PASSHE

DOCUMENTATION REQUIREMENTS TO CONFIRM DEPENDENT ELIGIBILITY
PASSHE ACTIVE EMPLOYEE HEALTH CARE PROGRAM

If required documentation is not provided within 60 days of the date of hire or within 60 days of the date of a life event change, the dependent(s) will be removed from coverage retroactively to the date of their enrollment. COBRA benefits will not be offered as the dependent was not deemed eligible for coverage. If claims were incurred for an ineligible dependent, restitution will be required.

DEPENDENT	REQUIRED DOCUMENTATION	POSSIBLE RESOURCES TO OBTAIN DOCUMENTATION
Spouse	• Marriage Certificate (this is not the certificate provided from the official conducting the ceremony) • Affidavit attesting to the existence of marriage performed outside of the United States if a foreign marriage	• County courthouse that issued original marriage certificate. A list of Pennsylvania County Courthouses can be found at www.health.state.pa.us under Health Statistics and Vital Records. • Foreign Marriages Affidavit available from university human resources office
Same-sex domestic partner (domestic partner) ✸	• Same-sex Domestic Partnership Certification Form	• Same-sex Domestic Partnership Certification Form available from university human resources office
Child(ren) by birth	• Birth certificate ❖ If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• For Pennsylvania births, birth certificates are available from the PA Department of Health, Division of Vital Records and can be requested by fax, mail, or online at www.health.state.pa.us - Fee is $10. • Many states allow you to order a new birth certificate from their website. Access to other state websites can be linked through http://www.cdc.gov/nchs/w2w.htm • Attestation Form available from university human resources office
Child(ren) by adoption	• Court approved adoption order **OR** • Placement letter from court/adoption agency for pending adoptions If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• County courthouse that issued final adoption order • County court/adoption agency that issued placement letter • Attestation Form available from university human resources office
Child(ren) by legal guardianship	• Court or agency order establishing guardianship **AND** • Affidavit of Residence and/or Dependency for Other Children Form If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• County courthouse/agency that issued guardianship order • Affidavit of Residence and/or Dependency for Other Children Form available from university human resources office • Attestation Form available from university human resources office

Stepchild(ren)	• Birth certificate ❖ **AND** • Marriage certificate If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• For Pennsylvania births, birth certificates can be obtained from the PA Department of Health, Division of Vital Records and can be requested by fax, mail or online at www.health.state.pa.us - Fee is $10. • Many states allow you to order a new birth certificate from their website. Access to other state websites can be linked through http://www.cdc.gov/nchs/w2w.htm • County courthouse that issued original marriage certificate. A list of Pennsylvania County Courthouses can be found at www.health.state.pa.us under Health Statistics and Vital Records. • Attestation Form available from university human resources office
Same-sex Domestic partner 's child(ren) by birth ✸	• Birth certificate ❖ **AND** • Same-sex Domestic Partnership Certification Form • Affidavit of Residence and/or Dependency for Other Children Form If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• For Pennsylvania births, birth certificates can be obtained from the PA Department of Health, Division of Vital Records and can be requested by fax, mail or online at www.health.state.pa.us - Fee is $10. • Many states allow you to order a new birth certificate from their website. Access to other state websites can be linked through http://www.cdc.gov/nchs/w2w.htm • Same-sex Domestic Partnership Certification Form available from university human resources office • Affidavit of Residence and/or Dependency for Other Children Form available from university human resources office • Attestation Form available from university human resources office
Same-sex Domestic partner's child(ren) by adoption ✸	• Court approved adoption order **OR** • Placement letter from court or adoption agency for pending adoptions **AND** • Same-sex Domestic Partnership Certification Form • Affidavit of Residence and/or Dependency for Other Children Form If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• County court that issued final adoption order • County court or adoption agency that issued placement letter • Same-sex Domestic Partnership Certification Form available from university human resources office • Affidavit of Residence and/or Dependency for Other Children Form available from university human resources office • Attestation Form available from university human resources office
Domestic partner's child(ren) by legal guardianship ✸	• Court or agency order establishing guardianship **AND** • Affidavit of Residence and/or Dependency for Other Children Form **AND** • Same-sex Domestic Partnership Certification Form If the child is over age 19, you also must complete an **Attestation Form** attesting that the child does not have coverage available through their own employer (or through their spouse's employer if married)	• County court that issued guardianship order • Same-sex Domestic Partnership Certification Form available from university human resources office • Affidavit of Residence and/or Dependency for Other Children Form available from university human resources office • Attestation Form available from university human resources office
Disabled dependent	• Will be verified by health plan vendor	• Health Plan Vendor

❖*If document was generated outside of US and is not in English it must be translated and certified by translator.*
✸ ***applies only to Faculty, Non-faculty Coaches and Non-represented employees***