



Jan. 20, 2021

Initial Premium Payment Deadlines

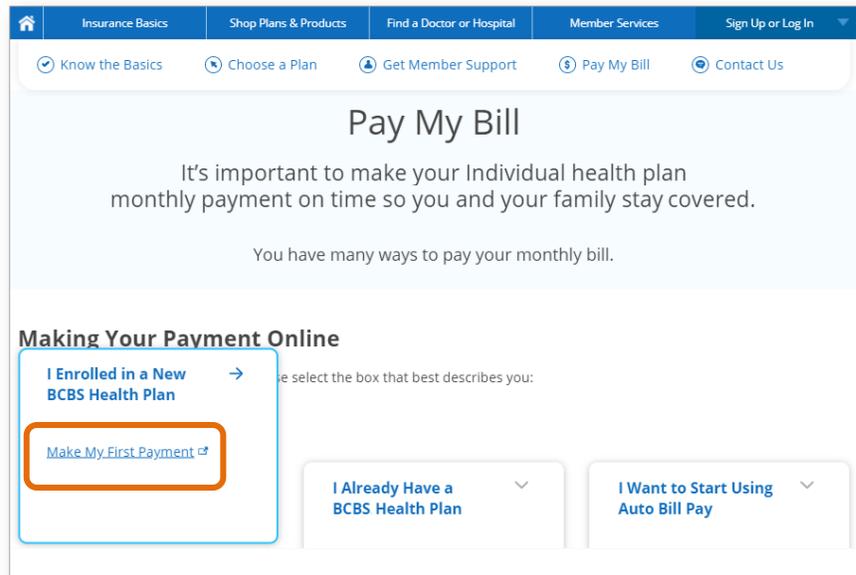
OFF EXCHANGE Initial Payment Deadline	ON EXCHANGE Initial Payment Deadline
<p>The initial premium payment due date is either: 30 calendar days from the 1st payment request <i>or</i> the effective date of the policy whichever is LATER</p> <ul style="list-style-type: none"> • The 30-calendar-day period begins the day we send the payment deadline letter. • If the payment deadline isn't met, the application is withdrawn. • If the applicant pays by the deadline, the effective date remains Jan. 1, 2021. 	<p>The initial premium payment due date is either: 30 calendar days from application receipt <i>or</i> the effective date of the policy whichever is LATER</p> <ul style="list-style-type: none"> • The 30-calendar-day period begins the day we receive the application. • If the payment deadline isn't met, the application is withdrawn. • If the applicant pays by the deadline, the effective date remains Jan. 1, 2021.

* Active Renewal = member chooses new plan (doesn't want current continuing plan or mapped plan)
 Passive Renewal = member keeps current continuing plan or accepts mapped plan (if the member's plan was being discontinued).

Payment Channels

Applicants should use their billing notices for directions on how to make their first premium payment. There are many ways that applicants and members can pay, but here are the best options.

Pay online: Go to our [Pay My Bill page](#) and select "Make My First Payment" under the "I Enrolled in a new BCBS Health Plan" tab and pay online. Applicants can pay with the last four digits of their Social Security Number, birthdate and zip code.



Pay by phone: Use our automated interactive voice response (IVR) system to pay by phone. Bypass hold times that occur when waiting to speak with a Customer Advocate. Call 800-538-8833 and press "1" at the first payment prompt.

Initial Premium Payments: What You Need to Know

- We require the first month premium payment to effectuate new policies and active renewals*. After effectuation, members receive ID cards and policy kits.
- If consumers don't pay the initial premium when submitting their applications, they'll get instructions on making their first payment via letters, and they'll include payment deadlines.
- If the initial payment is not paid by the date on the letter to the applicant/member, the application will be withdrawn, resulting in no coverage.

Grace Periods

Members Receiving Advance Premium Tax Credits (APTC)

- Members who receive an APTC have a three-month grace period for medical coverage.
- The APTC three-month grace period does not apply to a member's non-APTC dental policy, even when paired with a subsidized medical policy.
- The APTC three-month grace period does apply to Passive Renewal plan changes, even when mapped to a new or different plan (for example, HMO to PPO or PPO to HMO).
- If the policy is not effectuated, the grace period rules do not apply.
- Some on exchange members do not have an APTC and therefore do not qualify for the three-month grace period.

Members Not Receiving APTC

- We provide a grace period to all QHP members who do not receive an APTC.
- If the policy is not effectuated, the grace period rules do not apply.
- For off-exchange policies the grace period is 31 days.
- Effectuated Members that are terminated for non-payment of premium, have a 29 day reinstatement window to satisfy up to two months premium in full.
- Some on-exchange members do not have an APTC. They do not qualify for the three-month grace period. For non-APTC on-exchange policies, the grace period is 31 days.
- Non-APTC dental policies paired with APTC medical will have a one month grace period.