DEFINITIONS AND REQUIRED DOCUMENTS FOR DEPENDENT ELIGIBILITY

Effective July 1, 2010

Please use this checklist for submitting documents to verify your dependent's eligibility

DEPENDENT TYPE	ELIGIBILITY (check all applicable boxes)	REQUIRED DOCUMENT(S) FOR VERIFICATION
All	**All Dependents**	□ Verification form
Spouse	□ A current legal spouse	□ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the spouse as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the spouse as dependent; **OR** □ Marriage certificate; **AND** ➢ **One of the following:** □ Proof of joint ownership of residence or other real estate; **OR** □ Proof that employee and spouse are both listed on a lease or share the rent of a home or other property; **OR** □ A utility bill listing both employee and spouse; **OR** □ One utility bill listing the employee and a second utility bill listing the spouse, both bills with the same address **For marriage in the current year:** □ Marriage Certificate
Common Law Spouse	□ Relationship began prior to October 10, 1991 (if relationship began in Ohio)	□ Affidavit of Common Law Marriage (ADM 4731); **OR** □ Certificate of Common Law Marriage issued by a state or local government; **AND** ➢ **One of the following:** □ Proof of joint ownership of residence or other real estate; **OR** □ Proof that employee and spouse are both listed on a lease or share the rent of a home or other property; **OR** □ A utility bill listing both employee or spouse; **OR** □ One utility bill listing the employee and a second bill listing the spouse, both to same address

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Biological child under age 19	□ Biological child under 19 **AND** □ Unmarried	□ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent; **OR** □ The child's birth certificate, Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240) or certification of Birth Abroad (FS-240)
Adopted child under age 19	□ Adopted child under 19 (legal adoption or in anticipation of a legal adoption) **AND** □ Unmarried	➢ **One of the following**: □ Court documents signed by a judge showing that the employee or spouse has adopted the child; **OR** □ International adoption papers from country of adoption; **OR** □ Papers from the adoption agency showing intent to adopt; **OR** □ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent

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Stepchild under age 19	□ Stepchild under 19 **AND** □ Unmarried **AND** □ Living in the employee's home 50% or more of the time	□ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the stepchild as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the stepchild as dependent; **OR** □ Marriage Certificate to show spouse is married to employee; **AND** □ The child's birth certificate, Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240) or certification of Birth Abroad (FS-240) showing spouse is biological parent; **AND** □ Court approved document that evidences the child living with the employee at least 50% of the time.
Foster child under age 19	□ Foster child under 19 **AND** □ Lives in the employee's home	➢ **One of the following:** □ Court documents signed by a judge verifying employee or spouse has responsibility for foster child; **OR** □ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the foster child as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the foster child as dependent

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Child under age 19 for whom the employee is legal guardian	□ Unmarried child under 19 **AND** □ Resides with the employee **AND** □ Employee is legal guardian	➢ **One of the following:** □ Court documents signed by a judge appointing employee or spouse as legal guardian; **OR** □ Page 1 and signature page of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent; **OR** □ Page 1 and Certificate of Electronic Filing of employee's prior year Federal Income Tax Return (1040, 1040A or 1040EZ) listing the child as dependent
Child under age 19 for whom the Plan has received a Qualified Medical Child Support Order	□ Unmarried child under 19 **AND** □ Named as an alternate recipient with respect to the employee under a Qualified Medical Child Support Order (QMCSO)	□ Qualified Medical Child Support Order (QMCSO)
Disabled dependent	□ Unmarried child **AND** □ incapable of self-support **AND** □ Disability began before age 23 **AND** □ Is primarily dependent upon the employee for support	□ **You must submit the required document(s) proof for one of the following dependent categories as noted above:** • Biological child • Adopted child • Stepchild **AND** □ Approval for disability status from the health plan **Note:** To obtain plan's required document, Click Here

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Student (19-22 years of age)	□ Unmarried dependent under age 23 who falls under one of the previously listed categories **AND** □ A student at an accredited (licensed) school, college or university.	□ **You must submit the required document(s) proof for one of the following dependent categories as noted above:** • Biological child • Adopted child • Stepchild **AND** • Annual Affidavit of Student Status (ADM 4729); **AND** ➢ **One of the following forms of proof of qualified student status:** □ A letter from the registrar with the dependent's name showing current enrollment; **OR** □ A transcript with the dependent's name, school name, showing semesters/quarters enrolled that include current term; **OR** □ Medical documentation for medically necessary leave of absence **Note**: The State will annually request proof of school enrollment and a completed Affidavit of Student Status. If the required proof is not provided, coverage ends on the last day of the birthday month.

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HB 1 Dependents Note: For dependents ages 19-22 who are enrolled in college, see the definition above for dependent type "student."	Unmarried biological, step, or adopted child of employee between ages 19 through 27 who is not a student status child **AND**: • A resident of Ohio; **OR** • A full-time student at an accredited public or private institution of higher education; **AND** • Not employed by an employer that offers any health benefit plan under which the child is eligible for coverage; **AND** • Not eligible for Medicare or Medicaid	**You must submit the required document(s) proof for one of the following dependent categories as noted above:** □ Biological child □ Adopted child □ Stepchild **AND** □ HB1 Affidavit **AND** □ **one item from one of the categories below (Ohio resident or full-time student)** **If a resident of Ohio one of the following forms of proof is required:** □ Copy of drivers license; **OR** □ Utility bill; **OR** □ Lease/mortgage **OR** **If a full-time student, one of the following forms of proof is required:** **Proof of full-time enrollment in an accredited public or private institution of higher learning by way of one of the following;** □ A letter from the registrar with the dependent's name, statement of current full-time enrollment and school phone number; **OR** □ A transcript with the dependent's name, school name, indication of current full-time enrollment and school phone number **Note**: Periodically you will be asked to provide updated documentation showing your dependent remains eligible for HB1 coverage.

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RESOURCES TO OBTAIN DOCUMENTATION	
Birth Certificates & Marriage Licenses: http://www.odh.ohio.gov/vitalstatistics/vitalstats.aspx	***For children born outside the United States:*** U.S. Department of State http://www.state.gov
Please call the school registrar's office to request transcripts for schools, colleges and universities.	

Please do not send original documents. Mark out any Social Security numbers and personal financial information on the copies of documents you submit.