Special Enrollment Notice

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage or Declaration of Domestic Partnership, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage or Declaration of Domestic Partnership.

If you have a new dependent as a result of birth, adoption, guardianship or placement for adoption or foster care, you may be able to enroll yourself and your dependents. However, you must request enrollment within 60 days after the event.

To request special enrollment or obtain more information, contact Broward County Division of Human Resources – Employee Benefit Services Section: <u>benefits@broward.org</u> or 954-357-6700.