

**Provided by Southwestern OH EPC**

Introduction

You should always elect benefits during open enrollment to ensure you get the coverage you need. However, once you make your elections through a cafeteria or Section 125 plan, you are unable to change your elections until the plan year ends. But sometimes qualified life events occur, allowing you to change your elections outside of the standard enrollment period.

This quick reference guide provides an overview of qualifying life events. It is meant for informational use only and should not be construed as legal advice. For more information about qualifying life events, please talk to HR and or your treasurer’s office.

How Do I Qualify?

While you are generally only allowed to change your benefits elections during the open enrollment period each year, certain life events provide an exception. Those life events allow you to change your benefits elections in the middle of the plan year if certain requirements are met.

Qualified life events depend on a specific plan’s terms, but some common examples can be found below:

* Change in status (e.g., marital status, number of dependents and employment status)
* Addition or significant improvement of benefits package option
* FMLA leaves of absence
* COBRA qualifying events
* HIPAA special enrollment events
* Medicare or Medicaid entitlement

Review the reference chart on the following page for qualifying life events and required documentation.

**REMEMBER: In order to change your elections, you must have a qualifying event (shown above) and you must enroll within 31 days of the qualifying event.**

Qualifying Life Event Reference Chart

|  |  |
| --- | --- |
| **Change in Legal Marital Status** | **Required Documentation** |
| Marriage | Marriage certificate |
| Divorce/annulment | Divorce decree/court ruling for annulment |
| Legal separation | Court order verifying legal separation |
| Death of spouse | Death certificate |
| **Change in Number of Dependents** | **Required Documentation** |
| Birth | Birth certificate |
| Death | Death certificate |
| Adoption/placement for adoption | Court order for adoption/placement for adoption |
| Gain or Loss Eligibility for Other Group Coverage (HIPAA special enrollment) | Required Documentation |
| Group health plan | Documentation from plan or issuer regarding change in eligibility (with effective date) |
| **Change in Employment Status of Employee or Spouse** | **Required Documentation** |
| Loss of employment | Termination documents or unemployment application |
| Start of employment | Employer documentation of employment start date |
| Change in worksite | Employer documentation showing change and impact on eligibility |
| Leave of absence | Employer documentation stating employee has commenced or returned from leave |
| **Change in Place of Residence** | **Required Documentation** |
| Change in place of residence of the employee, spouse or dependent that affects eligibility | Documents indicating how change in residence affects employee eligibility |
| **Entitlement to Medicare of Medicaid** | **Required Documentation** |
| Employee, spouse or dependent becomes covered under Medicare or Medicaid, or loses eligibility for his or her Medicare or Medicaid coverage (including coverage under a state Children’s Health Insurance Program or CHIP) | Government verification that coverage was gained or lost (with effective date) |
| **Changes in Coverage** | **Required Documentation** |
| Loss of health coverage sponsored by governmental or educational institution | Government verification of loss of eligibility (with effective date) |
| **Other** | **Required Documentation** |
| Change of custody, judgment, court order or decree requiring health coverage | Court documentation, including qualified medical child support order (QMCSO) |
| COBRA qualifying event | Documentation (with effective date) |
| FMLA leave | Documentation of loss of coverage (with effective date) |
| Eligibility for premium assistance subsidy through a Medicaid plan or CHIP | Government verification of eligibility for subsidy (with effective date) |
| Reduction in hours of service to less than 30 hours without loss of eligibility | **N/A** |

How Can I Change My Elections Midyear?

Outside of open enrollment, you typically cannot make midyear benefit changes unless you experience a qualified life event. To change your elections midyear:

* You must experience a midyear election change event recognized by the IRS.
* The cafeteria plan must permit midyear election changes for that event.
* Your requested change must be consistent with the midyear election change event.

If you believe you’ve experienced a qualifying life event, contact your HR office or Treasurer. He or she will help you determine if you’ve experienced a qualifying life event or your plan allows for a midyear benefits change.

***An election must be completed within 31 days of the qualifying event.***

Conclusion

Typically, open enrollment is the short period of time when you can enroll in or make changes to your employee benefits selection. Outside of open enrollment, you often cannot make changes to your benefits until the next open enrollment period.

One exception to this rule is if you experience a life-changing qualifying event that would trigger a special enrollment period. Events such as getting married or divorced, having or adopting children, or losing eligibility for other health coverage can trigger special enrollment rights. If you believe that you’ve experienced a qualifying life event, reach out to your HR manager or Treasurer'. Together, you can determine if you are eligible to make midyear benefit changes under your plan design.

Be sure to carefully review plan documents during open enrollment to choose the best benefits offerings for you. If possible, consider future life events before choosing your benefits elections during open enrollment to make sure they align with your future goals.

**Dependent Enrollment Procedures 2020-2021**

*This appropriate documentation* ***MUST BE SUBMITTED DURING THE ELIGIBILITY PERIOD*** *(within* ***31 days of the qualifying event, new hire election or open enrollment****) before coverage will be effective. If all documents are not provided within the eligibility period, new hire period or during the open enrollment period (****31 days****), your dependents will not be covered this plan year. You will need to wait until the next open enrollment to add your dependents.*

Dependent children are eligible until the end of the month they turn age 26, regardless of marriage or student status. A dependent child’s spouse or child is *NOT* eligible for coverage.

In order to enroll any dependents for coverage under your district’s insurance plans, you must provide documents showing that they qualify for dependent status. The following outlines who qualifies as a dependent and what documents are required:

**Please present the following documents to your District Treasurer’s or HR Office or**

**upload them to the Benelogic File Cabinet current folder:**

**Spouse:** Your legally married (including same sex) spouse, not legally separated or divorced.

**Documents required:**

1) Marriage certificate that has been filed with court **AND**

2) First page of your most recent Federal tax form (1040) showing that you are still married.

Please black out financial information to protect your financial privacy.

**Children:** You or your spouse’s natural or adopted child and/or a child for whom you are the legal

guardian. EPC coverage terminates the end of the month they turn age 26.

**Documents required:**

1. Birth certificate naming you / your spouse as the parent **OR**
2. Adoption papers naming you / your spouse as adoptee parents **OR**
3. Appropriate court documents naming the employee/spouse as the child’s legal guardian.