

Termination of coverage

When employees leave Providence Health Plan

There are several reasons why an employee may become ineligible for or decline group health insurance coverage. The employer and member are responsible for advising Providence Health Plan of any changes in eligibility, including when a family member becomes ineligible. Even in the absence of such notification, coverage will not continue beyond the last date of eligibility.

An employee's or family member's health insurance coverage will terminate on the earliest of any of the following dates:

- The date the group contract terminates. In such situations, it is the employer's responsibility to notify all members.
- The last day of any period for which required premiums were not paid.
- The date that any fraudulent information is provided by the group or a member or the date of any breach of contractual duties, conditions or warranties, as determined by Providence Health Plan.
- Dates specified in your group contract concerning when an employee retires or terminates employment with you, becomes ineligible for benefits, enters full-time military, naval or air service or disenrolls from Providence Health Plan.
- For a family member, the date the employee's coverage terminates or the first of the month following the date she or he no longer qualifies as an eligible family dependent.

Additionally, a member may be disenrolled if he or she commits acts of physical or verbal abuse that pose a threat to providers, to other members or to employees of Providence Health Plan. A member also may be disenrolled if he or she allows a nonmember to use his or her Providence Health Plan membership ID card to obtain services.

Certificate of creditable coverage

We send a Notice of Creditable Coverage to every member upon termination or disenrollment of Providence Health Plan coverage. Members may also receive these notices when they enroll or disenroll in COBRA coverage, or upon request.