

Name	Effective Date	Nunavut Health Care Number
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For Office Use Only ▲

Application for Nunavut Health Care Coverage

Important: Please read the back of this application for more registration information

Applicants moving to Nunavut **from within Canada** must attach a clear copy of the following to this form; Birth Certificate & Health Care Card (from the Province / Territory you are currently registered in)

You may also be requested to provide: A Valid Canadian Passport, Immigration Documents and/or a Land Claims Beneficiary Card

Applicants moving to Nunavut **from outside Canada** must attach a copy of official Immigration Documents. (Readable photocopies of originals will be accepted)

There are supplementary health benefit programs available. For more information contact your local health center or the Health Insurance Programs office listed on the back of this application form.

Important: Please fill out application in English

A: Name of Person to be Registered for Health Coverage (must be a permanent resident) * In the "Ethnicity" box, enter one of the following numbers: 1 - Inuit 2 - Registered Indian 3 - All Others

(Please Print) Surname	Given Name(s)	Sex	Ethnicity	Birth Date d/m/y	Prev Prov	Previous Health Care Plan Number

If you entered #2 Registered Indian, please provide a copy of your band card or a letter from the Department of Indian and Northern Affairs.

B: Mailing Address & Contact Numbers

Mailing Address: PO Box / Community / Territory / Postal Code

e-mail Address	Home Phone	Employer Name & Phone Number

C: To avoid delays, please answer ALL of the following questions (Please Print)

How long do you plan to live in Nunavut? Permanently Temporarily until (d/m/y)

Have you moved to Nunavut from outside Canada? YES NO (If YES, refer to Section E for more details)

When did you arrive in Nunavut? (d/m/y)

Reason for move to Nunavut. WORK STUDY OTHER

Have all your immediate family members moved with you to Nunavut? YES NO If NO, Please explain (see Section G)

Have you recently left one of the following; Canadian Armed Forces - RCMP - Federal Penitentiary? YES NO If YES, date of discharge (d/m/y)

Have you ever been registered for Nunavut Health Care coverage before? YES NO If YES, what year?

D: Declaration

I declare that the information given is correct. **It is an offence to give false information for the purposes of obtaining coverage under the Nunavut Health Care Plan.**

▼ Check One

If applicant is under 19 years of age, this form must be signed by a parent or legal guardian.

Applicant

Parent

Legal Guardian

.....
Please Print Name

.....
Signature

.....
Date



E: Required Immigration Documents

Immigration documents are required for each individual applying for Nunavut Health Care. Other documentation may be requested for verification purposes. Good quality photocopies will be accepted.

F: Individuals Not Eligible for Nunavut Health Coverage

- ▶ Tourists, Transients, and Visitors
- ▶ Temporary, Term and Seasonal Positions - A position of employment of less than 12 consecutive months.
- ▶ Members of the RCMP, Canadian Armed Forces and/or NATO Forces
- ▶ Inmates - Of a Federal Penitentiary
- ▶ Canadian Students - Attending an educational institute in Nunavut but not intending to establish a permanent residency
- ▶ Students - From outside Canada holding a Visa of less than 12 months
- ▶ Certified Refugees or Refugees Claimants - Health coverage provided by Federal Government.
- ▶ Individuals holding an Employment Visa of less than 12 months
- ▶ Individuals holding a Minister's Permit (exceptions may apply)

If the applicant accepts temporary or term employment in Nunavut, the home province must be notified. Home province coverage will continue for up to one year.

G: Families Not Moving Together

In the case of a permanent move, where one spouse moves from Province A to Nunavut in advance of the rest of the family, the spouse having moved, will be looked on as temporarily absent from Province A until the rest of the family arrives (without exceeding a period of twelve months).

In the case of a dependant (child) remaining in Province A for educational purposes and both parents have moved to Nunavut, the dependant's residence for health insurance purposes goes with the parents' residence. Documentation must be provided that validates the claim that the dependant is attending an educational facility.

H: Changes to Personal Information

It is important that the Health Care Registrations Department be notified of any changes to name, ethnicity and/or address, including temporary residency outside of Nunavut. A "Request for Change" form (Green) may be obtained from a Health Center, Public Health office or Hospital located in Nunavut.

I: Verification of Ethnicity

Individuals who indicate Inuit or Registered Indian ethnicity must provide in the case of Inuit, a Beneficiary Card, and in the case of Registered Indians, a DIAND card.

If these documents cannot be provided, the applicant will be registered as "Non-Aboriginal" until the Registrations Department has been notified. Failure to register as Inuit or Registered Indian may result in the loss of Non-Insured Health Benefits, therefore it is important to provide the necessary documentation with the application.

J: Effective Date of Health Care Coverage

Health coverage may become effective on the 1st day of the 3rd month of your arrival in Nunavut providing all documentation has been received.

Send the completed application or direct any inquiries to the address listed below

We cannot accept faxed applications. You must mail your application to the address below.

Department of Health & Social Services
Health Insurance Programs
Government of Nunavut
Attention: Health Care Registrations Department
Bag 003
Rankin Inlet, Nunavut (NU) X0C 0G0
Phone: 867-645-8028 Toll Free: 1-800-661-0833

email: nhip@gov.nu.ca

Reminder: Carry your Health Care Card with you at all times



Department of Health & Social Services