



Employees who want to cover their eligible spouse on the HCS Health Plan must complete the Spousal Coverage Affidavit. If the completed affidavit is not attached to your benefit enrollment, spouses will be considered ineligible and will be dropped from the health plan. Employees whose spouse will be enrolled in the health plan, must meet the eligibility criteria:

- Spouse has no other health coverage offered through their employer or self-employed.
- Spouse is offered a high deductible plan (\$1,400 or higher deductible) only with their employer; or spouse is self-employed.

Spousal Affidavit

I certify that my spouse either 1) does not have access to a health plan, or 2) has access to a high deductible plan only.

If my spouse has access to a high deductible plan, I will choose the spousal surcharge plan during open enrollment.

By signing below, I hereby certify that the information provided above is true, correct, and current as of the date signed. I understand that any misrepresentation in the information I have provided above will make me subject to disciplinary action and will permit the Hamilton County Department of Education to terminate the spouse's coverage and seek appropriate legal recourse. I further understand that I must report any changes in my spouse's employment status to the Hamilton County Department of Education Benefits Department within 30 days of the occurrence. My signature authorizes the Hamilton County Department of Education, or their assigns, to verify any and all documents provided and contact any institution or organization to verify the facts as stated herein.

Employee ID # _____ Employee Name _____

Employee Signature _____ Date _____

Spouse's Name _____

Spouse's Employer _____