

Effective Date Change > 60 Days Attestation

Purpose

This form allows a member who recently applied for **Under 65** coverage to request an effective date more than 60 days after the application signature date, provided the request is made within 30 days of the most recent underwriting or reconsideration decision.

Use this form **only** when both conditions are met:

- The requested effective date is **more than 60 days** after the application signature date.
- The most recent underwriting or reconsideration decision was **issued within the past 30 days**.

The **only** option available is the next effective date following the most recent underwriting or reconsideration decision.

- App signed 4/10 and underwriting decision was received 6/5. An effective date of 7/1 can be requested however any other request would require a new application.

By signing the attestation, the member certifies that their health status has not changed since the most recent disclosure provided at the time of their application for coverage.

Decision Path – APST/Change vs Eff Date Change > 60 Days

Scenario	Required Form
Requested date is within 60 days of signature date	Alternative Plan Selection Transfer Change Form (APST/Change Form)
Requested date is more than 60 days after signature; later decision issued within past 30 days	Eff Date Change > 60 Days
Requested date is more than 60 days after signature; later decision was not issued within past 30 days	New Application

Where to Find and Send Attestation Form

The Effective Date Change > 60 Days attestation form is available in the Member360 section of Broker Portal under the Broker Actions section.

- The form will be sent via DocuSign to the email on file.

Reminders:

- Forms sent via DocuSign will expire after 72 hours, if not completed
- The status of forms sent from Member360 can be viewed through the Forms section at the top of the member information page.

Member Information		
Subscriber Name	Subscriber ID	FB Membership ID
Subscriber Details	Dependents	Personal Representative(s)
Contract History	Payments	Forms

Broker Actions
Reconsideration Forms
Alternate Plan Selection Transfer Change
Terminate
Claims Info
Change FB Membership ID
Material Request
Proof of Coverage
Upload Medical Records
Eff Date Change >60 Days