

PEBB Dependent Eligibility Review Program

Documentation Requirements

*Definition:	Required Documentation:	Documentation Must Contain:
<p>Legal Spouse A person who is married under the laws of the State of Oregon or under the laws of any other state or country. The definition of spouse does not include a former spouse and a former spouse does not qualify as a dependent.</p>	<ol style="list-style-type: none"> 1. Marriage Certificate AND 2. US 1040 Tax Return <p><u>Note:</u> If you are an International Employee please call PEBB Member Services @ 503-373-1102, for the required documentation.</p>	<p>The Marriage certificate:</p> <ul style="list-style-type: none"> ○ Name of the Member ○ Name of the spouse ○ Date of marriage ○ Certifiers signature and official seal ○ State or County of issuance <p>The U.S. 1040 Tax return (first page only):</p> <ul style="list-style-type: none"> ○ Tax Authority (Federal) ○ From tax years 2015 or 2016 ○ Name of the member ○ Name of the spouse ○ Married filing jointly, or married filing separately ○ If married filing separately, spouse's name must appear on the form. <p><i><u>Note:</u> To maintain confidentiality, please black out SSN and financial information.</i></p>

*Definition:	Required Documentation:	Documentation Must Contain:
<p>Domestic Partner by Certificate</p> <p>An unmarried individual of the same sex who has entered into a “declaration of Domestic Partnership” with the eligible member that is recognized under Oregon Law.</p> <p><i>Note: An imputed value for the fair market value of the domestic partner and domestic partner's dependent children's insurance premium will be added to the eligible employee's taxable wages.</i></p>	<ol style="list-style-type: none"> 1. State-Issued Certificate of Registered Domestic Partnership <u>AND</u> 2. Oregon Income Tax Return indicating Registered Domestic Partners <p><u>Note:</u> If you are an International Employee please call PEBB Member Services @ 503-373-1102, for the required documentation.</p>	<p>State-Issued Certificate of Registered Domestic Partnership:</p> <ul style="list-style-type: none"> ○ Name of the member ○ Name of the domestic partner ○ Certificate date ○ Certifier’s signature and official seal <p>Oregon Income Tax Indicating Registered Domestic Partners: Tax Authority (State):</p> <ul style="list-style-type: none"> ○ From tax year 2015 or 2016 ○ Name of the member ○ Name of the registered domestic partner ○ Filing jointly or separately <p><i>Note: To maintain confidentiality, please black out SSN and financial information.</i></p>

*Definition:	Required Documentation:	Documentation Must Contain:
<p>Domestic Partner by Affidavit</p> <p>An unmarried individual of the same or opposite sex who has entered into a partnership that includes the following:</p> <ul style="list-style-type: none"> ○ Both are at least 18 years of age; ○ Are responsible for each other's welfare and are each other's sole domestic partners; ○ Are not married to anyone; ○ Share a close personal relationship and are not related by blood closer than would bar marriage in the State of Oregon; ○ Currently share the same regular permanent residence; ○ Are jointly financially responsible for basic living expenses defined as the cost of food, shelter and any other expenses of maintaining a household. Financial information must be provided if requested. ○ Eligible employees must submit enrollment forms and a notarized affidavit to enroll domestic partners and children. <p><i>Note: To enroll eligible dependent children of a domestic partnership by affidavit in benefits plans, whether or not the enrollment includes the domestic partner, the employee must submit an Affidavit of Domestic Partnership. An imputed value for the fair market value of the</i></p>	<ol style="list-style-type: none"> 1. PEBB Affidavit of Domestic Partnership AND 2. Current Proof of Joint Mortgage or Joint Tenancy on a Residential Lease AND 3. Joint Bank Account or Joint Liabilities (ie; credit card, car lease), AND 4. Auto Insurance or Utility Bill (electric, gas, phone, internet, cable garbage, water), <p><u>Note:</u> If you are an International Employee please call PEBB Member Services @ 503-373-1102, for the required documentation.</p>	<p>PEBB Affidavit of Domestic Partnership:</p> <ul style="list-style-type: none"> ○ Name of the member ○ Name of the domestic partner ○ Date ○ Signature of both partners <p>Current Proof of Joint Mortgage or Joint Tenancy on a Residential Lease:</p> <ul style="list-style-type: none"> ○ Name of Member ○ Name of the domestic partner ○ Name of the mortgage company/landlord/rental company ○ Statement date from 6 months prior to the date of review <p>Joint Bank Account or Joint Liabilities (credit cards, car lease):</p> <ul style="list-style-type: none"> ○ Name of the member ○ Name of the domestic partner ○ Name of the bank or lending company ○ Statement date from 6 months prior to the date of review <p>Auto Insurance or Utility Bill (electric, gas, phone, internet, cable, garbage, water):</p> <ul style="list-style-type: none"> ○ Name of the member ○ Name of the domestic partner ○ Name of the insurance or utility company ○ Bill date must be from 6 months prior to the date of review

domestic partner and domestic partner's dependent children's insurance premium will be added to the eligible employee's taxable wages.

Note: To maintain confidentiality, please block out SSN and financial information.

Employee may also submit one document displaying both names, or may submit two documents, one in each name showing the same address and dated within 6 months prior to review.

*Definition:	Required Documentation:	Documentation Must Contain:
<p>Child(ren) of the Member, Spouse, Domestic Partner or Disabled Dependent Child over age 26</p> <p>Includes any of the following age 25 and under (or for Disabled Children over age 26):</p> <ul style="list-style-type: none"> ○ A biological child ○ A legally adopted child or a child legally placed for adoption ○ A legally placed child ○ A step-child ○ Child by Affidavit ○ Grandchild by Affidavit ○ Partner’s child <p>Grandchildren are only eligible when the eligible employee is the legal guardian or adoptive parent of the grandchild or both the child’s parent and the child live in the household of the eligible employee and both receive over half of their financial support from the employee.</p> <p><i>Note: For step-children, children of the domestic partner, or children legally adopted by the member’s spouse or domestic partner, the member must also submit, as appropriate, a marriage certificate or other document such as a Certificate of Registered Partnership or PEBB Affidavit of Domestic Partnership to prove the member’s relationship to the parent of the child.</i></p>	<p><u>Biological Child or Step Child(ren):</u></p> <ol style="list-style-type: none"> 1. Government Issued Birth Certificate or Naturalization Certificate/Report of Birth Abroad <p><u>A Legally adopted child or a child legally placed for adoption:</u></p> <ol style="list-style-type: none"> 1. Government Issued Birth Certificate or Naturalization Certificate/Report of Birth Abroad; OR 2. Adoption Paperwork <p><u>Legal Guardianship (ie; Child by Affidavit, Grandchild by Affidavit):</u></p> <ol style="list-style-type: none"> 1. Court Ordered and Signed Legal Guardianship AND 2. US 1040 Tax Return <p><u>Note:</u> If you are an International Employee please call PEBB Member Services @ 503-373-1102, for the required documentation.</p>	<p>Government Issued Birth Certificate or Naturalization Certificate/Report of Birth Abroad:</p> <ul style="list-style-type: none"> ○ Name of the member, spouse, or domestic partner ○ Name of the child ○ Date of birth <p>Adoption Paperwork:</p> <ul style="list-style-type: none"> ○ Name of the member, spouse, or domestic partner ○ Name of the child ○ Court ordered and Signed Legal Guardianship <p>Court Ordered and Signed Legal Guardianship:</p> <ul style="list-style-type: none"> ○ Name of the member, spouse, or domestic partner ○ Name of the child <p>The U.S. 1040 Tax Return (first page only):</p> <ul style="list-style-type: none"> ○ Tax Authority (Federal) ○ From tax years 2015 or 2016 ○ Name of the member ○ Name of the spouse/partner ○ Name(s) of the member’s tax dependents <p><i>Note: A marriage certificate will also be required if the biological parent of the Step Child is NOT being covered on benefits. Additional documentation may be required if the parent’s last name does not match the last name listed on the birth certificate.</i></p>

***Definitions of eligible dependents are subject to change with PEBB rule changes. Changes in the definition of eligible dependents may change the required documentation for proof of eligibility.**

August 31, 2017