

Evidence of Insurability Administration

Shaker Heights City Schools

When is satisfactory evidence of insurability required?

Employee Supplemental Life

- New Hire – Amounts above the guarantee issue amount of \$50,000
- Change in Family Status – Amounts above the guarantee issue amount of \$50,000
- Late Entrant – All amounts
- Annual Enrollment – For those currently enrolled, an increase of greater than 1 increment of \$10,000 up to the guarantee issue amount of \$50,000, applies to employee coverage only. Any amount above the guarantee issue amount requires evidence of insurability. For those without current coverage, evidence of insurability is required.

Dependent Spouse Supplemental Life

- New Hire or Newly Eligible Spouse – Amounts above the guarantee issue amount of \$25,000
- Change in Family Status – Amounts above the guarantee issue amount of \$25,000
- Late Entrant – All amounts
- Annual Enrollment – All increases or New Requests

Dependent Child Supplemental Life

- Evidence of insurability is not required for elections less than or equal to \$10,000

Accidental Death & Dismemberment

- Never

What constitutes a change in family status? (Including, but not limited to)

- Marriage, execute a domestic partnership (affidavit required);
- You have a change in the number of dependent children (for example: birth, death, adoption or emancipation of a dependent child);
- Your spouse dies or you become divorced;
- Your spouse is no longer employed, resulting in a loss of group insurance; or
- You have a change in classification, which results in you changing from part-time to full-time or full-time to part-time.

Note: Time frame for enrollment due to a change in family status – Must enroll within 31 days from the date of the change in family status event.

Completing EOI:

- EOI forms can also be completed via paper. Simply download the EOI form on our website. The employer should fill out PART I completely. Employees (and spouses, if applicable) must answer all questions completely and accurately.

The applicant must include the following information to submit evidence of insurability:

- Your group number – **VF026858**
- **Select only the coverages requiring completion of EOI**
- Employer or sponsor's name and address
- Reason EOI is required
- Completed enrollment form or EOI coverage election summary form
- Social Security number of all applicants requiring EOI (employee and/or dependents)
- Height, weight and date of birth of all applicants requiring EOI (employee and/or dependents)
- Treatment history and medication(s) for any health condition(s); name and address of any physician, hospital or other practitioner that provided medical care, consultation or treatment

Before submitting the paper form, please verify the above information has been included, as well as the following:

- All "yes" or "no" questions have been answered
- Complete details have been provided for every "yes" answer
- Include signatures of all applicants (including spouse and dependent children, if applicable)
- Sign and date the form (even if he or she is not applying for coverage)
- Make a copy of the EOI form and enrollment form for your records, and send the original signed copies of both forms to us. We must receive the completed employer and employee sections of this form within 30 days of the signature date.

The information on this form is considered current for no longer than **60 days**. Our medical decision will be communicated to the applicant and to the group administrator in writing, along with an effective date, if approved.

Please note: An incomplete form will delay the processing of an applicant's insurance request. Paper forms should be faxed to 855-691-7157 or mailed to the Medical Underwriting Department, P.O. Box 7072, Downers Grove, IL 60515.