Birth, Adoption or Placement for Adoption (BIR)

This life event/qualifying mid-year event (QME) permits election changes to enroll newborn/ child(ren) due to birth, adoption or placement for adoption.

Health Insurance Coverage:	May enroll or change the health plan.
	May add legal spouse and eligible family members (tag-along dependents).
	May waive coverage or remove family members if enrolling under the spouse's health plan, review the HIPAA Special Enrollment procedures.
Health Care Flexible Spending Account:	May enroll, increase or reduce election amount to cover a change in eligible medical expenses.
Dependent Care Flexible Spending Account:	May enroll, increase, election amount to cover a change in eligible dependent care expenses.

Important Things To Know About Making An Election Change Request For This Event
1. ***How to submit the request.*** Use Cardinal Employee Self Service (ESS) or submit an enrollment form within 60 calendar days of the birth, adoption or placement of adoption. The 60-day countdown begins on the day of the birth, adoption or placement of adoption. **Note:** If health plan changes are made or adding other eligible dependents, the employee must submit an enrollment form versus using ESS.
2. ***What documentation is required?*** Documentation validating the birth, adoption or placement of adoption such as official birth certificate/hospital birth record letter or court order documenting the adoption or placement. *If documentation is not available, employees should not miss the enrollment deadline. If documentation is received more than 30 days after the election request, contact OHB for assistance.* ***Health care coverage will not be effective until documentation is received and approved.***
3. ***When approved changes take effect.*** ***Health care coverage:*** Changes are effective to the date of birth, adoption or placement for adoption for the newborn, adopted child(ren) and child(ren) placed for adoption as long as the request is submitted within the 60-day enrollment window. When enrolling other eligible dependents or making a plan change, elections are effective the first of the month of the birth/adoption.

Flexible spending accounts: Changes are effective the first of the month following receipt of the election request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day. Health Insurance and FSA elections are separate elections and may be submitted together or separately within the allotted timeframe. ***Election changes are irrevocable once the effective date of the change has occurred.***
4. ***Where to learn more.*** Refer to the Cardinal Job Aids at www.cardinalproject.virginia.gov for instructions to process this benefit event. If additional assistance is needed, contact vccc@vita.virginia.gov for Cardinal-related issues or ohb@dhrm.virginia.gov for OHB policy-related issues.
5. See also HIPAA Special Enrollment, Eligible Active Employees and Family Members and Adding Family Members to an Existing Family Contract for more information, if applicable.
Reminder: If this enrollment opportunity is missed, the next chance will be at Open Enrollment or with another consistent life event/qualifying mid-year event (QME), whichever comes first.

Birth, Adoption or Placement for Adoption (BIR)

Birth, adoption, or placement for adoption is a life event/qualifying mid-year event (QME) that allows an employee or retiree to add a newly eligible dependent (e.g. newborn), within 60 days of birth, adoption, or placement for adoption event. Based on this event, the employee/retiree may enroll themselves, their legal spouse, and the newly acquired dependent(s).

The IRS cafeteria plan rules also allow other eligible family members/dependents to "tag-along" with the enrollment. The election request must be within 60 days of the birth, adoption or placement for adoption. The countdown begins on the day of the birth, adoption or placement of adoption.

Documentation

The following supporting documentation is required for the birth, adoption and placement or adoption event. Once obtained, the supporting documentation should be placed in the employee's file:

Birth of a child

- the Benefits Administrator should obtain a copy of the official birth certificate, hospital birth record letter or other documentation validating the date of birth, which includes the employee's name as a parent

Adoption

- the Benefits Administrator should obtain the legal adoptive agreement, showing employee's name, documenting the final adoption

Placement for adoption - OHB *must approve all pre-adoptive agreements*

A pre-adoptive agreement is a document that states an authoritative body (such as a court of law, a licensed adoption agency, or DSS) is placing a child in the home of an individual, in anticipation of an adoption, under the supervision of that authority. The authority oversees the placement.

OHB must determine that a pre-adoptive agreement meets uniform eligibility standards. This determination is made at the sole discretion of OHB after a review of all related documents.

The Benefits Administrator should obtain **one of the following**:

- Court order to include employee (and/or spouse) name and date of adoption/placement, and/or
- Letter from the licensed adoption agency to include letterhead, employee (or/and spouse) name and date of placement/adoption, and/or
- Letter from DSS to include employee (and/or spouse) name and date of adoption/placement.
- For private adoptions, documentation from a court showing the transfer of legal custody to the prospective adoptive parent(s). The court of law serves as the authoritative entity in the case of a private pre-adoptive placement.

When adding eligible dependents to coverage, supporting documentation is required that provides proof of eligibility. If supporting documentation is not available at the time of the event, the employee or retiree should not miss the deadline to submit the election request. The supporting documentation can be submitted later.

Allow 30 days from the election request to receive the supporting documentation, before making Cardinal adjustments. If documentation is received more than 30 days after the election request, contact OHB for assistance.

Dependents should remain in an "unapproved" status until supporting documentation verifying eligibility is provided. While unapproved dependents are listed on the Health Benefits screen in Cardinal, **they will not have access to benefits from the health plan until the status is changed to Approved.** See **Handling Unapproved Dependent Procedures** for more information.

Allowed Changes

The Health Insurance Portability and Accountability Act (HIPAA) Special Enrollment provisions for birth, adoption or placement for adoption allow employees or retirees to make certain election changes that are exempt from the usual consistency rule that applies to most life events/qualifying mid-year events (QME). See **HIPAA Special Enrollment** for more information.
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Plan Changes

A plan change is allowed based on this event. However, participants who have existing coverage and exercise their right to make a plan change due to this event should carefully consider the difference in health plan coverage that will generally apply to covered family members on the effective date of the new coverage.

In the case of a newborn and/or enrolled mother, this could mean that the claims related to the birth may have different out-of-pocket costs or network provider participation. Please explain the consequences of making a plan change to the employee.

Effective Dates of Election Changes

HIPAA Special Enrollment provisions for birth, adoption or placement for adoption allows an exception to the prospective effective date rule for health care coverage. When processing multiple elections related to a birth event, ensure that all events are processed in chronological order in Cardinal—from the earliest effective date to the latest. If the employee is not requesting a plan change and/or adding eligible dependents, all elections may be entered on the same day.

Please see the effective dates and event keying sequence chart below:

Process Order in Cardinal (On-Demand)	Create Benefit Event in Cardinal	Benefit Event Description	Effective Date
1st	Day 1	Enroll/change health plan and/or enroll other eligible dependents	The first of the month of the birth/adoption event
2nd	Day 2	Event to enroll newborn or add newly adopted child	Retroactive to the date of the event (birth, adoption, placement of adoption)
3rd	Day 2	Enroll, increase or decrease annual election (health and or dependent care FSA)	The first of the month following receipt of the FSA election request or the event, whichever is later. When the later date is the first of the month, changes are effective that day.

Normally, the file updates to the health plan vendors occur on the morning of the next day following enrollment. Files are not transmitted on Sunday, Monday or holidays. ***Do not enter the second event until the first transaction has been transmitted to the vendor.***

Health Insurance and FSA elections are separate elections and may be submitted together or separately within the allotted timeframe.

If the employee or retiree group participant provides documentation of other coverage for the month of birth, adoption, or placement for adoption, they may make the health

plan coverage election on a prospective basis to be effective the first of the month following receipt of the enrollment action. *These determinations must be sent to OHB for review.*

***Note**: For all health plan changes due to birth, adoption or placement for adoption, the new premiums are due for the full month of coverage*.

Missed the 60-Day Window

If the employee or /retiree currently has an existing family membership and misses the 60-day window to enroll an eligible dependent with the birth, adoption or placement for adoption event, the dependent can be enrolled at any time retroactive to the date of birth or adoption, not to exceed 12 months. The pre-tax premium will not increase since there is no change to the membership. Please forward the election request and supporting documentation to obh@dhrm.virginia.gov for handling.

If the 60-day window is missed and the employee or retiree does not have existing family coverage, the next opportunity will be at the next Open Enrollment or with another consistent life event/qualifying mid-year event (QME), whichever comes first.

Reminder: Adding other eligible family members/dependents to existing family membership can be added prospectively at any time (tag-along rule). See **Adding Family Members to an Existing Family Contract** for more information.

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System Updates

Refer to the Cardinal Job Aids at www.cardinalproject.virginia.gov for instructions to process this benefit event. Please adhere to processing guidelines to ensure transactions are submitted to the vendors appropriately. For questions, contact ohb@dhrm.virginia.gov.