

Dependent Eligibility Guidelines

The following individuals are eligible for NYSHIP coverage:

Employee

Individuals who are employed by the State, work not less than half time on a regularly scheduled basis and are expected to work at least six biweekly payroll periods (for seasonal employees, employment must be expected to last six months or longer); individuals who work for other NYSHIP participating employers who work at least half time on a regularly scheduled basis or are paid at least \$2,000 annually, (however, individual PAs and PEs may establish higher service and/or salary levels); a paid elected official; or an unpaid board member of a public authority with at least six months of service in such position.

Employee's Spouse

The employee's spouse, including a same sex spouse married in a jurisdiction where such marriages are legal, and a legally separated spouse are eligible. If the employee is divorced or if their marriage has been annulled, the former spouse is not eligible, even if there is a court order requiring the employee to maintain health insurance coverage for the divorced spouse. If the employee's marriage ends, the employee must notify their agency Health Benefits Administrator and end coverage for their spouse effective the date the marriage ends. The spouse may be able to continue coverage under COBRA.

Employee's Domestic Partner

The employee may cover a same or opposite sex domestic partner as a dependent under NYSHIP. A domestic partnership, for eligibility under NYSHIP, is one in which the employee and their partner are 18 years of age or older, unmarried and not related in a way that would bar marriage, living together, involved in a lifetime relationship and financially interdependent. To enroll a domestic partner, the employee must have been in the partnership for six months and be able to provide proof of at least six months of cohabitation and financial interdependence.

Acceptable proof of cohabitation may include one document with both names or two separate documents that show the legal residence of each partner. The following is a list of items that can be used to demonstrate proof of residency:

Auto registration; bank statement; driver's license; mailed insurance benefits statement; mailed joint membership statement with address (e.g., church or family association); lease agreement listing both parties; mortgage agreement listing both parties; passport; pay check stub; registration as a domestic partnership in a New York State municipality that has established such a procedure (e.g., Albany, New York City, Rochester, Ithaca); tax return; telephone bill; or utility bill. Agency HBAs have complete information on eligibility, enrollment procedures and coverage dates.)

The following is a list of items that can be used to demonstrate proof of financial interdependence—at least two proofs must be submitted and at least one of the two proofs must be from List A:

List A—Joint obligation on a loan (including an affidavit by a creditor for a personal loan); joint ownership of a residence; joint renters' or home owners' insurance policy; joint responsibility for child care (e.g., school documents, guardianship) (The child's birth certificate alone is not sufficient.); designation of one partner as beneficiary under the other's life insurance policy, retirement benefits account or will or executor of the other's will; an affidavit by a corporate creditor or other disinterested third party qualified to testify to partners' financial interdependence; mutually granted durable power of attorney; designation of one partner as the representative payee for the other's government benefits; joint ownership or holding of investments; joint ownership or lease of a motor vehicle; mutually granted authority to make health care decisions (e.g., health care power of attorney); both listed as tenants on the lease of a shared residence; same-sex marriage or civil union certificate; sharing a household budget for the purpose of receiving government benefits; or claiming your partner as a dependent for federal tax purposes. A PS-425.3—*Dependent Tax Affidavit*—must be completed and submitted.

List B—Joint bank account; joint credit or charge card(s); status as authorized signatory on the partner's bank account, credit card or charge card; or other proof establishing economic interdependence.

To cover an employee's domestic partner's child, the standard NYSHIP provisions for adding an "other child" dependent apply. (Note that waiting periods may apply when employees enroll a dependent more than seven days after eligibility.)

If the partnership ends, the employee must notify the agency HBA and end coverage for the domestic partner effective on the date the partner no longer met the eligibility criteria above. (The domestic partner may be able to continue coverage under COBRA if timely notification of the qualifying event is made).

There is a one-year waiting period from the termination date of the employee's previous partner's coverage before an employee may again enroll a domestic partner.

Employees who fraudulently enroll a domestic partner are held financially and legally responsible for any benefits paid and are subject to disciplinary action. Such employees may forfeit future coverage.

If the employee dies, the surviving domestic partner may be eligible to continue in NYSHIP, but dependent survivor coverage will be lost if the surviving domestic partner enters into another domestic partnership. In no case can dependents acquired by the surviving domestic partner during dependent survivor coverage be covered under NYSHIP.

Under Social Security law, Medicare is primary for an active employee's domestic partner who becomes Medicare eligible at age 65. If the domestic partner becomes Medicare-eligible due to disability, NYSHIP is primary.

Child Under Age 19

The employee's unmarried children under 19 years of age are eligible. This includes biological children, legally adopted children, including children in a waiting period prior to finalization of adoption, and dependent stepchildren. Other children who reside permanently with the employee in their household who are chiefly dependent on the employee and for whom the

employee has assumed legal responsibility in place of the parent are also eligible; the employee must verify eligibility and provide documentation upon enrollment and every two years thereafter.

Child Age 19 or Over -- Full Time Student

The employee's unmarried dependent children who are age 19 or over but under age 25 are eligible if they are *full time* students at an accredited secondary or preparatory school, college or other educational institution and are not eligible for NYSHIP group coverage as an employee. They continue to be eligible until the earliest of the following dates:

- Their date of marriage
- The end of the third month in which they complete a semester of study if they do not continue to be full time students;
- The end of the third month following the month in which they complete course requirements for graduation; or
- They reach age 25.

For children other than the employee's biological children, legally adopted children or dependent stepchildren, support by and residence with the employee as described in *Child Under Age 19* must have commenced before the child reached age 19.

If the employee's child reaches age 19 during a school vacation period, coverage will continue until the end of the third month after the child completed the last semester of study. Proof of semester completion may be required.

Students who *complete a semester of school are covered until the end of the third month following the month in which the semester ended*. Students who completed a semester of full time attendance and then attend school for part of a semester are covered until the end of the month in which they last attended school on a full time basis with proof of such attendance, or until the later of the end of the third month following the last completed semester, or the starting date of the incomplete semester if attendance cannot be documented.

The child must apply to the Department for COBRA coverage within 60 days of the NYSHIP termination date.

Entering school - When an enrollee with Family coverage applies for dependent student coverage for a dependent child who is not currently a student, coverage will begin on the first day of the month in which attendance in class actually starts. When an enrollee with Individual coverage applies for a change to Family coverage in order to cover a dependent student who is entering school, the usual effective date rules for effective date of family coverage apply.

Withdrawing from school - When a dependent student withdraws from school after classes have begun for the semester, coverage will end on the last day of the month in which the dependent attended classes as a full time student, if documentation of attendance during the semester is provided. If no documentation is provided, coverage ends on the day the semester began. The child must apply for COBRA coverage within 60 days of the NYSHIP termination date.

Reduced course load - If a dependent child who is enrolled as a full time student voluntarily drops a course and becomes a part time student, coverage will end on the last day of the month

in which the dependent child was considered a full time student. The child must apply for COBRA coverage within 60 days of the NYSHIP termination date. If a dependent child becomes a part time student because the school has canceled a course and the dependent child cannot register in another course to continue full time status, coverage as a dependent student will continue through that semester as if the dependent child was a full time student.

Child Age 19 or Over -- Partially Disabled Students

A partially disabled dependent student between the ages of 19 and 25 taking a reduced course load that is the maximum for that student's capability is eligible; the employee must provide medical documentation, or evidence of an accommodation determination by the school.

Medical Leave for Students Age 19 or Over

If the employee's child is granted a medical leave by the school, health insurance coverage may continue for a maximum of one year from the month in which the student withdraws from classes, plus any time before the start of the next regular semester. The employee must be able to provide written documentation of the leave from the school and the request must be approved by the Department. If the dependent attends a school that does not grant medical leaves of absence, the continuation of coverage may be provided upon submission of documentation from the child's attending physician that the child is unable to attend school due to a medical condition.

Military Service

For purposes of eligibility for health insurance coverage as a student dependent, the employee may deduct one year from their dependent's age for each year of military service up to four years, for service in a branch of the U.S. Military. Students granted eligibility extensions for military service must be dependent upon the enrollee while attending school. The employee must be able to provide written documentation from the U.S. Military.

Certain Students Completing Graduation Requirements

The employee's unmarried dependent children who are age 19 or over but under age 25 who need less than a full time course load to satisfy requirements for graduation may also be eligible. They must:

1. Otherwise qualify;

and
2. Have been a full time student in the term immediately preceding the semester or trimester in which course requirements will be completed;

and
3. Be able to provide a statement from their school or college administrator which verifies that the student needs less than full time study to complete graduation requirements. They continue to be entitled to benefits for up to three months following the end of the month in which they complete course requirements for graduation. At the end of the three

months, the graduated student will have 60 days to apply to the EBD for COBRA continuation of coverage. A dependent child may be granted a second semester of coverage for part time attendance if there are unusual, extenuating circumstances, which, through no fault of the student, prevent that student from completing the course work in one semester of part time study. Requests for this continued coverage must be submitted in writing to the EBD.

Disabled Dependents Age 19 or Over

The employee's unmarried dependent children age 19 or over who are incapable of supporting themselves because of a mental or physical disability acquired before termination of their eligibility for health insurance are eligible. For example, if the employee's child becomes disabled at age 19 or older while covered as a full time dependent student, the child may qualify to continue coverage as a disabled dependent.

If the employee has a child who is enrolled in NYSHIP and qualifies for coverage as a disabled dependent, the employee must provide medical documentation. If the employee anticipates eligibility on this basis, the employee must file a PS-451—*Statement of Disability*. The employee should contact their agency Health Benefits Administrator as soon as possible after enrollment, even if their child is under the age when eligibility would normally terminate through age disqualification.

However, if the employee's disabled dependent child was not enrolled in NYSHIP because the child had other health insurance, and loses the other coverage involuntarily, the employee may apply for disabled dependent child coverage. For the application to be considered, the employee must file a PS-451 as soon as possible following the loss of the other coverage. The employee must provide proof that the disability occurred prior to NYSHIP's standard age disqualification date and that the loss of other coverage was not voluntary.

If the child who is age 19 or over but under age 25 is covered as a full time student, and is disabled or becomes disabled while a full time student, the employee should contact their agency HBA as soon as possible. The deadline for filing a PS-451 is 60 days after the child loses NYSHIP coverage.

Proof of Eligibility

All new enrollees and dependents must provide proof of eligibility to enroll in NYSHIP. The application to enroll or to add a dependent to the employee's coverage will not be processed unless it is accompanied by satisfactory documentation. In situations where certification/re-certification is necessary, some carriers check eligibility on a regular basis while others do so when a claim is filed. Providing false or misleading information about eligibility for coverage or benefits is considered fraud.

Under certain circumstances, the employee may be able to re-enroll a dependent who regains eligibility after a period of ineligibility.