## PART I

**D.C. PERSONNEL REGULATIONS**

**CHAPTER 21**

**D.C. EMPLOYEES' HEALTH BENEFITS**

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CHAPTER 21—D.C. EMPLOYEES’ HEALTH BENEFITS

D.C. PERSONNEL REGULATIONS

2129   OPTIONAL HEALTH BENEFITS COVERAGE FOR DOMESTIC PARTNERS

2129.1 The provisions of this section shall be applicable to persons first employed by the District government on or after October 1, 1987 who are eligible for health benefits coverage under the District of Columbia Employees Health Benefits (DCEHB) Program established pursuant to D.C. Official Code § 1-621.02 et seq. (2006 Repl.). Persons first employed before October 1, 1987 who are eligible for federal health benefits coverage pursuant to D.C. Official Code § 1-621.01 (2006 Repl.) are excluded from the provisions of this section.

2129.2 A person who is eligible for health benefits coverage as specified in section 2129.1 of this section and who meets the criteria specified in section 2129.3 of this section may enroll his or her domestic partner and dependent children of the domestic partner for health benefits coverage under the DCEHB Program. Enrollment may occur upon employment or once annually during the DCEHB Program open enrollment period, as applicable.

2129.3 In order to enroll a domestic partner and any dependent children of the domestic partner in the DCEHB Program, an eligible employee shall:

(a) Have a valid certificate of domestic partnership issued by the D.C. Department of Health; and

(b) Present the certificate of domestic partnership to the personnel authority.

2129.4 (a) An employee newly registered in a domestic partnership is eligible to enroll his or her domestic partner and any eligible dependents in the DCEHB Program within thirty-one (31) days of the date the domestic partnership registration is issued by the D.C. Department of Health.

(b) An eligible employee in a domestic partnership registered in a jurisdiction other than the District of Columbia shall register the domestic partnership with the D.C. Department of Health prior to enrolling his or her domestic partner and any dependents for health benefits coverage pursuant to this section.

2129.5 As applicable, an eligible employee shall provide proof of the dependency of a child of a domestic partner by presenting to the personnel authority the birth certificate or other legal document demonstrating legal custodial care.
The eligible employee shall assume twenty five percent (25%) of the cost of the health insurance premium for his or her domestic partner and any eligible dependent children, and the District government shall assume the remaining seventy five percent (75%).

Any health insurance premiums pursuant to this section shall be deducted on an after-tax basis directly from the employee’s paycheck.

A domestic partner may qualify as a dependent, if he or she meets the definition of a dependent, as defined in Title 26 of the United States Code § 152.

Health benefits for a domestic partner and eligible dependents shall be terminated upon the death of the employee. A surviving domestic partner enrolled as a dependent may convert to an individual health insurance policy directly through the health insurance provider.

Upon termination of District government service, the eligible employee may elect to continue health benefits coverage as specified in Section 2130 of this chapter, and may include continued health benefits coverage for his or her domestic partner and eligible dependents of the domestic partner.

An eligible employee shall inform his or her personnel authority, in writing, of any change in the circumstances attested to in the Affidavit of Domestic Partnership for Health Insurance Benefits referenced in Subsection 2129.4 of this section.

A domestic partnership may be terminated, with or without the consent of both partners, by filing a termination of domestic partnership statement with the D.C. Department of Health. The termination of the domestic partnership shall become effective six (6) months after the date it is filed with the D.C. Department of Health.

An employee whose domestic partnership is terminated as specified in Subsection 2129.12 of this section shall notify his or her personnel authority within thirty (30) days of the filing of the termination of domestic partnership statement. Health benefits enrollment of the domestic partner and his or her dependents shall continue, at the cost specified in Subsection 2129.6 of this section, during the six (6) months that the termination of the domestic partnership is pending, provided District government employment is maintained.

CONTINUED HEALTH BENEFITS COVERAGE

A person who is eligible for health benefits coverage in accordance with D.C. Official Code § 1-621.02 et seq., but who subsequently loses eligibility for coverage, may elect to continue coverage as provided in this section without regard to benefits available under any temporary extension of coverage or any non-group contract.
2130.2 Such a person may elect to continue health benefits coverage if the person is any of the following:

(a) An employee eligible for health benefits under this section who is separated from service on or after December 14, 1990, whether voluntarily or involuntarily, and, on the day before being separated from service, was enrolled in a health plan under this title;

(b) A person who ceases to be an unmarried dependent child on or after December 14, 1990, and was covered as a member of a family of an employee or annuitant under a health benefits plan on the day before ceasing to be an unmarried dependent child; or

(c) A person who ceases to be a spouse on or after December 14, 1990, and was covered as a family member of an employee or annuitant under a health benefits plan at some time during the preceding eighteen (18) months before the marriage ended, but who is not eligible to enroll for health benefits in accordance with D.C. Official Code§ 1-529.01 et seq. because he or she either has remarried before reaching age fifty-five (55) or is not entitled to a portion of the employee's or annuitant's annuity benefit or a survivor benefit based on the employee's or annuitant's service.

2130.3 The personnel authority shall give written notice to any employee described in § 2130.2(a) stating that the employee may elect to continue health benefits coverage prior to the expiration of thirty (30) days after the date on which coverage would otherwise end.

2130.4 The personnel authority, within fourteen (14) work days of receiving notice from the employee or annuitant, shall give notice to any person described in § 2130.2(b) stating that the person may elect to continue health benefits coverage under this title, if the employee or annuitant has provided appropriate written notice to the personnel authority prior to the expiration of sixty (60) days after the date that such a person ceased to be an unmarried dependent child.

2130.5 The personnel authority, within fourteen (14) work days of receiving notice from the employee, annuitant, or former spouse, shall give notice to any person described in § 2130.2(c) that the person may elect to continue health benefits coverage under this title, if the employee, annuitant, or the person himself or herself has provided written notice to the personnel authority prior to the expiration of sixty (60) days after the date such person ceased to be a spouse.

2130.6 In order to continue health benefits coverage, an employee described in § 2130.2(a) shall submit an appropriate written election prior to the expiration of sixty (60) days from the later of any of the following:

(a) The effective date of separation from service;
(b) The date that notice required by § 2130.3 was given to the employee; or

c) In the event that the notice required by § 2130.3 was mailed, the date the notice was posted.

2130.7 In order to continue health benefits coverage, a person described in § 2130.2(b) shall submit an appropriate written election prior to the expiration of sixty (60) days from the later of any of the following:

(a) The date the person ceased to be an unmarried dependent child;

(b) The date that the notice required by § 2130.4 was given to the person; or

c) In the event that the notice required by § 2130.4 was mailed, the date the notice was posted.

2130.8 In order to continue health benefits coverage, a person described in § 2130.2(c) shall submit an appropriate written election prior to the expiration of sixty (60) days from the later of any of the following:

(a) The date the person ceased to be a spouse of an employee;

(b) The date the person ceased to be eligible for health benefits under the provisions of D.C. Official Code § 1-529.01 et seq.;

(c) The date the notice required by § 2130.5 was given to the person; or

d) In the event that the notice required by § 2130.5 was mailed, the date the notice was posted.

2130.9 An election made in accordance with either § 2130.6, § 2130.7, or § 2130.8 may be for coverage either as an individual or family.

2130.10 If the person's coverage expires before the person makes an election in accordance with either § 2130.6 or § 2130.7, that coverage shall be restored retroactively, as if no break in coverage had occurred.

2130.11 If the person's coverage expires before the person makes an election in accordance with § 2130.8 that coverage shall be restored retroactively to the later of either of the following:

(a) The date the person ceased to be the spouse of an employee; or

(b) The date the employee ceased to be eligible for health benefits under the provisions of D.C. Official Code § 1-529.01 et seq.
2130.12  Continued health benefits coverage shall be available to any employee who makes an election under § 2130.6 for a period of eighteen (18) months from the effective date of the employee's separation.

2130.13  Continued health benefits coverage shall be available to any person who makes an election under § 2130.7 for a period of thirty-six (36) months from the earlier of either of the following:

(a)  The date the person ceased to be unmarried dependent child; or

(b)  In the case of a person who was covered as a family member by continuing benefits under this section at the time the person ceased to be an unmarried dependent child, the date of separation from service of the employee on whom the person was dependent.

2130.14  Continued health benefits coverage shall be available to any person who makes an election under § 2130.8 for a period of thirty-six (36) months from one (1) of the following, as appropriate:

(a)  The date the person ceased to be a spouse;

(b)  In the case of a person who was covered as a family member by continuing benefits under this section at the time the person ceased to be a spouse, the date of separation from service of the employee to whom the person was married; or

(c)  In the case of a person who had health benefits coverage under the provisions of D.C. Official Code § 1-529.01 et seq., from the date eligibility for coverage under those provisions ceased.

2130.15  Any person who elects to continue coverage under this section shall pay to the District of Columbia Treasurer, or to a contractor or other agent designated by the Director of Personnel, one hundred percent (100%) of the premium plus two percent (2%) of the sum of such contributions.

2130.16  Any person who is eligible for retroactive coverage under § 2130.10 shall pay for the coverage restored retroactively in a manner prescribed by the Director of Personnel.

2199  **DEFINITIONS**

2199.1  When used in this chapter, the following terms have the meaning ascribed:

**Committed relationship** – a familial relationship between two (2) individuals characterized by mutual caring and the sharing of a mutual residence.
**Dependent child of a domestic partner** – an unmarried person under 22 years of age, an unmarried person under 25 years of age who is a full-time student, or an unmarried person regardless of age who is incapable of self-support because of a mental or physical disability that existed before age 22. A dependent child of a domestic partner shall include a natural child, adopted child, stepchild, foster child, or child in the legal custody of a domestic partner.

**Domestic partner** – a person with whom an employee maintains a committed relationship and who has registered the domestic partnership with the District of Columbia Department of Health.

**Family member** – a domestic partner; or the dependent child of a domestic partner.

**Personnel authority** – an individual or entity authorized by D.C. Official Code § 1-604.06(b) to implement personnel rules and regulations for employees of an agency or group of agencies of the District of Columbia; or persons delegated that authority by that individual or entity.
**D.C. Register Updates for Chapter 21 of the D.C. Personnel Regulations, Health Benefits**

The following *D.C. Register* citations identify when a given section(s) of Chapter 21, Health Benefits, of Title 6 of the District of Columbia Municipal Regulations, was amended. Following the publication in the *D.C. Register* of subsequent final rulemaking notices, this Addendum will be updated accordingly.

For the convenience of Electronic-District Personnel Manual (E-DPM) readers, the Addendum identifies amendments on a section-by-section basis; identifies the page(s) in an E-DPM Transmittal impacted by the amendment(s); and provides brief comments on the amendment(s) accomplished.

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<tr>
<th>D.C. Register Date</th>
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<th>Change(s) Reflected on Page(s)</th>
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<tr>
<td>50 DCR 3027 (4/18/03)</td>
<td>Sections 2129 and 2199</td>
<td>Pages 1, 2, and 6 (Transmittal No. 96)</td>
<td>These rules amended the chapter to provide that persons first employed by the District government on or after October 1, 1987 who are eligible for health benefits coverage under the D.C. Employees Health Benefits Program (DCEHBP) may elect to enroll their domestic partner and the dependent children of the domestic partner in the DCEHBP. Eligible employees assumed 100% of the cost of family health insurance coverage for the domestic partner and dependent children of the domestic partner.</td>
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<tr>
<td>56 DCR 003667 (5/8/09)</td>
<td>Section 2129</td>
<td>Pages 1 and 2 (Transmittal No. 187)</td>
<td>These rules amended the chapter to provide that, instead of eligible employees under the District of Columbia Employees Health Benefits Program assuming the total additional cost of the family health insurance coverage for the domestic partner or family members they shall pay twenty five percent (25%) of the cost of family health insurance coverage and the District government shall pay the remaining seventy five percent (75%).</td>
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<tr>
<td>63 DCR 010213 (8/5/16)</td>
<td>Section 2129</td>
<td>Pages 1 and 2 (Transmittal No. 229)</td>
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<td>These rules amended the chapter to provide that, an employee who enrolls a domestic partner for health insurance coverage under the District of Columbia Employees Health Benefits Program to deduct the health insurance premium cost on an after-tax basis, unless the domestic partner can be claimed as a dependent pursuant to 26 U.S. Code 125(a).</td>
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