Acceptable Documents for Benefit Enrollment

What is a Qualified Life Event?
A Qualified Life Event is a change in your situation, such as: marriage, birth, adoption, loss of coverage, or Medicare eligibility status, that allows you to make changes to your health insurance outside the annual Open Enrollment Period.

If you make changes to your benefits during Open Enrollment, you may be required to submit required documentation as listed below. For example, if you add a new dependent to your health benefits during Open Enrollment, you will be required to submit dependent verification documents before we can complete your enrollment request.

Instructions:
1. Read about the documents that we accept as proof for enrollment in benefits or benefit changes.
2. For Qualified Life Events, log into eCAPS to begin or contact Benefit Services to schedule your appointment to complete the enrollment forms.
3. If none of the events below are for your situation, please contact Benefit Services at (916) 808-5665.

Substantiation for Waiving Coverage

If you are waiving the City’s medical insurance, you are required to provide proof of coverage from an employer-sponsored plan within 30-calendar days from the event date and complete all required paperwork.

What we need:
- Creditable coverage letter from the spouse/parent’s employer; or
- A letter on company letterhead that includes name(s), carrier information, and effective date of insurance; or
- Notice from the medical carrier that include employee and dependent name (if applicable) and effective date of insurance; or
- Notice from TriCARE; or
- Printout from employer’s portal that include name(s), carrier information, and effective date.
- We cannot accept a medical insurance card as proof of enrollment.
Enrolling Dependents onto the City’s Plan

If you are enrolling a newly eligible dependent onto the City’s health insurance, you have 30-calendar days from the event date to make changes to your health insurance and complete all required paperwork.

What we need:
- A marriage certificate; or
- State Registered Domestic Partnership Certificate; or
- Affidavit of Registered Domestic Partnership (for specific unions); or
- Birth Certificate; or
- Court documents for guardianship; or
- Adoption paperwork.

Birth, Adoption, or Guardianship of a Child

If you recently had a baby, adopted a child, or gained guardianship of a child, you have 60 calendar days from the event date to make changes to your health insurance and complete all required paperwork.

What we need:
- A copy of the child’s birth certificate; or
- A certificate of birth provided by the hospital; or
- If your child was adopted: a copy of the adoption or foster care papers, a letter from the County or State, or equivalent government or private entity for foster care placement; or
- If you are now the legal guardian, a legal guardian court order.

Marriage or State Registered Domestic Partnership

If you were recently married or entered into a State Registered Domestic Partnership, you have 30-calendar days from the event date to make changes to your health insurance and complete all required paperwork.

What we need:
- A copy of your marriage certificate; or
- State Registered Domestic Partnership legal document; or
- A copy of your petition for name change court order (or decree) showing your new married name.
## City Domestic Partnership Affidavit for Employee Health Benefits

If your labor agreement allows you to add a domestic partner to your City of Sacramento employee health benefits, you have 30 calendar days from the event date to make changes to your health insurance and complete all required paperwork.

**Requirements:**
- Both 18 years of age or older;
- Currently not married to one another;
- Not related to one another in a way which would bar marriage in California;
- No acting under fraud or duress;
- Are competent to enter into a contract;
- Must reside together and share basic living expenses;
- Sole domestic partners of each other, and neither have different domestic partner, which is still living, within the last six months.

**What we need:**
- Declaration and Understanding of Partnership Status for City of Sacramento Employee Health Benefits application (must be notarized).

## Divorce, Legal Separation, or Termination of State Registered Domestic Partnership

If you were recently divorced or legally separated, you have 30 calendar days from the event date to make changes to your health insurance and complete all required paperwork.

**What we need:**
- Divorce Decree; or
- Dissolution of Marriage; or
- Legal Separation Agreement; or
- Decree of Legal Separation;
- If you are terminating your State Registered Domestic Partnership, you will need to provide a Notice of Termination of Domestic Partnership (obtained from California Secretary of State).

## Terminating City Domestic Partnership Affidavit for Employee Health Benefits

If you recently terminated your City Domestic Partnership for Employee Health Benefits, you have 30 calendar days from the date of the event to make changes to your health insurance and complete all required paperwork.

**What we need:**
- Termination of Partnership Status for City of Sacramento Employee Health Benefits (must be notarized)
### Approved Leave of Absence

If you are on an approved Leave of Absence (LOA) that has been entered into eCAPS by the City’s Leave Administrator, you have 30 calendar days from the date of the event to make changes to your health insurance and complete all required paperwork.

**Types of Leaves:**
- ✓ Family Care (FMLA)
- ✓ Medical (FMLA)
- ✓ Military
- ✓ Parental
- ✓ Pregnancy Disability
- ✓ Personal

**What we need:**
- Confirmation in eCAPS or from the City’s Leave Administrator; or
- Military Orders; or
- If you are returning from active duty, a copy of your release documents from the US Military or branch; or
- Approval of LOA from your Department Head.

### Overage Dependent Status

If your child or dependent has reached the maximum age of eligibility for the City of Sacramento’s health insurance, age 26, you have 30 calendar days from the event date to make changes to your health insurance. Please note your child’s enrollment termination may be confirmed by our health carrier.

*Please note: If your dependent is over the age of 26 and is disabled by reason of physical or mental disabling injury, illness, or condition, you must provide a Declaration of Disability from their medical provider.*

**What we need:**
- Birth certificate
### Employment Status Change

If your spouse or eligible dependent, Stated Registered Domestic Partner, or City Domestic Partner experienced a change in their employment status, you have 30 calendar days to make changes to your health insurance and complete all required paperwork.

**Employment Status Changes:**
- Open Enrollment
- Dependent eligibility change
- Loss of employment
- Gain/loss of health insurance
- Change in employment status which result in a change of coverage

**What we need:**
- Creditable Coverage Letter from the employer with the effective date the coverage will begin or end; or
- Letter from the employer on the company’s letterhead. This letter should include employee’s and eligible dependent’s name (if applicable), and date the employer-sponsored coverage will begin or terminate; or
- COBRA letter
- Open Enrollment Confirmation Statement with the effective date of coverage.

### Court Orders, Judgements, or Decrees

If you recently received a court order, judgement, or decree from the courts, you have 30 calendar days from the date of the event to make changes to your health insurance and complete all required paperwork.

**What we need:**
- National Medical Support Notice (Form DCSS0054); or
- Court Order

### Death of a Dependent

If you recently experienced the death of an eligible dependent, you have 30 calendar days to make changes to your health insurance and complete all required paperwork.

**What we need:**
- Death certificate; or
- A newspaper obituary or mortuary notice that shows the person’s name, date of death, newspaper or mortuary name, and date of publication; or
- A medical record indicating the person’s name and date of death.
### Permanently Moved to California

If you recently moved to California, you have 30 calendar days from the event date to enroll in the City’s health insurance and complete all required paperwork.

What we need:
- A copy of the official US Post Office postcard or email confirmation that shows you have requested to change your address; or
- A copy of your Change of Address Certificate Card (DL 43) from the Department of Motor Vehicles (DMV) office; or
- A copy of a utility bill, bank statement, mortgage statement, or signed rental agreement.