

Who Can You Cover?



WHO IS ELIGIBLE?

In general, all regular employees who meet the requirements established by the collective bargaining agreements and qualified retirees who have been enrolled in a North Clackamas Health Plan for 24 consecutive months immediately prior to retirement.

You can enroll the following family members in our medical, dental and vision plans.

- Your spouse (the person who you are legally married to under state law, including a same-sex spouse.)
- Your domestic partner is eligible for coverage if you have completed a Domestic Partner Affidavit. Please review the affidavit guidelines. The Cost of Coverage section explains the tax treatment of domestic partner coverage.
- Your children (including your domestic partner's children):
 - o Under age 26 that are a natural child, legally adopted or placed for adoption prior to age 18, step-children or children who have been placed under the legal guardianship of the employee or the employee's spouse. They do not have to live with you or be enrolled in school. They can be married and/or living and working on their own.
 - o Dependent children that are incapable of self-support due to mental or physical incapacity prior to age 26 may remain on coverage with proof of incapacity, if proof is submitted within 120 days of reaching the maximum age.

Please refer to the Summary Plan Description for complete details on how benefits eligibility is determined.

WHEN MUST I ENROLL?

You must enroll within 30 days from the start of eligible position. If coverage is waived, coverage is not available again until the next open enrollment unless, when coverage was initially offered it was waived in writing because of coverage under another group health plan. If the other coverage is lost, employee and/or their dependents may qualify under special enrollment if they apply within 30 days of that loss. If other coverage is COBRA Continuation, special enrollment would only apply after COBRA is exhausted.

Notify Benefits Department within 30 days if you have a qualifying life event and need to add or drop dependents outside of Open Enrollment. Life events include (but are not limited to):

- Birth or adoption of a baby or child
- Loss of other healthcare coverage
- Eligibility for new healthcare coverage
- Marriage or divorce