

Directions for Waiving Health Benefits

The Affordable Act requires anyone that lives in NJ to carry medical insurance. Therefore, you must prove you have medical insurance every year to receive the waiver reimbursement.

In the subject line of the email please write **Health Waiver** and attach the proof of coverage letter from the employer or insurance company.

The letterhead **MUST** include:

1. Your first and last legal name
2. The date (must be dated for the current school year)
3. The insurance company who covers you
4. Signature by either the insurance company or employer

A waiver is **NOT**:

- A copy of your insurance card
- A screen shot of your insurance portal showing your benefit summary
- A letter you wrote yourself

Waiver refunds are issued at the end of the school year.

\$2500 medical and \$200 dental (pro-rated if needed)

Email your waiver to health.benefits@edison.k12.ni.us