

Gained Eligibility under Medicare or Medicaid

These qualifying mid-year event election changes are permitted when you, your spouse, or your child enrolls under Medicare or Medicaid (other than coverage solely for pediatric vaccines).

Health Care Coverage:

- You may change your plan. HMO members are required to select a primary care physician.
- You may remove family members enrolling in Medicare or Medicaid. Removed family members will receive a HIPAA Certificate of Group Health Care Coverage. They do not qualify for Extended Coverage (COBRA).

Note: Contact your agency's Benefits Administrator to waive coverage.

Medical Flexible

Reimbursement Account:

- You may increase, reduce or cancel your election amount to cover a change in eligible medical expenses.

Dependent Care Flexible

Reimbursement Account:

- No election change is permitted.

Important Things To Know About Making An Election Change Request For This Event

- 1. What documentation is required.** Documentation from Medicare or Medicaid validating enrollment.
- 2. How to submit the request.** Within 31 days of the first day covered under Medicare or Medicaid, use [EmployeeDirect](#) or complete a paper [Enrollment Form](#).
- 3. When approved changes take effect.** Changes are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
- 4. Where to learn more.** Visit www.dhrm.virginia.gov. The [Employee Benefits link](#) includes answers to frequently asked questions and helpful information about handling a life-changing event. For more details, contact your agency's Benefits Administrator.

Reminder: If you miss this opportunity to submit your change request, your next chance will be at [Open Enrollment](#) or with another consistent [Qualifying Mid-year Event](#), whichever comes first.