

Life Event Series: Newborn & Adoption FAQs



A New Child in the Home:

In certain instances, you may be allowed to change your insurance during the plan (calendar) year. **You may enroll, change, or cancel** your health insurance and /or supplemental insurance elections (dental, vision, life, AD&D, or income protection) **consistent with the change in status**. Birth of a Child or Adoption of a child is considered a family status change. You will be able to make changes to some of your benefit programs outside of the annual open enrollment period, providing the change is consistent with the event and you must complete an Enrollment and Change Form within 30 days of the event. Obtain an [Enrollment and Change Form](#) from the [Risk Management Benefit Forms Webpage](#) or from your work location Secretary.

Q. What do I do First?:

A. Submit an enrollment application for your newborn/adopted child prior to the birth of the child or within 30 days after birth to Pinellas County Schools Risk Management and Insurance. You can obtain this form from your School Secretary or by calling Risk Management at 727-588-6197.

Q. Enrolling a Newborn Child?:

A. You will need to complete an [Enrollment and Change Form](#) and submit it to the Risk Management and Insurance. You may submit this application for your newborn child prior to the birth of the child or within 31 days after birth. Review the [Dependent Eligibility Guide](#) for more information.

Q. Enrolling a Grandchild?:

A. You may enroll a Grandchild provided the child's parent is a legal dependent and on your insurance. The grandchild can remain on your policy as long as the parent remains a legal dependent. Review the [Dependent Eligibility Guide](#) for more information.

Q. Enrolling your Adopted Child?:

A. Submit a copy of the legal adoption papers and a completed [Enrollment and Change Form](#) to Risk Management and Insurance within 30 days of the event. Review the [Dependent Eligibility Guide](#) for more information.

Q. Payroll Deductions:

A. The amount deducted from your paycheck represents both current coverage and a portion for summer coverage. This "summer premium" may be an additional amount owed upon your initial enrollment (New Hires) or if you change benefits during the year.

Q. Open Enrollment:

A. Every year in the Fall, all employees are allowed to change their benefits through Open Enrollment. You may add or drop coverage's, change plans and add or drop family members at that time. These changes are effective the first of the following year. If you would like more information about leave of absence, you may refer to our [Benefits and Wellness Guide](#).

Q. Can I take a Leave of Absence?:

A. Yes, the Family Medical Leave Act (FMLA) of 1993 allows you to take a leave of absence, without pay, for up to 12 weeks during any continuous 12-month period, for the birth of a child and the adoption of a child.

Q. How do I know if I am eligible for FMLA?:

A. If you participate in the Voluntary Disability plan, your benefits will end on the date of your termination. If your termination is due to an extended medical leave of absence and you are currently receiving voluntary disability benefits, your monthly payments will continue under the policy provisions, as long as you remain totally disabled.

Q. How can I get in touch with Risk Management in the Summer Months?:

A. Risk Management and Insurance does not close during the summer. We are closed only during Thanksgiving, Winter, and Spring Breaks.

Q. Paying for Benefits during a Leave?

A. When you take a leave of absence, you can continue your PCS medical and dental plan coverage. You will be responsible for making 10 monthly payments and will receive billing statements when your leave begins. The amount of your monthly payment depends on the type of leave you take, the plan in which you are enrolled, and the coverage level (employee-only, employee + 1, etc.) you elected.

Q. What happens to my benefits if I take a Medical Leave of Absence (FMLA)?

A. If you are eligible for an FMLA leave of absence, you can continue your PCS medical and dental coverage. You will pay the same medical and dental insurance rates during your leave you pay now as an active employee.

The following example shows how your monthly medical insurance payment is calculated:

EXAMPLE: Select Open Access: Employee-Only Coverage

Per-month Cost: \$81.00 (per-pay period) x 2 = \$162.00*

Total Per-month Cost: \$142.00*

Q. What happens to my benefits if I am on a regular Leave of Absence (LOA)?

A. If you are eligible for a regular leave of absence (LOA) you can continue your PCS medical and dental coverage. In order to continue your coverage, you will be required to pay the entire cost of your insurance, including the portion paid by the Board Contribution.

The following example shows the amount you would pay for employee-only coverage under the Select Open Access Plan:

EXAMPLE: Select Open Access: Employee-Only Coverage

Per-month Cost: \$81.00 (per-pay period) x 2 = \$162.00*

Plus, Board Contribution Cost: \$339.00 x 2 = \$678.00*

Total Per-month Cost: \$840.00*

** These are only examples. Your actual monthly payment may vary depending on the plan and coverage you select.*

Q. When and how may I re-enroll in my benefits?:

A. Upon returning to work, you have 30 days to contact Risk Management and Insurance and re-enroll in your benefits. Please call Risk Management at 727-588-6197 for assistance.

Q. When does my adopted child's health coverage become effective?:

A. The effective date of coverage is the date the adoption is finalized or the date in which the child is placed in the adoptive parents custody with an intent to adopt.

Q. How long is my newborn baby covered if I do not want to add him/her to my insurance?:

A. Newborn child(ren) are covered for up to 31 days under any condition.

Q. What do I need to do to change my beneficiaries?:

A. You may change your beneficiaries on the [Enrollment and Change Form](#). You will need to complete the employee portion and the beneficiary section located at the bottom of the form. Please send the completed form to Risk Management and Insurance.

Q. Will I be paid while I am out on a Leave of Absence?:

A. If you are on an approved leave of absence through Personnel due to the birth of a child, you may also be entitled to disability benefits. Benefits may be available for a limited period of time if you are enrolled in Fortis Income Protection Plan, meet the waiting period requirements and the preexisting condition clauses. You can also use any unused vacation or sick time you have accumulated.

Q. When can I enroll in the Dependent Care Reimbursement Account?:

A. You may enroll within 30 days of the birth or adoption, or within 30 days of the date you return from your leave of absence. This plan will allow you to set aside money on a pretax basis to pay for childcare expenses. The details of the plan are available on the [Risk Management and Insurance Website](#) and in your [Benefits and Wellness Guide](#).

Q. What's my Checklist to follow?:

- A.**
- Submit your completed [Enrollment and Change Form](#) and a photocopy of the birth certificate (if applicable) to Risk Management and Insurance within **30 days** of the event.
 - Review premium cost increases.
 - Update your beneficiary designations with the district and with the Florida Retirement System (FRS).
 - If enrolled in a Tax Deferred Annuity (TDA), contact your TDA Representative to update your beneficiary information

For more information, please contact the Benefits Team at 727-588-6197