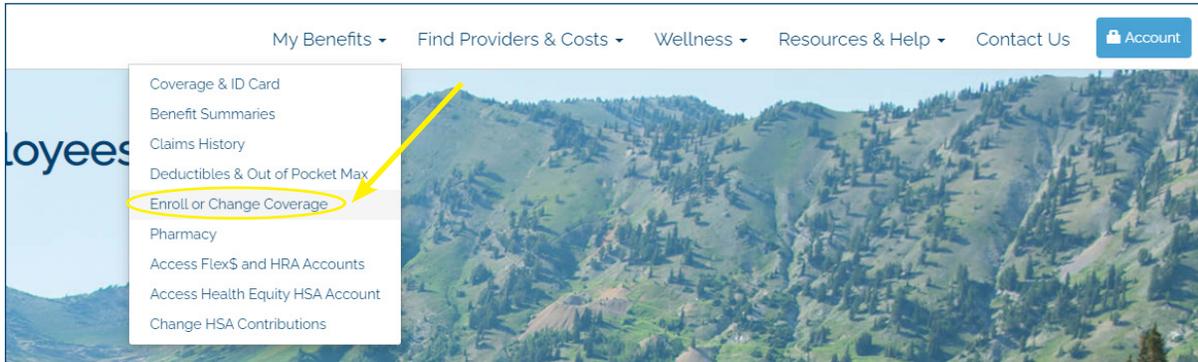


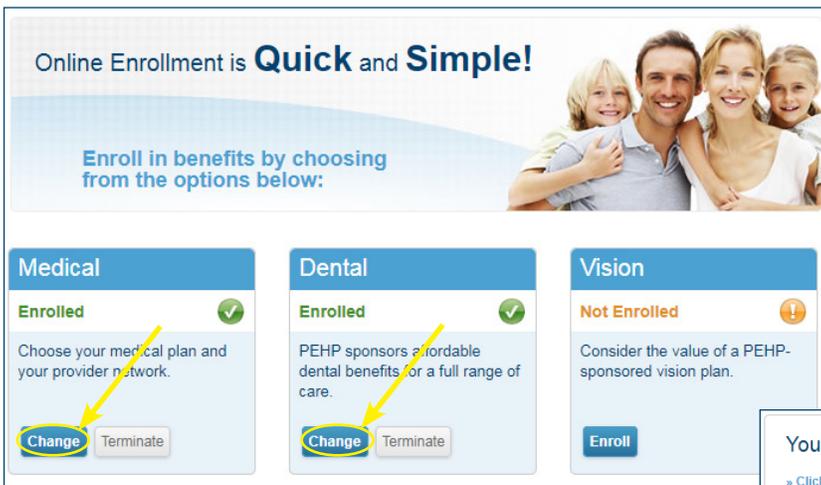
# Opt Out of Coverage Online

State of Utah employees with other qualifying coverage\* may waive Medical and/or Dental benefits in exchange for a salary increase per paycheck. You must enroll in the Opt Out plan to ensure you receive the correct payments.

**1. Log in to Your PEHP Account »** From [www.pehp.org](http://www.pehp.org), click “Enroll or Change Coverage” under the “My Benefits” menu.

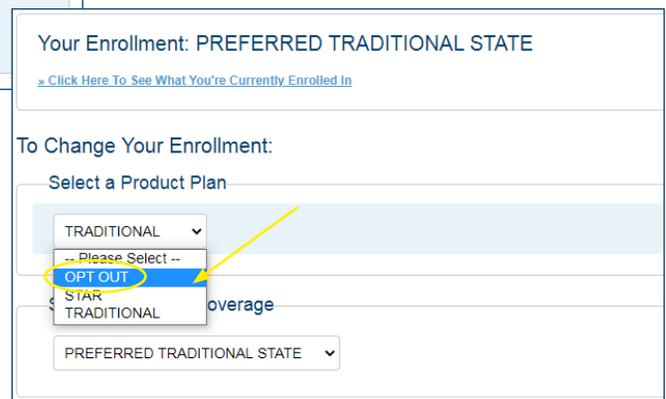


**2. Update Coverage in Online Enrollment »** Select “Change” under the Medical and/or Dental sections (or “Enroll” for new employees wanting to opt out). Follow the prompts until you reach the “Your Enrollment” page. Change your plan to “Opt Out” from the Product Plan menu.



## Heads Up!

Do not **terminate** coverage or you will not receive the salary increase. Make sure to **change** your enrollment to the “Opt Out” plan under either Medical, Dental, or both sections.



\* Medicaid, Medicare, and Individual Coverage through the Federal Marketplace are not considered qualifying coverage for purposes of the State Cash-in-Lieu Program

# Opt Out of Coverage Online

**3. Add Eligible Dependents and Information on Other Coverage** » You will be required to provide the following information:

## Spouse & Dependent(s)

- » First Name
- » Last Name
- » Date of Birth
- » Gender
- » Relationship
- » Dependent Custody (if applicable)

## Other Coverage(s)

- » Insurance Company
- » Policy Holder
- » Type of Policy (Active or Retired)

## Waiving coverage for your spouse and/or dependents?

To receive the double/family salary increase, you must provide family information when opting out. Failure to report spouse and/or dependents will default your payment to the single opt out amount.

**4. Confirm and Submit Enrollment Changes** » Make sure to review your elections carefully. Your enrollment is not complete until you sign and submit. Print your confirmation for your records.

### REVIEW YOUR MEDICAL OPT OUT

Your opt out process is not complete until you reach the Opt out Confirmation screen

You have made the following selections to opt out of Medical coverage. Please review this page and either confirm this information or make changes.

**Plan Details**

Opt Out Selection			
STATE OF UTAH MED OPT OUT			

Individuals Opted Out	Relationship to Employee	Insurance Co.	Custodian
TEST USER	INSURED	UNITEDHEALTHCARE	
TEST BABY	CHILD	UNITEDHEALTHCARE	BOTH NATURAL PARENTS
TEST SPOUSE	SPOUSE	UNITEDHEALTHCARE	

For questions or enrollment help, please contact PEHP:

801-366-7555

or via the PEHP Message Center

## Notes on State of Utah Opt Out Program

- » You must re-enroll in the Opt Out plan and confirm your other coverage each year during Open Enrollment
- » You must notify PEHP within 60 days of losing your qualifying coverage or cash-in-lieu payments will be forfeit back to the date of lost coverage
- » PEHP may request proof of other coverage at any time