Eligibility for health care coverage for the dependents and survivors of this system's members and retirants.

- (A) Dental, vision, and health care coverage may be available to an eligible survivor benefit recipient or an eligible dependent upon application on a form provided by the public employees retirement system.
- (B) Except as provided in this paragraph, an eligible survivor benefit recipient may enroll in health care coverage if the benefit recipient is an eligible dependent, as defined in rule 145-4-09 of the Administrative Code. A survivor benefit recipient receiving a benefit under section 145.46 of the Revised Code who is not an eligible dependent may enroll in health care coverage only if the effective date of the primary benefit recipient's benefit is before October 27, 2006.
- (C) The surviving spouse of an age and service retirant or member may enroll an eligible dependent as long as the surviving spouse is enrolled in health care coverage and the eligible dependent continues to meet the definition in rule 145-4-09 of the Administrative Code.
- (D) A spouse of a primary benefit recipient shall cease to be eligible for health care coverage on the first day of the month following the date of the final decree of divorce or dissolution from the primary benefit recipient.
- (E) An eligible dependent described in paragraph (B)(1)(b) of rule 145-4-09 of the Administrative Code shall cease to be eligible for health care coverage on the first day of the month following the last date of full-time attendance at the education organization or training program.
- (F) Upon the death of a primary benefit recipient, any individual who would have been treated as an eligible dependent of the benefit recipient but for the recipient's death shall be treated as an eligible dependent of the primary benefit recipient for purposes of this chapter until the individual reaches the age limitation set forth in paragraph (A)(2)(a) of rule 145-4-09 of the Administrative Code or provides more than one-half of his or her own support.
- (G) A benefit recipient shall inform the retirement system, in writing, not later than thirty days after an eligible dependent no longer meets the requirements of this rule.
- (H) The retirement system may require a benefit recipient to certify the status of an individual as an eligible dependent for purposes of health care coverage. Failure to provide certification within sixty days of the request by the retirement system shall result in the denial or withdrawal of health care coverage for such individual until the next annual health care open enrollment period.

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Date	

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145.58.

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