



SECURITY BENEFIT FUND

OF THE
UNIFORMED FIREFIGHTERS ASSOCIATION
OF GREATER NEW YORK • LOCAL 94 I.A.F.F. AFL-CIO
204 EAST 23rd STREET, NEW YORK, N.Y. 10010
TEL: (212) 683-4723 • FAX: (212) 683-0693

Web Address: www.ufanyc.org SBF/Beneficiary Enrollment Form Submission: www.ufanycbenefits.org Email: SBFStaff@ufanyc.org

DOMESTIC PARTNERSHIP CHECKLIST

*****It is important to know and understand that this is an added benefit, and the cost of this benefit will be added to your income for tax purposes unless you are able to claim your DP as a dependent.*****

There are three steps to take to obtain benefits for your Domestic Partner (DP). Remember to keep copies of EVERYTHING you submit!

- 1) First, you need to register for a “Certificate of Domestic Partnership” with your local County Clerk’s Office. *PLEASE note that much of Long Island no longer allows Domestic Partnerships. Some may allow you to supply an affidavit, but it is individually decided by each town’s county clerk/marriage bureau or courthouse. If you are having issues, please contact OLR for an alternative option.*
- 2) Then, you need to provide a copy of that certificate to the city (NYC Office of Labor Relations or OLR), and apply for medical health benefits for your domestic partner.

****** ALL documents should be uploaded to the NYC Office of Labor Relations’ website using their Leapfile link:**

<https://nycemployeebenefits.leapfile.net/>

Contact with OLR should be made by emailing healthbenefits@olr.nyc.gov

When that is processed, you will receive a notification confirming your Domestic Partnership’s Medical Benefits Coverage “Start Date” – this is a stamped notification.

- 3) Finally, you will send a) a copy of the “Start Date” stamped notification letter (from #2), b) a copy of your Domestic Partnership Certificate and c) a copy of the original ERB form that you filled out, with all your DP’s info to the UFA’s Security Benefits Fund (SBF) so that your Domestic Partner may be added to your optical, prescription and dental coverage. You can send all documents by fax, email, or USPS mail. See above for the address/fax#. Please call SBF after sending to verify receipt, and to make sure you’ve provided all necessary documentation. At the same time, you call, please be sure to ask SBF for a new beneficiary enrollment card to fill out (Green Card for ACTIVE, Yellow for RETIREES).

(PROMOTED MEMBERS - Fire Officers, or members of the Uniformed Fire Officers Association (UFOA) Members should contact fpp@ufoa.org or call 212-293-9300.)

MAKE SURE YOU KEEP COPIES OF EVERYTHING YOU SEND!!

1. Register for a Certificate of Domestic Partnership with a County Clerk’s Office

You can go downtown to the NY City Clerk’s office and apply to become legal domestic partners. Their website has their office locations and hours

<https://www.cityclerk.nyc.gov/content/office-locations-hours>

There is also a web page dedicated specifically to Domestic Partnership within the NYC Government website. It can be found at <https://www.cityclerk.nyc.gov/content/domestic-partnership-registration>

The # for the NYC Clerk's Office is 212-669-3652 or 212-669-2208.

If you need to contact the City Clerk's office to follow-up on the Certificate of Domestic Partnership, or for more information, please visit

<https://www.cityclerk.nyc.gov/content/contact-the-city-clerks-office>

2. Apply for Domestic Partner Health (Medical) Benefits with the City

Once you have the Certificate of Domestic Partnership you will need to send a copy of the certificate along with a completed Health Benefits Application Form (available at <http://www1.nyc.gov/assets/olr/downloads/pdf/health/health-benefits-application.pdf>) to the NYC Office of Labor Relations (or OLR).

PLEASE upload these forms using the OLR Leapfile Website:

<https://nycemployeebenefits.leapfile.net>

Contact with OLR should be made by emailing healthbenefits@olr.nyc.gov

Alternatively, you can mail or fax the forms to the following address (also found on the application):

City of New York Office of Labor Relations

Health Benefits Program – Domestic Partner Unit

22 CORTLANDT ST FL 12, NEW YORK NY 10007-3120 TEL 212-306-7605

OLR/Active Member Health Benefits Fax: 212-306-7373 (for Active Members)

OLR/Retired Members Health Benefits Fax: 212-306-7756 (for Retired Members)

<https://www.nyc.gov/assets/olr/downloads/pdf/health/domestic-partner-enroll.pdf>

The same application can be found on the FDNY Website (and it's easier because you can fill it in online, then print it) at http://www.nyc.gov/html/fdny/pdf/emp_resources/healthbenefits.pdf

Alternately, you can download it from the OLR Website at

<http://www1.nyc.gov/assets/olr/downloads/pdf/health/health-benefits-application.pdf>

Again, make sure you send in a copy of the certificate of domestic partnership with the health benefits application. For more information, call the NYC Office of Labor Relations – Employee Health Benefits – Domestic Partnership liaison at 212-306-7605. It is probably better to email them at healthbenefits@olr.nyc.gov. To verify that your Domestic Partner has been added, you can contact your medical insurance carrier (EmblemHealth 212-501-4444) or you can go to the ESS website which is <http://www.nyc.gov/html/misc/html/ess.html>.

3. Send a copy of the Start Date / Stamped Notification and the Certificate of Domestic Partnership to the UFA / SBF (for Optical / Prescription / Dental Benefits)

Once #2 is processed, you will receive a stamped confirmation letter in the mail (Please note – it will be from the **NYC Office of Labor Relations – Health Benefits Program**). This confirmation letter is to let you know the start date of your Domestic Partner's benefits. You're going to send ALL THREE of these documents to the UFA.

Send: 1) A copy of your domestic partnership certification
2) A copy of the health benefits application (the one you submitted in #2 above), and
3) The verification/ notification the city sends you from #2 (that has the stamped start date).

Send **ALL 3** of these documents to the UFA Security Benefit Fund (SBF) to be added for SBF benefits (optical, prescription and dental benefits). These forms can be faxed to is 212-683-0693 (call to confirm receipt – 212-683-4723 and press 2 for a benefits associate) or emailed to sbfstaff@ufanyc.org.

Please make sure to include:

1. YOUR full name, and whether you are ACTIVE or RETIRED FDNY
2. Your ENTIRE Social Security Number (OLR needs this, UFA/SBF is fine with last 4)
3. Your Domestic Partner's **FULL NAME**,
4. Your Domestic Partner's **FULL Social Security Number**, and
5. Your Domestic Partner's Date of Birth.

***** It is important to know and understand that this is an added benefit, and the cost of this benefit will be added to your income for tax purposes unless you are able to claim your DP as a dependent.*****

Remember never to send originals, only copies. Best of luck!

If you Marry your Domestic Partner

If you marry your domestic partner, you're going to want to notify:

1. The NYC Office of Labor Relations / Health Benefits Program
2. The Uniformed Firefighters Association / Security Benefit Fund, and

If you marry your Domestic Partner, you will **NOT** have to pay tax on the health benefits provided to your domestic partner during the entire calendar year in which you marry. However, you **MUST** notify the NYC Office of Labor Relations / Health Benefits Program **in writing**. It is important to notify the above agencies **AS SOON AS** you receive your Marriage Certificate, so your records are updated and you do not receive any tax penalties on the benefits provided to your spouse.

Send a letter which includes:

1. YOUR full name
2. That you are ACTIVE or RETIRED FDNY
3. Your Employee ID Number
4. Your ENTIRE Social Security Number (OLR needs this, UFA/SBF is fine with last 4)
5. Your Domestic Partner's **FULL NAME**,
6. Your Domestic Partner's **FULL Social Security Number**, and
7. Your Domestic Partner's Date of Birth.
8. **A copy of your Marriage Certificate**

PLEASE upload these forms using the OLR Leapfile Website:

<https://nycemployeebenefits.leapfile.net>

Alternatively, you can send ALL the above to:

**City of New York Office of Labor Relations
Health Benefits Program – Domestic Partner Unit**

22 CORTLANDT ST FL 12

NEW YORK NY 10007-3120

You can also fax it to: OLR/Active Member Health Benefits Fax: 212-306-7373 (for Active Members)
OLR/Retired Members Health Benefits Fax: 212-306-7756 (for Retired Members)

If you choose to fax it, just make sure you get a receipt that the fax was successfully sent. If you mail the information, make sure you keep copies of everything you send, and mail it via USPS / Certified / Return Receipt.

For now, though, members are STRONGLY ENCOURAGED to upload the forms using the Leapfile Website listed above.

To verify that your Domestic Partner has been updated to your Spouse, you can go to the ESS website which is <http://www.nyc.gov/html/misc/html/ess.html>.

In **addition** to the above 8 items, when you notify the UFA/SBF, please also submit a new beneficiary card online by going to www.ufanycbenefits.org – but don't forget that the UFA/SBF will still need a copy of your marriage certificate!

To Notify the UFA/SBF, you can either fax ALL OF THE ABOVE to 212-683-0693, or you can email it to sbfstaff@ufanyc.org. Or you can mail them to:

Security Benefit Fund of the UFA

204 East 23rd Street, 3rd Floor SBF

New York, NY 10010-4697

Fax number: 212-683-0693

If you fax it to the SBF, it's a good idea to call IMMEDIATELY after sending the fax, to verify receipt. You can call 212-683-4723 and press 2 for a Benefits Associate. Once you provide that information your domestic partner will continue to receive health benefits as your spouse.

Terminating a Domestic Partnership

To Terminate a Domestic Partnership, you are going to follow the same steps as above.

1. First, you need to terminate your domestic partnership with your local County Clerk's Office by filling out an "Affidavit of Domestic Partnership Termination." Go to <https://www.cityclerk.nyc.gov/content/domestic-partnership-registration> and scroll down to Termination of Domestic Partnership for more information.
 - **REMEMBER TO KEEP COPIES OF EVERYTHING YOU SUBMIT TO THE CITY CLERK!!**
2. Second, you need to provide a copy of that "Affidavit of Domestic Partnership Termination" to the city, and request that medical health benefits for your former domestic partner be TERMINATED (see #2 on front page). You do not have to wait for a confirmation from the city, just submitting the Affidavit should be sufficient for them. But remember to keep copies of everything you send.

PLEASE upload these forms using the OLR Leapfile Website:

<https://nycemployeebenefits.leapfile.net>

Alternatively, you can send ALL the above to:

City of New York Office of Labor Relations
Health Benefits Program – Domestic Partner Unit
22 CORTLANDT ST FL 12
NEW YORK NY 10007-3120
Fax Number: 212-306-7756

OLR/Active Member Health Benefits Fax: 212-306-7373 (for Active Members)

OLR/Retired Members Health Benefits Fax: 212-306-7756 (for Retired Members)

For now, though, members are STRONGLY ENCOURAGED to upload the forms using the Leapfile Website listed above.

3. Finally, you will send a copy of the same "Affidavit of Domestic Partnership Termination" to the Security Benefit Fund of the UFA – 212-683-0693. You can also email it to sbfstaff@ufanyc.org. This will terminate your Domestic Partner's Optical, Prescription and Dental Benefits. Request that your email be confirmed for being received, or call 212-683-4723, and press 2 for a benefits associate, to confirm receipt.
4. ACTIVE MEMBERS – DURING OPEN ENROLLMENT ONLY - If you CANNOT get a termination verification from the city, **DURING OPEN ENROLLMENT ONLY for ACTIVE members**, fill out a health benefits application form (http://www.nyc.gov/html/fdny/pdf/emp_resources/healthbenefits.pdf) DROPPING your Domestic Partner, and submit it to:
NYC Office of Labor Relations *AND* to the Security Benefit Fund of the UFA.

Keep in mind that you **may still** have to go back and do the termination with the County Clerk's Office at some point.

5. RETIRED MEMBERS – you may submit a health benefits application form dropping your domestic partner at any time. See number 4 above.
6. To verify that your Domestic Partner has been dropped, you can contact your medical insurance carrier (EmblemHealth 212-501-4444) or you can go to the ESS website which is <http://www.nyc.gov/html/misc/html/ess.html>. Please allow a few business days for the request to be processed.