

Health Connector for Business Policy: Enrollee Age-Out

Policy #: HCB-9	Effective date: 9/1/2019
Category: Enrollment	Date revised: 9/1/2019
Approved by: Andrew Egan	Date reviewed: 9/1/2019

This policy applies to small group health and dental products.

For Pediatric Dental Benefits in a Qualified Health Plan:

An enrollee's eligibility for pediatric dental coverage ends as of the first day of the month following the month in which the enrollee attains age 19.

For Dependent Children on Family Medical and Dental Plans:

A dependent child's eligibility ends as of the first day of the month following the month in which the dependent child attains age 26, unless the dependent child is disabled.

¹Please reference the policy HCB-3: [Dependent Eligibility and Verification](#)