



STATE OF TENNESSEE GROUP INSURANCE PROGRAM

LEAVE WITHOUT PAY INSURANCE OPTIONS — STATE, UT AND BOARD OF REGENTS

State of Tennessee • Department of Finance and Administration • Benefits Administration
26th Floor, William R. Snodgrass TN Tower • Nashville, Tennessee 37243 • 615.741.3590/1.800.253.9981 • Fax: 615.741.8196

INSTRUCTIONS: Read the following information regarding your insurance options while on an approved leave of absence. Select an option, then sign, date and return this form to your agency benefits coordinator.

FAMILY MEDICAL LEAVE (FMLA)

- Maximum period of 12 weeks during a 12-month period. Leave is approved by the employing agency.
You will continue to pay 20% of the health premium through direct monthly billing once you are no longer receiving a paycheck.
If on approved FMLA, you cannot be placed on Leave Without Pay, Insurance Continued, until FMLA has been exhausted and you have been without pay for one full calendar month.
When all family medical leave has been exhausted, you must either return to work, request to suspend coverage or request to continue coverage and pay 100% health premium.

LEAVE WITHOUT PAY — INSURANCE SUSPENDED

- Maximum period of two years.
All programs are suspended including any optional life or dental.
You must request to suspend coverage by completing this form prior to going on an approved leave or being in a past due status.
Re-enrollment is not automatic. Within 31 days after returning to active employment you must complete an enrollment/change application to re-enroll (or 90 days if returning from military leave).
You may be eligible to enroll under spouse coverage as a dependent if your spouse is also an employee.
You will be subject to PPO and POS (out of network) six month pre-existing condition if returning to work after six months if a Certificate of Coverage for other health coverage is not provided.
Please refer to the Insurance Handbook for further information regarding reinstating coverage.

LEAVE WITHOUT PAY — INSURANCE CONTINUED

- Maximum period of two years.
You will be billed at home for 100% premium once you have exhausted FMLA and have been without pay for one full calendar month.
You can later suspend coverage if unable to continue to pay premiums prior to insurance terminating for non-payment or being in a past due status.
When returning to active duty, Benefits Administration must be notified to change the appointment type or you will continue to be billed at home and subject to a payroll deduction.
If insurance terminates for non-payment of premium, you must satisfy one of the special enrollment provisions or qualify through medical underwriting to re-enroll.

TO BE COMPLETED BY EMPLOYER

- Employee is on FMLA, but has been without pay for one full calendar month. Send monthly bill to home address effective
Employee exhausted FMLA on and has been without pay for the full calendar month of . They should begin paying 100% premium effective .

TO BE COMPLETED BY EMPLOYEE

Once I do not qualify for FMLA, have exhausted all leave and have been without pay for the entire month, I choose the following option regarding my insurance coverage. I acknowledge the guidelines set forth above and accept the terms and conditions contained therein.

- Request to Suspend Coverage to be effective
Request to Continue Coverage to be effective

Table with 4 columns: Employee Signature, Social Security Number, Employee ID (if known), Date. Row 2: Agency Benefits Coordinator Signature, Agency.

Completed form to be sent to Benefits Administration. Notify Benefits Administration when employee returns to work.