

PUBLIC EMPLOYEES' BENEFIT BOARD
PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|---|--|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| QUALIFIED STATUS CHANGE (QSC) - IRC 125 | | | | | | |
| Change in Employment Status by Domestic Partner | Accidental Death & Dismemberment | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Dental | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Dependent Life | X | | X | | 1 (c) B |
| Change in Employment Status by Domestic Partner | Employee Long Term Care | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Employee Optional Life | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Long Term Disability | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Medical | X | X | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Short Term Disability | X | | X | | 1 (c) B |
| Change in Employment Status by Domestic Partner | Spouse/Partner Long Term Care | X | | X | X | 1 (c) B |
| Change in Employment Status by Domestic Partner | Spouse/Partner Optional Life | X | | X | X | 1 (c) B |
| Change in Employment Status by Employee | Accidental Death & Dismemberment | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Basic Life | X | | X | | 1 (c) A |
| Change in Employment Status by Employee | Dental | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Dependent Care Flexible Spending Accou | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Dependent Life | X | | X | | 1 (c) A |
| Change in Employment Status by Employee | Employee Long Term Care | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Employee Optional Life | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Health Care Flexible Spending Account | X | | X | | 1 (c) A |
| Change in Employment Status by Employee | Long Term Disability | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Medical | X | X | X | X | 1 (c) A |
| Change in Employment Status by Employee | Short Term Disability | X | | X | | 1 (c) A |
| Change in Employment Status by Employee | Spouse/Partner Long Term Care | X | | X | X | 1 (c) A |
| Change in Employment Status by Employee | Spouse/Partner Optional Life | X | | X | X | 1 (c) A |
| Change in Employment Status by Spouse | Accidental Death & Dismemberment | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Dental | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Dependent Care Flexible Spending Accou | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Dependent Life | X | | X | | 1(a)(d) |
| Change in Employment Status by Spouse | Employee Long Term Care | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Employee Optional Life | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Health Care Flexible Spending Account | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Long Term Disability | X | | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Medical | X | X | X | X | 1(a)(d) |
| Change in Employment Status by Spouse | Short Term Disability | X | | X | | 1(a)(d) |
| Change in Employment Status by Spouse | Spouse/Partner Long Term Care | X | | X | X | 1(a)(d) |

PUBLIC EMPLOYEES' BENEFIT BOARD
PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

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| | | Enroll | Opt Out | Cancel | Change | |
| Change in Employment Status by Spouse | Spouse/Partner Optional Life | X | | X | X | 1 (a)(d) |
| Death of Domestic Partner | Accidental Death & Dismemberment | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Dental | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Dependent Life | X | | X | | 1 (a) B |
| Death of Domestic Partner | Employee Long Term Care | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Employee Optional Life | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Long Term Disability | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Medical | X | | X | X | 1 (a) B |
| Death of Domestic Partner | Short Term Disability | X | | X | | 1 (a) B |
| Death of Domestic Partner | Spouse/Partner Long Term Care | | | X | | 1 (a) B |
| Death of Domestic Partner | Spouse/Partner Optional Life | | | X | | 1 (a) B |
| Death of Member | Accidental Death & Dismemberment | | | X | | 1 (c) A |
| Death of Member | Basic Life | | | X | | 1 (c) A |
| Death of Member | Dental | | | X | | 1 (c) A |
| Death of Member | Dependent Care Flexible Spending Account | | | X | | 1 (c) A |
| Death of Member | Dependent Life | | | X | | 1 (c) A |
| Death of Member | Employee Long Term Care | | | X | | 1 (c) A |
| Death of Member | Employee Optional Life | | | X | | 1 (c) A |
| Death of Member | Health Care Flexible Spending Account | | | X | | 1 (c) A |
| Death of Member | Long Term Disability | | | X | | 1 (c) A |
| Death of Member | Medical | | | X | | 1 (c) A |
| Death of Member | Short Term Disability | | | X | | 1 (c) A |
| Death of Member | Spouse/Partner Long Term Care | | | X | | 1 (c) A |
| Death of Member | Spouse/Partner Optional Life | | | X | | 1 (c) A |
| Death of Spouse | Accidental Death & Dismemberment | X | | X | X | 1 (a) B |
| Death of Spouse | Dental | X | | X | X | 1 (a) B |
| Death of Spouse | Dependent Care Flexible Spending Account | X | | X | X | 1 (a) B |
| Death of Spouse | Dependent Life | X | | X | | 1 (a) B |
| Death of Spouse | Employee Long Term Care | X | | X | X | 1 (a) B |
| Death of Spouse | Employee Optional Life | X | | X | X | 1 (a) B |
| Death of Spouse | Health Care Flexible Spending Account | X | | X | X | 1 (a) B |
| Death of Spouse | Long Term Disability | X | | X | X | 1 (a) B |
| Death of Spouse | Medical | X | | X | X | 1 (a) B |
| Death of Spouse | Short Term Disability | X | | X | | 1 (a) B |
| Death of Spouse | Spouse/Partner Long Term Care | | | X | | 1 (a) B |
| Death of Spouse | Spouse/Partner Optional Life | | | X | | 1 (a) B |
| Dependent Care FSA Change in Cost or Coverage | Dependent Care Flexible Spending Account | X | | X | X | 5 (a) |

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|--|--|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Accidental Death & Dismemberment | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Dental | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Dependent Care Flexible Spending Account | | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Dependent Life | X | | X | | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Employee Long Term Care | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Employee Optional Life | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Health Care Flexible Spending Account | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Long Term Disability | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Medical | X | X | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Short Term Disability | X | | X | | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Spouse/Partner Long Term Care | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Ceases to Satisfy Eligibility Requirements | Spouse/Partner Optional Life | X | | X | X | 1 (b) B; 1 (e) B |
| Dependent Child Satisfies Eligibility Requirements | Accidental Death & Dismemberment | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Dental | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Dependent Care Flexible Spending Account | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Dependent Life | X | | X | | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Employee Long Term Care | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Employee Optional Life | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Health Care Flexible Spending Account | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Long Term Disability | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Medical | X | X | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Short Term Disability | X | | X | | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Spouse/Partner Long Term Care | X | | X | X | 1 (e) A |
| Dependent Child Satisfies Eligibility Requirements | Spouse/Partner Optional Life | X | | X | X | 1 (e) A |
| Gain Child Through Birth - Newborn Retro Enrollment | Dental | X | | X | X | 1 (b) A |
| Gain Child Through Birth - Newborn Retro Enrollment | Medical | X | X | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Accidental Death & Dismemberment | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Dental | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Dependent Care Flexible Spending Account | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Dependent Life | X | | X | | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Employee Long Term Care | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Employee Optional Life | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Health Care Flexible Spending Account | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Long Term Disability | X | | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Medical | X | X | X | X | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Short Term Disability | X | | X | | 1 (b) A |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Spouse/Partner Long Term Care | X | | X | X | 1 (b) A |

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| | | Enroll | Opt Out | Cancel | Change | |
| Gain Child Through Birth/Adoption/Placement for Adoption/Affidavit of Dependency | Spouse/Partner Optional Life | X | | X | X | 1 (b) A |
| Gain Other Group Coverage | Dental | X | | X | X | 3 (a) A |
| Gain Other Group Coverage | Employee Long Term Care | X | | X | X | 3 (a) A |
| Gain Other Group Coverage | Medical | X | X | X | X | 3 (a) A |
| Gain Other Group Coverage | Spouse/Partner Long Term Care | X | | X | X | 3 (a) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Accidental Death & Dismemberment | X | | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Dental | X | | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Dependent Life | X | | X | | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Employee Long Term Care | X | | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Employee Optional Life | X | | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Long Term Disability | X | | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Medical | X | X | X | X | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Short Term Disability | X | | X | | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Spouse/Partner Long Term Care | X | | | | 1 (a) A; 1 (b) A |
| Gain Partner and/or Partner's Children By Affidavit/Certification | Spouse/Partner Optional Life | X | | | | 1 (a) A; 1 (b) A |
| Gain Spouse and/or Children Through Marriage | Accidental Death & Dismemberment | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Dental | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Dependent Care Flexible Spending Account | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Dependent Life | X | | X | | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Employee Long Term Care | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Employee Optional Life | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Health Care Flexible Spending Account | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Long Term Disability | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Medical | X | X | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Short Term Disability | X | | X | | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Spouse/Partner Long Term Care | X | | | | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage | Spouse/Partner Optional Life | X | | | | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Accidental Death & Dismemberment | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Dental | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Dependent Care Flexible Spending Account | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Dependent Life | X | | X | | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Employee Long Term Care | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Employee Optional Life | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Health Care Flexible Spending Account | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Long Term Disability | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Medical | X | X | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Short Term Disability | X | | X | | 1 (a) A; 1 (e) A |

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| | | Enroll | Opt Out | Cancel | Change | |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Spouse/Partner Long Term Care | X | | X | X | 1 (a) A; 1 (e) A |
| Gain Spouse and/or Children Through Marriage to a Previously Covered Domestic Partner | Spouse/Partner Optional Life | X | | X | X | 1 (a) A; 1 (e) A |
| Gains Medicare (Part A or B) or Medicaid | Dental | X | | X | X | 3 (a) |
| Gains Medicare (Part A or B) or Medicaid | Medical | X | | X | X | 3 (a) |
| Loses Medicare (Part A or B) or Medicaid | Dental | X | | | | 3 (b) |
| Loses Medicare (Part A or B) or Medicaid | Medical | X | | | | 3 (b) |
| Loss of Children Through Divorce/Annulment | Accidental Death & Dismemberment | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Dental | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Dependent Care Flexible Spending Account | | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Dependent Life | X | | X | | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Employee Long Term Care | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Employee Optional Life | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Health Care Flexible Spending Account | | | | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Long Term Disability | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Medical | X | X | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Short Term Disability | X | | X | | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Spouse/Partner Long Term Care | X | | X | X | 1 (e) B |
| Loss of Children Through Divorce/Annulment | Spouse/Partner Optional Life | X | | X | X | 1 (e) B |
| Loss of Family Through Divorce/Annulment | Accidental Death & Dismemberment | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Dental | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Dependent Care Flexible Spending Account | | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Dependent Life | X | | X | | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Employee Long Term Care | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Employee Optional Life | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Health Care Flexible Spending Account | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Long Term Disability | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Medical | X | X | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Short Term Disability | X | | X | | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Spouse/Partner Long Term Care | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Family Through Divorce/Annulment | Spouse/Partner Optional Life | X | | X | X | 1 (a) B; 1 (e) B |
| Loss of Other Group Coverage | Dental | X | | X | X | 3 (a) B |
| Loss of Other Group Coverage | Medical | X | | X | X | 3 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Accidental Death & Dismemberment | X | | X | X | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Dental | X | | X | X | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Dependent Life | X | | X | | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Employee Long Term Care | X | | X | X | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Employee Optional Life | X | | X | X | 1 (a) B |

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| | | Enroll | Opt Out | Cancel | Change | |
| Loss of Partner and Partner's Children due to Termination of Partnership | Long Term Disability | X | | X | X | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Medical | X | | X | X | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Short Term Disability | X | | X | | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Spouse/Partner Long Term Care | | | X | | 1 (a) B |
| Loss of Partner and Partner's Children due to Termination of Partnership | Spouse/Partner Optional Life | | | X | | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Accidental Death & Dismemberment | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Dental | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Dependent Care Flexible Spending Accou | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Dependent Life | X | | X | | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Employee Long Term Care | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Employee Optional Life | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Health Care Flexible Spending Account | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Long Term Disability | X | | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Medical | X | X | X | X | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Short Term Disability | X | | X | | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Spouse/Partner Long Term Care | | | X | | 1 (a) B |
| Loss of Spouse Through Divorce/Annulment | Spouse/Partner Optional Life | | | X | | 1 (a) B |
| Move Residence or Worksite Results in Change of Eligibility | Accidental Death & Dismemberment | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Dental | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Dependent Life | X | | X | | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Employee Long Term Care | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Employee Optional Life | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Long Term Disability | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Medical | X | X | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Short Term Disability | X | | X | | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Spouse/Partner Long Term Care | X | | X | X | 1 (f) A, B |
| Move Residence or Worksite Results in Change of Eligibility | Spouse/Partner Optional Life | X | | X | X | 1 (f) A, B |
| National Medical Support Notice | Dental | X | | X | X | 4 (a) |
| National Medical Support Notice | Health Care Flexible Spending Account | | | | X | 4 (a) |
| National Medical Support Notice | Medical | X | X | X | X | 4 (a) |
| New Hire | Accidental Death & Dismemberment | X | | | | 1 (c) A |
| New Hire | Basic Life | X | | | | 1 (c) A |
| New Hire | Dental | X | | | | 1 (c) A |
| New Hire | Dependent Care Flexible Spending Accou | X | | | | 1 (c) A |
| New Hire | Dependent Life | X | | | | 1 (c) A |
| New Hire | Employee Long Term Care | X | | | | 1 (c) A |
| New Hire | Employee Optional Life | X | | | | 1 (c) A |

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| | | Enroll | Opt Out | Cancel | Change | |
| New Hire | Health Care Flexible Spending Account | X | | | | 1 (c) A |
| New Hire | Long Term Disability | X | | | | 1 (c) A |
| New Hire | Medical | X | X | | | 1 (c) A |
| New Hire | Short Term Disability | X | | | | 1 (c) A |
| New Hire | Spouse/Partner Long Term Care | X | | | | 1 (c) A |
| New Hire | Spouse/Partner Optional Life | X | | | | 1 (c) A |
| Reinstatement | Accidental Death & Dismemberment | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Basic Life | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Dental | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Dependent Care Flexible Spending Account | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Dependent Life | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Employee Long Term Care | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Employee Optional Life | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Health Care Flexible Spending Account | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Long Term Disability | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Medical | X | X | | | 1 (c) A; 1 (d) A |
| Reinstatement | Short Term Disability | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Spouse/Partner Long Term Care | X | | | | 1 (c) A; 1 (d) A |
| Reinstatement | Spouse/Partner Optional Life | X | | | | 1 (c) A; 1 (d) A |
| Resignation/Termination | Accidental Death & Dismemberment | | | X | | 1 (d) |
| Resignation/Termination | Basic Life | | | X | | 1 (d) |
| Resignation/Termination | Dental | | | X | | 1 (d) |
| Resignation/Termination | Dependent Care Flexible Spending Account | | | X | | 1 (d) |
| Resignation/Termination | Dependent Life | | | X | | 1 (d) |
| Resignation/Termination | Employee Long Term Care | | | X | | 1 (d) |
| Resignation/Termination | Employee Optional Life | | | X | | 1 (d) |
| Resignation/Termination | Health Care Flexible Spending Account | | | X | | 1 (d) |
| Resignation/Termination | Long Term Disability | | | X | | 1 (d) |
| Resignation/Termination | Medical | | | X | | 1 (d) |
| Resignation/Termination | Short Term Disability | | | X | | 1 (d) |
| Resignation/Termination | Spouse/Partner Long Term Care | | | X | | 1 (d) |
| Resignation/Termination | Spouse/Partner Optional Life | | | X | | 1 (d) |
| Retirement | Accidental Death & Dismemberment | | | X | | 1 (d) |
| Retirement | Basic Life | | | X | | 1 (d) |
| Retirement | Dental | | | X | | 1 (d) |
| Retirement | Dependent Care Flexible Spending Account | | | X | | 1 (d) |
| Retirement | Dependent Life | | | X | | 1 (d) |

PUBLIC EMPLOYEES' BENEFIT BOARD

PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|------------|---------------------------------------|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| Retirement | Employee Long Term Care | | | X | | 1 (d) |
| Retirement | Employee Optional Life | | | X | | 1 (d) |
| Retirement | Health Care Flexible Spending Account | | | X | | 1 (d) |
| Retirement | Long Term Disability | | | X | | 1 (d) |
| Retirement | Medical | | | X | | 1 (d) |
| Retirement | Short Term Disability | | | X | | 1 (d) |
| Retirement | Spouse/Partner Long Term Care | | | X | | 1 (d) |
| Retirement | Spouse/Partner Optional Life | | | X | | 1 (d) |
| | | | | | | |

PUBLIC EMPLOYEES' BENEFIT BOARD

PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|---|--|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| PROGRAM, PLAN DESIGN AND AGENCY SPECIFIC QSCs | | | | | | |
| Correcting Processing Errors | Employee Optional Life | X | | X | X | Program |
| Correcting Processing Errors | Dependent Care Flexible Spending Accou | X | | X | X | Program |
| Correcting Processing Errors | Accidental Death & Dismemberment | X | | X | X | Program |
| Correcting Processing Errors | Employee Long Term Care | X | | X | X | Program |
| Correcting Processing Errors | Dependent Life | X | | X | | Program |
| Correcting Processing Errors | Spouse/Partner Long Term Care | X | | X | X | Program |
| Correcting Processing Errors | Long Term Disability | X | | X | X | Program |
| Correcting Processing Errors | Dental | X | | X | X | Program |
| Correcting Processing Errors | Health Care Flexible Spending Account | X | | X | X | Program |
| Correcting Processing Errors | Short Term Disability | X | | X | | Program |
| Correcting Processing Errors | Spouse/Partner Optional Life | X | | X | X | Program |
| Correcting Processing Errors | Medical | X | X | X | X | Program |
| Correcting Processing Errors | Basic Life | X | | X | | Program |
| Coverage Termination -Plan request | Medical | | | X | | Plan Contract |
| FSA cancellation - No deduction from last check | Health Care Flexible Spending Account | | | X | | Program |
| FSA cancellation - No deduction from last check | Dependent Care Flexible Spending Account | | | X | | Program |
| Judges - Employment Changes | Long Term Disability | | | X | | Agency Specific |
| Judges - Employment Changes | Short Term Disability | | | X | | Agency Specific |
| Reverse Domestic Partner Enrollment Within Two Weeks of Initial Eligibility | Dental | | | | X | Program |
| Reverse Domestic Partner Enrollment Within Two Weeks of Initial Eligibility | Medical | | | | X | Program |
| Standard Premium Waiver | Employee Optional Life | | | X | | Plan Design |
| Standard Premium Waiver | Short Term Disability | | | X | | Plan Design |
| Standard Premium Waiver | Dependent Life | | | X | | Plan Design |
| Standard Premium Waiver | Long Term Disability | | | X | | Plan Design |
| Standard Premium Waiver | Spouse/Partner Optional Life | | | X | | Plan Design |
| Transfer In from Another Agency | Spouse/Partner Long Term Care | X | | | | Program |
| Transfer In from Another Agency | Dependent Care Flexible Spending Accou | X | | | | Program |
| Transfer In from Another Agency | Spouse/Partner Optional Life | X | | | | Program |
| Transfer In from Another Agency | Medical | X | X | | | Program |
| Transfer In from Another Agency | Health Care Flexible Spending Account | X | | | | Program |
| Transfer In from Another Agency | Short Term Disability | X | | | | Program |
| Transfer In from Another Agency | Basic Life | X | | | | Program |
| Transfer In from Another Agency | Employee Long Term Care | X | | | | Program |
| Transfer In from Another Agency | Accidental Death & Dismemberment | X | | | | Program |

PUBLIC EMPLOYEES' BENEFIT BOARD
PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|---|--|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| Transfer In from Another Agency | Dependent Life | X | | | | Program |
| Transfer In from Another Agency | Employee Optional Life | X | | | | Program |
| Transfer In from Another Agency | Dental | X | | | | Program |
| Transfer In from Another Agency | Long Term Disability | X | | | | Program |
| Transfer to Another Agency | Spouse/Partner Optional Life | | | X | | Program |
| Transfer to Another Agency | Health Care Flexible Spending Account | | | X | | Program |
| Transfer to Another Agency | Accidental Death & Dismemberment | | | X | | Program |
| Transfer to Another Agency | Employee Optional Life | | | X | | Program |
| Transfer to Another Agency | Long Term Disability | | | X | | Program |
| Transfer to Another Agency | Short Term Disability | | | X | | Program |
| Transfer to Another Agency | Basic Life | | | X | | Program |
| Transfer to Another Agency | Dental | | | X | | Program |
| Transfer to Another Agency | Medical | | | X | | Program |
| Transfer to Another Agency | Dependent Life | | | X | | Program |
| Transfer to Another Agency | Employee Long Term Care | | | X | | Program |
| Transfer to Another Agency | Spouse/Partner Long Term Care | | | X | | Program |
| Transfer to Another Agency | Dependent Care Flexible Spending Account | | | X | | Program |
| Roll Over-Life and Long Term Care Plans | Spouse/Partner Long Term Care | X | | | | Plan Design |
| Roll Over-Life and Long Term Care Plans | Spouse/Partner Optional Life | X | | | | Plan Design |
| Roll Over-Life and Long Term Care Plans | Employee Optional Life | X | | | | Plan Design |
| Roll Over-Life and Long Term Care Plans | Employee Long Term Care | X | | | | Plan Design |
| Open Enrollment (Use December Dates Only) | Dependent Care Flexible Spending Account | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Spouse/Partner Long Term Care | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Dependent Life | X | | X | | Plan Design |
| Open Enrollment (Use December Dates Only) | Medical | X | X | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Dental | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Short Term Disability | X | | X | | Plan Design |
| Open Enrollment (Use December Dates Only) | Long Term Disability | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Employee Optional Life | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Employee Long Term Care | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Spouse/Partner Optional Life | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Accidental Death & Dismemberment | X | | X | X | Plan Design |
| Open Enrollment (Use December Dates Only) | Health Care Flexible Spending Account | X | | X | X | Plan Design |
| Optional Life Insurance - Age Tier Change | Spouse/Partner Optional Life | | | | X | Plan Design |
| Optional Life Insurance - Age Tier Change | Employee Optional Life | | | | X | Plan Design |
| Military Leave Benefits End | Basic Life | | | X | | OARs |
| Military Leave Benefits End | Dental | | | X | | OARs |

PUBLIC EMPLOYEES' BENEFIT BOARD

PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|--|-------------------------------|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| Military Leave Benefits End | Medical | | | X | | OARs |
| Long Term Care Enrollment, Change and Cancel | Employee Long Term Care | X | | X | X | Plan Contract |
| Long Term Care Enrollment, Change and Cancel | Spouse/Partner Long Term Care | X | | X | X | Plan Contract |

PUBLIC EMPLOYEES' BENEFIT BOARD
PEBB.BENEFITS - QUALIFIED STATUS CHANGE MATRIX

*** AGENCY USE ONLY ***

| QSC | PLAN | SYSTEM RULES | | | | QSC Matrix Reference |
|---|---------------------------------------|--------------|---------|--------|--------|----------------------|
| | | Enroll | Opt Out | Cancel | Change | |
| THIRD PARTY ADMINISTRATOR USE ONLY | | | | | | |
| BHS COBRA & Retiree Termination (BHS USE ONLY) | Dental | | | X | | Self Pay Programs |
| BHS COBRA & Retiree Termination (BHS USE ONLY) | Medical | | | X | | Self Pay Programs |
| BHS Enrollment - COBRA (BHS USE ONLY) | Medical | X | | | | Self Pay Programs |
| BHS Enrollment - COBRA (BHS USE ONLY) | Dental | X | | | | Self Pay Programs |
| BHS Enrollment - COBRA (BHS USE ONLY) | Health Care Flexible Spending Account | X | | | | Self Pay Programs |
| BHS Enrollment - Retiree (BHS USE ONLY) | Medical | X | | | | Self Pay Programs |
| BHS Enrollment - Retiree (BHS USE ONLY) | Dental | X | | | | Self Pay Programs |
| BHS Enrollment - Self Pay (BHS USE ONLY) | Medical | X | | | | Self Pay Programs |
| BHS Enrollment - Self Pay (BHS USE ONLY) | Dental | X | | | | Self Pay Programs |
| BHS Payment Issues - Re-enroll (BHS USE ONLY) | Medical | X | | | | Self Pay Programs |
| BHS Payment Issues - Re-enroll (BHS USE ONLY) | Dental | X | | | | Self Pay Programs |
| BHS Payment Issues - Term (BHS USE ONLY) | Dental | | | X | | Self Pay Programs |
| BHS Payment Issues - Term (BHS USE ONLY) | Medical | | | X | | Self Pay Programs |
| BHS Second Qualifying Event (BHS USE ONLY) | Dental | X | | X | | Self Pay Programs |
| BHS Second Qualifying Event (BHS USE ONLY) | Medical | X | | X | | Self Pay Programs |
| BHS Term - Return to Active Coverage (BHS USE ONLY) | Medical | | | X | | Self Pay Programs |
| BHS Term - Return to Active Coverage (BHS USE ONLY) | Dental | | | X | | Self Pay Programs |