Move Affecting Eligibility for Health Care Plan These qualifying mid-year event election changes are permitted when you, your spouse or your child's eligibility for a health care plan changes due to a permanent change in in residence, including moving into and out of a plan's service area or a move into or out of the United States. **Election changes must be** *on account of and correspond with* the event. (Note: You cannot cover a person as a dependent unless that person is a U.S. citizen, U.S. resident alien, U.S. national, or a resident of Canada or Mexico.)

This qualifying event also permits an election change if your work location changes and affects your eligibility for HMO coverage. (You must live or work in the HMO service area to be eligible for coverage under the HMO.)

Health Insurance Coverage:

• When you become eligible for a plan's coverage, you may enroll or change your plan.

• You may add eligible family members when they move into your plan's service area.

- You may remove eligible family members when they move out of your plan's service area.
- When you lose eligibility for your HMO coverage, you must change your plan or waive coverage.

 If you move from a plan's service area, you may change your plan.

• You may add eligible family members when they enter the United States with a valid Visa, proof of alien status, or other homeland security paperwork.

Note: Contact your agency's Benefits Administrator to remove family members who leave the United States and are no longer eligible for the program.

Health Flexible Spending Account: • No election change is permitted.

Dependent Care Flexible Spending Account:

• No election change is permitted.

Important Things To Know About Making An Election Change Request For This Event

1. What documentation is required for the QME. Your agency will validate the change of address. If adding dependents, you must provide documentation that they are eligible for the state health plan.

A valid VISA, proof of alien status, or other homeland security paperwork must be submitted for dependents who do not have a valid SSN.

2. How to submit the request. Starting with the date of the permanent change in residence, you have 60 calendar days to use EmployeeDirect, or complete a paper Enrollment Form and submit it to your agency's Benefits Administrator.

3. When approved changes take effect. Changes are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day. (Note: when a dependent leaves the country, changes in *health care coverage* are effective the first of the month following the loss of eligibility under your plan.) Changes are irrevocable once the

effective date of the change has occurred.

Reminder: If you miss this opportunity to submit your change request, your next chance will be at Open Enrollment or with another consistent Qualifying Mid-Year Event, whichever comes first. If you already have a Family membership and need to add eligible dependents, please see your agency's Benefits Administrator for additional information.