



State of New Jersey • Department of the Treasury

DIVISION OF PENSIONS & BENEFITS — HEALTH BENEFITS BUREAU

P.O. Box 299, Trenton, NJ 08625-0299

P.L. 1999, c. 48 (CHAPTER 48) — EMPLOYER CERTIFICATION FOR DENTAL BENEFITS FOR SURVIVING SPOUSES

To be completed by the employing agency's Health Benefits Certifying Officer.

Retiree's Name _____ Social Security Number _____

Surviving Spouse's Name _____ Social Security Number _____

Employer Name _____ Health Benefits Employer ID Number _____ - _____

PART 1 — ELIGIBILITY

- ☐ Surviving spouse IS NOT eligible for employer paid dental benefits under the provisions of Chapter 48; OR
- ☐ I certify that the surviving spouse is eligible for employer paid dental benefits under the provisions of Chapter 48.

Note: Surviving spouses required to pay a premium share will have the payments deducted from their monthly pension payment, provided the payment is large enough. Surviving spouses who do not receive a pension or whose pension does not cover the cost of the premium share will be billed directly.

PART 2 — DENTAL BENEFITS

Percent _____ % or flat amount \$ _____ paid monthly by employer for surviving spouse; AND

Percent _____ % or flat amount \$ _____ paid monthly by employer for dependent children.

OR

Flat amount \$ _____ to be paid monthly by employer for all available coverage levels.

PART 3 — LIMITATIONS (if none indicated, benefits apply as long as employer participates in the SHBP)

If employer-paid benefits in retirement are for a specified limited time, employer payment of dental benefits will terminate upon:

- ☐ Surviving spouse attains age _____ ; OR
- ☐ Time limit of _____ months (please convert years to months); OR
- ☐ Specified date that health benefits will terminate ____/____/____

PART 4 — CERTIFICATION

Print Health Benefits Certifying Officer Name

Signature

____/____/____
Date

Phone Number

Email Address

Please return this form to:

**State Health Benefits Program
Health Benefits Bureau
P.O. Box 299
Trenton, NJ 08625-0299**

Or Email:

**Your Designated NJDPB Health Benefits Group Email Box found on the
Resources & Support page in your Benefitsolver Administrator account.**