

Eligibility & Rules

Who is eligible?

Regular full- and part-time employees (regular employees scheduled to work 20 hours or more per week) are eligible for group insurance plans offered under the Wellness for Life Plan.

Which family members are eligible?

- Spouses:
 - Employee's legally married spouse. Common Law marriage partners are not recognized by the state of Florida and are not eligible.
 - Former spouses are not eligible under the plan, regardless of any legal settlement (However, separated spouses are eligible as there is no defined "legal separation" in the state of Florida)
- Children (birth to the beginning of the pay period following the end of the month they turn 26):
 - Natural or stepchildren
 - Legally adopted or children who have been placed for adoption
 - Other children for whom the employee is the legal guardian or has legal responsibility for providing medical coverage as defined by a court order
- Children (age 26 to 30):
 - Additional details can be found in this handbook
- Children of covered dependent children (grandchildren):
 - Can be covered through the end of the month the child turns 18 months of age if the parent is covered under the plan
- Disabled Children:

Age 26 or older, 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 as a dependent under a prior plan with no break in coverage.

 - Children considered to be disabled by a physician for any of the following permanent conditions: Legally blind, legally deaf, suffering from paralysis, mentally disabled, or requires assistance with basic daily activities such as eating and bathing.
 - Children considered to be disabled through Social Security Administration regardless of whether the child receives Social Security Income or not.
 - Single and incapable of self-care, dependent on employee for support due to physical or mental disability
 - Disability must occur before child eligibility ceases due to age

Am I required to provide proof of dependent eligibility?

Employees who add dependents within 30 days of hire, within 60 days of a qualified life event, or during open enrollment, must provide proof of dependent eligibility in order for the dependent to be added. Applicable dependent documentation must be provided with enrollment requests.

Required Documentation for Spouse

- The legal Marriage License/Certificate from a government or regulatory agency shall be used to enroll a spouse into the benefits offered*, and
- Employees will be subject to periodic audits by the County, or its designee. A full dependent audit shall be conducted at the Comptroller's discretion. Acceptable supporting documents shall be determined by the auditor in accordance with Generally Accepted Auditing Standards (GAAS).

**Marriage licenses written in a foreign language must be officially translated by a translation organization before being submitted to Human Resources.*

Note: *In addition to the dependent documentation listed above, your marriage date, spouse's date of birth, and spouse's social security number are required for enrollment. Please contact HR Benefits for assistance if your spouse is working through the immigration process but has not yet obtained a SSN. Utilizing an ITIN may be a temporary option.*