



Etiwanda School District

Acceptable documentation for proof of coverage

Per the Etiwanda Teachers Association collective bargaining agreement and Board Policy 4554, the following constitutes acceptable documentation of proof of coverage:

Official documentation (company letterhead) from the subscriber's employer stating insured dependent name, carrier name, and dates of coverage. This documentation must also state that the coverage meets the minimum coverage criteria as set forth by the Affordable Care Act (ACA).

OR

Submit a completed Health Insurance Verification Form to the Etiwanda Payroll & Benefits Department. This form must be completed by the Insured's employer.

Form is available on the district website:

http://www.etiwanda.org/departments/open_enrollment