

Grace Period

A short period after your monthly health insurance payment is due. If you have not made your payment, you may do so during the grace period to avoid losing your health coverage.

Paying your Membership Premium

When you purchase coverage under the plan, you pay the premium monthly. Payment for the premium is due on the first day of each month for which coverage is provided. No grace period applies to the binding premium payments

Members Not Receiving Tax Credits

For premiums owed following the binding premium payments, if you do not pay the premium in full on or before the first day of the month for which coverage is provided, you will have a one month grace period to pay the outstanding premium owed. During the grace period, your coverage will not lapse and any claims submitted for you during that grace period will be pended. When a claim is pended, that means no payment will be made to the provider until your delinquent premium is paid in full. If we do not receive the full premium by the end of the grace period, then we will terminate your coverage under the plan and this agreement. Except as described in your Member Benefit Agreement, we will not allow reinstatement after the grace period ends. We reserve the right to take the necessary steps to collect outstanding premiums.

Members Receiving Tax Credit / Claims Pending Policies

Members who receive advanced premium tax credits (within the Maine Health Insurance Marketplace) and have made the binding premium payment, but who subsequently fail to pay the premium in full on or before the first day of the month for which coverage is provided, will have a three-month grace period to submit full payment of outstanding premium due. Community Health Options will pay appropriate claims for the first month of the grace period only. Community Health Options will hold claims during the remainder of the grace period. Community Health Options will stop holding claims when the full premium amount owed is paid in full before the end of the grace period. If the full premium amount owed is not paid in full before the end of the grace period, Community Health Options will terminate coverage under the plan and per the terms of your Member Benefit Agreement. The Member will be responsible for paying for any services received during the final two months of the grace period.

Third-Party Payment of Premium

There may be instances where someone other than the Member pays the Member's premium under this agreement. This is called "third-party payment of Premiums."

Community Health Options will permit Members' family members, designees and legal representatives to pay premiums on behalf of Members. Community Health Options will also permit Ryan White HIV/AIDS Programs; Indian tribes, tribal organizations, and urban Indian organizations; state, federal, and local government programs; and private, nonprofit foundations approved by Community Health Options to make premium payments on behalf of Community Health Options Members. If a provider, pharmaceutical company, or other commercial healthcare entity submits a payment for a premium on behalf of a Member, Community Health Options reserves the right to reject such payments, whether paid directly or indirectly by the entity. We will notify you if we have rejected this type of payment. If we reject a third-party premium payment, you will continue to owe any premium due as required under this agreement.

Premium Changes

Community Health Options files rates with the applicable state and federal regulatory bodies on an annual basis. Rates are approved for the calendar year. Community Health Options Members will be given at least 60 days' notice of any changes to existing rates for their effective plan. Members that enroll in the last quarter of the calendar year should check the following year's rates during open enrollment.