

# Notice of Enrollment Rights

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The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that you receive notice of your enrollment rights under this Benefit Plan.

**Notice of Enrollment Rights:** If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may in the future be able to enroll yourself or your dependents in this Benefit Plan, provided that you request enrollment within 31 days after your other coverage ends (See Section A below).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents, provided that you request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption (See Section B below).

**Section A: *Special Enrollment Following Loss of Other Coverage*** - If you are declining coverage for yourself under this Benefit Plan because you have coverage under a plan obtained through your spouse's employer, or under COBRA or other continuation coverage obtained from a former employer, or under an individual health insurance policy that you purchase, you will be eligible to enroll in this Benefit Plan only if your coverage under that plan is terminated (except for non-payment of premiums).

If you are declining coverage for your spouse or other dependent because he/she/they are covered under a plan obtained through your spouse's employer, or under COBRA or other continuation coverage obtained from a former employer, or under an individual health insurance policy that you purchase, you will be eligible to enroll your dependent in this Benefit Plan only if their coverage under the other plan is terminated (except for non-payment of premiums).

**Section B: *Special Enrollment Upon Marriage, Birth, or Adoption of Dependent*** - If you decline coverage under this Benefit Plan and get married, you will be eligible to enroll in this Benefit Plan if you apply within 31 days of your marriage.

If you decline coverage under this Benefit Plan, you will be eligible to enroll in this Benefit Plan if you apply within 31 days of the birth or adoption of a child.

**NOTE:** Article II, Schedule of Eligibility, Section E, Enrollment Requirements will provide you more specific details on your enrollments rights.



**BlueCross BlueShield  
of Mississippi**

Blue Cross & Blue Shield of Mississippi, A Mutual Insurance Company, is an independent licensee of the Blue Cross and Blue Shield Association.