

Benefit, Payroll & Retirement Operations Section (BPROS)

# **BPROS Final Verification Period**

All employees who cover dependents on King County medical plans were recently required to submit supporting documentation to King County's trusted vendor (Mercer) to confirm the status of the dependent and allow them to continue receiving coverage.

The two-month Mercer verification period is now over and all Mercer resources (i.e., website, call center, mailing address) are no longer available. To allow one last chance to provide supporting documentation, the King County benefits office is providing an additional 30-day final verification period that runs from August 20 – September 19.

## 1) Why is a Dependent Eligibility Verification being conducted?

King County and its labor partners agreed to conduct a process to ensure only eligible dependents are provided coverage under the plan. Ineligible dependents enrolled in the plan can increase costs – costs that both you and your employer share. It's each employee's responsibility to ensure covered dependents continually meet the plan's eligibility requirements and to provide supporting documentation upon request. Employers regularly conduct such verifications every 3-5 years.

The first two months of the verification period were administered by Mercer and the last 4-week period is being conducted by the King County benefits office. Employees must provide supporting documentation within the 3-month verification period to prevent unconfirmed dependents from being dropped.

## 2) Which employees are included in the 30-day final verification period?

Employees who were originally included in the Mercer dependent eligibility project but did not provide supporting documentation for all covered dependents are included in the final verification period.

# 3) What supporting documentation is required for the final verification period?

The final verification period requires the same supporting documentation that was required by Mercer (see Appendix). Mercer will send a final communication indicating which dependents have not been verified. Employees will be required to submit missing documentation to the King County benefits office for their dependent(s) to remain on their benefit plan after 9/30/2024.

## 4) Where should I send supporting documentation and who can I contact with questions?

Supporting documentation and questions can be sent to the King County benefits office. Please include your full name and nine-digit PeopleSoft ID# when submitting documentation.

a) Phone: 206-684-1556

b) Fax: 206-296-7700

c) Email: kc.benefits@kingcounty.gov

d) U.S. Mail:

- a. King County Benefits, Payroll & Retirement Operations
- b. Chinook Building CNK-HR-0230, 401 Fifth Ave., Seattle, WA 98104-2333

#### 5) How are you handling my personal information?

The King County benefits office adheres to strict confidentiality and data security protocols to ensure the security of personal information. The information you provide will only be used by for the purpose of conducting the Final Verification Period and will be destroyed once the project period has ended.



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## 6) What should I expect at the end of the project for my unverified dependents?

Employees who have not provided all supporting documentation for their covered dependent(s) by the deadline of September 19, 2024, will receive a home mailed letter outlining which dependents are being dropped from coverage effective 10/1/2024. Unverified dependents will be dropped from all coverages (i.e., medical, dental, and vision, life insurance, accidental death and dismemberment insurance).

7) Will I be reimbursed for any out-of-pocket expenses—such as postage costs or fees for obtaining the required supporting documentation—I may incur to complete this process?

No, you will not be reimbursed for the time or expense involved in securing and/or submitting the necessary supporting documentation.

## 8) Do I need to send original documents?

No. Please only send copies of required documentation, as we are unable to return originals. Make sure you copy all pages (both sides) and the copied document is legible. Please block out any financial or Social Security number information before sending.

# 9) How do I obtain the required documentation?

An official certificate of every birth, death, marriage, and divorce should be on file in the state, city, or county where the event occurred. Other resources include:

- VitalChek.com: Order Your Vital Records Online | VitalChek
- Centers for Disease Control and Prevention: Where to Write for Vital Records Homepage (cdc.gov)
- King County Records Office for events that occurred inside King County:
  - Website: <u>Recorder's Office King County, Washington</u>
  - o Birth Certificate: Order a birth certificate King County, Washington
- Washington State Records: Vital Records | Washington State Department of Health
- Internal Revenue Service:
  - o Phone: 1-800-829-1040
  - Website: <u>Topic no. 156, How to get a transcript or copy of your tax return |</u>
     <u>Internal Revenue Service (irs.gov)</u>

#### 10) Are ineligible dependent(s) entitled to COBRA coverage?

Ineligible dependents are not entitled to COBRA continuation coverage.

# 11) When ineligible dependents are removed, what other coverage options are available?

Dependents being removed from coverage may consider medical insurance options available through the Health Insurance Marketplace. For more information, call 800-318-2596 or go to Health Insurance Plans & Quotes | HealthCare.com

## 12) What information must be included on birth and/or marriage certificates?

A birth certificate must include the child's name and list the employee or employee's spouse/domestic partner as a parent. A birth record or "short form" is not accepted. A marriage certificate must be presently valid and include the marriage date and the recording county or state agency.



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# 13) My dependent documentation is not in English. Do I need to provide a translation? Please send a copy of the original document and King County will make every attempt to translate it. If King County is unable to translate it, you will be placed in an incomplete status and you will be required to provide an official English translation.

# 14) What type of tax form should I submit and what information must be included? Submit a copy of your 2022 or 2023 filed federal income tax form 1040, 1040A, 1040X. To support your spousal relationship, you may submit a copy of your filed 1040EZ or official transcript of your tax return. Form 8879 is NOT acceptable.

The entire tax return is not required—only the page that shows your filing status, marital status, spouse's name, and dependent names is required, as applicable. Please block out personal financial data and Social Security numbers before submitting.

### 15) What if I need extra help due to a disability or language barrier?

Employees with disabilities and employees who need language assistance can request support services by calling the King County Benefits, Payroll and Retirement office at 206-684-1556.

#### 16) How do I send my documentation electronically?

To submit your documents electronically, send email to <a href="mailto:kc.benefits@kingcounty.gov">kc.benefits@kingcounty.gov</a> with your full legal name and PeopleSoft ID#. Note the following requirements when sending files.

- Files must be less than 10 MB in size. If your document file is larger than 10 MB, you can save and send your documents as separate smaller files.
- If you are taking photos of your documents with a smart phone, you can reduce the size by saving the photo as a smaller size or lower resolution.
- If saving a document as a pdf, Save as Other, then select Reduced Size PDF.
- Files must be one of the following file formats: .PDF, .JPEG, .JPG, .GIF, .PNG, .TIF, .TIFF, .BMP.
- File names can contain only letters, numbers, spaces, or dots.
- Files cannot be password-protected.



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# **Appendix**

# **Required Documentation:**

#### DEPENDENT VERIFICATION REQUIREMENTS

#### When submitting supporting documentation:

- ✓ Remove or obscure all confidential information, such as financial data and Social Security numbers.
- ✓ Send only copies. <u>Documentation submitted will not be returned.</u>
- ✓ If a document is two-sided or multiple pages, ensure you copy both sides and all pages of the document.
  ✓ If a document is not in English, you may be requested to supply an official English translation of the document and a copy of

| Eligible Dependent   | Acceptable Supporting Documentation  |
|--|--|
| SPOUSE   | SUBMIT THREE DOCUMENTS: Submit one document from PROOF A AND on  |
| Your legal spouse  | document from PROOF B AND a completed copy of PROOF C:   |
|  | PROOF A: (to show event occurred)  |
|  | Valid legal or religious marriage certificate, which must include:   |
|  | Name of the employee and spouse  |
|  | Date of marriage   |
|  | Certifier's signature/official seal  |
|  | <ul> <li>Legal household/family registry, which must show spousal relationship.</li> </ul>                       |
|  | (This is only acceptable if you were married outside the U.S. and do not have                                    |
|  | marriage certificate.)   |
|  | AND PROOF B: (to show current relationship status)   |
|  | (Employees married within the last 12 months do not need to provide Proof B.                                     |
|  | Your Federal 1040 or state income tax return, which must:  |
|  | <ul> <li>Be from tax year 2022 or 2023</li> </ul>  |
|  | <ul> <li>Contain name of employee and spouse</li> </ul>  |
| Sample Federal 1040 Form:  | Indicate married filing jointly or married filing separately   |
| 1040 U.S. Individual freezes for Return 2022 The Fifting States  They State 2  | (Only the page listing filing status and exemptions is required. See sample. E-                                  |
|  | Files are not accepted.)  Utility bill, which must:  |
|  | Outily bill, which flust.     Be dated within the last 12 months   |
|  | Contain name of employee and spouse as joint owners  |
| Some utilities provides annicities (if you have of fi) box, ass instructions.  And in Majoritation Decision Computing (This is not provided by the computer of | Contain name of utility company  |
| responses from the control of the co | Document from a bank account or financial institution, which must:   |
| tendent in the second of the second decision of applications or a second second se | <ul> <li>Be dated within the last 12 months</li> </ul>   |
| presidents for investment the first favor of the fi | <ul> <li>Contain name of employee and spouse as joint owners of the account</li> </ul>                           |
| er selvation codes   | Contain name of financial institution  |
| Please mark out SSNs and financial info  | Insurance document such as homeowners, renter, or automobile, which must:     Be dated within the last 12 months |
|  | Show employee and spouse as joint account owners (individuals listed a   |
|  | "drivers" on automobile insurance documents do not prove joint accou   |
|  | ownership)   |
|  | <ul> <li>Contain name of insurance company</li> </ul>  |
|  | Mortgage document or current lease, which must:  |
|  | <ul> <li>Be dated within the last 12 months</li> </ul>   |
|  | Contain name of employee and spouse as joint owners or joint renters   |
|  | Contain name of mortgage company, landlord, or rental company  |
|  | Valid vehicle registration, which must:     Be dated within the last 12 months                                   |
|  | Contain name of employee and spouse as joint owners  |
|  | Contain name of state or county in which issued  |
|  |  |
|  | AND PROOF C: (Only required if your spouse has MEDICAL coverage.)  |
|  | For those on the KingCare PPO medical plan: Completed King County Benefit  |
|  |  |

Access Fee Audit form



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| Eligible Dependent                        | Acceptable Supporting Documentation   |
|---|---|
| DOMESTIC PARTNER                          | SUBMIT THREE DOCUMENTS: Submit one document from PROOF D AND one  |
| Your Washington state-registered domestic | document from PROOF E <u>AND</u> a completed copy of PROOF F:   |
| partner                                   | PROOF D:  |
|   | Washington state-issued Certificate of Domestic Partnership, which must include   |
|   | <ul> <li>Names of the employee and domestic partner</li> </ul>  |
|   | Date of certificate   |
|   | Certifier's signature/official state seal   |
|   | AND PROOF E:  |
|   | Utility bill, which must:   |
|   | Be dated within the last 12 months  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners</li> </ul>   |
|   | Contain name of utility company   |
|   | Document from a bank account or financial institution, which must:  |
|   | Be dated within the last 12 months  Contain name of applicacy and demostic partner as is introduced of the  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners of the account</li> </ul>  |
|   | Contain name of financial institution   |
|   | Insurance document such as homeowners, renter, or automobile, which must:   |
|   | <ul> <li>Be dated within the last 12 months</li> </ul>  |
|   | <ul> <li>Show employee and domestic partner as joint account owners (individuals<br/>listed as "drivers" on automobile insurance documents do not prove joint<br/>account ownership)</li> </ul> |
|   | Contain name of insurance company   |
|   | Mortgage document or current lease, which must:   |
|   | Be dated within the last 12 months  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners or joint<br/>renters</li> </ul>  |
|   | Contain name of mortgage company, landlord or rental company  |
|   | Valid vehicle registration, which must:   |
|   | Be dated within the last 12 months     Contain name of employee and democtic partner as joint owners.   |
|   | Contain name of employee and domestic partner as joint owners     Contain name of state or county in which issued   |
|   | 5 Soman harrie of state of county in which issued   |
|   | AND PROOF F: (Only required if your domestic partner has MEDICAL coverage.)   |
|   | For those on the KingCare PPO medical plan: Completed King County Benefit<br>Access Fee Audit form  |
|   |   |



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| Eligible Dependent                        | Acceptable Supporting Documentation   |
|---|---|
| DOMESTIC PARTNER                          | SUBMIT THREE DOCUMENTS: Submit one document from PROOF D AND one  |
| Your Washington state-registered domestic | document from PROOF E <u>AND</u> a completed copy of PROOF F:   |
| partner                                   | PROOF D:  |
|   | Washington state-issued Certificate of Domestic Partnership, which must include   |
|   | <ul> <li>Names of the employee and domestic partner</li> </ul>  |
|   | Date of certificate   |
|   | Certifier's signature/official state seal   |
|   | AND PROOF E:  |
|   | Utility bill, which must:   |
|   | Be dated within the last 12 months  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners</li> </ul>   |
|   | Contain name of utility company   |
|   | Document from a bank account or financial institution, which must:  |
|   | Be dated within the last 12 months  Contain name of applicacy and demostic partner as is introduced of the  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners of the account</li> </ul>  |
|   | Contain name of financial institution   |
|   | Insurance document such as homeowners, renter, or automobile, which must:   |
|   | <ul> <li>Be dated within the last 12 months</li> </ul>  |
|   | <ul> <li>Show employee and domestic partner as joint account owners (individuals<br/>listed as "drivers" on automobile insurance documents do not prove joint<br/>account ownership)</li> </ul> |
|   | Contain name of insurance company   |
|   | Mortgage document or current lease, which must:   |
|   | Be dated within the last 12 months  |
|   | <ul> <li>Contain name of employee and domestic partner as joint owners or joint<br/>renters</li> </ul>  |
|   | Contain name of mortgage company, landlord or rental company  |
|   | Valid vehicle registration, which must:   |
|   | Be dated within the last 12 months     Contain name of employee and democtic partner as joint owners.   |
|   | Contain name of employee and domestic partner as joint owners     Contain name of state or county in which issued   |
|   | 5 Soman harrie of state of county in which issued   |
|   | AND PROOF F: (Only required if your domestic partner has MEDICAL coverage.)   |
|   | For those on the KingCare PPO medical plan: Completed King County Benefit<br>Access Fee Audit form  |
|   |   |



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#### Eligible Dependent

#### Child under age 26

Your children until the end of the month in which they reach age 26, which includes:

- A natural child or a child placed with you for adoption
- A stepchild\*
- A child of your domestic partner\*
- Any other child for whom you have *legal* guardianship

Please Note: Court-ordered children will not be a part of this verification

#### Sample Federal 1040 Form



Please mark out SSNs and financial info

#### **Acceptable Supporting Documentation**

SUBMIT ONE DOCUMENT: Submit a copy of one document from PROOF G:

#### PROOF G

- Your Federal 1040 or state income tax return, which must:
  - Be from tax year 2022 or 2023
  - Contain the name of employee or spouse or domestic partner\*
  - List your dependent with the relationship as daughter, son, or child

(Only the page listing filing status and exemptions is required, see sample. Form 887-9 and E-Files are not accepted.)

- Child's legal or hospital birth certificate or affidavit of parentage, which must:
  - Contain the name of employee or spouse or domestic partner\*
  - contain the name of the child
  - Contain the name of the contain the landicate date of birth
- Legal household/family registry, which must show relationship.

(This is only acceptable if the child was born outside the U.S. and you have no legal birth certificate.)

- Final divorce decree, parental custody agreement, or Qualified Medical Child Support Order (QMCSO), which must include:
  - The name of the employee or spouse or domestic partner\* indicating parentage of the child
  - The name of the child
  - o The official signature or stamp indicating document has been filed
- Legal adoption, guardianship, or legal custody papers, which must include:
  - o The name of the employee or spouse or domestic partner\*
  - The name of the child
  - The official signature or stamp indicating document has been filed

#### \*Also required to prove the relationship between you and your stepchild:

If you are an employee providing documentation for a child of your legal spouse or domestic partner, Mercer must receive the required proofs listed for spouse (Proof A and B) or domestic partner (Proof D and E), even if you do not currently cover your spouse or domestic partner.

#### Eligible Dependent

## Child age 26 and over

Any dependent *disabled child* over the age of 26 who otherwise meets the criteria for "child" and is:

 Permanently disabled and not able to earn their own living because of a physical or mental disability that started prior to the date they reached the maximum age for dependent children under the plan.

#### **Acceptable Supporting Documentation**

SUBMIT **TWO** DOCUMENTS: Submit a copy of one document from **PROOF H AND** a copy of one document from **PROOF I**:

#### PROOF H:

Any one of the documents listed for child under age 26.

#### AND PROOF I

- Physician statement certifying that the dependent child cannot support themself because of a physical or mental disability.
  - All information must be included on physician's letterhead or form and dated within the last 12 months.

#### Also required to prove the relationship between you and your stepchild:

If you are an employee providing documentation for a child of your legal spouse or domestic partner, Mercer must receive the required proofs listed for spouse (Proof A and B) or domestic partner (Proof D and E), even if you do not currently cover your