



DEPENDENT CHILD CERTIFICATION

Information provided to the Employees Retirement System of Texas (ERS) is maintained for managing your benefits.

If you have questions about your information, or believe that information provided to ERS may be incorrect, please notify ERS.

Complete a separate form for each dependent child to be covered.

Note: If you certify online, you do not need to complete this form, unless requested due to a dependent eligibility audit.

You may certify your dependent either by:

- Using your online account at www.ers.texas.gov, or
- Active employees: may send this completed form to your benefits coordinator or HHS Employee Service Center, or
- Other members: may send this completed form to:

**Employees Retirement System of Texas
Customer Benefits
P.O. Box 13207
Austin, TX 78711-3207
(866) 399-6908 Toll-free**

SECTION A: PERSONAL DATA

Employee/Retiree Name: First, MI, Last	Social Security Number (SSN)	Employee ID	
Agency Name		Dept ID/Agency Number	
Legal Name of Child: First, MI, Last	Child's Social Security Number (Required for 12 months or older)	Child's Birth Date mm/dd/yyyy	

SECTION B: DEPENDENT CHILD CATEGORY

Pick one true statement to certify dependent eligibility:

1. I certify this child is my:
(check one, a. through f.)
- a. natural child,
 - b. adopted child,
 - c. foster child,
 - d. stepchild,
 - e. court-appointed ward, or
 - f. child under managing conservator.

- OR -

2. I certify:
- this child is related to me by blood or marriage **AND**
 - was claimed as a dependent on my federal income tax return in the previous calendar year **AND**
 - I will continue to claim this child on my federal income tax return for every year the child is enrolled.

- OR -

3. I certify:
- this child is related to me by blood or marriage and was not claimed on my federal income tax return for last year because the child was born in the current calendar year **AND**
 - will be claimed on my federal income tax this year and for every year the child is enrolled.

- OR -

4. I certify this child is related to me by blood or marriage and is eligible for benefits in the Texas Employees Group Benefits Program due to good cause and I have read and understand the definition of good cause provided below. Definition of Good Cause: Good cause means that you cannot certify this child under items 2 or 3 above because of unexpected circumstances that required you to take parental responsibility for the child this year. You may not certify the child for good cause unless you will legally claim the child as your dependent for federal income tax purposes in this current year.

Member Comment – Only complete this box if you choose Option 4.

SECTION C: CERTIFICATION

I understand I may be asked to show documentation to support my selection. False information could lead to expulsion from the Texas Employees Group Benefits Program and/or criminal prosecution.

Signature of Employee/Retiree

Date Signed (mm-dd-yyyy)

Dependent eligibility chart

Make sure your dependents are eligible for insurance and that you have the appropriate documentation to show eligibility before you enroll them in any coverage. If you are unable to supply the documents listed below, please contact Alight Solutions Customer Service.

NOTE: You must provide a birth certificate to enroll a newborn child. Alight Solutions will accept a hospital-issued birth certificate for a child age three months or younger.

Dependent of the Participant (employee, retiree or other individual enrolled in program as recognized by Texas law)	Eligibility	Examples of Supporting Documents (these documents are required)
Spouse	Spouse as recognized by law	<ul style="list-style-type: none"> • Government-issued marriage certificate and • Current federal tax return OR • Proof of joint ownership** issued within last six months OR • Government-issued marriage certificate only (if married in the last 12 months)
Common Law Spouse	Spouse as recognized by law	<ul style="list-style-type: none"> • Declaration of informal marriage with the county courthouse AND • Current federal tax return OR • Proof of joint ownership** issued within last six months
Biological Child*	Natural-born child	<ul style="list-style-type: none"> • Government-issued birth certificate (see note above)
Adopted Child*	Child is eligible at time of placement.	<ul style="list-style-type: none"> • Adoption certificate OR • Adoption placement agreement AND • Petition for adoption
Stepchild*	Child is not required to live in participant's household.	<ul style="list-style-type: none"> • Government-issued marriage certificate OR • Declaration of informal marriage with the county courthouse AND • Child's government-issued birth certificate AND • Current federal tax return OR • Proof of joint ownership** issued within last six months
Child of Managing Conservator*	Child is identified in the managing conservatorship granted to the participant.	<ul style="list-style-type: none"> • Managing conservatorship court document signed by judge
Foster Child*	Child must not have other governmental insurance.	<ul style="list-style-type: none"> • Placement order AND • Affidavit of foster child
Legal Ward Child*	Child is under the protection or in the custody of the participant.	<ul style="list-style-type: none"> • Court order signed by a judge appointing participant as the child's guardian (documentation of legal custody) AND • Government-issued birth certificate
Other Child*	<p>Child is related to participant by blood or marriage, was claimed as dependent on participant's federal income tax return for previous tax year, and will continue to be claimed on participant's federal income tax return for every calendar year the child is covered.</p> <p>A child who is acquired or born in the current calendar year will be claimed and continue to be claimed on participant's federal income tax return for every calendar year the child is covered.</p>	<ul style="list-style-type: none"> • Government-issued birth certificate (see note above) OR • Government-issued marriage license to prove family relationship AND • Current federal tax return OR • Affidavit of good cause

*Child must be under age 26 for health insurance, and can be married or unmarried. Child must be under age 26 and unmarried for dental coverage, State of Texas Vision and Dependent Term Life Insurance. Disabled dependent children age 26 and over may be eligible for insurance. For more information, visit the ERS website.

**See the Documentation Requirements in the communications Alight Solutions sends you for examples of Joint Ownership documents. False information could lead to expulsion from the GBP and/or criminal prosecution.