



Employee Health Benefits Adding Dependent Guidelines

Qualifying Events: Marriage, Commencement of Domestic Partnership, Birth, Adoption, Dependent Status Change, Loss of Existing Coverage, Court Order, Open Enrollment

Enrollment Process

- All Additions: Complete the Health Benefits Enrollment and Change Form
- Medical Coverage Addition: also complete the Medical Plan Change Form for your plan
- Dental Coverage Addition: also complete the Delta Dental Form
- Vision Coverage Addition: an additional enrollment form is not required
 - **Proof of the event is required** (copy of birth or marriage certificate, Certificate of Coverage from former health plan, etc.). If not available, submit the enrollment forms and note that proof is forthcoming. The insurance carrier may suspend enrollment until proof is received--then, enrollment will be retroactive to the coverage effective date below and out-of-pocket expenses you paid may then be submitted for reimbursement.
 - The Employee Benefits Specialist must receive your completed forms **NO LATER THAN 30 DAYS FROM THE EVENT DATE**. **If you do not return the forms within the 30 days**, you cannot enroll the person until Open Enrollment or after another qualifying event.
- Refer to your plan Evidence of Coverage for more details on enrollment of others.

Coverage Effective Date

- Newborn: natural child's birth date.
- Adopted Child: physical custody, fiduciary responsibility and/or control of health care date. Coverage ends 30 days after birth/adoption unless you enroll the child within 30 days of the birth. If you choose to enroll the child, any premium change is effective the 1st of the month following the birth.
- All Others: the 1st of the month following the event date.

Premium and Payroll Deductions

- Rates and Contributions: See the Health Benefits Rates & Contributions Worksheet
- Premium Changes take effect the 1st of the month following the event date
- Payroll Deduction Changes generally commence the month that coverage becomes effective. Your premiums for the fiscal year will be recalculated by the Employee Benefits Specialist.

Proof of Coverage

- Medical Plan: Use your medical change form as temporary proof of coverage until the new enrollee's card arrives. Contact the Employee Benefits Specialist if card is not received within a reasonable time (minors may not receive a card).
- Dental & Vision Plans: You will not receive a card for either plan; the employee's social security number is the member number for all enrolled family members.