AGE 26 DEPENDENT TERMINATION PROCESS

- When a dependent child who is covered on an employee or retiree insurance plan turns 26 years old, they are no longer eligible to be covered under your medical, dental, vision or life insurance plan. This is considered a Qualifying Life Event (QLE).
- Age 26 dependents will be automatically terminated from your current plan and will have different termination processes depending on the status of the employee, as active or retired.
- There will not be any notification of this required change. To ensure that you are aware of upcoming changes, please keep track of your dependents’ age eligibility and read the following information about termination carefully.
- **Active employees - Read pages 1-2**
- **Retired employees - Read pages 2-3**

ACTIVE EMPLOYEES

Termination Date & Premium Payment

- Termination of coverage for a dependent will take place on the last day of the month that they have turned 26 years old. This is the date that the dependent’s coverage will stop and the employee must continue to pay premiums for that coverage until the end of the current pay period.

Tier Change & Premium Reduction

- When the dependent is terminated, the employee’s coverage may require a tier change. (Ex: If you have one dependent child turning 26 and your spouse, you would be changing from the Family tier to the Employee + Spouse tier).
- The ADOA Benefits Services Division will manually apply this tier change to the employee’s account on the last day of the month of the dependent’s 26th birthday.
- The change in premiums withheld from the employee’s pay will not occur until the following pay period after the dependent has been terminated.
- You will not be notified of these changes and should plan ahead to prepare for this QLE.
- Dependent Life and AD&D insurance coverage: ADOA will not cancel this coverage when your dependent is terminated. You will have to submit a Declaration for Change and an Enrollment Form to decline Dependent Life and AD&D. Changes become effective on the first day of the first pay period after all required forms are submitted and approved. Forms can be found on benefitoptions.az.gov/QLE.

Disabled Dependent

- Contact your medical vendor customer service to request a Disabled Dependent Application within 60 days of your child’s 26th birthday.
- Make an appointment or contact your physician to complete your child’s medical history and statement.
Fax or mail your completed application, physician statement, and federal income tax forms to the medical vendor to start the verification process.

The medical vendor will send you a letter within 30 days to inform you if your child qualifies for continuation of coverage as a disabled dependent.

**COBRA Coverage**

- If you are an active employee, your dependent may be eligible to receive COBRA benefits after turning 26 years old. COBRA continuation coverage is a continuation of plan coverage when it would otherwise end because of a qualified life event.
- You are only able to continue the same amount and type of coverage that was in place before the month of the qualifying life event. There can be no changes to plan coverage permitted after termination or at the start of COBRA continuation coverage.
- The ADOA Benefit Services Division will determine final eligibility for COBRA coverage. For more information on COBRA, please visit [benefitoptions.az.gov/COBRA](http://benefitoptions.az.gov/COBRA).

**RETIREES**

**Termination Date and Premium Payment**

- Termination of coverage for a dependent will take place on the last day of the month that they have turned 26 years old. This is the date that the dependent’s coverage will stop along with the premium payment for the dependent’s coverage.

**Tier Change & Premium Reduction**

- When the dependent is terminated, the employee’s coverage may require a tier change. (Ex: If you have one dependent child turning 26 and your spouse, you would be changing from the Family tier to the Employee + Spouse tier).
- The ADOA Benefits Services Division will manually apply this tier change to the retiree’s account on the last day of the month of the dependent’s 26th birthday.
- The change in the premium amount paid by the retiree will occur the first day of the month following the tier change. (Ex: If the dependent terminates on September 30th, and a tier change is required, the current tier would have a stop date of September 30th and the new tier would start on October 1st).
- You will not be notified of these changes and should plan ahead to better prepare for this change in coverage.

**Disabled Dependent**

- Contact your medical vendor customer service to request a Disabled Dependent Application within 60 days of your child’s 26th birthday.
- Make an appointment or contact your physician to complete your child’s medical history and statement.
- Fax or mail your completed application, physician statement, and federal income tax forms to the medical vendor to start the verification process.
The medical vendor will send you a letter within 30 days to inform you if your child qualifies for continuation of coverage as a disabled dependent.

Finding New Coverage
● Dependents turning 26 years old on a retiree’s insurance plan will not be able to extend coverage through COBRA continuation coverage.
● The dependent will be responsible for finding and enrolling themselves in their own coverage before or at the time of their termination from the retiree’s insurance plan.
● To assist in the evaluation of the coverage options that are available for Age 26 dependents that are no longer covered, the health insurance marketplace can be a helpful resource.
  ○ The marketplace is designed to help you find health insurance that meets your needs and fits your budget.
  ○ The marketplace offers “one-stop shopping” to find and compare private health insurance options.
  ○ The marketplace can help you evaluate your coverage options, including your eligibility for coverage through the marketplace and its cost.
  ○ Visit HealthCare.gov for more information, including an online application for health insurance coverage and a Health Insurance Marketplace in your area.

Questions?
Please contact a Benefit Options representative by phone 602-542-5008, toll-free 1-800-304-3687, by email benefitsissues@azdoa.gov or visit benefitoptions.az.gov. We can help you Monday-Friday, 8 a.m.- 5 p.m. Arizona Time, except holidays.