



9246 Portage Industrial Drive
Portage MI 49024
269-327-1922
800-444-1922

May 12, 2018

<employee name>
<address>
<city, state, zip>

Dear <employee name>:

XYZ Company requires verification of dependent status for all dependents enrolled on the XYZ Company Health Plans.

XYZ Company records show the following Individual(s) listed as your dependents under the group health plan:

Name(s) of dependent:

<dependent names>

You must provide the appropriate documents listed on the **Required Dependent Verification Documents Chart** provided with this letter to validate eligibility status for continuation of benefit coverage for your dependent(s).

Failure to provide this information will result in your dependent(s) becoming ineligible to remain on the XYZ Company Health Plan.

BASIC is managing the dependent eligibility documentation on behalf of XYZ Company. You must send this information no later than <date> to ensure your dependent(s) continued eligibility to participate in the XYZ Company Health Plan. Please enclose the necessary documents in the envelope provided. All documentation received will be stored electronically. Therefore, please send copies, not originals. All paper documents received will be destroyed (not returned to the employee) after being electronically stored.

If you have any questions, please call BASIC at 1-800-444-1922, extension 4.

Sincerely,
On behalf of XYZ Company

BASIC HR Services
1.800.444.1922 ext. 4



9246 Portage Industrial Drive
 Portage MI 49024
 269-327-1922
 800-444-1922

Required Dependent Verification Documents Chart for XYZ Company

Dependents	Eligibility Definition	Required Documentation
Spouse	Legal Spouse by Marriage	<ul style="list-style-type: none"> ➤ Photocopy of marriage certificate
Children	<p>The Limiting Age for covered children is Twenty-six (26) years, regardless of presence or absence of a child’s financial dependency, residency, student status, employment, marital status or any combination of those factors. Coverage based on the Limiting Age elected above terminates on the last day of the calendar month in which the Limiting Age is reached. However, such coverage shall be extended in accordance with any applicable federal or state law.</p>	<ul style="list-style-type: none"> ➤ Natural Child- photocopy of birth certificate showing employee’s name ➤ Step Child—Photocopy of birth certificate showing employee’s spouse and a copy of the marriage certificate showing the employee and parent’s name ➤ Legal Guardian, Adoption, Grandchild(ren), or Foster Child(ren)— photocopy of Affidavits of Dependency, Final Court Order with presiding judge’s signature and seal or Adoption Final Decree with presiding judge’s seal
Dependent children with disabilities		<ul style="list-style-type: none"> ➤ Photocopy of Social Security disability award (if a disability ruling by Social Security is pending, include a current copy of the application for disability)

