



Benefit coverage elections made during annual open enrollment or as a new hire are generally irrevocable until the next annual open enrollment period. However, you may change your benefit coverage elections during the year if you experience a qualifying life event. Outlined below, are status change events when you may add or drop coverage when sufficient documentation is provided.

*Documentation Must be Submitted Within **31 days** of the Qualifying Life Event.
For Events Related to Medicaid/CHIP, Documentation Must be Submitted Within **60 days**.*

Eligible dependents include:

- ✓ Your legal spouse
- ✓ Common Law Spouse (Per KS law an affidavit is required to be completed. Note, Common Law Marriage is not recognized if you live in Missouri.)
- ✓ Your children may be covered until the end of the calendar year in which they reach age 26, regardless of student, dependency, or marital status. Dependent children may be covered beyond age 26 if disabled. Proof of continued disability is required each year, during Annual Enrollment.

Acceptable documentation for:

Changes in coverage for Employee and/or Dependent(s)

- ✓ Documentation from previous/new employer
- ✓ Documentation from insurance carrier (only if it confirms an adult child is aging off another group plan at age 26.) Any other insurance carrier documents must be reviewed by the Blue Valley Benefits Department or Holmes Murphy.
- ✓ Documentation from the COBRA vendor

Submitted Documentation must include the following:

- **Who** lost/gained the group coverage (employee, spouse, children). The documentation must show the **names** of the individuals who are losing or gaining group coverage.
- **What** type of coverage are they losing (medical, dental, vision, etc.).
- **When** previous group coverage was lost, or when new group coverage starts. The documentation must show the **date coverage is lost or gained**.

Note: Group coverage includes: coverage under another employer-sponsored plan, Medicaid coverage, Medicare coverage, Tricare/Military coverage, Veterans Affairs (VA) coverage & Student University/College Health coverage if premiums were paid for the coverage. If you feel you are losing coverage or gaining coverage for another type of group plan, please provide the supporting documentation for review.

Important: Loss of individual coverage from an individual carrier policy or short-term plan is not considered a loss of group coverage and therefore not deemed to be a qualifying status change event to be able to join the Blue Valley group plan.

Acceptable documentation for:

1. Birth, adoption and legal guardianship (choose one)

- Birth certificate or application for a birth certificate, or
- Hospital card/paperwork, or
- Adoption record or placement for adoption, or
- Legal guardianship document, or
- Court order or child support order

2. Marriage (choose one)

- Marriage license
- Tax return showing married, filing as a joint

3. Adding a Common Law Spouse due to spouse's change or loss of coverage

- Complete the *Blue Valley Schools Common Law Spouse Affidavit*. The form is available at: www.bvschoolsbenefits.com, click on ENROLLMENT then Qualifying Life Event (QLE). NOTE: this form must be notarized and submitted along with one of the following:
 - Letter or document from spouse's employer stating the employer has changed, dropped or will drop coverage or benefits for the spouse and any covered dependents, including the date coverage ended or will end
 - Letter or document showing COBRA coverage has been exhausted. The entire term of COBRA must be exhausted in order to be considered a qualifying event to add coverage midyear.

4. Divorce or legal separation

- Divorce or annulment or legal separation papers including the ending of group health care responsibility and proof of prior qualifying group health coverage

5. Death of policyholder

- Death certificate or public notice of death and proof of prior qualifying group health coverage

6. Loss or Gain of Medicaid or CHIP (Children's Health Insurance Plan)

- Letter from Medicaid or Children's Health Insurance Plan (CHIP) stating when coverage ended, will end or will begin

7. Other events

- Letter from employer stating when eligible dependent coverage will begin or will end due to **change in employment** that results in dependent becoming benefits ineligible
- Letter or document from employer stating the **employer changed, dropped or will drop coverage** or benefits for the employee, spouse or dependent, including the date coverage ended or will end (including another employer's midyear open enrollment period)
- **COBRA documentation** showing length of coverage with beginning and end dates. COBRA must be exhausted. The entire term of COBRA must be exhausted in order for it to be considered a qualifying event to add coverage midyear
- Letter from school stating when **student group health coverage** ended or will begin
- Dated copy of **military discharge papers** or Certificate of Release including the date coverage ended or will end due to no longer active military service
- Letter or notice from government program, like **TRICARE, Peace Corps, AmeriCorps, or Medicare** stating when coverage ended or will begin
- Document from the **Department of Corrections**, jail or prison indicating release or parole, including an order of parole, order of release or an address certification