

## **Health Solutions**

1205 Windham Parkway Romeoville, IL 60446 800.807.9460 / 630.378.3005 fax

## **Divorce Decree Information**

Employee Name (Last, First, Middle Initial)	Social Security Number
National guidelines have been set up to decide the "order of benefits" in divorce situations. Please refer to Page 44 of the Medical section of Your Employee Benefits booklet. We must have information from your divorce decree to place in your file. Because this information is personal, you may either send us a copy of your divorce decree or answer the following questions on this letter, and return it to our office.	
1. If you are legally divorced, please provide the names of the children listed in the decree:	
Child's Name (Last, First, Middle Initial)	Child's Name (Last, First, Middle Initial)
Child's Name (Last, First, Middle Initial)	Child's Name (Last, First, Middle Initial)
Does the decree give full custody to one parent? If so, which parent:      Mother    Father Name:	3. Does the decree state that one parent must provide medical/dental coverage?  Yes  No  If Yes, which parent?  (That parent's coverage, if any, is primary)  If No, the coverage of the parent with full legal custody is primary. If legal custody is joint, normal guidelines apply; such as, male/female rule or birthday rule.
4. Name of Other Parent (Last, First, Middle Initial)	Social Security Number Date of Birth
Other Parent's Employer	Employer's Street Address / City / State / Zip +4
The above has been provided based upon divorce decree information.  Signature of Employee Date  It is important that you respond as quickly as possible to the above questions.	

1/2025

## Please return completed form with signature and date by mail to:

Christian Brothers Employee Benefit Services, 1205 Windham Parkway, Romeoville, IL 60446. Or you can fax the form to us at 630.378.2504. Thank you for your assistance. If you have any questions, please call our Customer Service Department at 1.800.807.0400.