

SCOB Policy Highlights

Spousal Coordination of Benefits (SCOB) Policy

A spouse's eligibility for primary coverage under the policy is determined on whether a spouse is **offered** healthcare benefits by their employer (or former employer) and the percentage amount they would be required to pay for the lowest individual plan available to them.



If you cover a spouse under your Highmark Delaware or Aetna health plan, you are **REQUIRED** to complete an online SCOB Form.

WHEN DO I COMPLETE A SCOB FORM?

1. **Immediately** upon first enrolling your spouse in a State of Delaware health plan.
2. **Within 30 Days** of your spouse's health care coverage or employment information changing.
3. **EVERY YEAR** during Annual Benefits Open Enrollment.

What happens after I complete the form?

Your completed SCOB form will be provided to your health plan provider for review. **You, your spouse or your spouse's employer may be required to provide additional information.**

FAILURE TO COMPLETE THE SCOB FORM OR PROVIDE DOCUMENTATION WHEN REQUIRED WILL RESULT IN A REDUCTION OF YOUR SPOUSE'S COVERAGE.

YOUR SPOUSE'S MEDICAL CLAIMS WILL BE PROCESSED AT A REDUCED RATE AND YOUR SPOUSE MUST PAY FOR ALL PRESCRIPTIONS OUT-OF-POCKET.

The intention of this policy is to ensure fiscal responsibility for the State of Delaware Group Health Insurance Program where other employers are offering health care benefits to their employees and retirees. Employees may access de.gov/statewidebenefits for the full Spousal Coordination of Benefits Policy and accompanying Chart.



CAN I COVER A SPOUSE?

Yes.

A spouse is eligible for enrollment in the State's health plan if they are a legal spouse or civil union partner.

However, enrollment DOES NOT guarantee primary coverage under the State's health plan.



WHERE IS THE SCOB FORM?

Online.

The SCOB Form is an **online** form. The form is located in [COB Administration](#) and can be accessed from any mobile device including a laptop, tablet or smart phone.



Specific rules apply for spouses considered partners, owners, or principals in a law firm, accounting firm or any other type of business, company, corporation, or firm. See [SCOB Chart](#) for details.

SCOB Policy Action Checklist

Important Disclaimer

This checklist is for *Informational Purposes Only* and will not be used by the SBO to provide determinations regarding a spouse's eligibility status.

Spousal Coordination of Benefits (SCOB) Policy

The SCOB Policy is a State of Delaware Policy and applies to all spouse's enrolled under the State's health plan. The intention of the policy is to ensure fiscal responsibility for the State of Delaware GHIP when other employers are offering healthcare benefits to their employees or retirees.

- Review** the SCOB Policy and Chart located online at de.gov/statewidebenefits.

It is your responsibility to understand your rights and obligations under the policy.

- Review** the healthcare benefits offered by your spouse's employer (or former employer).

It is your responsibility to disclose when your spouse is offered coverage through their employer (or former employer), even if they are not enrolled or previously waived coverage.

- Complete** the online SCOB Form as required.

The SCOB Form and SCOB Self Service Guide are available online at de.gov/statewidebenefits.

- Respond** to all inquiries in a timely manner to avoid a disruption in coverage. **You, your spouse or your spouse's employer (or former employer) may be required to provide additional information.**

How do I know if my spouse should enroll in their own coverage?

If your spouse is **offered** health insurance from their current employer (or former employer if retired), **AND** would be responsible for **50% or Less** of the premium for the lowest employee only plan available to them, **then your spouse may not be eligible to be covered as primary under your State of Delaware health plan.**

You may reference the below chart to help determine spouse's eligibility status:

1) Does your spouse's employer (or former employer) offer health insurance to employees? <i>(Circle One)</i>	YES or NO
2) Does your spouse's employer (or former employer) offer health insurance to your spouse? <i>(Circle One)</i>	YES or NO
3) Does your spouse's employer (or former employer) offer a cash amount in lieu of health insurance? <i>(Circle One)</i>	YES or NO
If you answered "NO" to questions 1-3, your spouse may be eligible for Primary Coverage under your State plan. If you answered "YES" to a question, complete the next section.	
4) How much is the Total Premium Cost for your spouse to enroll the lowest employee only plan?	\$
5) How much would your spouse be required to pay?	\$
6) Is your spouse's amount <u>50% or Less</u> of the Total Premium Cost ? <i>Circle One</i>	YES or NO
If you answered "NO" to question 6, your spouse may be eligible for Primary Coverage under your State plan. If you answered "YES" to this question, your spouse may be required to enroll in their own coverage.	