Dependent Eligibility for Medical and Dental Coverage
State Employee Group Insurance Program (SEGIP)

Eligible Dependents	Definition of an Eligible Dependent	Required Documentation
Spouse	• Must be legally married under Minnesota law to an insurance eligible employee, ***and*** • Your spouse is not eligible if he/she works full-time for an employer (with more than 100 people) and elects to receive cash or credits (1) in place of health insurance, or (2) in addition to a health plan with a deductible of $750 or greater	1. Copy of your certified marriage certificate ***and*** 2. Copy of the front page for your most recent federal tax return confirming this dependent is your spouse OR a document dated within the last 60 days showing current relationship status such as a household bill. The document must include your spouse's name, the date and your mailing address. ***and*** 3. Completed Spouse/Former Spouse Certification Form
Former Spouse	• The divorce must occur while the employee is covered, ***and*** • Must have been covered on the employee's plan at the time of the divorce, ***and*** • May not have obtained other group coverage since the divorce, ***and*** • Not eligible if he/she works full-time for an employer (with more than 100 people) and elects to receive cash or credits (1) in place of health insurance, or (2) in exchange for a health plan with a deductible of $750 or greater	1. Copy of your divorce decree signed by a judge or court administrator ***and*** 2. Completed Spouse/Former Spouse Certification Form
Biological Children	• To age 26	1. Copy of your child's certified birth certificate naming you as the child's parent
Adopted children	• To age 26 if adopted ***or*** • To age 18 if placed with you for adoption	1. Final copy of your court documentation showing the names of both you (or your spouse) and the child confirming the adoption or 2. Copy of the child's certified birth certificate naming you (or your spouse) as the child's parent
Step Children	• To age 26 • You must be legally married to the child's parent	1. Copy of the child's certified birth certificate naming your spouse as the child's parent ***and*** 2. Copy of your certified marriage certificate and a current financial document naming both you and your spouse
Foster Children (ward, legal guardian, legal custody)	• To age 26 • Full and permanent legal and physical custody	1. Completed Foster Child Certification Form ***and*** 2. Final copy of court document showing your name (and/or your spouse) confirming the permanent custodial relationship ***and*** 3. Copy of the front page of your (or your spouse's) most recent federal tax return confirming this dependent is your (or your spouse's) tax dependent
Grandchildren	• To age 25 • Unmarried, dependent upon you for principal support and maintenance and lives with you; your child must be unmarried and less than age 19 ***or*** • Financially dependent upon you and has resided with you continuously from birth • ***-OR-*** • If you have legally adopted your grandchild or are the foster parent of your grandchild follow the eligibility rules for each above	1. Completed Grandchild Certification Form ***and*** 2. Copy of your grandchild's certified birth certificate, naming your (or your spouse's) child as your grandchild's parent ***and*** 3. Copy of your child's certified birth certificate naming you (or your spouse) as the parent ***and*** 4. Document dated within the last 6 months establishing this grandchild currently resides with you ***and*** 5. Copy of your most recent federal tax return listing this child as your (or your spouse's) tax dependent 6. If your grandchild has lived with you continuously from birth a copy of your federal tax return from the year this grandchild was born
Disabled Children	• Any age or marital status, includes dependent children incapable of self-sustaining employment by reason of developmental disability, mental illness or disorder, or physical disability, ***and*** • Chiefly dependent upon you for principal support and maintenance, ***and*** • You must provide proof of such incapacity and dependency annually as requested by your health plan administrator	1. Copy of the child's certified birth certificate naming you or your spouse as the child's parent, OR appropriate court order / adoption decree naming you as the child's legal guardian

Also covered: any other person required by state or federal law to be treated as a dependent for purpose of health care coverage. ***Change in status or dependent eligibility:*** **It is your responsibility to notify SEGIP of any change in a dependent's status** (life event). Spouses and dependents losing eligibility may qualify for COBRA. An eligible spouse or dependent may be added within 30 days of a life event or during Open Enrollment. You must notify SEGIP within 60 days of your divorce from a covered spouse or if a covered dependent loses eligibility. After the 60-day period ends, continued failure to

report a loss of eligibility may be considered fraud or intentional misrepresentation of a material fact and the employee may be liable for all claims paid by the Plan on behalf of such individuals and you may be subject to criminal penalties. Instances of fraud, intentional misrepresentation of a material fact or non-payment of premiums may result in the retroactive cancellation of coverage. Upon a 30-day notice, ineligible dependents may be dis-enrolled. Details are in Your Employee Benefits https://www.mn.gov/mmb/assets/2016-your-ee-benefits2_tcm1059-227949.pdf

Notice of Privacy Practices Minnesota Management & Budget (MMB) administers the State Employee Group Insurance Program (SEGIP). This notice explains why we are requesting the private data about you, your spouse, and dependents, how we will use it, who will see it, and your obligation to provide the data.

Why we ask you for this data? We ask for this data so that we can successfully administer SEGIP. This information is used to process your request to add or change coverage for yourself, your spouse, or dependents. The requested information helps us to determine eligibility, to identify you and your spouse, and dependents, and to contact you or your spouse, and dependents. The information is also used to develop new programs, ensure current programs effectively and efficiently meet member needs, and to comply with federal and state law and rules. We need the social security numbers and birth dates of your spouse and dependent to offer insurance continuation, process a death benefit, to ensure we are matching them to the correct insurance benefit transaction and to comply with federal Medicare coordination laws (in compliance with Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (P.L. 110-173)). If you provide any data about you, your spouse, or dependents that is not necessary, we will not use it for any purpose.

Do you have to provide the private data requested? You are not required to provide all of the data but certain data must be collected. If you do not provide the requested data, your dependent(s) may not be approved to participate in the program or may lose coverage under the program. If you do provide the data, it will be used as described.

Who else may see this data about you and your spouse and dependents? We may give data about you, your spouse, and dependents to the plan administrator you have chosen, SEGIP's other representatives, vendors and actuary; the Legislative Auditor; the Department of Health; the Department of Commerce; and any law enforcement agency or other agency with the legal authority to the information; and anyone authorized by a court order. In addition, the parents of a minor may see data on the minor unless there is a law, court order, or other legally binding instrument that blocks the parent from that data.

How else may this data be used? We can use or release this data only as stated in this notice unless you give us your written permission to release the data for another purpose or to release it to another individual or entity. The data may also be used for another purpose if Congress or the Minnesota Legislature passes a law allowing or requiring us to release the data or to use it for another purpose.