

1. SUPPORTING DOCUMENTS FOR HEALTH INSURANCE APPLICATION

A complete application for individual health insurance includes the following:

FOR ALL APPLICANTS

- Completed Health Insurance Application Form Please review carefully and ensure that the form has been completed fully and accurately. Incomplete submissions can delay the application process. Only one application form needs to be completed; applicants with dependent spouses or children can include these persons on their application form. Each person included should complete an additional Health History Questionnaire form.
- **Covid-19 Amendment Form (not needed for SHIC application)** Please review carefully and ensure that the form has been completed fully and accurately.
- Proof of Immigration Status Work permit approval/or work permit fees receipt, Permanent Residency grant, or proof of Caymanian Status.
- Photo ID for Applicant and Employer Valid driver's license or passport is the only acceptable form of ID; these must be certified to be a true and correct copy of the original. A BAF staff member can also certify these ID's, providing they have seen the person face to face in the office.
- *Premium Payment* payment for the first month <u>must</u> be submitted along with the application.
 Payment can be made by cash, local cheque, debit/credit card, Electronic Fund Transfer (EFT), or an online transfer. Coverage will not be affected until the application has been fully evaluated.

FOR APPLICANTS WITH A DEPENDENT SPOUSE

- **Proof of relationship** Please provide a marriage certificate or Domestic Partnership Affidavit with two exhibits (such as joint utility bills, and a bank account in both names).
- *Employment information* (if employed) Please provide details of your spouse's employer or a copy of your work permit/Residency which states your spouse is a dependent.

FOR APPLICANTS WITH DEPENDANT CHILDREN (Age 18 and under)

• *Proof of relationship* – Please provide birth certificates, proof of legal guardianship, or proof of legal foster care.

FOR APPLICANTS WITH DEPENDANT OFFSPRING (Age 19 to 30)

• **Proof of dependent status** – Please provide proof that your adult child is enrolled in full-time education, or an affidavit (provided by BAF) confirming their financial dependence on the primary applicant.