


4. Documentation Requirements

Reason for Change or Enrollment	Type of Documentation
Loss of Other Coverage	Certificate of Creditable Coverage from health plan; COBRA notice if coverage end date, covered individuals, and health plan are indicated; or letter from administrator if self-funded health plan. If loss of employer premium contributions, letter from employer indicating they no longer contribute towards their employee's premium.
Divorce Family to single	No documents required but ETF may request per the Terms and Conditions on Page 4 of this application, Number 7.
Divorce Family coverage remains in place when more dependents than spouse/stepchildren covered	Copy of <i>Continuation/Conversion Notice</i> (ET-2311) sent to ex-spouse of the subscriber (ETF may request copy of divorce decree from clerk of courts showing date of entry of divorce if needed per the Terms and Conditions on Page 4 of this application, Number 7).
Adoption	Recorded copy of court order granting adoption or letter of placement for adoption.
Legal Ward	Court Order (Letters of Guardianship) granting permanent guardianship of person.
National Medical Support Notice	Copy of National Medical Support Notice.
Paternity	Court order declaring paternity, or Voluntary Paternity Acknowledgement (HCF-5024) filed w/DHS, or birth certificate.
Creating a domestic partnership	Copy of <i>Acknowledgement Letter</i> (ET-2373) indicating effective date of domestic partnership submitted to employer by employee. Health application adding DP should be submitted to employer when <i>Affidavit of Domestic Partnership</i> (ET-2371) is submitted to ETF.
Cancel coverage due to enrollment in other health insurance coverage when premium contributions are deducted pre-tax	Copy of medical ID card or letter from health plan indicating effective date of other coverage. Must be received within 30 days of enrollment in other coverage.**
Family to single because all dependents enrolled in other coverage	Same rules as Cancel above.**
Birth	Original birth certificate not required. ETF may request documentation per the Terms and Conditions on Page 4 of this application, Number 7.
Marriage	Original marriage certificate is not required (ETF may request per the Terms and Conditions on Page 4 of this application, Number 7).
Ending a domestic partnership	<i>Affidavit of Termination of Domestic Partnership</i> (ET-2372). (ETF may request copy of marriage certificate if marriage is reason for termination of domestic partnership per the Terms and Conditions on Page 4 of this application, Number 7.)
Change of address/telephone	None (ETF may request documentation per the Terms and Conditions on Page 4 of this application, Number 7.)
Eligible and enrolled in Medicare	Copy of Medicare card and <i>Medicare Eligibility Statement</i> (ET-4307). (Note: If you are on COBRA Continuation and the subscriber or dependents become Medicare eligible after the COBRA effective date, subscriber or dependent(s) is no longer eligible to continue on COBRA.)
Death	Original death certificate.
Legal change of name (other than due to marriage or divorce)	Copy of court order.
Social Security number change	Copy of card or letter from Social Security Administration.
State retiree re-enroll	Same as loss of other coverage and an ET-4317. During IYC, no documentation required.
Disabled, age 26+	Copy of letter from health plan approving disabled status

 Documentation Required/Must Be Submitted to ETF.
 **Does not apply to retirees.