

# What is a Qualified Family Status Change?

A qualified family status change may be related to your marital status, number or status of dependents, employment status or work schedule, residence or work site, Medicare/Medicaid eligibility, or a qualified domestic relations order. These events are defined by Section 125 of the Internal Revenue Code. These events may not apply to every benefit plan and many be based on individual circumstances and plan eligibility.

You can change your benefits within **30 days of the qualifying event**.

(Exception: up to 60 days after gaining/losing coverage in Medicaid)

## Changes in Your Legal Marital Status

Marriage, death of spouse, divorce, or annulment.

## Changes in the Number of Dependents

Birth, adoption, placement for adoption, legal guardianship or death of a dependent.

## Change in Current Employment Status

Termination or commencement of employment by the employee, spouse, or dependent that results in a change for benefits eligibility. Termination or commencement of employment by the employee, spouse, or dependent that results in a change for benefits eligibility.

## Change in Working Schedule

Switch between part-time and full-time work, a strike or lockout, commencement of or return from an unpaid leave of absence, or an increase or decrease in hours of employment by the employee, spouse, or dependent that results in a change for benefits eligibility.

## Changes in Dependent Status

Either satisfying or ceasing to satisfy the age or other requirements to qualify as a covered dependent under the plan.

### Change in Work Site or Residency

Change in faculty or staff's, spouse's, or dependent's residence or work site that result in loss of coverage. Examples: You are enrolled in an HMO and move to a county outside of your plan's service area; your spouse is enrolled in his/her employer's plan and that employer decides to offer all employees only one plan option that does not include your geographic area.

### Qualified Domestic Relations Orders

A court order resulting from a divorce, legal separation, annulment, or change in legal custody that requires health plan coverage for the employee's child under the employee's health plan, or can end contributions for the child if the order requests the employee's former spouse to provide the coverage.

### Change in Medicare/Medicaid Eligibility

A corresponding change is permitted under the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) due to the faculty or staff's, spouse's, or dependent's gain or loss of Medicare or Medicaid eligibility. Changes under this rule must be reported within **sixty (60) days** after gaining or losing coverage in Medicaid or the state CHIP program. Your change will be effective as of the event date.