

MEDICAL AND DENTAL INSURANCE BENEFITS POLICY

All employees are responsible to notify the Monroe County Department of Human Resources of any changes that will affect their medical and dental insurance benefits.

- **Monroe County does not allow double medical coverage.** A letter of cancellation of the non-Monroe County policy is necessary to activate Monroe County coverage either at the time of hire, open enrollment or when the non-Monroe County coverage has been canceled.
- **Full time new hires** that choose to enroll in one of Monroe County's health insurance plans at the time of hire will be eligible for medical and dental insurance effective the first day of the month following their hire date, so long as they provide all required information and documentation to the Human Resources Department prior to the first of the month that coverage is to begin.
- **Required documentation for enrolling** in one of Monroe County's medical plans or dental plan includes the following, if applicable:
 - Marriage Certificate
 - Birth Certificate for Dependent Children
 - Social Security Card for Spouse
 - Completed Enrollment Form
- **Coverage will not be provided until all required information and documentation (listed above) is received by the Human Resources Department.** Employees must provide the required documentation within 60 days of their eligibility for benefits, or they will be required to wait until the next open enrollment period to apply for these benefits. Coverage is effective prospective from the approval date only and cannot be made retroactive.
- **Employees** can join Monroe County's available medical and dental plans outside of the open enrollment period if, due to certain circumstances beyond their control ("a qualifying event"), they will no longer have their previous coverage. To do so they must submit required documentation within 60 days of the date of the qualifying event. Examples of qualifying events would be: a change in spouse's job status and coverage is no longer offered through their group, or spouse is no longer employed.
- **Dependents** include spouse, biological and/or step-children. To add adopted children, you must complete a medical application, an adoption form and submit legal adoption documentation. When adding a grandchild or child that you have legal guardianship of, you must complete a medical application, a foster dependent form and submit legal documentation which states that you are responsible for 100% of the support for the child. All forms must be submitted to the Department of Human Resources for processing.
- **Dependents** will be removed from coverage at age 19 if they are not full-time students (12 credit hours per semester). If they remain full-time students, they can stay on the plan until the end of the month in which they graduate or age 23,

whichever comes first. If a dependent is no longer a full-time student before they turn 23, it is your responsibility to notify the Department of Human Resources of this change. Handicapped dependents may remain on the plan as long as a Handicapped Dependent Application is completed and submitted to the Department of Human Resources.

- **Newborns** may be added to your medical plan effective as of their birth date as long as the dependent information is received by application in the Department of Human Resources within 60 days of the birth. If the application is received after 60 days of birth date, the newborn will be added the first of the following month in which the completed application is received.
- **Marriage** - new spouses and their children may be added to your medical plan with coverage effective on the marriage date, provided that the completed application is received in the Department of Human Resources within 60 days of the marriage date. If the application is received after 60 days of the marriage date, the spouse and children will be added the first of the following month in which the completed application is received. A copy of the marriage certificate must be attached to the application. If the new spouse or children have medical coverage, a cancellation letter from the previous group must also be submitted.
- **Divorce** - the ex-spouse must be removed from coverage effective the day of the divorce to avoid any expenses to the employee and/or the County. The employee is responsible for submitting a completed application to the Department of Human Resources requesting removal of their ex-spouse from coverage under their plan.
- **No Pay Leaves** – during no-pay leaves, you will be responsible for the full premium of your medical and/or dental insurance. If you choose not to pay the full premium, your insurance will be canceled and it will be your responsibility to complete new applications to reinstate them. The reinstatement will be in effect on the first of the month following the date you return from leave, as long as the application is received in the Department of Human Resources before the end of the month in which you return. If medical and/or dental insurance applications are not received by the end of the month in which you return, you will have to wait until open enrollment to sign up for these benefits.