

Chapter Grp 20

STATE HEALTH INSURANCE COVERAGE

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Note: Chapter Grp 20 as it existed on December 31, 1977 was repealed and a new chapter Grp 20 was created effective January 1, 1978.

Grp 20.01 Effective date. The group health insurance program provided by chapter 211, Laws of 1959, shall be effective April 1, 1960.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.02 Coverage. The standard health insurance plan established pursuant to s. 40.14 and 40.16, Stats., shall be the basic hospital expense, the surgical and medical expense and major medical expense coverages. This section shall not include alternate health care plans provided under Grp 20.03.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.03 Alternative health insurance coverage. The board may provide for comprehensive prepaid group practice plans or other type of health maintenance organization plans at premium rates that may be different than those established for the standard health insurance plan but such plans shall be optional with each eligible employee. The dollar amount of state contribution toward premium shall be the same as that provided toward the standard health insurance plan, but not to exceed the total premium rate. Each eligible employee may obtain such coverage by enrolling pursuant to the procedures established under Grp 20.04 or 20.05. No employee may change from one plan to another plan except during the enrollment periods established by the board.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.04 Selection of coverage on or after the effective date. (1) Each eligible employee defined pursuant to s. 40.11 (2), Stats., shall be covered if the employee completes the application form provided by the director and such application is received by the employing department within 31 days after becoming eligible.

(2) (a) Such coverage shall be effective on the first day of the calendar month which begins on or after the date the application form is received by the employing department.

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(b) Employees eligible for and insured with single coverage only, may change to family coverage effective on the date of change to family status if an application is received by the employing department within 31 days of the date of such change.

(3) Any state employe who was insured under the state health insurance program at the time of being called into active military service, shall be entitled to coverage upon resumption of state employment subject to the following:

(a) If state employment is resumed within 90 days after release from military service, and

(b) If the application for such coverage is filed with the employing department within 31 days after the return to state employment.

(c) Those state employes who were insured individually and became eligible for family coverage between the period of being called into service and their return, may elect family coverage without waiting periods for pre-existing conditions.

(d) Coverage shall be effective on the date employment was resumed. A full month's premium shall be required if the effective date of coverage occurs between the first and the fifteenth day of the month, if the effective date is between the sixteenth and the end of any month, the premium for that part month shall be waived.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.05 Coverage of new employes. Any person who has not completed the qualifying period and is eligible for health insurance pursuant to s. 40.21, Stats., may be enrolled providing an application for such coverage is received by the employing department within 31 days of the date of employment. Employes who do not elect coverage under this section must wait to elect coverage pursuant to Grp 20.04 upon completion of the qualifying period.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.06 Initial premiums. When coverage becomes effective a multiple deduction of premium may be required initially to make premium payments current, unless proper payment is otherwise made.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

Grp 20.07 Deferred coverage. Any eligible employe, other than an annuitant, who does not elect to be covered during the enrollment periods provided under Grp 20.04 or 20.05 may be insured under the standard health coverage at a later date if the employe qualifies for state contribution toward premium and submits an application to the employing department. Coverage shall be effective the first day of the calendar month which begins on or after the date the application is received by the employing department. Coverage for persons becoming insured under this section shall be subject to those provisions of the group contract which pertain to waiting periods for pre-existing conditions. The provisions of this section shall not be applicable to alternate plans provided under Grp 20.03.

History: Cr. Register, December, 1977, No. 264, eff. 1-1-78.

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Grp 20.075 Waiver of coverage. Any employe in active employment for whom the employe portion of premiums has not been received by the employer for a period of 12 consecutive months shall be deemed to have waived coverage. Such employe may obtain coverage only under s. Grp 20.07.

History: Cr. Register, September, 1982, No. 321, eff. 10-1-82.

Grp 20.08 Dual-choice enrollment periods. The board shall establish enrollment periods by contract provisions, which shall permit eligible insured employes to obtain coverage under alternate prepaid group practice plans which may be available under Grp 20.03. The board shall