



SPARC DEPENDENT ELIGIBILITY VERIFICATION REQUIREMENTS

At SPARC Group, we value everyone's health and well-being and strive to provide you and your eligible family members; including your spouse, domestic partner and/or children, with competitive and affordable healthcare coverage. An essential component of controlling healthcare costs is ensuring our eligible dependents is accurate.

You are required to review the plan's eligibility requirements and provide documentation supporting the eligibility of each of your dependents as you enroll them in plans.

ACTION REQUIRED

Proof of eligibility for each dependent must be submitted after your enrollment is completed in Dayforce and not later than 7 days of your benefits effective date.

If the appropriate proof of eligibility is not received by the deadline outlined above, those dependents listed will lose their coverage under the SPARC Group health plans effective retroactive to the original benefits effective date.

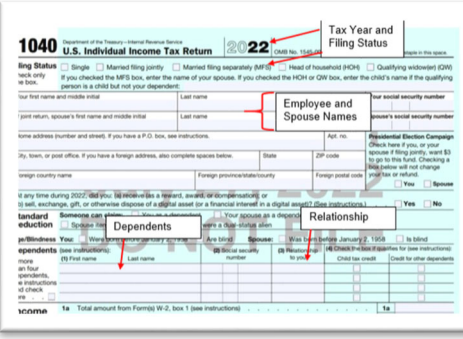
What do you need to do?

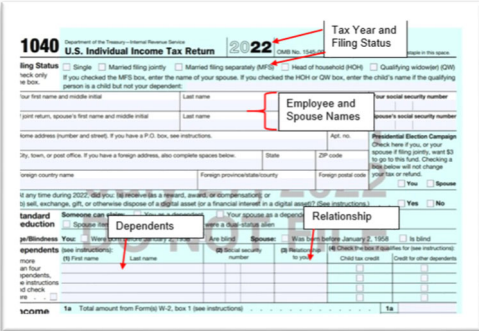
- Review the Eligibility Definitions listed on Benefits Website at: <https://www.sparcbenefits.com/> to determine if your covered dependents are eligible
- Review the Acceptable Supporting Documentation requirements for each dependent type to determine what needs to be submitted
- Submit your documentation in Dayforce (refer to the "[Dependent Verification Step By Step Dayforce Instructions](#)") not later than 7 days after your benefits effective date to ensure your dependents are not removed from coverage effective the original benefits effective date

If you have additional questions about this process, the eligibility of your covered dependents, please contact the Benefits team at: benefits@sparcgroup.com

SPARC GROUP VERIFICATION REQUIREMENTS

Eligibility Requirements	Acceptable Supporting Documentation
<p>SPOUSE Your legal spouse</p>	<p>SUBMIT ONE DOCUMENT</p> <ul style="list-style-type: none"> • Valid legal or religious marriage certificate, which must include: <ul style="list-style-type: none"> ○ Name of the employee and spouse ○ Date of marriage ○ Certifier's signature/official seal • Presently valid state-issued certificate, declaration, or registration of common law or informal marriage (in applicable states) which must include: <ul style="list-style-type: none"> ○ Name of the employee and spouse ○ Date of informal marriage ○ Certifier's signature/official seal • Legal household/family registry; must show spousal relationship <i>(This is only acceptable if you were married outside the U.S. and do not have a marriage certificate.)</i>

Eligibility Requirements	Acceptable Supporting Documentation
<p>Child under age 26 Your children until the end of the month that they reach age 26 which includes:</p> <ul style="list-style-type: none"> • a natural child, or a child placed with you for adoption • a stepchild*; or • a child of your domestic partner* • any other child for whom you have legal guardianship or court-ordered custody. <p>Sample Federal 1040 Form</p>  <p>Please mark out SSN's and Financial Info</p>	<p>SUBMIT ONE DOCUMENT</p> <ul style="list-style-type: none"> • Your Federal 1040 or State income tax return, which must: <ul style="list-style-type: none"> ○ Be from most recent tax year ○ Contain the name of employee or spouse or domestic partner* ○ List your dependent with the relationship as daughter, son, or child <i>(Only the page listing filing status and exemptions is required-see sample. Form 887-9, the first page of E-Files are not accepted.)</i> • Child's legal or hospital birth certificate or affidavit of parentage, which must: <ul style="list-style-type: none"> ○ Contain the name of employee or spouse or domestic partner* ○ Contain the name of the child ○ Indicate date of birth • Legal household/family registry; must show relationship <i>(This is only acceptable if the child was born outside the U.S. and you have no legal birth certificate.)</i> • Final divorce decree, parental custody agreement or Qualified Medical Child Support Order (QMCSO), which must: <ul style="list-style-type: none"> ○ Contain the name of the employee or spouse or domestic partner* indicating parentage of the child ○ Contain the name of the child ○ Official signature or stamp indicating document has been filed • Legal adoption, guardianship, or legal custody papers, which must: <ul style="list-style-type: none"> ○ Contain the name of the employee or spouse or domestic partner* ○ Contain the name of the child ○ Official signature or stamp indicating document has been filed <p>*Also required to prove the relationship between you and your stepchild: <i>If you are an employee providing documentation for a child of your legal Spouse or Domestic Partner, also submit one of required documents listed for Spouse or Domestic Partner, even if you do not currently cover your Spouse or Domestic Partner.</i></p>

Eligibility Requirements	Acceptable Supporting Documentation
<p>DOMESTIC PARTNER Your domestic partner</p> <p>Sample Federal 1040 Form</p>  <p>Please mark out SSN's and Financial Info</p>	<p>SUBMIT THREE DOCUMENTS - Submit one from List A AND two from List B:</p> <p>List A:</p> <ul style="list-style-type: none"> Valid SPARC Group Domestic Partner Affidavit, which must include <ul style="list-style-type: none"> Names of the employee and domestic partner State-issued Certificate of Domestic Partnership, which must include <ul style="list-style-type: none"> Names of the employee and domestic partner Date of Certificate Certifier's signature/official state seal <p>List B:</p> <ul style="list-style-type: none"> Utility bill, which must: <ul style="list-style-type: none"> Be dated within the last 12 months Contain name of employee and domestic partner as joint owners Contain name of utility company Document from a bank account or financial institution, which must: <ul style="list-style-type: none"> Be dated within the last 12 months Contain name of employee and domestic partner as joint owners of the account Contain name of financial institution Insurance document such as homeowner, renter, or automobile, which must: <ul style="list-style-type: none"> Be dated within the last 12 months Show employee and domestic partner as joint account owners (Individuals listed as "drivers" on automobile insurance documents do not prove joint account ownership) Contain name of insurance company Mortgage document or current lease, which must: <ul style="list-style-type: none"> Be dated within the last 12 months Contain name of employee and domestic partner as joint owners or joint renters Contain name of mortgage company, landlord, or rental company Valid vehicle registration, which must: <ul style="list-style-type: none"> Be dated within the last 12 months Contain name of employee and domestic partner as joint owners Contain name of state or county in which issued Your Federal 1040 or State income tax return, which must: <ul style="list-style-type: none"> Be from 2022 or 2023 tax year Name employee as person filing Name of domestic partner listed as dependent with relationship of "Other" (Only the page listing filing status and exemptions is required-see sample. Form 887-9, the first page of E-Files are not accepted.) Beneficiary designation for Life Insurance, Retirement Benefits or Will, which must: <ul style="list-style-type: none"> Contain name of employee domestic partner Contain name of the domestic partner as a beneficiary Assignment of durable power of attorney or health care power of attorney, which must: <ul style="list-style-type: none"> Contain name of employee Contain name of the domestic partner as the power of attorney

Eligibility Requirements	Acceptable Supporting Documentation
<p><u>Child age 26 and over</u> Any dependent <i>disabled child</i>, over the age of 26 who otherwise meets the criteria for “child” and is:</p> <ul style="list-style-type: none"> permanently disabled and not able to earn his or her own living because of a physical or mental disability which started prior to the date he or she reaches the maximum age for dependent children under the Plan. 	<p>SUBMIT TWO DOCUMENTS</p> <ul style="list-style-type: none"> Any one of the documents listed for <u>Child under age 26.</u> <p><u>AND</u> Statement certifying that the dependent child:</p> <ul style="list-style-type: none"> Cannot support themselves because of a physical or mental disability. All information must be included on physician’s letterhead or form. <p><u>*Also required to prove the relationship between you and your stepchild:</u> <i>If you are an employee providing documentation for a child of your legal Spouse or Domestic Partner, also submit one of required documents listed for Spouse or Domestic Partner, even if you do not currently cover your Spouse or Domestic Partner.</i></p>

Note:

An official certificate of every birth, death, marriage, and divorce should be on file in the locality (state, city or county) where the event occurred. You may also visit the Centers for Disease Control and Prevention’s vital records page at <http://www.cdc.gov/nchs/w2w.htm> or visit Vitalchek.com to request specific documents by state and obtain information on the approximate costs and time of delivery.

A copy of your tax return may be requested from the Internal Revenue Service by visiting www.irs.gov/taxtopics/tc156.html?portlet=1 or by contacting the Internal Revenue Service at 1-800-829-1040