

DOCUMENTATION REQUIRED FOR SHBP/SEHBP DEPENDENT ELIGIBILITY AND ENROLLMENT FOR COVERAGE UNDER CHAPTER 375, P.L. 2005

Chapter 375, P.L. 2005, requires that only eligible over age dependent children receive health care coverage under the State Health Benefits Program (SHBP) or School Employees' Health Benefits Program (SEHBP). As a result, the Division of Pensions and Benefits requires the following documentation in addition to the *Chapter 375 Enrollment Application* when enrolling an over age dependent child.

DEPENDENTS	CHAPTER 375 ELIGIBILITY DEFINITION	DOCUMENTATION REQUIRED
CHILDREN UNTIL AGE 26	<p>A subscriber's child until age 26, <i>regardless</i> of the child's marital, student, or financial dependency status – even if the young adult no longer lives with his or her parents.</p> <p>This includes a stepchild, foster child, legally adopted child, or any child in a guardian-ward relationship upon submitting required supporting documentation.</p>	<p>Natural or Adopted Child – A photocopy of the child's birth certificate — or a photocopy of a National Medical Support Notice (NMSN) if you are the non-custodial parent and are legally required to provide coverage for the child — showing the name of the employee/retiree as a parent.</p> <p>Step Child – A photocopy of the child's birth certificate showing the name of the employee/retiree's spouse or partner as a parent and a photocopy of the marriage/partnership certificate showing the names of the employee/retiree and spouse/partner.</p> <p>Legal Guardian, Grandchild, or Foster Child – Photocopies of Final Court Orders with the presiding judge's signature and seal. Documents must attest to the legal guardianship by the covered employee.</p>
CONTINUED COVERAGE FOR OVER AGE CHILDREN UNTIL AGE 31	<p>Certain children over age 26 may be eligible for continued coverage until age 31 under the provisions of Chapter 375, P.L. 2005.</p> <p>This includes a child by blood or law who:</p> <p>(1) is under the age of 31; (2) is unmarried or not a partner in a civil union or domestic partnership; (3) has no dependent(s) of his or her own; (4) is a resident of New Jersey or is a student at an accredited public or private institution of higher education with at least 15 credit hours; and (5) is not provided coverage as a subscriber, insured, enrollee, or covered person under a group or individual health benefits plan, church plan, or entitled to benefits under Medicare.</p>	<p>Documentation for the appropriate "Child" type (as noted above) and a photocopy of the front page of the child's most recently filed federal tax return* (<i>Form 1040</i>), and if the child resides outside of the State of New Jersey, documentation of full time student status must be submitted.</p>

***Note:** On tax forms you may black out all financial information and all but the last 4 digits of any Social Security numbers.

To obtain copies of the documentation listed above, contact the office of the Town Clerk in the city of birth, marriage, etc., or visit these Web sites: www.vitalrec.com or www.studentclearinghouse.org Residents of New Jersey can obtain records from the State Bureau of Vital Statistics and Registration Web site: www.state.nj.us/health/vital/index.shtml