

**Title: Termination due to loss of eligibility or enrollment error**

**SEBB Program Administrative Policy 19-1**

<b>Contact:</b>	Policy and Rules Coordinator, ERB Division	<b>Effective:</b>	January 1, <del>2024</del> <a href="#">2025</a>
<b>Associated RCW:</b>	41.05.008 41.05.009 41.05.014 41.05.740 <a href="#">41.05.743</a>	<b>Owner:</b>	Policy, Rules, & Compliance Manager, ERB Division
<b>Associated SEB Board Policy Resolutions:</b>		<b>Approved by:</b>	
<b>Associated WAC:</b>	182-30-020 182-30-040 182-30-060 182-31-020 182-31-040 182-31-050 <a href="#">182-31-090</a> <a href="#">182-31-100</a> <a href="#">182-31-120</a> 182-31-140 182-31-150 <a href="#">182-31-200</a>	<b>Position:</b>	Director of the SEBB Program
<b>Assoc. fed law/reg:</b>	PHSA § 2712 [42 USC § 300gg-12] Prohibition on rescissions.  FAQs about the Affordable Care Act Implementation - Part II (Oct. 8, 2010); Q7	<b>Date approved:</b>	
<b>Associated Forms &amp; Communication</b>	Addendum 19-1A Addendum 19-1B		

**Purpose:**

This policy applies whenever coverage for a subscriber or a subscriber's dependent is terminated due to loss of eligibility, or because a subscriber or dependent was enrolled when they were not eligible for coverage.

**Policy:**

1. The School Employees Benefits Board (SEBB) Program and SEBB Organizations must terminate coverage as described in Addendums 19-1A and 19-1B when a member is no longer eligible or was not eligible for enrollment in SEBB insurance coverage.