

insurance is terminated as provided herein and the employe does not resume active municipal employment he may not convert the insurance to an individual policy without evidence of insurability.

History: Cr. Register, November, 1959, No. 47, eff. 12-1-59.

Grp 10.23 Coverage during disability. (1) If an insured employe is totally disabled before age 65 as a result of bodily injury or disease so as to be wholly prevented from performing any work or engaging in any occupation for remuneration or profit, and it appears to the municipal representative that such employe is likely to remain so disabled for an indefinite period of time, the employe and municipal contributions for the insurance may be discontinued for 9 months, or until any earlier time that the employe is able to return to work. The insurance shall remain in force while such contributions are discontinued. After contributions have been discontinued for 9 months, upon request of the company proof of disability shall be submitted to the insurance company. If the proof is approved, the insurance will remain in force as long as the disability continues, subject to new proof of disability being submitted each year if required by the insurance company. The amount of insurance will reduce at attainment of age 65 according to the schedule in section 66.919 (6) (b), Wis. Stats.

(2) Cessation of premiums during such disability shall be in effect under the following conditions: (a) Such cessation shall not begin while any earnings are received.

(b) The municipal representative may certify to such cessation while earnings are being received, to be effective when the earnings cease.

(c) If the person had not ceased to be an insured employe at the time earnings stopped the cessation of premiums may apply 90 days retroactively from the date the certification of cessation of premiums is received, if there is good cause for such delay.

(d) The certification of cessation can be accepted from the municipality within 31 days after the termination of employment provided that this disability was the cause of the termination and no other employment has intervened. Failure to give the certification within 31 days will not invalidate a certification if it is established that such was given as soon as reasonably possible, and the certification is made within 90 days.

History: Cr. Register, November, 1959, No. 47, eff. 12-1-59; renum. to be (1); cr. (2), Register, May, 1960, No. 53, eff. 6-1-60; am. (2) (a), Register, April, 1962, No. 76, eff. 5-1-62.

Grp 10.30 Coverage of annuitants. Any annuitant under age 65 eligible to be insured shall continue to be insured only if within 60 days after the filing of the application for such annuity or within 60 days after the effective date of the annuity, whichever is later, the retirement system receives from such person a completed form, as prescribed by the director of the group insurance board, authorizing the retirement system to deduct premiums for group life insurance. Such form shall be filed in duplicate and one copy shall be transmitted forthwith to the director. The employing municipality shall file with the retirement system and the director immediately following the termination of employment of any such person a form, as prescribed by the director, certifying the data pertaining to insurance coverage.

History: Cr. Register, November, 1959, No. 47, eff. 12-1-59; am. Register, February, 1961, No. 62, eff. 3-1-61; am. Register, April, 1963, No. 88, eff. 5-1-63.

Register, February, 1964, No. 98

Grp 10.50 Coverage during appeal from removal or discharge. (1)

(a) An insured employe or officer, whether in the classified or unclassified service, who has exercised a statutory right of appeal from removal or discharge from his position or office, or who within 30 days of such removal or discharge, or of appointment to any position or office, becomes a party to legal proceedings to obtain judicial review of the legality of his removal or discharge or appointment may continue to be insured from the date of the contested removal or discharge or appointment until a final decision has been reached, provided that within 30 days of the date of removal or discharge or appointment such employe pays to the municipal representative or the director of the Group Insurance Board the initial payment to keep the insurance in force. The initial payment shall cover the established contribution for a three month period, but may be for a greater period at the option of the employe. If no determination has been reached at the end of any period for which contributions were paid, an additional payment shall be made within 15 days after the end of such period in such amount as the director of the Group Insurance Board may require.

(b) If the final decision is adverse to the employe or officer, the date of termination of employment shall, for purposes of insurance coverage, be the end of the month in which such decision becomes final by expiration without appeal of the time within which an appeal might have been perfected, or by final affirmation on appeal. Any contributions which have been paid for any period subsequent to the month in which a final decision is reached shall be refunded.

(c) The payments or contributions referred to in this section shall be the gross amount paid to the insurance company for the particular coverage, and the employe or officer shall be required to pay any amounts normally considered the municipal contribution. If the right of the employe or officer to such position or office is sustained, an adjustment shall be made for any amounts paid in excess of the normal employe contribution.

History: Emergency rule, eff. 11-1-63; cr. Register, February, 1964, No. 98, eff. 3-1-64.