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former employee or employee annuitant, provided such child is not otherwise covered by a health plan under this part. An unmarried dependent child must be under age 22 or incapable of self-support because of a mental or physical disability existing before age 22. No person may be covered by two enrollments.

- (b) Proof of dependency. (1) A child is considered to be dependent on the former spouse or the employee, former employee, or employee annuitant if he or she is—
 - (i) A legitimate child;
 - (ii) An adopted child;
- (iii) A recognized natural child who lives with the former spouse or the employee, former employee, or employee annuitant in a regular parent-child relationship.
- (iv) A recognized natural child for whom a judicial determination of support has been obtained; or
- (v) A recognized natural child to whose support the former spouse, or the employee, former employee, or employee annuitant makes regular and substantial contributions in accordance with §890.302(b)(2).
- (c) Exclusions from coverage. Coverage as a family member may be denied—
- (1) If evidence shows that the former spouse, employee, former employee, or annuitant did not recognize the child as his or her own, despite a willingness to support the child; or
- (2) If evidence calls the child's paternity or maternity into doubt, despite the former spouse's employee's, former employee's, or employee annuitant's recognition and support of the child.
- (d) Child incapable of self-support. When a former spouse enrolls for a family enrollment which includes a child who has become 22 years of age and is incapable of self-support, the employing office shall determine such child's eligibility in accordance with §890.302(d), (e), and (f).
- (e) Meaning of unmarried child. A child, under age 22 or incapable of self-support, who has never married or whose marriage has been annulled, or a child who is divorced or widowed is considered to be unmarried.

§ 890.805 Application time limitations.

- (a) Except for former spouses meeting the requirements in $\S 890.803(a)(3)$ (iv) and (v) of this part, former spouses must apply for health benefits coverage—
- (1) Within 60 days after dissolution of the marriage to the Federal employee; or
- (2) Within 60 days after the date of OPM's notice of eligibility to enroll based on entitlement to one of the following:
- (i) A former spouse annuity elected under 5 U.S.C. 8339(j)(3), 5 U.S.C. 8417(b), or 5 CFR 831.682;
- (ii) A former spouse annuity under \$831.683:
- (iii) A former spouse insurable interest annuity under 5 U.S.C. 8339(k)(1) or 8420(a):
- (iv) A former spouse annuity under 5 U.S.C. 8341(h) or 8445(f);
- (v) An apportionment under 5 U.S.C. 8345(j) or 8467; or
- (3) Within 60 days after the date of the notice of eligibility to enroll based on entitlement to a former spouse annuity under another retirement system for Government employees.
- (b) Former spouses who meet the requirements in §890.803(a)(3)(iv) of this part must apply for health benefits coverage by April 1, 1987. Where circumstances warrant, the former spouse may request that the filing date be waived. The authority of the Director of Central Intelligence to direct OPM to waive the filing date has been delegated to CIA's Office of Personnel. Requests for waiver should be addressed to the Office of Personnel, Retirement Division, Central Intelligence Agency, Washington, DC 20505. OPM will waive the April 1, 1987, filing date upon notification to do so from the Director of Central Intelligence.
- (c) Former spouses who meet the requirements in §890.803(a)(3)(v) of this part must apply for health benefits coverage by October 7, 1988. Where circumstances warrant, the former spouse may request the Secretary of State to waive the filing date. The authority of the Secretary of State to waive the filing date has been delegated to the Department of State's Retirement Division. Requests for waiver should be addressed to the Department of State,

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Retirement Division, Washington, DC 20520. OPM will accept the waiver upon notification to do so from the Department of State.

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§ 890.806 Opportunities for former spouses to enroll and change enrollment; effective dates of enrollment.

- (a) Initial opportunity to enroll. A former spouse who has met the eligibility requirements of §890.803 and the application time limitation requirements of §890.805 may enroll at any time after the employing office establishes that these requirements have been met.
- (b) Effective date—generally. (1) Except as otherwise provided, an enrollment takes effect on the first day of the first pay period that begins after the date the employing office receives an appropriate request and satisfactory proof of eligibility as required by paragraph (a) of this section. If a former spouse requests immediate coverage, and the employing office receives an appropriate request and satisfactory proof of eligibility within 60 days after the date of divorce, the enrollment may be made effective on the same day that temporary continuation of coverage under subpart K of this part would otherwise take effect.
- (2) A change of enrollment takes effect on the first day of the first pay period that begins after the date the employing office receives the appropriate request.
- (c) Belated enrollment. When an employing office determines that a former spouse was unable, for cause beyond his or her control, to enroll or change the enrollment within the time limits prescribed by this section, the former spouse may do so within 60 days after the employing office advises the former spouse of its determination.
- (d) Enrollment by proxy. Subject to the discretion of the employing office, a former spouse's representative, having written authorization to do so, may enroll or change the enrollment for the former spouse.
- (e) Change to self only. (1) A former spouse may change the enrollment

from self and family to self only at any time.

- (2) A change of enrollment to self only takes effect on the first day of the first pay period that begins after the date the employing office receives an appropriate request to change the enrollment, except that at the request of the former spouse and upon a showing satisfactory to the employing office that there was no family member eligible for coverage under the family enrollment, the employing office may make the change take effect on the first day of the pay period following the one in which there was no family member.
- (f) Open season. (1) During an open season as provided by \$890.301(f)—
- (i) An enrolled former spouse may change the enrollment from self only to self and family provided the family member(s) is eligible for coverage under §890.804, from one plan or option to another, or make any combination of these changes.
- (ii) A former spouse who cancelled the enrollment under this part for the purpose of enrolling in a prepaid health plan under section 1833 or 1876 of the Social Security Act, and who subsequently voluntarily disenrolls from the prepaid health plan, may reenroll.
- (iii) A former spouse who cancelled the enrollment under this part because he or she furnished proof of eligibility for coverage under the Medicaid program or a similar State-sponsored program of medical assistance for the needy, and who wishes to reenroll in a plan under that part for reasons other than an involuntary loss of that coverage, may do so.
- (2) An open season reenrollment or change of enrollment takes effect on the first day of the first pay period that begins in January of the next following year.
- (3) When a belated open season reenrollment or change of enrollment is accepted by the employing office under paragraph (c) of this section, it takes effect as required by paragraph (f)(2) of this section.
- (g) Change in family status. (1) An enrolled former spouse may change the enrollment from self only to self and family, from one plan or option to another, or make any combination of