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QUALIFYING LIFE EVENT (QLE) NOTIFICATION

Please Complete the QLE Notification Form along with the Enrollment/Change Form and fax it to BAS Client Services at 877-332-7382

Employee Information

Last Name	First	MI	Soc. Sec. No.
Date the Qualifying Life Event Occurred	Location		

Qualifying Life Events may be submitted anywhere from 31 days before to 30 days after the date the life event occurred.

Please check the applicable box below to indicate the Qualifying Life Event that applies to the employee's situation. The Location Administrator will be responsible for obtaining and maintaining the documentation of the Qualifying Life Event.

Change in Status

- ☐ Change in legal marital status (marriage, legal separation, annulment, divorce or death of your spouse)
- ☐ Birth of a child or date of adoption of a child, legal guardianship or placement for adoption
- ☐ Death of a dependent
- ☐ Change in employment status (for employee, spouse or dependent) that affects eligibility for health insurance benefits
- ☐ Commencement of or return from an unpaid leave of absence.
- ☐ Change in dependent's eligibility(e.g. gain or loss of student status, marriage, or dependent's annual open enrollment, gain or loss of coverage)
- ☐ Judgment decree or court order requiring employee to cover dependent child.
- ☐ Judgment decree or court order requiring another individual to now provide coverage for dependent child.
- ☐ Change in eligibility for Medicaid or Medicare for employee, spouse or dependent.
- ☐ Other (Please explain)_____

Please note: An Employee cannot change or revoke any elections:

- ***Until the Next Annual Open Enrollment***
- ***Unless the employee experiences a Qualifying Life Event and the change is caused by and consistent with the Qualifying Life Event.***