Here’s what you’ll need to consider when you add a new dependent child because of a family status change – whether a birth, adoption, guardianship or legal custody arrangement.

Who’s Eligible
If you add an eligible dependent child through birth, adoption, or change in guardianship or legal custody, you can enroll that child within 30 calendar days of the family status change. To be eligible, children must be:

- Your dependent children up to age 26 – including your domestic partner’s children if your City of Los Angeles Domestic Partnership Affidavit is approved or you provide a copy of your Declaration of Partnership filed with the California Secretary of State
- Your grandchildren up to age 26 – if you have legal custody and provide the Employee Benefits Division with copies of court papers
- Your grandchildren if the parent is your dependent child up to age 19 – or up to age 26 for a full-time student with valid proof of student status
- Your disabled child age 26 or older who is dependent on you for support if disabled before age 18 and certified as disabled each year by the insurance company for your health plan.

Enrolling A New Dependent Child

What Benefits You Can Change
- Enroll your new dependent in your health and dental coverage
- Enroll in or increase Healthcare Flexible Spending Account and Dependent Care Reimbursement Account contributions
- Enroll in or change your amount of supplemental and dependent life insurance, accidental death and dismemberment (AD&D) and supplemental disability insurance

The benefit changes you are allowed to make depend on your benefits choices at the time of your family status change.

When You Can Enroll and Make Benefit Changes
- Within 30 calendar days of your new dependent’s birth, placement for adoption, or date of legal guardianship or custody arrangement. If you don’t enroll within 30 calendar days, you will have to wait until the next annual enrollment, October 1–31, to change your benefit choices and your new dependent will not have Flex coverage until the next January unless you have another qualifying family status change.

How To Enroll and Make Benefit Changes
- Call the Benefit Service Center at 1-800-778-2133
- Go online via the Internet at www.myflexla.com

Any insurance forms you complete in the hospital may cover services related to childbirth but do not enroll your child in Flex coverage. You must call or go online.

When Changes Are Effective
- Health and dental coverage – date of birth, placement for adoption, or date of guardianship or custody, with your contributions for coverage effective that same date
- Life insurance – generally, date of enrollment; if proof of good health is required, changes are effective when Evidence of Insurability is approved by the insurance company
- Healthcare Flexible Spending Account or Dependent Care Reimbursement Account – date of enrollment

If your coverage cost or account contributions change, your new contributions through payroll deductions will begin one to three pay periods from the date you enroll your dependent child.

Resources
- To enroll your new dependent, go to www.myflexla.com or call 1-800-778-2133.
- For questions, call the Employee Benefits Division at 213-978-1655 Monday through Friday, 8 a.m. to 4 p.m. Pacific time – or send an email to per.EmpBenefits@lacity.org.
- For child care referrals, go online to the Employee Assistance Program (EAP) web site at www.members.mhn.com (company code: cityoflosangeles) or call 1-800-213-5813.
- For forms – including domestic partnership affidavit and reimbursement account claims – go to www.myflexla.com.
Health and Dental Coverage

You will need to select a primary care physician (PCP) if you enroll your child in the Anthem Blue Cross HMO and a primary care dentist (PCD) if you enroll your child in the DeltaCare USA DHMO dental plan. If you don’t select a PCP or PCD when you enroll, one will automatically be assigned to your new dependent by Anthem Blue Cross or DeltaCare based on your home zip code.

Life Insurance

- You must have supplemental life insurance for yourself to choose dependent life insurance coverage of $5,000 for your new dependent child.
- If proof of good health is required, you may need to provide Evidence of Insurability to the insurance company.
- You are automatically the beneficiary of dependent life insurance. You may want to consider adding your new dependent as a beneficiary for your basic or supplemental life insurance.

Accounts for Saving on Healthcare and Dependent Care Expenses

You can increase pre-tax contributions or begin contributing to a:
- Healthcare Flexible Spending Account – to reimburse yourself for eligible healthcare expenses for you and your dependents
- Dependent Care Reimbursement Account – to reimburse yourself for day care expenses for your eligible dependents (generally, your dependent children under age 13 or a disabled dependent who is incapable of self-care).

If you choose to contribute to either or both accounts, an administrative fee of $2.25 will automatically be deducted from your paycheck, and you must file claims by the claims deadline for the year or you forfeit any money left in your account. See “Know Your Benefits” at www.myflexla.com for more information.

Providing Proof of Your Family Status Change

- You have 60 days from the date on your confirmation statement to provide the required documents listed on your status change confirmation statement. If you enrolled a grandchild for whom you don’t have legal custody and whose parent (your child) is a full-time student between ages 19 and 26, verification of full-time student status of the parent (your child) is required.
- If you do not submit the required documents by the deadline, any benefit changes you made – including any health and dental coverage you selected for your child – will be canceled effective the 61st day after the date on your confirmation statement. Any medical or dental expenses your dependent has after coverage is canceled will be your financial responsibility.

For the birth of a child, the Employee Benefits Division will accept a copy of the hospital verification of birth or a copy of the birth certificate as proof.