

Delta Dental, VSP, and CalPERS Medical Eligibility Rules

Rules and Information	Dental/Vision	Medical
Cost to Employee and/or Eligible Dependents	No	Yes
Must Enroll Current Dependents at time of Initial Enrollment	Yes	No
Mandatory Enrollment for Employee	Yes	No
Voluntary Enrollment	No	Yes
Open Enrollment Period	No	Yes
Dependent Audit Scheduled	Yes for 2020	No
Must Enroll within 60 Days of Hire Date or Eligibility Date	Yes	Yes
May Enroll or Add Dependents Any Time during the Year with a 90-day Wait	No	Yes
May Add Dependents if there is a Loss of Other Coverage	Yes	Yes
Dependents will be Automatically Dropped the Last Day of the Month at Age 26	Yes	Yes
May Cancel Coverage or Drop Dependents at Anytime	No	Yes
Must Drop Dependent Children if they get Married or Join the Military	Yes	No
Must Drop Spouse the Month Divorce is Final	Yes	Yes
Must Drop any Dependent Once No Longer an Eligible Dependent	Yes	Yes
Dependent Children Must be Full-Time Students	No	No
May Change Plans if Moving to a New Address	No	Yes
Eligible Dependents		
Spouse, Domestic Partner, and Children up to Age 26	Yes	Yes
Disabled Dependent Children Beyond Age 26 if Requirements Met	Yes	Yes
Unmarried Children up to Age 26	Yes	Yes
Married Children up to Age 26	No	Yes
Spouse and/or Children in the Military	No	Yes
Children of which you are the Guardian or Parent/Child Relationship	Yes	Yes

Exceptions and Special Requirements

- Children are **not required** to be added to your dental and vision benefits at birth. You may add children up to age 4 and coverage would begin the 1st of January following enrollment (i.e. your child turns age 3 on December 27, **2017** and you wait until January 2, **2018** to enroll, coverage would be effective January 1, **2019**). If you add your child within 60 days of birth, coverage begins the 1st of the following month. Otherwise, coverage begins on January 1st if added up to age 4.
- Domestic partners must be registered with the Secretary of State. Same-sex domestic partners must be over age 18 and if opposite-sex, one partner must be age 62 or older. **Effective January 1, 2020 – no longer need to be 62 or older.**
- Documents required: birth certificate for children, marriage certificate, registration of domestic partnership, court documents, etc. must be **provided at time of initial enrollment** and a copy will be placed in your benefits file.
- Documentation completed by a physician for disabled dependent children must be submitted and approved prior to age 26. Allow plenty of time to have the appropriate paperwork completed by a physician and approved to continue past age 26.
- Eligibility date would be: 1) the day you become benefit-eligible (i.e. increased to .50 FTE or greater); 2) the date of marriage; 3) the date other coverage is ending; 4) date of birth (for a child);
- If you want to enroll in medical outside of Open Enrollment without a qualifying event (loss of coverage, etc.), there is a 90-day wait and coverage begins the first of the month following the 90-day wait (90-days starts counting from receipt of forms).
- If you do not enroll all current, eligible dependents in dental and vision when hired, you may not add them unless they lose other coverage or during the dependent audit done every five years (next audit is in 2020). Dental and Vision benefits are a District-paid benefit at no cost to employees and their eligible dependents.
- Appropriate paperwork must be completed if adding a child (other than your own) to your benefits under the Parent/Child Relationship. This must be renewed annually through CalPERS or the child will be dropped from your medical benefits.
- For enrollment or changes in medical, dental or vision, all documentation is required prior to processing. If all dependent documents are not received by the Benefits office within the 60 days, the dependents without the proper documents (for example, birth certificate, marriage certificate, etc.) will not receive benefits and only the dependents with required documents will be processed. Documentation includes enrollment forms, birth certificates, marriage certificates, letter of credible coverage (proof of loss of coverage) showing the last day of medical, dental or vision coverage, court papers, etc. The timeline for effective dates (for example, coverage is lost on December 31 and the original enrollment form is not received until January 15 then coverage would not begin until February 1) and 90-day waiting period will not begin until all original enrollment forms have been received in the Benefits Office. All required documents must be received before the enrollment effective date.