

Dental Enrollment Form Checklist for Human Resources Offices

- STD 692
 - Is it legible? If you can't read it, the SCO can't read it.
 - Is it signed by the employee? Dated?
 - Does the form reflect the desired action?
 - Is everyone who is supposed to stay on the plan listed?
 - Double check that dependents are not neglected from previous enrollment, and previous plan is listed (if appropriate).
 - Is everyone who is supposed to be cancelled identified with a "D"?
 - Is everyone who is supposed to be added identified with an "A"?
 - Are the codes correct?
 - Permitting Event Code listed is correct?
 - Does the Plan Code match in section B and section E?
 - Is the Party Code listed and correct?
 - Is the Org Code listed and correct?
 - Is the form complete?
 - Permitting Event Date is present, form is not submitted BEFORE the permitting event? Within the time of permitting event?
 - Check the Permitting Event Chart for more information.
 - Include a simple description in Remarks Section. (e.g., Adding new spouse to a two or more party enrollment.)
 - Submit a separate form for each permitting event.
 - Is section D marked?
 - If selecting "Delta Dental" identify the entire plan name.
 - Is it signed by the HR Specialist? Dated? Correct contact phone number,? Correct contact email address?
 - Is a FlexElect Cancel or CoBen Cancel package needed?
 - If so, include these documents in the package to SCO.
- Additional Documents for Department Retention as it relates to actions: (do not send these documents to SCO)
 - Verification of Social Security Number
 - Divorce Decree
 - Marriage Certificate
 - Birth Certificate
 - Affidavit for Economically Dependent Child (CalHR 025)
 - Proof of other insurance coverage
 - Affidavit for Domestic Partner
 - CalHR 680-in Remarks section, list as "on file" for SCO