

## **Dependent Coverage**

An eligible dependent is defined as set forth below:

- The covered Employee's legal spouse;
- A Child from date of birth up to 26 years of age;
- The Employee may also enroll an eligible Dependent during the year if a court orders the Employee to cover an eligible Dependent (e.g., a QMCSO). See the Section entitled "Qualified Medical Child Support Order" for more details regarding a QMCSO.
- Overage Dependents - If a Dependent Child is incapable (and became incapable prior to attainment of age 26) of self-sustaining employment by reason of mental retardation or physical incapacity, and is dependent upon the covered Employee for support, the coverage for the Dependent Child may be continued for the duration of incapacity.
- Prior to the Dependent Child reaching age 26, an application for continued coverage with current medical information from the Dependent Child's attending Physician must be submitted to the Plan Administrator to establish eligibility for continued coverage as set forth above. The Plan Administrator, in its discretion, may consider applications and attending Physician's information submitted after the Child reaches age 26, if the application and information indicate that the Child's incapacity was present prior to the Child reaching age 26, but was not apparent or diagnosed until after the Child reached age 26.
- Upon receipt of the application for continued coverage, the Plan Administrator may require additional medical documentation regarding the Dependent Child's mental retardation or physical incapacity as often as he may deem necessary thereafter.

## **Dependent Certification Requirement for all Health Plans and Group Benefits Life Insurance:**

To deter fraud, abuse, and assure the proper use of public funds and Plan Members' premium dollars, The Office of Group Benefits and LSU First joins the majority of public and private health benefit programs by requiring proof that the dependents covered are legal dependents of the Employee.

All active and retired employees are required to provide written proof that each dependent covered under the Employee's health Plan is his/her actual legal dependent. All employees must present appropriate written verification for all currently covered dependents to their Human Resources (HR) /Benefits Department on his/her Campus

## **Written Verification Required for Dependents:**

Active Plan Members must provide proof of the status of each covered dependent to your HR/Benefits Department on your campus. Failure to comply with these requirements will result in cancellation of your dependents' coverage. Below is a list of categories of dependents and the proof that must be presented at the time of enrollment to cover these dependent(s):

1. Spouse
  - Certified copy of marriage license indicating date and place of marriage.
2. Dependent child under age 26 or Natural or legally adopted child of Plan Member.
  - Certified copy of birth certificate listing Plan Member as parent or,
  - Certified copy of legal acknowledgment of paternity signed by Plan Member or,
  - Certified copy of adoption decree naming Plan Member as adoptive parent.
3. Stepchild
  - Certified copy of marriage license to spouse and birth certificate listing spouse as natural or adoptive parent.
4. Child placed with your family for adoption by agency adoption or irrevocable act of surrender for private adoption.
  - Certified copy of adoption placement order showing date of placement or,
  - Copy of signed and dated irrevocable act of surrender.
5. Child for whom you have been granted guardianship or legal custody, including provisional custody.
  - Certified copy of signed legal judgment granting you legal guardianship or custody.
6. Grandchild for whom you do not have legal custody or guardianship but who is dependent on you for support and whose parent is a covered dependent.

- Certified birth certificate or adoption decree showing parent of grandchild is a dependent child and certified copy of birth certificate showing dependent child is a parent of grandchild.
7. Never-married child age 26 or older who is incapable of self-sustaining employment due to mental retardation or physical incapacity who was covered prior to age 26.
- Certified copy of birth certificate listing Plan Member as parent or,
  - Certified copy of legal acknowledgment of paternity signed by Plan Member or,
  - Certified copy of adoption decree naming Plan Member as adoptive parent.
  - Must also apply for continued coverage prior to age 26 and provide supporting medical documentation.
  - Must provide additional medical documentation of child's condition periodically upon request by Plan Administrator.