

# Ensign Services Qualifying Life Events (QLE) Matrix

All changes must be submitted within 30 days of Qualifying Event

Qualifying Life Event	Medical / Dental / Vision	Medical FSA	Dependent Care FSA	Voluntary Life & AD&D	Accident Critical Illness Hospital	Required Documentation	Effective Date (add or change)	End Date (term)
<b>Marriage</b>	<p><b>Add:</b> If not currently enrolled, employee may add themselves and their newly eligible spouse.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type while adding spouse.</p> <p><b>Drop:</b> Employee may drop themselves and their currently covered dependents if they gain coverage elsewhere.</p>	Employee may enroll for the first time or increase current contribution amount.	No change allowed.	May enroll or make changes within 30 days.	May enroll or make changes within 30 days.	Copy of marriage certificate.	First day of the month following the date of marriage.	Last day of the month in which benefits are terminated.
<b>Divorce, legal separation or annulment</b>	<p><b>Add:</b> If losing coverage through spouse, employee may add themselves and their eligible dependents.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels but not medical plan type.</p> <p><b>Drop:</b> Employee may only drop the former spouse.</p> <p><b>NOTE: The former spouse must be dropped from all medical plans.</b></p>	Employee may enroll for the first time or decrease current contribution amount if already enrolled.	No change allowed.	May enroll or make changes within 30 days.	May make changes within 30 days.	Copy of page 1 of the court date-stamped divorce or legal separation decree.  To add coverage, must show proof of loss of coverage through spouse.	First day of the month following the benefit change.	Last day of the month in which benefits are terminated.
<b>Birth, adoption or placement for adoption</b>	<p><b>Add:</b> If not currently enrolled, employee may add themselves and their newly eligible child. Dependents that did not gain eligibility could not be added.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type while adding newly eligible child.</p>	Employee may enroll for the first time or increase current contribution amount if already enrolled.	No change allowed.	May enroll or make changes within 30 days.	May enroll or make changes within 30 days.	Copy of newborn's state issued birth certificate or child's adoption papers stating legal guardianship of the child.	Date of birth or adoption.	Last day of the month in which benefits are terminated.
<b>Dependent child turns 26 (loses eligibility)</b>	<b>Drop:</b> Employees MUST drop the ineligible dependent child from the health plans.	Employee may decrease current contribution amount if already enrolled.	No change allowed.	N/A	MUST drop ineligible child from coverage.	N/A	First day of the month following the benefit change.	Last day of the month in which benefits are terminated.
<b>Change in residence or work location that affects plan eligibility</b>	<p><b>Change:</b> If current election is not available in the new location, employee may enroll in one of the available options.</p> <p>If newly eligible for a plan option in the new location, employee may enroll in the newly available plan option.</p> <p>If covered dependent moves and loses coverage under current plan, employee may select a new plan option that will provide coverage for themselves and your eligible dependents.</p> <p><b>Drop:</b> Employee may drop coverage if there is not an available plan.</p>	Employee may change their contribution amount.	No change allowed.	N/A	N/A	N/A	First day of the month following the change in location.	Last day of the month in which the change in location occurred.
<b>Spouse becomes newly eligible for their employer's plan / spouse's open enrollment</b>	<p><b>Change:</b> If already enrolled in a medical plan, employee may change coverage levels, but may not change medical plan type.</p> <p><b>Drop:</b> Employee may drop themselves and their currently covered dependents if they gain coverage through the spouse's employer sponsored plan.</p>	If spouse is dropped, employee may decrease current contribution amount.	No change allowed.	N/A	N/A	Statement from spouse's employer verifying first time eligibility.	The last day of the month prior to the effective date of the spouse's insurance.	Last day of the month in which benefits are terminated.
<b>Employee and/or spouse loses coverage under spouse's employer's plan</b>	<p><b>Add:</b> If previously enrolled in spouse's employer's plan, employee may add themselves and their newly eligible dependents.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type while adding newly eligible dependents.</p>	Employee may enroll for the first time or change current contribution amount if already enrolled.	No change allowed.	May enroll or make changes within 30 days.	N/A	Statement from spouse's employer verifying loss of coverage	The last day of the month prior to the effective date of the spouse's insurance.	Last day of the month in which benefits are terminated.
<b>Loss of coverage under parent's or other employer's group plan</b>	<b>Add:</b> If previously enrolled in parent's or other employer's group plan, employee may add themselves.	Employee may enroll for the first time or change current contribution amounts if already enrolled.	No change allowed.	May enroll or make changes within 30 days.	N/A	Proof of loss of coverage	First day of the month following the benefit change.	

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<b>Significant increase in spouse's medical coverage or premium costs (30% or greater)</b>	<p><b>Add:</b> If not currently enrolled, employees may add themselves and their eligible dependents.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type while adding newly eligible dependents.</p>	No changes allowed	No change allowed.	May enroll or make changes within 30 days.	N/A	Statement from spouse's employer verifying change in premium	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.
<b>Death of spouse</b>	<p><b>Add:</b> If not currently enrolled and enrolled in spouse's plan, employees may add themselves and their eligible dependents.</p> <p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type.</p> <p><b>Drop:</b> Employee may drop themselves and their currently covered dependents.</p>	Employee may enroll for the first time or change current contribution amounts if already enrolled.		MUST drop spouse coverage.	MUST drop spouse coverage.	Proof of death and/or loss of medical coverage.	First day of the month following the benefit change.	Last day of the month in which the benefits are terminated.  Spouse's benefits end on date of death.
<b>Change in employee's employment status that effects eligibility under plan</b>	<p><b>Add:</b> If not currently enrolled, employees may add themselves and their eligible dependents.</p> <p><b>Change:</b> If already enrolled in a medical plan, employee may change coverage levels, but may not change medical plan type.</p> <p><b>Drop:</b> Employee may drop themselves and their currently covered dependents.</p> <p><b>NOTE:</b> If change in employment status <b>does not</b> effect eligibility, employee may not add medical coverage. Employee may still add Dental and/or Vision.</p>	If newly eligible, employee may enroll for the first time. Otherwise, changes are not allowed.	No change allowed.	If employee gains eligibility for the first time, may enroll or make changes within 30 days.	If employee gains eligibility for the first time, may enroll or make changes within 30 days.	Verification of the employee's change of employment status.	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.
<b>Court order results in the employee gaining or losing custody of dependent</b>	<p><b>Add:</b> If not currently enrolled, employee may add themselves and their newly eligible dependent.</p> <p><b>Change:</b> If already enrolled, employee may change coverage levels or medical plan type while adding or removing dependents.</p>	Employee may enroll for the first time, change current contribution amounts if already enrolled, or cancel contributions to the program entirely.		N/A	N/A	Complete court order or decree.	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.
<b>Eligible dependent moves into the United States</b>	<p><b>Change:</b> If enrolled, employee may change coverage levels or medical plan type to add newly eligible dependent.</p>	Employee may enroll for the first time or change current contribution amount if already enrolled.	No change allowed.	N/A	N/A	Copy of Visa for newly eligible dependent.	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.
<b>Court order establishes an employee's financial responsibility for a child's health care</b>	<p><b>Add:</b> If not currently enrolled, employees may add themselves and their newly eligible dependents..</p> <p><b>Change:</b> If already enrolled, employee may change coverage levels or medical plan type while adding newly eligible dependent.</p>	Employee may enroll for the first time or change current contribution amount if already enrolled.		N/A	N/A	The medical support order is sent to the building and/or the Service Center.	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.
<b>Change in Medicare, Medicaid or CHIP status</b>	<p><b>Add:</b> If not currently enrolled and they lose coverage through Medicare, Medicaid or CHIP employees may add themselves and their eligible dependents to any of the medical plans.</p> <p><b>Change:</b> If already enrolled in a medical plan, employee may change coverage levels or medical plan type.</p> <p><b>Drop:</b> If they gain coverage through Medicare, Medicaid or CHIP, employee may drop themselves and their currently covered dependents from any of the medical plans.</p> <p><b>NOTE:</b> Medicare, Medicaid and CHIP allow a 60 day election window.</p>	If gaining medical coverage, employee may enroll for the first time or change current contribution amount if already enrolled.	No change allowed.	N/A	N/A	Copy of the Medicare, Medicaid or CHIP card and documentation showing effective date of coverage.	First day of the month in which benefits are effective.	Last day of the month in which benefits are terminated.