

## PLAN ENROLLMENT/CHANGE FORM INSTRUCTIONS

**During Open Enrollment, the Plan Enrollment/Change Form must be returned by November 21.**

**If you are a new hire, complete and return the Plan Enrollment/Change Form to the Administrative Office as soon as possible.**

Complete and return the Plan Enrollment/Change Form only:

1. If you wish to change plans during the Open Enrollment period;
2. If you are a new hire, or have not previously selected a plan;
3. If you have eligible dependents to enroll who were not previously enrolled; or
4. If you have dependents to delete who are no longer eligible to be enrolled.  
(Please read the definition of eligible family members who may be enrolled below.)

### IMPORTANT NOTICE

If you have eligible dependents, they will not be enrolled and eligible for benefits until you have submitted an enrollment and plan selection form, as well as a certified copy of your marriage certificate and/or birth certificate(s) for your dependent children. Your dependent's eligibility may be delayed pending the receipt of the appropriate employer contribution for the coverage being elected.

If you have any questions concerning your choices and the enrollment procedure, please contact the Administrative Office at (562)463-5080.

### Definition of eligible family members for enrollment

Dependents eligible for enrollment in the Plan are (1) the employee's lawfully married spouse, as defined below, (2) the employee's domestic partner, as defined below, (3) the employee's unmarried dependent children, as defined below, who are under age 26.

The term 'spouse' shall mean any individual who is lawfully married under the state law authorizing such a marriage.

### Domestic Partner

To qualify as an employee's domestic partner, the following criteria must be met by the employee and domestic partner:

1. Both persons must file a Declaration of Domestic Partnership with the Secretary of the State of California and provide a copy to the Administrative Office\*;
2. Both persons must have a common residence\*;
3. Neither person may be married to someone else or be a member of another domestic partnership with someone else that has not been terminated;
4. The two persons must not be related by blood in any way that would prevent them from being married to each other;
5. Both persons are at least 18 years of age;
6. Both persons must be members of the same sex, or, if opposite sex, one or more persons must be over age 62, and;
7. Both persons must be capable of consenting to the domestic partnership.

\*For those employees who do not live in the State of California and are, therefore, not eligible to file a declaration of Domestic Partnership with the Secretary of State's Office, the Fund will accept a properly completed Affidavit of Domestic Partnership as proof of the domestic partnership so long as the criteria set forth in items 2 - 7 above is met. The Administrative Office will provide employees with the Affidavit upon request.

**Dependent Children** shall include only the following:

1. The employee's unmarried children, including legally adopted children.
2. Stepchildren (children of a lawfully married spouse) who permanently reside in the employee's household.
3. Children for whom the employee is the court appointed legal guardian, and who permanently reside in the employee's household.
4. A child who is an alternate recipient under a Qualified Medical Child Support Order, if the child is not already covered by the Plan.

In addition, a dependent child whose coverage would otherwise terminate due to the age limits of the Plan may continue to be eligible if they are disabled and incapable of self-sustaining support as a result of mental retardation or physical handicap that occurred prior to reaching the age limitation. Written evidence of disability must be submitted within 30 days of attainment of the age limit, and periodically reconfirmed to the administrative office on request.

A person (adult or child) may be living with you and totally dependent upon you for support. However, the person is not recognized as a dependent for insurance coverage under this policy unless they meet the requirements set forth above.

Other children, including but not limited to nieces, nephews, grandchildren, brothers and sisters, etc., are not considered dependents of the employee unless the employee has been designated as the court appointed legal guardian and proof of legal guardianship is submitted to the administrative office for review.