

Employee Self Service: Life Event/Special Eligibility eForm

How to navigate to USC employment data in HCM: This job aid outlines how an employee can submit, update, and view a Life Event/Special Eligibility eForm through Employee Self Service.

Navigation: Employee Self Service > Life Event/Special Eligibility

NOTE: If you have the **Life Event/Special Eligibility** tile saved as a favorite, you can navigate directly there using your favorites and skip the basic navigation steps below.

Life Event/Special Eligibility eForm: This eForm is designed to gather information related to enrollment changes and supporting documentation for life events (special eligibility situations) *that cannot be initiated through* **MyBenefits**, PEBA's online enrollment system.

NOTE: Acceptance and implementation of the changes requested is at the sole discretion of the Public Employee Benefit Authority (PEBA) as they are the state agency responsible for the administration and management of the employee insurance program and state's retirement system for South Carolina's public workforce. The changes and the request is not applied until approved by PEBA, and some changes may require action from the employee/subscriber online and you may receive an email from noreply@peba.sc.gov regarding these actions.

Take the following steps to submit a Life Event/Special Eligibility eForm.

1) Begin at the Employee Self Service Landing Page. Under the **My Self-Service** section, locate and click the **Life Event/Special Eligibility** tile.



2) You will be taken to the Life Event/Special Eligibility landing page. On this page, you will see information to help you determine if this tile should be used for your enrollment change or if you need to navigate to the MyBenefits website to initiate your change. The following steps will outline how to submit a Life Event/Special Eligibility eForm. To skip directly to steps that outline how to update a Life Event eForm, click here. To skip directly to steps that outline how to view a previously submitted Life Event Form, click here.

4) To begin your Life Event/Special Eligibility eForm, click Create Life Event Form.

\leftarrow O \heartsuit	Q Search in Menu
Life Event/Special Eligibility	
TINSTRUCTIONS	Using MyBenefits The easiest way to change your insurance coverage for certain life events (Special Eligibility Situations) is through MyBenefits, PEBAs online enrollment system. MyBenefits will navigate you through the steps for enrolling or dropping coverage for yourself and/or eligible family members. If your specific life event is listed below, navigate to MyBenefits to initiate
🔚 Create Life Event Form	the change: • Adding a Newborn
TUpdate Life Event Form	Adoption Divorce Marriage
Tiew Life Event Form	Change/Update Contact Information Update Beneficiaries
	For more information on Life Events (Special Eligibility Situations), refer to PEBA Life events S.C. PEBA.
	Using this eform This eform is designed to gather information related to enrollment changes and supporting documentation for life events (special eligibility situations) that <u>cannot</u> be initiated through MyBenefits, PEBAs online enrollment system.
	These life events include:
	Gain of State Benefits-Dependent Gain of Non-State Benefits Loss of State Benefits-Dependent

3) There are seven Benefit Life Event (special eligibility) options that you can choose from. For each event choice, you will need to list the effective date that the change occurred and a brief description of the event, as well as any relevant details. The eForm number is located at the top right corner. This number is used to locate your form after you have saved or submitted it.

+ : Special Elig	jibility Events	Н	ighlights Enabled:		Form ID 829138 (NEW) Current Values → →
Empl ID	179800		Date of Birth		
First Name			Last Name		
Address Line 1			Address Line 2		
City			State		
Postal Code			Telephone		
USC Email			Personal Email		
SSN					
Userid			Empl Record	U	
*Benefit Life Event (Spl Eligibility)	~				
*Effective Date of Change			31 Day Notice Date		
*Details of Change: (Provide a brief description of the event and any relevant details)		<i>t</i> i			

NOTE: If you see any discrepancies in your employee profile displayed at the top of the form, report them to your campus' Benefits Office immediately.

4) Click the **Benefit Life Event** drop down menu to select your special eligibility situation. Descriptions of the special eligibility events will follow the screenshot below.

*Benefit Life Event (Spl Eligibility)	
*Effective Date of Change	Custody
Details of Changes (Drovide a brief	Separated from Spouse
Details of Change: (Provide a brief ption of the event and any relevant	Gain State Benefits
details)	Gain of non-state Benefits
	Loss of State Benefits
nt Benefits	Loss of non-state Benefits
wour current henefits before completin	Dependent Deceased

Custody

If you gained custody or guardianship of a child, and you are not already enrolled in PEBA's health coverage, you may add yourself, spouse and/or child in health, dental or vision coverage within 31 days. If you are already enrolled in health and you are adding your spouse or child with new legal custody to health coverage, you may change plans, e.g., change savings health plan to standard health plan. You may add Dependent Life-Child for eligible children (a foster child is not eligible for Dependent Life coverage). You cannot drop any coverage or make modifications to Optional Life, Dependent Life Spouse and SLTD coverages.

The Effective Date of Change is the date of custody or guardianship.

Separated from Spouse

Separation is not recognized as a legal status in South Carolina, and therefore is not a special eligibility event in which you can make changes to coverage. However, if you have a court order from a jurisdiction that recognizes legal separation as a legal status, PEBA may honor that order and allow you to drop health, dental, vision and dependent life spouse coverage within 31 days of the court order. This is an all-or-nothing election change for all the benefits; you may not pick and choose among the options. You may also enroll, cancel or increase Optional Life Insurance.

<u>The Effective Date of Change is the date of the court order.</u> Coverage changes are effective the first of the month following date of notification.

NOTE: Reconciliation is not a special eligibility situation.

Gain State Benefits

If your spouse gains eligibility as an employee of a PEBA covered employer, or as a covered retiree, you must remove them from coverage. Spouses cannot cover the same child(ren) under the same benefit (health, dental, vision, Dependent Life). If your spouse is electing single coverage, the child(ren) may remain on your coverage until they turn age 26. If your spouse is covering the child(ren), they must be removed from your coverage, too.

The Effective Date of Change is the date the spouse's employee coverage begins which may be the first of the month following gain of coverage or first of the month, if coverage is gained on the first of month.

NOTE: A covered dependent child who gains eligibility for other employer-sponsored group health coverage as an employee or as a spouse may remain on your coverage until they turn age 26. However, the child cannot be covered as a child on one insurance program, such as health, and then enroll for coverage as an employee or spouse on another, such as vision.

Gain of non-state Benefits

If health, dental or vision coverage is gained, you may remove yourself, spouse and/or child(ren) from that same coverage within 31 days of the special eligibility situation. For example, if dental coverage was not gained, it cannot be dropped.

The Effective Date of Change is the date coverage was gained.

Loss of State Benefits

If your spouse lost coverage as an employee of a PEBA covered employer, and is not eligible to enroll in retiree coverage, they may be added as a dependent within 31 days of the special eligibility situation. Dependent children, under age 26, may also be added, if State coverage was lost.

The Effective Date of Change is the date coverage was lost.

Loss of non-state Benefits

You and/or eligible family members lose coverage. If you are not already enrolled in PEBA's health coverage, you may add yourself, spouse and/or children within 31 days of the loss of coverage event. If you are already enrolled in PEBA's health coverage, only dependents that lost coverage may be added at this time. If dependents are added to health coverage, you may enroll or change plans, e.g., change savings health plan to standard health plan, enroll in dental and enroll in vision. You may not enroll or change optional life insurance at this time, however, if your spouse lost other life insurance coverage, you may be able to enroll in dependent life spouse with medical evidence of good health.

The Effective Date of Change is the date coverage was lost.

Dependent Deceased

A covered dependent must be dropped from all coverage within 31 days of the date of death. You may also decrease or drop your Optional Life coverage within 31 days of your dependent's death.

The Effective Date of Change is the date of death for purposes of this form, however, coverage changes are effective the day after death for health, dependent life spouse and dependent life child changes. Coverage for optional life insurance, if changed, is effective on the date of death.

- **NOTE:** If you experience multiple life events, a separate life event eForm should be completed for each.
- 5) Next, enter the effective date of the change and a brief description of the event and any relevant details. If you fail to make changes within 31 days of the special eligibility situation, you must wait until the next open enrollment period or another special eligibility situation. Based on the life event, you may be able to add dental coverage outside of the open enrollment period in odd numbered years. Information relevant to your special event will populate below in the Applicable Enrollment Changes section.

*Benefit Life Event (Spl Eligibility)	Custody 🗸	
*Effective Date of Change	05/01/2025	31 Day Notice Date
*Details of Change: (Provide a brief description of the event and any relevant details)	Gained custody of my nephew on 5/1/2025.	
Applicable Enrollment Changes:		
	f a child, and you are not already enrolled in PEBA's health coverage, you may Ith, dental or vision coverage within 31 days. If you are already enrolled in health	
and adding your spouse, or the child wi	th new legal custody, to health coverage, you may change plans, e.g., change	
eligible for Dependent Life coverage).	olan. You may add Dependent Life-Child for eligible children (a foster child is not	
The Effective Date of Change is the date	e of custody or guardianship.	

6) Click on the **Benefits Summary** link to review your current benefits before completing the form.



7) To complete your Life Event/Special Eligibility eForm, you must complete and upload a Notice of Election and Certification Regarding Tobacco Use to this eForm. Hyperlinks to these forms are provided along with the link for the life event/special eligibility situations quick reference quide.

PEBA Enrollment Documents **Action Required**
To make a change, complete a Notice of Election
You must also complete a Certification Regarding Tobacco Use when enrolling in health coverage and whenever the status of tobacco use changes for you or a dependent covered under your health insurance.
For your convenience, you can complete the form(s) electronically.
Important: PEBA requires an original handwritten signature on the form.
Complete the form(s), print the document(s), sign/date with a pen and then upload in the File Attachments section below.
Link for special eligibility situations quick reference guide.

8) Additionally, you must certify that the information is correct by selecting authorized in the signature box. Click the **Signature** drop down menu and select **Authorized** to attest that the form is true and accurate to the best of your knowledge.

Certification				
I certify that the information provide I understand that providing false info			nowledge.	
*Signature (I hereby authorized these changes)	~			
File Attachments				
				1 row
Attachment Required	Upload	Description ↑↓	File Name ↑↓	Delete
1	Upload	PEBA Enrollment Documents		Delete
Add				

9) Next, you will need to upload applicable enrollment documents. To the PEBA Enrollment Documents line, you will upload your completed Notice of Election (NOE). The second line will automatically populate with the required documentation that corresponds to your special eligibility selection in Step 4. To upload your file, select Upload.

F	ile Attachments						
	Attachment Required	Upload	Description ↑↓	Instructions 14	File Name	ţţ	2 rows Delete
	1 🌔	Upload	PEBA Enrollment Documents	;			Delete
	2	Upload	Custody	Attach a court order or other legal documentation from a placement agency or S.C. DSS granting custody or guardianship of the child/foster child. The documentation must verify you have guardianship responsibility for the child and not merely financial responsibility. To also enroll a spouse, a marriage license or Page 1 of the employee's latest federal tax return is required.			Delete
[Add						

NOTE: Click **here** to jump to see more information regarding the NOE form.

10) Next, click **My Device**. A system window will open which will allow you to select your document. Locate the file, and click **Open**.

Fi	ile Attachment ×
Choose From	
My Device	

11) Next, click **Upload**. Once your file has been uploaded, you can click **Done** in the top right corner.



12) The final attachment required is the Certification Regarding Tobacco Use. To add this additional document, select the Add button. Next, use the dropdown menu to select the Tobacco Certification Form description. Finally, follow the same instructions in the previous steps to upload your form.

File Attachments					
Attachment		Custody			3 rows
Uploaded	View	Gain State Benefits	Instructions 1	File Name ↑↓	Replace
		Gain of Non-State Benefits			
1 🐼	View	Loss of Non-State Benefits		2025_active_noe.pdf	Replace
		Loss of State Benefits			
			Attach a court order or other legal documentation from a placement agency or S.C. DSS granting custody or guardianship of the		
2 🗸	View		child/foster child. The documentation must verify you have guardianship responsibility for the child and not merely financial	Court_Order_Document.pdf	Replace
		Separated from Spouse	responsibility. To also enroll a spouse, a marriage license or Page 1 of the employee's latest federal tax return is required.		
		Tobacco Certification Form			
3	Upload	~			Delete
Add					

13) If needed, comments can be added by clicking the **Comments** drop down menu. If you need to save your work and return later, you can click the **Save** button. Clicking Save will take you back to the Life Event/Special Eligibility Tile. To complete your form after saving, you will need to select the **Update Life Event Form** option on the Life Event/Special Eligibility tile.

When you are ready to submit your form, you can click the **Submit** button.

~ Comments
Save

- **NOTE**: Once a form has been submitted, it cannot be altered.
- 14) Once you have submitted your Life Event/Special Eligibility form, you will be taken to the results page which shows the form has been submitted. To view the approval route, click **View Approval Route**.

Form	n Result						
	Update : Results					Form ID 829157 (Pending)
Th	u have successfully submitted your eForm. e eForm has been routed to the next approval step. litiple approvers.						
	ew Approval Route						2 rows
	Current Date Time	Step Title	User ID	Description	Form Action	Time Elapsed	
1	05/29/2025 9:56:26AM	Saved	1000	The regard	Save		
2	05/29/2025 10:27:10AM	Initiated	1000	the read	Submit	30 minutes	
R	efresh Log						

15) You can view individual approvers by clicking the **Multiple Approvers** box. When you have finished reviewing the approval route, click **Done**.

Cancel View Approval Route	Dor
Review/Edit Approvers	
Basic Stage	
✓ G3FORM_ID=829157	Pending
Basic Path	
☑ Pending	
Multiple Approvers SC_SPEC_ELIG_B - Original Oprid	

16) You have successfully updated a Life Event/Special Eligibility eForm!

Special Note about Notice of Election (NOE):

Some transactions cannot be completed online and require a Notice of Election (NOE) form. The NOE is a legal document. If the form is not completed properly, PEBA will reject it. The NOE is three pages long with eight sections. The first two pages must be completed. The third page provides the instructions for each section of the form.

Please be aware of the following information while completing your NOE:

- 1. When selecting coverage:
 - a. Fill out the form completely and write clearly. Alterations (such as mark-throughs or white-out) in the "Coverage" section are not allowed.
 - b. To enroll, select the coverage and select the coverage level.
 - c. To refuse or cancel coverage, select Refuse.
 - d. Be sure to review the form for accuracy, sign it, and provide it to your campus Benefits Office with copies of the required documents.
- 2. PEBA will not accept electronic signatures. PEBA requires a "live" signature.
- 3. Must list a primary beneficiary when enrolling in a health plan and/or Optional Life.

You may complete the form electronically, print the form and sign it with a live/wet signature, and then scan it back to be uploaded with your Life Event/Special Eligibility eForm.

For detailed instructions on completing the NOE, reach out to your campus' Benefits Office or review the presentation linked **here**.

Take the following steps to update a Life Event/Special Eligibility eForm.

1) Begin at the Employee Self Service Landing Page. Under the **My Self-Service** section, locate and click the **Life Event/Special Eligibility** tile.



2) You will be taken to the Life Event/Special Eligibility landing page. To update a Life Event/Special Eligibility eForm that has been *Saved* or *Recycled* back to you for updates, click Update Life Event Form.

$\leftarrow \mid \odot \ \ \heartsuit$	Q. Search in Menu
Life Event/Special Eligibility	
The Instructions	Using MyBenefits The easiest way to change your insurance coverage for certain life events (Special Eligibility Situations) is through MyBenefits, PEBAs online enrollment system. MyBenefits will navigate you through the steps for enrolling or dropping coverage for yourself and/or eligible family members. If your specific life event is listed below, navigate to MyBenefits to initiate
Create Life Event Form	the change: • Adding a Newborn
T Update Life Event Form	Adoption Divorce Marriage
Tiew Life Event Form	Change/Update Contact Information Update Beneficiaries
	For more information on Life Events (Special Eligibility Situations), refer to PEBA Life events S.C. PEBA.
	Using this eform This eform is designed to gather information related to enrollment changes and supporting documentation for life events (special eligibility situations) that <u>cannot</u> be initiated through MyBenefits, PEBAs online enrollment system.
	These life events include:
	Gain of State Benefits-Dependent Gain of Non-State Benefits Loss of State Benefits-Dependent

3) A list of Life event/Special Eligibility eForms that you have saved will appear. First, locate the form that you wish to update. Next, click the related actions menu. Select Update Life Event Form.

Life Event/Special Eligibility							
T Instructions							٢
T Create Life Event Form							2 rows
📊 Update Life Event Form	Form ID 11 A	hs Form Status ↑↓ ID ↑↓	Display Name †↓	Effective Date of Change $\uparrow\downarrow$	Reason for Change $\uparrow \downarrow$	Details of Change ↑↓	Signature ↑↓
View Life Event Form	829157	Actions × 02	The Name	05/01/2025	Custody	Gained custody of my nephew on 5/1/2025.	Authorized

4) Review all of the details on your form and ensure that any necessary attachments have been uploaded.

$\leftarrow \odot \odot \odot $		Q Search in Menu		
Form Page			Un la climit chi an	
Update : Special Eligibi	lity Events			Form ID 829157 (Saved)
		High	lights Enabled:	Current Values 🗲 💛
Empl ID	1718445	Date of Birth		
First Name	the later	Last Name	Traph 1	
Address Line 1	Product College	Address Line 2		
City	Terroration (Contraction)	State		
Postal Code	11000	Telephone	10000	
USC Email	control in part of	Personal Email	and the second s	
SSN	1071021400			
Userid	and a second sec	Empl Record	-	
*Benefit Life Event (Spl Eligibility)	Custody 🗸			
*Effective Date of Change	05/01/2025	31 Day Notice Date	1	

5) You will see options to Search, Save, Withdraw, and Submit your form. If you click **Withdraw**, your form will be withdrawn and a results screen will confirm that the form has been withdrawn. Clicking **Submit** will submit your form.

File Attach	nments					
						3 rows
Attachr Upload		View	Description 1↓	Instructions 1	File Name ↑↓	Replace
1 📀		View	PEBA Enrollment Documents		2025_active_noe.pdf	Replace
2 📀		View	Custody	Attach a court order or other legal documentation from a placement agency or S.C. DSS granting custody or guardianship of the child/foster child. The documentation must verify you have guardianship responsibility for the child and not merely financial responsibility. To also enroll a spouse, a marriage license or Page 1 of the employee's latest federal tax return is required.	Court_Order_Document.pdf	Replace
3 🥑		View	Tobacco Certification Fc 🗸		Tobacco_Use.pdf	Delete
Add						
> Comme	nts					
Search	Save	Wi	thdraw Submit			

NOTE: The search button will allow you to search for Life Event/Special Eligibility forms that you have saved. Using the back button will log you out of PeopleSoft. We recommend that you use the **View Life Event Form** tab on the landing page to view eForms instead.

	Ð		Q Search in Menu			ÛÛ:
Search						
топпто	Degino triat +	023131				
Form Status	is Equal To 🗸 🗸			~		
Form Туре	is Equal To 🗸 🗸 🗸			Q		
Empl ID	Begins With 🗸					
Display Name	Begins With 🗸					
Last Name	is Equal To 🗸 🗸 🗸			Q		
First Name	is Equal To 🗸 🗸 🗸			Q		
Search Clear	Save Search					
						1 row
Form ID ↑↓	Form Status	↑↓ Empl ID ↑↓	Last Name ↑↓	First Name ↑↓	Original Operator 1	Last Date ↑↓
1 829157	Saved	171000	inget.	-	-	2025-05-29

6) Once you have submitted your Life Event/Special Eligibility form, you will be taken to the results page that shows the form has been submitted. To view the approval route, click **View Approval Route**.

Form Result							
Update : Results					Form ID 829157 (Pending		
You have successfully submitted your eForm.							
The eForm has been routed to the next approval step.							
multiple approvers.							
View Approval Route Transaction / Signature Log							
Current Date Time	Step Title	User ID	Description	Form Action	Time Elapsed		
1 05/29/2025 9:56:26AM	Saved		The legal	Save			
2 05/29/2025 10:27:10AM	Initiated		The regard	Submit	30 minutes		
Refresh Log							

7) You can view individual approvers by clicking the **Multiple Approvers** box. When you have finished reviewing the approval route, click **Done**.

Cancel View Approval Route	Done
Review/Edit Approvers	
Basic Stage	
~G3FORM_ID=829157	Pending
Basic Path Image: Pending Multiple Approvers SC_SPEC_ELIG_B - Original Oprid	

8) You have successfully updated a Life Event/Special Eligibility eForm!

Take the following steps to view a Life Event/Special Eligibility eForm.

1) Begin at the Employee Self Service Landing Page. Under the **My Self-Service** section, locate and click the **Life Event/Special Eligibility** tile.



2) You will be taken to the Life Event/Special Eligibility landing page. To view a Life Event/Special Eligibility eForm that you have submitted, click **View Life Event Form**.

\leftarrow \odot \heartsuit	Q Search in Menu
Life Event/Special Eligibility	
T Instructions	Using MyBenefits The easiest way to change your insurance coverage for certain life events (Special Eligibility Situations) is through MyBenefits, PEBAs online enrollment system. MyBenefits will navigate you through the steps for enrolling or dropping coverage for yourself and/or eligible family members. If your specific life event is listed below, navigate to MyBenefits to initiate
Create Life Event Form	the change: • Adding a Newborn
T Update Life Event Form	Adoption Divorce Marriage
Tiew Life Event Form	Change/Update Contact Information Update Beneficiaries
	For more information on Life Events (Special Eligibility Situations), refer to PEBA Life events S.C. PEBA.
	Using this eform This eform is designed to gather information related to enrollment changes and supporting documentation for life events (special eligibility situations) that <u>cannot</u> be initiated through MyBenefits, PEBAs online enrollment system.
	These life events include:
	Gain of State Benefits-Dependent Gain of Non-State Benefits Loss of State Benefits-Dependent

3) All of the Life Event/Special Eligibility forms that you have submitted will populate on this page.

$\leftarrow \mid \odot \circ$			Q Search in	Menu				Û	÷	Ø
Life Event/Special Eligibility										
T Instructions										٢
T Create Life Event Form									1	row
🛅 Update Life Event Form	Form ID 1	Actions	Form Status 1	ID ↑↓	Name ↑↓	Effective Date of Change 1	Sign	ature ↑↓		
To View Life Event Form	829157		Pending	111000	The real of	05/01/2025	Autho	orized		

4) To view a form that you have submitted locate the form. Next, click the related actions menu, and select **View Life Event Form**.

Form ID ↑↓	Actions	Form Status ↑↓	ID ↑↓	Name ↑↓
829157 🛛		Actions ×	-	The logal
		/iew Life Event Form		

5) Your previously submitted form will be displayed. All fields will be locked and no edits can be made. You can navigate to the transaction log and approval route by clicking the **Next** button at the bottom of the form.

Form Page								
Q View : Special Eligibility	/ Events	Highl	ights Enabled:	Form ID 829157 (Pending) Current Values (← →				
Empl ID		Date of Birth						
First Name		Last Name						
Address Line 1		Address Line 2						
City		State						
-								
Postal Code		Telephone						
USC Email	Construction of the second secon	Personal Email	and the second second second					
SSN Userid	ALCONOMIC AND A REPORT OF A REPORT	Empl Record						
Benefit Life Event (Spl Eligibility)	Custody							
Effective Date of Change	05/01/2025	31 Day Notice Date						
Details of Change: (Provide a brief description of the event and any	Gained custody of my nephew on 5/1/2025.							

You have successfully learned to submit, update, and view a Life Event/Special Eligibility eForm!