

## MEDICAL AND DENTAL PLAN DEPENDENT ELIGIBILITY

Appropriate documentation must be presented when enrolling dependents into the Aetna Medical/Dental Plan, a Health Maintenance Organization (HMO), or the Stand Alone Dental Plan (SAD). **Documentation requirements are as follows:** 

Relationship	Documentation Requirement
• Spouse	Copy of Marriage Certificate or copy of presently valid affidavit or declaration of Common Law Marriage <u>AND</u> A copy of the first page of the latest federal tax Form 1040 that indicates "married filing jointly; or copy of the first page of the latest federal tax Form 1040 that indicates "married filing separately" (spouse's name must appear on the line provided after the "married filing separately status. Copy of Birth Certificate.
Biological Child •	Proof of name if your adult child's last name is different from the name on his or her birth certificate. Examples of proof documents are marriage certificates and court documents.
• Step-Child	Copy of Birth Certificate and copy of Marriage Certificate showing the union of employee and natural parent. Proof of name if your adult child's last name is different from the name on his or her birth certificate. Examples of proof documents are marriage certificates and court documents. Copy of Birth Certificate and Court Order recognizing
Foster, adopted, or children under your legal guardianship •	Guardianship/Placement with the employee. Proof of name if your adult child's last name is different from the name on his or her birth certificate. Examples of proof documents are marriage certificates and court documents.
• Disabled Child	Copy of Birth Certificate and physician statement certifying that the dependent child is incapable of self-sustaining employment due to mental or physical disability.

Dependents must be added within 31 days of a qualifying event; otherwise, they must wait for open enrollment and submit supporting documentation.

Proof must be submitted to your local HR Representative at the time of enrollment in the Aetna Medical/Dental plan, HMO plan, or Stand Alone Dental (SAD). If you have questions regarding these requirements, please contact your local HR representative or Ms. Rosie Serrano, NEXCOM Benefits Manager at <u>roseann.serrano@nexweb.org</u> or (757) 502-7526.