

## MAKING CHANGES TO YOUR BENEFITS

## **Annual Open Enrollment**

During annual Open Enrollment, you can re-evaluate and make changes to the plans you and your eligible dependents enroll in for the upcoming year. Open Enrollment for EP Cares™ typically begins in November each year.



Learn more about Open Enrollment by watching a <u>short video</u>.

## **Qualifying Life Events (QLEs)**

The federal government has set guidelines, referred to as Qualifying Life Events, for when you are allowed to make changes outside of Open Enrollment. Examples of QLEs are:

- Involuntary loss of other group coverage (including loss due to reaching age 26)
- Marriage, legal separation, or divorce
- Birth or adoption of a child
- Change in eligibility of a child
- Death of a dependent family member
- Change in your or your spouse's/registered domestic partner's employment status
- Your spouse/registered domestic partner reaches age 65 and is covered by Medicare
- Enrollment in another group insurance plan such as a spouse's or parent's plan through their employer

- If you are moving to a different county or state, please advise. You may qualify and/or be required to make changes.
- FMLA special requirements
- HIPAA special enrollment rights
- Increase or reduction of hours that changes employment status
- Reduction in hours such that you are expected to work fewer than 30 hours per week
- You become eligible to enroll in an exchange or marketplace established under §1311 of the Patient Protection and Affordable Care Act

## How to Report a QLE

If you experience a Qualifying Life Event, as specified by the federal government, you may make changes to your benefit elections within 31 days of the date of the QLE. Please note that any changes to the benefit plans must be consistent with the qualifying event.

If you have had a QLE and would like to make changes to your benefits, please email us at <a href="mayercares@ep.com">myepcares@ep.com</a>. Please be sure to include the following information:

- Your first and last name
- Last four digits of your SSN
- The nature of the QLE
- The date of the QLE

 If you have any supporting documentation (birth certificate, marriage certificate, proof of loss of other insurance, etc.), please attach it to the email