

**31A-22-725 Special enrollment periods relating to Medicaid and Children's Health Insurance Program.**

- (1) A person is eligible to enroll for coverage under the terms of an employer's group health benefit plan if:
  - (a) the person is:
    - (i) an employee who is eligible, but not enrolled, for coverage under the terms of the employer's group health benefit plan; or
    - (ii) a dependent of an employee, if the dependent is eligible, but not enrolled, for coverage under the terms of the employer's group health benefit plan; and
  - (b) the conditions of either Subsection (2) or (3) are met.
- (2) Subsection (1) applies if:
  - (a) the employee or dependent is covered under:
    - (i) a Medicaid health benefit plan under Title XIX of the Social Security Act; or
    - (ii) a state child health benefit plan under Title XXI of the Social Security Act;
  - (b) coverage of the employee or dependent described in Subsection (2)(a) is terminated as a result of loss of eligibility for the coverage; and
  - (c) the employee requests coverage under the employer's group health plan no later than 60 days after the date of termination of the coverage described in Subsection (2)(a).
- (3) Subsection (1) applies if:
  - (a) the employee or dependent becomes eligible for assistance, with respect to coverage under the employer's group health plan under a plan described in Subsection (2)(a), including under a waiver or demonstration project conducted under or in relation to a plan described in Subsection (2)(a); and
  - (b) the employee requests coverage under the employer's group health plan no later than 60 days after the date the employee or dependent is determined to be eligible for the assistance described in Subsection (3)(a).

Enacted by Chapter 10, 2010 General Session