



## Self-Pay Early Retiree Enrollment Packet Q&A

**Q: What is a “Self-Pay Early Retiree?”**

**A:** An “Early Retiree” is anyone who retires prior to being eligible for Medicare. “Self-Pay” means your former employer does not contribute any funds toward your insurance premiums and you are responsible for paying the full premium for any coverage you elect.

**Q: What are my plan options if I am currently paying all my premiums as an Early Retiree?**

**A:** If you are currently an Early Retiree paying all your premiums, you will come over to OEGB with your current plans. Just like when you were paying your premiums through your former employer or a contracted third-party administrator, you will have the choice to make certain plan changes allowed to Early Retirees during the annual Open Enrollment period.

**Q: My stipend (or employer contribution toward my premiums) ended when I moved over to OEGB. What changes can I make to my plans?**

**A:** You can make the following plan changes:

- Medical Plans
  - Cancel coverage
  - Change to a less expensive plan
  - Cancel coverage for spouse/domestic partner and/or eligible dependent child(ren)
- Dental and Vision Plans
  - Cancel coverage
  - Cancel coverage for your spouse/domestic partner and/or eligible dependent child(ren)

**NOTE:** If you were previously paying all your premiums to your educational entity and OEGB is simply taking over the administration of your benefits, you can’t make any changes at that time.

**Q: How much do OEGB plans cost?**

**A:** All OEGB plans and costs are available on the OEGB website:

<https://www.oregon.gov/oha/OEGB/Pages/Plans-Offered.aspx>

**Q: Who qualifies as a dependent child?**

**A:** An eligible Early Retiree’s, spouse’s, or domestic partner’s biological son, daughter, adopted child, child placed for adoption, or legally placed child, who is 25 or younger on the first day of the coverage month. An eligible Early Retiree must send copies of the required custody or legal documents to OEGB showing proof of adoption, legal guardianship or other court order if enrolling a child for whom the Early Retiree, spouse, or domestic partner is not the biological parent. Grandchildren are only eligible when the eligible Early Retiree is the legal guardian or adoptive parent of the grandchild.

**Q: Do I need to enroll? If so, how do I enroll?**

**A:** If you were previously paying all your premiums to your employing entity and OEGB is simply taking over the administration of your benefits, you are not allowed to make any plan changes at this time and do not need to enroll. Your current enrollments will continue provided you send payment authorization by the date required (see below for payment authorization instructions).

If you match one of the following criteria, you are allowed certain changes; therefore you will need to submit an enrollment form to let OEGB know whether you want to make any changes at this time or keep your enrollments as they are:

- You are changing from an active employee to early retiree, or
- You previously had a stipend or employer contribution paying part of your early retiree premium and now need to self-pay your full premium

The changes you can make are:

- Medical Plans
  - Cancel coverage
  - Change to a less expensive plan
  - Cancel coverage for spouse/domestic partner and/or eligible dependent child(ren)
- Dental and Vision Plans
  - Cancel coverage
  - Cancel coverage for your spouse/domestic partner and/or eligible dependent child(ren)

Complete the enclosed Early Retiree Enrollment Form and send to OEGB:

By Mail:  
OEGB, Early Retiree Benefits  
500 Summer Street NE, E-88  
Salem, OR 97301-1063

By Fax: 503-378-5832  
By Email: [OEGB.benefits@dhsosha.state.or.us](mailto:OEGB.benefits@dhsosha.state.or.us)

***This form must be completed, signed and returned within 31 days of the day you became an early retiree or lost the stipend through your former employer.***

**Q: If I enroll, how do I make my premium payments and when are they due?**

**A:** All payments must be made through an Electronic Funds Transfer (EFT). Complete and send the enclosed ACH Debit Form and a voided check to:

OEGB, Financial Services  
500 Summer Street NE, E-88  
Salem, OR 97301-1063

If you need another copy of the form, you can request one by calling your former employer or OEGB Member Services at 888-469-6322.

**Q: What if I don't maintain an account with a financial institution?**

**A:** Call OEGB Member Services at 888-469-6322 to discuss making other arrangements.

**Q: Is it possible to enroll or change my plan choices outside of the Open Enrollment Period?**

**A:** Certain life events allow members to make changes to their benefit enrollments outside of the Open Enrollment Period. These life events are called Qualified Status Change (QSC) events. Experiencing a QSC event is the only way to enroll or make certain changes outside of the Open Enrollment Period.

**Q: What are the OEGB Qualified Status Change (QSC) events?**

**A:** A complete matrix of QSC events and the changes they allow can be found on the OEGB website:

<https://www.oregon.gov/oha/OEGB/Policies/QSCMatrix.pdf>

**Q: If I experience a QSC, what should I do to enroll or change my elections?**

**A:** If you experience a QSC event, you must send a Midyear Change Form to OEGB *no later than 31 days from the date of the QSC event* to enroll or make election changes. The form can be found on the Forms page of the OEGB website:

<http://www.oregon.gov/oha/OEGB/Forms>

You can also request one by calling OEGB member services at 888-469-6322. You can send by mail, email or fax the completed form to OEGB using the information provided on the form.

**Q: What if I have other questions or need help with the enrollment form?**

**A:** You can contact OEGB Member Services:

By Phone:  
1-888-469-6322

By Email:  
[OEGB.benefits@dhsoha.state.or.us](mailto:OEGB.benefits@dhsoha.state.or.us)

Staff are available to help you Monday – Friday, 8:00 a.m. to 5:00 p.m.

**Q: What happens if I pay my premiums late?**

**A:** Coverage will be stopped going back to the last day of the last fully paid month. Once coverage has ended due to late or nonpayment, it cannot be reinstated.

**Q: What if I no longer want a specific coverage (for instance, dental) and do not to pay the premium for it?**

**A:** You can only cancel coverage during an Open Enrollment Period or within 31 days of a Qualified Status Change. Discontinuing payment for any portion of the monthly premiums mid-year will result in termination of all coverages through OEGB due to insufficient payment.

**Q: What happens if my payment is returned for Non-Sufficient Funds (NSF)?**

**A:** This is considered nonpayment and coverage will be terminated.

**Q: What happens if I overpaid my premiums and want a refund?**

**A:** If you do not request a refund, the overpayment will be held by OEGB and applied to future premiums as they become due. Your monthly statement will reflect your current balance, payments applied, and premium due, if any. To request a refund, contact OEGB Member Services:

By Phone:  
1-888-469-6322

By Email:  
[OEGB.benefits@dhsosha.state.or.us](mailto:OEGB.benefits@dhsosha.state.or.us)

**NOTE:** Unless your coverage has ended, a processing fee will be assessed for refunds under \$100.00. If coverage has ended, any excess premiums paid will be returned to you without additional fees.

**Q: Will I receive an invoice each month?**

**A:** Yes, OEGB will email you an invoice on the 15th of each month. The due date and amount due will be shown on the invoice.

**Q: What if I don't have an email address?**

**A:** Indicate on the ACH Debit form that you do not have an email address. Your monthly invoice will be mailed to the mailing address OEGB has on file for you.

**Q: Can I make one lump payment to cover an entire year?**

**A:** Advance payments may be made only within the same Plan Year. Please call OEGB Member Services at 1-888-469-6322 to make these arrangements.