# How Do I Enroll?

Open Enrollment is your annual opportunity to review your coverage and make changes to your benefits for the upcoming calendar year, unless you experience a Qualified Life Event during the year. You can enroll in benefits October 26th - November 15, 2026 to be effective January 1, 2027.

Before you enroll, please review this guide so that you can make informed choices for you and your family.

Your 2027 coverage will be effective January 1 - December 31, 2027 provided that your employment status does not change.

| For more information go to: | To submit forms send to: |
|---|---|
| https://www.mamkschools.org/departments/business-office | benefits@mamkschools.org |

# Who's Eligible for Benefits?



You are eligible to participate in benefits **on your first day of work** if you are a full-time:

- Teacher, Teaching Assistant or Nurse
- Clerical Employee, Teacher Aide or CSEA Non Teaching Employee
- Administrator or an eligible Unaffiliated Employee

You are also able to enroll your eligible dependents, which include your spouse and dependent children.

Children are eligible for health care coverage until the end of the month in which they attain age 26.

If you are covering an eligible dependent for the first time, you will need to provide documentation to prove dependency. Failure to provide documentation may result in the inability to cover your dependent(s).

To submit your documentation: **Email:** benefits@mamkschools.org

# Benefit Eligibility Requirements

| Eligibility Category | Required Documentation |
|---|---|
| **Spouse**<br>Individual to whom you are legally married | A copy of the marriage license. |
| **Children**<br>Dependent child under the age of 26, including: | |
| **Biological Child** | **Biological Child –** Copy of the child's state issued birth certificate showing the employee's name as parent. If your child is under six months old, you may provide the proof of birth provided by the hospital. |
| **Adopted/Foster Child** | **Legal Guardian, Adopted or Foster Child** – Final Court Order with presiding judge's signature and seal, or Adoption Final Decree with presiding judge's signature and seal. |
| **Stepchild** | **Stepchild** – Copy of the child's state issued birth certificate showing the employee's spouse's name as a parent or the first page of your most recent tax return.<br>AND<br>A copy of the marriage certificate showing the employee and parent's name. |

# Waiving Health Coverage

If you are currently enrolled in another health insurance plan and wish to waive coverage through MUFSD and collect the Health Waiver Buyout Payment you must complete the UMR Employee Enrollment / Change Form. You are not eligible for the Health Waiver Buyout Payment if you are covered as a dependent on another Mamaroneck UFSD employee's plan.

You must elect Waive on Page 1 and complete the Waiving Coverage section on Page 2.

Please note that this form must be completed **EACH calendar year** during open enrollment in order to remain eligible for the buyout payment.

# Making Changes During the Plan Year

During the plan year, you can change your benefit coverage only if you, your spouse or your eligible dependents experience a Qualified Life Event such as:

- A change in your legal marital status, including marriage, divorce, death of your spouse or annulment.
- A change in the number of your tax dependents through birth, death, adoption or placement for adoption.
- Termination or commencement of employment by you, your spouse or your dependent.
- A change in your work schedule, such as a reduction or increase in hours by you, your spouse or your dependent that would make you eligible or ineligible for benefits.
- Your dependents' ability or inability to satisfy dependent eligibility requirements.
- Your receipt of a qualified medical child support order or letter from the Attorney General ordering you to provide — or allowing you to drop — medical coverage for a child.
- Changes made by a spouse or dependent child during an Open Enrollment period with another employer.
- If you, your spouse or dependent child becomes eligible or ineligible for Medicare or Medicaid.



**Important:** If you have a Qualifying Life Event during the year, you have 30 days from the date of the event to make changes to your benefits. If you miss the 30-day deadline, you will not be able to make a change until the next Open Enrollment period. If you were not affected by any of the changes above, you will not be able to change your elections until the next Open Enrollment period.

Should you have a life event please e-mail benefits@mamkschools.org