

SPS Open Enrollment ABC Frequently Asked Questions

Number	Category	Question or Concern	DBM/EBD/SPS Response
1.	Open Enrollment	Is SPS available 24/7 for employees to be able to complete Open Enrollment elections?	System maintenance is performed every Friday at 9 pm EST. Typically system maintenance is completed in 12 hours however during this period employees/retirees cannot log in to SPS to complete their Open Enrollment elections.
2.	Open Enrollment	An employee sees the Open Enrollment event in his/her My Tasks box in addition to the SPS Welcome page. Why does the employee see it in both places?	The Open Enrollment event found in the My Tasks box can be used once to submit OE elections. The SPS Welcome Page retains the Open Enrollment link throughout the OE period to ensure that employees can access the event continually as they may want to make further changes.
3.	Open Enrollment	If I have an employee who is newly hired, has a job change, or a life event during the Open Enrollment period, do they have until later than November 9th to complete Open Enrollment elections?	Employees who have a life event, new hire or job change during Open Enrollment will receive an Open Enrollment event after the life event, new hire or job change event is reviewed/finalized by EBD. The employee will have until the last day of OE window or 14 days after the life event, new hire or job change is reviewed/finalized, whichever is later to complete Open Enrollment elections.
4.	Open Enrollment	When an employee initiates a life event during the Open Enrollment period, what is the timing for the employee to get a new Open Enrollment event?	The new Open Enrollment event will be pushed to the employee after the life event has been approved by EBD.
5.	Open Enrollment	If an employee has a life event change during Open Enrollment through December 31 st , what will happen if the employee doesn't go through the OE event?	If the employee has any life event during the Open Enrollment period through December 31 st , once you complete that life event, the Open Enrollment event will re- open in your My Tasks box to be completed within 14 days. The new Open Enrollment event will reflect the changes you just made in your life event. You will need to review the new Open Enrollment event and make changes as necessary for next plan year.

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6.	Open Enrollment	Will employees hired on January 1 receive a New Hire event?	EBD discourages any employee’s hire date being 1/1. If an employee must be hired on 1/1 they will not receive a New Hire event, the OE event will act as their New Hire Event.
7.	Open Enrollment	What happens with new hires who are hired after the OE window closes?	Eligible New Hires that are hired after the OE Window will receive the New Hire Benefit Event and a separate Open Enrollment Event. The New Hire event must be completed first before the employee can act on the Open Enrollment event.
8.	Open Enrollment	What to do if an employee’s/retiree’s SPS Open Enrollment Event is showing as (On Hold)?	Open Enrollment events go “On Hold” when there is another benefit event open for the employee or retiree. Check to see if you have a current "In Progress" life event, which will need to be completed first. Once the life event is completed, the Open Enrollment event will update to reflect any election changes made in the life event, and then you can complete the Open Enrollment event. Please reach out to your Agency Benefits Coordinator in Human Resources should you need further assistance.
9.	Open Enrollment	If a new hire would like to waive benefits for this year, but wants benefits for next year, do they need to go into SPS and complete the new hire event?	The new hire should complete the New Hire event in their My Tasks box and waive elections. Then access the Open Enrollment event to elect benefits for the next plan year. If the New Hire event is not completed, the Open Enrollment events will have an “on hold” status and won’t be able to be completed.
10.	Open Enrollment	After completing Open Enrollment elections, why does the employee see a Coverage Begin Date earlier than next year for benefits?	As long as no changes are made to a plan during Open Enrollment, the coverage start date of the original enrollment will remain unchanged. However, FSA is an exception since you must re-enroll each year. The Coverage Begin Date will display the previous Coverage Begin Date if the employee elects the same FSA coverage amount for next year. In contrast, the Coverage Begin Date will be updated to the next year if they elect to increase their coverage.

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11.	Open Enrollment	Is it possible for my Agency Benefits Coordinator to make Open Enrollment elections on my behalf?	<p>Yes. An Active Employee Health Benefits Enrollment and Change Form must be filled out and signed with the benefits selections or changes already marked. Upon completing this step, you need to submit the Enrollment form and the dependent documentation to your Agency Benefits Coordinator, who will sign the form and upload them in the SPS Benefit System on your behalf. You can access the form by clicking the link below or by contacting your Human Resource department.</p> <p>https://dbm.maryland.gov/benefits/pages/default.aspx</p>
12.	Open Enrollment	If an employee transfers from one agency to another, will they get a new Open Enrollment event?	<p>The employee will only get a new Open Enrollment when transferring agencies if their benefit group/eligibility changes as a result of the transfer (e.g., an employee who transfers from a State Regular to a contractual position). The employee will get a Benefit Change - Job Change event to complete and then will get the new Open Enrollment event to complete.</p>
13.	Open Enrollment	How do I know if I received an Open Enrollment event?	<p>There are 2 ways you can see if an employee got an Open Enrollment event: 1. You can open your WorkDay My Tasks box and look for the Open Enrollment Event. 2. You can also access your Open Enrollment event in the Announcements section of your Workday account. If you do not see an Open Enrollment event, please reach out to your Agency Benefit Coordinator in HR for assistance.</p>
14.	Open Enrollment	Will a W# be included somewhere in the packet?	<p>Packets are mailed only to Retirees and COBRA participants. Everyone else should go to https://dbm.maryland.gov/pages/default.aspx to obtain a Guide to Health Benefits and additional Open Enrollment information.</p>
15.	Open Enrollment	Where can the employee find their W#?	<p>The W# can be obtain at the POSC website at: https://dbm.maryland.gov/sps/Pages/SPS_for_Employees.aspx</p>

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16.	Open Enrollment	Employee/Retiree's coverage was canceled due to non-payment of premiums. Does the employee/retiree have to re- enroll in benefits through the OE event in order to have benefit coverage effective for the next benefit year?	Yes.
17.	Open Enrollment	What happens when you click the "Save for Later" button?	The elections will not submit as an election change but will remain in the Open Enrollment event until the employee goes back in to complete it. If the employee does not go back and "Review and Submit" the changes they will not go into effect for January 1 st of the next benefits plan year and the employee elections will remain the same in the next plan year as they were in the previous benefits plan year. After the employee clicks review and submit they should also click on the "I accept" box and then click submit.
18.	Open Enrollment	What are the reasons I may need to contact my Agency Benefits Coordinator regarding my Open Enrollment event?	<ul style="list-style-type: none"> ● Your Open Enrollment event does not reflect the elections you thought you had. ● You didn't get an Open Enrollment event of the first day of OE
19.	Open Enrollment	Will there be additional time given for corrections if elections are made on the last day?	No.
20.	Open Enrollment	How many times can an employee go into SPS during Open Enrollment and make changes?	Unlimited changes can be "submitted" before Open Enrollment "closes". Although changes are unlimited during this period, we encourage employees and retirees to only make changes as necessary and make sure you review the Benefit Statement after submitting the event.
21.	Open Enrollment	Is it mandatory for employees to go in and waive benefits if they don't have benefits and do not want to enroll in benefits?	No, it's not mandatory. If the employee is not electing benefits they do not need to do anything.

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22.	Open Enrollment Dependent	Are there any issues if an employee sees their dependent spouse listed as a "Spouse with Medicare"? Why is the dependent spouse listed with Medicare?	Dependent Relationships for dependents age 65 or older will display as "Spouse with Medicare". However the dependent will still be on employee benefit (not retiree) plans. We may look into changing the relationship to remove the "with Medicare" after the Open Enrollment has closed. Please advise the employee to complete the elections.
23.	Open Enrollment Dependent	If an employee has a baby during Open Enrollment, how should they handle adding the new baby to the coverage?	The employee should complete the Birth/Adoption life event to add the baby to this year's coverage. Then complete the Open Enrollment event for next year's benefit elections. The Open Enrollment event will automatically update after the Birth/Adoption event is completed to reflect the changes made in the Birth/Adoption event.
24.	Open Enrollment Dependent	What is the best way to correct dependent information?	Active employees should bring the dependent correction to their ABC; the ABC will submit the correction through a SPS Shared Services Support ticket containing the employee's W# and supporting documentation, such as a driver's license or birth certificate for a dependent child. While the dependent correction is being processed, the employee can still submit their OE benefit elections with the dependent requiring the correction/update selected. The dependent corrections include both existing and newly added dependents.
25.	New Dependents/DVR	Can an ABC upload DVR docs for an employee?	Yes, an ABC can upload DVR documents for an employee. Only upload docs to Maintain Worker Documents, the upload category should be Benefits or Benefits Correspondence. Employees are able to take pictures of the required documentation and upload legible screenshots to the Open Enrollment event.

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26.	New Dependents/DVR	After uploading the supporting documents for my dependents in SPS/WorkDay and submitting the Open Enrollment event, EBD sent me a request for that information. Why?	If the documentation was uploaded to Personal Information>Worker Documents instead of the Open Enrollment event, the employee should leave a comment in the comment box of the event indicating, "Please see supporting documents in Personal/Worker Documents."
27.	New Dependents/DVR	What happens if an employee submits incorrect documentation for a newly added dependent?	If proper documentation is not submitted the dependent will not be added to the benefits. Please click the link below to see a list of required documents. https://dbm.maryland.gov/benefits/Documents/Dependent%20Documentation%20Requirements%209.25.23.pdf
28.	New Dependents/DVR	Can an employee add a new dependent if they don't have the Social Security Number of the dependent?	Yes, the dependent can still be enrolled. Social Security Numbers for dependents are not mandatory but should be included if available. Employees do however need to attach required documentation for the new dependent. See the new Dependent Documentation Requirements job aid at the following link for a list of acceptable documents for dependents: https://dbm.maryland.gov/benefits/Documents/Dependent%20Documentation%20Requirements%209.25.23.pdf
29.	New Dependents/DVR	Are the student fields required when adding a dependent?	No, the student fields are not required when adding a new dependent.
30.	New Dependents/DVR	Are there any changes to the eligibility rules for dependents?	No, there are no changes to the eligibility rules for dependents. However, documentation requirements for adding new or re-enrolled dependents during Open Enrollment have changed and now require documents at the time of Open Enrollment submission.

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31.	New Dependents/DVR	What happens if an employee can't get the documentation needed to add their dependents?	<p>If the required dependent(s) documentation is not uploaded by the last day of OE at 5:00pm, the newly added dependent(s) will be removed from Open Enrollment coverage. They will not have coverage effective January 1st. Please reference the Open Enrollment packet Dependent Documentation Requirements link on acceptable documentation.</p> <p>https://dbm.maryland.gov/benefits/Documents/Dependent%20Documentation%20Requirements%209.25.23.pdf</p>
32.	New Dependents/DVR	Is anything changing with the Dependent Verification Process?	<p>Throughout OE there is an ongoing DVR process, the review and verification process ensures that ineligible dependent(s) will not receive benefits coverage at the start of the new plan year if they are not eligible for benefits.</p> <p>Ensure that employees understand that supporting documentation must be submitted before 5 pm on the final day of OE, this includes documentation for Domestic Partners (SEE QUESTION 50)</p>
33.	New Dependents/DVR	If I cannot scan the dependent supporting documents, can we send hard copies into EBD?	<p>No. Do Not send hard copies of DVR documentation to EBD. Employees are able to take pictures of the required documentation and upload legible screenshots to the Open Enrollment event.</p>
34.	Open Enrollment Dependent Turning Age 25/26	Do employees who had a dependent turn age 25 or 26 during Open Enrollment have to do anything to take the dependent off the coverage?	<p>No. The Age 25/26 process to remove dependents turning age 25 or 26 from coverage automatically runs on the last day of each month (October, November and December). For example, for October, it will run on October 31st. Therefore, all coverage dependents will be removed from the Open Enrollment event when the employee accesses the event. If the employee makes a coverage change before October 31st, these coverage changes will be brought forward and no additional action is necessary by the employee.</p>

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35.	3 Dependent Turning Age 26	A dependent child/stepchild is currently listed on benefits and will turn 26 in October, November or December this year. Why is that same dependent child not listed on the OE event, when they are disabled?	If a member’s dependent child loses eligibility due to reaching age 26 prior to or on December 31 st , the dependent will not be listed on the OE event. If the member’s dependent child is permanently and totally disabled and was diagnosed with the disability prior to their 25/26 birthday they should send a e-mail to ebd.mail@maryland.gov, call EBD at 410-767-4775 or reach out to their Benefits Coordinator to request a dependent disability packet. The disability packet will have forms that will need to be completed by the member and dependent’s physician along with a list of the required documentation that will need to be submitted for review to determine if the dependent meets the disabled dependent eligibility requirements. * Please note, these steps also apply to Grandchildren/Legal Ward or other child Relatives who are turning age 25 prior to December 31st.
36.	Dependent Turning Age 26	What are some reasons why a disabled child is not eligible to re-enroll during OE?	<ul style="list-style-type: none"> ● The diagnosis was made after the disabled child’s 26th birthday /or disabled legal ward’s 25th birthday. ● The disabled child lost coverage elsewhere. ● Disabled children who were previously on SOM Benefits are not eligible to enroll in benefits 60 days after their 25/26 birthday. ● Disabled children who were never enrolled in the SOM Benefit. ● Disabled children who were once enrolled/ beyond age 25/26 years old.
37.	Open Enrollment Documentation	If changing medical plans, does an employee need to upload dependent docs again?	No documentation is needed for existing dependents that are currently enrolled as all eligible dependent(s) will show as listed after the particular election is made. Each “Tile” on Workday has instructions regarding dependent(s).

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38.	Open Enrollment Documentation	Why does a divorce decree need to be attached to the OE event when removing an "ex-spouse"?	The divorce decree is needed to document & verify that the State has been notified in a timely manner of the removal of that ineligible "ex-spouse" and to change the relationship of the spouse to "ex-spouse". We must also notify the ex-spouse of their COBRA eligibility. Please note: IF you are obligated to continue coverage for a former spouse according to the terms of your divorce agreement, your former spouse cannot remain covered as a dependent under your State health benefits. The former spouse may elect COBRA which will be his/her own account and he/she will be responsible for paying premiums directly. COBRA coverage is not subsidized by the State.
39.	Open Enrollment Documentation	Can an ABC upload documents and /or complete Open Enrollment on behalf of an employee?	Yes – if the Open Enrollment event is still “In Progress”, the ABC can upload documents and/or complete Open Enrollment on behalf of an employee. The ABC would go to the employee’s Worker History (via Job > Worker History) to find the event. Then the ABC would click the Related Actions icon next to the event and select Benefits – Enroll in Benefits. Note that when completing Open Enrollment on behalf of an employee, the ABC should attach a completed, signed enrollment form from the employee to the event. If the employee has already submitted elections the status of the event will be “Successfully Completed” and the ABC will NOT be able to upload documents or complete the Open Enrollment for the employee.

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40.	Open Enrollment Address change	If an employee's address changes after their Open Enrollment event has been initiated and they want to enroll in Kaiser, but Kaiser does not appear on their event, what should they do?	The employee should reach out to their Agency Benefits Coordinator (ABC) to confirm the effective date of the address change has been entered correctly. If it has been entered correctly, the ABC will submit a ticket on the employee's behalf to request another Open Enrollment event be generated due to the employee's address change. The New Open Enrollment event will include Kaiser as a medical plan option for the member to select. Please follow up with the ABC to ensure that the new Open Enrollment event has been generated so that you can complete your elections before the close of OE.
41.	Personal/ Contact Info Changes	An employee's address or contact information is incorrect, what do they do?	<ul style="list-style-type: none"> ● SPMS employees (employees that use SPS for Timekeeping) should change your home address on-line through the Contact Change process. Please see your HR representative for help on contact change events. ● Employees in Benefits Only agencies, please follow your agency process for changing your contact information. Please contact your ABC or HR staff for more information.
42.	Personal/ Contact Info Changes	An employee's legal name has changed, what do they do?	<ul style="list-style-type: none"> ● SPMS employees (employees that use SPS for Timekeeping) should change their legal name on-line through the Change Legal Name process. Please see your HR representative for help on name change events. ● Employee in Benefits Only agencies, please follow your agency process for changing your Legal Name. Please contact your ABC or HR staff for more information.
43.	Open Enrollment Contractual Employee	If I am a Contractual employee starting after the OE window opens, will I receive a manually generated event. Please explain?	A contractual employee hired after the start of the OE window will have an Open Enrollment Event generated once they complete and submit a New Hire Event. EBD manually generates the Event based on reporting.

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44.	Open Enrollment	As in the past, if employees aren't changing benefits, they do nothing and benefits will rollover into next year.	If you are not making any changes to your benefits including adding or removing a dependent, changing plans or choosing new coverage that you do not currently have, if you take no action your current selections will roll over to next year. However, if currently enrolled in the Healthcare or Dependent Care FSA(s) account, you must reelect during Open Enrollment to continue the FSA elections for next year. The FSA account elections do not rollover every plan year due to IRS guidelines.
45.	FSA	For FSA will there be an increase in the allowed amount?	Yes, starting January 1 st of the new benefit plan year the healthcare FSA annual amount will be \$3050.00 .
46.	FSA	Is there a list of FSA expanded eligibility items?	The IRS has not published an exhaustive list. However, Workday includes two links to the IRS website under the Healthcare and Dependent Care FSA “Tiles” so members can review before making a decision to enroll or re- enroll in this benefit.
47.	Open Enrollment Life Insurance	Why doesn't an employee see a previously added beneficiary on the Open Enrollment event?	SPS does not track or keep beneficiaries. Information on beneficiaries will need to be communicated directly to MetLife.
48.	Open Enrollment Retiree	Will Employees who retired after July 1, and before the OE window opens receive an Open Enrollment packet?	Any employee whose retiree health benefits are processed on or before September 1st will receive an Open Enrollment package in the mail. If an employee's Retiree health benefit enrollment has been processed and approved after September 1st , the member should call or send an email to ebd.mail@maryland.gov and an Open Enrollment package will be sent to them. October 26th is the final date that EBD will mail Open Enrollment packets requests to eligible retirees. Anyone contacting the Employee Benefits Division after October 26th will obtain Open Enrollment materials from the website at www.dbm.maryland.gov/benefits

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49.	Open Enrollment Retiree	When will Retiree Health Enrollment forms become available?	Enrollment forms will be available at dbm.maryland.gov/benefits along with the Guide to Health Benefits for the next plan year on October 13th.
50.	Notifications	Will employees be notified via email through Workday regarding Open Enrollment?	An employee receives an Open Enrollment event in their individual My Tasks box, accessible on their individual home page. An email notification is sent to each employee/retiree with a valid work or personal email address in the SPS Benefits System. Reminder notifications will be sent out weekly to employees and retirees based on the status of the OE event (Not Started, In Progress, Submitted, etc.) and/or where we are in the Open Enrollment cycle. Email notifications are sent if a new or updated Open Enrollment event is created for an employee or retiree are only sent one time to the My Tasks box.
51.	Domestic Partnership Eligibility	Will all domestic partners be eligible for benefits?	<p>In order to be eligible for health benefits, an employee/retiree and the employee's/retiree's domestic partner must:</p> <ul style="list-style-type: none"> ● Have lived together for at least twelve months. ● Not be married to anyone else nor have another Domestic Partner. ● Be at least 18 years of age and mentally competent to consent to contract. ● Reside together in the same residence and intend to do so indefinitely. ● Be in an exclusive mutual commitment similar to that of marriage. ● Be jointly responsible for each other's common welfare and share financial obligations <p>https://dbm.maryland.gov/benefits/Documents/Affidavit%20of%20Domestic%20Partnership.pdf</p>

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52.	Domestic Partnership Eligibility	When can domestic partners be enrolled in benefits?	Domestic partners can be added to benefits during Open Enrollment and during the plan year if there is a Qualifying Life Event.
53.	Domestic Partnership Documents	What documents do we need to provide to prove our domestic partnership for insurance eligibility?	<ul style="list-style-type: none"> ● Designation of Domestic Partner as the beneficiary for life insurance and retirement contract (counts as one document) ● Designation of Domestic Partner as primary beneficiary in employee’s or insured’s will ● Durable property and health care powers of attorney (counts as one document) ● Joint ownership of a motor vehicle, joint checking account, or joint credit account (any of these documents count as one). ● A joint lease or mortgage AND ● Affidavit of domestic partnership
54.	Domestic Partnership Documents	Do we need to provide a joint lease as evidence to show that my domestic partner and I have lived together for 12 months?	A joint lease or mortgage can serve multiple purposes. If the document is dated 12 months or more in the past, it functions as proof of shared residency and proof of the 12 month domestic partnership along with proof of shared financial obligations.
55.	Domestic Partnership Affidavit	What is the Affidavit of Domestic Partnership and where can I find the Affidavit for enrolling my domestic partner	<p>The Domestic Partnership Affidavit is a form that can be found on the following link:</p> <p>https://dbm.maryland.gov/benefits/Documents/Affidavit%20of%20Domestic%20Partnership.pdf</p>

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56.	Domestic Partnership Affidavit	How should Affidavit of Domestic Partnership be completed?	The entire affidavit needs to be filled in completely. The “declaration”, “change in domestic partnership”, and “ACKNOWLEDGEMENTS” sections must be completed. The affidavit must also be notarized by a notary public before submission to the Employee Benefits Division.
57.	Dissolution of Domestic Partnership	What is the Dissolution of Domestic Partnership and where can I find the Affidavit for enrolling my domestic partner	It is a form used to end a domestic partnership and can be found on the following link: https://dbm.maryland.gov/benefits/Documents/Dissolution%20of%20Domestic%20Partnership).pdf
58.	Dissolution of Domestic Partnership	How should the Dissolution of Domestic Partnership be completed?	The entire Dissolution of Domestic Partnership needs to be filled out completely. The “Employee/Retiree”, “Former Domestic Partner”, “Children of Former Domestic Partner (if applicable)” and the “Certification” sections must be completed. This document does not need to be notarized.
59.	Domestic Partnership Enrollment	Are domestic partnership enrollments accepted through both Workday and the paper enrollment form, and if so, do they offer distinct relationship codes and statuses on both platforms?	Yes, on the Dependent page of the paper form, a new column has been added to indicate the domestic partner relationship. If the Domestic Partner has a child, there will be a section to indicate the relationship. The same would be true for WorkDay. Paper Enrollment forms are still only to be used for corrections and retirees. Workday is still the primary way for employees to change benefit elections.
60.	Domestic Partnership Enrolling Children	Am I allowed to include my domestic partner's children in my State Benefits?	Yes, under certain circumstances. In order for the dependent(s) of a same sex domestic partner to be eligible for health benefits, the dependent child(ren) must be one of the following: <ul style="list-style-type: none"> • A biological child of the domestic partner • An adopted child of or a child placed with the domestic partner for adoption by the domestic partner • A grandchild of the domestic partner • A child under testamentary or court appointed guardianship, other than temporary guardianship of less than 12 months duration, of the domestic partner who resides permanently

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			<p>with the domestic partner and the employee or retired employee; or</p> <ul style="list-style-type: none"> • A child who is related to the domestic partner by blood or marriage and is solely supported by and permanently resides with the domestic partner and the employee or retired employee
61.	Domestic Partnership Enrollment Period	Are there any waiting periods before our coverage becomes effective?	There is no waiting period for the start of coverage. If enrollment occurs during Open Enrollment (OE), benefits become accessible on January 1st. In the case of a domestic partner losing coverage elsewhere in a previous month, their benefits will take effect on the 1st day of the subsequent month.
62.	Domestic Partnership Marriage	How do we handle insurance coverage if we decide to get legally married later?	In Workday, you'll need to initiate a marriage event to transition your status from domestic partner to spouse. Once this change is made, the imputed taxes for a domestic partner will terminate.
63.	Domestic Partnership Benefit Restrictions	Are there any limitations or restrictions on coverage for domestic partners?	<ul style="list-style-type: none"> • Participation in Flexible Spending of any kind is not permitted for the domestic partner or the children of the domestic partner. The employee can enroll in FSA for themselves. • In the event that the State Employee ends state service and chooses to enroll in COBRA, they can include the domestic partner as a dependent. However, the domestic partner is not eligible to apply for COBRA insurance independently.

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64.	Domestic Partnership Benefit Restrictions	Can a couple, who moved in together a few months ago and is now approaching their one-year anniversary, be eligible for domestic partner health benefits?	No, this doesn't meet the criteria for a qualifying event.
65.	Domestic Partnership Rates	Will our premium rates be different from those of married couples or other dependents?	No, The health insurance premiums will be the same. The tax implications will be different than a married couple. Since the employee's portion of premiums for medical, prescription and dental are received pre-tax, the value of the domestic partner's premiums will be added or "imputed" to the employee's income which will generate the tax implications. To determine if your domestic partner or your domestic partner's children qualify as your tax dependents, please refer to IRS Notice 2008-5 "Qualifying Relative for Purposes of Section 152(d)(1)."
66.	Domestic Partnership Benefit Services	What services are covered for domestic partners, such as medical, dental, vision, mental health, prescription drugs and term life insurance?	Domestic partners are eligible for all covered services subject to the various evidence of coverage documents.
67.	Domestic Partnership Other	Are there any coverage differences between same-sex and opposite-sex domestic partners?	No.
68.	Domestic Partnership Other	How are pre-existing conditions handled for domestic partners?	No. There are no pre-existing condition criteria for any Program enrollees.
69.	Domestic Partnership Other	How do we handle insurance coverage if we move out of the state of Maryland?	As long as the domestic partner remains eligible, the extensive nationwide network of State Benefits guarantees uninterrupted service.

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70.	Domestic Partnership Other	Can we continue coverage if one of us experiences a life event, such as a change in employment status?	Yes, the State Employee has the option to enroll in COBRA if they depart from state service or initiate a "Loss of Coverage" event in Workday when their partner loses coverage elsewhere
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