



# Enrollment FAQs

## Who is Eligible?

- LTISD employees who work at least 25 hours per week. Coverage begins the first day of the month following full-time employment as an eligible employee.

## Who is an Eligible Dependent?

- Your spouse (including those defined as same-sex legally married)
- Natural, adopted, foster or step children under the age of 26
- Dependent children of any age who are disabled
- Children under your legal guardianship

Supporting documents are required to add any dependents. Documents can be submitted via email, fax or mail. Documents must be submitted within 30 days of the effective date of change or coverage. A list of acceptable documents can be found on the next page.

## New Hire Enrollment – When to enroll?

Online benefit enrollment must be completed before or by the end of the month in which you start working. Benefits will become effective the first day of the following month.

## Mid-Year Changes

The benefits you choose will remain in effect until the end of the plan year (from November 1<sup>st</sup> to October 31<sup>st</sup>). You may only add or cancel coverage during the year if you have a qualifying event. Qualifying events are:

- A change in your legal marital status

- A change in your number of dependents due to birth, adoption, legal custody, death of a dependent child or spouse
- A change in employment status for you or your spouse
- Loss or gain of eligibility for other insurance (including Medicare, Medicaid & CHIP)

“The grace period to make a change due to a qualifying event is 30 days”. Please contact HR and submit the proper documentation within 30 days in order to proceed with the change.

## How are Benefit Premiums deducted?

We pay insurance premiums in advance, so depending on your start date and your first paycheck date, premiums might be doubled in order to catch up. For example: If your start date was September 20<sup>th</sup> then your benefits start date would be October 1<sup>st</sup> and your first paycheck will be October 25<sup>th</sup>. At that time payroll will deduct your October and November premiums.

## When will I receive my ID cards?

For your Medical and Dental coverage, BCBS will send them directly to you via mail. It will take about 14 business days for the cards to arrive. You may also access your ID cards by logging on to [www.bcbstx.com](http://www.bcbstx.com) and signing onto blueaccess for Members. Please contact the office of Human Resource in the event that you need a temporary card for an emergency.



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## **Who do I contact with questions:**

Please contact Benefits & Leaves in our Business Services Department at 512-533-6021/delamelenap@ltsidschools.org or the Benefit Center at 844-232-8697

## **Acceptable documents for adding eligible dependents to the benefits plans:**

### **Legal Spouse**

Please submit a legible photocopy of a marriage certificate or an acceptably executed marriage license that identifies the couple, date of marriage, legal jurisdiction and has a signature or seal showing it has been properly recorded with the County and/or State. A church ceremony document will not be acceptable if it does not meet these requirements.

### **Natural Child, Stepchild, Adopted Child**

Please submit a legible photocopy of an acceptable birth certificate or a hospital birth record that shows your name or the name of your enrolled spouse as the parent of the child and is signed by a hospital administrator or physician on staff. If you do not have the birth certificate, you may submit a photocopy of the page(s) of any court document that shows the parents' and child's names, identifies the court, county or state, date of action, and the filing record with a signature and/or a stamp by member of the court. You may also submit a photocopy of a paternity test. If your spouse is not enrolled and his/her name is on the birth certificate and your name is not listed, please also submit a photocopy of your marriage certificate.

### **Legal Guardianship**

Please submit a legible photocopy of the court assignment of guardianship that is signed and/or stamped by a member of the court.

### **Foster Child**

Please submit a legible photocopy of the court document or agency assignment.

### **Disabled Dependent past age 26**

Please submit a copy of the physician's letter with statement of disability or copy of SSI if eligible.