



**Dependent Student Medical Leave Certification Form**

Public law 110-381, also known as “Michelle’s Law,” allows dependent college students insured under their parent’s policy to remain covered if they are required to take a medical leave of absence from school or make any other enrollment changes that might cause them to lose dependent student eligibility. In order to qualify for this continued coverage, the dependent must be suffering from a serious illness or injury and the leave of absence or other enrollment changes must be medically necessary, as determined by the treating physician. Such dependents may remain covered *up to* the earlier of: one year after the first day of the medically necessary leave of absence; **or** the date on which such coverage would otherwise terminate under the terms of the plan/coverage. Following the medical leave, student dependents will once again be required to provide student certification in order to remain eligible for dependent coverage.

**SECTION 1: To be completed by Subscriber. All fields must be completed.**

Group No.	Subscriber Identification No.	Subscriber Name
Dependent Student Name	Dependent Student Date of Birth	

*I hereby certify that the above information is correct.*

Member Signature	Date
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**SECTION 2: To be completed by Attending Physician. All fields must be completed.**

Is the student suffering from a serious illness or injury?       Yes     No

Explanation of Medical Condition (attach additional information if necessary):

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Is the leave of absence or other student enrollment change medically necessary?     Yes     No

Date range for medical leave:      \_\_\_\_\_      \_\_\_\_\_

Effective Date

End Date

Attending Physician Signature	NPI Number	Date
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**All fields on this form MUST be completed.**

**RETURN COMPLETED FORMS TO:**    Blue Cross and Blue Shield of Illinois  
P.O. BOX 805107  
Chicago, IL 60680-4112