

20:06:39:71. Special enrollment triggers. After December 31, 2013, a health insurance issuer offering health insurance coverage in the individual market outside the Exchange must allow for an individual or dependent to enroll or change from one plan to another as a result of the following qualifying events:

- (1) The death of the covered individual;
- (2) The termination of individual's employer coverage other than by reason of gross misconduct, or reduction of hours of the covered employee's spouse;
- (3) The divorce or legal separation;
- (4) Individual becoming entitled to benefits under XVII of the Social Security Act;
- (5) Dependent child ceasing to be dependent child;
- (6) A proceeding in a case under Title 11, United States Code, commencing on or after July 1, 1986, with respect to the employer from whose employment the covered individual retired at any time;
- (7) An individual gains a dependent or becomes a dependent through marriage, birth, adoption, or placement for adoption;
- (8) An individual, who was not previously a citizen, national, or lawfully present individual gains such status; and
- (9) A qualified individual or enrollee gains access to nongrandfathered health plan as a result of a permanent move.

A health insurance issuer in the individual market must provide, with respect to individuals enrolled in non-calendar year, a limited open enrollment period beginning on the date that is 30 calendar days prior to the date the policy year ends in 2014.

This section does not apply to grandfathered plans.

Source: 39 SDR 203, effective June 10, 2013.

General Authority: SDCL 58-17-87.

Law Implemented: SDCL 58-17-87.