



GME Qualifying Life Change

Divorce, Legal Separation, Annulment or Termination of Partnership

The following guide outlines [permissible changes](#) to benefit elections and [how to make](#) them when an employee loses a spouse or partner due to divorce, legal separation, annulment or termination of domestic or civil union partnership.

Permissible Changes

If an employee is losing a spouse/partner, they may make certain changes to their benefit elections for themselves and their dependents (ex-spouse/ex-partner and children/step-children). These changes must be made within **31 days** from the date of event and must be [consistent](#) with losing a spouse/partner and correspond with a loss of eligibility. New elections will be **effective the first of the month** following the divorce, legal separation, annulment or termination of partnership. When enrolling in CU health coverage and FSAs, effective date will be the first of the month following loss of coverage.

CU Health Plans medical, dental, vision	Flexible Spending Accounts (FSA) Health Care Dependent Care
limited changes	changes permissible

Plan resources

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

CU Health Plans: medical, dental, vision

	Enroll?	Cancel?
Employee	If the employee currently does not have coverage with CU, they can enroll themselves with proof of loss of coverage .	The employee cannot cancel CU coverage for themselves or dependents. They must wait until Open Enrollment.
Employee's children	If the employee is enrolled/enrolling they can enroll their dependent child(ren) with proof of loss of coverage .	
Ex-spouse/ex-partner and employee's stepchildren	The ex-spouse/ex-partner and their dependent children's coverage will end the last day of the month of the date of the divorce, legal separation, termination of partnership or annulment. They will be eligible for COBRA .	

Flexible Spending Accounts (FSA)

Health Care Flexible Spending Account HCFSAs	Dependent Care Flexible Spending Account DCFSAs
The employee can enroll, increase or decrease election to reflect loss of eligibility for medical, dental, vision or FSA coverage under the spouse/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. Effective date is the first of the month following the receipt of Benefits Enrollment/Change Form.	The employee can enroll or increase to accommodate newly eligible tax dependents and any other tax dependents who were not previously covered. Employee can decrease or cancel to reflect loss of eligibility .

How to Make Changes

The employee has **31 days** from the date of the event that causes the loss of eligibility 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 add employee and/or dependent children who lost coverage through ex-spouse/ex-partner

1. **Submit** the [Benefits Enrollment/Change Form GME \(PDF\)](#)
2. **Submit** [Dependent Eligibility Verification \(DEV\)](#) documentation for eligible child(ren), if dependents are not already verified. If documentation is not received, the dependent will not be enrolled and you will have to wait until the next Open Enrollment period.

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 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 their coverage (by name).
 - The effective date when coverage ends.
 - The types of plans that are being lost, specifically medical, dental and vision.

How to cancel coverage for ex-spouse/ex-partner, stepchildren and employee's children

1. **Submit** the [Benefits Enrollment/Change Form GME \(PDF\)](#)
2. **Submit** a copy of divorce decree, legal separation or annulment. If event is termination of partnership, a notarized [CU Affidavit of Domestic Partnership](#), is required.
3. To cancel CU coverage for employee's child(ren), employee must submit a letter or other document from the ex-spouse/ex-partner's employer or insurer stating:
 - The individuals that gained group coverage.
 - The effective date of group coverage.
 - The types of plans that were gained, specifically medical, dental and/or vision.
4. A [COBRA](#) packet will be mailed to employee's current address unless we are notified otherwise.

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

Payroll deductions

If canceling or removing dependent coverage and expecting a reduction in cost of monthly premiums, employee 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.

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 for 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 effective date when coverage ends.
- The types of plans that are being lost, specifically medical, dental and vision.