

# Benefit Eligible Dependent Definitions and Required Documentation

In order to enroll a dependent in benefits, they must meet their appropriate eligibility definition and all required documents must be presented within 30 days of new hire.

\*Please note that you may black out all financial information on required documentation.

DEPENDENT	ELIGIBILITY DEFINITION	DOCUMENTATION REQUIRED
Spouse	A member of the opposite sex to whom you are legally married	<input checked="" type="checkbox"/> A photocopy of your marriage license <b>AND</b> <input checked="" type="checkbox"/> A copy of the front page of your federal tax return for the most recent tax year showing your spouse's name
Child	Your child, that meets the specific benefit eligibility criteria as listed on the back of this document, includes: <ul style="list-style-type: none"> <li>❖ Your Biological Child(ren)</li> <li>❖ Your Step-Child(ren)</li> <li>❖ Your Legally Adopted Child(ren)</li> <li>❖ Child Under Legal Guardianship*</li> </ul>	<ul style="list-style-type: none"> <li>❖ <b>Biological Child(ren):</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A photocopy of the child's birth certificate showing your name as the parent <b>AND</b></li> <li><input checked="" type="checkbox"/> A photocopy of your (or your ex-spouse's) federal tax return for the most recent tax year showing the dependent listed.</li> </ul> </li> <li>❖ <b>Step-Child(ren):</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A photocopy of the child's birth certificate showing your spouse's name as the parent <b>AND</b></li> <li><input checked="" type="checkbox"/> A photocopy of your federal tax return for the most recent tax year showing the dependent listed.</li> </ul> </li> <li>❖ <b>Legally Adopted Child(ren):</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A photocopy of the Adoption Final Decree with the presiding judge's signature and seal</li> </ul> </li> <li>❖ <b>Child Under Legal Guardianship:</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> A photocopy of the Final Court Order appointing guardianship</li> </ul> </li> </ul>
Child with Disability	Any dependent child that otherwise meets the criteria of "child" as specified above and is disabled:	<input checked="" type="checkbox"/> Documentation as noted above for "child" dependent type <b>AND</b> <input checked="" type="checkbox"/> A photocopy of your federal tax return for the most recent tax year showing the dependent listed
Household Member	An adult individual that you desire to enroll in the health care plan, if a spouse is not already enrolled, that meets the following criteria: <ul style="list-style-type: none"> <li>❖ At the time of proposed enrollment, has resided with you for a minimum of the previous 18 continuous months.</li> <li>❖ Is not a "dependent" of you as defined by the IRS.</li> </ul> <p><b>NOT ELIGIBLE:</b> Your children and their descendants, your parents and their descendants, siblings, nieces, nephews, grandparents and their descendants, renters, boarders, tenants.</p>	<input checked="" type="checkbox"/> Household Member Program (HMP) enrollment form and affidavit  NOTE: This is a taxable benefit
Household Member Dependent	Children under age 26 of the Household Member, as defined above, who are a member of your household and meet IRS dependent criteria.	<input checked="" type="checkbox"/> Household Member Program (HMP) enrollment form and affidavit <b>AND</b> <input checked="" type="checkbox"/> Appropriate documentation of a child as defined above

Please refer to the "Benefit Specific Eligibility" on the reverse side of this document for more information on eligibility.



# Benefit Specific Eligibility

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## Health Plan

- Your child is eligible for health coverage up to age 26. The NMU health plan is considered a “non-grandfathered” health plan effective January 1, 2012. Accordingly, it is no longer permissible to deny or restrict coverage of a child under age 26 based on the child’s financial dependency, residency, student status, employment, marital status, or eligibility in their employer-sponsored group health plan. Coverage terminates at the end of the month in which your child turns age 26.

## Dental and Vision

- Your child is eligible for dental and vision coverage up to age 26. Coverage terminates at the end of the month in which your child turns age 26.

## Supplemental Dependent Life Insurance

- Child must be under age 26.

## Tuition Benefit

- Children (employee’s son, step-son, daughter, step-daughter, and a legally adopted child) who **have not attained age 24** as of the close of the calendar year.
  - The child must have the same principal place of abode as the employee for more than one-half of the calendar year.
  - The employee must provide more than one-half of his/her child’s support for the calendar year.
  - The child must be claimed as a dependent on the employee’s tax return.
- Children (employee’s son, step-son, daughter, step-daughter and a legally adopted child) **age 24 or older** as of the close of the calendar year.
  - The child must have the same principal place of abode as the employee for more than one-half of the calendar year.
  - The employee must provide over one-half of his/her child’s support for the calendar year.
  - The employee must provide a copy of the employee’s 1040 form verifying that the child was claimed as a dependent on the most recent federal income tax filing.