

Flexible Spending Account/Dependent Daycare Account (FSA/DCA) Qualified Life Events and Required Documentation

You may request a change to your FSA or DCA election midyear if you experience one of the qualified life events listed below and your request is consistent with the life event. The change request with appropriate documentation must be received at UVA HR within 30 days of the life event. *Coverage changes are effective the first of the month following receipt of the application and documentation at UVA HR if received within 30 days of the life event.*

Marriage, divorce, or annulment

- Marriage – Copy of state-issued marriage certificate received after the date of the ceremony with recorded file date, and copy of the first and second pages of the employee's most recent federal tax return that shows the dependent listed as "Spouse" if the date of the ceremony occurred during the prior tax year or earlier. Page 2 of the tax return must include signatures or an e-file confirmation number. "Mark out" all financial information and the first five digits of all Social security numbers.
- Divorce or Annulment – Copy of portions of the court documents (i.e., Divorce Decree, Annulment) confirming:
 - Names of both parties
 - Date of the divorce
 - Judge's stamp or signature

Birth or adoption/placement for adoption

- Birth – copy of birth certificate or proof of birth letter showing employee as parent
- Adoption/placement for adoption – copy of court approved adoption order or placement order or modified birth certificate showing employee's name as parent

Employment status of spouse or child which affects eligibility to participate in their employer's health and/or dental plan

- Terminated employment - document from employer on their letterhead indicating employment termination date for the spouse or child and date their health and/or dental coverage ended
- Change in eligibility for benefits – document from employer on their letterhead indicating the date the spouse or child became eligible or ineligible for health and/or dental coverage and the date their coverage began or ended
- Commencement of or returning from an unpaid leave of absence - document from employer on their letterhead indicating date the spouse or child began or ended their unpaid leave of absence and the date their health and/or dental coverage began or ended

Loss of dependent eligibility

- Department of Social Services Order confirming the employee is no longer responsible for providing health coverage to the child
- Copy of child's birth certificate showing they have turned 26 and became ineligible to remain on health/dental coverage or turned 13 and became ineligible to be covered by Dependent Daycare Account

Cost and/or coverage changes in daycare provider (cost change must be 20% or more)

- Documents from daycare showing the changes in cost and/or coverage (include information both before and after the changes occurred so we can determine the type and % of change) and the effective date of the changes

Death of spouse or child

- Copy of death certificate or obituary

Change in worksite

- Document from employer on their letterhead conforming change in worksite from home to office or vice versa and effective date of the change