**County of Sonoma - Human Resources Department**

**A Summary of the most Common Change of Status Events and the Mid-Year Enrollment Changes Allowed for Retirees Under a Health (Medical or Dental) Plan**

This chart is only a summary of some of the permitted health plan changes and is **not** all inclusive.

<table>
<thead>
<tr>
<th>If you experience the following Event...</th>
<th>You may make the following change(s)* within 31 days of the Event...</th>
<th>YOU MAY NOT make these types of changes...</th>
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<tbody>
<tr>
<td><strong>Life / Family Events</strong></td>
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</table>
| Marriage or Commencement of Domestic Partnership (DP) | • Enroll in or waive health coverage for your new spouse/DP and other newly eligible dependents¹  
  • Waive health coverage for newly eligible dependents if your coverage is also waived¹  
  • Change health plans | • Waive health coverage for yourself and previously eligible children¹  
  • Enroll if not already enrolled |
| Divorce, Legal Separation, or Termination of Domestic Partnership (DP) | • Cancel health coverage for your spouse/DP  
  • Enroll yourself and your dependent children in health coverage if you or they were previously enrolled in your spouse/DP's health plan and only if a signed waiver is on file  
  • Cancel health coverage for dependent children² | • Change health plans |
| Gain a child due to birth or adoption | • Enroll in or waive health coverage for the newly eligible dependent¹  
  • Adoption placement papers are required as proof  
  • Change health plans | |
| Previously ineligible child requires coverage due to a QMCSO | • Add child named on QMCSO to your health coverage (enroll yourself, if eligible and waiver is on file)  
  • Change health plans, when options are available if necessary to accommodate the child named on the QMCSO | • Make any other changes, except as required by the QMCSO |
| Loss of a child's eligibility (e.g., child reaches the maximum age for coverage) | • Drop the child who lost eligibility from your health coverage | • Change health plans |
| Death of a dependent (spouse or child) | • Drop the dependent from your health coverage  
  • Enroll in health coverage if the event resulted in the loss of other group coverage and if a waiver is in place  
  • Change health plans | |
| Retiree has become entitled to Medicare | • Change medical plans  
  • Last opportunity to enroll yourself, your spouse, and dependent children in a medical plan, if previously waived. Eligibility for coverage will be permanently canceled if no enrollment within 60 days of Medicare eligibility | |
| Spouse or Dependent has become entitled to Medicaid or Medicare | • Cancel medical coverage for the person who became entitled to Medicare or Medicaid² | • Change health plans |
| Spouse or Dependent lost entitlement to Medicare or Medicaid, or SCHIP | • Add the spouse who lost Medicare/Medicaid entitlement to your health plan, if eligible and previously waived  
  • Add dependent child who lost Medicare/Medicaid entitlement to your health plan, if eligible and previously waived, only if waived along with retiree and retiree if also re-enrolling² | • Change health plans |
| Change of home address outside of plan service area | • Change health plans if you are enrolled in a medical or dental HMO and move out of their service area | |
| Death of retiree | • Eligible dependents must enroll at the time of the event or permanently lose eligibility² | • Surviving dependents must enroll or will be permanently canceled² |
| **Employment Status Events**           |                                                                     |                                        |
| You retire, transferring from active benefits to retiree benefits | • Change medical plans  
  • Enroll in a retiree dental plan  
  • Waive health coverage for yourself and/or dependents covered on your plan at the time of retirement provided they have other group coverage (one time option)¹ ²  
  • Enroll dependents who are currently enrolled or listed as waived on your active employee medical coverage | • Add dependents to retiree medical plan not already enrolled in or waived from your active employee medical plan¹ ² |
| Spouse obtains medical or dental benefits in another group plan | • Permanently cancel medical coverage for spouse¹  
  • Waive dental coverage for spouse | • Change health plans  
  • Waive health coverage¹ |
| Spouse loses employment or otherwise loses coverage for medical or dental benefits in another group medical or dental plan (Proof of loss of other coverage is required) | • Enroll yourself and/or spouse in a health plan, if eligible and previously waived  
  • Add dependent child(ren) to a medical plan if eligible and previously waived, only if waived along with retiree and retiree is also re-enrolling  
  • Change health plans¹ ² | • Enroll dependent children in a medical plan unless the retiree is enrolling² |
**Effective Dates** - The benefit election changes from the previous table are effective as follows:

| Canceling Coverage: | Effective date of change is generally the last day of the month after the event that allowed the change.  
| E.g. Spouse obtains other group coverage on the 1st of the month. Coverage for spouse ends on the last day of the prior month. |
|---|---|
| Adding newly eligible dependent: | Effective date of change is generally the first of the month following or coinciding with the event that allowed the change.  
| E.g. Married on 1st of the month. Coverage for new spouse is effective on the 1st of the same month.  
Married on the 2nd of the month. Coverage for new spouse is effective on the 1st of the following month. |
| New Retirees: | Effective on the 1st of the month following or coinciding with the date of retirement.  
| E.g. Retired July 1st. Employee coverage ends June 30th, retiree coverage is effective on July 1st.  
Retired July 9th. Employee coverage ends July 31st, retiree coverage is effective August 1st. |
| Exception: | Birth/Adoption: Effective on the 1st of the month following date of birth/adoption. Medical plans will cover a newborn under the subscriber’s coverage from date of birth through the end of the birth month.  
Submit paperwork to Human Resources early and no later than 31 days from the date of birth to ensure medical coverage for the child. |

All rules above apply equally to IRS qualified and non-qualified dependents for consistency and ease of administration.

1 Waiving retiree medical is a one-time only option at the time of retirement or within 31 days of the event date for newly eligible dependents (e.g. marriage, adoption, birth).

2 Per the Salary Resolution, eligible dependent children not enrolled in retiree medical when the retiree is enrolled are not eligible for re-enrollment in retiree medical at any time in the future, not even upon the loss of other group coverage.

**Dropping Eligible Dependents:**
Dependents dropped from coverage have limited or no re-enrollment rights. Review Section 15 of the County of Sonoma’s Salary Resolution carefully before dropping coverage for eligible spouse and/or dependents.

**Waiving Coverage (when covered by other group insurance):**
Medical coverage can be waived only at the time of retirement or within 31 days of initial eligibility for newly eligible dependents. Re-enrollment is very limited. Read Section 15 of the County of Sonoma’s Salary Resolution and the waiver language on the Retiree Benefits Enrollment and Change Form carefully before waiving coverage. Also, see footnotes above on this page.

**Medicare Enrollment Requirements:**
Medicare eligible retirees and/or Medicare eligible dependents must complete and sign enrollment paperwork the month prior to the effective date of the Medicare eligibility and provide a copy of their Medicare card(s) demonstrating enrollment in Medicare Part A and B.

**Permanently Cancel All Coverage:**
You may permanently cancel medical coverage at any time. However, you will give up all future re-enrollment rights. Read Section 15 of the County of Sonoma’s Salary Resolution carefully before cancelling medical coverage.