

You are responsible for reporting any qualifying status events to your human resources office within 31 days of the event. Qualifying status events include changes in family or employment status, such as, but not limited to:

- [Birth, adoption, or legal guardianship](#)
- [Marriage](#)
- [Divorce](#)
- [Death of spouse or dependent](#)
- [Gaining/Losing dependent's eligibility](#)
- [Change in full-time or part-time status \(FTE\)](#)
- [Unpaid leave of absence of more than 31 days for employee or spouse](#)

In addition, upon your eligibility for Medicare or at age 70, some supplemental insurance coverage stops. Please see the specific supplemental insurance brochure for details.

Most changes will be effective no sooner than the first day of the month following the requested change. For the exact date, please inquire with Human Resources.

Outside of the 31-day qualifying status event window, changes to your state-sponsored plans are limited to the annual open enrollment period, which takes place in the fall of each year.

Adoption or birth of a child

Congratulations on the new addition to your family! Giving birth, adopting a child, or becoming a foster parent are all "qualifying status changes" in terms of your benefits. That means you may change your benefit enrollment within 31 days of the birth or gaining custody of the child without having to wait until the annual open enrollment period.

Medical, Dental, and Other Supplemental Benefits

Although you may currently have medical coverage on yourself or other family members, coverage on your newborn is not automatic. Under your medical plan, you may enroll for the first time, increase coverage, or add your new dependent on an existing family plan. For other plans such as dental, hospital expense, cancer, etc., coverage may only be increased if currently enrolled in the plan.

To add your child to your benefits, you may enroll in one of the following ways:

- Online via the [People First Web site](#)
- Fax a qualified status change form and health enrollment form to the People First Service Center at 904-828-6092. Forms can be found on the [MyFlorida, MyBenefits](#) web site.
- Call People First at 1-866-663-4735 to add your dependent

Within 60 days of your coverage effective date, you must also submit a copy of the birth certificate, and social security number to People First, otherwise your coverage may be subject to cancellation. When sending documentation, always include your name and People First ID number on each document to ensure that People First will have the proper identification necessary for processing your information.

Adoption Benefits

If you are adopting a child, you may also be eligible for adoption benefits through the State of Florida. For more information, click [here](#).

Life Insurance and Flexible Spending Account

You may want to consider purchasing life insurance for your child or changing the amount of life insurance you currently purchase for yourself. The state plans offer coverage for the employee only, while the Gabor Agency offers coverage specifically for employees plus their

dependents. You may also elect to participate in or change the amount you contribute to your Flexible Spending Account (FSA).

Change in full-time or part-time status (FTE)

Changes from full to part-time or vice versa allow you to make certain changes to your benefits. Although part-time employees are eligible to participate in benefits, the cost of coverage is prorated based on the hours worked. When considering a change to your FTE status, please contact Human Resources at (941) 359-4775 for more information and costs. Changes to benefits must be made within 31 days from the date of your FTE change.

COBRA

COBRA (Consolidated Omnibus Budget Reconciliation Act) is a federally mandated program that allows you to continue your medical and dental benefits based on the following qualifying events:

- Termination of employment (for reasons other than gross misconduct)
- Reduction in the number of hours of employment which affects benefit eligibility
- Divorce or legal separation
- Employee's death (for eligible dependents)
- Covered employee becomes eligible for Medicare
- Child ceases to be eligible for coverage under the plans

Contact the People First Service Center at 1-866-663-4735 regarding questions on COBRA rights and participation.

Death of an Employee or a Dependent

It is the family's responsibility to report the loss of an employee or a dependent as quickly as possible. You may call the Human Resource Office at (941) 359-4775. The surviving spouse or dependent children of deceased faculty and staff may be eligible for university-provided benefits and retirement plan benefits.

The Human Resource Representative will need to know if the deceased was an active University employee or a dependent of a University employee. It is also helpful if you have the following information available when you call:

- Social Security number of the deceased
- Date of death

- Name of next of kin
- Address and phone number of next of kin

Once the death has been reported, the Human Resources Representative will review the benefits in which the deceased employee or dependent had been enrolled and will advise on options to continue coverage.

For changes that affect coverage level such as going from family to individual, the Human Resource Office must be notified within 31 days from the date of death otherwise the current coverage must remain in place. The next opportunity for the employee or surviving spouse to make the coverage change will be during the next open enrollment period.

Divorce

Divorce is a "qualifying status change" which affects your benefits. You must immediately contact the Human Resources office regarding your status to discuss available coverage change options. Your ex-spouse is no longer eligible to continue participation in any of your benefit plans. Coverage will typically terminate at the end of the month in which your divorce was finalized. You will need to provide a copy of your divorce decree to change your benefits.

Medical Dental & Other Supplemental Benefits

You will need to drop your ex-spouse from your medical coverage by submitting a [Qualified Status Change form](#) and a new [health enrollment form](#) within 31 days of the divorce. Your ex-spouse may be eligible for continuation of health coverage through COBRA.

If you and your ex-spouse are both university employees and are participating in the spouse program, neither of you will be eligible to continue in the Spouse plan. You will each need to complete a qualifying status change form and a health enrollment form to enroll individually in separate plans. You will also need to jointly complete a "spouse program enrollment" form indicating termination of the plan.

For dental and other supplemental plans, you will also need to complete the appropriate enrollments forms. All forms can be found on the [myBenefits section of myFlorida's web site](#). Contact the [People First Service Center](#) for more information.

Life Insurance, Retirement, and Flexible Spending Account

You may want to review the amount of your life insurance or your beneficiary information. You may also want to check with your retirement plan carrier regarding changes to your beneficiary designation. For more information on updating your beneficiaries review the beneficiary change section above. You may elect make a change to your Flexible Spending Account.

Gaining/Losing Dependent Eligibility

As your dependents either gain or lose eligibility to participate in your benefit plans you may add or drop an ineligible dependent within 31 days for the qualifying event. Currently, the following are considered eligible dependents:

- An employee's legal spouse
- An employee's natural children, legally adopted children, and children placed in the home for the purpose of adoption in accordance with Chapter 65, Florida Statutes
- Stepchildren
- Foster children
- Children for whom an employee has established legal guardianship pursuant to Chapter 744, Florida Statutes, or court-ordered temporary custody
- Children with a qualified medical support order requiring you to provide coverage.
- Children ages 26 to 30 as over-age dependents if:
 - They are unmarried, and
 - They have no dependents of their own, and
 - They are dependent on you for financial support, and
 - They live in Florida or attend school in another state, and
 - They have no other health insurance, and
 - You pay an additional monthly premium
- Children with permanent mental or physical disabilities after they reach age 26 if:
 - They are enrolled and remain covered in a State Group Insurance health plan before they turn age 26, and
 - They are unmarried, and
 - They are incapable of self-sustaining employment because of mental or physical disability, and

- They are dependent on you for care and financial support, and
- The treating physician provides documentation supporting the disability while the dependent is still covered under your plan.
- Dependent of a Dependent – you may cover your dependent’s newborn from birth up to age 18 months, provided the baby is born while your dependent is covered and remains covered under your health insurance plan.

Children lose dependent status when they no longer meet the definition of an eligible dependent or until the end of the calendar year in which they turn 26.

The majority of the supplemental plans (dental, hospital, etc.) follow the same criteria as the health plans as outlined above. However, some plans may vary. Please check the company brochure or agent for details on dependent eligibility requirements.

If you have questions about documentation or dependent eligibility, please contact People First at 866-663-4735, or the Human Resource office at (941) 359-4775.

To add or drop a dependent, you may make changes by one of the following ways:

- Online via the [People First Web site](#)
- Fax a qualified status change form and “health enrollment” form or any other plan enrollment form (i.e. dental, cancer, etc.) (link to form here) to the People First Service Center at 904-828-6092. Forms can be found at the [MyFlorida, MyBenefits](#) web site.
- Call People First at 1-866-663-4735

Once you added a dependent, within 60 days of your coverage effective date, you must also submit a copy of the appropriate documentation (i.e. birth certificate, social security number, or a school schedule verifying student eligibility) to People First otherwise your coverage may be subject to cancellation. Documentation may also be requested when dropping a dependent. When sending documentation, always include your name and People First ID number on each document to ensure that People First will have the proper identification necessary for processing your information.

Leave of Absence

When going out on a leave of absence (medical, personal, or parental), certain changes to your benefits can be made within 31 days from the date your leave of absence began.

Please contact the Human Resource office at (941)359-4775 for more information on what changes are permitted and continuation of premiums in order to maintain coverage.

Marriage

This qualified change in status will allow you to make changes to, and enroll in, benefits mid-year. You may add new your spouse and/or dependents to your benefits or you may cancel your existing coverage to enroll in your spouse's benefits programs. Changes can be made within 31 days of the date of the marriage. A copy of your marriage certificate and/or birth certificates of your dependents will be required within 60 days from the effective date of coverage; otherwise coverage will be subject to cancellation. When sending documentation, always include your name and People First ID number on each document to ensure that People First will have the proper identification necessary for processing your information.

Medical, Dental and Other Supplemental Benefits

To add your new spouse and/or dependents or cancel your coverage, you may enroll/cancel in one of the following ways:

- Online via the [People First Web site](#)
- Fax a qualified status change form and "health enrollment" form or any other plan enrollment form (i.e. dental, cancer, etc.) (link to form here) to the People First Service Center at 904-828-6092. Forms can be found at the [MyFlorida, MyBenefits](#) web site.
- Call People First at 1-866-663-4735

If your spouse is also a university employee or works for a state government agency, you may be eligible to enroll in the health insurance spouse program.

Life Insurance and Flexible Spending Account

You may want to consider purchasing life insurance for your spouse or changing the amount of life insurance you currently purchase for yourself by reviewing several of our [life insurance options](#). The state plans offer coverage for the employee only, while the certain

Gabor Agency policies offers coverage specifically for employees plus their dependents. You may also elect to participate in or change the amount you contribute to your Flexible Spending Account (FSA).

Military Leave

Please review the [Military Leave policy](#).

Move from HMO area

Normally, you cannot change your medical insurance coverage during the plan year (January 1 through December 31). However, if you are covered by health maintenance plans (HMO) and move outside the plan's service area; you can change your medical insurance choice during the year. For additional information contact the Human Resource Office at (941) 359-4775.

Name/Address Change

To ensure you receive important benefit and human resource related communications, please make sure your home and work addresses are up-to-date in the GEMS Self Service system.

New Employee

The New Employee section of our web site provides helpful information to get you started. Most importantly from a benefits perspective, you only have 60 days from your date of hire to enroll in your insurance programs. Once you've enrolled through People First, don't forget to contact the Human Resource office at (941) 359-4775 to submit payments necessary to get your benefits started.

Open Enrollment

Open Enrollment is an annual event, usually held in October, during which faculty and staff members can elect new benefits or change benefits enrollments for the upcoming year, effective January 1.

Termination of Employment

In order to best plan your transition, you should contact the Human Resource Office at (941) 359-4775 to go over your benefits and options before you leave the university. Coverage for the majority of your plans will generally continue through the next month following your termination date (i.e. last day worked March 2, coverage will continue through the month of April with your plan terminating on May 1).

You should contact the Human Resource Office at least within 2-3 weeks prior to your separation to discuss your options, complete necessary forms to cancel coverage, and to stop any future payroll deductions.

Once you have terminated with the university, the People First Service Center will mail COBRA information to your home address regarding your continuation of medical and dental options. Contact the People First Service Center at 1-866-663-4735 regarding questions on COBRA rights and participation.