ELIGIBILITY INFORMATION

CCHMC Core Benefits

Cincinnati Children's Human Resources

EMPLOYEE ELIGIBILITY

Employees in an eligible position regularly scheduled to work 20 hours or more per week (0.5 FTE or greater) are eligible for CCHMC Core Benefits. If two CCHMC employees are married, they may not be enrolled as both a member and a dependent of the other employee. Likewise, dependent children may only be covered under one parent with CCHMC coverage.

DEPENDENT ELIGIBILITY

Employees who are eligible for CCHMC Core Benefits are also able to enroll a spouse/same sex domestic partner and dependent children up to the age of 26. Employee Benefits may periodically request documentation to verify full-time student status for children over the limiting age of 19.

A newly eligible employee may enroll a dependent child who is over age 26 and cannot work to support himself or herself due to mental or physical incapacitation with reliance on the employee for financial support. The employee must contact HR4U before the end of his or her initial enrollment period. Failure to notify HR4U within this period will result in the child being ineligible for coverage through CCHMC.

If a dependent ceases to meet eligibility, you are responsible for notifying Employee Benefits within 60 days of the Qualifying Life Event. If a dependent's eligibility cannot be verified or if your response is not timely, that dependent will not be covered for any benefits.

ELIGIBILITY DATE

Most new employees are eligible for CCHMC Core Benefits effective as of their official date of hire. Benefits must be elected within 60 days of your hire date.

TERMINATION OF EMPLOYMENT

Your coverage will terminate as of the end of the month in which your termination of employment occurs. For example, an employee who terminates employment on October 7th will retain coverage through October 31st. Any premiums required to provide coverage through the end of the month will be deducted from your final pay.

CONTINUATION OF COVERAGE

In accordance with COBRA regulations, you and your dependents covered by certain CCHMC Core Benefits have the right in certain circumstances to temporarily extend coverage. See the Employee Benefits Resource Center on CenterLink for additional information.

DEPENDENT ELIGIBILITY DOCUMENTATION

When enrolling a dependent to be covered under a CCHMC medical, dental, or vision plan you must provide sufficient documentation to prove their eligibility. Below is a list of acceptable documents to verify a dependent's eligibility.

FOR SPOUSE:

› A copy of the front page of your most recently filed federal tax return confirming this dependent as a spouse, **OR**

› A copy of your marriage certificate AND documentation dated within the last 6 months establishing current relationship status such as a joint household bill, joint bank/credit account, joint mortgage/lease, or insurance policies. The document must list you and your spouse's name, the date, and mailing address.

FOR DOMESTIC PARTNERS:

› TWO forms of Documentation dated within the last 6 months establishing current relationship status such as a joint household bill, joint bank/credit account statements, joint mortgage/lease, or insurance policies. The Document must list you and your Domestic Partners name, the date, and mailing address. Additionally, a domestic partner affidavit must be filed and approved.

FOR CHILDREN:

› A copy of the child's birth certificate, naming you or your spouse or domestic partner as the child's parent, or appropriate court order / adoption decree naming you or your spouse or domestic partner as the child's legal guardian **OR**

› A copy of the front page of the employee's most recently filed federal tax return confirming the status of the child as a dependent; **OR**

› If applicable, a copy of a divorce decree granting full or joint custody (names of all parties must be included); **OR**

› If applicable, a copy of a court-issued Qualified Medical Child Support Order (QMCSO) or other court order where you or your spouse are required to provide healthcare (names of all parties must be included).

FOR OTHER DEPENDENTS:

› A copy of the relevant pages of the court documentation stating you or your spouse or your domestic partner have legal custody of this dependent. Documents submitted must include the names of both the custodian and dependent.

DOCUMENTATION SAMPLES:

› Front page of the most recently filed joint 1040

› Joint household bill

› Joint bank/credit account

All Required Documentation MUST include date and/or year, employee name, and dependent's name.