

JHHSC/JHH ADOPTION ASSISTANCE PROGRAM

Please read the information on the back of this form. This application and agreement must be completed for each adopted child. If both parents are employed by JHHSC/JHH, each must complete an application to be submitted to the Benefits Office, Phipps 455 at the same time. **Please attach the documentation indicating the legal adoption.**

Part I: Employee Information (Please Print)

Employee Name: _____ SSN: _____ - _____ - _____

Address: _____

Home No. :() _____ Work No.: _____

Department: _____ Location: _____

Part II: Adopted Child's Information

Name: _____ SSN: _____ - _____ - _____

Date of Birth: ____/____/____ Date of Adoption: ____/____/____

Expenses Incurred (attach itemized receipts):

_____ \$
_____ \$
_____ \$
_____ \$
_____ \$

Part III: Certification

I certify that I have read the back of this form, and have provided accurate information. I further certify that I am benefit-eligible, and that I am an employee in good standing.

Employee's Signature _____ SSN: _____ - _____ - _____

Date ____/____/____

Benefits Office Use Only: Date: ____/____/____

JHHSC _____ JHH _____ Amount paid to Employee: \$ _____

Employee's Name: _____ SSN: _____ - _____ - _____

Dept. # _____ Account #: _____ Benefits Approval: _____

White - Payroll Dept.

Yellow - Benefits Dept.

Pink - Employee Copy

JHHSC/JHH ADOPTION ASSISTANCE PROGRAM

FOR NON-REPRESENTED EMPLOYEES

Updated July 1, 2007

Eligibility

Employees, who are regularly scheduled to work 20 hours or more per week, may be eligible for a benefit under this program when expenses are incurred to legally adopt a child under the age of 18. However, the child must not be your natural child or your spouse's natural born child. Expenses related to surrogate births are not eligible for reimbursement.

Benefit Amount

Documented expenses will be covered for a single child adoption up to a maximum of \$3,000 per family for an employee working 30-40 hours per week. Employees working 20-29 hours per week will be eligible for a single child adoption up to a maximum of \$1,500 per family. For the simultaneous adoption of two children, the maximum reimbursement will be \$6,000 per family (\$3,000 for part-time per family) for all combined expenses. This benefit is non-taxable for both federal and state withholding; however, it is subject to FICA withholding.

Eligible Expenses

The following expenses associated with the legal adoption of the child may include:

- Reasonable and customary public and private agency fees permitted or required under the law of the state having jurisdiction over the adoption.
- Reasonable and customary legal and court fees.
- Reasonable and customary fees for medical and hospital services provided to the child, the natural mother, and the adopting parents, including immunizations.
- Transportation and lodging fees associated with the adoption.
- Temporary foster care charges.

Procedures

1. Reimbursement will be made following the submission of a completed Adoption Assistance Program form with appropriate documentation (legal document reflecting adoption). Itemized receipts may be submitted up to 6 months after placement of the child in the employee's home.
2. Reimbursement will be made through the Payroll System as part of the bi-weekly paycheck as an expense reimbursement, not subject to tax withholding. An employee should allow 4 weeks processing time for payment.
3. Questions regarding the program should be directed to the Benefits Office, Phipps 455, 410-614-3724.

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