

GME Qualifying Life Change

Change in Child/Dependent Care Needs

The following guide outlines permissible changes to benefit elections and how to make them when employees experience changes in their dependent care needs.

Permissible Changes

Employees can enroll or make a corresponding change to their Dependent Care Flexible Spending Account (DCFSA) based on an increase/decrease in cost and/or hours, change of provider or child reaching 13 years of age. The employee has **31 days** from the day of the event to make these qualifying changes. These changes must be consistent with the event change, and new elections will **be effective the first of the month** following receipt of the Benefits/Enrollment Change Form.

Plan Change Eligibility:

- **CU Health Plans medical, dental, vision:** no changes
- **Health Care Flexible Saving Account HCFSAs:** no changes
- **Dependent Care Flexible Saving Account DCFSA:** changes permissible

Plan resources

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

CU Health Plans: medical, dental, vision

Enrollment

- **Employee Spouse/partner and Children:** The employee and their dependents may not enroll. They must wait until Open Enrollment.

Cancellation

- **Employee Spouse/partner and Children:** The employee cannot cancel plans. They must wait until the next Open Enrollment period.

Imputed Income

Tax Dependency Reminder: Employee will be subject to [imputed income](#) (taxable income) for the amount CU contributes towards health premiums for partners and partner's children if they do not qualify as tax dependents. If the domestic partner is a tax dependent, the employee must submit a [Tax Certification of Dependency for Tax Treatment of Medical Benefits \(PDF\)](#).

Flexible Spending Accounts (FSA)

Health Care Flexible Spending Account HCFSAs: The employee cannot enroll or make any changes.

Dependent Care Flexible Spending Account DCFSA: The employee can enroll, increase, decrease or cancel to reflect the changes in their child/dependent care needs.

How to Make Changes

The employee has **31 days** from the date of the event that causes the change in their child/dependent care needs to make changes and submit the required documentation. If the appropriate documentation is not submitted within 31 days, they must wait until the next Open Enrollment to make changes.

How to enroll/change/cancel DCFSA

1. **Submit** the [Benefits Enrollment/Change Form GME \(PDF\)](#).
2. **Submit** a short letter describing the change in their child/dependent care needs and the desired outcome.

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**.

Payroll deductions

If you are canceling or removing 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**.

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.

Gain of eligibility of group coverage: When canceling CU coverage, CU requires proof that employee and/or dependents have or will have coverage. We require a letter or other document from dependent's employer or insurer stating:

- The individuals that gained group coverage (by name).
- The effective date of group coverage.
- The types of plans that were gained (medical, dental and/or vision).