



## FREQUENTLY ASKED QUESTIONS Domestic Partner Coverage

### ENROLLMENT

#### **What do I need to do to enroll my domestic partner in my medical, dental, and/or vision benefits?**

Within 30 days of your hire event:

- Complete the online enrollment process within 30 days of your hire date. Instructions are included in your new hire packet.
- Complete and submit a notarized Harvard Statement of Domestic Partnership (available on [HARVie](http://hr.harvard.edu) – [hr.harvard.edu](http://hr.harvard.edu) > Policies, Forms & Contracts > Forms & Documents > Domestic Partners) within 30 days of your hire date

Within 30 days of an IRS-defined change in status such as loss of other coverage:

- Contact us to request an enrollment packet
- Complete the online enrollment process
- Complete and submit a notarized Harvard Statement of Domestic Partnership (available on [HARVie](http://hr.harvard.edu) – [hr.harvard.edu](http://hr.harvard.edu) > Policies, Forms & Contracts > Forms & Documents > Domestic Partners) within 30 days of the date of the change in status

Within 30 days of registering your partnership with a municipality offering formal registration of domestic partnerships (Boston and Cambridge are two municipalities that register domestic partnerships without residency requirements):

- Contact us to request an enrollment packet. You will need to provide the date of registration. You will have **30 days from the date** registration to complete the online enrollment and submit the supporting documentation.
- Complete the online enrollment process
- Submit a copy of the Certificate of Domestic Partnership and a completed and notarized Harvard Statement of Domestic Partnership (available on [HARVie](http://hr.harvard.edu) – [hr.harvard.edu](http://hr.harvard.edu) > Policies, Forms & Contracts > Forms & Documents > Domestic Partners) within 30 days of the date of registration

Changes to your coverage will be retroactive to the date of the change in status event and you will be charged retroactive premiums.

### IMPUTED INCOME and TAXES

#### **What is imputed income and how will it affect my pay?**

Federal tax law considers the fair market value of coverage for non-qualified dependents as imputed income. IRS guidelines consider imputed income part of an employee's taxable wages.

#### **What are the tax implications of covering a Domestic Partner?**

If you are covering one or more dependent children who all qualify as tax dependents as defined by the IRS, and/or a non-qualified domestic partner, you will be taxed on the fair market value of the cost of the individual coverage (including the University's contribution), and the individual plan premium will be deducted on an after-tax basis (the balance of the premium will be deducted on a pre-tax basis).

If you are covering any children who **do not** qualify as tax dependents as defined by the IRS and a non-qualified domestic partner, you will be taxed on fair market value of the cost of the family coverage minus the cost of the individual coverage (including the University's contribution) and the individual premium will be deducted on a pre-tax basis (the balance of the premium will be deducted on a post-tax basis).

If you are covering only **qualified** tax dependents (including your domestic partner) the IRS rules permit the cost of coverage provided for health insurance coverage for qualifying dependents to be excluded from income. This means your full medical, dental, and vision plan contribution will be pre-tax and no additional income will be imputed.

#### **What can I do to offset any increased taxable income?**

Employees may change their taxes withholding amounts (Federal and/or State) at any time by going to PeopleSoft Self Service > Payroll and Compensation > W-4 Tax Information.

### **DEPENDENT ELIGIBILITY**

#### **What is meant by an IRS Qualified Dependent and where can I find more information?**

For the definition of a "qualifying child" or "qualifying relative" under Internal Revenue Code Section 152 – See IRS Publication 501 at [www.irs.gov/publications/p501/index.html](http://www.irs.gov/publications/p501/index.html).

#### **How do I notify Benefits of a change in dependent status from non-qualified to qualified or qualified to non-qualified?**

Contact Benefits at 617-496-4001 or by email at [benefits@harvard.edu](mailto:benefits@harvard.edu) as soon as possible. If your dependent's status has changed from non-qualified to qualified, you will need to complete and return an Attestation of Qualified Dependent(s) form.

If your dependent has changed from qualified to non-qualified, you will need to notify us of the change in writing.

Changes will be made to the taxability of your benefits and the imputed income on your check in accordance with the information provided.

#### **Will my paycheck be retroactively adjusted based on completion of an Attestation form?**

No, adjustments to your paycheck will be made going forward.

### **GENERAL**

#### **Can a domestic partner's eligible medical/dental/vision expenses or dependent care costs be reimbursed through Harvard's flexible spending account (FSA) program?**

Only if your domestic partner is a federally-qualified dependent for health insurance purposes. IRS regulations that govern FSAs allow reimbursement of expenses only for the employee, spouse, and qualified dependents.

#### **I have terminated my domestic partnership and want to remove my domestic partner from my coverage. What do I need to do?**

You need to contact the Benefits office within 30 days of the termination of the partnership in order to make changes to your benefits. You will need to submit a copy of the Statement of Termination of Domestic Partnership filed with the municipality where the partnership was registered, or Harvard's Statement of Termination of Domestic Partnership.

#### **Now that I've terminated my previous domestic partnership, can I enroll my new domestic partner?**

There is a twelve-month wait period before a new domestic partner can be enrolled. The former partnership will be deemed terminated as of the signature date on the Statement of Termination of Domestic Partnership.