

# Modifying Your Current Benefits

## *Snohomish County Human Resources*

Current employees may enroll in benefits or modify their current benefit elections during the annual open enrollment period or when the employee or one of their dependents experiences a qualifying Change in Status event listed on page 2 of this summary.

If you experience a qualifying Change in Status, your application for changes, documentation (i.e. marriage/birth certificates, etc.), and supporting information that authorizes a change (i.e. loss of other healthcare letter, divorce decree, etc.), must be submitted to Human Resources within **30 days** (60 days to add a newborn baby, adoption, or placement for adoption) from the event. If Human Resources does not receive your application within 30 days (60 days to add a newborn baby, adoption, or placement for adoption) from the event, you will be required to wait until the next annual open enrollment period to enroll in benefits or modify your current benefit elections.

### Effective Dates

The effective date of benefits for current employees that modify their benefits due to a Change in Status is determined by the type of event:

- Employees that experience a Change in Status and who are adding coverage or changing benefit plans - coverage starts on the first day of the month following the Change in Status event.
- Employees that have a new baby - coverage starts on the baby's date of birth.
- Employees that are adopting a child - coverage starts on the date of placement or date of adoption.
- Employees and/or their dependents that lose other healthcare coverage - coverage starts the day after the prior coverage ended.
- Employees that are removing coverage – coverage ends on the last day of the month in which the Change in Status event occurred.

### Checklist

If you experience a qualifying Change in Status, please review the checklist on page 3 of this summary. In addition to reviewing and/or modifying your current benefit elections, you may want to review and/or update your [beneficiary designations](#), payroll information, emergency contacts, etc.

Submit all applicable forms listed on page 3 enroll to Human Resources by one of the following methods:

- Fax: 425-388-3579 (If you fax, it is recommended that you call HR to verify receipt of your forms.)
- Mail: Snohomish County Human Resources | 3000 Rockefeller Avenue Mailstop 503 | Everett, WA 98201

Please visit [www.snohomishcountywa.gov/Benefits](http://www.snohomishcountywa.gov/Benefits) to access detailed benefits information including plan booklets, insurance certificates, comparison charts, summaries, forms, premiums, and contact information.

Contact Human Resources at [human.resources@snoco.org](mailto:human.resources@snoco.org) or call 425-388-3411 ext. 0 for assistance.

<b>Common Change in Status Events</b>	
Event	Documentation Required
Events that change a participant's legal marital status, including marriage, new domestic partnership, termination of domestic partnership, divorce, or legal separation or annulment.	Certified marriage certificate, Affidavit of Domestic Partnership, Divorce decree (1 <sup>st</sup> page and signature page), legal separation/annulment documents, etc.
Birth of a new child	Certified birth certificate or statement of live birth on hospital letterhead
Adoption of a child and/or placement for adoption	Adoption Decree
Appointed as a legal guardian	Legal Guardianship paperwork
Adding step-children as a result of a marriage	Certified birth certificate & the marriage certificate
Death of a dependent	Death certificate
Employment status change including: a strike, commencement or return from an unpaid leave of absence or FMLA, transferring between full-time and part-time status, temporary to regular status, change of Union, or moving from a non-benefit eligible position into a benefit eligible position.	Varies – contact HR for guidance
An event that causes the participant's dependent to satisfy or cease to satisfy the requirements for coverage due to attainment of age, or any similar circumstance.	
Cost increase, cost decrease, if the coverage under a benefit is significantly curtailed or ceases during a plan year, a new benefit is added, if other coverage option is eliminated.	
Loss of coverage - An individual loses eligibility for coverage under a group health plan or other health insurance coverage or when an employer terminates contributions toward health coverage.	Letter from employer or insurance company with the date that coverage was lost or gained
Gain of coverage - Change of coverage due to change under certain other plans - A participant may make a prospective election change that is on account of and corresponds with a change made under the plan of a spouse's, former spouses' or dependent's employer. (i.e. Spouse's Open Enrollment)	
Qualified Medical Support Order/National Medical Support Notice	Court order or notice
Participant gains or loses Medicare and/or Medicaid eligibility	Copy of Medicare/Medicaid card

Change in Status - Benefits Checklist		
✓	Description	Forms & Items to Review (as applicable)
	Healthcare Insurance	<ul style="list-style-type: none"> <li>• <a href="#">Healthcare Benefits Enrollment/Change Form</a>; or</li> <li>• <a href="#">Remove Dependent Form</a></li> </ul>
	Life Insurance	<ul style="list-style-type: none"> <li>• <a href="#">Life Insurance &amp; LTD Enrollment/Change Form</a></li> </ul>
	Flexible Spending Accounts	<ul style="list-style-type: none"> <li>• <a href="#">Navia Benefits FSA Enrollment Form</a> (new enrollment)</li> <li>• <a href="#">Change in Status Form</a> (currently enrolled)</li> </ul>
	Aflac Insurance Policies	Contact our Aflac Account Representative, Barbara Dickson, at 425-827-8397 or at <a href="mailto:barbarba@nwbenefitadvisors.com">barbarba@nwbenefitadvisors.com</a> to enroll and/or make changes.
	Beneficiaries – Life Insurance, Retirement & Deferred Compensation	Review the <a href="#">Beneficiary Designation Summary</a> to learn how to review and/or update beneficiary designations.
	W-4 Allowances	<ul style="list-style-type: none"> <li>• Review your allowances in <a href="#">Employee Self Service</a></li> <li>• Submit the <a href="#">IRS W-4 Form</a> to HR to make an update</li> </ul>
	Emergency Contacts	<ul style="list-style-type: none"> <li>• Review and/or update your emergency contacts in <a href="#">Employee Self Service</a></li> <li>• To update your emergency contacts, use Employee Self Service or submit the <a href="#">Personal Information Update Form</a> to HR</li> </ul>
	Name, Phone, or Address updates	<ul style="list-style-type: none"> <li>• Review your name, phone and address in <a href="#">Employee Self Service</a></li> <li>• Submit the <a href="#">Personal Information Update Form</a> to HR to make updates</li> </ul>