

EMPLOYEE ENROLLMENT and EFFECTIVE DATE OF COVERAGE

EMPLOYEE ENROLLMENT

A newly eligible Employee who enrolls for employee-only medical coverage when he first becomes eligible is automatically enrolled for Basic AD&D coverage, and he may also enroll for Voluntary AD&D, Voluntary Spouse AD&D and/or Dependent Voluntary AD&D insurance according to the benefit requirements. Amounts of coverage are set forth in the Schedule of Benefits and will become effective as follows:

Day of Enrollment	Insurance effective date if Employer supplements the benefits waiting period *	Insurance effective date if Employer does not supplement the benefits waiting period
On or before first day at work, provided the Employee submits an application and requests payroll deduction of the applicable premium for Contributory coverages, if any	Basic AD&D – the date the Employee becomes eligible. VAD&D – the date the Employee becomes eligible. Voluntary Spouse AD&D- the date the Employee becomes eligible. Dependent VAD&D– the date the Employee becomes eligible.	Basic AD&D – the first of the month following the end of the required waiting period. VAD&D – the date the Employee becomes eligible. Voluntary Spouse AD&D – the date the Employee becomes eligible. Dependent VAD&D - the date the Employee becomes eligible.
Provided the Employee's application and request for payroll deduction of the applicable premium for Contributory coverages, if any, are received in the institution HR/Benefits Office within 31 days of the Employee's first day at work.	Basic AD&D – the date the Employee becomes eligible. VAD&D – the first of the month following the date the enrollment form is received. Voluntary Spouse AD&D – the first of the month following the date the enrollment form is received. Dependent VAD&D– the first of the month following the date the enrollment form is received.	Basic GTL – the first of the month following end of the required waiting period. VAD&D – the first of the month following the date the enrollment form is received. Voluntary Spouse AD&D – the first of the month following the date the enrollment form is received. Dependent VAD&D – the first of the month following the date the enrollment form is received.
After 31 or more days of the Employee's first day at work	Basic AD&D – the date the Employee becomes eligible. VAD&D – must wait to enroll at the next annual enrollment or in conjunction with a qualified Change of Status. Voluntary Spouse AD&D – must wait to enroll at the next annual enrollment or in conjunction with a qualified Change in Status. Dependent VAD&D - must wait to enroll at the next annual enrollment or in conjunction with a qualified Change in Status.	Basic AD&D – the date the Employee becomes eligible. VAD&D – must wait to enroll at the next annual enrollment or in conjunction with a qualified Change of Status. Voluntary Spouse AD&D – must wait to enroll at the next annual enrollment or in conjunction with a qualified Change in Status. Dependent VAD&D- must wait to enroll at the next annual enrollment or in conjunction with a qualified Change in Status.
* Insurance effective date is reliant upon the Employee having met the Active Service definition of this Policy.		

DEFERRED EFFECTIVE DATE

An Employee must be in Active Service on the date his initial coverage or any increases in coverage are scheduled to begin. If he is not in Active Service on the date coverage would otherwise become effective and his absence is caused

by an Injury, illness or layoff, the effective date of any initial coverage or increased coverage will be deferred until the first day he returns to Active Service. An Employee will be considered in Active Service if he was actually at work on the day immediately preceding:

1. a weekend (except for one or both of these days if they are scheduled work days);
2. a holiday (except when such holiday is a scheduled work day);
3. a paid vacation;
4. any nonscheduled work day.

An Employee will be considered in Active Service if he is insured under the Prior Plan and is on an Employer approved leave of absence on the date immediately preceding the Policy Effective Date.

If a Dependent is hospital confined on the date his coverage would otherwise become effective, insurance will not become effective until the date the Dependent is no longer hospital confined. For the purposes of this provision, *no longer hospital confined* means the dependent has been discharged from a hospital, nursing home or other medical facility which provides skilled medical care.

CHANGE IN STATUS

An Employee who experiences a qualified Change in Status, may add or drop Voluntary AD&D amounts without providing Evidence of Insurability, provided the benefit change is consistent with the Change in Status. The Employee must submit the appropriate enrollment form(s) to his institution HR/Benefits Office within 31 days of the Change in Status.

CHANGE IN COVERAGE

Increases in coverage amounts may be made in accordance with the Change in Status provision or during a regularly scheduled Annual Enrollment period. No Evidence of Insurability will be required for changes in Voluntary AD&D or Dependent AD&D coverage changes.