provided with a detailed communique about possible modifications to their current plan. They will have a "special extended waiver period" spanning 60 days from their benefit's effective start date to make these changes.

### 3.3 Special Extended Waiver Details

To facilitate the aforementioned changes, a waiver form has been made readily accessible at [www.ththealth.org/forms](http://www.ththealth.org/forms).

### 3.3.1 Waive the Coverage:

Members who opt for this route can formally waive their coverage within the allocated extension period. As a gesture of goodwill, any premiums they've remitted during this timeframe will be reimbursed in the ensuing payroll. However, it's crucial for members to understand that if they utilize their benefit in any capacity after their official start date, they will forfeit the opportunity to waive their coverage.

### 3.3.2 Change the coverage

Members have the flexibility to amend their current coverage. Such modifications will be retroactively applied from the date their benefit commenced, which might lead to an adjustment in their premiums. During the special extended waiver period, members are entitled to make one such change. If they seek further modifications, they'll have to navigate the eligibility appeal process.

Members would have the choice to update their coverage in two scenarios:

- a) Choose a different benefit plan.
  - a. If a member wishes to select either Hospital Indemnity Supplement Plan or Signature Plan
  - b. Members will be able to
- b) Update their coverage level.
  - a. Member will be able to add dependents to their existing plan or Signature Plan if they have made a change suggested in 3.3.2 a).
  - b. Coverage update will be effective from benefit start date and premiums will be collected for the retro adjustment.
  - c. For all new dependents THT holds the right to validate their supporting document and reject the update if evidence not found to be appropriate.
  - d. Acceptable supporting documents can be found on THT website – [www.ththealth.org/members](http://www.ththealth.org/members)

## 4.0 About Auto-enrollment Benefits

For the benefit of clarity, employees who bypass the 31-day enrollment window will receive the following standard benefits:

1. Medical Coverage: Signature Medical Health Plan
2. Dental Coverage: Cigna Dental HMO Plan
3. Vision Coverage: VSP Standard Vision Plan
4. Life Insurance Coverage: Lincoln Financial \$50,000 Term Life Insurance

This choice will be reflected with a premium deduction of \$15.00 per paycheck as a subscriber only coverage.

*This policy is designed and applied to all THT members including but not limited to CCSD employees eligible for THT coverage. For any questions regarding this policy please reach out to [\(702\) 794-0272, option 8](tel:7027940272). THT reserves the right to update or amend any of the conditions with 30 days of prior notice.*

Version History		
Version Number	Description	Approved By
1.0	Original Document	THT Eligibility Team
2.0	Modification to medical plan	THT Eligibility Team

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Page: 2

