Adoption or Legal Guardianship of a Child

There are a few things you should consider before your adopted or newly acquired child arrives. As with any status change, you have 31 days after the placement of a child in your home due to adoption or legal guardianship to make adjustments and/or changes to your benefits. In addition to a copy of the paperwork placing an adoptive child in your home, or the court order providing legal guardianship, a completed Benefits Change Form, Dependent Information Request Form, and dependent verification documentation must be submitted to your Campus Benefits Office to enroll or make changes to your benefits. If your completed Benefit Change Form, Dependent Information Request Form, and appropriate documents are not received in your Campus Benefits Office within that 31 day period, you will be unable to make changes until the next annual enrollment, unless another qualifying status change occurs during the year. Forms are available at the end of this document.

Adoption or legal guardianship of a child is a "qualifying status change" in terms of your benefits. This means that you can change most of your benefit elections without waiting until the annual NUFlex enrollment period. Once your Benefits Change Form has been submitted to the Campus Benefits Office, no changes will be allowed until the next annual NUFlex enrollment period or a Permitted Election Change Event Occurs. Contact your Campus Benefits Office for assistance with any benefit elections.

The effective date of coverage for a dependent child who is added as a result of adoption will coincide with the earlier of: 1) the date of placement for adoption, or 2) the date of entry of an order granting the adoptive parent(s) custody of the child for the purpose of adoption. Placement generally means when the adoptive parents have taken legal responsibility for the child. The effective date of coverage for a dependent child who is added as a result of legal guardianship is the first of the month following the date of the court order. Premiums will begin on the first day of the month following the event. You will be required to furnish appropriate documentation to verify the Permitted Election Change Event.

Medical Insurance

- You must contact the Campus Benefits Office within 31 days of the adoption or legal guardianship to add the child to your medical insurance policy.
- You may enroll for coverage, or add your newly adopted child, new dependent due to legal guardianship, your spouse, eligible dependent children, and any stepchildren under age 26 to your existing coverage. As stated above, coverage for a dependent child who is added as a result of adoption will coincide with the earlier of: 1) the date of placement for adoption, or 2) the date of entry of an order granting the adoptive parent(s) custody of the child for the purpose of adoption. If you are adding a child for whom you have been granted legal guardianship or adding dependents that were already eligible, coverage for all others is effective the first of the month following the date of the event. If you are newly enrolling in
the medical plan, coverage for all members (including the adopted child or child for whom you have been granted legal guardianship) is not effective until the first of the month following the event.

- You may cancel coverage only when coverage becomes effective under your spouse’s employer’s plan. Proof of the new coverage will be required.
- If enrolling in the medical coverage, or a change in “coverage category” to your existing plan is needed (Employee Only to Employee & Child or Employee & Spouse to Employee & Family), you must complete a Benefits Change Form.
- A Dependent Information Request Form must be completed to add the adopted child or child for whom you have been granted legal guardianship to your medical insurance policy even if you are currently enrolled for Employee & Child or Employee & Family coverage. This form is also required if adding other previously eligible dependents to your medical coverage.
- You may only change a medical “coverage category”. Changes between medical plan “options” are not allowed (i.e., you cannot move from the High Option to the Basic Option).
- For a newly adopted child’s dependent verification documentation, your benefits office must receive a photocopy of the revised birth certificate within 60 days of, and the social security number within six months of, the date the adoption becomes final. For all other dependents being added to the coverage, including a child for whom you’ve been granted legal guardianship, you must provide the dependent verification documents when you submit the Benefits Change Form and Dependent Information Request Form, within 31 days of the legal guardianship.
- If a Dependent Information Request Form and, if applicable, a Benefits Change Form is not completed within the 31-day Permitted Election Change Event period, benefits will not be provided. The adopted dependent child or child for whom you’ve been granted legal guardianship may be enrolled for coverage at the next subsequent annual NUFlex enrollment or when a Permitted Election Change Event occurs.

**Dental Insurance**

- You may add your newly acquired child now or wait until the next annual NUFlex enrollment period.
- Dependents who were previously eligible for coverage may be added to your policy. As stated above, coverage for a dependent child who is added as a result of adoption will coincide with the earlier of: 1) the date of placement for adoption, or 2) the date of entry of an order granting the adoptive parent(s) custody of the child for the purpose of adoption. If you are adding a child for whom you have been granted legal guardianship or adding dependents that were already eligible, coverage for these dependents (including the newly acquired child) is effective the first of the month following the date of legal guardianship.
- You cannot add dental coverage if you are not already enrolled in the plan.
• You may cancel coverage only when coverage becomes effective under your Spouse’s employer’s plan. Proof of the new coverage will be required.

• To add dependent(s) to your coverage, you must submit a Benefits Change Form, Dependent Information Request Form and dependent verification documentation.

• For a newly adopted child’s dependent verification documentation, your benefits office must receive a photocopy of the revised birth certificate within 60 days of, and the social security number within six months of, the date the adoption becomes final. For all other dependents being added to the coverage, including a child for whom you’ve been granted legal guardianship, you must provide the dependent verification documents when you submit the Benefits Change Form and Dependent Information Request Form, within 31 days of the date of legal guardianship.

Vision Care Insurance

• You may add your newly acquired child now or wait until the next annual NUflex enrollment period.

• Dependents who were previously eligible for coverage may be added to your policy. As stated above, coverage for a dependent child who is added as a result of adoption will coincide with the earlier of: 1) the date of placement for adoption, or 2) the date of entry of an order granting the adoptive parent(s) custody of the child for the purpose of adoption. If you are adding a child for whom you have been granted legal guardianship or adding dependents that were already eligible, coverage for these dependents (including the newly acquired child) is effective the first of the month following the date of legal guardianship.

• You cannot add vision coverage if you are not already enrolled in the plan.

• You may cancel coverage only when coverage becomes effective under your Spouse’s employer’s plan. Proof of the new coverage will be required.

• To add dependent(s) to your coverage, you must submit a Benefits Change Form, Dependent Information Request Form and dependent verification documentation.

• For a newly adopted child’s dependent verification documentation, your benefits office must receive a photocopy of the revised birth certificate within 60 days of, and the social security number within six months of, the date the adoption becomes final. For all other dependents being added to the coverage, including a child for whom you’ve been granted legal guardianship, you must provide the dependent verification documents when you submit the Benefits Change Form and Dependent Information Request Form, within 31 days of the date of legal guardianship.

Voluntary Life Insurance

• You may enroll, increase, decrease or cancel voluntary life insurance coverage and/or make changes to your tobacco/nicotine designation.
• If you enroll or increase coverage, you must complete an Assurity Life Insurance Statement of Health Form.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Accidental Death & Dismemberment Insurance (AD&D)

• You may enroll, increase, decrease or cancel AD&D coverage without proof of insurability.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Dependent Life Insurance Spouse

• You may enroll, increase, decrease or cancel Dependent Life Insurance Spouse coverage provided they are not legally disabled.
• If you enroll in or increase coverage, you must complete an Assurity Life Insurance Statement of Health Form.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Dependent Life Insurance Child

• You may enroll, increase, decrease or cancel Dependent Life Insurance Child coverage.
• You may add coverage for your newly eligible dependent in the amounts of $5,000 or $10,000 with no proof of insurability. Coverage for a child age 14 days to 6 months is equal to 10 percent of the above option amounts. There is no life insurance coverage for a child 13 days or less.
• You may provide dependent life insurance coverage for previously eligible dependent children and/or stepchildren under the age of 26 providing they are not legally disabled.
• If you enroll or increase coverage for other dependent children, you must complete an Assurity Life Insurance Statement of Health Form.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Long Term Disability Insurance (LTD)
• You may enroll, cancel, or change your LTD option.
• If you are increasing LTD coverage, or enrolling for the first time, benefits are subject to the 3-12 month pre-existing condition exclusion.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Health Care Flexible Spending Account

• You may enroll or increase your Health Care Flexible Spending Account contribution.
• Contributions may not however, be decreased at this time.
• Only those expenses incurred after the effective date of the change will be covered or reimbursable.
• To make a change to our coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Dependent Care Flexible Spending Account

• You may enroll, cancel, or increase your Dependent Care Flexible Spending Account contribution.
• You may also decrease your contribution or cancel coverage if your spouse is not employed or makes a Dependent Care election under his or her employer's plan.
• To make a change to your coverage, you must submit a Benefits Change Form.
• Coverage changes due to the adoption or legal guardianship of a child will be effective on the first day of the month following the date of the child’s adoption or legal guardianship.

Benefit forms needed to make a benefits change due to an adoption or legal guardianship of a child:

Benefits Change Form
Dependent Information Request Form
Dependent Verification Documentation
Assurity Life Insurance Statement of Health Form

NOTE: This is intended to be a summary of benefits, services and procedures. For full details, contact your Campus Benefits Office.

April 16, 2014