

KENTUCKY PUBLIC PENSIONS AUTHORITY

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Form 6256 Revised 09/2022

Designation of Spouse and/or Dependent Child for Health Insurance Contributions

Only dependents who meet the definition of a Dependent Child as defined by KRS 16.505(17) and 78.510(49) are eligible to receive health insurance contributions.

The Form 6256 DOES NOT enroll you or your dependents in a health insurance plan. The Form 6256 DOES NOT remove you or your dependents from a health insurance plan. This form ONLY establishes health insurance contribution for Spouse and Dependent Children.

Complete this form if you are a General Assembly Retiree, Hazardous Duty Retiree, Surviving Spouse Beneficiary receiving General Assembly, Hazardous Duty, or duty related benefits under the Fred Capps Memorial Act and electing to cover a spouse and/or dependent child on health insurance.

If you are a recipient as outlined above, you must complete and submit Form 6256 Designation of Spouse and/or Dependent Child for Health Insurance Contributions to the Kentucky Public Pensions Authority (KPPA):

- During the annual open enrollment period prior to January 1 each year.
- Upon your health insurance dependent child obtaining 18 years of age.
- Upon initial enrollment of your health insurance dependent(s).
- When requesting reimbursement or premiums paid for a spouse and/or dependent child under a qualifying reimbursement plan.

You are required to notify KPPA when your health insurance dependent has a change in marital or full-time student status. Member Information Please provide your Member ID or Social Security Number in the Member ID box below Member Name: Member ID: Address: City: State: Zip Code: Is this a new address? \bigcirc No Phone (select type) Email: O Home Work Spouse Information Spouse Social Security Spouse Name: Number: Date of Birth:

Only dependents who meet the definition of a <u>Dependent Child</u> as defined by KRS 16.505(17) and 78.510(49) are eligible to receive <u>health insurance contributions</u>. KRS 16.505(17) and 78.510(49) states "Dependent Child" means a child in the womb and a natural or legally adopted child of the member who has neither attained age eighteen (18) nor married or who is an unmarried full-time student who has not attained age twenty-two (22). Solely in the case of a member who dies or becomes totally and permanently disabled as a direct result of an act in line of duty or as a result of a duty-related injury and is eligible for the benefits provided by KRS 61.621(5)(a), "Dependent Child" also means a naturally or legally adopted disabled child regardless of age, to the member if the child has been determined to be eligible for federal Social Security disability benefits or is being claimed as a qualifying child for tax purposes due to the child's total and permanent disability. **Note: Stepchildren and Grandchildren must be legally adopted in order to qualify as Dependent Child per this statute.**

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Dependent Child Information	(Age 18-22 Dependen	t Information Only)					
Dependent Child Name:		Social Security Number:			Dependent Child Date of Birth:		
Address:		City:		State:		Zip Code:	
Relationship to Member:	○ Natural Child						
Is this dependent child married	or has this dependent c	hild been married previously	/?	es C	No		
Is this dependent child age 18			←Yes ←No				
Is this dependent child a full-time student?				C Yes C No			