Kentucky Employees' Health Plan
Department of Employee Insurance
Enrollment Information Branch (Fax: 502 564-1205)
KEHP.KY.GOV · 1-888-581-8834

2015 Dependent eligibility rules and verification requirements are contained in the following chart. Dependent verification for Qualifying Events must be submitted with the Qualifying Event documents. Qualifying Event documents must be signed within the event timeframe.

Definition of Eligible Dependent(s)	Documentation
Spouse A person of the opposite sex who is legally married to an Employee or Retiree.	A legible photocopy of the marriage certificate or a legible photocopy of the top half of the front page of the Employee/Retiree's most recent federal tax return (Form 1040)
Common Law Spouse A person of the opposite sex with whom you have established a common law union in a state which recognizes common law marriage (Kentucky does not recognize common law marriage).	A legible photocopy of the certificate or affidavit of common law marriage from a state that does recognize common law marriage.
Child Age 0 to 25 In the case of a child who has not yet attained his/her 26th birthday, "child" means an individual who is – • A son, daughter, stepson, or stepdaughter of the Employee/Retiree, or • An eligible foster child of the Employee/Retiree (eligible foster child means an individual who is placed with the Employee/Retiree by an authorized placement agency or by judgment, decree, or other order of any court of competent jurisdiction and includes court awards of guardianship or custody), or • An adopted child of the Employee/Retiree (a legally adopted individual of the Employee/Retiree, or an individual who is lawfully placed with the Employee/Retiree for legal adoption by the Employee/Retiree).	**Natural Child**: A legible photocopy of the child's birth certificate showing the name of the Employee/Retiree as a parent. **Step Child**: A legible photocopy of the child's birth certificate showing the name of the Employee/Retiree's Spouse as a parent; and a legible copy of the marriage certificate showing the names of the Employee/Retiree and the Spouse. **Legal Guardian, Adoption, or Foster Child(ren)**: Legible photocopies of court orders, guardianship documents, or affidavits of dependency, with the presiding judge's signature and filed status; or legible adoption or legal placement decrees with the presiding judge's signature.
Disabled Dependent A Dependent child who is totally and permanently disabled may be covered on your KEHP benefit plan beyond the end of the month in which he/she turns 26, provided the disability (a) started before his/her 26th birthday and (b) is medically-certified by a physician. A disabled child who was not covered on this Plan prior to his/her 26th birthday may not be enrolled in KEHP on grounds of total and permanent disability unless and until he/she sustains a loss of other insurance coverage. In such a case, a request to enroll a Dependent child in KEHP on grounds of total and permanent disability must be made no later than 35 calendar days following the loss of other insurance coverage.	Contact the Enrollment Information Branch at 502-564-1205 for the specific documentation needed. Examples may include a physician statement or a disability determination by the Social Security Administration.