



Qualifying Life Change Death of a Spouse or Partner

The following guide outlines [permissible changes](#) to benefit elections and [how to make](#) them if a spouse/partner has passed away.

The University of Colorado expresses our deepest condolences during this time. If you would prefer to speak directly to a benefits professional, please call 303-860-4200, option 3.

Permissible Changes

If an employee's spouse or partner has passed away, they may make certain changes to their benefit elections. The employee has **31 days** from the day of the event to make these qualifying changes. These changes must be [consistent](#) with a loss of eligibility. New elections will **be effective the first of the month** following the date of the event. The employee must [cancel](#) coverage for their spouse/partner and stepchildren (children who are not employee's [legal dependents](#)). Spouse/partner benefits will end on date of death.

CU Health Plans medical, dental, vision	Optional Life Insurance	Voluntary AD&D	Flexible Spending Accounts Health Care Dependent Care
cancellation of spouse/partner/stepchildren's coverage and limited changes	changes permissible	changes permissible	changes permissible

Some benefits are not subject to QLC regulations, so now is a good time to consider changes to [other benefits](#).

Plan resources

[Rates \(PDF\)](#)
[Benefits Website](#)

CU Health Plans: medical, dental, vision

	Enroll?	Cancel?	Change plans?
Employee	If the employee currently does not have coverage with CU, they may enroll, with proof of loss of coverage.	The employee cannot cancel CU coverage for themselves. They must wait until Open Enrollment.	The employee and dependent children cannot switch plans. They must wait until the next Open Enrollment.
Deceased spouse or partner	The employee must cancel their spouse/partner's health plans. Coverage ends date of death. Premium adjustments are effective the first of the month following the event.		
Stepchildren	The employee can enroll or continue coverage if employee has legal responsibility. Dependent Eligibility Verification required when enrolling new dependents.	The employee will need to cancel if stepchildren are not legal dependents. Coverage will end the last day of the month of the event. They will be eligible for COBRA.	
Children	If children were under the plan of employee's spouse/partner, employee can add them to CU's plans with proof of loss of coverage , provided the employee is enrolled or enrolling.	The employee cannot cancel CU coverage for their dependent children. They must wait until Open Enrollment.	

Optional Life Insurance

	Enroll?	Cancel or decrease?
Employee	<p>Guarantee issue (no medical history required): The employee can elect or increase up to \$10,000, in increments of \$1,000. Total policy amount cannot exceed three times employee's annual salary or \$1 million dollar.</p> <p>Additional amounts: To apply for additional amount (max of \$1 million), employee must submit the Medical History Statement Form, as evidence of insurability, to The Standard Insurance Company for approval.</p>	Any policy can be decreased or canceled any time. Changes are effective that month if the Benefits Enrollment/Change Form is received by the 10 th of the month, otherwise they are effective the 1 st of the following month.
Deceased spouse/partner	<p>The employee should begin the Life Claim process if spouse/partner had a CU life insurance policy by contacting a benefits professional at 303.860.4200, option 3. Time limits apply, so please start this process as soon as possible.</p> <p>Coverage ends on the date of death. Premium adjustments are effective the first of the month following the date of death.</p>	
Stepchildren	<p>If stepchildren are legal dependents, the employee may continue coverage or elect in flat amounts of \$5,000 or \$10,000. Policy cannot exceed employee's Optional Life amount. No medical history required. Dependent Eligibility Verification required.</p>	The employee must cancel coverage if stepchildren are not legal dependents. Coverage ends on the date of death.
Children	<p>For a dependent child(ren), the employee may elect in flat amounts of \$5,000 or \$10,000. Policy cannot exceed employee's Optional Life amount. No medical history required.</p>	Any policy can be decreased or canceled any time. Changes will be effective that month if the Benefits Enrollment/ Change Form is received by the 10 th of the month, otherwise it is effective the 1 st of the following month.
<p>You can update your beneficiary(ies) at any time.</p>		

*Effective date of policy is the date of approval by The Standard however, premiums are effective the first of the month following the approval date.

Voluntary Accidental Death & Dismemberment (AD&D)

	Enroll?	Cancel or decrease?
Employee	The employee can elect or increase, in increments of \$10,000, up to 10-times their annual salary with a maximum of \$250,000. Medical history not applicable.	Any policy can be decreased or canceled any time. Changes are effective that month if the Benefits Enrollment/ Change Form is received by the 10 th of the month, otherwise they are effective the 1 st of the following month.
Deceased spouse/partner	The employee should begin the Life Claim process if spouse/partner had a CU life insurance policy by contacting a benefits professional at 303.860.4200, option 3. Time limits apply, so please start this process as soon as possible.	
Stepchildren	If stepchildren are legal dependents, the employee may continue coverage or elect a flat \$5,000. The employee must be enrolled. Medical history not applicable. Dependent Eligibility Verification required.	The employee must cancel coverage if stepchildren are not legal dependents. Coverage ends on the date of death.
Children	The employee can elect a flat amount of \$5,000 for dependent child(ren). Employee must be enrolled. Medical history not applicable.	Any policy can be decreased or canceled any time. Changes are effective that month if the Benefits Enrollment/Change Form is received by the 10 th of the month, otherwise they are effective the 1 st of the following month.
You can update your beneficiary(ies) at any time.		

Flexible Spending Accounts (FSA)

Health Care Flexible Spending Account (HCFSA)	Dependent Care Flexible Spending Account (DCFSA)
The employee can enroll, increase or decrease election to reflect loss of eligibility for medical, dental, vision or FSA coverage under spouse's/partner's plan. In no event can a new election be reduced to an amount that is less than the expenses incurred prior to the new election date.	The employee can enroll or increase to accommodate newly eligible dependents and any other dependents who were not previously covered.

How to Make Changes

The employee has **31 days** from the date of the event to make changes by submitting the required documentation to Employee Services. The employee must cancel coverage for their deceased spouse/partner and their stepchildren unless they have legal responsibility with required court documentation. If the spouse/partner had a CU Life Insurance Policy, begin the Life Claim Process by contacting a **benefits professional at 303-860-4200, option 3**. Time limits apply, so please start this process as soon as possible.

How to add yourself and/or your dependent children who lost coverage due to death of spouse/partner

1. **Submit** the Benefits Enrollment/Change Form:
[Benefits Enrollment/Change Form Faculty, Officers, University Staff \(PDF\)](#)
[Benefits Enrollment/Change Form Classified Staff \(PDF\)](#)
2. **Submit** [Dependent Eligibility Verification \(DEV\)](#) documentation for newly eligible spouse/partner and child(ren) if dependents are not already verified. If documentation is not received, the dependent(s) will not be enrolled, and the employee will have to wait until the next Open Enrollment.

Eligible dependents	Dependent verification required documentation		
Child under age 27	Birth or adoption certificate	or	Court documents signed by a judge for parental responsibility or qualified medical child support court order
Child with a disability over age 27	Birth or adoption certificate	and	A medical certificate of disability or notice of determination from the Social Security Administration

3. Provide proof of [loss of coverage](#). Submit a letter or other document from spouse/partner's employer or insurer stating:
 - The individuals losing coverage (by name).
 - The effect date when coverage ends.
 - The types of plans are being lost, specifically medical, dental and vision.
 Submission instructions are found on the Benefit Enrollment/Change Form.

How to cancel coverage for deceased spouse/partner and stepchildren

1. **Submit** the appropriate Benefits Enrollment/Change Form:
[Benefits Enrollment/Change Form Faculty, Officers, University Staff \(PDF\)](#)
[Benefits Enrollment/Change Form Classified Staff \(PDF\)](#)
2. **Submit** a copy of death certificate.
 Submission instructions are found on the Benefit Enrollment/Change Form.

Submission instructions

Submission instructions for all documentation are found on the Benefits Enrollment/Change Form. You can check the Benefits Summary in your [employee portal](#) to verify enrollment accuracy after forms are processed.

If you have further questions, contact a benefits professional at **303-860-4200, option 3**.

How to add, change or remove beneficiary(ies) from a life insurance policy

If you are enrolled in Employee Basic Life, Employee Optional Life and/or Employee Voluntary AD&D, you must name one or more beneficiaries. Beneficiaries are the individual(s) or organization that you name on your life insurance policies that will receive the benefit in the event of your death. Beneficiaries can be legal dependents, but do not have to be. Beneficiaries can be updated anytime by following the steps below.

1. LOGIN into your [employee portal](#)
2. SELECT **CU Resources** (skip this step if CU Resources is your homepage)
3. CLICK on the **Benefits and Wellness** tile
4. CLICK on the **Benefits Summary** tile
5. On the summary CLICK on the **plan(s)** you want to edit: Employee Basic Life, Employee Optional Life and/or Employee Voluntary AD&D
6. CLICK **Edit** to complete one of the following actions:
 - a. Add beneficiaries
 - b. Change percentages of current beneficiaries
 - i. The total percentage between beneficiaries must be a total of 100 percent
 - c. Remove a beneficiary
 - i. Change the percentage to 0 percent
 - ii. Note: If you no longer wish to have this individual visible in your employee portal, submit the [Dependent/Beneficiary Removal Form \(PDF\)](#)
7. CLICK **Save** - changes will be effective immediately

Payroll deductions

If you cancel or remove dependent coverage and expect a reduction in your cost of monthly premiums, you must submit all documentation by the 10th of the month in which the change would take effect. If documentation is received after the 10th of the month, premium adjustments will be reflected in the next payroll cycle.

Questions?

Contact a benefits professional via email at benefits@cu.edu or call during business hours at 303-860-4200 option 3.

Other Benefits to Consider

During the course of a life event, there are other benefit changes to consider that are not subject to Qualifying Life Change rules. The following changes can be made at any time during the plan year:

HSA – Health Savings Account

You must be enrolled in the CU Health Plan – High Deductible to open and contribute to the HSA offered by CU. You can enroll, increase, decrease or stop your elected contributions at any time during the year without a [Qualifying Life Change](#). Please see the [HSA Fact Sheet \(PDF\)](#) for more detailed information.

- Effective date via Form: Effective that month if form is received by the 10th of the month, otherwise it will be the first of the following month.
- Effective date via Self-Service-Portal: Effective that month, if enrolled online before that month's payroll processing. You must call a [benefits professional](#) to activate online enrollment.

Optional Life Insurance

You can enroll in the Optional Life benefit or increase your current elected amount at any time during the plan year:

1. **Complete and sign** the Medical History Statement*
[Medical History Statement Faculty and University Staff \(PDF\)](#)
[Medical History Statement Classified Staff \(PDF\)](#)
2. **Submit** form to The Standard Life Insurance
 The Standard Life Insurance Company
 900 SW Fifth Avenue
 Portland, OR 97204
3. **Wait for approval**
 - a. The Standard Life Insurance Company will notify the applicant and the university when application is approved.
 - i. Effective date of the policy is the first day of the month following the approval date from The Standard Life Insurance Company.
 - ii. Premiums are effective the first day of the month following the approval date.
 - b. The university will notify the applicant when approval is received. At that time the applicant will designate beneficiaries and indicate tobacco usage via the provided form.

Cancellations: You can decrease or cancel personal and dependent Optional Life Insurance any time during the plan year by submitting the appropriate Benefits Enrollment/Change Form:

- [Benefits Enrollment/Change Form Faculty, Officers, University Staff \(PDF\)](#)
[Benefits Enrollment/Change Form Classified Staff \(PDF\)](#)

*By signing the [Medical History Statement](#), the applicant is authorizing The Standard Life Insurance Company to obtain information about the applicant's health, undergo a physical examination, if required, which may include blood testing, and provide any additional information about the applicant's insurability that The Standard Life Insurance Company may reasonably require.

Voluntary Accidental Death & Dismemberment (AD&D)

Voluntary AD&D can only be added during Open Enrollment and certain Qualifying Life Changes. However, you can decrease or cancel AD&D any time during the plan year by submitting the appropriate Benefits Enrollment/Change Form:

[Benefits Enrollment/Change Form Faculty, Officers, University Staff \(PDF\)](#)

[Benefits Enrollment/Change Form Classified Staff \(PDF\) Staff](#)

Short Term Disability

Faculty and University Staff: You can only enroll during Open Enrollment. However, you can cancel any time during the plan year by submitting the [Benefits Enrollment/Change Form Faculty, Officers, University Staff \(PDF\)](#). Effective date for cancellation is that month if the Benefits Enrollment/Change Form is received by the 10th of the month, otherwise it will be the first of the following month.

Classified Staff: Enrollment is mandatory as it is paid by CU.

Long Term Disability

Faculty and University Staff: Enrollment is mandatory as it is paid by CU.

Classified Staff:

- You can enroll at any time during the year with a [Medical History Statement Classified Staff \(PDF\)](#) approved by The Standard Life Insurance Company. Effective date is the first of the month following approval of The Standard Life Insurance Company.
- Premiums are based on employee's age, salary and vesting status with PERA.
- Employee can request change of premiums at any time during the year or when they become vested with PERA (five years of PERA service). You must submit Benefits Enrollment/Change and proof of vesting status if status was gained outside CU's employment. Effective that month if form is received by the 10th of the month, otherwise it will be the first of the following month.
- You can change to vested status anytime during the plan year.
- You can cancel any time during the plan year. Effective date for cancellation is that month if the [Benefits Enrollment/Change Form Classified Staff \(PDF\)](#) is received by the 10th of the month, otherwise it will be the first of the following month.

Definitions

Consistency rule: Under the Consistency Rule, the election change is on account of and corresponds with the Qualifying Life Change that affects eligibility for coverage under an employer's plan. Changes to benefit plans must be consistent with the Qualifying Life Change and correspond with a gain or loss of eligibility for coverage.

Loss of eligibility of group coverage: When adding CU coverage, CU requires proof that employee and/or dependents will lose or have lost group health coverage by submitting a letter or other document from another employer or insurer stating:

- The individuals losing coverage (by name).
- The effect date when coverage ends.
- The types of plans are being lost, specifically medical, dental and vision.