Instructions for enrollment in SFU's group plan

1) Fill out form and sign at the bottom
2) Scan any necessary documentation as outlined in 2A above
   *if including a study permit, make sure the end date is visible
3) Email the scanned form and attachments to benefits@sfu.ca
   *if enrolled in Guard.me, please indicate so in the text of the email
   *to opt-out of Guard.me upload the response letter from benefits@sfu.ca to www.guard.me/sfu

In most cases, you are eligible for coverage starting 2 months after the month of arrival in BC (August 31 arrival in BC means coverage starts from November 1). If you are working in a TSSU appointment (TA, TM, Sessional Instructor, etc) SFU will pay for your coverage starting from the first of the month in which you submit the form (and are eligible) until the appointment end date on your contract. If you have a semester break between appointments then you need to reapply for benefits. For information on continuing coverage after your employment ends see: http://bit.ly/269j8W

Summary provided by TSSU, for full information see: http://bit.ly/2bQ54Vm or email benefits@sfu.ca
4 SPouse AND Child INFORMATION

SPouse means a resident of BC who is either married to or living and cohabiting in a marriage-like relationship with the applicant and may be of the same gender as the applicant. CHILD means a resident of BC who is the legal ward or child of the applicant, is supported by the applicant, is neither married nor living and cohabiting in a marriage-like relationship, and is either age 18 or younger, or age 19 to 24 and attending school or university full-time.

PHOTOGRAPHY OF CURRENT CITIZENSHIP/IMMIGRATION DOCUMENTS MUST BE ATTACHED. USE LEGAL NAMES WHEN COMPLETING THIS FORM.

SPouse LEGAL LAST NAME: SPouse LEGAL FIRST NAME: SPouse LEGAL SECOND NAME: GENDER:

BIRTHDATE (MM / DD / YYYY): STATUS IN CANADA:

CANADIAN CITIZEN = Canadian Birth Certificate, Canadian Citizenship Card or Passport

HOLDER OF PERMANENT RESIDENT STATUS = Record of Landing, Permanent Resident Card (front & back) or Confirmation of Permanent Residence

OTHER = Work or Study Permit, etc.

PERSONAL HEALTH CARE CARD NUMBER: HAS SPouse LIVED IN BC SINCE BIRTH?: YES NO

EARLIEST MM / DD / YYYY FROM PROVINCE (OR COUNTRY):

PREVIOUS HEALTH NUMBER:

CHILD LEGAL LAST NAME: CHILD LEGAL FIRST NAME: CHILD LEGAL SECOND NAME: GENDER:

BIRTHDATE (MM / DD / YYYY): STATUS IN CANADA:

CANADIAN CITIZEN = Canadian Birth Certificate, Canadian Citizenship Card or Passport

HOLDER OF PERMANENT RESIDENT STATUS = Record of Landing, Permanent Resident Card (front & back) or Confirmation of Permanent Residence

OTHER = Work or Study Permit, etc.

PERSONAL HEALTH CARE CARD NUMBER: HAS CHILD LIVED IN BC SINCE BIRTH?: YES NO

EARLIEST MM / DD / YYYY FROM PROVINCE (OR COUNTRY):

PREVIOUS HEALTH NUMBER:

IF YOU HAVE MORE CHILDREN, PLEASE CHECK BOX AND PROVIDE ALL INFORMATION

IDENTIFICATION: You must sign with your application; photocopies of documents that support the name and Canadian citizen or immigration status for all persons listed. Eligibility cannot be determined without this documentation. Canadian citizens and holders of permanent resident status (landed immigrants) returning from the USA may also be asked to provide evidence of having established residence in BC and/or having abandoned their status in the USA.

RESIDENCY: If you expect to leave the province for more than 30 days in total during the next 6 months, a letter outlining your planned dates of departure and return, destination and the reason for your absence is required with this application. Failure to provide this information may affect eligibility for benefits.

EFFECTIVE DATE OF BENEFITS: New and returning residents must complete a waiting period before health care benefits begin. Generally, this period is the balance of the month of arrival in BC, plus two months. If absences from Canada exceed a total of 30 days during the waiting period, eligibility may be affected. Applications should be submitted immediately upon return to BC, but not at the end of the waiting period. If you apply late, the effective date of benefits will be determined by MSP and may result in premiums being charged retroactively.

OUT-OF-PROVINCE STUDENTS: If visiting outside BC, the absence must be temporary and solely for the purpose of attending full-time studies at an accredited educational facility in a program which leads to a degree or certificate recognized in Canada.

CANCELLATION OF BENEFITS: Failure to remit premiums does not constitute notification to cancel benefits. If you will no longer be a resident of BC, you must notify Health Insurance BC that this is the case, and provide your date of departure from the province and your new address; otherwise, premium invoicing may occur.

CHANGE OF NAME OR ADDRESS: Health Insurance BC must be notified immediately of any change of name or address.

LEGISLATION: All information is subject to change in accordance with the Medicare Protection Act and Regulations and the Hospital Insurance Act and Regulations. If a discrepancy exists between the information Health Insurance BC has provided on this application and the legislation, the legislation will prevail.

Personal information in this form is collected under the authority of the Medicare Protection Act. The information will be used to determine residency in BC and determine eligibility for provincial health care benefits. If you have any questions about the collection of this information, contact Health Insurance BC at the address or telephone numbers on page 1. Personal information is protected against unauthorized use and disclosure in accordance with the Freedom of Information and Protection of Privacy Act and may be disclosed only as provided by that Act.