

PROOF DOCUMENTS SUBMISSION REQUIREMENTS

NEWLY BENEFITS-ELIGIBLE

| | | | | | |
|---|----------------|---------------|---------------|--|-------------------------|
| If enrolling dependent(s) for Medical only | Medical | Dental | Vision | Proof Document(s) to: | |
| | Medical | Dental | Vision | Alight Solutions Dependent Verification Center | UNM Benefits |
| | ✓ | | | x | |

| | | | | | |
|--|----------------|---------------|---------------|--|-------------------------|
| If enrolling dependent(s) for Dental and/or Vision only | Medical | Dental | Vision | Proof Document(s) to: | |
| | Medical | Dental | Vision | Alight Solutions Dependent Verification Center | UNM Benefits |
| | | ✓ | ✓ | | x |

| | | | | | |
|--|----------------|---------------|---------------|--|-------------------------|
| If enrolling dependent(s) in Medical, Dental & Vision plans | Medical | Dental | Vision | Proof Document(s) to: | |
| | Medical | Dental | Vision | Alight Solutions Dependent Verification Center | UNM Benefits |
| | ✓ | ✓ | ✓ | x | |

You must submit your Medical/Dental/Vision Election Form to the HR Service Center within 60 calendar days of when you become benefits-eligible. Coverage is effective the first day of the month after benefits elections have been received and approved by the Benefits Department.

For detailed information and examples of proof documents, please visit the *Eligibility* webpage: <https://hr.unm.edu/benefits/eligibility>

QUALIFYING CHANGE IN STATUS EVENTS

| | | | | | |
|---|----------------|---------------|---------------|--|--|
| If enrolling dependent(s) for Medical only | Medical | Dental | Vision | Proof Document(s) to: | |
| | Medical | Dental | Vision | Alight Solutions Dependent Verification Center | UNM Benefits |
| | ✓ | | | x Proof documents to validate dependent eligibility | x Supporting proof documents to validate the event (see below) |

| | | | | | |
|--|----------------|---------------|---------------|--|---|
| If enrolling dependent(s) for Dental and/or Vision only | Medical | Dental | Vision | Proof Document(s) to: | |
| | Medical | Dental | Vision | Alight Solutions Dependent Verification Center | UNM Benefits |
| | | ✓ | ✓ | | x Proof documents to validate dependent eligibility AND Supporting proof documents to validate the event (see below) |

| | | | | | |
|--|--|--|--|--|--|
| For ALL Qualifying Change in Status Events | Proof Document(s) to: | | | | |
| | UNM Benefits | | | | |
| | x Supporting proof documents to <i>validate the event</i> For examples of required proof documentation, please visit: https://hr.unm.edu/benefits/qualifying-change-in-status | | | | |

You must submit Qualifying Change in Status election changes within 60 calendar days of the event and submit applicable supporting documentation to the HR Service Center. Changes are effective the first day of the month after Benefits elections have been received and approved by the Benefits Department.

For detailed information, other requirements and required proof documentation, please visit the Qualifying Change in Status webpage: <https://hr.unm.edu/benefits/qualifying-change-in-status>