

Dependent Eligibility Verification

To ensure accountability in the Leon County Schools Group Health Plan, the Benefits Department will be requesting documents as part of the Dependent Eligibility Verification process to confirm that an employee's dependents are eligible for insurance coverage. This process applies to current employees who do not have the documentation on file with the Benefits Department, new hires, marriages, births, and other life events during the year as allowed by a qualifying status change (QSC) event.

If you fail to provide sufficient documents prior to the effective date of the coverage, or if you submit documents that do not prove dependent eligibility, your dependents will not have coverage.

Dependent Eligibility

The following dependents are eligible for coverage:

Spouse – The wife or husband of the employee or retiree.

Child - A biological child, legally adopted child, or child placed in the home for the purpose of adoption in accordance with Chapter 63, F.S., through the age the plan allows.

Stepchild – The child of your spouse for whom you are financially responsible, for as long as you remain legally married to the child's parent, through the age the plan allows.

Foster child – A foster child, or any other unmarried children for whom you have been granted court-ordered temporary or other custody, through the age the plan allows.

Guardianship – A child for whom you have legal guardianship in accordance with Chapter 744, F.S., or an unmarried child for whom you are granted court-ordered temporary or other custody through the age the plan allows.

Over-age dependent – After the end of the calendar year in which he/she turns 26, through the end of the calendar year in which he/she turns 30 – if he/she is unmarried, has no dependents of his/her own, is a resident of Florida or a full- or part-time student, and has no other health insurance. This coverage is offered only by Capital Health Plan.

Over-age dependent with a disability – A covered child with mental or physical disabilities. The child may continue health insurance coverage with Capital Health Plan after reaching age 26 or with Florida Blue after reaching age 30 if they have been continuously covered during the current plan year with Leon County Schools, or the child was over the age of 26 for Capital Health Plan or 30 for Florida Blue at the time of your initial enrollment. The child must be incapable of self-sustaining employment because of the mental or physical disability and be dependent on you for care and financial support. If you do not enroll the child at your initial enrollment, you will not be able to add the child to your coverage at a later date.

Newborn child of a covered dependent – A newborn dependent of a covered dependent. The newborn must be added within 30 calendar days of the date of birth. Coverage may remain in effect for up to 18 months of age with Capital Health Plan as long as the newborn's parent remains covered.

Surviving spouse and dependents – The widow or widower of a deceased Leon County Schools employee, or retiree, if the spouse was covered as a dependent in the Leon County Schools Group Health Plan at the time of death. The surviving spouse may participate in the Leon County Schools Group Health Plan with family coverage if there are eligible children to be covered. Upon remarriage, the widow or widower is no longer considered a surviving spouse. A surviving spouse shall report remarriage within 30 calendar days of the remarriage.

NOTICE: The following acts may constitute a violation of section 831.01, Florida Statutes, a third-degree felony, punishable by up to five (5) years in prison, five (5) years of probation, and a \$5,000 fine:

- Falsifying dependent information.
- Falsifying the occurrence of QSC events.
- Falsely certifying ineligible persons as eligible.
- Falsely enrolling ineligible persons in coverage.
- Falsifying dependent documentation.
- Falsifying QSC event documentation.

FOR SPOUSE

- **Marriage Certificate** – If married, you will need to submit a copy of your government-issued marriage certificate, **OR**
- **Marriage Affidavit** (must be notarized) – If you were married in a foreign country or your spouse is a foreign national and does not have a valid social security number, you will need to submit a government issued marriage certificate that shows the date of marriage along with your marriage affidavit.

FOR CHILDREN:

- **For a child, stepchild, or adopted child:** A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s).
- **For a child in your custody or under your guardianship:** A copy of the court order naming you or your spouse as the child's legal guardian or custodian.
- **For a foster child:** A copy of the records showing you or your spouse as the dependent's foster parent.
- **For a newborn child of a covered dependent up to age 18 months:** A copy of the newborn's government-issued birth certificate listing your covered dependent as the birth parent.

FOR UNMARRIED CHILDREN AGE 26 UP TO AGE 30*:

- A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s); **OR** a copy of the court order naming you or your spouse as the child's legal guardian or custodian; **AND**
- A copy of the Over-age Dependent Application Form **AND**
- One of the following documents:

A document confirming the child's enrollment as a student in the current Spring, Summer, or Fall semesters. The document must include the name of the child, the name of the school, and the school term; **OR**

A bill or statement in the child's name that is dated within the past 60 days and is mailed to the child at a Florida address.

**If you are covering a stepchild or a child for whom your spouse has legal guardianship, you must also provide documentation of your current relationship to your spouse, as requested above.*

FOR DISABLED CHILDREN AGE 26 AND OLDER:

- A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s); **OR** a copy of the court order naming you or your spouse as the child's legal guardian or custodian.