



## Frequently Asked Questions

### Who qualifies as an eligible dependent?

- Your lawful spouse as defined by Tennessee law;
- Any child of yours who is:
  - Less than 26 years old;
  - 26 or more years old, unmarried, and primarily supported by you and incapable of self-sustaining employment by reason of mental or physical disability which arose while the child was covered as a Dependent under this Plan or while covered under a dependent under a prior plan with no break in coverage.
  - The term “child “ means your natural child or legally adopted child; the term child also includes:
    - Your stepchildren if they are actually dependent upon you for support and maintenance and live with you in a permanent parent-child relationship.
    - A legally adopted child, including that child from the first day of placement in your home regardless of whether the adoption has become final, provided that the child has not attained age 18 as of the date of such adoption or placement for adoption and a petition for final decree of adoption has been duly filed and is pending before the court. Adoption must be confirmed by a copy of a final decree from the court.
    - Your dependent children who do not reside with you due to a legal separation or divorce decree which requires you to provide coverage.
    - A child for whom you have been ordered permanent custody and guardianship by a court of law (a copy of the court order is required to establish eligibility).
    - Any other child related to you by blood or marriage and dependent upon you by court mandate for support or coverage.

### What is Proof of Joint Ownership?

Proof of Joint Ownership (POJO) is a validation of the continued commitment of your marital relationship. Valid forms of POJO for the verification include: *(must be dated no later than 90 days prior to your effective hire date)*

- **Employee’s Federal Tax Return:** Acceptable Documentation: Includes Forms 1040, 1040A and 1040EZ (both pages required).
- **Your joint mortgage statement:** listing both you and your spouse, matching the address you have on file with the Shelby County Employee Benefits Office.
- **Your joint banking statement or utility bill:** listing both you and your spouse, matching the address you have on file with the Shelby County Employee Benefits Office. (financial and account information may be marked out);
- **Your current lease agreement:** listing both you and your spouse, matching the address you have on file with the Shelby County Government Employee Benefits Office, with lease terms ending after your date of response, and including your signatures as well as the leaser/landlord signature(s). Leases ending before your date of response or month-to-month leases will not be accepted.
- **If no joint documentation:** must submit any of the above in employee’s and spouse’s name shown separately at same address.

### How can I obtain lost documents required to prove my dependent’s eligibility status?

You may contact the government office in the county or state in which the event took place (i.e., birth, marriage, etc.) Most offices will mail a replacement document within five business days for a nominal fee. For a more immediate response, you may visit the county or state office to obtain the document the same day. **Please make sure you know what information you will need to present in order to obtain the documents prior to visiting the county or state office.** You may also obtain documents online by visiting [www.vitalcheck.com](http://www.vitalcheck.com). This web site is used by every U. S. state to process vital record requests and also has links to sites where you can request vital records from foreign countries or for American citizens born abroad. The average turnaround time for requests is three days, and requested documents are marked with the Clerk of Courts seal.

# **PROOF OF RELATIONSHIP FOR NEW HIRES**

*(For Family Coverage)*

As a new employee of Shelby County Government, I will provide within 15 days from the date of employment all the required Proof of Relationship documents (i.e., marriage license, proof of joint ownership, birth certificate(s) listing the parents, or court documents signed by a judge) for family health coverage on my dependents to the Employee Benefits Office for approval by the Plan Administrator.

I understand that if these documents are not received by Employee Benefits within 15 days from the date of employment that my dependent(s) whose document(s) was not provided will not be covered. I understand that I will have to wait until open enrollment to enroll dependent(s), unless I have a status change.

If these documents are not received within the required 15 days, I understand that my coverage will be reduced to single coverage, except when Proof of Relationship documents have been received on one or more dependents. (For example, if you are enrolling yourself, spouse, and child and you do not provide the marriage license to verify spouse, the spouse will not be covered. Only you and the child will be covered, and you will be paying for family coverage.)

## **IMPORTANT:**

**It is the employee's responsibility to notify the Employee Benefits Office of ineligible dependents and complete proper forms to prevent an incorrect premium deduction in which the employee will not be reimbursed.**

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**Employee Signature**

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**Social Security Number**

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**Telephone Number**

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**Date**