



Employee Self Service Job Aids

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

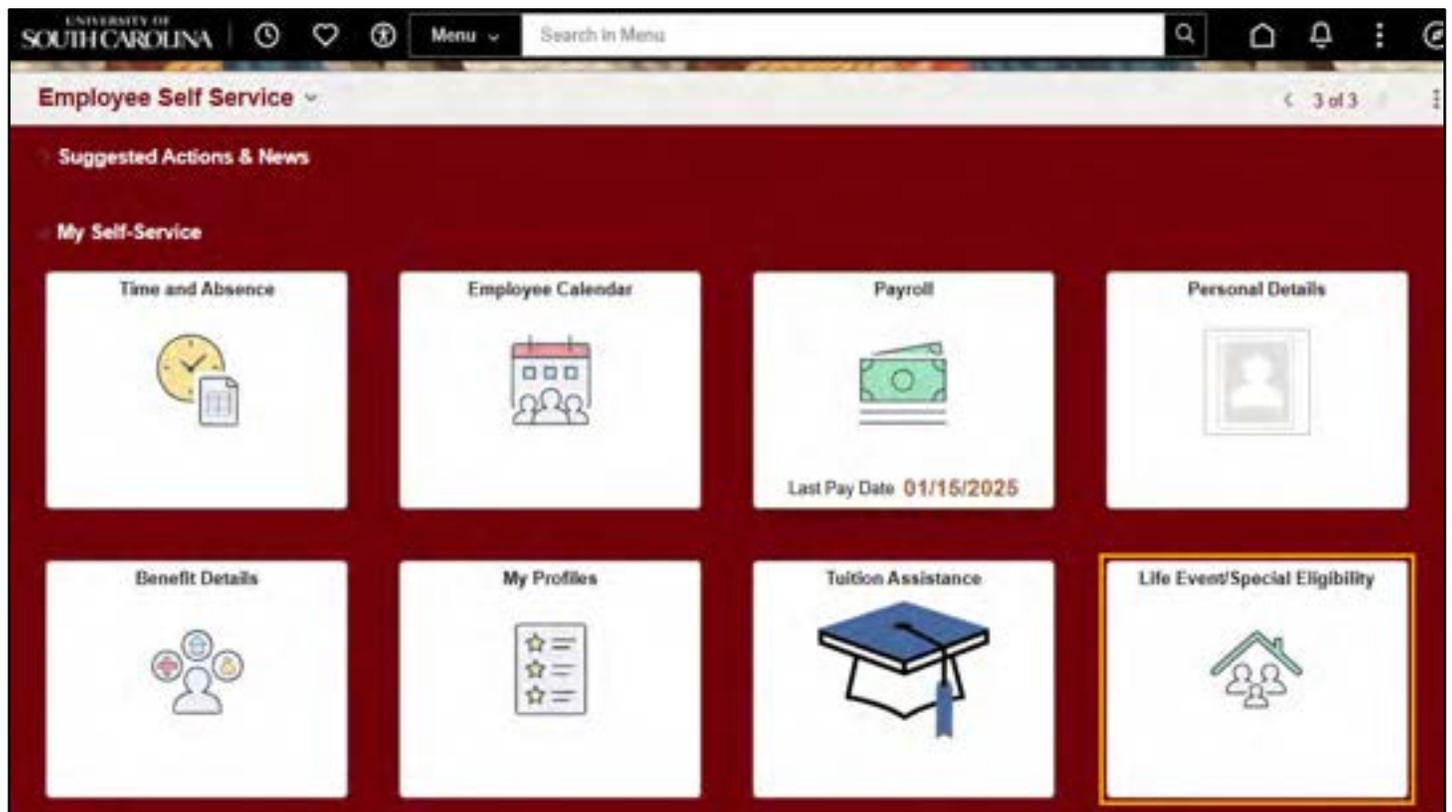
NOTE: If you have the **Life Event/Special Eligibility** tile saved as a favorite, you can navigate directly there using your favorites and skip the basic navigation steps below.

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.



Employee Self Service Job Aids: Life Event/Special Eligibility

- 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**.

Life Event/Special Eligibility

Instructions

- Create Life Event Form
- Update Life Event Form
- View Life Event Form

Using MyBenefits
The easiest way to change your insurance coverage for certain life events (Special Eligibility Situations) is through MyBenefits, PESA's 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 the change.

- Adding a Newborn
- Adoption
- Divorce
- Marriage
- Change/Update Contact Information
- Update Beneficiaries

For more information on Life Events (Special Eligibility Situations), refer to PESA Life events | S.C. PESA.

Using this 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, PESA's 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 Eligibility Events Form ID 829138 (NEW)

Highlights Enabled: Current Values

Empl ID 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

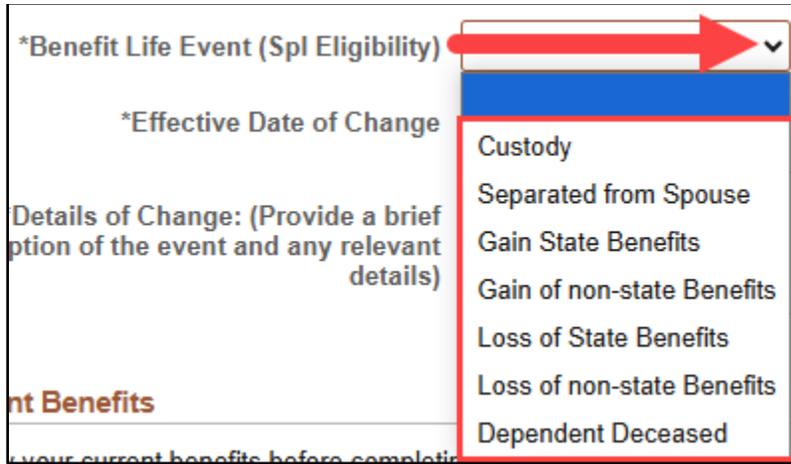
*Benefit Life Event (Spi Eligibility)

*Effective Date of Change 31 Day Notice Date

*Details of Change: (Provide a brief description of the event and any relevant details)

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.



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.

The Effective Date of Change is the date of the court order. 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

*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:
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 adding your spouse, or the 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).
The Effective Date of Change is the date of custody or guardianship.

31 Day Notice Date

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

Current Benefits

Review your current benefits before completing form.

[Benefits Summary](#)

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 guide.

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 provided on this form is true and accurate to the best of my knowledge. I understand that providing false information may result in the denial of my application.

*Signature (I hereby authorized these changes)

Authorized

File Attachments

Attachment Required	Upload	Description	File Name	Delete
1	<input type="button" value="Upload"/>	PEBA Enrollment Documents		<input type="button" value="Delete"/>

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**.

File Attachments

Attachment Required	Upload	Description	Instructions	File Name	Delete
1	<input type="button" value="Upload"/>	PEBA Enrollment Documents			<input type="button" value="Delete"/>
2	<input type="button" value="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/fooster 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.		<input type="button" value="Delete"/>

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**.

File Attachment

Choose From

My Device

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

My Device

2025_active_noe.pdf
File Size: 220KB

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.



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.

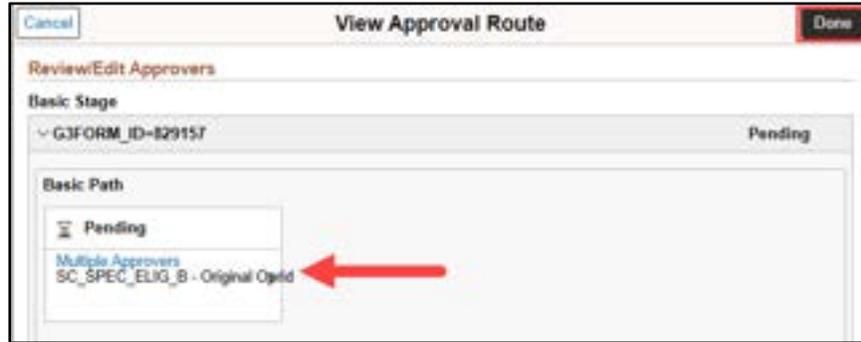


NOTE: Once a form has been submitted, it cannot be altered.

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**.



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



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:

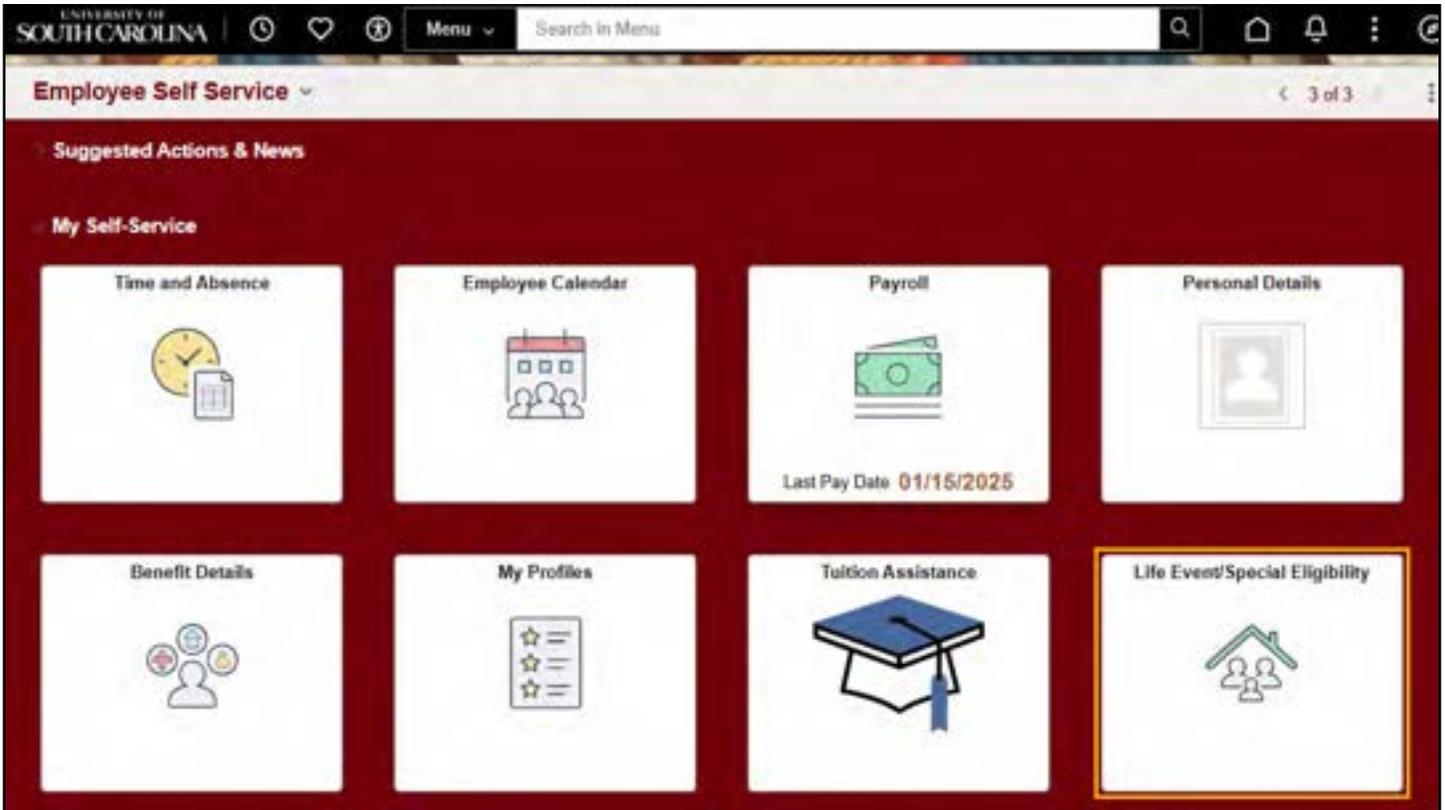
1. When selecting coverage:
 - a. Fill out the form completely and write clearly. Alterations (such as mark-throughs or white-out) in the “Coverage” section are not allowed.
 - b. To enroll, select the coverage and select the coverage level.
 - c. To refuse or cancel coverage, select Refuse.
 - d. Be 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.

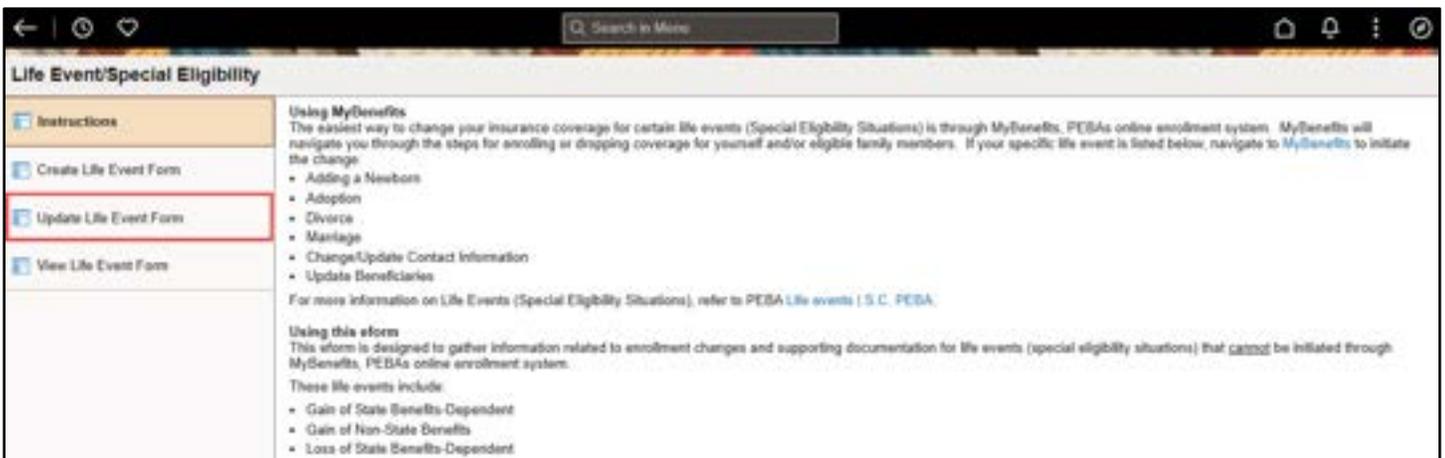
For detailed instructions on completing the NOE, reach out to your campus’ Benefits Office or review the presentation linked **here**.

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.

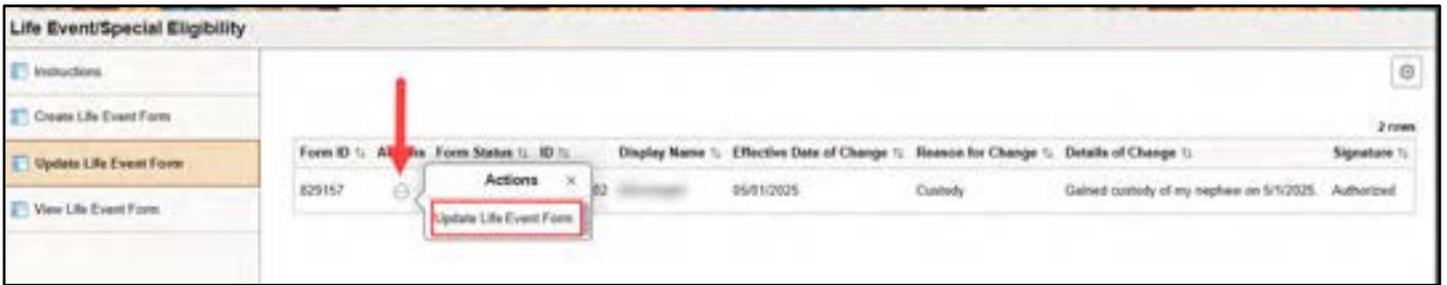


- 2) You will be taken to the Life Event/Special Eligibility landing page. To update a Life Event/Special Eligibility eForm that you have saved but which has not been submitted, click **Update Life Event Form**.



Employee Self Service Job Aids: Life Event/Special Eligibility

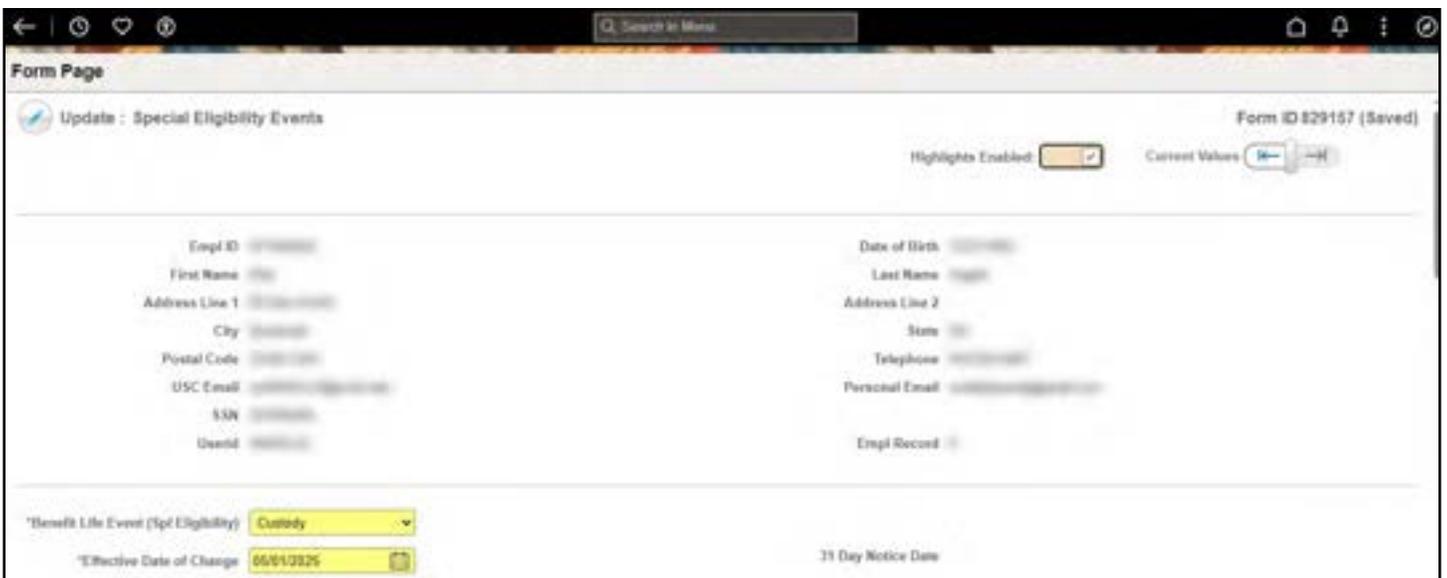
- 3) A list of Life event/Special Eligibility eForms that you have saved will appear. First, locate the form that you wish to update. Next, click the related actions menu. Select **Update Life Event Form**.



The screenshot shows a table of saved forms. The first row is highlighted, and its 'Actions' menu is open, showing the 'Update Life Event Form' option.

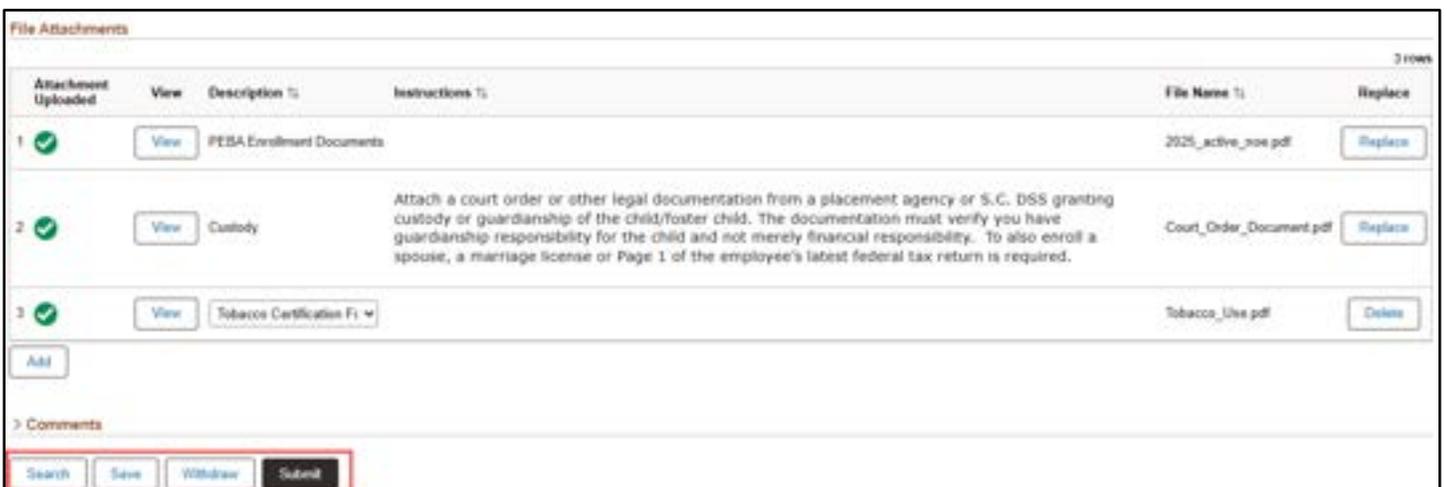
Form ID	Actions	Form Status	ID	Display Name	Effective Date of Change	Reason for Change	Details of Change	Signature
829157	Update Life Event Form				05/01/2025	Custody	Gained custody of my nephew on 5/1/2025.	Authorized

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



The screenshot shows the 'Form Page' for 'Special Eligibility Events'. It includes a search bar, navigation icons, and a 'Form ID 829157 (Saved)' label. The form contains various fields for personal information and a dropdown menu for 'Benefit Life Event (Spl Eligibility)' set to 'Custody'. The 'Effective Date of Change' is 05/01/2025.

- 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.



The screenshot shows the 'File Attachments' section with a table of uploaded files. The 'Submit' button is highlighted with a red box.

Attachment Uploaded	View	Description	Instructions	File Name	Replace
1	View	PEBA Enrollment Documents		2025_active_rose.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 Form		Tobacco_Use.pdf	Delete

Employee Self Service Job Aids: Life Event/Special Eligibility

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.

The screenshot shows a search interface with the following fields and options:

- Form Status: is Equal To
- Form Type: is Equal To
- Empl ID: Begins With
- Display Name: Begins With
- Last Name: is Equal To
- First Name: is Equal To

Buttons: Search, Clear, Save Search

Form ID %	Form Status %	Empl ID %	Last Name %	First Name %	Original Operator %	Last Date %
1 829157	Saved					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 9:56:28AM	Saved			Save	
2	05/29/2025 10:27:16AM	Initiated			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**.

View Approval Route (Buttons: Cancel, Done)

Review/Edit Approvers

Basic Stage
G3FORM_ID=829157 Pending

Basic Path

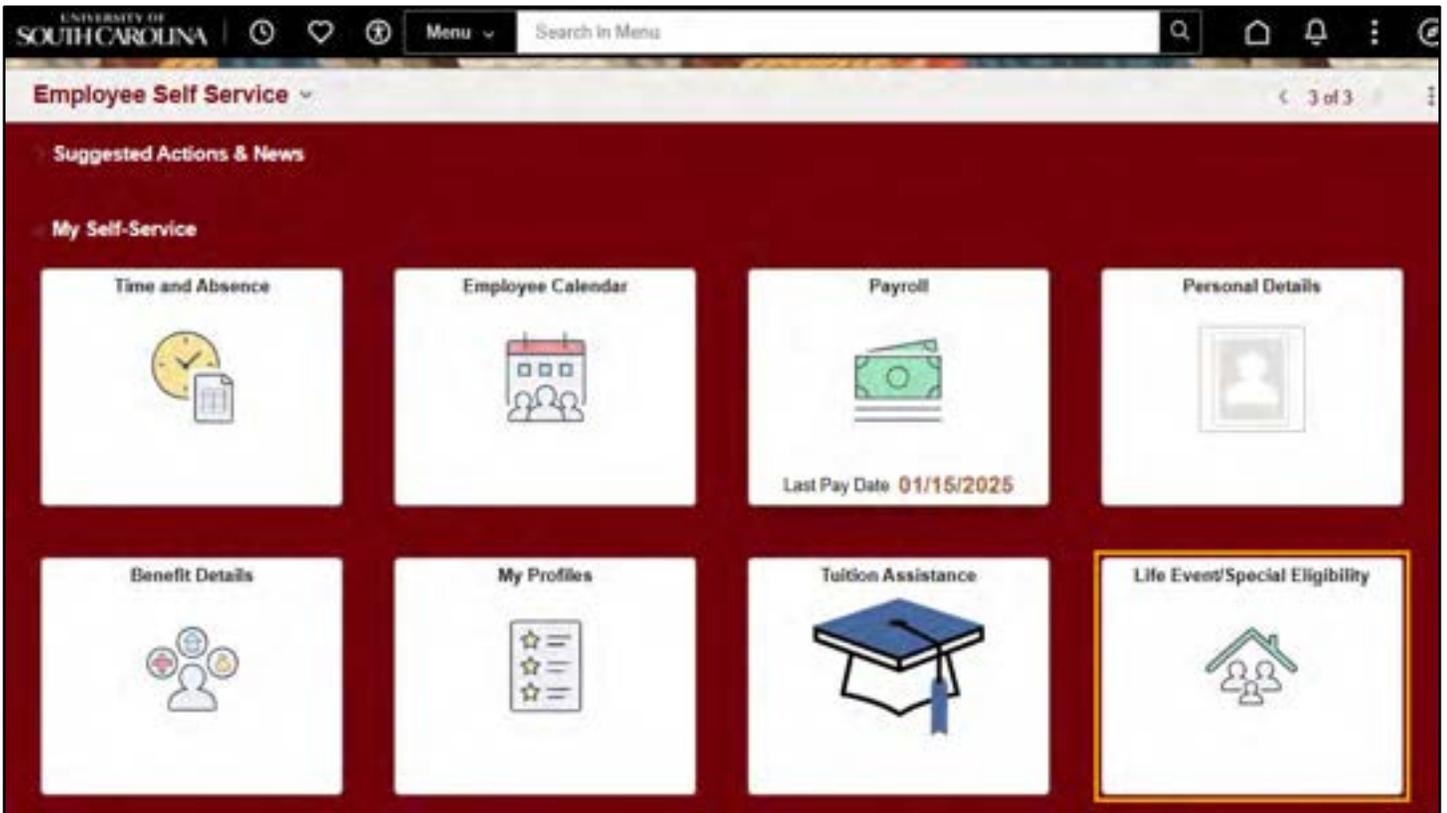
- Pending
- [Multiple Approvers](#)
SC_SPEC_ELIG_B - Original OpId

A red arrow points to the **Multiple Approvers** link.

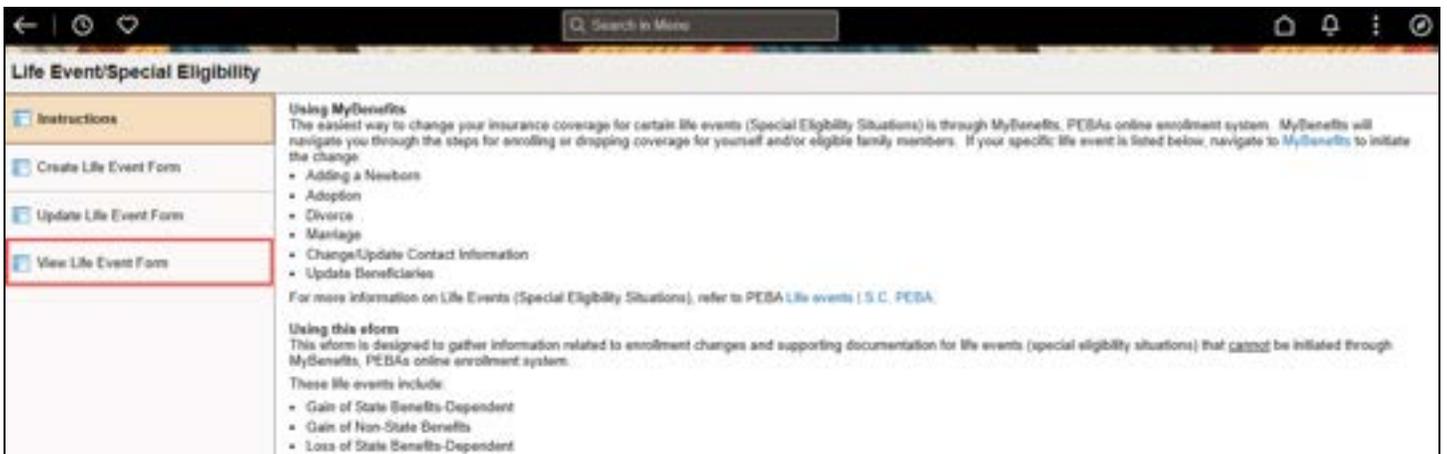
8) You have successfully updated a Life Event/Special Eligibility eForm!

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.

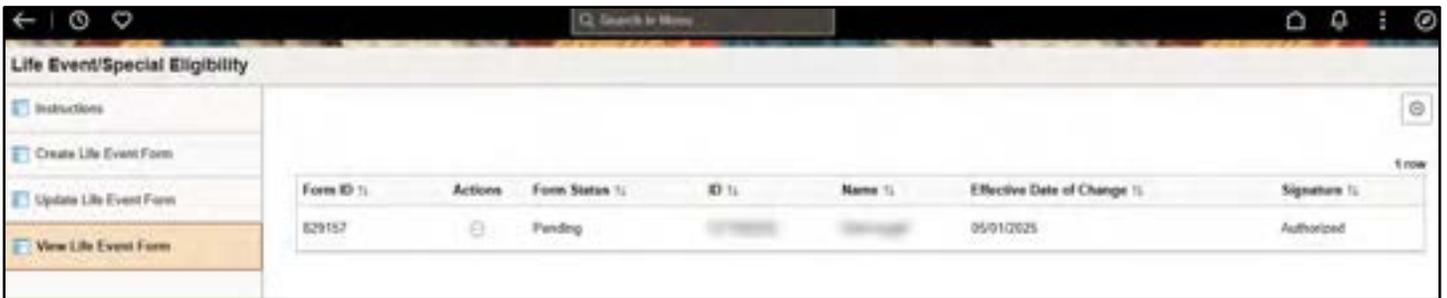


- 2) You will be taken to the Life Event/Special Eligibility landing page. To view a Life Event/Special Eligibility eForm that you have submitted, click **View Life Event Form**.

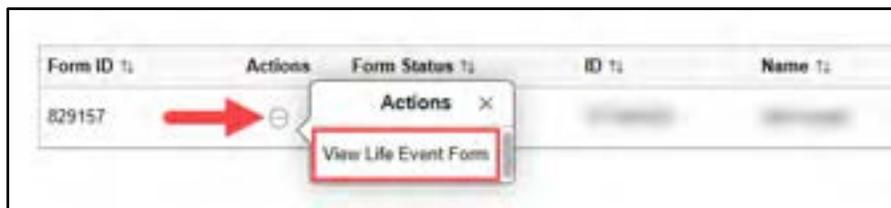


Employee Self Service Job Aids: Life Event/Special Eligibility

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



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

The screenshot shows the 'Form Page' for 'Special Eligibility Events'. The form ID is 829157 (Pending). The page includes a search bar, a 'Highlights Enabled' checkbox, and a 'Current Values' button. The form fields are as follows:

Empl ID	1010000	Date of Birth	10/10/1980
First Name	John	Last Name	Smith
Address Line 1	123 Main St	Address Line 2	
City	New York	State	NY
Postal Code	10001	Telephone	(212) 555-1234
USC Email	john.smith@ny.gov	Personal Email	john.smith@gmail.com
SSN	123-45-6789	Empl Record	
Usand	1010000		

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!