QME – Other Employer's Open Enrollment or Allowable Health Plan Change

These qualifying mid-year event election changes are permitted when the coverage for you, your spouse, or your child under an employer's health care plan is changed and a corresponding change on your plan is desired. This includes Open Enrollment under another employer's plan when the other employer's plan operates under a different plan year (not including COBRA qualified beneficiaries who are enrolled during their COBRA coverage period). **IRS rules require that election changes must be on account of and correspond with the event.**

Health Insurance Coverage:	 You may enroll or change your plan when a corresponding change is made under the other plan. HMO members are required to select a primary care physician. You may add eligible family members who are removed from the other plan. You may remove family members who enroll in the other plan. Removed family members do not qualify for Extended Coverage (COBRA). You may waive coverage if you are newly enrolled under the other plan.
Health Flexible Spending Account:	 No election change is permitted.
Dependent Care Flexible Spending Account:	 You may enroll, increase, reduce or cancel your election amount due to corresponding changes made during the other employer's Open Enrollment period.

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

1. What documentation is required? Documentation from the other employer validating the corresponding change in their coverage or the change made during the Open Enrollment period. If adding dependents, you must provide documentation that they are eligible for the state health plan.

See QME sheet on "Dependent Care Cost or

Coverage Change."

2. How to submit the request. Starting with the day the corresponding change takes effect under the other plan, 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. Health Insurance and FSA elections are separate elections and may be submitted together or separately within the allotted timeframe. Changes are irrevocable once the effective date of the change has occurred.

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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.