



Add a Dependent During an Enrollment Event

Use this procedure to add a dependent for benefits on behalf of an employee. Dependents can only be added to benefits when an enrollment event (i.e., New Hire Enrollment, Open Enrollment, Life Event Change) is being completed.

Procedure:

Change Benefit Elections

Employee: Birth/Adoption for Tom Hardy - A (B1000012) - Step 1 of 4 [Actions](#)

Event Date 05/11/2020

Initiated On 05/18/2020

Submit Elections By 07/09/2020

Total Employee Net Cost/Credit
\$293.68 Monthly Cost

General Instructions:

- To enroll in a plan, select the "Elect" button next to the plan.
- To enroll a dependent(s), click in the "Enroll Dependents" block and select "Add Dependent from Enrollment" from the drop-down list.
- After selecting "Add Dependent" you will see a screen that shows the required supporting documentation for each dependent type. On the last page of this enrollment, you MUST attach the required supporting documentation (birth certificate, marriage certificate, etc.) for each dependent you added. Your coverage will not go into effect if the required supporting documentation is not received.
- You only need to setup a new dependent one time. Once you have added the dependent the first time, you can select the dependent for other coverages by selecting "Existing Dependents" in the "Enroll Dependents" block.
- If you change plans, you MUST reselect the dependents you wish to cover by clicking in the "Enroll Dependents" block. If you fail to do this your dependents will not be covered.

Health Care Elections 8 items

Benefit Plan	*Elect / Waive	Enroll Dependents	Coverage	Employee Cost (Monthly)	Employer Contribution (Monthly)	Provider
Medical - CareFirst BCBS EPO (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	<input checked="" type="checkbox"/> Jay Hardy - A <input checked="" type="checkbox"/> Kim Hardy - A	Employee + Family	\$176.98	\$1,002.92	www.caf

1. On the **Health Care Elections** page of Change Benefits Elections, select the item(s) to elect under Health Care Elections.



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Medical - CareFirst BCBS PPO (Employee)	<input type="radio"/> Elect <input checked="" type="radio"/> Waive					www.ca
Medical - Kaiser IHM	<input type="radio"/> Elect					www.my

Continue **Save for Later** **Cancel**

2. Use the prompt  in the **Enroll Dependents** field to enroll dependents for benefits.



If you are not enrolling the employee in medical coverage, follow the steps for the coverage type for which you want to enroll the dependent.



Health Care Elections 8 items

Benefit Plan	*Elect / Waive	Existing Dependents	Coverage
Medical - CareFirst BCBS EPO (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	Add Dependent Search × Jay Hardy - A × Kim Hardy - A	Employee + Family
Medical - CareFirst BCBS PPO (Employee)	<input type="radio"/> Elect		

3. To add a new dependent, select the **Add Dependent** menu item.



If the employee already has an existing dependent setup in the system, the dependent can be selected using the **Existing Dependents** menu item. **YOU SHOULD CHECK TO SEE IF THE DEPENDENT ALREADY EXISTS BEFORE ADDING A NEW DEPENDENT.**

Add Dependent

Tom Hardy - A (B1000012) [Actions](#)

During a qualifying life event or Open Enrollment you have the ability to add dependents to medical, dental, prescription, life insurance and/or AD&D coverage.

Translation of Non-English Documentation:

If you submit dependent documentation that is written in a language other than English, it must be translated by an official translator – someone other than you or your dependent(s). Generally, an official translator can be found at any college or university. The translation of each document must be signed by the translator and notarized.

DEPENDENT RELATIONSHIP = SPOUSE:

Eligibility Criteria (Spouse):

- Lawfully married to an employee or retired employee as recognized by the laws of the State of Maryland or in a jurisdiction where such marriage is legal

Required Documentation (Spouse):

- Official State marriage certificate (must be a certified copy and dated by the appropriate State or County official, such as the Clerk of Court):
 - From the court in the County or City in which the marriage took place; or
 - From the Maryland Division of Vital Records for marriages that occurred at least six months prior to enrollment; or
 - From the Department of Health and Mental Hygiene (DHMH) website: www.dhmh.maryland.gov (Click Online Services) – also www.vitalchek.com

DEPENDENT RELATIONSHIP = CHILDREN (Biological Child, Adopted Child or Step-child):

Eligibility Criteria (Children):

- Under age 26
- Except for grandchildren and legal wards, no requirement to reside in your home
- May be eligible for coverage under own employer
- May be married or unmarried, or;

Required Documentation (Biological Child):

OK **Cancel** Indicate showing lineage
Temporary ONLY Accepting Temporary Documentation.

After selecting **Add My Dependent From Enrollment** option you will see a page that details the supporting documentation required for each dependent type.

Please review this page BEFORE clicking the OK button to understand the required documentation DBM Employee Benefits Division MUST receive PRIOR to adding a new dependent to coverage.

If the documentation was submitted when initiating this Life Event you are not required to attach it again.



If it is identified on this page that you have not previously attached your documentation, you will be required to attach it **PRIOR** to submitting these election changes.

All **newly added dependents** on a New Hire or Job Change event will require supporting documentation attached to this event **PRIOR** to submitting these elections.

4. After reviewing the required supporting documentation click the OK button to continue to add the new dependent.

Add Dependent – Relationship, Date of Birth and Gender

Add Dependent

Relationship * :≡

Use as Dependent

Use as Beneficiary

Inactive Date (empty)

Date of Birth * :≡

Age 0 years, 0 months, 7 days

Gender * :≡

Citizenship Status :≡

Full-time Student

Student Status Start Date

Student Status End Date

Disabled

5. On this screen, complete the following fields:

- Use the prompt :≡ to select the **Relationship** of the dependent.



NEVER select “Employee” or “Other” for the **Relationship** or any relationship that indicates it is for “**Internal Use Only**”.

- Enter or select the **Date of Birth** of the dependent.
- Select the **Gender** of the dependent.

6. Scroll down to continue.



Add Dependent – Legal Name

Allow Duplicate Name

Check this box only when there is more than one dependent with the same name.

Legal Name	Contact Information	National IDs	Additional Government IDs	Other IDs
<hr/>				
Country *	<input type="text" value="United States of America"/> 			
Prefix	<input type="text"/> 			
First Name *	<input type="text" value="Jacob"/>			
Middle Name	<input type="text"/>			
Last Name *	<input type="text" value="Hardy"/>			
Suffix	<input type="text"/> 			

7. On the Legal Name tab:

- Enter the first name of the dependent in the **First Name** field.
- Enter the last name of the dependent in the **Last Name** field.



Add Dependent – Contact Information

8. On the Contact Information tab, click the **Add** button in the Address section to enter the address for the dependent.

Legal Name	Contact Information	National IDs	Additional Government IDs	Other IDs
	Phone <input type="button" value="Add"/>			
	Address Use Existing Address <input type="button" value="X"/> 301 W Preston Room 507 for Jay Hardy - A, Kim Hardy - A, Tom Hardy - A Country United States of America Address Line 1 301 W Preston Room 507 Address Line 2 City Baltimore City State Maryland			



The **Use Existing Address** prompt can be used to select the address associated with the employee.

- Use the prompt to select the **Country**.
- Enter the street address in the **Address Line 1** field.
- Enter the city in the **City** field.
- Enter the state in the **State** field.
- Enter the zip code in the **Postal Code** field.
- Select the **Type**.



Add Dependent – National IDs

9. On the National IDs tab, complete the following fields:

- Use the prompt to select the **Country**.
- Select the **National ID Type** (either Social Security Number or Tax Identification Number for foreign nationals).
- Enter the Social Security Number for the dependent in the **Identification #** field OR enter the Tax Identification Number for foreign nationals.

Legal Name	Contact Information	National IDs	Additional Government IDs	Other IDs
National IDs 1 item				
<input type="button" value="+"/>	<input type="text"/>	<input type="text" value="*Country"/>	<input type="text" value="*National ID Type"/>	<input type="text" value="Current ID"/>
<input type="button" value="-"/>		<input type="button" value="x United States of America"/>	<input type="button" value="x Social Security Number (SSN)"/>	<input type="text" value="123-45-6789"/>
				<input type="button" value="MM / DD / YYYY"/>
				<input type="button" value="MM / DD / Y"/>



Note that if you do not have the Social Security Number or Tax Identification Number for the dependent leave the screen empty, as shown below. You will be prompted later to enter a reason for not entering it (e.g., Newborn; no Social Security Number yet).

Legal Name	Contact Information	National IDs	Additional Government IDs	Other IDs
National IDs 0 items				
<input type="button" value="+"/>	<input type="text"/>	<input type="text" value="*Country"/>	<input type="text" value="*National ID Type"/>	<input type="text" value="Current ID"/>
				<input type="text" value="Add/Edit ID"/>
				<input type="text" value="Issued Date"/>
				<input type="text" value="Expiration Date"/>
No Data				

Add a Dependent – Missing National ID

You have Dependents covered under your Health Care plans without a Social Security Number. You must enter their Social Security Number or choose Not Available if you do not have access to their SSN at this time. You must follow up with the Benefits Department to update this missing information.

Dependent IDs 1 item		
Dependent	National ID Type Name	*Identifier ID Entered / Reason ID is Not Available
Jacob Hardy	Social Security Number (SSN)	<input type="radio"/> Identifier ID Entered <input type="text"/> <input checked="" type="radio"/> Reason ID is Not Available <input type="text"/>



OK

10. Click the **OK** button.

Health Care Elections 8 items

Benefit Plan	*Elect / Waive	Enroll Dependents	Coverage						
Medical - CareFirst BCBS EPO (Employee)	<input checked="" type="radio"/> Elect <input type="radio"/> Waive	<table border="1"><tr><td><input type="checkbox"/> Jay Hardy - A</td><td>⋮</td></tr><tr><td><input type="checkbox"/> Kim Hardy - A</td><td></td></tr><tr><td><input type="checkbox"/> Jacob Hardy</td><td></td></tr></table>	<input type="checkbox"/> Jay Hardy - A	⋮	<input type="checkbox"/> Kim Hardy - A		<input type="checkbox"/> Jacob Hardy		Employee + Family
<input type="checkbox"/> Jay Hardy - A	⋮								
<input type="checkbox"/> Kim Hardy - A									
<input type="checkbox"/> Jacob Hardy									



You have successfully added the dependent and will see the dependent in the Enroll Dependents column. **When you or the employee completes subsequent elections, DO NOT add the dependent again.** The dependent will be listed in the **Existing Dependents** menu item of the **Enroll Dependents** field.

11. The System Task is complete.