



# **Domestic Partner Information Packet**



Dear Employee:

This packet includes answers to frequently asked questions about domestic partner benefits and the benefits offered through Sweet Home School District. New employees and District employees who currently participate in a medical and/or dental plan are eligible to enroll their domestic partner. Both same sex and opposite sex domestic partners are eligible to participate.

If you wish to enroll your domestic partner you will be required to complete the OEBS enrollment form and Affidavit of Domestic Partnership. Both of these forms are included in this packet or are available separately through the Business office.

If you have any questions, please contact us at 541-367-7113.

Sincerely,

Kevin Strong  
Business Manager

## Frequently Asked Questions Regarding Domestic Partner Coverage

1. Who qualifies as a domestic partner?

Answer:

- Domestic partners include both same gender and opposite gender partners.
- The OEGB Affidavit of Domestic Partnership requires a declaration from the employee and partner that the following applies:
  1. Both are at least 18 years of age;
  2. Are responsible for each other's welfare and are each other's sole domestic partners;
  3. Are not married to anyone and either has not had a spouse or another domestic partner within the prior six months. If previously married, the six-month period starts on the final date of divorce;
  4. Share a close personal relationship and are not related by blood closer than would bar marriage in the State of Oregon;
  5. Have jointly shared the same regular and permanent residence for at least six months; and
  6. Are jointly financially responsible for basic living expenses defined as the cost of food, shelter and any other expenses of maintaining a household. Financial information must be provided if requested.

2. How do I enroll my domestic partner for medical and/or dental coverage?

Answer:

- Current District participants may enroll a domestic partner midyear at the point their partner first meets the qualifications. The employee and partner must complete, sign, and return the Affidavit of Domestic Partnership along with an enrollment application to the Business office.
- New employees may enroll their domestic partner at the time of hire if the previously cited qualifications are met. The Affidavit of Domestic Partnership and enrollment form are included in this packet.
- Employees choosing not to enroll a domestic partner when first eligible may enroll them during the annual open enrollment period. The same forms will apply and must be completed.

3. What happens if I do not return the completed Certification of Domestic Partnership and enrollment forms?

Answer: The domestic partner will not be enrolled.

4. The domestic partner information packet is a summary. Where can I find more detailed information about eligibility and enrollment procedures for a domestic partner?

Answer:

The Health Plan Member Handbooks govern eligibility and enrollment procedures for all employees, spouses, domestic partners, and dependents.

5. Are domestic partners of a “benefits covered” Sweet Home retirees eligible?

Answer:

Yes, as long as the coverage is continued under a District retiree plan. Retired employees covered under a PERS-sponsored health plan would need to contact PERS for information on domestic partner coverage.

6. Are dependents of a domestic partner qualified?

Answer:

Yes, children of a domestic partner are eligible if they meet the requirements of an eligible dependent as defined by the health plan rules. These requirements are the same for dependents of any other District member:

Child” means and includes the following:

(a) An eligible employee’s, spouse’s, or domestic partner’s biological son, daughter, stepson, or stepdaughter; adopted child, child placed for adoption, or legally placed child, who is 25 or younger on the first day of the month. An eligible employee must provide the required custody or legal documents to their Educational Entity showing proof of adoption, legal guardianship or other court order if enrolling a child for whom the employee, spouse, or domestic partner is not the biological parent. Grandchildren are only eligible when the eligible employee is the court-ordered legal guardian or adoptive parent of the grandchild. Legal guardianship must be confirmed by a court-prepared and -signed document.

(b) A person who is incapable of self-sustaining employment because of a developmental disability, mental illness, or physical disability. There is no age limit for a dependent child who is incapable of self-sustaining employment because of a developmental disability, mental illness, or physical disability. When the dependent child is 26 years of age or older all the following requirements must be met:

(A) The disability must have existed before attaining age 26.

(B) The employee must provide evidence to the Educational Entity or OEBC that (1) the person had health plan coverage, group or individual, prior to attaining age 26, and (2) health plan coverage continued without a gap until the OEBC health plan effective date.

(C) The person's attending physician must submit documentation of the disability to the eligible employee's OEGB health insurance plan for review and approval. If the person receives health plan approval, the health plan may review the person's health status at any time to determine continued OEGB coverage eligibility.

(D) The person must not have terminated from OEGB health plan coverage after attaining the age of 26.

(c) Eligibility for coverage under this rule includes people who may not be dependents under federal or state tax law and may require an Educational Entity to adjust an Eligible Employee's income based on the imputed value of the benefit.

7. What medical and dental plans will be available to my domestic partner?

Answer:

Domestic partners must enroll in the same medical, vision, and dental plans as the employee. Adding a domestic partner does not allow an employee to change current plan elections.

8. Where can I find more detailed information about the insurance benefits and rules?

Answer:

You can go on line to [www.oregon.gov/DAS/OEGB/index.shtml](http://www.oregon.gov/DAS/OEGB/index.shtml) or contact the Business office for a handbook.

9. When is my domestic partner covered by the insurance?

Answer:

Coverage for your domestic partner enrolled during open enrollment will be October 1<sup>st</sup>. Coverage for domestic partners added midyear will be effective the first of the month following the date you meet the requirements outlined on the Affidavit of Domestic Partnership. You must complete and submit the Affidavit and enrollment forms within 31 days of qualifying for coverage.

10. Are the records of employees with domestic partnerships kept confidential?

Answer:

Yes, all employee enrollment records are treated with confidentiality.

11. What are the tax implications for enrolling my domestic partner?

Answer:

Under applicable federal and state income tax law, payments for health coverage of a domestic partner may not be eligible for pre-tax treatment. Coverage of the domestic partner and their dependents may result in additional imputed taxable

income to the employee, and related withholding for payroll taxes (including income and social security taxes) by the employer. We strongly advise you to discuss tax questions with your tax advisor.

According to the Internal Revenue Service, health insurance coverage for domestic partners is a taxable benefit to the employee.

- Sweet Home School District employees who enroll domestic partners in the health plans will have to pay income taxes on the fair market value of the health insurance coverage their domestic partners receive.
- The value of the domestic partner insurance coverage is considered earnings, is included in the employee's gross taxable income, and is subject to state and federal income tax and FICA withholding.
- The taxable value of the domestic partner coverage will depend on which health plan the employee is enrolled and the number of dependents enrolled.
- The attached charts show the monthly amount to be taxed for your medical and dental plans. To find the taxable value of the benefit that applies to you, locate your health plan in the left-hand column and then determine which premium rate applies to your situation.

The following is an example of how the imputed value tax is calculated:

The difference in actual premium for employee only coverage, compared to employee and spouse/domestic partner coverage, is the imputed value tax. This amount is added to the employee's subject taxable wages for the purpose of calculating the domestic partner tax in which the employee will pay. These amounts are higher if you are enrolling a domestic partner and your domestic partner's children (see attached chart).

12. Can I delete my domestic partner midyear if he/she experiences a Qualified Status Change?

Answer:

Yes, the same rules apply for any dependent added mid plan year.

13. What happens if my domestic partner becomes my legal spouse?

Answer:

You will need to complete a Statement of Termination of Domestic Partnership form, a new enrollment form, and provide a copy of your marriage certificate. Only then can we discontinue the deductions for the imputed value tax.

14. Where should I send or drop off the completed forms and who do I call for further information?

Answer:

Sweet Home School District #55

Business Office

1920 Long St.

Sweet Home, OR 97386

Or, call us at 541-367-7113



**Sweet Home School District #55  
Domestic Partnership  
Statement of Termination of Partnership**

Classified                       Licensed                       Admin/Confidential

I \_\_\_\_\_ affirm that the Affidavit of  
*Name of Employee*

Domestic Partnership attested to and signed by me and signed by my domestic

Partner \_\_\_\_\_ shall be and is terminated  
*Name of Domestic Partner*

on \_\_\_\_\_ .  
*Date of Dissolution*

Termination of our partnership is due to:

- Termination of domestic partnership because of a change in one or more of the circumstances attested to in the Affidavit of Domestic Partnership.
- My opposite gender domestic partner and I have been married.
- Death of domestic partner.

I understand that I cannot file another Affidavit of Domestic Partnership to enroll a new domestic partner until six (6) months following receipt of this statement by my employer.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee ID Number

Effective Date \_\_\_\_\_

Copy sent to Payroll

*Rev July 2009*