UNIVERSITY OF NEW HAVEN

Medical Coverage Extension Application for Eligible Dependent Children

Effective January 1, 2009, a new Connecticut Law (Public Act No. 08-147) allows parents to cover certain unmarried dependent children up to age 26, under the parent's group health insurance plan provided certain eligibility requirements are met.

If you have dependent children who meet the eligibility requirements and wish to add them to your medical coverage complete the information below and send to Human Resources.

The open enrollment period is from 12/1/08 – 2/28/09.

EMPLOYEE NAME _____
DEPARTMENT _____
POSITION _____
WORK PHONE NUMBER _____

Child's Full Name: _____
Child's SS #: _____ date of birth: _____ age _____

Child's Full Name: _____
Child's SS #: _____ date of birth: _____ age _____

Child's Full Name: _____
Child's SS #: _____ date of birth: _____ age _____

Child's Full Name: _____
Child's SS #: _____ date of birth: _____ age _____

To be eligible for coverage, your dependent child must meet all of the following criteria:

- Is under 26 years of age
- Is a resident of the state of Connecticut
- Is not married
- Is not covered through his or her own employment under another group plan

This is to certify that the dependent child(ren) listed above, meets the dependent definition as established by Connecticut Law (Public Act No. 08-147) and such proof can and will be provided if requested by the University.

SIGNATURE _____ DATE _____