Enrollment Items Checklist

Proof of North Carolina Residency* - a Copy of current drivers license or state ID **plus** one of the following:

- current rent or mortgage payment receipt
- voter registration card
- •state income tax return
- property tax receipt
- utility bill

If the rent/mortgage or utility bill is in a spouse's or guardian's name, a birth certificate or marriage certificate is also required.

Checkbook and banking information

Proof of U S citizenship or Lawful Permanent Resident Alien

- a. One of the following:
 - social security card
 - birth certificate
 - passport
 - naturalization/citizenship certificate
 - green card
- b. Pending green card (supply two documents)
 - Employment Authorization Document (EAD)
 - Advance Parole (temporary travel document)

Proof of Federally Eligible HIPAA individual:

- a. Copy of a Certificate of Creditable Coverage showing 18 months of continuous coverage from your prior carrier
- b. If your prior carrier has not provided you with a certificate, other examples of proof of prior coverage can include:
 - Explanation of benefits or correspondence from a plan or issuer indicating coverage
 - Pay stubs showing a payroll deduction for health coverage
 - Health insurance identification card
 - Certificate of coverage for group health policy

Proof of creditable coverage to reduce pre-existing waiting period: (if applicable)

- a. Copy of a Certificate of Creditable Coverage showing the number of days of continuous coverage from your prior carrier
- b. If your prior carrier has not provided you with a certificate, other examples of proof of prior coverage can include:
 - •Explanation of benefits or other correspondence from a plan or issuer indicating coverage
 - •Pay stubs showing a payroll deduction for health coverage
 - •Health insurance identification card
 - Certificate of coverage for group health policy

Proof of Health Coverage Tax Credit (TAA or ATAA) or Pension Benefit Guaranty Corporation

- a. Completed Supplemental TAA form
- b. Copy of one of the following
 - TAA Certification
 - •Health Coverage Tax Credit Certificate
 - Proof of Pension Benefit Guaranty Corporation

Proof of Eligibility: Letter from an individual health insurer that includes one of the following:

- •Denial or rejection letter due to a medical condition from health insurer
- •A conditional rider that would exclude coverage for a medical condition
- •A Letter from your physician confirming diagnosis date for each one of the presumptive medical conditions
 - a. Disability Award Letter
 - b. COBRA or state continuation coverage (mini-COBRA) termination letter including reason for termination
 - c. Pre-existing condition waiting period letter from health carrier indicating when pre-existing condition limitation no longer applies to you
 - d. Health Savings Account Banking Set-up form, if using HSA Banking option through Inclusive Health Plan