



MID-YEAR PLAN CHANGE MATRIX
APPENDIX A

Mid-Year Plan Change Matrix

Eligible employees experiencing a change in family or work status during the plan year **have 30 days from the date of the event** to make benefit plan changes or elections. The eligible employee may make only those elections that are consistent with the event. Unless otherwise noted, the effective date is the first of the month following receipt of the forms or event date, whichever is later.

1. Qualified Status Change (QSC) A change in family or work status that allows limited mid-year changes to benefit plans that effect eligibility for coverage.

(a) Change in Employee’s Legal Marital Status or Domestic Partnership

Event	Medical, Dental, & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Gain Spouse/ Domestic Partner</p> <p>Note: HIPAA special enrollment rights may also apply. Refer to 2(a)(B)</p>	<p>Enroll newly eligible spouse/domestic partner and eligible dependents.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible but not yet enrolled eligible dependents.</p> <p>Employee may opt-out or decline when added to a new spouse or domestic partner's plan. Remove individuals who gain other coverage.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Enroll or increase.</p> <p>Decrease if newly eligible under new spouse’s health plan.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Enroll or increase.</p> <p>Decrease or cancel if spouse makes a DCFSA election under spouse’s plan or spouse is disabled, full time student, or works a different shift.</p> <p>Cancel if spouse is not employed.</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p> <p>Employee is eligible for optional employee life up to \$100,000 (\$20,000 increments) if form is received within the 30-day window of the event date.</p> <p>An employee’s enrolled domestic partner who changes status to spouse is not eligible for the spouse guarantee life insurance.</p>
<p>Loss of Spouse/Domestic Partner (Divorce, annulment, death, or termination of domestic partnership)</p> <p>Note: HIPAA special enrollment rights may also apply. Refer to 2(a)(A)</p>	<p>Cancel elections for ineligible spouse or domestic partner and ineligible dependents. <u>Coverage ends the last day of the month in which the spouse or domestic partner is no longer eligible.</u></p> <p>Enroll and add eligible dependents who lost other coverage.</p> <p>Enroll from opt-out if eligibility is lost under spouse/partner’s plan.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) eligible dependents.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Decrease.</p> <p>Enroll or increase election where coverage is lost under spouse's health plan.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Enroll or increase.</p> <p>Decrease (e.g., cost of child care decreases) or cancel coverage if eligibility is lost (e.g., dependent now residing with spouse).</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p> <p>Employee is eligible for optional employee life up to \$100,000 (\$20,000 increments) if form is received within the 30-day window of the event date.</p> <p>Optional spouse/domestic partner life insurance must be canceled.</p> <p>If no remaining eligible dependents: Cancel Dependent Life Change AD&D for employee and dependents to employee only.</p>

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(b) Change in the Number of Employee's Dependents				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Gain Dependent (Birth, placement for/or adoption, affidavit of dependency, domestic partner's children by affidavit of domestic partnership, grandchild by affidavit)</p> <p>Note: HIPAA special enrollment rights may also apply. Refer to 2(a)(B)</p>	<p>Enroll newly eligible dependents.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) dependents. If the dependent is tag-along due to newborn the tag-along individual is added prospectively.</p> <p>Opt-Out or decline if they become eligible under spouse/domestic partner's employer's plan or remove dependents who become eligible under spouse's plan.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p> <p>Biological newborn's/adopted child's coverage effective date is moment of birth/adoption or placement for adoption through the first 31 days of life. To continue coverage for the dependent the employee must submit a midyear change form adding the dependent. Employee must enroll dependent within 30 days of event date.</p>	<p>Enroll or increase election.</p> <p>Cancel or decrease if newly eligible under spouse's health plan.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Enroll or increase to accommodate newly eligible dependents.</p> <p>Cancel if spouse stops working.</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p> <p>Employee is eligible for optional employee life up to \$100,000 (\$20,000 increments) if form is received within the 30-day window of the event date.</p>
<p>Loss of Dependent</p>	<p>Cancel coverage for dependent that loses eligibility. <u>Coverage ends the last day of the month in which the dependent is no longer eligible.</u></p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Decrease.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Decrease.</p> <p>Cancel enrollment if the dependent being removed is the last eligible dependent for dependent care FSA.</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p> <p>If no remaining eligible dependents: Cancel Dependent Life Change AD&D for employee & dependents to employee only.</p>

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(c) Change in Employment Status of Employee, Spouse, or Domestic Partner (or other change in Employment Status) that Affects Eligibility.				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Change in Employment Status (e.g., PT to FT, FT to PT, return from specific leave, strike, lockout)</p> <p><u>A change from PT to FT or FT to PT must be a change in the HR system, not a change in work hours.</u></p>	<p>Enroll and add eligible dependents if eligibility is gained for the plan.</p> <p>Opt-out with other coverage or decline.</p> <p>A transfer from one agency to a different agency or an agency to a university with no break in coverage and no HR position change does not allow changes to enrollments.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Enroll when hired or return from leave.</p>	<p>Enroll</p> <p>Enroll, increase, decrease or cancel when change in work hours, or spouse works different shift.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p>
<p>Change in Employment Status for Spouse/Domestic Partner (e.g., PT to FT, FT to PT, return from specific leave, strike, lockout)</p>	<p>Enroll and add eligible dependents if other coverage was lost.</p> <p>Provided that eligibility was gained under spouse/domestic partner's plan, employee may opt-out with enrollment in the other coverage or decline PEBB coverage.</p> <p>Remove individuals who gain other coverage.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Decrease or cancel election if employee gains eligibility under spouse's health coverage.</p> <p>Enroll or increase election to reflect loss of eligibility under spouse's health coverage.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Enroll or increase</p> <p>Decrease or cancel when need for dependent care is eliminated or decreases.</p> <p>Enroll, increase, decrease or cancel when change in work hours or spouse works different shift.</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p>

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(d) Termination of Employment of Employee, (or other change in Status) that Causes Loss of Eligibility.				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
Employee ends employment or Other Change in Employment Status that causes loss of eligibility. (e.g., unpaid leave, strike)	Enrollment ends at the end of the month in which the employee ceases to meet eligibility.	Enrollment ends at the end of the month in which the employee ceases to meet eligibility. If there is a positive balance in the HCFSA account at the end of employment, member may continue under COBRA, however contributions will be post-tax.	Enrollment ends at the end of the month in which the employee ceases to meet eligibility.	Enrollment ends at the end of the month in which the employee ceases to meet eligibility. An employee on protected or unprotected LWOP may pay premiums for 12 months for optional life and AD&D. If eligibility is lost, the employee may continue life insurance coverage through portability.
Termination and Return to work with a break in coverage but within 12 months	Prior elections are automatically reinstated the first of the month following rehire date, except for FSAs, Commuter Accounts, and Long-Term Care coverage. Employee may make plan changes within 30 days of rehire date. Changes are prospective (first of the month following receipt of the form).	Enroll	Enroll	Prior elections automatically reinstated. An employee returning to work who ported their previous life insurance or enrolled in retiree life cannot be enrolled in active life insurance while the ported or retiree life is still current. Note: Option for retiree life is only available once when an employee retires.

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(d) Termination of Employment by Spouse or Domestic Partner (or other change in Status) that Causes Loss of Eligibility.				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Termination of Spouse's or Domestic Partner's Employment (or other change in employment status resulting in a loss of eligibility under their employer's plan)</p> <p>Note: HIPAA special enrollment rights may also apply. Refer to 2(a)(A)</p>	<p>Enroll and add eligible dependents who lose coverage under spouse's or domestic partner's plan.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) eligible dependents.</p> <p>Medical and dental coverage option changes are allowed if changing plan types. (e.g., Kaiser Permanente to Providence Statewide, Willamette Dental to Delta Dental)</p>	<p>Enroll or increase election to reflect loss of eligibility for health coverage.</p> <p>No change allowed related to domestic partnership. Expenses for domestic partners are not covered unless the domestic partner qualifies as a dependent under IRS rules.</p>	<p>Enroll or increase election if spouse or dependent loses eligibility for Dependent Care FSA.</p> <p>Employee may decrease or cancel election to reflect loss of eligibility for coverage.</p> <p>Cancel if spouse stops working.</p> <p>No change allowed related to domestic partnership.</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p>

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(e) Change in Place of Residence of Employee				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Move by the employee that causes a loss of eligibility for a health plan</p>	<p>Cancel or enroll if the change in employee's residence affects eligibility for coverage, for example moving out of a plan's service area.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) eligible dependents.</p> <p>Note: When address changes are made online, the PEBB Benefit Management System will notify the employee of loss of eligibility and inform employee to select another plan by submitting appropriate forms to the agency/university.</p>	<p>No change allowed</p>	<p>No change allowed</p>	<p>Employee may enroll, increase, decrease, or cancel coverage even when eligibility is not affected.</p>

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2. HIPAA Special Enrollment Rights – A HIPAA special enrollment event is also a Mid-Year Plan Change. Under HIPAA, health plans are required to provide special enrollment opportunities for certain eligible individuals. The effective date is determined by HIPAA regulations.

(a) HIPAA Special Enrollment Rights				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
<p>Special Enrollment for Loss of Health Coverage</p> <p>If employee or eligible dependents are enrolled under another group health plan and lose coverage under the plan, they are eligible for PEBB plans. If the form is received within 30 days of the event the enrollment is retroactive. If received after 30 days enrollment is prospective.</p>	<p>Enroll and add eligible dependents who lose coverage.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) dependents.</p>	No changes	No changes	No changes
<p>Special Enrollment for Gain of New Dependent by Marriage, Birth, Adoption, or Placement for Adoption</p>	<p>Enroll and add eligible dependents.</p> <p>Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) dependents.</p> <p>Biological newborn's/Adopted Child's coverage effective date is moment of birth/adoption or placement for adoption through the first 31 days of life. To continue coverage for the dependent the employee must submit a midyear change form adding the dependent. Employee must enroll dependent within 30 days of event date.</p> <p>Coverage due to marriage is prospective (effective the first of the month following receipt of forms).</p>	No changes	No changes	No changes

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3. Gain or Loss Other Coverage – Employee or employee’s dependent gains or loses other coverage that affects their eligibility.

(a) Gain or Loss of Other Coverage				
Event	Medical, Dental & Vision	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)	Optional Benefits (Term Life, AD&D, Short & Long-Term Disability)
Gain other group health coverage	Cancel coverage, opt-out or decline. Remove dependents who gain other coverage.	No changes	No changes	No changes
Loss of other group health coverage	Enroll Add eligible dependents who lost coverage. Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) eligible dependents.	No changes	No changes	No changes
Different Open Enrollment/Plan Year under spouse/domestic partner’s employer plan	Corresponding changes can be made. (e.g. gain coverage through spouse/partner’s plan, employee can opt-out or decline under PEBB or remove individuals who gain coverage)	No changes	Corresponding changes can be made.	Corresponding changes can be made.

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4. Judgments, Decrees, or Orders

(a) Judgments, Decrees, or Orders (This change in election applies to an employee's eligible dependent child. This does not include divorce decrees or orders)

Event	Medical, Dental & Vision	Health Care FSA (HCFA)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
Order that Requires Coverage for the Child of the employee, employee's spouse/domestic partner (NMSO)	Enroll the child to provide coverage. Enroll from opt-out or decline. Under tag-along rule, election of coverage may also extend to previously eligible (but not yet enrolled) dependents.	Enroll or increase No change allowed related to domestic partnership.	No changes	No changes
Order that Terminates coverage for the Child of the employee, employee's spouse/domestic partner	Cancel coverage for the child.	Decrease No change allowed related to domestic partnership.	No Changes	No Changes

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5. Dependent Care FSA Change in Cost or Coverage – Changes apply to an employee’s eligible dependent child’s daycare.

(a) Cost or Coverage Change for Dependent Care (FSA only)				
Event	Medical, Dental & Vision	Health Care FSA (HCFSAs)	Dependent Care FSA (DCFSA)	Optional Benefits Term Life, AD&D, Short & Long-Term Disability
Change in Dependent Care Provider Cost	No changes	No changes	Enroll or increase when change to new dependent care provider (relative or not) increases cost. Increase when dependent care provider (not a relative) increases the cost of care. Cancel or decrease when change to new dependent care provider (relative or not) decreases cost.	No changes
Change in Dependent Care Provider Coverage	No changes	No changes	Enroll or increase when the enrolled spouse's employer ceases offering dependent care FSA. Enroll or increase when spouse revokes DCFSA through their employer that has a different open enrollment period. Cancel or decrease when spouse enrolls in a new employer-sponsored DCFSA. Cancel or decrease when dependent care is reduced due to the child entering the school system for the first time. Increase when the salary of a household employee (not your relative) who provides dependent care services is increased. Decrease when spouse changes employment from a traditional full-time work setting to a self-employed arrangement (decreasing dependent care needs).	No changes