**Checklist: Domestic Partner Benefits Administration**

[ ]  Have you verified with your insurance carrier that domestic partners are covered under the existing plan? If not, can the plan be amended?

[ ]  Do benefits materials and company policies provide a clear definition of a “domestic partner”?

[ ]  Do benefits materials define a “spouse”?

[ ]  Do benefits materials clearly define a “child” of a domestic partner?

[ ]  Are the rules of benefits eligibility for domestic partners clearly defined?

[ ]  Do the eligibility rules define whether coverage will be extended to the children of domestic partners?

[ ]  Are there policies or procedures in place to determine that there is a valid domestic partner relationship? Is a signed employee affidavit a part of that process, and does the employer have a process for documenting that it has verified the relationship through any state registry in place for this purpose?

[ ]  Is there a policy or procedure in place for terminating the coverage in the event of a death or dissolution of the relationship? Is a signed employee affidavit a part of that process?

[ ]  Is the cost of domestic partner coverage included as taxable income to the employee when health coverage is provided to a domestic partner (or to his or her child) who is not the employee’s Code §105(b) tax dependent?

[ ]  Have you determined if domestic partner benefits will provide for COBRA coverage?

[ ]  Do benefits plan documents consider relevant state laws with regard to what benefits are offered?

[ ]  Does the company intend to extend FMLA-like benefits to domestic partners who would not qualify under the definition of a spouse and would not be eligible for federal FMLA leave? Is there a policy or procedure in place to support domestic partners’ FMLA-like needs?

[ ]  Have the retirement plans been examined and appropriate amendments made to include domestic partners as an allowable beneficiary?

[ ]  Have bereavement policies been reviewed and updated to include domestic partners?