



DEPENDENT VERIFICATION REQUIRED FOR CEBCO BENEFIT PLANS

As a new employee or enrollee in the Union County group health, dental, and/or vision insurance program(s) you will be required to verify the eligibility of your dependents for coverage.

Verification must be received within 30 days of your coverage effective date. Failure to provide the required documents in a timely manner will result in termination of coverage for the dependent(s), in accordance with the County's group insurance plan requirements.

SUBMIT VERIFICATION DOCUMENTS TO
Union County Human Resources Dept.

Dependent Eligibility Verification Requirements

Employees with dependents to be included under their County insurance coverage are required to provide proof of eligibility. A list of acceptable documents is shown below. Employees with questions should contact Human Resources for any questions or concerns regarding the requirements.

Resources Contact Human Resources
Ginger Yonak, HR Director, 937-645-3008
Terri Himes, HR Assistant, 937-645-3106
Email: HR@unioncountyohio.gov

Documents can be submitted by:

Mail
Union County Commissioners, Attn: HR Dept.
233 West Sixth Street
Marysville, OH 43040

Fax
937-645-3072

Email:
HR@unioncountyohio.gov



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Dependents eligible to participate in the insurance plans along with the documents required to verify the dependent's eligibility are as follows:

Eligible Dependents and Document Requirements	
Eligible Dependent Spouses	
<i>Two documents required, one from Section A and one from Section B</i>	
Section A	Section B <i>(Section B document not required if married in past 12 months)</i>
Government-Issued Marriage Certificate including date of marriage	Federal Tax Return within last 2 years listing your spouse
Notarized Affidavit of Common Law Marriage	Proof of Joint Ownership issued within the last 6 months
Eligible Dependent Children	
Dependent Type	Documents Required
Biological Child [BC]	Government-Issued Birth Certificate
Adopted Child [AC]	Government-Issued Birth Certificate or Adoption Certificate or Placement Agreement
Step-Child [SC]	Government-Issued Birth Certificate AND both documents to verify Spouse
Legal Ward [LW]	Government-Issued Birth Certificate AND Court Ordered Document of Guardianship
Disabled Child [DBC, DAC, DSC, DLW] <i>(Note: Disabled Adopted Child cannot verify with a placement agreement or petition)</i>	Documentation listed above AND Federal Tax Return within last 2 years claiming child
Alternate Documentation	
Document Type	Alternate Option
Government-Issued Marriage Certificate (GIMC)	A copy of the spouse's naturalization document or immigration document indicating a "married" status, AND an additional POJ if married 12 months or more.
Proofs of Joint Ownership	
Mortgage statement	Credit card statement (includes: department stores; and care credit)
Bank statement (bank account verification letter showing active status)	Property tax
Active lease agreement	Current-year state tax return listing spouse/partner
Homeowners Insurance	Current-year mortgage interest/mortgage insurance
Renters Insurance	Warranty deed
State Tax Return (within 1 year)	Auto loans
	Current-year federal tax return listing the spouse/dependent as a dependent