

QUALIFYING EVENTS

Life changes. Your benefits may need to change too.

A quick employee guide to Qualifying Events (QEs), deadlines, and documentation.

1 Life Event

Something changes

2 Take Action

Contact Benefits
Specialist

3 Document

Submit proof

What is a Qualifying Event (QE)?

A QE may allow you to make certain benefit changes outside of Open Enrollment.



Normally...

You enroll or make benefit changes when you are first eligible or during Open Enrollment.



But life happens...

Certain changes in your family, eligibility, or other coverage may create a special opportunity to update your benefits.



Your responsibility

Notify your Employer Benefits Specialist promptly and provide acceptable documentation within the applicable timeframe.

Important: A life event does not automatically update your benefits.



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Common Qualifying Event Examples

These are common examples; eligibility depends on the specific circumstances and plan requirements.

Marriage

You get married and want to add your new spouse.

Birth / Adoption

You welcome a child through birth, adoption, or placement.

Divorce

You divorce and need to make eligible coverage changes.

Loss of Coverage

You or a dependent involuntarily loses other eligible coverage.

Gain of Coverage

You or a dependent becomes eligible for other group coverage.

Medicaid / CHIP Loss

You or a dependent loses eligibility for Medicaid or CHIP.



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Documentation: What Should You Provide?

Your documentation should verify the event and the date it occurred.

Examples of Documents

- Marriage certificate
- Birth certificate
- Adoption/placement documents
- Divorce decree
- Loss-of-coverage letter
- Proof of gain of coverage
- Medicaid/CHIP termination notice

For Loss of Coverage, Think: **WHERE • WHO • WHAT • WHEN • WHY**

WHERE was coverage from?
WHO lost coverage?
WHAT coverage ended?
WHEN did it end?
WHY did it end?

Example

“Coverage for Jane Doe ended July 31, 2026, due to termination of employment.”

A document showing only an end date may not provide enough information to process the request.



Does This Count?

Quick examples to help you know when to contact your Benefits Specialist.

YES — MAY QUALIFY

- “I just got married.”
- “We just had a baby.”
- “My spouse changed jobs and I lost their health coverage.”
- “My Medicaid/CHIP eligibility ended.”

MAYBE — ASK FIRST

- “My work hours changed.”
- “My spouse’s employer changed plans.”
- “The cost of my other insurance increased.”
- “I moved.”

GENERALLY NO

- “I changed my mind about my plan.”
- “I voluntarily canceled my other insurance.”
- “I missed Open Enrollment.”
- “I found a plan I like better.”



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A Life Event Happened — Now What?

Use these four steps so your request has the best chance of being processed timely.

1

Contact Benefits

Tell your Employer Benefits Specialist as soon as the event occurs.

2

Know the Deadline

Qualifying Events have enrollment timeframes of 31 days. Don't wait.

3

Gather Proof

Provide documentation showing what happened and when.

4

Check Before You Submit

For loss of coverage, make sure the document explains all the W's - Where, Who, What, When and WHY it ended.



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**Missing or incomplete documentation may delay your request
or prevent the change from being processed.**

DON'T WAIT.

Ask questions early.

Something Changed?

Contact your Employer Benefits Specialist as soon as possible.

Have Documents?

Keep copies and make sure they clearly support your Qualifying Event.

Not Sure?

Ask before canceling coverage or waiting until the deadline.

LIFE HAPPENS. KNOW YOUR BENEFIT OPTIONS.



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