This policy applies to non-group health and dental products.

All dependents to be covered under a Health Connector non-group product must be included on the application for enrollment. It is the responsibility of an eligible individual to ensure that information regarding their dependents that is submitted on the application is accurate and complete, and that all dependents comply with the requirements of this policy.

In order to be enrolled on the same plan as a subscriber, a dependent may be any of the following:

1. A legal spouse of a subscriber, according to the law of the state in which the subscriber resides;
2. A legal civil union partner of a subscriber, according to the law of the state in which the subscriber resides;
3. A domestic partner of a subscriber;
4. A divorced or separated spouse of a subscriber as required by Massachusetts law;¹
5. A child of a subscriber or subscribers’ legal spouse or domestic partner, until age twenty-six (26), defined as:
   a. A biological child; or
   b. A stepchild; or
   c. A legally adopted child or child placed for adoption with the subscriber or subscribers’ legal spouse or domestic partner, according to the law of the state in which the subscriber resides;
6. A child for whom the subscriber or subscriber’s legal spouse or domestic partner is the court appointed legal guardian;
7. A dependent child of an enrolled child;
8. A disabled adult child over age 26 of a subscriber or subscriber’s legal spouse or domestic partner.

Enrollment Group Review and Auditing:
The Health Connector, at its discretion, may request documentation from any individual to validate the eligibility of a dependent to be a part of the subscriber’s enrollment group.

The Health Connector, at its discretion and with reasonable notice, may conduct a random sample audit of enrollment groups for enrolled individuals at any time that the Health Connector determines it is reasonably necessary to verify that a dependent is appropriately enrolled on the same plan as the subscriber.

An issuer, upon reasonable cause, may audit any dependents(s) enrollment in one of its plans through the Health Connector by either:

1. Requesting access to the dependent information available to the Health Connector; or
2. Auditing the dependent(s) directly.
The Health Connector is solely responsible for any dependent enrollment determinations, and associated impacts on enrollments, resulting from any audits, whether conducted by the Health Connector or an issuer.

1 If a divorced spouse is to be covered in addition to a current spouse, the divorced spouse must be provided with a separate non-group plan.