DEPENDENT ELIGIBILITY GUIDELINES

Effective 1-1-2019

If you are requesting enrollment of a spouse or dependent child, you will be required to provide documentation of their eligibility status (i.e., marriage certificate, birth certificate, legal guardianship, tax filing). All of your dependents that meet the eligibility requirements must provide us their social security numbers per compliance requirements of the Centers for Medicare and Medicaid Services (CMS) Medicare Secondary Payer program.

MEDICAL, DENTAL, VISION COVERAGE

Eligible dependents include:

- Your legally married spouse.
- Your natural born child, step-child, legally adopted child, child placed in your custody for adoption whose age is less than the limiting age, or any children for whom you have permanent legal guardianship.
- A newborn child of a covered dependent may be covered while the parent is an eligible dependent under the plan up to the limiting age of 18 months. Grandchildren may also be covered if he or she is dependent upon you for support and you have court-ordered “legal custody”. Documentation will be required.

Age Limits:

- For medical, dental, and vision coverage, your children may be covered up to the end of the calendar year in which they attain age 26. No additional dependent financial or student status is required.

- Handicapped children may be covered beyond limiting age, if they meet the above criteria, and if proof of handicapped status is provided to Risk Management within 31 days of the limiting age (age 26). See Beneflex guide for full details.

LIFE INSURANCE COVERAGE

Eligible dependents and age limits:

- Your legally married spouse, up to age 70
- Dependent children include your unmarried natural born child, step-child, foster child, legally adopted child or child placed for adoption from birth, or up to the end of the calendar in he or she turns age 26. Additionally, dependent children must be dependent upon you for more than 50% support and living at home or a full time student at an accredited institution.
- Grandchildren may only be covered if you have court-ordered “legal custody”.

If a dependent is listed that does not meet this criteria, you may be responsible for reimbursing the insurance carrier for all claims and repaying the district for its premium contribution for up to 12 months. Enrolling dependents that are not eligible under PCS plans, may also subject you to disciplinary action. In addition to our internal policies, the Florida Department of Financial Services views this activity as fraud and considers it prosecutable under the law.

If you have any questions regarding dependent eligibility criteria, please contact Risk Management at 588-6197.

Date: 10/15/18