INSTRUCTIONS FOR NEW EMPLOYEES
REGARDING BENEFIT ENROLLMENT

The information contained in this folder is regarding state sponsored benefits. This includes medical, dental, vision, life insurance, health savings account and flexible spending account information for you and any eligible dependents. To view additional information related to the plans, such as plan summaries, Certificates of Coverage (COC) or doctor/dentist participation, you will want to visit our website at: http://www.in.gov/spd/2337.htm

After reviewing the information, please make sure to log onto PeopleSoft and complete your benefit enrollment through Self Service Benefits. At the end of your orientation day, you will receive quick steps along with your PeopleSoft ID, your User ID and your password to assist you in completing your benefits enrollment. Per the State's contracts with the carriers, **elections must be made and submitted no later than the Monday following the pay period in which you were hired.** If your benefits are not submitted by the deadline, you will have to wait until the next open enrollment period to enroll in benefits. If you have any questions about your enrollment deadline, please feel free to contact the State Personnel Benefit Hotline.

If you have a disabled dependent over age 26, you will need to contact the State Personnel Benefit Hotline so that you can be assisted in completing your benefit enrollment. Upon contacting the Benefit Division, you will also be notified of any documentation needed to complete the enrollment of your disabled dependent on your benefits.

Dependents of eligible employees may be covered under the State's benefit plans. Dependents are defined as:

Spouse: An individual to whom you are legally married. IC 31-11-8-5 provides: a marriage is void if the marriage is a common law marriage that was entered into after Jan. 1, 1958. Employees are not allowed to claim dependents based on common law marriages. An ex-spouse is not eligible for coverage even if court ordered.

Children: Natural-, step-, foster, or legally adopted children; children who reside in the employee's home for whom the employee or spouse has been appointed legal guardian or awarded legal custody by a court, until the end of the month in which they turn 26.

If the dependent child is both incapable of self-sustaining employment by reason of mental or physical disability and is chiefly dependent upon the employee for support and maintenance prior to age 19, the dependent child's coverage shall continue if satisfactory evidence of such disability and dependency is received within 120 days after the maximum age is attained. Coverage for the dependent will continue until the employee discontinues his coverage or the disability no longer exists.

A dependent child of the employee who attained age 26 while covered under another health care policy and met the disability criteria specified above, is an eligible dependent for enrollment so long as no break in coverage longer than 63 days has occurred immediately prior to enrollment.

Proof of disability prior to age 19 and proof of prior coverage will be required. The plan requires annual documentation from a physician after the child's attainment of the limiting age.

Once you have completed your benefits enrollment through Self-Service Benefits, you will need to print a Universal Payroll Authorization form (AS-47) to sign. The Payroll Authorization Form (AS-47) authorizes the Auditor's office to deduct premiums for your benefit choices. This form must be signed and returned to your agency payroll/human resources office immediately. You will also need to print a Benefit Confirmation Statement. The Benefit Confirmation Statement is a verification of the selections you have made. Please review the statement and make sure all the information is correct.

DESCRIPTION OF SPECIAL ENROLLMENT RIGHTS (QUALIFYING EVENTS)

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in a state-sponsored benefit plan if you or your dependents experience a qualifying event that results in the loss of eligibility for other health insurance or group health plan coverage. However, you must request enrollment within **30 days** after the qualifying event.

In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, or similar change, you may be able to enroll yourself and your dependents. However, you must request enrollment within **30 days** after the event.

To request special enrollment or obtain more information about qualifying events, please contact the State Personnel Benefit Hotline at 317-232-1167 or 877-248-0007 (for calls outside the 317 area code).

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