

CHEMUNG COUNTY INSURANCE DEPARTMENT

PO BOX 588 • 203 LAKE STREET
ELMIRA, NEW YORK 14902-0588



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Coordinator of Employee Benefits

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DEPENDENT COVERAGE THROUGH AGE 29 - YOUNG ADULT OPTION NEW YORK STATE LAW – EFFECTIVE JANUARY 1, 2010

- 1. Contact Excellus regarding the Young Adult Option.**
- 2. Complete the Young Adult Dependent Through Age 29 Certification Form and mail directly to Excellus.**

Excellus Document: Young Adult Dependent Through Age 29 Certification Form (Link to form on our website)

It is your responsibility to report any changes in your eligibility (ie. your employer offers health insurance, you move out-of-state/no longer work in New York State, become married, etc.) to both Excellus and the Chemung County Insurance Department. You will be required to periodically recertify your eligibility. Failure to respond to recertification requests will result in cancellation.

- 3. Excellus will send you a letter advising of your eligibility and direct you to submit the application with premium payment to the employer group. (This will be Chemung County OR participating municipality employer group.)**

Your premium is equal to the full premium for the individual medical/hospital/prescription coverage that your parent is enrolled. (Vision and dental coverage is not available.) Please see the monthly composite rates posted on our website for dependents Reaching Maximum Age 26 for the current year rates.

- 4. Once Chemung County receives your approved application, approval letter and payment, then we will mail your application back to Excellus for enrollment processing.**

- 5. You will be responsible to make payment to Chemung County (or to your participating municipality group)*. Chemung County will not send monthly bills to members. Payment will be due on the 1st of each month with a 30 day grace period. If payment is not received at the end of the grace period, coverage will be cancelled for non-payment. **If your parent is an employee of a participating municipality group, contact their employer for payment arrangements.***

Checks/Money Order Payable to: Chemung County Treasurer

Mail Payment to: Chemung County Insurance Department
PO Box 588
Elmira, NY 14902-0588

If you wish to cancel coverage, you must submit your request in writing within 30 days of cancel date.

If your parent changes coverage, your coverage will also change.

If your parent loses coverage, your coverage will also end.

No COBRA continuation will be offered to the Young Adult when coverage ends.

Revised 2018