

18. Dependent

A person who is:

- a. A Covered Employee's spouse under a legally valid existing marriage.
- b. A Covered Employee's child under 26 years of age, (including a legally adopted child or a stepchild).
- c. A child whom the Covered Employee is legally obligated to support in anticipation of adopting the child, regardless of whether the adoption is final.
- d. A child who is eligible for the Covered Employee's medical coverage pursuant to a Qualified Medical Child Support Order (QMCSO).
- e. A child for whom the employee or spouse has been appointed legal guardian by a court of law, excluding foster children.
- f. A Covered Employee's mentally retarded or physically disabled child but only under the following conditions:
  - (1) If an already eligible child attains the age which would otherwise terminate his status as a

"Dependent" and if on the day immediately prior to the attainment of such age the child was covered as a "Dependent" under the Plan, and at the time of attainment of such age the child is incapable of self-sustaining employment by reason of mental retardation or physical disability which commenced prior to the attainment of such age, and is at least 60% dependent upon the Covered Employee for support and maintenance, then such child's status as a "Dependent" shall not terminate solely by reason of his having attained the specified age and he shall continue to be considered an eligible Dependent under the Plan so long as he remains in such condition, and otherwise conforms to the definition of "Dependent", however

- (2) The Employee must submit to the Claim Administrator proof of the child's incapacity within thirty-one days of the child's attainment of such age, and thereafter as may be required, but not more frequently than once a year after the two- year period following the child's attainment of such age. If there is a question as to the child's incapacity, the Plan Administrator at the Plan's expense may require the child to submit to the examination of a second Physician selected by the Plan Administrator.

- f. A Covered Employee's California Registered Domestic Partner..