

Qualifying Life Event

Federal regulations prohibit you from changing any pre-tax benefits during the plan year, unless you experience an approved qualifying life event. Changes must be submitted within 31 days following a qualifying life event. If you do not submit your election within this timeframe, you must wait until your next qualifying life event or the next annual open enrollment period to make any changes.

A change to your health insurance coverage, health care flexible spending account or dependent care flexible spending account must be consistent with the life event.

Benefit changes take effect the first of the month following or coinciding with the date the election is submitted in Workday with the exception of birth, adoption, placement for adoption and legal guardianship which take effect on the event date.

If a life event causes a dependent to no longer be eligible, health coverage will end on the last day of the month in which the life event occurred, and any premium already deducted from your paycheck will not be refunded.

Below is a list of approved qualifying life events and the documentation necessary to verify the event. If you are enrolling your spouse and/or eligible dependents, proof of the relationship must be submitted.

New Team Member	<ul style="list-style-type: none">▪ See Dependent Eligibility Verification
Loss of other coverage	<ul style="list-style-type: none">▪ Certification of health coverage or letter from employer confirming the date medical coverage ended for everyone being added▪ See Dependent Eligibility Verification
Eligible for other coverage	<ul style="list-style-type: none">▪ Certification of health coverage or letter from employer confirming the effective date of the new medical coverage for everyone being removed
Dependent Change inc. birth, adoption, placement for adoption, legal guardianship	<ul style="list-style-type: none">▪ See Dependent Eligibility Verification
Marriage	<ul style="list-style-type: none">▪ See Dependent Eligibility Verification
Divorce (finalized), annulment, legal separation	<ul style="list-style-type: none">▪ Legal document (e.g. filed divorce decree)▪ If adding coverage, see "loss of other coverage"
Dependent turns age 26	
Death of spouse or dependent	<ul style="list-style-type: none">▪ Death certificate▪ If adding coverage, see "loss of other coverage"
Job Change - change in hours worked, benefits eligibility	<ul style="list-style-type: none">▪ See Dependent Eligibility Verification
Court order	<ul style="list-style-type: none">▪ Legal court order document▪ See Dependent Eligibility Verification
Military leave or return from military leave for you, your spouse or your dependent	<ul style="list-style-type: none">▪ Military orders

**Dependent turns age 13
(Dependent Care FSA only)**

- Dependent birth certificate

**Change in dependent care
provider (Dependent Care FSA
only)**

- Letter from daycare provider confirming the start date of the new provider and/or end date of the previous provider
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Dependent Eligibility Verification

The following supporting documentation is required when electing coverage for your spouse and/or eligible dependent(s). Please submit documentation as an attachment in Workday, email a copy to humanresources.benefits@emcins.com or send via mail to EMC Human Resources.

If documentation is not received in EMC Human Resources within 60 days of your election, your election will be cancelled retroactively. **NOTE:** Any premium already deducted from your paycheck will not be refunded. If additional premium is due, this will be deducted from your paycheck.

Spouse:

- A copy of the state-certified marriage license/Affidavit of Common Law Marriage (as legally recognized by your state); **and**
- One form of documentation establishing current marital status, which includes both names, a common address and is dated within the past six months, e.g. a joint household bill or joint bank/credit statement.

Your Natural Born Child(ren):

- A copy of the child's state-certified birth certificate naming you as the child's parent.

Stepchild(ren):

- A copy of the child's state-certified birth certificate naming your spouse as the child's parent; **and**
- The documentation required to verify your spouse.

Placement for Adoption:

- A legal document stating your name and the date the child has been placed in your custody;
- A legal document confirming the child's date of birth; **and**
- Once the adoption is finalized, the documentation required to verify adopted child(ren).

Adopted Child(ren):

- The adoption decree naming you as the child's adoptive parent including the date the adoption was finalized; **and**
- A copy of the child's amended state-certified birth certificate.

Legal Guardian:

- A legal document naming you as the child's legal guardian including the effective date the child has been placed in your custody; **and**
- A copy of the child's state-certified birth certificate.

NOTE: EMC Human Resources may need to request additional documentation to verify the qualifying life event or dependent eligibility, if documentation does not appropriately match the current full name of each covered dependent.