ELIGIBILITY

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Who Is Eligible?

All active, full-time employees are eligible for benefits through Fort Bend ISD. Benefits will be effective on the first of the month following their start date. For life and disability coverage, if you are not actively at work on the effective date, your coverage will be delayed until you return to active employment.

When to Enroll Online*

Online enrollment must be completed in My Self-Serve within 30 days of your start date, a qualifying life event, or during open enrollment.

Who Are Eligible Dependents?

You may enroll your eligible dependents in the Medical, Dental, Vision, and Voluntary Life and Accidental Death & Dismemberment (AD&D) Plans. Your eligible dependents include your legal spouse, natural or step-child, adopted child, or a child placed with you for adoption. Your eligible dependents may be enrolled in benefits up to age 26.

How to Continue Coverage if Employment Terminates

All of your plans end at the end of the month in which your employment ends. You may continue your life plans by applying within 31 days of your last day of employment. You may continue your Medical, Dental, Vision, and Medical FSA plan for a limited period of time after termination through Federal COBRA continuation.

When to Change Your Benefits*

The benefit choices you make upon initial enrollment and during our annual enrollment period will remain in place until the next open enrollment, or when you experience a qualifying life event. Your benefit change must be consistent with your change in family status.

These changes include:

- * Marriage, divorce, or legal separation
- * Gain or loss of an eligible dependent for reasons such as birth, adoption, court order, disability, death, reaching the dependent age limit
- * Termination of your or your Dependent's Medicaid or Children's Health Insurance Program (CHIP) coverage as a result of loss of eligibility (you must contact the FBISD Benefits Department within 60 days of termination)
- * You or your Dependent become eligible for Medicare, a premium assistance subsidy under Medicaid or CHIP (you must contact the FBISD Benefits Department within 60 days of determination of eligibility for Medicare and subsidy eligibility)
- Significant changes in employment or employer sponsored benefit coverage that affect you or your spouse's benefit eligibility
- Loss of other insurance coverage (Note: An employee who begins COBRA benefits and then voluntarily drops the COBRA coverage cannot come on to the FBISD benefit plans mid-year. You must wait until the FBISD open enrollment period to add benefits.)

It is your responsibility to contact the FBISD Benefits Department within 30 days of the qualifying event to request a change to your benefits. You must provide the Benefits Department with documentation that states the qualifying event and the date this event has or will occur.



^{*}Please see page 12 for step-by-step instructions on how to enroll online.