FORM 1B - DEPENDENT ELIGIBILITY REFERENCE GUIDELINES		
DEPENDENTS	ELIGIBILITY DEFINITION	REQUIRED DOCUMENTATION
CURRENT SPOUSE OR COMMON LAW MARRIAGE	Legal Spouse: A person to whom you are legally married as defined by the Federal Defense of Marriage Act and are not legally separated or divorced	Any ONE of the following: > A copy of the certified Marriage Certificate (state/county issued) and a copy (front) of the spouse's driver's license > A copy of the top half of the front page of your joint 2013 federal tax return (Form 1040) or your spouse's individual return ("black out" dollar amounts) > Place of worship marriage certificate and a copy (front) of the spouse's driver's license > Notarized Common Law Marriage Certificate and a copy (front) of the spouse's driver's license
SEPARATED OR FORMER SPOUSE	A person to whom you were once legally married or are separated from and continued coverage is specified under a legal agreement until the spouse remarries	➤ A copy of the divorce or separation agreement showing that you are required to provide medical coverage to your separated spouse or ex-spouse
CHILDREN	Children under age 26. Covered if they are you or your spouse's: Biological Children Step Children Legally adopted children, or those placed in your home for whom you have begun adoption procedures Children living with you for whom you are appointed Legal Guardian by the court and for whom you are financially responsible Disabled children over 26	 ➢ A copy of the top half of the front page of your joint 2013 federal tax return (Form 1040) indicating your dependents ("black out" dollar amounts) And the appropriate documentation from the list below: ➢ Biological Child – A copy of the child's birth certificate showing you as a parent ➢ Step Child – A copy of the child's birth certificate ➢ Adopted Children/Legal Guardianship – A copy of the Final Court Orders or Adoption Final Decree each with the presiding judge's signature and seal ➢ AND if Disabled Child over age 26 – copy of physician's statement
OTHER DEPENDENTS	An alternate recipient under age 26 who is covered under a Qualified Medical Child Support Order (QMCSO), or other dependents if required under a court order (e.g. foster children)	➤ A copy of the top half of the front page of your joint 2013 federal tax return (Form 1040) indicating your dependents ("black out" dollar amounts) And a copy of the QMCSO or court order AND if QMCSO – copy of the child's birth certificate

Any false information provided by any employee will be considered grounds for disciplinary action up to and including termination of employment as well as back payment of actual healthcare claims or insurance premiums.