

Rules for Mid-Year Health Insurance Changes

The IRS regulations for mid-year health insurance changes (i.e. outside of open enrollment period) restrict any changes to your plan or coverage unless you have a qualified “change in status.”

The following are considered qualified changes in status by the IRS:

- **Change in legal marital status**, including marriage, divorce, legal separation, annulment, and death of a spouse
- **Change in number of dependents**, including birth, adoption, placement for adoption, or death of a dependent child
- **Change in employment status**, including the start or termination of employment by you, your spouse, or your dependent child
- **Change in work schedule**, including an increase or decrease in hours of employment by you, your spouse, or your dependent child, including a switch between part-time and full-time employment that affects eligibility for benefits
- **Change in a child’s dependent status**, either newly satisfying the requirements for dependent child status or ceasing to satisfy them
- **Change in place of residence or worksite**, including a change that affects the accessibility of network providers
- **Change in your health coverage or your spouse’s coverage** attributable to your spouse’s employment
- **Change in an individual’s eligibility for Medicare or Medicaid**
- **A court order** resulting from a divorce, legal separation, annulment, or change in legal custody (including a Qualified Medical Child Support Order) requiring coverage for your child or dependent foster child
- **An event that is a special enrollment event under HIPAA** (the Health Insurance Portability and Accountability Act), including acquisition of a new dependent or spouse or loss of coverage under another health insurance policy or plan if the coverage is terminated because of:
 - Voluntary or involuntary termination of employment or reduction in hours of employment or death, divorce, or legal separation,
 - Termination of employer contributions toward the other coverage, OR
 - If the other coverage was COBRA Continuation Coverage, exhaustion of the coverage

Two other rules apply to making changes to your benefits during the year:

- Any changes you make must be consistent with the change in status, AND
- You must make the changes within 31 days of the date the event (marriage, birth, etc.) occurs.