

Status Change	OAB Life Events	Enrollment Certification Required?	If so, what	Dependent Certification Required?	If so, what2	Documentation must be provided in how many days?	Once Documentation is provided, when should coverage begin/end?	Does the Rate follow the Coverage start date? If not indicate when rate should start.	What changes are allowed for this life event?	What Plans should we allow changes to with this life event?
Birth/Adoption/Legal Custody	Birth/Adoption/Legal Custody	Y	1) Birth Certificate 2) Adoption Certificate 3) Legal Custodian Paperwork	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	90 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase dependent and coverage. Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Change in Benefit Program (AFSCME to Non AFSCME OR Non AFSCME to AFSCME) or Benefit Program Level (PT Full to Full or Full to PT Full) *Note only allow changes in benefits if the change impacts their plan eligibility. For example: if moving from Class NBU to Admin, the benefits are the same, therefore no option to change.	Employment Type Change	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase dependent and coverage May drop/decrease coverage Can NOT change Supplemental or Dependent Life UNLESS moving from ineligible to eligible (this should fall under Newly Eligible Life Event)	1) Medical 2) Dental 3) Vision 5) Healthcare FSA 6) Dependent Day Care FSA 8) Short Term Disability
Change in Appt Type Months (example 9 to 12)	Change in Appt Type Months	N	not applicable	N/A	N/A	N/A		Effective the date of the event.	No Changes Allowed	No Changes Allowed
Change of spouse/partner's, or child's coverage/employment	Dependent Gains Other Coverage OR Dependent Loses Other Coverage	Y	Proof of other coverage or Proof of coverage loss	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Dependent Gains Coverage = May drop/decrease dependents/coverage Dependent Loses Coverage = May add/increase coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Child Reached age 26	Dependent No Longer Eligible	N	not applicable	N/A	N/A	31 days from event date	End of month in which child turns 26 (OAB, Anthem, VSP, Dep Life)	If applicable Rate adjusts first of month following age 26.	May Drop Dependent, Decrease Healthcare FSA, May drop Dependent Life ONLY if this is the only dependent covered, No changes allowed to Supp Life	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA
Death of Employee	Death of Employee (Note: No cert required for OAB change, but is required to process life insurance claim)	N	not applicable	N/A	N/A	Verbal notification acceptable to stop benefits	Life Event should be effective the day after the death, which results in coverage through the day of the death	Life Event should be effective the day after the death, which results in coverage through the day of the death	Drop Coverage	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability 9) EAP

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Death of Dependent Child	Death of Dependent (Note: No cert required for OAB changes)	N	not applicable	N/A	N/A	Verbal notification acceptable to stop benefits	Life Event should be effective the day after the death, which results in coverage through the day of the death	Life Event should be effective the day after the death, which results in coverage through the day of the death	May Drop Deceased Dependent, Decrease FSA(s), May drop Dependent Life ONLY if this is the only dependent covered, Can NOT make changes to Supplemental Life	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA
Death of Spouse or Domestic Partner	Death of Spouse/Domestic Partner	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	Verbal notification acceptable to stop benefits, but other documetnation required 31 days from event date to add/change coverage to others	Life Event should be effective the day after the death, which results in coverage through the day of the death	Life Event should be effective the day after the death, which results in coverage through the day of the death	Remove deceased spouse/domestic partner. May add/change coverage for other dependents (due to a change in their coverage from death of parent) Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life
Dependent Gains Other Coverage	Dependent Gains Other Coverage	Y	Proof of other coverage	N/A	N/A	31 days from event date	Effective the date of the event.	Effective the date of the event.	Dependent Gains Coverage = May drop/decrease dependents/coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Dependent Loses Other Coverage	Dependent Loses Other Coverage	Y	Proof of coverage loss	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Dependent Loses Coverage = May add/increase coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Divorce	Divorce	Y	Divorce Decree	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork	31 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase employee, dependents and coverage May drop/decrease coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Employee Gains Other Coverage	Employee Gains Other Coverage	Y	Proof of other coverage	N/A	N/A	31 days from event date	Effective the date of the event.	Effective the date of the event.	Dependent Gains Coverage = May drop/decrease dependents/coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability

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Employee Loses Other Coverage	Employee Loses Other Coverage	Y	Proof of coverage loss	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Dependent Loses Coverage = May add/increase coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Employee Termination	Employee Termination	N	not applicable	N/A	N/A	N/A	End of pay period Faculty terminations/retirements in May have coverage to May 31.	End of pay period	Drop Coverage (COBRA)	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) Short Term Disability
Employee on Disability Leave	Employee on Disability Leave	N	not applicable	N/A	N/A	N/A	As of Event Date	As of Event Date	Drop Coverage (COBRA) May continue current supplemental life & dependent life coverage up until age 70 if approved for disability benefits, will be billed via Bursar's office	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life
Layoff with Benefits	Layoff with Benefits	N	not applicable	N/A	N/A	31 days from event date	Effective the date of the event.	Effective the date of the event.	May drop coverage and/or remove Dependents May ONLY DECREASE Supplemental Life & Dependent Life	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life
Layoff with Recall Rights	Layoff with Recall Rights	N	not applicable	N/A	N/A	N/A	End of pay period	End of pay period	Drop Coverage (COBRA)	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life
Location Change from HR OU EASTERN	Location Change from HR OU EASTERN	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May Add/Remove Dependents change in Supplemental Life or Dependent Life	No 1) Medical 5) Healthcare FSA 6) Dependent Day Care FSA

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Location Change to HR OU EASTERN	Location Change to HR OU EASTERN	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May Add/Remove Dependents change in Supplemental Life or Dependent Life	No 1) Medical 5) Healthcare FSA 6) Dependent Day Care FSA
Marriage	Marriage	Y	Marriage Certificate	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase dependents or coverage May drop dependents or coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life
New Hire	New Hire	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Add Coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
New Hire NRA	New Hire NRA	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Add Coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
Newly Eligible	Newly Eligible	Y	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	31 days from event date	31 days from event date	Add Coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
Rehire (from Ex-Employee Status)	Rehire (from Ex-Employee Status)	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	Add Coverage and dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD

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Return from Disability Leave	Return from Disability Leave	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May Add/Remove Dependents. *May only continue Supp Life if have been paying premiums during time off. Will have to use Benefit Enrollment to give Supplemental life if this is the case	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life* 8) STD
Return from Layoff with Recall Rights	Return from Layoff with Recall Rights	N	not applicable	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May Add/Remove Dependents Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
Salary Change	Salary Change	N		N/A	Change's Salary Certificate	N/A	N/A	N/A	No Changes Allowed	No Changes Allowed
Domestic Partnership End	End Domestic Partnership	Y	Domestic Partner Statement of Termination	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase employee, dependents and coverage May drop/decrease coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
Domestic Partnership Start	Start Domestic Partnership	y	Domestic Partner Affidavit	Yes - for newly added dependents	Child, step child, domestic partner child = birth certificate adopted child or dp adopted child = adoption certificate legal dependent or dp legal dependent = legal custodial paperwork spouse = marriage certificate domestic partner = DP affidavit	31 days from event date	Effective the date of the event.	Effective the date of the event.	May add/increase dependents or coverage May drop dependents or coverage Supplemental Life Max without EOI = \$200,000	1) Medical 2) Dental 3) Vision 4) Dependent Life 5) Healthcare FSA 6) Dependent Day Care FSA 7) Supplemental Life 8) STD
Employee Change Age	Age Change	N/A		N/A	N/A	N/A	N/A	N/A	N/A	7) Supplemental Life 8) STD