MCSIG MEDICAL PLAN ELIGIBILITY

WHEN BENEFITS BEGIN

- 1. You are eligible under the Plan if you are an Employee as defined in the Definitions Section. You must enroll within 31 days from the date you are eligible for benefits as determined by your School District.
- 2. Your lawful Spouse, Domestic Partner and Dependent Children as defined in the Definitions Section of the plan handbook, are eligible for coverage at the same time as you if an Enrollment Form has been submitted by you within 31 days.
- 3. If your coverage effective date is the first of the month following date of hire and if you are responsible for any portion of the premium for your dependent coverage, you may be required to pay for the portion of premium you are responsible for prior to receiving your first pay unless your district/bargaining unit agreement provides for distribution of your portion of the premium over subsequent months or allows for delayed enrollment of your dependents to the first of the following month after your effective date of coverage. If your district/bargaining unit agreement allows you to choose to delay enrollment of your dependent(s), the change form to add the dependents must be completed within 31 days from the date you are eligible for benefits see 1 above. (For example; if you pay for dependent coverage and your coverage is effective on October 1st, you may delay enrollment of your dependents for a November 1st effective date so that a payroll deduction for premium may be processed).
- 4. A new spouse/partner is eligible for coverage on the first day the month following the date of your marriage if a Change Form has been submitted by you within 31 days of the date of your legal marriage/partnership. You also have up to 90 days after the date of marriage/partnership to submit a change form, however; if a spouse/partner is added after 31 days, their coverage begins on the first of the month *following* completion of the change form (A certified copy of the Marriage License or Certificate is required).
- 5. Your newborn infant is covered for the first thirty-one days of life for illness and injury, provided that the Employee or Dependent Spouse/Partner (the mother) is covered at the time of the birth. Coverage after 31 days is contingent upon the Employee submitting a Change Form within 90 days following the child's birth. However, if dependent is added after 31 days, the coverage begins on the first of the month *following* completion of the change form (A copy of the Birth Certificate is required.)
- 6. You or your Spouse/Partner's newly-adopted Children or Children placed with you pending approval of a completed formal filing for adoption will be covered from the date on which either:
 - a. the adoptive Child's birth parent, or other appropriate legal authority, signs a written document granting the Employee or Spouse/Partner the right to control the health care of the Child (in the absence of a written document, other evidence of the Employee's or Spouse/Partner's right to control the health care of the Child may be used); or
 - b. the Employee or Spouse/Partner assumed a legal obligation for full or partial financial responsibility for the Child in anticipation of the Child's adoption. The written document referred to above includes, but is not limited to, a health facility minor release report, a medical authorization form, or relinquishment form.

If an Employee submits an Enrollment Form/Change Form for themselves, their spouse, partner, or child outside the time limits as specified in this section, coverage will begin on the first day of the month following the date of submission if they are eligible for enrollment due to a qualifying event under the plan.

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