

South Dakota State Employee Health Plan Special Enrollment Notice

10/23/19

If you are declining enrollment for yourself, your spouse or your dependents because of other health insurance or group health plan coverage, you may be able to enroll yourself, your spouse, and your dependents in this plan if you, your spouse or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward you, your spouse or your dependents' other coverage). You must request enrollment within 30 days after you, your spouse or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new spouse or dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself, your spouse and your dependents. You must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or obtain more information, contact

Mail: South Dakota State Employee Benefits Program
500 East Capitol Avenue
Pierre, SD 57501
Phone: 605.773.3148
Email: BHR.memberbenefits@state.sd.us
Website: <http://benefits.sd.gov>