Dependent Documentation Requirements

You are required to provide verification of the relationship when adding a new dependent to your medical, dental and vision coverage:

Proof of Dependent Relationship	Dependent Proof /supporting documentation List
Spouse	 Marriage Certificate, reflecting both names and marriage date OR Current or prior years tax return (must reflect your spouse's information)
Child(ren) up to 26 Defined as: Biological Child Adopted Child Child Placed for Adoption Step Child Foster Child (If you are the permanent legal guardian)	One of the items below: • Birth Certificate with parents' names listed and date of birth • Other Hospital Record of Birth (birth must have occurred within the last 60 days)- You must submit Birth Certificate within 70 days • Adoption Certificate with names and date of adoption • Foster child documentation reflecting permanent legal guardianship
Child(ren) under permanent legal Guardianship	Proof of Legal Guardianship AND Current/Previous Year's Tax Return showing Tax-Dependent Child(ren)
Disabled Dependent(s) – Age 26+ The disability must have occurred prior to reaching the maximum age of 26	One of the items below: • Birth Certificate with parents' names listed and date of birth • Other Hospital Record of Birth (birth must have occurred within the last 60 days) • Adoption Certificate AND • Approval from BCBS certifying the disability

Life Event Changes

You are required to provide verification of the event and verification of the relationship when adding a new dependent to your medical, dental and vision coverage due to a Life Event Change:

- 1. Proof of the Event Type
- 2. Certification of Dependent Eligibility for Covered Dependents

Event Type	Dependent Proof /supporting documentation List
Marriage	Marriage Certificate, reflecting both names and marriage date
	OR
	Current or prior years tax return (must reflect your spouse's information)
New Hire Event	Proof of relationship for any newly added dependents
Birth Event or Adoption	One of the items below: • Birth Certificate with parents' name listed and date of birth • Other Hospital Record of Birth (birth must have occurred within the last 60 days)- You must submit Birth Certificate within 70 days • Adoption Certificate with names and date of adoption • Foster child documentation reflecting permanent legal guardianship
Divorce	Finalized Divorce Decree, reflecting both names and the divorce finalization date
Gain of Coverage or Loss of Coverage	 To verify a gain or loss of coverage, you'll need to provide documentation from the insurance provider or your new/previous employer. This letter must include the names of those who lost/gained coverage, the effective date of the coverage changes and specify the type of coverage gained or lost Proof of relationship for any newly added dependents
Death of Dependent	Death Certificate for dependent