

## Is This You?

### **I want to add my domestic partner to my coverage.**

If you filed a Declaration of Oregon Registered Domestic Partnership with your county clerk's office, you can add your domestic partner directly to your coverage during Open Enrollment or you can enroll and submit a notarized Affidavit of Domestic Partnership (<http://oregon.gov/DAS/PEBB/pages/forms.aspx>) to your agency payroll or benefit office by Nov. 6, 2015. If your agency does not receive the affidavit, your partner's coverage will not go into effect. If you want the coverage to go into effect as soon as possible, submit a Mid-year Change form to your agency now.

### **I want to add my new spouse to my coverage.**

Do this now by submitting a Mid-year Change form (<http://oregon.gov/DAS/PEBB/pages/forms.aspx>) to your agency payroll or benefit office so the coverage starts as soon as possible. Enrolling during Open Enrollment instead of making a mid-year change may cause a waiting period for some benefits.

### **We want to add one of our children to my coverage.**

Do this now by submitting a Mid-year Change form (<http://oregon.gov/DAS/PEBB/pages/forms.aspx>) to your agency payroll or benefit office so the coverage starts as soon as possible.

### **I want to add coverage for my spouse when we marry in March 2016.**

You can add your spouse to coverage only *after* you marry. Within 30 days from the marriage date (the qualifying event), submit a Mid-year Change form (<http://www.oregon.gov/DAS/PEBB/pages/forms.aspx>) to your payroll or benefit office. Coverage goes into effect the first day of the following month.

### **We want to cover a child who isn't ours but for whom we have legal responsibility.**

Do this now for coverage as soon as possible: provide your agency payroll or benefits office with a Mid-year Change form, notarized Affidavit of Dependency (<http://oregon.gov/DAS/PEBB/pages/forms.aspx>) and documentation showing proof of your legal responsibility for the child (examples: child placed with you for adoption, legally placed foster child, ward of the court placed with you).

### **I want to add my grandchild to my coverage.**

You can if you meet one of the criteria on the affidavit form at <http://oregon.gov/das/pebb/pages/forms.aspx>. Do this now for coverage as soon as possible; provide your agency or benefits office a Mid-year Change form and notarized Grandchild by Affidavit form along with any other required documentation.

### **I recently divorced and want to remove my ex-spouse from coverage.**

Do this now by submitting a Mid-year Change form (<http://oregon.gov/DAS/PEBB/pages/forms.aspx>) to your agency payroll or benefit office.

### **I will continue to cover a child who will be 26 in 2016 and will not turn age 27 during the year.**

Coverage will end automatically Dec. 31, 2015. A COBRA notice will be sent to the address on record.

### **I want to remove a child from coverage.**

You can remove a child from coverage during Open Enrollment. The coverage will end Dec. 31, 2015.