



Oregon

Theodore R. Kulongoski, Governor

Oregon Educators Benefit Board

1225 Ferry Street SE, Suite B

Salem, Oregon 97301-4281

503-378-6610

1-888-469-6322

FAX 503-378-5832

www.oregon.gov/DAS/OEBB

October 18, 2010

[LAST_NAME] [LAST_NAME]
[ADDRESS LINE 1]
[CITY], [STA_CODE] [ZIP_CODE]

E-Number: [Sub Enum]

Dear OEBB Member:

You are receiving this letter because on October 4, 2010 our records indicated you and/or your dependent(s) will have a 12-month waiting period for all but preventive and diagnostic dental exams and cleanings and/or vision exams for the 2010-11 plan year. You will be responsible for any costs above or beyond routine care. The individual(s) subject to this waiting period are:

[Enum] [FIRST_NAME] [LAST_NAME]
[Enum] [FIRST_NAME] [LAST_NAME]
[Enum] [FIRST_NAME] [LAST_NAME]
[Enum] [FIRST_NAME] [LAST_NAME]
[Enum] [FIRST_NAME] [LAST_NAME]

The individuals listed above are subject to this 12-month waiting period on the dental and/or vision benefit because this benefit was added during the recent open enrollment period.

If you and/or your dependent(s) listed above experienced a Qualified Status Change (QSC) during the Open Enrollment period (August 15 through September 15), this waiting period will be waived.

Some examples of QSC events are:

- New Hire with benefits effective October 1, 2010
- Marriage or Gain of Domestic Partner
- Death of Spouse or Domestic Partner
- Divorce or Termination of Domestic Partnership
- Birth, Adoption, or Placement for Adoption
- Change in Employment Status (either employee or spouse/partner)

To view the full list of QSC's and the changes allowed for each, please visit the "Tools & Resources" page of the OEBB website (www.oregon.gov/DAS/OEBB/resources.shtml). The document titled "Qualified Status Change Matrix" can be found in the "OEBB Members" section under "Member Information".

The appeal form (which includes instructions on how to submit it) is available on the OEBB website:

www.oregon.gov/DAS/OEBB/docs/Forms/AppealForm.pdf

You must submit this Appeal Form to OEBB no later than October 29, 2010 to request that the dental/vision waiting period be waived. OEBB will review your appeal and communicate a decision to you in writing within 30 days of receipt of your appeal. **OEBB will not accept appeals for this reason after October 29, 2010.**

If you have any questions or concerns, please contact OEBB Member Services by phone (1-888-469-6322 from 8:00 a.m. to 5:00 p.m., Monday through Friday) or by email (oebb.benefits@state.or.us).

Thank you,

Linda Tullis
OEBB Benefits Manager