

# Nebraska Comprehensive Health Insurance Pool

Administered by Coventry Health and Life Insurance Company  
P.O. Box 541210 Omaha, NE 68154 | Phone: 855-247-5201 (Toll Free) | Fax: 866-799-9448 | www.nechip.com

## CHIP SALES INFORMATION AND CHECKLIST FOR BROKERS

The Comprehensive Health Insurance Pool (CHIP) was created by the Nebraska legislature to provide health care coverage to residents who may be having difficulty purchasing a policy because of medical problems. Blue Cross and Blue Shield of Nebraska administers the CHIP program on behalf of the State of Nebraska.

This document provides some important information for brokers selling this plan.

### RATING CATEGORIES

There are four rating categories:

1. Male – Tobacco User
2. Male – Non-tobacco User
3. Female – Tobacco User
4. Female – Non-tobacco User

### MATERNITY COVERAGE

Maternity coverage is available by rider only, with a separate premium charge.

### EFFECTIVE DATES

There are three choices for effective dates:

1. First of the month
2. Date of receipt
3. Any date later than 1 or 2 above

**Exception:** for persons eligible for Pre-existing Waivers 2 or 3, the effective date will be the date following termination of prior coverage.

### ELIGIBILITY

An individual is not eligible for CHIP coverage if he or she terminated previous CHIP coverage within the last 12 months, including a termination due to non-payment

of premium. An exception is allowed for persons who are eligible for one of the pre-existing waivers or are applying under Eligibility Category 2.

### PRE-EXISTING WAIVERS

#### Waivers 2 & 3

If applying for Waivers 2 or 3, the effective date is the day following termination under the prior plan. Under Waiver 2, the applicant must keep prior coverage in force until the nonrenewal date or is not eligible for the waiver.

Waivers 2 and 3 take precedence over a coverage rejection letter date under Eligibility Certification Category 1.

#### Waiver 3

The applicant does not have to exhaust COBRA to be eligible. COBRA coverage may be terminated for any reason other than nonpayment of premium. However, if the individual was never covered under COBRA, he or she is NOT eligible for Waiver 3.

#### Waiver 4

Waiver 4 is available only to persons who are enrolling under Eligibility Certification Category 2.

## CHIP APPLICATION CHECKLIST

Before you send in a CHIP application for processing, please make sure you have included all of the following:

- Completed front and back of application and signature on the back.
- Voided check if the applicant is authorizing premium payment by automatic bank debit.
- Proof applicant has been a Nebraska resident for at least six months. If using the applicant's driver's license, it must have been issued at least six months prior to the requested CHIP effective date.
- Premium payment for the first month of coverage.
- If checking one of the boxes under Eligibility Certification Category 1, you must include a rejection or rider letter dated within six months of the requested CHIP effective date.
- If checking one of the boxes under Eligibility Certification Category 2, you must include a Certificate of Creditable Coverage proving at least 18 months of prior creditable coverage. Coverage under a nongroup policy does not qualify as creditable.
- If applying for a pre-existing condition waiver, please attach appropriate documentation as stated on the CHIP application form. If applying for Waivers 3 or 4, you must include a letter from the applicant's employer that indicates the COBRA effective and termination dates. A Certificate of Coverage cannot be used unless it specifically states "COBRA."