

Documents to verify:

Qualifying Life Events

Loss of Minimum Essential Coverage (MEC) & Loss of Other Qualifying Coverage

| Documents must show a loss of qualifying health coverage in the past 60-days

OR

| Show you will lose coverage in the next 60-days.

Type of Document	Document Requirements (If Applicable)
A letter from an insurance company	<ul style="list-style-type: none"> Must be submitted on official letterhead or stationery, including: <ul style="list-style-type: none"> o A letter or premium bill from your former insurance company that shows you or your dependent's cancellation/termination from health coverage. o A decertification letter from your insurance company stating when coverage will no longer be offered.
A letter from an employer	<ul style="list-style-type: none"> Must be submitted on official letterhead or stationery, confirming one of these about you or your spouse or dependent family member: <ul style="list-style-type: none"> o That your employer dropped or will drop your coverage or benefits. o That your employer stopped or will stop contributing to your cost of coverage. o That your employer changed or will change coverage or benefits, and your coverage will no longer be considered qualifying health coverage.
A letter about COBRA coverage	<ul style="list-style-type: none"> A letter from an employer or health insurance company that confirms these: <ul style="list-style-type: none"> o Your employer's offer of COBRA coverage along with the date this coverage would start. o Your COBRA coverage ended or will end, or your employer stopped or will stop contributing to the cost of coverage and when.

Type of Document	Document Requirements (If Applicable)
A healthcare program document	<ul style="list-style-type: none"> Must be submitted on official letterhead or stationery, including: <ul style="list-style-type: none"> o A letter from a government health program, like TRICARE, Veterans Affairs (VA), Peace Corps, or Medicare, showing when coverage ended or will end. o A letter from your state Medicaid or CHIP agency showing that your eligibility for Medicaid or CHIP was denied and when it was denied or that your Medicaid or CHIP coverage ended or will end. o A dated copy of your military discharge document (DD214).
A letter if you lost student health coverage	<ul style="list-style-type: none"> Must be submitted on official letterhead or stationery, including: <ul style="list-style-type: none"> o When the coverage ended or will end.
Pay stubs, if you lost employer-sponsored coverage.	<p>You can submit:</p> <ul style="list-style-type: none"> 2 pay stubs from the past 1-3 months, one that shows a deduction for health coverage and another which shows that the deduction ended in the past 60 days. If a reduction in work hours caused you to lose coverage, you can submit one previous pay stub that shows that you worked 30 or more hours and a deduction for health coverage, and a pay stub from the past 60 days that shows that you worked less than 30 hours and no deduction for health coverage.
<p>Document showing you lost coverage because of:</p> <p>divorce, custody agreements, or annulment</p> <p><i>submit within 60 days of submitting your application, including:</i></p>	<ul style="list-style-type: none"> Divorce or annulment papers that show the date responsibility ends for providing health coverage or proof that you stopped getting health coverage because of your relationship to your former spouse. Other confirmation that you lost or will lose coverage because of divorce, legal separation, or annulment that shows the date that health coverage ends.
Document showing you lost coverage due to death of a family member, including:	<ul style="list-style-type: none"> A death certificate or public notice of death and proof that you were getting health coverage because of your relationship to the deceased person, like a letter from an insurance company or employer that shows the names of the people on the health plan. Other confirmation that shows you lost or will lose coverage because of the death of a spouse or other family member.

Birth of a child

Type of Document	Document Requirements (If Applicable)
Official Birth Certificate	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery.
Hospital Medical Record / Proof of Birth Letter	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery, including:<ul style="list-style-type: none">Baby nameDate of BirthAt least One parent nameSignature from hospital (i.e. nurse, physician)
Hospital Discharge Papers	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery.<ul style="list-style-type: none">Baby nameDate of BirthAt least One parent name
Hospital Certificate with Footprints	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery (i.e. logo).<ul style="list-style-type: none">Baby nameDate of BirthBaby Footprint
Newborn Crib Tag and Wristband	<ul style="list-style-type: none">Must submit all three:<ul style="list-style-type: none">Mother's wristband<ul style="list-style-type: none">Mother's nameDate of admissionBaby wristband<ul style="list-style-type: none">Parents last name (i.e. Baby Smith)Date of Birth / AdmissionCrib Tag<ul style="list-style-type: none">Parents last name (i.e. Baby Smith)Date of BirthPhysician Name

Adoption & Gain a Court Appointed Dependent

Type of Document	Document Requirements (If Applicable)
Court Order Showing Legal Adoption (Final Decree)	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery, including:<ul style="list-style-type: none">Child's nameChild's Date of BirthSigned by the agency / court
Certificate of Adoption (Form H-105)	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery, including:<ul style="list-style-type: none">Child's nameChild's Date of BirthSigned by the agency / court
Notice from court showing appointed dependent.	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery, including:<ul style="list-style-type: none">Child's nameChild's Date of BirthSigned by the agency / court
Foster Care Placement Papers / Agreement	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery, including:<ul style="list-style-type: none">Child's nameChild's Date of BirthShows authorization for child to be in the home.Signed by the agency / court
Other Court Documents	<ul style="list-style-type: none">Must be submitted on official letterhead or stationery.<ul style="list-style-type: none">Child's nameChild's Date of BirthShows authorization for child to be in the home.Signed by the agency / court

Release from Incarceration

Type of Document	Document Requirements (If Applicable)
Certificate of Release / Discharge Papers:	States the official date and terms of release (e.g., parole, completion of sentence).
Personal Property Inventory:	A receipt for all personal items and funds returned upon discharge.