



Maintaining Dependent Eligibility Rules

The following rules explain when a dependent is eligible for coverage under CTA Healthcare Policies, and when coverage must end. Employees are responsible for removing dependents who no longer meet eligibility requirements and for notifying HR Benefit Services within 31 days of any change in status (such as marriage, divorce, dissolution, or a child turning 26).

For information on the documentation required to add or remove a dependent, please see the separate Dependent Eligibility Documentation resource.

Spouse

- Your spouse is eligible for coverage as long as you remain legally married. Once a divorce is finalized, your former spouse is no longer eligible for coverage, even if a court order requires continued insurance. You must notify HR Benefit Services and provide the divorce decree within 31 days of the divorce date to remove the former spouse.

Civil Union Partner

- A civil union partner is eligible for coverage as long as the civil union remains legally in effect. Once a civil union is dissolved, the former partner is no longer eligible for coverage, even if a court order requires continued insurance. You must notify HR Benefit Services and provide the dissolution decree within 31 days of the dissolution date to remove the former partner.

Domestic Partner

- A domestic partner is eligible for coverage as long as you continue to meet the requirements outlined in CTA Ordinance 99-99, including residing together and sharing responsibility for each other's welfare. If the partnership ends, the former partner is no longer eligible for coverage. You must notify HR Benefit Services within 31 days to remove the former partner.

Dependent Child/Adopted Dependent Child (0 – 26)

- A dependent child, including an adopted child, is eligible for coverage through the last day of the month in which they turn 26. Marriage does not affect eligibility before age 26—the child remains eligible even if married—unless proof is provided that they have other group health coverage through a spouse. After age 26, coverage may only continue if the child qualifies under another plan rule (e.g., disabled adult dependent).

Dependent Stepchild (0 – 26)

- A stepchild is eligible for coverage through the last day of the month in which they turn 26, unless otherwise eligible under plan rules (e.g., disabled adult dependent). Coverage ends if your relationship with the child's parent (spouse, civil union partner, or domestic partner) ends through divorce or dissolution. In the event of the parent's death, coverage may continue if you remain the child's legal guardian.

Contact Benefit Service regarding Disabled Adult Dependents or Dependents Actively Serving in the Military.

If you have any questions, you may contact HR Benefit Services at (312) 681-2225, option #3.