

## Eligible Dependents and Supporting Documentation

A person may not be covered twice under the City of Minneapolis medical plan. An employee may not enroll for single coverage and enroll as a dependent on another employee's medical coverage. Likewise, children of two covered employees may not be covered twice under the City of Minneapolis medical plan.

Eligible Dependents	Definition of Eligible Dependent (medical and dental coverage)	Required Supporting Documentation
Legal Spouse	<p>A person who is legally married to an employee.</p> <p><i>This definition of spouse does not include a former spouse due to divorces. A former spouse does not qualify as a dependent.</i></p>	<p>Copy of marriage certificate</p> <p><b><u>If married two years or more:</u></b> Only include the first page of prior year <u>federal tax return</u> (Form 1040) that lists spouse.</p> <p><i>Note: Please black out financial information.</i></p>
Child of the Employee or Spouse	<p>Includes any of the following under the age of 26:</p> <ul style="list-style-type: none"> <li>• Biological child</li> <li>• Stepchild</li> <li>• Legally adopted child</li> <li>• Foster child</li> <li>• Child of legal guardianship. <i>Note: The child is no longer eligible after legal guardianship ends, typically at age 18.</i></li> </ul>	<p><u>One of the following:</u></p> <ul style="list-style-type: none"> <li>• Copy of child's birth certificate or hospital birth record with employee or spouse listed as parent -OR-</li> <li>• Copy of employee's prior year federal tax return that lists child as dependent -OR-</li> <li>• Copy of final adoption order or placement order approved by court -OR-</li> <li>• Copy of court order appointing employee or eligible spouse as the legal guardian</li> </ul>
Disabled Dependent	<p>Dependent is incapable of self-sustaining employment by reason of disability and is chiefly dependent on employee or employee's covered spouse for support and maintenance.</p>	<p>Must provide proof of disabled dependent status to Medica no later than 31 days after child's 26<sup>th</sup> birthday. Contact Medica for the Request for Extended Coverage form.</p>
Grandchildren	<p>Grandchild of the employee/retiree or spouse who is financially dependent upon employee/retiree or spouse and who has resided with employee/retiree or spouse continuously from birth</p>	<p>Copy of employee's federal tax return listing child as a dependent and a copy (with employee's current address) of the child's current report card, school registration, physician's statement or bill or day care statement.</p>

### How to submit documentation:

1. Write the employee's name and employee ID number on the document.
2. Submit the document through the [CityLife Employee Hub](#) using the Dependent Documentation category.
3. If you cannot access the CityLife Employee Hub, fax the document to 612-284-7989 or mail it to: Human Resources – Benefits, 350 Fifth St South – Room 1, Minneapolis, MN 55415.