

ANCHORAGE SCHOOL DISTRICT
DEPENDENT ELIGIBILITY VERIFICATION

Your health benefits are an important part of your life and we are continually working to provide good service while keeping costs as low as possible. To do that we need to ensure that the district health plan pays claims only for those dependents who are eligible for benefits.

Who is Eligible

- Your spouse. You may be legally separated, but not divorced.
- Your same sex domestic partner.
- Your children up to age 19, or up to age 25 with student verification, **only** if they are:
 - a. Your natural children, children of your domestic partner, stepchildren, legally adopted children, children in your physical custody for whom bona fide adoption proceedings are underway, or children for whom you are the legal, court-appointed guardian; **and**
 - b. Unmarried; **and**
 - c. Primarily dependent upon you for support.

Children with a mental or physical disability/incapacity are covered even if they are past age 25. You must furnish the district with the *Request for Continuation of Medical Coverage for Disabled/Incapacitated Child* form. Children are covered as long as the disability/incapacity exists, they meet the definition of children except for age, you continue to provide periodic proof as required, and you continue in active employment status with the District in a position that provides benefits under the District's health plan.

What You Need To Do

Enclosed with this new hire packet is the information necessary to enroll in the District's health plan and complete the dependent verification process. To verify your dependent's eligibility, we must have supporting documents such as a marriage certificate, birth certificate, etc., for each dependent.

1. Complete the Benefits enrollment card included with the packet and on the back of the card list **only** those dependents eligible for coverage under your health care plan **for which you have the required documentation**, including your spouse and eligible dependent children. Human Resources staff cannot accept benefit cards that list dependents for which supporting documentation is not provided.
2. Review the *Dependent Eligibility Documentation* information on the back of this page to determine what documents are required to verify eligibility for each dependent. **Bring the required documentation for each eligible dependent you listed on the benefit enrollment card when returning the new hire paperwork to the Human Resources Department.**
3. You will have a ninety (90) calendar day eligibility waiting period in which to add eligible dependents to your health care plan for which you did not have the required documentation. This must be done in person in the Benefits Department.
4. **If you fail to provide the required documentation within the ninety (90) calendar day period you will be unable to add dependents to your health care plan without a qualifying event, or until the next open enrollment period.**

If you have any questions concerning this process or your insurance benefits, please call the Benefits Department at 742-4200.

Dependent Eligibility Documentation

If the member's name is not listed on the documentation, additional documents may be required. Copies of original documents are acceptable unless specified. Original documents *ONLY* will be returned upon request.

Dependent Type	Relationship Code	Document(s) Required	Copies Acceptable
Spouse	S	Marriage Certificate. <i>Member may be legally separated but not divorced</i>	Yes
Natural Child	C	Birth Certificate issued by state or country of birth. <i>Birth certificates issued by a hospital are not adequate except for newborns.</i>	Yes
Stepchild	E	Birth certificate, Marriage Certificate and Custody Agreement.	Yes
Legally Adopted Child	A	Birth Certificate and Decree of adoption or adoption order issued by court. <i>If member's name is listed on birth certificate, adoption paperwork is not required.</i>	Original or Certified copy
Child in Member Custody	L	Birth Certificate and Pre-Adoption order or initial placement order issued by court, tribal council, or tribal court.	Original or Certified copy
Legal Guardianship	G	Birth Certificate and Guardianship order or plan issued by court.	Original or Certified copy
Foreign Adoption	AF	Birth Certificate, foreign adoption approval by the U.S. Immigration and Naturalization Service (INS), and legal adoption documentation from country of adoption OR legal adoption documentation from the U.S. If not final, member must have physical custody and adoption proceedings underway. <i>If member's name is listed on birth certificate, adoption paperwork is not required.</i>	Original or Certified copy
Tribal Adoption	AT	Birth Certificate and Resolution from the tribal council (a certificate of recognition or letter of support for the adoption that identifies the biological and adoptive parents) OR tribal court documentation if the adoption was finalized by the tribal court. <i>If member's name is listed on birth certificate, adoption paperwork is not required.</i>	Yes
Disabled/ Incapacitated Child	D	In addition to the applicable documentation specified above, must have a letter from Aetna approving a disabled/incapacitated child application. Updated approval may be required. <i>Disability/incapacity must have existed before age 19.</i>	Yes
Same Sex Domestic Partner	P	<i>Affidavit of Same Sex Domestic Partnership</i> must be completed, signed by both parties, and notarized. Form can only be obtained in person in the Benefits Department.	Original ONLY
Same Sex Domestic Partner Child	PC	Must have a completed Affidavit of Same Sex Domestic Partnership in addition to Birth Certificate issued by state or country of birth.	Yes

All documentation issued by a foreign country must be accompanied by a translation.

Proof of student status will be requested by Aetna for an unmarried dependent child over the age of 18 up to the age of 25.