

# Dependent Documentation Requirements



Open Enrollment and some qualifying events allow the addition of dependents to the medical, dental, prescription drug, and or Life/AD&D insurance coverages.

The addition of dependents (new or re-enrolled) requires proof of eligibility before enrollment will be completed. Documents not provided by the deadline will result in the removal of dependents from coverage and as such, those dependents will remain ineligible until the next Open Enrollment or qualified family status change. Documentation is not required for dependent(s) currently enrolled.

Note: documentation written in a language other than English, must be translated by an official translator – someone other than you or your dependent(s). Generally, an official translator can be found at any college or university. The translation of each document must be signed by the translator and notarized.

The table below outlines the documentation requirement by dependent relationship.

Dependent Relationship	Eligibility Criteria	Required Documentation
<b>Spouse</b>	<ul style="list-style-type: none"> <li>Lawfully married to an employee or retired employee as recognized by the laws of the State of Maryland or in a jurisdiction where such marriage is legal</li> </ul>	<ul style="list-style-type: none"> <li>Official State marriage certificate (must be a certified copy and dated by the appropriate State or County official, such as the Clerk of Court):                             <ul style="list-style-type: none"> <li>- From the court in the County or City in which the marriage took place; or</li> <li>- From the Maryland Division of Vital Records for marriages that occurred at least six months prior to enrollment; or</li> <li>- From the Department of Health and Mental Hygiene (DHMH) website: <a href="http://www.dhmh.maryland.gov">www.dhmh.maryland.gov</a> (click Online Services) – also <a href="http://www.vitalchek.com">www.vitalchek.com</a></li> </ul> </li> </ul>
<b>Children</b> <ul style="list-style-type: none"> <li>Biological Child</li> <li>Adopted Child</li> <li>Step-child</li> </ul>	<ul style="list-style-type: none"> <li>Under age 26</li> <li>Except for grandchildren and legal wards, no requirement to reside in your home</li> <li>May be eligible for coverage under own employer</li> <li>May be married or unmarried, or;</li> <li>Over age 26 and incapable of self-support due to mental or physical incapacity incurred prior to age 26 with proof of continuous employer sponsored coverage</li> </ul>	<p><b>Biological Child</b></p> <ul style="list-style-type: none"> <li>Copy of child's official state birth certificate showing lineage</li> <li>NEWBORNS: <b>Official birth certificate is required within 60 days of birth.</b> <a href="https://www.vitalchek.com">https://www.vitalchek.com</a> (recommended) OR <a href="https://health.maryland.gov">https://health.maryland.gov</a></li> </ul> <p><b>Adopted Child</b></p> <ul style="list-style-type: none"> <li>Pending Adoption: Notice of placement for adoption on adoption agency letterhead or copy of court order placing child pending final adoption</li> <li>Final Adoption: Copy of final adoption decree signed by a judge or a State-issued birth certificate showing employee/retiree as the parent</li> </ul> <p><b>Step-child</b></p> <ul style="list-style-type: none"> <li>Copy of child's official state birth certificate with name of spouse of employee/retiree as child's parent</li> <li>Copy of employee/retiree's official state marriage certificate</li> </ul>
<b>Other Child Relatives</b> <ul style="list-style-type: none"> <li>Grandchild</li> <li>Legal ward</li> <li>Step-grandchild or other dependent child relatives</li> </ul>	<ul style="list-style-type: none"> <li><b>Under age 25</b></li> <li>Must reside in your home</li> <li>Must be unmarried</li> <li>May not be eligible for coverage under own employer</li> <li>For whom you provide sole support</li> </ul>	<p><b>Other Child Relatives (for all types)</b></p> <ul style="list-style-type: none"> <li>Copy of child's official state birth certificate showing lineage</li> <li>Proof of permanent residence with enrolled employee/retiree (one of the following):                             <ul style="list-style-type: none"> <li>- Valid driver's license,</li> <li>- State-issued identification card,</li> <li>- School records certifying child's address,</li> <li>- Daycare records certifying child's address, or</li> <li>- Tax documents with child's name listed certifying address.</li> </ul> </li> </ul> <p>Must also submit following specific documentation for specified dependent:</p> <p><b>Legal Wards (temporary guardianship not covered):</b></p> <ul style="list-style-type: none"> <li>Copy of Legal Ward/Testamentary court document, signed by a judge.</li> </ul> <p><b>Grandchild, Step-grandchild, or other child relative:</b></p> <ul style="list-style-type: none"> <li>Proof of relation by blood or marriage</li> </ul>
<b>Medical Child Support Order</b>		<ul style="list-style-type: none"> <li>Copy of court order requiring Employee/Retiree to provide support and health coverage, signed by the child support officer or judge</li> </ul>

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<b>Domestic Partner</b>	<ul style="list-style-type: none"> <li>Lived together for at least twelve months.</li> <li>Not married to anyone else nor have another Domestic Partner.</li> <li>At least 18 years of age and mentally competent to consent to contract.</li> <li>Reside together in the same residence and intend to do so indefinitely.</li> <li>Have an exclusive mutual commitment similar to that of marriage.</li> <li>Are jointly responsible for each other's common welfare and share financial obligations.</li> </ul>	<ul style="list-style-type: none"> <li>Affidavit of Domestic Partnership</li> <li>Two of the following: <ul style="list-style-type: none"> <li>Joint lease or mortgage</li> <li>Designation of Domestic Partner as beneficiary for life insurance AND retirement contract</li> <li>Designation of Domestic Partner as primary beneficiary in employee's or insured's will</li> <li>Durable property AND health care powers of attorney</li> <li>Joint ownership of a motor vehicle, joint checking account or joint credit account</li> </ul> </li> </ul>
<b>Domestic Partner Children</b> <ul style="list-style-type: none"> <li>Biological Child</li> <li>Adopted Child</li> </ul>	<ul style="list-style-type: none"> <li>Under age 26</li> <li>Except for grandchildren and legal wards, no requirement to reside in your home</li> <li>May be eligible for coverage under own employer</li> <li>May be married or unmarried, or;</li> <li>Over age 26 and incapable of self-support due to mental or physical incapacity incurred prior to age 26 with proof of continuous employer sponsored coverage</li> </ul>	<p><b>Biological Child</b></p> <ul style="list-style-type: none"> <li>Copy of child's official state birth certificate showing lineage</li> <li>NEWBORNS: <b>Official birth certificate is required within 60 days of birth.</b>  <a href="https://www.vitalchek.com">https://www.vitalchek.com</a> (recommended)  OR  <a href="https://health.maryland.gov">https://health.maryland.gov</a></li> </ul> <p><b>Adopted Child</b></p> <ul style="list-style-type: none"> <li>Pending Adoption: Notice of placement for adoption on adoption agency letterhead or copy of court order placing child pending final adoption</li> <li>Final Adoption: Copy of final adoption decree signed by a judge or a State-issued birth certificate showing employee/retiree as the parent</li> </ul> <p>If domestic partner is NOT a covered dependent, documentation of domestic partnership (see Required Documentation for Domestic Partners)</p>
<b>Domestic Partner Other Child Relatives</b> <ul style="list-style-type: none"> <li>Grandchild</li> <li>Legal ward</li> <li>Other dependent child relatives</li> </ul>	<ul style="list-style-type: none"> <li><b>Under age 25</b></li> <li>Must reside in your home</li> <li>Must be unmarried</li> <li>May not be eligible for coverage under own employer</li> </ul> <p>For whom you provide sole support</p>	<p><b>Other Child Relatives (for all types)</b></p> <ul style="list-style-type: none"> <li>Copy of child's official state birth certificate showing lineage</li> <li>Proof of permanent residence with enrolled employee/retiree (one of the following): <ul style="list-style-type: none"> <li>Valid driver's license,</li> <li>State-issued identification card,</li> <li>School records certifying child's address,</li> <li>Daycare records certifying child's address, or</li> <li>Tax documents with child's name listed certifying address.</li> </ul> </li> </ul> <p>Must also submit following specific documentation for specified dependent:</p> <p><b>Legal Wards (temporary guardianship not covered):</b>  Copy of Legal Ward/Testamentary court document, signed by a judge.</p> <p><b>Grandchild or other child relative:</b>  Proof of relation by blood or marriage</p> <p>If domestic partner is NOT a covered dependent, documentation of domestic partnership (see Required Documentation for Domestic Partners)</p>