



4417 Corporation Lane  
Virginia Beach, VA 23462  
(757) 552-7401

Optima Health Insurance Company  
and Optima Health Plan  
Enrollment Application

## TIPS FOR COMPLETING YOUR ENROLLMENT APPLICATION

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**OptimaHealth**



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**Section 10**3OHDVH OLVW EHORZ DOO GHSHQGHQWV WR EH FRYHUHG E\WKH HQUROOP  
QRW QHHGG IRO3OX

IF ADDING TO POLICY, DATE OF QUALIFYING EVENT (BIRTH, MARRIAGE, ETC.) \_\_\_\_\_

**Section 11****AUTHORIZATION**

I am applying for Optima Health coverage for myself and the family members listed, and agree that once enrolled I and my family PHPEHUV ZLOO DELGH E\ WKH SURYLVLRQV RI FRYHUDJH LQ WKH \*URXS & RQWUDFW DZKLFK ZH ZLOO EH HQUROOHG 2SWLPD + HDOWK DV QHHGG ILRQJ VSHWHU DO+ Health Insurance Company.

I understand that misrepresentation in answering questions on this application or non-payment of premiums may result in loss of FRYHUDJH XQGHU WKH \*URXS + HDOWK 3ODQ

I understand that Optima Health may receive and collect personal information from persons other than me. The collected personal or privileged information may be disclosed to third parties without authorization. I understand that I have a right to access and correct all personal information collected about me and that I will receive upon request Optima Health's complete notice of information collection and disclosure practices.

I authorize any physician, hospital, pharmacy, or other provider of health services or supplies, to disclose to Optima Health medical and RWKHU LQIRUPDWLRQ UHODWHG WR HOLJLELOLW\ IRU FRYHUDJH RU D FODL7RKURU EHC DXWKRU\ DWLRQ VKDOO H[WHQG WR UHSUHVHQWDWLHV RI 2SWLPD + HDOWK DV QHHG + HDOWK WKH ULJKW WR UHFHLYH IURP DQG UHOHDVH LQIRUPDWLRQ WR RWKHU LQVW & 2% SURYLVLRQV XQGHU WKH \*URXS 3ROLF\ RU \*URXS \$JUHHPHQW , XQGHUVWDQG WKDW 2SWLPD + HDOWK XSRQ UHFHLYLQJ LQIRUPDWLRQ PD\ XVH LW W IRU FKDQJH LQ SROLF\ EHQH\ WV RU DGPLQLVWHU & 2% IN"en-US>-39.70030B6>17.900308005500440

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

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Date \_\_\_\_\_

Optima Health Alternative Language Options for Notices and other Written Information

Amharic:

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Arabic:

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Bengali/Bangla:

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- ſ ſ ^ u È ^- 1-855-687-6260a

Chinese (Mandarin):

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Laotian:

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Mon-Khmer, Cambodian:

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p ? u ù/r = Ù z / - ì h — { 1-855-687-6260r

Navajo:

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Persian/Farsi:

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Portuguese:

ATENÇÃO! Se você fala português há serviços de assistência em idiomas disponíveis para você gratuitamente.  
para 1-855-687-6260.

Russian:

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Spanish:

ATENCIÓN: Si habla español, existen servicios de asistencia de idiomas disponibles para usted sin cargo. Llame  
855-687-6260.

Tagalog:

PAUNAWA! Kung nagsasalita ka ng Tagalog, may maaari kang kuning mga libreng serbisyo ng tulong sa wika. Tumawag sa 855-687-6260.