This checklist can help guide you through the process of adding a dependent to coverage. Please note, not all items apply to all employees.

### Applicable insurance changes

Changes must be made within 31 days of your special eligibility situation. You cannot drop coverage; you can only change or add coverage.

**Effective date of change:**
- Health, dental, vision and Dependent Life-Child: date of adoption.
- Optional Life and Dependent-Life Spouse: first day of month following request if no medical evidence needed; otherwise, first day of month following approval.

- **Enroll in a health plan or change coverage level if adding spouse and/or child.**
- **Enroll in a dental plan or change coverage level if adding spouse and/or child.**
- **Enroll in the State Vision Plan or change coverage level if adding spouse and/or child.**
- **Enroll in or increase Optional Life insurance up to $50,000 without medical evidence. More than $50,000 requires medical evidence.**
- **Enroll in or increase Dependent Life-Spouse insurance up to $10,000 or $20,000 without medical evidence. More than $20,000 requires medical evidence.**
- **Enroll in Dependent Life-Child.**
- **Enroll in or increase MoneyPlus flexible spending accounts.**
- **Enroll in or change Health Savings Account, if applicable.**
- **Update life insurance beneficiaries, if applicable.**

### Applicable retirement changes

- **Update retirement plan beneficiaries.**
- **Update State ORP beneficiaries with your service provider, if applicable.**
- **Update Deferred Comp beneficiaries with Empower Retirement, if applicable.**

### Employee to-dos

- **Review the Insurance Summary and Insurance Benefits Guide.**
- **Elect insurance coverage changes in MyBenefits and upload required documentation.**
- **Complete a MetLife Statement of Health if medical evidence is required for life insurance.**
- **Review the Designating Active Member Beneficiaries flyer and update life insurance, retirement plan, State ORP and Deferred Comp beneficiaries, if applicable.**
- **Contact PEBA for a State Employee Adoption Assistance Program application.**