| Tip Sheet - Adding a Dependent Risk Management/Group Insurance: Tel 561-233-5400 Fax 561-242-7184 Email: BCCMyBenefits@pbcgov.org United Healthcare On-site Service representative: | | |
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| | ble qualified event (e.g. marriage, birth, ac ake allowable changes to your medical, d | loption, etc.) you and your qualified dependents normally have 30 lental, life insurance and FLEX benefits. |
| Contact Risk Managemen Management within the | | ntal, life insurance and FSA change forms and forward them to Risk |
| IMPORTANT! | You must contact Risk Management and process allowable changes to your coverage within 30 days of the date of the event. Failure to do so will delay coverage for your dependent until the next applicable Plan Year beginning January 1. | |
| Effective date of coverage | First day of the calendar month, following receipt of the completed forms with documentation. For newborns, coverage is effective on the date of birth. | |
| Marriage or Domestic Partnership | Copy of marriage license or executed, notarized and recorded Declaration of Domestic Partnership form (Ord. 2006-002) PLUS a copy of a recurring monthly or quarterly household bill or statement of account that is dated within the past 60 days listing spouse's/partner's name at employee's address | |
| Gaining a Child | Biological child | • Official birth certificate (hospital birth record not acceptable) |
| To end of the month the child turns 26 | Adopted child Foster child Child placed into custody by a court order | Official adoption documents Official documents placing the child in employee's care Court documented guardianship papers (Power of Attorney is not acceptable) |
| | • Step child | • Marriage license of marriage to biological parent of child and birth certificate for child that names the employee's spouse as a parent |
| | • Child of Domestic Partner | • Birth verification as indicated above, depending on type of child plus executed, notarized and recorded Declaration of Domestic Partnership form (Ord. 2006-002) |
| | • Child born to an insured dependent of the employee | • Official birth certificate of child born to the employee's insured dependent (from birth to 18 months of age) |
| | • Disabled Child (26 and older and meets dependent definition in summary plan description) | • Same documents as apply to children listed above |
| Child age 26 – 30 | Child must meet definition as outlined in the summary plan descriptions – contact Risk Management for more information | |
| Additional Information | Review the various benefit plan documents posted on the Risk Management/Group Insurance website. Review PPM CW-P-023 for information. | |
| Payroll Deductions | If your premium increases, it will be with the paycheck containing the coverage begin date Retroactive premiums may apply - it is your responsibility to check your deductions each paycheck and notify Group Insurance immediately of any discrepancies | |