

People First Service Center • 866-663-4735 • Hours: Monday - Friday 8 a.m. to 6 p.m. ET

People First ID: [REDACTED]

06/22/2018

[REDACTED]

**DRAFT**

Dear [REDACTED]:

Our records indicate that you recently added a dependent(s) to your insurance coverage. In order for your newly added dependent(s) to continue to receive benefits under the State Group Insurance Program (Program), you are required to submit proof of their eligibility to the Division of State Group Insurance within 60 days of the date of this notification.

**If you do not send documents to prove dependent eligibility, your dependent's coverage will be terminated prospectively.**

Required Documents:

**FOR A SPOUSE:**

- If married less than 12 months and you and your spouse have not filed a federal income tax return as married, you will need to submit a copy of your government-issued marriage certificate, **OR**
- If you and your spouse have been married for 12 or more months, a Tax Return Transcript of your most recently filed federal income tax return showing you filed as married, either jointly or separately. The tax return transcript is the only official record of the tax return that you filed with the IRS. A copy of your tax return (Form 1040) will not be sufficient. The Form 1040 can be falsified and is not an official record of what was filed with the IRS. You can request a copy of your transcript from the IRS at [www.irs.gov/individuals/get-transcript](http://www.irs.gov/individuals/get-transcript) or by calling the IRS at 800-908-9946. Please submit **ONLY** the first page, showing yours and your spouse's names or the last four digits of their Social Security number and tax filing period. All other information should be marked out. If you are unable to obtain your transcript, please contact the Division of State Group Insurance.

**FOR CHILDREN UP TO AGE 26\*:**

- **For a child, stepchild, or adopted child:** A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s).
- **For a child in your custody or under your guardianship:** A copy of the court order naming you or your spouse as the child's legal guardian or custodian.
- **For a foster child:** A copy of the records showing you or your spouse as the dependent's foster parent.
- **For a newborn child of a covered dependent up to age 18 months:** A copy of the newborn's government-issued birth certificate listing your covered dependent as the birth parent.

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#### **FOR UNMARRIED CHILDREN AGE 26 TO AGE 30\*:**

- 1 A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s); **OR** a copy of the court order naming you or your spouse as the child's legal guardian or custodian; **AND**
- 2 A copy of the Affidavit of Adult Child, (can be downloaded from [https://www.mybenefits.myflorida.com/health/dependent\\_eligibility\\_verification](https://www.mybenefits.myflorida.com/health/dependent_eligibility_verification)), **AND**
- 3 One of the following documents:
  - o A document confirming the child's enrollment as a student in the current Spring, Summer, or Fall semesters. The document must include the name of the child, the name of the school, and the school term; **OR**
  - o A bill or statement in the child's name that is dated within the past 60 days and is mailed to the child at a Florida address.

#### **FOR DISABLED CHILDREN AGE 26 AND OLDER\*:**

- 1 A copy of the child's government-issued birth certificate or adoption certificate naming you or your spouse as the child's parent. Please note the document must list the first and last name of the child and parent(s); **OR** a copy of the court order naming you or your spouse as the child's legal guardian or custodian, **AND**
- 2 A Tax Return Transcript of your most recently filed federal tax return listing:
  - o The child's name and the last four digits of the child's Social Security number; **AND**
  - o The child as your tax dependent.The tax return transcript can be obtained from [www.irs.gov/individuals/get-transcript](http://www.irs.gov/individuals/get-transcript) or by calling the IRS at 800-908-9946.

*\*If you are covering a stepchild or a child for whom your spouse has legal guardianship, you must also provide documentation of your current relationship to your spouse, as requested above.*

The Division of State Group Insurance may request any other information necessary to verify your dependent's eligibility for enrollment in the Program.

All documents MUST contain the date, your name, and the dependent's name. Personal information, such as income information listed on the tax transcript and Social Security information (except as requested, above), should be marked out for confidentiality purposes.

#### **All documents must be submitted to the Division of State Group Insurance as follows:**

- Email a picture of your documents or scan and email them to [DSGI.QATeam@dms.myflorida.com](mailto:DSGI.QATeam@dms.myflorida.com);
- Fax to 850-488-0252; **OR**
- Mail to P.O. Box 5450, Tallahassee, FL 32314

Questions? Visit [www.myBenefits.myFlorida.com](http://www.myBenefits.myFlorida.com) and read our Frequently Asked Questions or call the Division of State Group Insurance at 850-921-4600.