NEWBORN ENROLLMENT

Obtaining Health Insurance For Your Newborn

Things you should <u>KNOW</u> before obtaining coverage for your newborn:

- Insurance companies will not automatically enroll your newborn to your health insurance. You must notify the Benefits Department upon the birth of your newborn to avoid your newborn not receiving benefits.

- For example, If you are enrolled in the Premier Plus, Employee Only Medical Plan (District paid plan), once you enroll your newborn, your plan will be changed to Premier Plus, Employee + 1 Dependent (Employee Paid Plan).

<u>Newborn Notification Timeline:</u> You can add your newborn to your plan, if the notification period does not exceed the 60-day grace period. Effective March 1, 2007, in compliance with FSS 641.31 (9), * newborn coverages is administered as follows:

- **31 days** – Notification sent to the Benefits Department within 31 days from date of birth will avoid premium costs being billed from the date of birth.
  (For example, if the child is born February 9th, the 31-day grace period to notify the Benefits Department extends into March; therefore, the initial payment will be due April 1 to cover the newborn from the date of birth).
- **32-60 days** – Notification sent to the Benefits Department within 32-60 days from date of birth will result in premium costs being billed from the date of birth.
  (Reference example from above. In this instance, premium costs will be due to cover the full month of February)
- **Past 60 Days** – Notification sent to the Benefits Department past 60 days is considered late; therefore, you will have to wait until the next open enrollment period in October to add your newborn.

Things you should <u>DO</u> when you are ready to enroll your newborn:

- Complete the newborn form(s) in the Newborn Enrollment Packet and provide any requested documents, such as the birth certificate. Please ensure that you use the newborn's date of birth as the effective date of coverage.

- Once Benefits staff approves your Newborn Enrollment Packet, an invoice will be emailed and mailed to your address on file in SAP. Please adhere to the deadline date and the required premium cost(s)on the invoice. Failure to do so will result in coverage cancellation from the date of birth, and you will be responsible for **<u>ALL</u>** newborn hospital costs.

Return the completed Newborn Enrollment Packet & Documents to:
billingpremiums@browardschools.com

Revised 1-6-2025.

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
NEWBORN ENROLLMENT FORM

I UNDERSTAND THAT COVERAGE WILL BE EFFECTIVE, AS OF THE DATE OF BIRTH OF MY CHILD UPON RECEIPT OF THE APPLICABLE PREMIUM IN THE BENEFITS DEPARTMENT. FAILTURE TO REMIT THE PROPER PREMIUM BY THE INDICATED DUE DATE WILL RESULT IN CANCELLATION OF COVERAGE BACK TO THE CHILD'S DATE OF BIRTH. PLEASE NOTE, IF CANCELLED DUE TO NONPAYMENT WHILE ON LEAVE, YOU WILL NOT BE ALLOWED TO REINSTATE YOUR DEPENDENT COVERAGE UPON RETURNING TO WORK. THE NEXT OPPRTUNITY WILL BE DURING THE OCTOBER OPEN ENROLLMENT PERIOD.

EMPLOYEE PERSONAL DATA

Employee Name: _____ Personnel #: _____

Current Address: _____ City, State & Zip: _____

Contact Phone: _____ SSN (Last 4 Digits): _____

HEALTH PLAN & RATES SELECTION

NOTE**:** Your newborn must be enrolled in your current medical plan. For example, if you are currently enrolled in Premier Plus HMO 1 Dependent, your new plan will be, Premier Plus HMO Employee + Family; therefore, you would place an (x) in the box next to 2 or more dependents.

(Please place an (X) next to the plan your newborn will be enrolled in)

Medical Plan	Select (X) 1 Dependent	1 Dependent Premium Cost(s) (2025 Rates	Select (X) 2 or more Dependents	2 or more Dependent Premium Cost(s) (2025 Rates)
Premier Plan HMO		$ 998.08		$ 1,753.44
Premier Plus Plan HMO		$ 1,140.88		$ 2,005.40
Premier Choice HSA		$ 727.84		$ 1,368.56

NEWBORN/DEPENDENT PERSONAL DATA

Newborn/Dependent Name (First, Middle, Last)	DOB	*Rel Code	Sex M/F

Please select the related dependent code (Rel): SP-Spouse, **BC**-Birth Child, **SC**-Stepchild, **AC**-Adopted Child, **FC**-Foster Child, **DP**-Domestic Partner, **DPC**-Domestic Partner Child, **LGC**-Legal Guardian Child/Grandchild, **GC**-Grandchild (newborn child of an unmarried dependent child).

_____ _____ _____

Employee Name (Print) Employee (Signature) Date

FOR OFFICE USE ONLY

Place an (X) in the box next to the form of document(s) provided and used for verification.

Birth Certificate	Marriage Certificate	Legal Guardian Records	Tax Returns (3 yrs. filed Income Tax-Returns)	Adoption Records

_____ _____ _____

Benefits Staff (Print) Benefits Staff (Signature) Date

Revised 1-6-2025.

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
BENEFITS DEPENDENT VERIFICATION
ACTIVE EMPLOYEES

Frequently Asked Questions (FAQ)

1. Q. What is Dependent Verification?

A. Dependent Verification is the process of ensuring all enrolled dependents meet the established dependent eligibility criteria.

2. Q. Why is the District conducting this process?

A. In a continuous effort to improve the managing of its Benefits Program, the District requires the completion of the Dependent Verification Process to ensure all dependents enrolled in the Health, Dental and/or Vision Plans, meet the District's established Dependent Eligibility Criteria.

3. Q. Who is required to provide this verification documentation?

A. All Employees, Retirees and COBRA Participants who desire to enroll a **new unverified dependent(s)** into the Health, Dental and/or Vision Plan(s).

4. Q. Who is not required to provide this verification documentation?

A. All Employees, Retirees and COBRA Participants who **verified** (previously submitted a completed Dependent Verification Form and supporting documentation to the Benefits Department) their currently enrolled or previously enrolled dependent(s). Completion of this process is **not required** again.

5. Q. Who is considered an eligible dependent?

A. Eligible dependents are defined as:

- Spouse
- Domestic Partner
- Child(ren) – enrollment until the end of the month the child(ren) turns age 26
    - Biological Child
    - Stepchild
    - Foster Child
    - Domestic Partner's Child (Domestic Partner **must** be enrolled)
    - Child for whom the Employee is a Legal Guardian
    - Adopted Child
    - Child placed with the Employee for adoption
    - Totally disabled Adult Child (documentation from Social Security required)
    - Unmarried Dependent's Child (a child/dependent of an unmarried dependent may be enrolled up to eighteen (18) months from the date of birth or until the end of the month the unmarried dependent turns age 26; whichever comes first)
    - Adult Child Ages 26-30

Frequently Asked Questions (FAQ)

6. Q. Do I need to verify my Life Insurance Beneficiaries?

A. No. The verification process is **not** applicable for beneficiaries.

7. Q. Can I enroll my grandchild(ren)?

A. You may enroll your grandchild(ren) if you have been granted Legal Guardianship. You must provide the Legal Guardian Court Document(s) to the Benefits Department.

You may also enroll a child (your grandchild) of an **unmarried dependent** who is currently enrolled in your Health Plan, if applicable, and if the criteria are met, as noted in the Eligible Dependent Section (question #5) on page one (1).

8. Q. How do I verify my dependent(s)?

A. In order to verify your dependent(s), you **must** first add your dependent's information in the "Dependent and Beneficiary" section in Cloud Benefits. The date of birth and the social security number are required for each dependent. Upon completion, **send an email to benefits@browardschools.com by 12:00 p.m. on Wednesday, October 22, 2025**, with the **required Dependent Verification document(s)**, as noted in the chart at the end of this FAQ, along with a **completed Dependent Verification Form**, which is also included in this FAQ. This will allow staff time to review, verify and respond to you, should any additional information be required; ensuring that you will have enough time to add your eligible dependent(s), no later than **Friday, October 24, 2025 through Cloud Benefits**.

Please enter **Dependent Verification** in the subject line of your email. This process **MUST** be completed **first** before you are permitted to enroll your dependent(s) utilizing the Cloud Benefits Module during the Open Enrollment period or through the Status Change process outside of the Open Enrollment period.

Staff will review the document(s), verify eligibility, record the information, and provide you with an email confirmation for your records. Please ensure you redact any social security numbers on the document(s) you are emailing such as Tax-Returns.

9. Q. What document(s) will I need to submit to verify my dependent(s) that I would like to add during Open Enrollment?

A. Some of the required documents include but not limited to Marriage Certificate (for Spouses), Birth Certificate, Adoption, or Legal Guardianship Records and/or the last three (3) consecutive years of filed Tax-Returns (redact social security numbers). Please note, the Benefits Department's Staff **WILL NOT** keep your Tax-Returns.

Please refer to the Dependent Verification Documents Chart at the end of this FAQ for a listing of additional required verification documents.

Frequently Asked Questions (FAQ)

Documents written in languages other than English **MUST** be translated into English by a certified Translation Company. You may log-on to www.naces.org to select an accredited translation company. The closest company in South Florida, that provides this service is:

Josef Silny
7101 SW 102nd Avenue
Miami, FL 33173
305-273-1616
www.jsilny.com

10. Q. When do I need to provide the verification document(s)?

A. The timeframe for you to provide the required Dependent Verification document(s) to the Benefits Department is listed below:

- **Newly Hired Benefit Eligible Employees**
  As a newly hired employee, you are required to submit the Dependent Verification document(s) **prior** to completing your enrollment for any applicable dependent(s) into Cloud Benefits. You have up to thirty (30) days from the Benefits Notification Email to select your benefits, including completing your Dependent Verification Process **first**, in order to add your dependent(s) to your plan(s). You must send by **email to newhire@browardschools.com**, with the **required Dependent Verification document(s),** as noted in the Dependent Verification Chart at the end of this FAQ, along with the **completed Dependent Verification Form**, which is included in this this FAQ. Please enter **Dependent Verification** in the subject line of your email.

  Failure to meet this deadline noted in the Benefits Notification email, will result in your dependent(s) not being added to your plan(s). You will have to wait until the next available Open Enrollment period, which will be the following October, in order to add your dependent(s) to your plan(s). Please note, if you verify and enroll a dependent(s) during Open Enrollment, their coverage will take effect, January 1st of the following year.

- **Enrollment of Unverified Dependent(s) During Open Enrollment**
  If you are enrolling an unverified dependent(s) during the Open Enrollment period of **October 1 through October 24, 2025**, you **must** first add your dependent's information in the "Dependent and Beneficiary" section in Cloud Benefits. The date of birth and the social security number are required for each dependent. Upon completion, send an **email to benefits@browardschools.com by Wednesday, October 22, 2025**, with the **required Dependent Verification document(s),** as noted in the Dependent Verification Chart at the end of this FAQ, along with the **completed Dependent Verification Form**, which is included in this FAQ. This will allow staff time to review, verify and respond to you, should any additional information be required; ensuring that you will have enough time to add your eligible dependent(s), no later than **Friday, October 24, 2025 through Cloud Benefits**.

ACTIVE EMPLOYEES

Frequently Asked Questions (FAQ)

This process **MUST** be completed **first** before you are permitted to enroll your dependent(s) through the Cloud Benefits Module by the **Open Enrollment deadline of Friday, October 24, 2025**. As a reminder, staff will review the document(s), verify eligibility, record the information, and provide you with an email confirmation for your records. If you verify and enroll a dependent(s) during Open Enrollment, the coverage will take effect**, January 1, 2026**.

Please refer to the Dependent Verification Documents Chart at the end of this FAQ for a listing of additional required verification documents.

Documents written in languages other than English **MUST** be translated into English by a certified Translation Company. You may log-on to www.naces.org to select an accredited translation company. The closest company in South Florida, that provides this service is:

Josef Silny
7101 SW 102nd Avenue
Miami, FL 33173
305-273-1616
www.jsilny.com

Please note, completion of the Dependent Verification Form **only does not** constitute enrollment of your dependent(s). You **MUST also complete the online enrollment process**, utilizing the **Cloud Benefits Module** by the **Open Enrollment deadline of Friday, October 24, 2025**. If you verify and add a dependent(s) during Open Enrollment, their coverage will take effect, **January 1, 2026**.

11. Q. What happens if I do not send an email to benefits@browardschools.com by Wednesday, October 22, 2025, with the required Dependent Verification document(s), along with the completed Dependent Verification Form, for the dependent(s) I desire to enroll through Cloud Benefits by Friday, October 24, 2025?

A. Failure to meet this deadline, you will have to wait until the next Open Enrollment period in October 2026 in order to enroll your dependent(s) into your plan(s). Please note, if you verify and enroll a dependent(s) during Open Enrollment in October 2025, their coverage will take effect, January 1, 2026, unless they experience a mid-year qualifying event.

12. Q. How can I add a dependent after the Open Enrollment period has ended?

A. You can add a dependent(s) outside Open Enrollment, if you and/or your dependent experience a change in status or qualifying event.

ACTIVE EMPLOYEES

Frequently Asked Questions (FAQ)

The School Board intends to provide you with the broadest ability to make mid-year election changes permitted in accordance with Internal Revenue Service (IRS) Section 125 rules. To summarize those IRS rules, you cannot change your level of participation unless you experience a change in status/qualifying event and notify the Benefits Department **within 30 days (60 days for government sponsored health coverage)** of such event.

Please view a listing of the qualifying events on the following page.

A Change in Status is defined as one (1) of the following events:

- **Marital Status** – marriage, divorce or death of a spouse
- **Change in the Number of Tax Dependents** – birth, death or adoption
- **Change in Status of Employment** – commencement or termination of employment
- **Gain or Loss of Dependent's Eligibility** – coverage requirements under the plan are no longer satisfied
- **Change in Residence** – a gain or loss of eligibility due to change of residency that is outside of the covered service area
- **Judgment, Decree or Court Order** – case specific
- **Open Enrollment Under Other Employer's Plan** - when your dependent makes an Open Enrollment change under their employer's plan
- **Entitlement to Medicare, Medicaid or other government sponsored health coverage (not including Marketplace/ObamaCare coverage)** - gain or loss of coverage. You have **60 days** to notify the Benefits Department for this event only.
- **Marketplace/ObamaCare Coverage (HealthCare.gov)** – the **30-day rule applies** for insurance acquired through the Marketplace/ObamaCare.

Please note, gain or loss of coverage through individual policies is NOT applicable unless the coverage is through the Marketplace/ObamaCare (Healthcare.gov).

Cancellation of coverage due to non-payment is not considered a "qualifying event".

You can obtain further information on this process by clicking on the following link https://www.browardschools.com/cms/lib/FL01803656/Centricity/Domain/12648/Change_in_Status_Outside_Annual_Open_Enrollment.pdf

13. Q. What if I do not have any dependent(s) currently enrolled, but would like to possibly add my dependent(s) during Open Enrollment next year. Can I present the verification document(s) to the Benefits Department prior to enrolling my dependent(s)?

A. Yes, you can send an **email to benefits@browardschools.com**, with the **required Dependent Verification document(s),** as noted in the Dependent Verification Chart at the end of this FAQ, along with the **completed Dependent Verification Form**, which can be found at the end of this FAQ. The Benefits Department's Staff will review the document(s), verify eligibility, record the information, and provide you with an email confirmation for your records.

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
BENEFITS DEPENDENT VERIFICATION
ACTIVE EMPLOYEES

Frequently Asked Questions (FAQ)

DEPENDENT VERIFICATION REQUIRED DOCUMENTS

We have listed the most commonly required supporting documentation for various types of dependent coverage. This list may not be all inclusive. **The proof must substantiate the relationship.** You **must** supply the document(s) to the Benefits Department by the applicable required deadline.

COVERED DEPENDENT	VERIFICATION DOCUMENTS
Legal Spouse	• Government-issued Marriage Certificate or • Last three (3) years of filed Income Tax-Returns. First page only and redact the SS#s.
Domestic Partner Palm Beach, Broward or Miami-Dade Residents; Non Tri-County Residents	• Proof of Domestic Partner Registration (county). • Please visit the Benefits Department's website at www.browardschools.com/benefits and click on the "Documents" link in order to retrieve and review the Domestic Partner Enrollment Form for completion.
Birth Child Maximum Age 26	• Government-issued Birth Certificate (**birth registration cards are not accepted**). Parent's name(s) must be on the Birth Certificate, or • Last three (3) years of filed Income Taxes, listing child(ren) as dependent(s). First page only and redact the SS#s.
Adopted Child Maximum Age 26	• Legal adoption documents naming employee (subscriber) as parent. • If a spouse (not employee) is the adoptive parent, a government-issued Marriage Certificate. is also required.
Stepchild Maximum Age 26	• Both the government-issued Marriage Certificate and government-issued Birth Certificate **(birth registration cards are not accepted)**.
Domestic Partner's Child Maximum Age 26	• Government-issued Birth Certificate **(birth registration cards are not accepted)**. Domestic Partner **must** also be enrolled.
Legal Guardianship/ Custody	• Government-issued Birth Certificate **(birth registration cards are not accepted)**. • Court documents naming employee as Legal Guardian/Custodian. • If spouse (not employee) is the guardian/custodian, a government-issued Marriage Certificate is also required.
Grandchild from Birth to Age 18 Months or Until Adult Child Reaches Ages 26 (whichever is less)	• Government-issued Birth Certificate **(birth registration cards are not accepted)** of grandchild. • Government-issued Birth Certificate **(birth registration cards not accepted)** of covered dependent birth parent who is also enrolled in the plan.
Disabled Adult Child	• Government-issued Birth Certificate **(birth registration cards are not accepted)**. • Social Security document deeming the child disabled **prior** to turning 26 years old.
Unmarried 26 Years or Older Over-Aged Adult Children	• Government-issued Birth Certificate **(birth registration cards are not accepted)**. • Copy of Student's Schedule or Florida State issued ID. • To be eligible for enrollment the Adult Child **must**: • be unmarried • have no dependents • have no other major medical insurance coverage or entitled to Medicare (Title XVIII of the Social Security Act)