



Comprehensive Guide to Midyear Benefit Election Changes

This guide covers qualifying life events that allow employees to make midyear changes to benefits.

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Overview

Employees enrolled in employer-sponsored pre-tax benefits through an Internal Revenue Code § 125 cafeteria plan generally cannot alter their elections midyear unless they experience a qualifying life event (QLE). These changes must comply with § 125 regulations, the employer's plan documents, and, if applicable, Health Insurance Portability and Accountability Act (HIPAA) special enrollment rights.

Benefits offered through a cafeteria plan are referred to as **qualified benefits** and include employer-provided accident and health plans such as medical, dental, vision, term life, and disability plans, health flexible spending accounts (HFSAs), dependent care flexible spending accounts (DCFSAs), and health savings accounts (HSAs).

Note: HIPAA special enrollment rights alone do not guarantee pre-tax benefits election changes. Those changes must also be permitted by the § 125 cafeteria plan.

This guide outlines the QLEs that allow midyear changes, the benefits affected, applicable time frames, consistency and documentation rules, and HIPAA special enrollment rights.

§ 125 Qualifying Life Events and Consistency Rule

Under § 125, a QLE allows employees to make changes midyear if the requested change is consistent with the event. The consistency rule ensures the midyear election is "due to and on account of" the QLE that triggered the change request. For example, an employee had a new baby and requested to add the baby to the health plan. The request is consistent with the birth of a child.

The consistency rule applies to benefit types as follows:

- **Qualified health plans (QHPs) (medical, dental, vision):** The consistency rule applies.
- **HFSAs:** A stricter application of the consistency rule applies, limiting midyear changes (e.g., generally, employees cannot drop HFSA coverage solely to switch to a health savings account (HSA).
- **DCFSAs:** A more flexibly interpreted consistency rule applies, allowing for broader midyear changes than are permitted under an HFSA.
- **Life, accidental death and dismemberment (AD&D) insurance, and disability plans:** A relaxed consistency rule applies that aligns coverage with a change in status, even when eligibility is not directly affected.
- **HSAs:** HSAs are not considered group health plans, and as such, the consistency rule does not apply. Employees must be permitted to start, stop, or modify their pre-tax HSA contributions at least once per month, even without a QLE.

Tag-Along Rule

The tag-along rule is an optional cafeteria plan provision that permits midyear enrollment of additional individuals including an existing spouse or children who were not previously enrolled or directly impacted by the event for the following QLEs:

- Change in legal marital status
- Child gained by birth, adoption (or placement for adoption)
- Dependent gains or loses eligibility
- Change in employment status
- Change in residence

For example, Pat has two children enrolled on the ex-spouse's group health plan. Pat remarries and adds their new spouse on their employer's group health plan. Pat may also enroll their two existing children at the same time as the new spouse.



HIPAA Special Enrollment Rights

Health Insurance Portability and Accountability Act (HIPAA) special enrollment rights apply to qualified health plans (including medical coverage offered on a COBRA continuation, individual, or after-tax basis) but do not extend to HIPAA excepted benefits, such as stand-alone dental or vision coverage and HFSA with minimal or no employer contributions. Group health plans are required to provide special enrollment periods during which individuals who previously declined health coverage for themselves and their dependents may be allowed to enroll (regardless of any open enrollment period).

HIPAA requires enrollees to be given the opportunity to enroll in, or change to, any available medical plan coverage option if they trigger a HIPAA special enrollment event, even if it's the only action requested (e.g., a plan offering an HMO, a low-deductible PPO, and a high deductible PPO offers a choice of three medical plan coverage options). HIPAA special enrollment rights are limited to the following specific QLEs:

- Loss of eligibility for other group health coverage or individual health insurance coverage (not common)
- Gain of a new dependent through marriage, birth, adoption, or placement for adoption
- Loss of eligibility for CHIP or Medicaid coverage, or gain of eligibility for a state premium assistance subsidy

It's important to note that a gain or loss of Medicare coverage qualifies under § 125 rules but is not a covered HIPAA special enrollment right event (SER event). Consistency rules also apply to HIPAA event requests.

§ 125 and HIPAA Deadlines to Act

Most commonly, employers require employees to request a midyear QLE change within 30 calendar days of the event, unless a longer period is required by law as it is for certain HIPAA covered events.

For HIPAA special enrollment rights involving qualified health plans, employers must allow at least 30 calendar days for employees to request a midyear change for the covered HIPAA events of marriage, birth, adoption, placement for adoption, or loss of eligibility. For Medicaid or CHIP covered HIPAA events, employers must allow at least 60 calendar days to request a midyear change.

Timing of Changes

Except for birth, adoption, or placement QLEs, all changes to cafeteria plan pre-tax deductions must be made on a prospective (moving forward) basis, affecting pay not yet earned.

For HIPAA covered QLEs, coverage changes must take effect no later than the first day of the month following the enrollment request, except in the case of birth or adoption, which must take effect on the date of the birth, adoption, or placement for adoption.



Reviewing Requests and Valid QLE Categories by Benefit Type

Employee requests related to permitted QLEs under § 125 regulations must meet certain requirements. If a request fails (does not meet a requirement) at any point, the change will not be compliant (see [flowchart](#), next page). The goal is to prevent arbitrary changes and to ensure the election updates are logically tied to actual life events.

Group Health Plans

A valid election change must:

- Be triggered by a recognized QLE as specified in the plan documents;
- Be requested within the plan's allowed time frame (typically 30 or 60 days);
- Be consistent with the nature of the event; and
- Comply with both IRS rules and the qualified health plan's provisions.

QLEs resulting from the following events are valid when they affect coverage, cost, or eligibility:

- Change in legal marital status
- Change in number of dependents
- Change in employment status
- Dependent satisfies or ceases to satisfy eligibility requirements
- Loss of Medicare, Medicaid, or CHIP
- Enrollment in Medicare or Medicaid
- Change in residence
- Judgments, decrees, or orders
- Significant change in plan cost
- Significant change in plan coverage
- Obtain coverage under an ACA Marketplace (Exchange) plan

HFSA

A valid election change must:

- Be triggered by a recognized QLE;
- Be requested within the plan's allowed time frame (typically 30 days);
- Be consistent with the nature of the event; and
- Comply with both IRS rules and the HFSA plan's provisions.

QLEs resulting from the following events are valid when they affect HFSA coverage or eligibility:

- Change in marital status
- Change in the number of dependents
- Gain or loss of dependent's HFSA eligibility
- Loss of eligibility for an excepted benefit (such as stand-alone dental or vision coverage)
- Change in employment status resulting in a gain or loss of group health coverage
- Loss of other health coverage

DCFSA

A valid election change must:

- Be triggered by a recognized QLE;
- Be requested within the plan's allowed time frame (typically 30 days);
- Be consistent with the nature of the event; and
- Comply with both IRS rules and the DCFSA plan's provisions.

QLEs resulting from the following events are valid when they affect DCFSA coverage, cost, or eligibility:

- Change in legal marital status
- Change in number of dependents
- Change in employment status
- Dependent satisfies or ceases to satisfy eligibility requirements
- Change in residence
- Change in provider cost
- Change in need for care

Life, AD&D, and Disability Plans

A valid election change must:

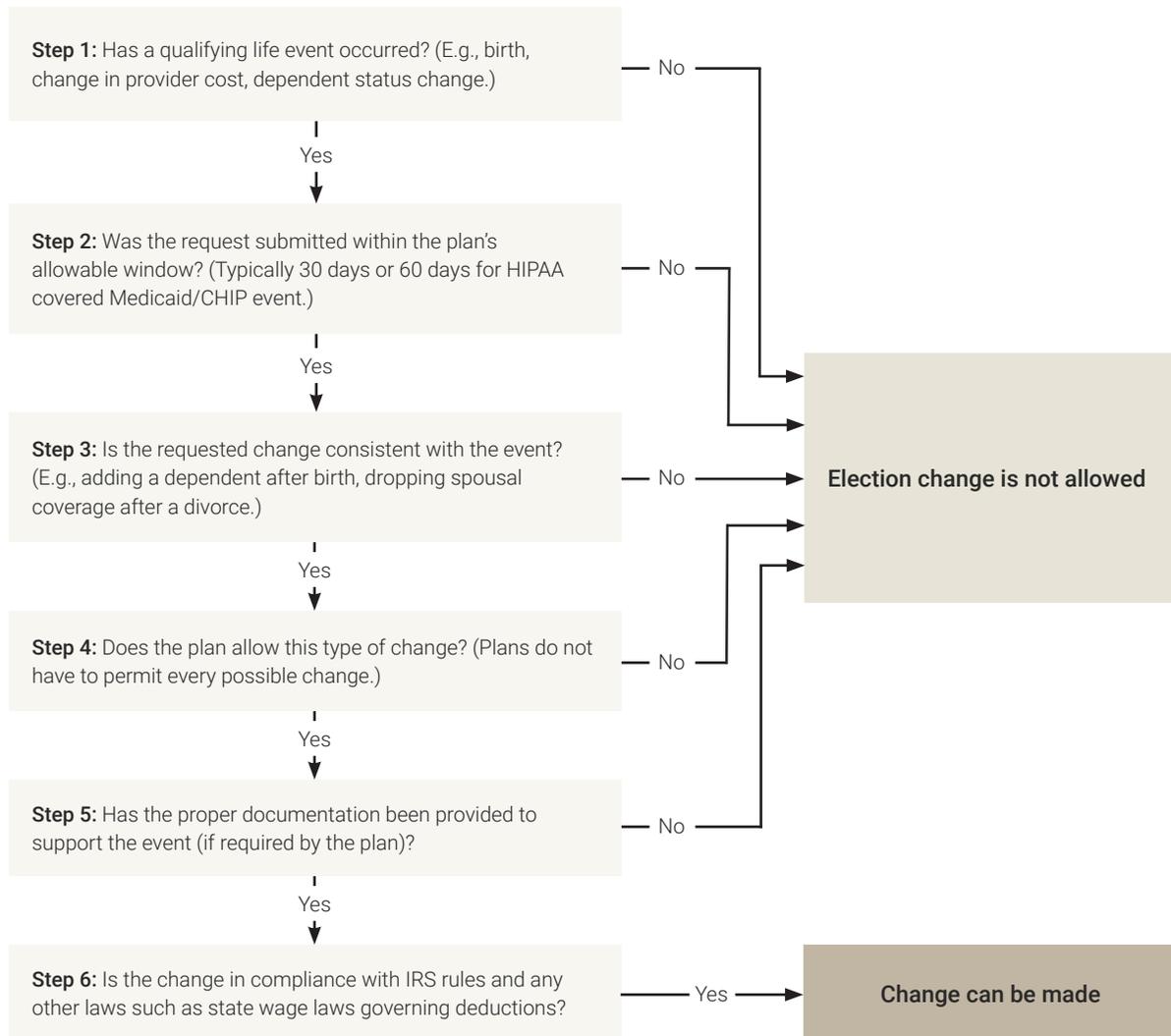
- Be triggered by a recognized QLE;
- Be requested within the plan's allowed time frame (typically 30 days); and
- Comply with both IRS rules and the benefit plan's provisions. Because the IRS applies a more relaxed consistency rule to these benefits, permitted changes are primarily governed by the written terms of the plan.

QLEs resulting from the following events are valid when they affect a change in status:

- Change in legal marital status
- Change in number of dependents
- Change in employment status
- Dependent satisfies or ceases to satisfy dependent eligibility requirements
- Change in residence

General Midyear Qualifying Life Event Elections

The following flowchart provides a simple step-by-step process for determining whether a requested midyear QLE change is valid under § 125 rules, regardless of plan type. If the requested change is not allowed, the [Denial of Midyear Event Request](#) letter can be used to notify the participant of the denial.



Note: Also review the requested change to see if it qualifies as a HIPAA special enrollment event, and if so, provide the enrollee the opportunity to enroll in, or change to, any available medical plan coverage option.

The following chart outlines the midyear election change events allowed under the Internal Revenue Code for pre-tax contributions, as well as the overlapping HIPAA special enrollment rights. See [Cafeteria Plans: An Introduction](#) and [HIPAA: Special Enrollment Rights](#) for more details.

Event		Plan Type
1. Change in Legal Marital Status		
<p>Gain of spouse and/or dependents (qualifying children under 27, including stepchildren and adopted children) due to legal marriage</p>	<p>Qualified Benefit Plan: Employee may enroll themselves and newly eligible spouse and/or newly eligible stepchildren.</p> <p>Employee may also add previously eligible children under IRS tag-along option.</p> <p>Employee may drop their own and/or children's coverage if other coverage is obtained under the new spouse's plan (e.g., enrolling under new spouse's plan).</p> <p>Also a HIPAA SER event.</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll newly eligible spouse and/or newly eligible stepchildren.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions when gaining newly acquired dependents.</p> <p>Employee may stop or decrease contributions if employee or dependents become eligible under new spouse's health plan.</p> <p>Dependent Care FSA: Employee may enroll or increase contributions if expenses increase as a result of the event.</p> <p>Employee may stop or decrease contributions if expenses decrease as a result of the event.</p> <p>Employee may stop contributions if new spouse does not qualify (i.e., spouse is not employed, disabled, or full-time student).</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
<p>Divorce, legal separation, or death of spouse or registered domestic partner</p> <p>In the event of the employee's death, COBRA may apply for the surviving spouse and covered dependents.</p>	<p>Qualified Benefit Plan: Employee may drop coverage for the former spouse.</p> <p>Employee may drop coverage for dependent children if dependent children will enroll in the former spouse's plan.</p> <p>Employee may enroll themselves and/or dependents who lose eligibility under spouse's plan. (If any one person loses eligibility, employee may enroll themselves and all eligible dependents under IRS tag-along option.)</p> <p>Also a HIPAA SER event (if event results in the dependent's loss of eligibility under another group health plan).</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions due to loss of coverage under spouse's health plan.</p> <p>Employee may stop or decrease contributions due to spouse losing eligibility under the plan.</p> <p>Dependent Care FSA: Employee may enroll or increase contributions if expenses increase as a result of the event (e.g., loss of non-working spouse).</p> <p>Employee may stop or decrease contributions if the event eliminates the need for care (e.g., dependents now live with ex-spouse).</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>

Event	Plan Type	
2. Change in Number of Dependents		
<p>Gain child by birth, adoption, or placement for adoption</p>	<p>Qualified Benefit Plan: Employee may enroll themselves and newly eligible child.</p> <p>Employee also may enroll previously eligible dependents under IRS tag-along option.</p> <p>Employee may drop coverage and enroll in the spouse's plan.</p> <p>Also a HIPAA SER event.</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or newly eligible child.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions due to change in number of eligible dependents.</p> <p>Employee may stop or decrease contributions if employee or their dependents enroll in the spouse's health plan.</p> <p>Dependent Care FSA: Employee may enroll or increase contributions due to change in number of eligible dependents.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
<p>Lose child due to death or reaching the maximum plan age</p>	<p>Qualified Benefit Plan: Employee may drop coverage only for the child who lost eligibility.</p> <p>COBRA may apply.</p> <p>Also a HIPAA SER event (if event results in the dependent's loss of eligibility under another group health plan).</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>If the dependent is eligible for their own employer's group health plan, the loss of coverage under the parent's plan is also a HIPAA special enrollment event allowing them to enroll in their employer's plan and also add their spouse and dependent children.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: Employee may stop or decrease contributions due to change in number of eligible dependents.</p> <p>Dependent Care FSA: Employee may stop or decrease contributions due to change in number of eligible dependents.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
3. Change in Employment Status that Triggers <i>Gaining</i> Eligibility (Employee or Dependent)		
<p>Employee's status change results in <i>gaining</i> eligibility under <i>their</i> employer's plan (e.g., part time to full time)</p>	<p>Qualified Benefit Plan: Employee may enroll themselves, spouse, and dependents.</p>	<p>Healthcare FSA: Employee may enroll.</p> <p>Dependent Care FSA: Employee may enroll.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>

Event	Plan Type	
3. Change in Employment Status that Triggers <i>Gaining</i> Eligibility (Employee or Dependent) (continued)		
<p>Dependent's or spouse's status change results in <i>gaining</i> eligibility under <i>another</i> employer's plan (e.g., new job, part time to full time)</p>	<p>Qualified Benefit Plan: Employee may change coverage to employee only if their dependents and spouse move to spouse's new plan.</p> <p>Employee may drop coverage for themselves, dependents, and spouse if they enroll in the spouse's plan.</p> <p>Employee may drop coverage for dependent who becomes eligible under their employer's plan.</p>	<p>Healthcare FSA: Employee may stop or decrease contributions due to spouse's or dependent's new plan.</p> <p>Dependent Care FSA: Employee may enroll due to spouse's new job.</p> <p>Employee may increase contributions if the event results in an increase in expenses.</p> <p>Employee may stop or decrease contributions if the event results in a decrease in expenses.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>

4. Change in Employment Status that Triggers <i>Losing</i> Eligibility (Employee or Dependent)		
<p>Employee's employment change results in <i>losing</i> eligibility under <i>their</i> employer's plan (e.g., full time to part time, unpaid leave)</p>	<p>Qualified Benefit Plan: Coverage ends. (COBRA may apply.)</p> <p>Note: If employee regains eligibility (e.g., rehire) within 30 days, prior election is automatically reinstated (unless open enrollment or another qualifying event occurs).</p>	<p>Healthcare FSA: Coverage ends. (COBRA may apply.)</p> <p>Note: If employee regains eligibility (e.g., rehire) within 30 days, prior election is automatically reinstated upon return (unless open enrollment or another qualifying event occurs).</p> <p>Dependent Care FSA: Coverage ends.</p> <p>Note: If employee regains eligibility (e.g., rehire) within 30 days, prior election is automatically reinstated upon return (unless open enrollment or another qualifying event occurs).</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>

<p>Dependent's or spouse's employment change results in <i>losing</i> eligibility under <i>another</i> employer's plan (e.g., spouse loses job, full time to part time, unpaid leave)</p>	<p>Qualified Benefit Plan: Employee may enroll themselves, spouse, and/or dependents who lose eligibility under spouse's plan.</p> <p>Employee also may add previously eligible children under IRS tag-along option.</p> <p>Also a HIPAA SER event.</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions due to loss of other health coverage.</p> <p>Dependent Care FSA: Employee may enroll or increase contributions if the event results in an increase in expenses.</p> <p>Employee may stop contributions if spouse disqualifies (e.g., unemployed spouse).</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
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Event	Plan Type	
5. Dependent Gains or Losses Eligibility (Other Than Marital Status or Employment Changes)		
<p>Dependent gains eligibility (e.g., becomes student)</p> <p>Note: Federal healthcare reform removed student requirement under age 26, so this status change event is rare.</p>	<p>Qualified Benefit Plan: Employee may enroll themselves and newly eligible dependent. Employee also may add previously eligible dependents under IRS tag-along option.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions due to newly eligible dependent.</p> <p>Dependent Care FSA: Employee may enroll or increase contributions due to newly eligible dependent. (Due to the DCAP under-13 age limit, this is unlikely unless dependent is disabled, requiring day care.)</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
<p>Dependent loses eligibility (e.g., child reaches age limit)</p>	<p>Qualified Benefit Plan: Employee may drop coverage only for affected dependent.</p> <p>Also a HIPAA SER event (if event results in the dependent's loss of eligibility under another group health plan).</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>If the dependent is eligible for their own employer's group health plan, the loss of coverage under the parent's plan is also a HIPAA special enrollment event allowing them to enroll in their employer's plan and also add their spouse and dependent children.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: Employee may stop or decrease contributions if dependent becomes ineligible for FSA reimbursement.</p> <p>Dependent Care FSA: Employee may stop or decrease contributions for the child who loses eligibility (e.g., reaches age 13).</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
6. Plan Changes in Cost		
<p>Plan makes automatic small cost change</p>	<p>Qualified Benefit Plan: N/A. Plan provides that employee's elections (contributions) change automatically.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: Plan may automatically increase or decrease employee's elective contributions, if provided under the terms of the plan.</p>

Event	Plan Type	
6. Plan Changes in Cost (continued)		
Plan makes <i>significant</i> cost change	<p>Qualified Benefit Plan: If cost <i>increases</i>, employee may change to another plan option offering similar coverage (or drop coverage if similar plan is not available).</p> <p>If cost <i>decreases</i>, employee may enroll or change coverage.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: For any increase amount, employee may increase contributions due to provider's cost increase, but not if provider is employee's relative.</p> <p>For any decrease amount, employee may decrease contributions due to the decrease in cost, but not if the provider is employee's relative.</p> <p>Life, AD&D, and Disability: If cost <i>increases</i>, employee may increase election to correspond with cost increase.</p> <p>Employee may drop coverage and elect a similar coverage option.</p> <p>Employee may drop coverage if no similar coverage option is available.</p> <p>If cost <i>decreases</i>, employee may decrease election to correspond with cost decrease.</p> <p>Employee may enroll (if previously waived).</p> <p>Employee may drop coverage for similar coverage option and enroll in the coverage option with newly decreased cost.</p>

7. Plan Changes in Coverage		
Plan makes <i>significant</i> reduction in coverage	<p>Qualified Benefit Plan: Employee may change to another coverage option offering similar coverage (or drop if no similar option).</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may change contributions only due to change in provider or change in hours of dependent care.</p> <p>Life, AD&D, and Disability: Employee may drop curtailed coverage and enroll in another similar coverage option.</p>

Plan adds new benefit or coverage option	<p>Qualified Benefit Plan: Employee may enroll or change to the newly added coverage option.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: Employee may drop coverage and elect new (or newly improved) coverage option.</p> <p>Employee may enroll in new (or newly improved) coverage option (if previously waived coverage).</p>
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Event	Plan Type
7. Plan Changes in Coverage (continued)	
Plan eliminates benefit or coverage option	<p>Qualified Benefit Plan: Employee may enroll in another coverage option.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: Employee may drop curtailed coverage and enroll in another similar coverage option.</p> <p>Employee may drop coverage if no similar coverage option is available.</p>
Other employer's plan increases coverage	<p>Qualified Benefit Plan: Employee may drop coverage for themselves, spouse, or dependents if employee, spouse, or dependents have elected or received corresponding increased coverage under other employer's plan.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may stop or decrease contributions due to corresponding increase in other employer's DCAP.</p> <p>Life, AD&D, and Disability: Employee may decrease or drop coverage for employee, spouse or dependents who will receive increased coverage under other employer's plan.</p>
Other employer's plan decreases or ceases coverage	<p>Qualified Benefit Plan: Employee may enroll or increase election for themselves, spouse, or dependents if employee, spouse, or dependents have elected or received corresponding decreased coverage under other employer's plan.</p> <p>Also a HIPAA SER event.</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may enroll or increase contributions due to corresponding decrease in other employer's DCAP.</p> <p>Life, AD&D, and Disability: Employee may enroll or increase election for employee, spouse or dependents who will receive decreased coverage under other employer's plan.</p>
Other employer's (i.e., of spouse or dependent) plan offers open enrollment	<p>Qualified Benefit Plan: Employee may make corresponding changes under their employer's plan.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may change election due to corresponding changes in other employer's DCAP.</p> <p>Life, AD&D, and Disability: Employee can change elections to correspond with changes made under other employer's plan.</p>

Event	Plan Type	
8. Change in Residence (Employee or Dependent)		
Change in residence triggers eligibility (e.g., move into a plan's service area)	<p>Qualified Benefit Plan: Employee may change coverage to plan option for which they are newly eligible.</p> <p>Employee also may add previously eligible dependents under IRS tag-along option.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may enroll or increase contributions if the event results in an increase in expenses.</p> <p>Employee may stop or decrease contributions if the event results in a decrease in expenses.</p> <p>Employee may stop participation if the event eliminates the need for care.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>

Change in residence triggers loss of eligibility (e.g., move out of a plan's service area)	<p>Qualified Benefit Plan: Employee may change coverage to another plan option for which they are eligible.</p> <p>Employee may also add previously eligible dependents under IRS tag-along option.</p> <p>Also a HIPAA SER event (if event results in the dependent's loss of eligibility under another group health plan).</p> <p>Employee may change coverage options (if previously enrolled).</p> <p>Employee may enroll self (if not previously enrolled).</p> <p>Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: Employee may enroll or increase contributions if the event results in an increase in expenses.</p> <p>Employee may stop or decrease contributions if the event results in a decrease in expenses.</p> <p>Employee may stop participation if the event eliminates the need for care.</p> <p>Life, AD&D, and Disability: Employee may enroll, increase, or decrease coverage even if their eligibility is not affected.</p>
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9. Judgments, Decrees, or Orders		
Order requiring the employer's plan to add children to health plan coverage	<p>Qualified Benefit Plan: Employee may enroll themselves and affected children.</p>	<p>Healthcare FSA: Employee may enroll or increase contributions due to addition of child.</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>

Order requiring another employer's plan to add children to health plan coverage	<p>Qualified Benefit Plan: Employee may drop coverage only for affected child.</p>	<p>Healthcare FSA: Employee may stop or decrease contributions due to child gaining other health coverage.</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
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Event	Plan Type
10. Medicare, Medicaid, or CHIP	
Employee, spouse, or dependent becomes enrolled in Medicare or Medicaid	<p>Qualified Benefit Plan: Employee may drop coverage for themselves, spouse, or dependents.</p> <p>Healthcare FSA: Employee may stop or decrease contributions due to gaining other coverage.</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
Employee or dependent becomes entitled to premium assistance subsidy from Medicaid or CHIP	<p>Qualified Benefit Plan: Employee may enroll themselves and/or the spouse or dependent who became eligible for the premium assistance.</p> <p>Also a HIPAA SER event. Employee may change coverage options (if previously enrolled). Employee may enroll self and the spouse or child who has become eligible for the premium assistance.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
Employee or dependent loses Medicare, Medicaid, or CHIP eligibility and coverage	<p>Qualified Benefit Plan: Employee may enroll themselves and/or the spouse or dependent who lost eligibility.</p> <p>Also a HIPAA SER event (except for loss of Medicare eligibility and coverage).</p> <p>Healthcare FSA: Employee may enroll or increase contributions due to losing other coverage.</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
11. Optional Provisions Related to the Affordable Care Act (ACA)	
Employee whose hours of service are reduced so that the employee is expected to average less than 30 hours of service per week	<p>Qualified Benefit Plan: Employee may drop coverage for themselves, spouse, and dependents based on intent to enroll in another plan providing minimum essential coverage (MEC) to start by first day of second month after this coverage ends.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
Employee becomes eligible to enroll in a QHP available in a Marketplace (Exchange)	<p>Qualified Benefit Plan: Employee may drop coverage for themselves, spouse, and dependents based on intent to enroll in a QHP (during Marketplace open enrollment or midyear special enrollment) to start the day after this coverage ends.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>
One or more family members become eligible to enroll in a QHP available in a Marketplace (Exchange)	<p>Qualified Benefit Plan: Employee may drop or change an election of family coverage based on a family member's eligibility to enroll in a QHP (during Marketplace open enrollment or midyear special enrollment) to start the day after this coverage ends.</p> <p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>

Event	Plan Type	
11. Optional Provisions Related to the Affordable Care Act (ACA) (continued)		
One or more family members lose eligibility under a Marketplace policy or individual market policy	<p>Qualified Benefit Plan: Employee may enroll themselves, spouse, and/or dependents who lose eligibility under a Marketplace or individual market policy.</p> <p>Also a HIPAA SER event. Employee may change coverage options (if previously enrolled). Employee may enroll self (if not previously enrolled). Employee also may enroll spouse and/or children who have lost other health coverage.</p> <p>Note: Person losing the other health coverage must have had the other coverage since the date of this employer plan's most recent enrollment opportunity.</p>	<p>Healthcare FSA: N/A</p> <p>Dependent Care FSA: N/A</p> <p>Life, AD&D, and Disability: N/A</p>

Glossary

ACA: Affordable Care Act

AD&D: accidental death and dismemberment (insurance)

CHIP: Children's Health Insurance Program

COBRA: Consolidated Omnibus Budget Reconciliation Act

DCAP: dependent care assistance plan

DCFSA: dependent care flexible spending account

FSA: flexible spending account

HFSA: health flexible spending account

HIPAA: Health Insurance Portability and Accountability Act

HSA: health savings account

MEC: minimum essential coverage

QHP: qualified health plan

QLE: qualifying life event

SER: special enrollment right