

FREQUENTLY ASKED QUESTIONS REGARDING THE DEPENDENT COORDINATION OF BENEFITS POLICY

What is the Dependent Coordination of Benefits Policy?

State employees, pensioners, and employees of those groups designated through Delaware Code to participate in the State Group Health Insurance Program (GHIP) may cover their dependent children to age 26 as primary in their State health care plan, dental plan and/or vision plan regardless of whether the dependent child is offered employer health coverage. The Dependent Coordination of Benefits policy determines which policy is primary when State of Delaware GHIP dependent has other health coverage.

When is a Dependent Coordination of Benefits form required?

Upon Enrollment in other health coverage,
Any time other health coverage changes, or
Upon request by the Statewide Benefits Office, Highmark Delaware or Aetna.

When is a State employee or pensioner allowed to enroll a dependent child in their coverage through the GHIP?

- Open Enrollment is the State employees' or pensioners' once a year opportunity to enroll their dependents in their coverage.
- State employees or pensioners may make changes or enroll their dependents in their coverage during any other time of the year **only if** the dependents experience a qualifying event. (Dependent's voluntary loss of coverage during any plan's open enrollment period **IS NOT** considered a qualifying event.)

What if my dependent child has or is also eligible for coverage as an employee of an employer that participates in the GHIP?

- If the dependent child is also a benefit eligible employee of the State of Delaware or of a group designated through Delaware code to participate in the GHIP, the dependent child:
 - May enroll in his/her own State health care plan **OR**
 - Can be covered by the parent who is a benefit eligible employee or pensioner.
- The dependent child cannot be covered under more than one State of Delaware GHIP.

What if my dependent child has other coverage as an employee through an employer that does not participate in the GHIP in addition to being covered under my State health care plan?

- The dependent child's employer coverage will be primary over his or her coverage as a dependent through the parent's State health care plan coverage.

What if my dependent child who is also enrolled as my dependent under the State health care plan drops health care coverage through his or her employer at the employer's next open enrollment?

- Your dependent child can then be primary on your health care plan if health care coverage is dropped under the employer's plan.
- Upon termination of the dependent's employer health coverage, a new Child Dependent Coordination of Benefits form must be completed. The appropriate Highmark Delaware and Aetna forms and instructions are available at www.ben.omb.delaware.gov/medical. Submission of this form will notify the State employee or pensioner's health plan carrier that the adult dependent child's coverage through the GHIP is primary.

What if my dependent child who is NOT enrolled as my dependent under the State health care plan drops health care coverage through his or her employer at the employer's next open enrollment?

- This is considered to be a *voluntary* loss of coverage and **NOT** a qualifying event for the State employee or pensioner to enroll the dependent in their State health care plan coverage. You can only add your dependent child during open enrollment, unless there is a qualifying event.
- If you wish to cover your dependent under your health care plan you should enroll your dependent during the State's open enrollment period in May and then have your dependent child drop employer health coverage at the employer's next open enrollment.
- Upon termination of the dependent's employer health coverage, a Child Dependent Coordination of Benefits form must be completed. The appropriate Highmark Delaware and Aetna forms and instructions are available at www.ben.omb.delaware.gov/medical. Submission of this form will notify the State employee or pensioner's health plan carrier that the dependent child's coverage through the GHIP is primary.