



Out-of-Area Residence Dependent(s) Registration Form

In-network benefits are available to dependents who are currently enrolled with Avera Health Plans and who reside outside of the Avera Health Plans network coverage area for more than 90 consecutive days.

ELIGIBILITY REQUIREMENTS:

- ✓ Your dependent must be eligible and enrolled with Avera Health Plans.
- ✓ Your dependent must reside outside the Avera Health Plans network coverage area for more than 90 consecutive days.
- ✓ You must complete and submit this form to Avera Health Plans.

In-network coverage will be effective on the date we receive this completed form.

SUBSCRIBER INFORMATION:

Subscriber Name: _____ Subscriber Number: _____

Employer Name: _____ Group Number: _____

Please complete for each dependent that requires out-of-area coverage:

1. Dependent Name: _____

Out-of-Area Address: _____ City: _____

County: _____ State: _____ ZIP: _____

Reason for Out-of-Area Address:

- Resides with Other Parent
- Attends School, List Name of School: _____
- Resides Out-of-Area

2. Dependent Name: _____

Out-of-Area Address: _____ City: _____

County: _____ State: _____ ZIP: _____

Reason for Out-of-Area Address:

- Resides with Other Parent
- Attends School, List Name of School: _____
- Resides Out-of-Area

3. Dependent Name: _____

Out-of-Area Address: _____ City: _____

County: _____ State: _____ ZIP: _____

Reason for Out-of-Area Address:

- Resides with Other Parent
- Attends School, List Name of School: _____
- Resides Out-of-Area

NOTE: If at any time your dependent returns to the Avera Health Plans network coverage area, please contact us as soon as possible so we can update your records accordingly.

Subscriber Signature: _____ **Date:** _____ / _____ / _____

Mail to Avera Health Plans, Attn: Enrollment, 5300 S Broadband Ln, Sioux Falls, SD 57108-2221 or fax to 605-322-4689. You may send it electronically by email to ahpenrollment@avera.org
Our Customer Care Team is available Monday through Friday at 605-322-4545 or toll-free at 888-322-2115