

A Qualifying Event is a change in your family status and includes:

- (a) change in legal marital status: (1) marriage, (2) death of spouse, (3) divorce, (4) legal separation, (5) annulment
- (b) change in number of dependents: (1) birth, (2) adoption, (3) placement for adoption, (4) death of a dependent
- (c) change in employment status: (1) termination or commencement of employment of the employee, spouse or dependent, other than for gross misconduct
- (d) change in work schedule: (1) an increase or decrease in the number of hours of employment by the employee, spouse or dependent, (2) a switch between full-time and part-time status, (3) a strike or lockout, (4) commencement or return from an unpaid leave of absence
- (e) the dependent satisfies or ceases to satisfy the requirements for unmarried dependents: (1) due to attainment of age, (2) student status
- (f) change in the place of residence or work site of the employee, spouse or dependent

For the Medical and/or Dental Programs, you may be eligible to add or delete dependents, or add or drop coverage. For the Reimbursement Accounts, you may be eligible to make changes to your contributions for the remainder of the calendar year. The change(s) in coverage that you request must relate to the change in your family status.

To change your coverage(s) when a Qualifying Event has occurred, you must notify the Benefits Office and complete an enrollment form within 31 days of the date of the Qualifying Event for all items indicated above, except (a)(3), (a),(4), (e)(1) and (e)(2). [60 days applies for items (a)(3), (a),(4), (e)(1) and (e)(2).] The completed form must be submitted, with proof of the Qualifying Event, to the Benefits Office. Your employee premiums (for Medical and/or Dental Program coverages) and/or your contributions (to the Reimbursement Accounts) will then be changed for the remainder of the calendar year.

If you notify the Benefits Office of the Qualifying Event and provide the completed enrollment form within the applicable period, the change in coverage will become effective as of the date of the Qualifying Event.

If you don't notify the Benefits Office and make a change in your coverage(s) within the applicable period, you must wait until the next Open Enrollment period to make a change to your coverage(s).

You must notify the Benefits Office within the applicable period. If you only notify the Medical and/or Dental Program directly, we may be unable to make the change until the next Open Enrollment period.

Open Enrollment period is held once a year, usually in the fall for the Medical and Dental Programs and the Reimbursement Accounts. Information will be provided in advance to all employees.

During an Open Enrollment period, you may change medical and/or dental programs, drop coverage(s), and/or add or drop dependents from your coverage(s). You may also sign up for the Reimbursement Accounts. The elections you make during an Open Enrollment period will be effective January 1 of the following calendar year.