

LIST OF QUALIFYING LIFE EVENTS

Timing and Required Supporting Documentation

A qualifying life event is a personal change in status which may allow you to change your benefit elections during the calendar year (outside of the Open Enrollment period). You have **31 days from the date of the event** (unless noted otherwise in the table below) to make changes to your benefits. The events below apply to spouses/domestic partners and eligible dependents. See the chart below for details.

To initiate a benefits change:

- **From a computer** – Log into UKG. Navigate to Benefits > Manage My Benefits > Update My Benefits. Choose the applicable Life Event.
- **From a mobile phone** – Visit benefits.plansource.com.
 - Username: First initial of your first name, first six characters of your last name, and last four of your SSN
 - First-time temporary password: Your date of birth formatted as YYYYMMDD. If you've logged in before, use the password you previously created.

Supporting documentation must be uploaded for your life event to be approved. If you need help navigating UKG or determining if your event qualifies, contact [HR Services](#) or call 317-390-3148.

Qualifying Life Event	Days to Initiate Benefits Change from Event Date	Required Supporting Documentation
Marriage	31	<ul style="list-style-type: none">• Marriage Certificate
Divorce/Legal Separation	60	<ul style="list-style-type: none">• Divorce Decree or Official court document
Name Change	Not applicable	<ul style="list-style-type: none">• Social Security Card• To initiate, log into UKG > Personal > Name, Address, and Telephone. Click the 'Edit' icon, enter your new legal name and click 'Save'.• To initiate in UKG Pro Mobile App, tap the Menu in the lower left corner. Select Profile > Edit > enter your new legal name and click 'Submit'.
Domestic Partnership	See form for details	<ul style="list-style-type: none">• Domestic Partner Affidavit Form• Termination of Domestic Partnership Form
Birth	31	<ul style="list-style-type: none">• Birth Certificate or• Confirmation of Birth from the Hospital• Social Security Card (as soon as available)
Adoption	31	<ul style="list-style-type: none">• Official Court Adoption documents
Award of Legal Custody/Guardianship	31	<ul style="list-style-type: none">• Official Court Order documents and/or• Medical Support Order
Qualified Medical Child Support Order	Not applicable	<ul style="list-style-type: none">• Medical Support Order (benefits will be provided based on the applicable requirements of the order)
Death	31	<ul style="list-style-type: none">• Death certificate or• Letter from Coroner's Office

Gain or Loss of Coverage for Employee, Spouse/Domestic Partner, or Dependent Child	31	<p>Gaining new coverage:</p> <ul style="list-style-type: none"> • Benefit confirmation statement of new coverage including benefits start date <p>Losing coverage elsewhere:</p> <ul style="list-style-type: none"> • HR letter* or COBRA notification • Marriage Certificate or Domestic Partner Affidavit Form • Birth Certificate or Legal Guardianship (dependent
Medicaid or Children's Health Insurance Program (CHIP) coverage because of gain or loss of eligibility	60	<ul style="list-style-type: none"> • Acceptance or loss of state insurance coverage • Acceptance letter from Medicaid • Notification of coverage loss from Medicaid

*A letter listing the event, name(s) of the individual(s) affected, the type of coverage(s) gained/lost, and the effective date of the change.