## **Department of Finance**



## **BENEFITS DIVISION**

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## **Family Status Changes**

Your selected coverage will be in effect for the entire Plan Year. However, you may elect to make a change in coverage if you experience a family status change. Legal documentation for all family status changes must be provided, along with the change form within 31 days of the change.

Change in Family Status include:

- Marriage -- copy of marriage certificate
- Legal separation/Divorce -- copy of divorce decree
- Birth of a child of the Retiree -- copy of birth certificate
- Death of the retiree's spouse or dependent copy of death certificate
- Adoption of a child of the Retiree -- copy of birth certificate and adoption documentation
- Temporary or legal guardianship of a child copy of birth certificate and copy of court orders(s)
- Your spouse/dependent loss or gain of employment that affects benefits copy of termination of benefits letter
- Loss of other group medical coverage, if previously you did not elect coverage under this Plan -- copy of termination of benefits letter
- Enrollment into other medical coverage copy of benefit enrollment letter

Supporting document copies for Family Status Changes include: <u>ALL</u> dependents' social security numbers (*requirement of new Presidential Healthcare Law*), marriage certificate, final divorce decree, birth certificate or confirmation of birth, court-ordered judgments, death certificate, insurance termination letter from employer or insurance company (*insurance termination date must be included*). <u>Without the supporting documents, the processing of your application for change(s) may be delayed or denied.</u>

If you have any questions, please feel free to contact us at (404) 612-7605.

Fulton County Employee Benefits Office