DGA-PRODUCER PENSION & HEALTH

DEPENDENT ENROLLMENT FORM

Please return this form and the required dependent enrollment documentation (see back of this form) to the Health Plan office **via the myPHP online benefits portal** (To register, have your Plan ID number ready and visit dgaplans.org/myPHP.)**,** mail to **DGA–Producer Health Plan, 5055 Wilshire Blvd, Ste. 600, Los Angeles, CA 90036**, email to Eligibility@dgaplans.org, or fax to **(323) 866-2399.**

Dependent Name	Social Security #	Date of Birth	Relationship	Sex	Add/Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop
			❑ Spouse ❑ Child	❑ Male ❑ Female	❑ Add ❑ Drop

All of the above fields are required information. There may be a delay in enrolling your dependents if any of these fields are left blank.

I hereby certify that the dependent(s) listed on this form are eligible for health coverage under the DGA-Producer Health Plan in accordance with the ***Eligible Dependents*** section of the DGA-Producer Health Plan Booklet and its updates.

I understand that I may be held liable for claims overpayments if it is discovered that one of my dependent(s) was not eligible for DGA-Producer Health Plan coverage while they were enrolled as a dependent under my DGA–Producer Health Plan coverage.

Name: ____________________

Health Plan ID Number: ____________________

Date of Birth: ____________________

Last 4 Digits of SSN: ____________________

Signature: X ____________________

Must be signed by the participant

Date: ____________________

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REQUIRED DEPENDENT ENROLLMENT DOCUMENTATION

To verify that your dependents are eligible for Health Plan coverage, you must send our office a copy of the following required enrollment documents:

Marriage

If you have been married for one year or less, send us a copy of your certified marriage certificate.

If you have been married for more than one year, you will need to submit a copy of your certified marriage certificate and one of the following documents that is not older than six months, showing your spouse's name, your own name and a current address:

- A copy of the front page of your most recent filed federal tax return; or
- A copy of a joint household utility bill, such as gas, water, or electric; or
- A copy of a joint bank/credit account statement; or
- A copy of your joint mortgage/lease; or
- A copy of your joint insurance policy.

The financial information on the forms above can be redacted.

Birth

A copy of your child's certified birth certificate.

Adoption/Guardianship

A copy of the adoption or guardianship documents.

Disability

Proof that you are providing at least half of your dependent's support.

For children age 26 and over, you must also remit documentation on an annual basis supporting a current Social Security disability award on behalf of that child.