

**43A.281 LIMIT ON TERMINATION OF DEPENDENT COVERAGE.**

(a) The commissioner of management and budget may not terminate the enrollment of a dependent in the state employee group insurance program as a result of a failure to submit documentation required under a dependent eligibility verification audit unless all of the following have occurred:

(1) at least 30 days before the proposed termination of a dependent's coverage, the commissioner has notified the covered plan member by mail of each type of required documentation that has not been submitted;

(2) at least 30 days before the proposed termination of a dependent's coverage, the commissioner has notified the covered plan member of the name, telephone number, and e-mail address of one or more employees of the Department of Management and Budget whom the covered plan member may contact regarding the proposed termination of the dependent's coverage;

(3) at least 30 days before the proposed termination of a dependent's coverage, the commissioner has notified the covered plan member of how the covered plan member may appeal a finding that a dependent is not eligible to continue in the program, and the appeal process has been completed; and

(4) if a covered plan member has demonstrated to the commissioner's satisfaction that it is impractical for the covered plan member to submit required documentation, the commissioner has provided the covered plan member an alternative compliance method that the commissioner has determined is a reasonable manner of proving eligible dependent status, and the covered plan member has not submitted documents required under this alternative method.

(b) This section expires on January 1, 2014.

**History:** 2012 c 290 s 66