



PROCESS GUIDE – CREATING AN INDIVIDUAL APPLICATION

Starts: December 11, 2013
Ends: TBD

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December 11, 2013

Introduction

This Process Guide walks through the process of creating an individual application, regardless of whether the consumer has created an account. The document includes notes to guide the process of entering paper applications into CalHEERS.

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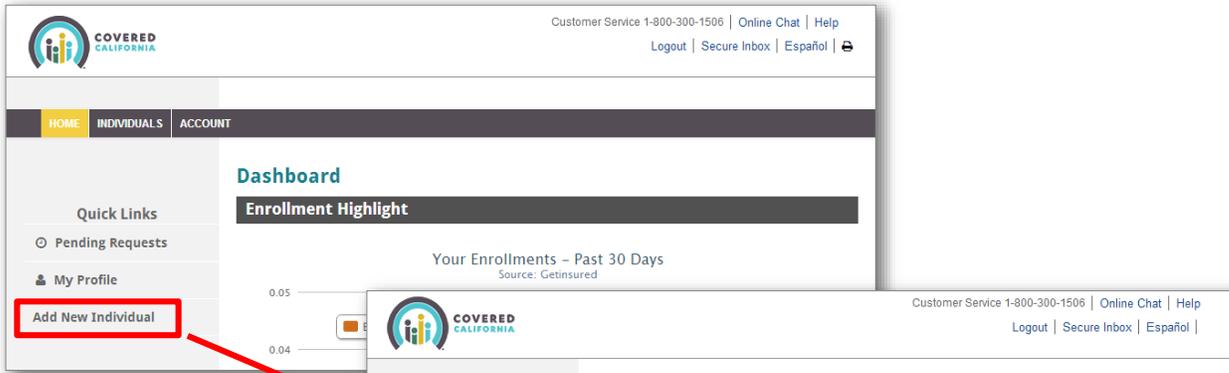
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Search for Pending Requests

Before recreating a paper application as a new online application in CalHEERS, first check to see if you have a pending delegation request from the primary applicant. (Later in this document we will look at how to start a new application directly.)

After logging into CalHEERS start from the *Dashboard* page shown in the screenshot below.

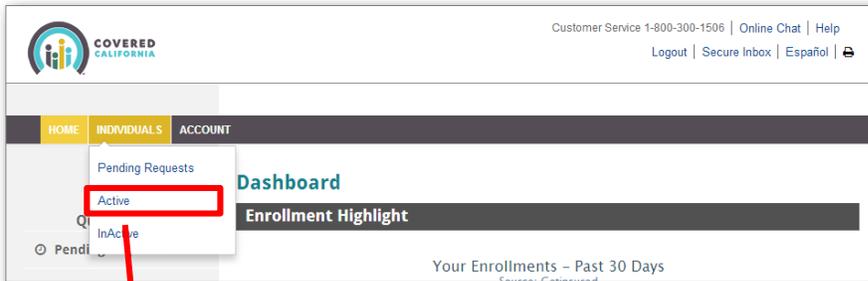
1. From the *Dashboard* page, click the **Pending Requests**.



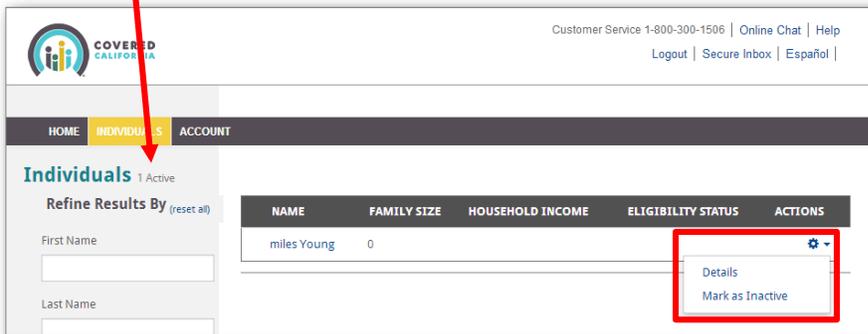
2. If there is a Pending Request for this paper application, click the **Actions** icon (⚙️) and select **Accept** for the Pending request.



3. Click on the **Individuals** tab, then click **Active**.

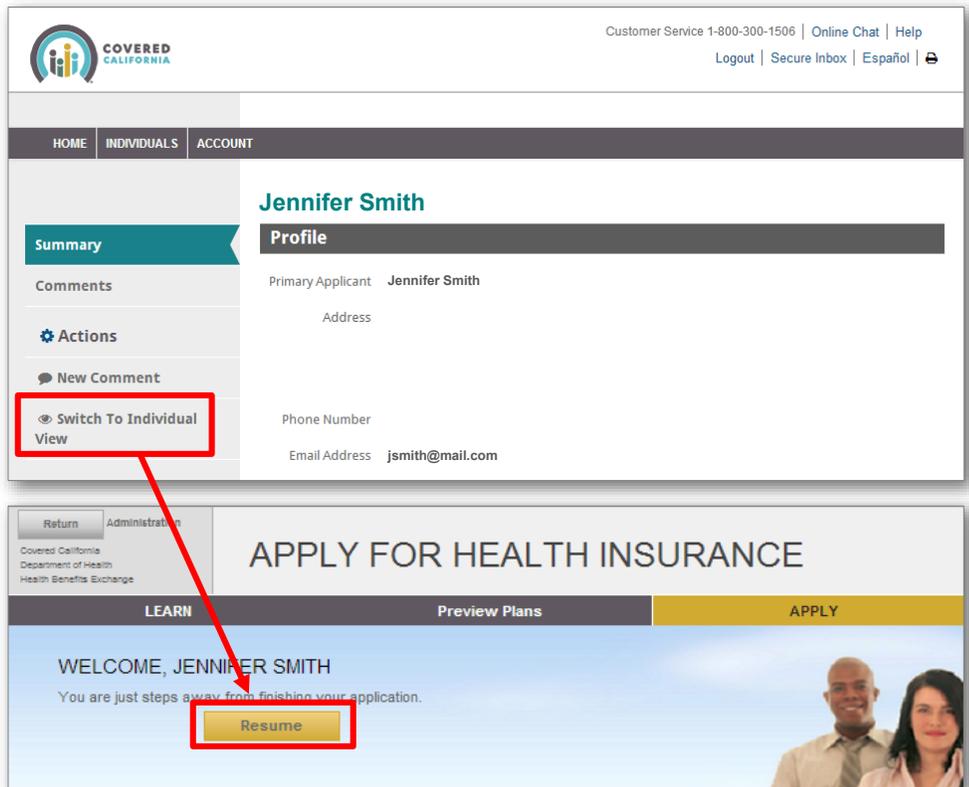


4. Select the individual you want to view, click the **Actions** icon and select **Details** from the dropdown list to display the individual's record.



5. In the applicant’s record, click **Switch to Individual View** to access the applicant’s *Individual Landing* page.

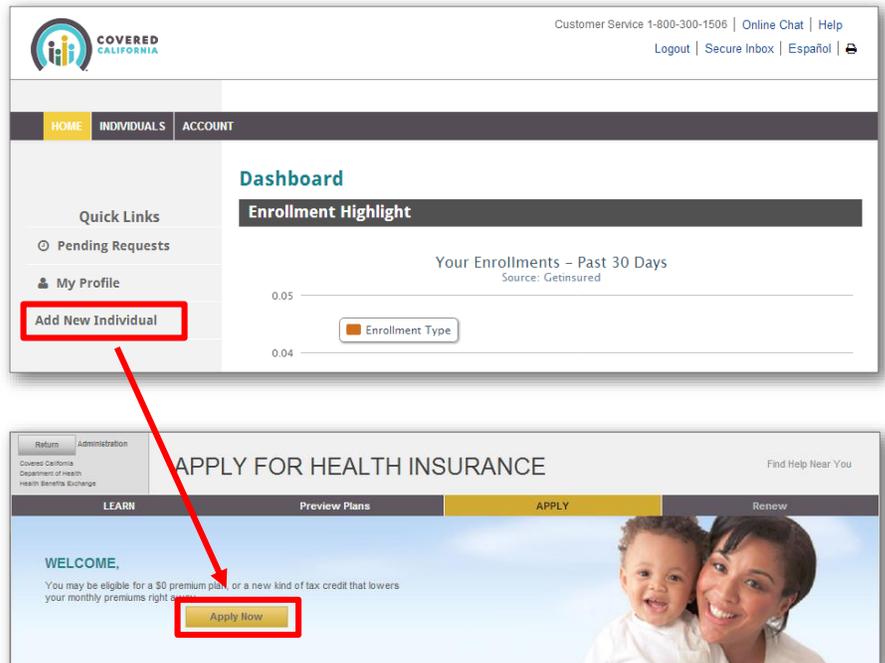
6. From the *Individual Landing* page, if an application is in progress, click **Resume** (shown), or click **Apply Now** to begin a new application (for example if you have received a paper application with no online version started).



Starting an Application without an Existing Account

7. If the applicant has no CalHEERS account, from the *Dashboard* page click on **Add New Individual** to navigate to the *Individual Landing* page. In the example shown, no user name is shown after **Welcome**, indicating there is no existing account with which to link a new application. It is possible to link the application to an account that the consumer creates later.

8. Click **Apply Now** to start a new application.

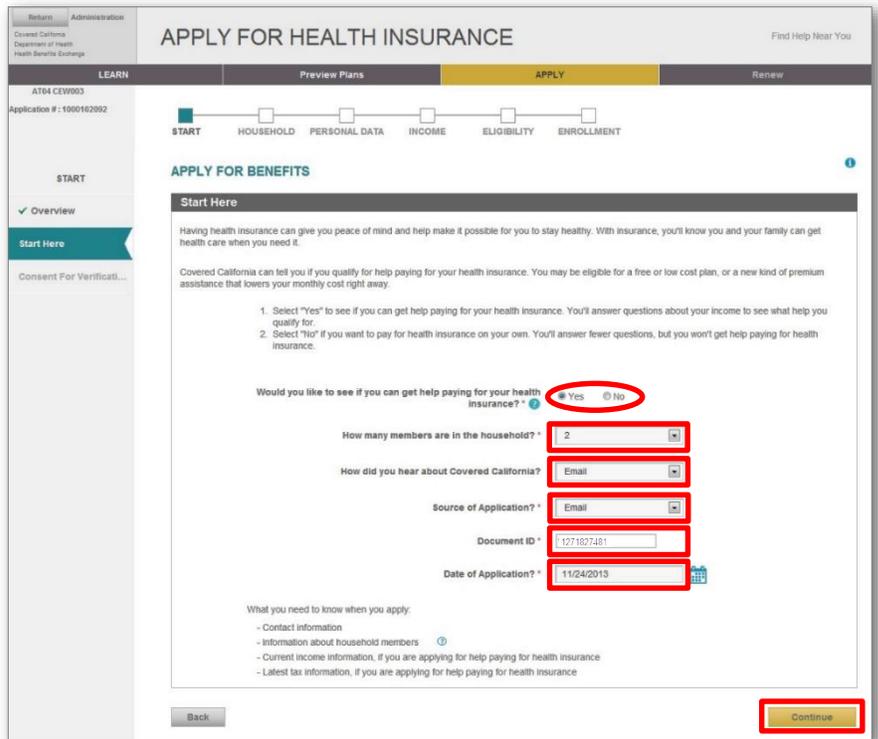


9. The *Overview* page displays. From the *Overview* page, click **Continue** to navigate to the *Apply for Benefits* page.



Apply for Benefits page

10. Set the application type here.
11. Select the **Yes** radio button to apply for subsidy options
12. Enter the number of household members and how the consumer heard about Covered California.
13. The **Document ID** field only shows when the **Source of Application** is Mail, Fax, or Email, or for paper applications scanned into the Electronic Content Management System (ECM). For the latter, entering the **ECM record ID** in this field links the scanned image of the application to the application entered here.
14. **Note for processing paper applications: For Document ID, if you do not have an ECM record ID, enter any number in the field.** For **Date of Application**, enter the date either stamped on or shown as the origination date in the scanned or paper application.



15. Click **Continue** to display the *Consent for Verification* page.

16. Click the checkbox labeled **I agree to consent for verification**.

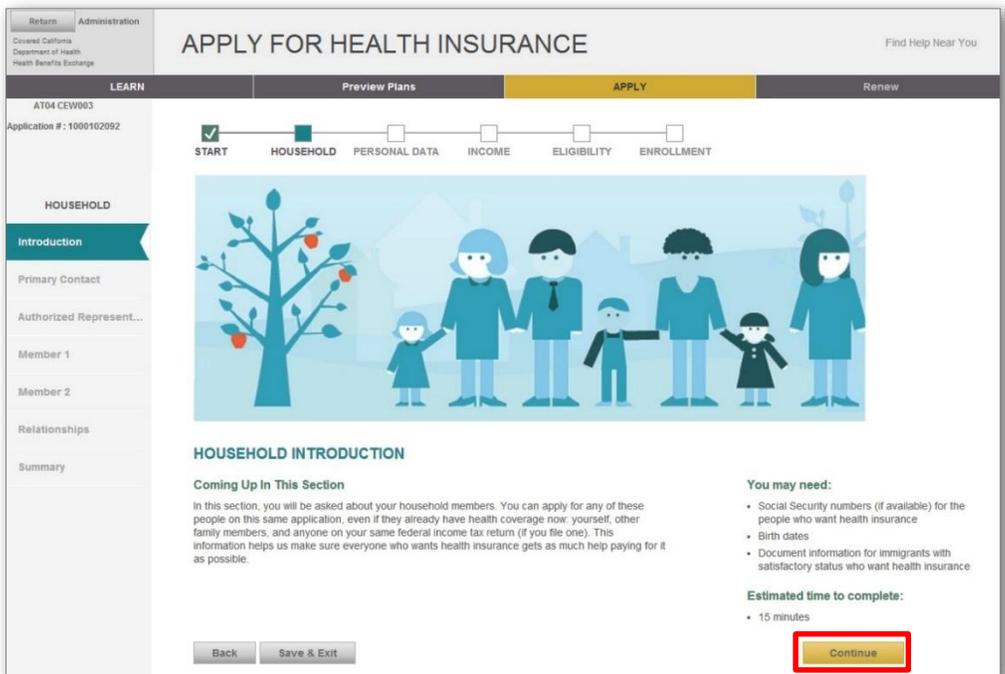
17. Click **Continue** to navigate to the *Household Introduction* page.



Household Introduction page

The *Household Introduction* page gives a preview of the data to be collected on the next section of the application. The Consumer should include anyone in their household they file taxes with, family members they are related to, or a Registered Domestic Partner. They should not include any other household members unless they have a child together.

18. Click **Continue** to navigate to the *Household Primary Contact* page.



Household Primary Contact page

19. Enter the name, address, and other contact information for the primary contact on the application. The Primary Contact is the person who receives notices and correspondence from Covered California, and is authorized to contact us and make updates to the application and case when needed. **Note for processing paper applications:** If the paper application’s box for Mailing Address is checked, leave the radio button for mailing address set to **Yes**. If the paper application’s box is blank, change the online answer to **No** and enter the correct Mailing address information in the fields that appear below. Also, the **County** dropdown only appears if the zip code crosses multiple counties.

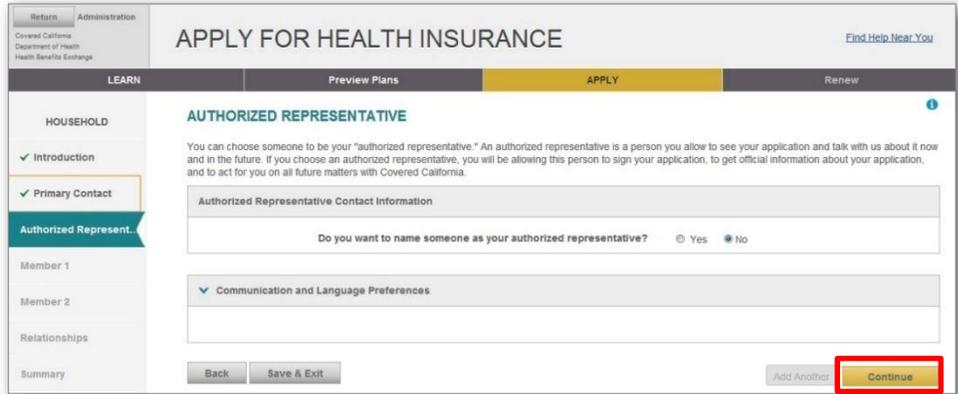
20. For the first **Communication** dropdown, never select **Text**. Also, if the language specified on the paper application is not available in the other two dropdowns, leave this section defaulted to English.

21. Click **Continue** when done. A popup asks to confirm your address against a postal service list of known addresses.

22. Select the appropriate mailing address and click **OK** to navigate to the *Authorized Representative* page.

Authorized Representative page

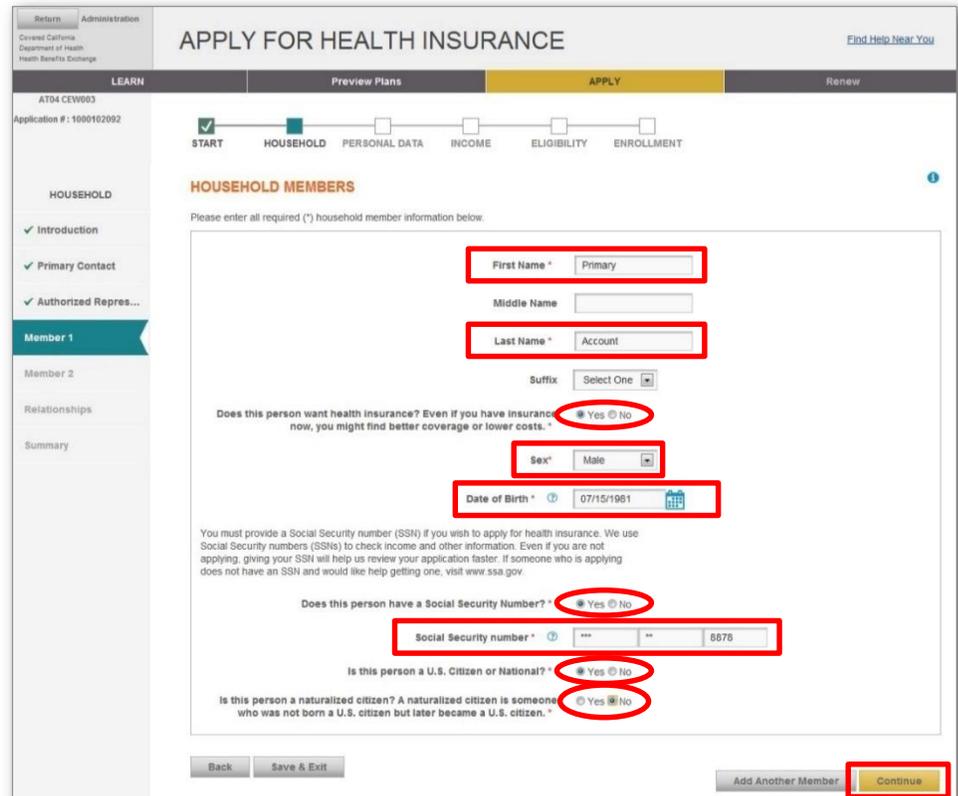
23. The *Authorized Representative* page asks for adding a trusted representative to the application. The question defaults to **No**, but if changed to **Yes**, fields display to collect information about the applicant’s Authorized Representative, who is empowered to discuss details of the application with SCRs and CEWs. More than one Authorized Representative can be added. When finished, click **Continue**.



Household Members page

24. Add key details about each person in the application, such as Gender, Date of Birth, Social Security Number, and citizenship status.

25. The **Member** tabs on the left are for entering information for different household members. The member name is prepopulated in each tab, and there are as many Member tabs as specified for the household earlier in the application.



26. **Note for processing paper applications:** If a no SSN is present, look at the next question on the paper application – **If you do not have an SSN, what is the reason?** If one of the boxes on the paper application is checked because the consumer doesn’t have an SSN, change online answer to **No**, and select the reason from the dropdown box.

27. If a household member indicates that they have Eligible Immigration Status, we request the document type and number for that person. We also check to see if their name as it appears on the document is different than what they listed at the top of the page.
28. **Note for processing paper applications:** If the paper application shows a **Document Type** that is not listed on the online application’s dropdown for **Document Type**, conduct a call back to the applicant to see if a document from the online list is available.
29. **Note for processing paper applications:** The paper application shows the following fields relating to immigration: **Document Type**, **ID number**, **Country of issuance**, **Expiration date**, and **Name as it appears on the document**. CalHEERS document types will require more information than collected in the paper application. Refer to the **Immigration Status Document Type Crosswalk** at the end of this document. Then conduct a callback to the consumer; obtain the necessary information according to the attached crosswalk.
30. Click **Add Another Member** if adding additional household members to the application, or click **Continue** to navigate to the next page.

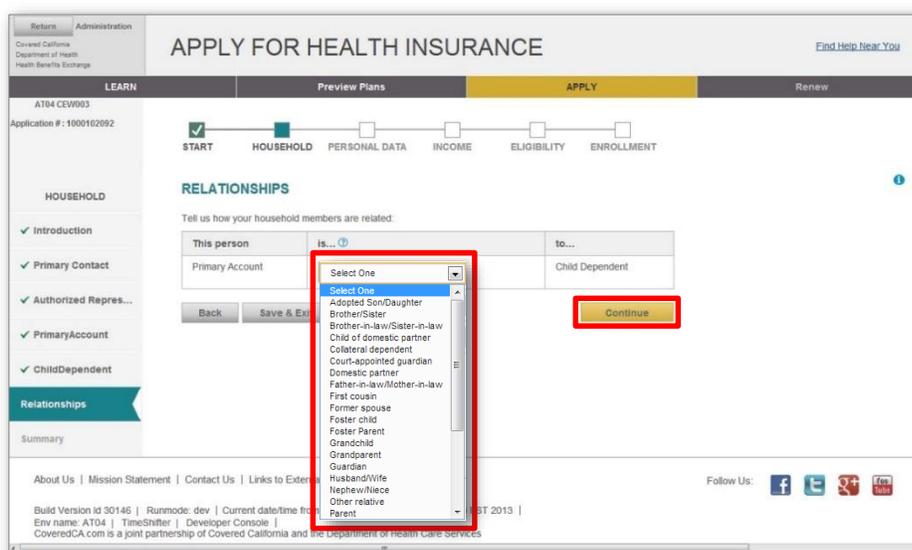
Relationships page

The *Relationships* page tracks how household members are connected. This determines who can receive subsidies and what plans the household can select as a group. This page is simple to complete for small households, but can grow more complicated in very large households.

31. For each pair of household members, select the appropriate relationship from the dropdown list. When more than two household members are listed on the paper application, a call back to the applicant will be required to determine the appropriate relationships of the additional persons on the application.

32. For help understanding the *Relationships* page, see the **Relationships Grid** at the end of this document.

33. Click **Continue** to navigate to the next page.

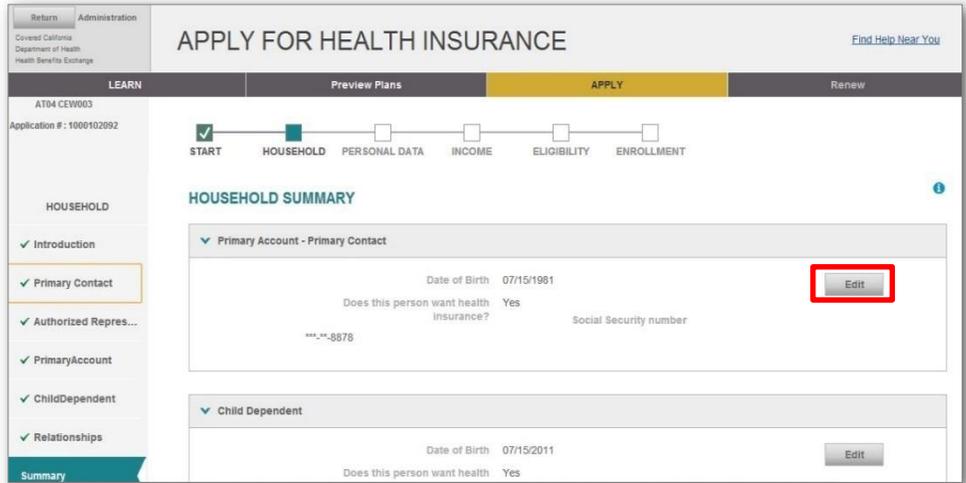


Household Summary page

The *Household Summary* page displays the information entered so far about members of the application, including the information about each household member.

34. Click **Edit** to modify information in the different sections, as needed.

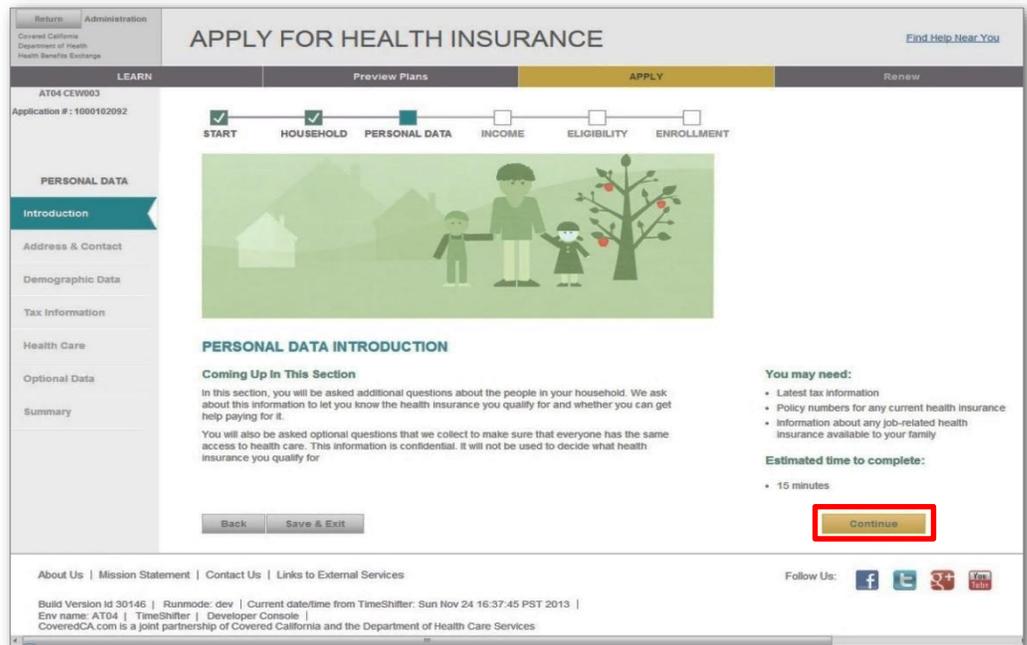
35. Scroll to the bottom and click **Continue** when done.



Personal Data Introduction page

The *Personal Data Introduction* page describes the next set of steps you will complete for this application, including the *Demographic*, *Tax Information*, *Health Care*, and *Optional Information* pages.

36. Click **Continue** to navigate to the next page.



Address and Contact Information page

- 37. **Note for processing paper applications:** On the paper application there is a checkbox for whether the household member's home address is the same as the main contact's home address. The electronic application has **Yes** and **No** radio buttons. If the paper application box is checked, leave the online radio button to **Yes**.
- 38. If the paper application checkbox is blank, change this answer to **No** on the online form. This triggers fields for **Home Address** and **Mailing Address** to appear, enabling setup of different addresses for household members that live in different locations.
- 39. When finished, click **Continue** to proceed.

The screenshot shows the 'APPLY FOR HEALTH INSURANCE' interface. The top navigation bar includes 'Return Administration', 'Covered California Department of Health Health Benefits Exchange', and 'Find Help Near You'. The main header is 'APPLY FOR HEALTH INSURANCE'. Below this is a progress bar with steps: START, HOUSEHOLD, PERSONAL DATA, INCOME, ELIGIBILITY, and ENROLLMENT. The current step is 'PERSONAL DATA'. On the left, a sidebar lists 'PERSONAL DATA' with sub-items: Introduction, Address & Contact (selected), Demographic Data, Tax Information, Health Care, Optional Data, and Summary. The main content area is titled 'ADDRESS & CONTACT' and includes the instruction: 'Please answer all required questions (*) for each household member.' There are two sections for household members: 'Brandon Knight' and 'Child Dependent'. Each section has three sub-sections: 'Home Address', 'Mailing Address', and 'Contact Phone & Email'. In the 'Home Address' section, a question is highlighted with a red box: 'Is this person's residence address the same as your address?' with radio buttons for 'Yes' and 'No'. In the 'Mailing Address' section, another question is highlighted with a red box: 'Is this person's mailing address the same as the household primary contact's address?' with radio buttons for 'Yes' and 'No'. The 'Contact Phone & Email' section contains input fields for Home Phone, Work Phone, Extension, Cell Phone Number, and Email. At the bottom of the form, there are 'Back', 'Save and Exit', and 'Continue' buttons. The 'Continue' button is highlighted with a red box.

Personal Data – Demographic Information page

40. **Note for processing paper applications:** For **marital status**, if the paper application says **Separated**, select **Single** from the dropdown list.

41. Select the appropriate radio buttons for the next three or four questions on disability, pregnancy (only appears for female household members), and Indian Tribe membership.

42. Answer the additional questions that appear for child household members.

The screenshot shows the 'APPLY FOR HEALTH INSURANCE' interface. The main heading is 'PERSONAL DATA - DEMOGRAPHIC INFORMATION'. The page is divided into two main sections: 'Primary Account' and 'Child Dependent'. Each section contains several questions with radio buttons and dropdown menus. Red boxes highlight the 'Single' dropdown for the Primary Account marital status, the 'Never Married' dropdown for the Child Dependent marital status, and the 'Primary Account' dropdown for the Child Dependent caretaker question. Red circles highlight the 'Yes' and 'No' radio buttons for the disability, medical expense, and pregnancy questions in both sections. A 'Continue' button is highlighted in a red box at the bottom right.

43. **Note for processing paper applications:** If the paper application includes an answer to the question “Are you applying for a child less than 1 year old?” you must open an incident and record this information.

44. Click **Continue** to navigate to the next page.

Tax Information page

The *Tax Information* page collects tax filing status for each applying household member in a subsidy application. Answer all the required questions on the form. The form is dynamic, so the values answering some questions will cause additional fields to appear.

45. If the consumer indicates they will file taxes for the benefit year **and** indicates a tax filing status for the benefit year, then for the questions on **last** year, mark **Yes**, and indicate the same tax filing status for the prior year.

Otherwise mark **No**.

46. Similarly, if an applicant is marked as a dependent for the benefit year, indicate **Yes** for the prior year.

47. Click **Continue** when ready to proceed to the next page.

The screenshot shows the 'APPLY FOR HEALTH INSURANCE' interface. The 'TAX INFORMATION' section is active, with a progress bar indicating the current step. The 'Primary Account' section contains the following questions and highlighted 'Yes' radio buttons:

- Is this person the Primary Tax Filer? * Yes No
- Did this person file taxes last year? * Yes No
- What was this person's tax filing status last year? *
- Was this person claimed as a dependent on any tax return last year? * Yes No
- Does this person plan to file taxes this year? * Yes No
- What will this person's tax filing status be this year? *
- Is this person expected to be claimed as a dependent on any tax return for the benefit year? * Yes No

The 'Child Dependent' section contains the following questions and highlighted 'Yes' radio buttons:

- Is this person the Primary Tax Filer? * Yes No
- Did this person file taxes last year? * Yes No
- Was this person claimed as a dependent on any tax return last year? * Yes No
- Does this person plan to file taxes this year? * Yes No
- Is this person expected to be claimed as a dependent on any tax return for the benefit year? * Yes No
- Who claims this person as a tax dependent? *
- Is this person claimed by a non-custodial parent? * Yes No
- Is this person expected to be required to file taxes this year? * Yes No
- What is the custodial parent's contact phone number? *

At the bottom right, the 'Continue' button is highlighted in a red box.

Health Care Information page

This page collects information on additional sources of health coverage household members may have. If the applicant has “Minimum Essential Coverage” (MEC) from another source, that would make them ineligible for coverage from Covered California. Some coverage may not meet the MEC standard and therefore enable the applicant to access the Subsidy programs.

- 48. Answer the questions regarding existing health insurance, long-term care, and Medicare.
- 49. Click **Continue** to proceed to the next page.

Optional Data page

This page asks for demographic information that Covered California uses to improve its service and outreach efforts.

- 50. Answer the questions on the page and click **Continue** to navigate to the next page.

Personal Data Summary page

The *Personal Data Summary* page is an opportunity to review this set of information before proceeding to the Income pages.

51. Click the **Edit** button next to the appropriate section to return to any page that contains data that needs to be modified.

52. Click **Continue** to navigate to the next page.

The screenshot displays the 'APPLY FOR HEALTH INSURANCE' interface. At the top, there are navigation tabs: LEARN, Preview Plans, APPLY (highlighted), and Review. A progress bar below the tabs shows the current step is 'PERSONAL DATA'. The main content area is titled 'PERSONAL DATA SUMMARY' and is divided into several sections, each with an 'Edit' button:

- Tax Information - Primary Account:** Includes fields for Primary Tax Filer (Yes), Person filed taxes last year (Yes), Tax Filing Status (Single), and Planning to file taxes this year (Yes). The 'Edit' button is highlighted with a red box.
- Health Care - Primary Account:** Includes Long-Term Care (No), Enrollment in other insurance (None of the Above), and Receiving Medicare benefits (No).
- Demographic Data - Primary Account:** Includes Home Address (1234 Main St Sacramento CA, Alameda 94568), Mailing Address (1234 Main St Sacramento CA, Alameda 94568), Home Phone Number (916)123-4567, Work Phone Number (N/A), Extension (N/A), Cell Phone Number (N/A), Email (N/A), Marital Status (Single), and Disability (No).
- Optional Information - Primary Account:** Includes Preferred Written Language (English), Preferred Spoken Language (English), Hispanic, Latino, or Spanish Origin (N/A), Ethnicity (N/A), and Race (N/A).
- Tax Information - Child Dependent:** Includes Primary Tax Filer (No), Person filed taxes last year (No), Tax Filing Status (N/A), and Planning to file taxes this year (No).
- Health Care - Child Dependent:** Includes Long-Term Care (No), Enrollment in other insurance (None of the Above), and Receiving Medicare benefits (No).
- Demographic Data - Child Dependent:** Includes Home Address (1234 Main St Sacramento CA, Alameda 94568), Mailing Address (1234 Main St Sacramento CA, Alameda 94568), Home Phone Number (N/A), Work Phone Number (N/A), Extension (N/A), Cell Phone Number (N/A), Email (N/A), Marital Status (Never Married), and Disability (No).
- Optional Information - Child Dependent:** Includes Preferred Written Language (N/A), Preferred Spoken Language (N/A), Hispanic, Latino, or Spanish Origin (N/A), Ethnicity (N/A), and Race (N/A).

At the bottom of the page, there are buttons for 'Back', 'Save & Exit', and 'Continue'. The 'Continue' button is highlighted with a red box.

Income Introduction page

This page prepares the applicant for questions about their income and suggests documents to have ready to help gather the information.

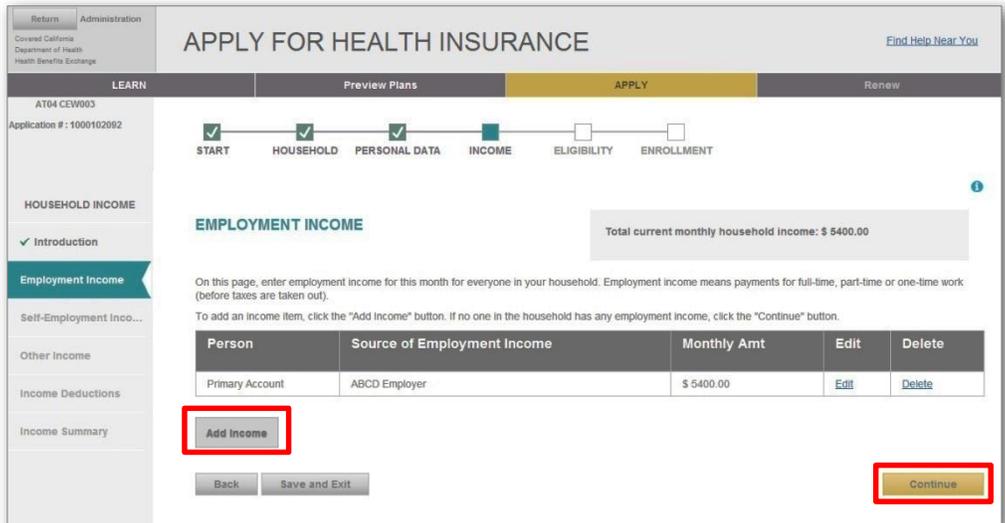
53. After reading the text on the page, click **Continue** to proceed.



Employment Income page

54. Click on the **Add Income** button to enter the household’s monthly income from employment.

55. **Note for processing paper applications:** When adding employment income details on the next page (after clicking **Add Income**), note that the Employer name is optional on the paper application but required in CalHEERS.



56. Click **Continue** to proceed to the next page.

Self-Employment Income page

57. Click on the **Add Income** button to enter the household’s monthly income from self-employment.

58. Click **Continue** to proceed to the next page.

The screenshot shows the 'APPLY FOR HEALTH INSURANCE' portal. The progress bar indicates the following steps: START (checked), HOUSEHOLD (checked), PERSONAL DATA (checked), INCOME (highlighted), ELIGIBILITY (unchecked), and ENROLLMENT (unchecked). The page title is 'SELF-EMPLOYMENT INCOME'. A box displays 'Total current monthly household income: \$ 5400.00'. Below this, there is explanatory text and a table with columns: Person, Type of Work, Monthly Amt, Edit, and Delete. A red box highlights the 'Add Income' button. At the bottom right, another red box highlights the 'Continue' button.

Other Income page

59. Click on the **Add Income** button to enter any other income expected to be earned by the household.

60. Click **Continue** to proceed to the next page.

The screenshot shows the 'APPLY FOR HEALTH INSURANCE' portal. The progress bar indicates the following steps: START (checked), HOUSEHOLD (checked), PERSONAL DATA (checked), INCOME (highlighted), ELIGIBILITY (unchecked), and ENROLLMENT (unchecked). The page title is 'OTHER INCOME'. A box displays 'Total current monthly household income: \$ 5400.00'. Below this, there is explanatory text and a table with columns: Person, Source of Other Income, Monthly Amt, Edit, and Delete. A red box highlights the 'Add Income' button. At the bottom right, another red box highlights the 'Continue' button.

Income Deductions page

61. Click on the **Add Deductions** button to enter any deductions from income claimed by the applicant’s household.

62. Click **Continue** to proceed to the next page.

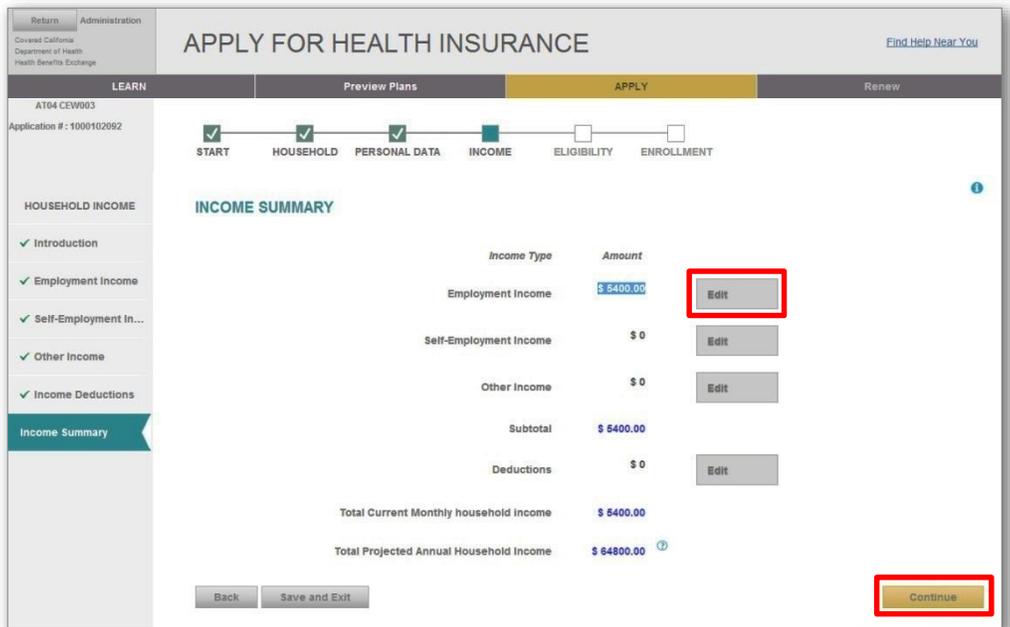


Income Summary page

The *Income Summary* Page is used to review the income reported by the Household Members.

63. Click the **Edit** button next to any of the fields to modify the value in that field.

64. Click **Continue** to proceed to the next page.



Submit Application for Eligibility page

This page is the last opportunity to ensure that the information provided on the application is accurate.

65. To modify any of the data entered previously, click the **Edit** button next to the section to be modified, make changes in that section, and click the **Continue** button to return to this page.

66. When finished editing prior sections, click **Continue** on this page to proceed.

Application Signature page

67. Select a value from the **Maintain My Consent for** dropdown list.

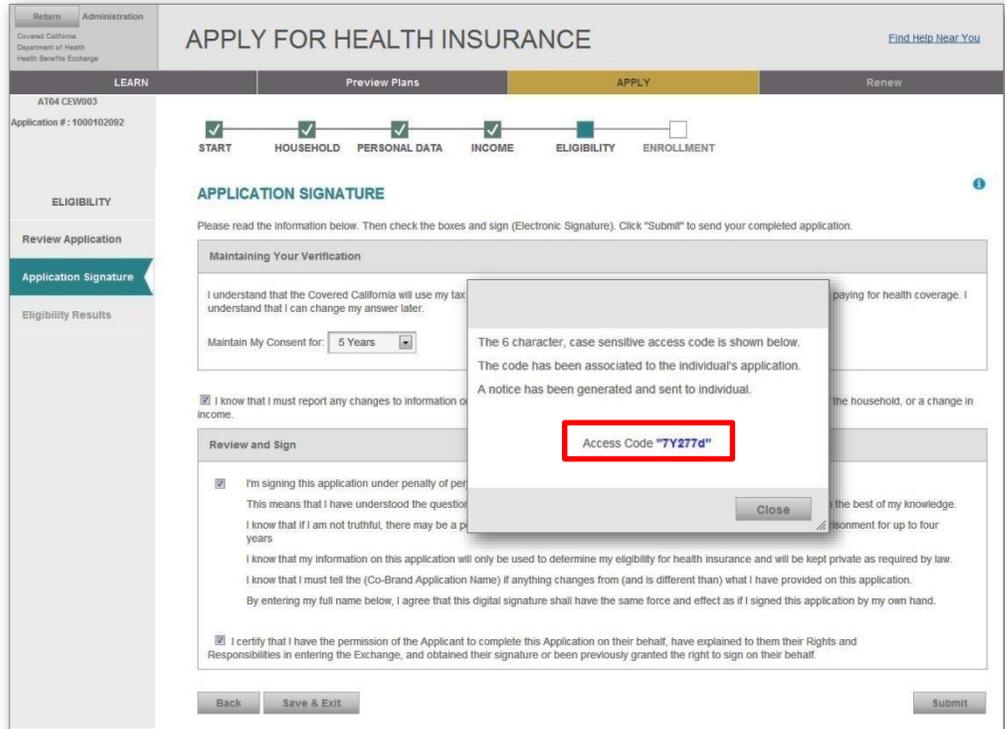
68. Check the checkboxes next to the attestation statements on behalf of the applicant.

69. Click **Submit** to proceed. A sequence of events is triggered within CalHEERS, beginning with producing an access code, as shown on the following page.

Generate Access Code to link to Account

If the application being created is not yet linked to a consumer account, after clicking **Submit** on the *Application Signature* page a popup message will display with a generated 6-digit access code. As stated in the popup, this code will be sent to the applicant as a notice from Covered California. If the applicant later creates an account, this access code will link that account to this application.

70. Click **Close** to navigate to the *Eligibility Results* page.



Eligibility Results page

When **Submit** was clicked on the *Application Signature* page, the access code was generated and a sequence of operations began processing the information entered on the application.

These operations include:

- a. Assigning a Case Number to the Case
- b. Communicating with the Federal Data hub to look up information about the Applicants
- c. Comparing the information provided by the Applicant to information from other data sources available to Covered California
- d. Determining applicants' Eligibility under the criteria established by Covered California and the Affordable Care Act

71. Click **Choose a Health Plan** to begin Plan Selection and navigate to the next page.

The screenshot displays the 'APPLY FOR HEALTH INSURANCE' interface. At the top, there's a navigation bar with 'LEARN', 'Preview Plans', 'APPLY', and 'Renew'. Below this is a progress indicator showing steps: SUMMARY, HOUSEHOLD, PERSONAL DATA, INCOME, ELIGIBILITY, and ENROLLMENT. The 'ELIGIBILITY RESULTS' section is active, showing 'Covered California Plan: Eligible' for both the Primary Account and Child Dependent. It also lists 'Not eligible for' reasons such as 'Advance Payment of Premium Tax Credit (APTC)', 'Cost Sharing Reduction (CSR)', and 'Medi-Cal'. At the bottom right, a button labeled 'Choose a Health Plan' is highlighted with a red box, indicating the next step in the process.

Plan Selection – One Plan for All page

When the application for health insurance includes financial support – either APTC or CSR, the page **Choose a Health Plan** button on the previous screen leads to this page. Only one plan per household application is provided for subsidized coverage. The names of the household members are listed under the **Persons** column.

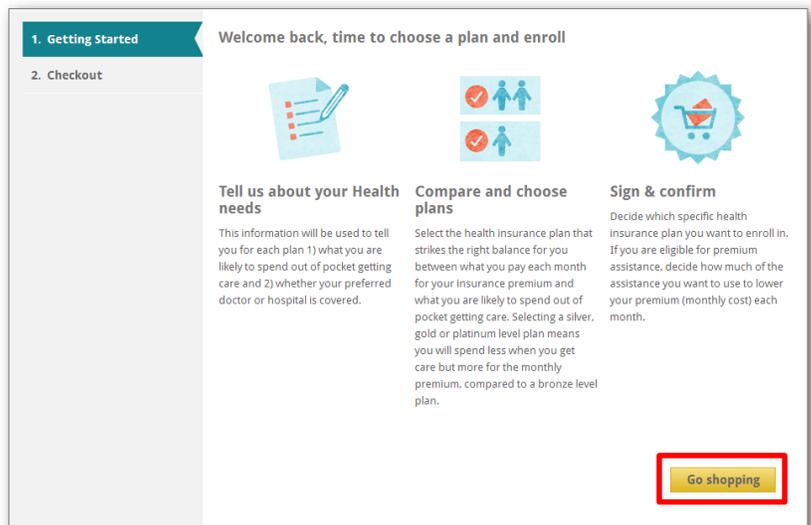
72. Click the **Choose a Health Plan** button on this page to proceed.



Get Started page

This page offers a summary of the process of shopping for health plans.

73. Click **Go Shopping** to get started.

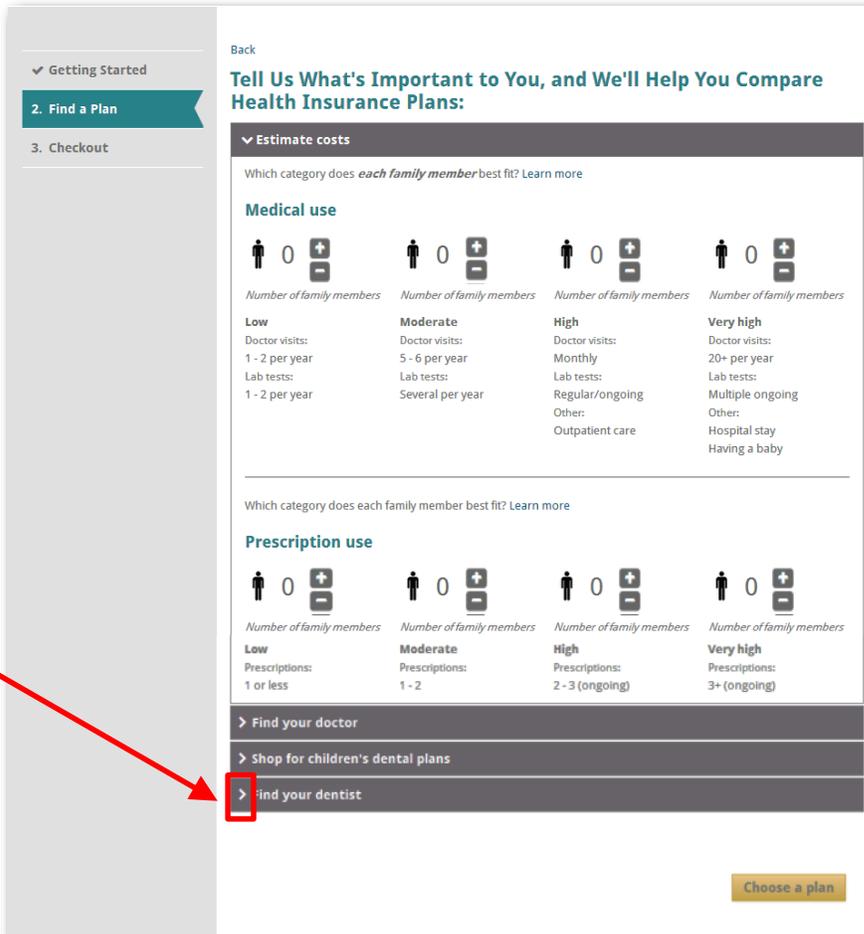


Tell us What's Important to You page

This page gathers from the applicant an estimate of how often the household expects to use medical and prescription services. Since medical use and prescription use are captured separately, a Consumer may fall into different categories for each area.

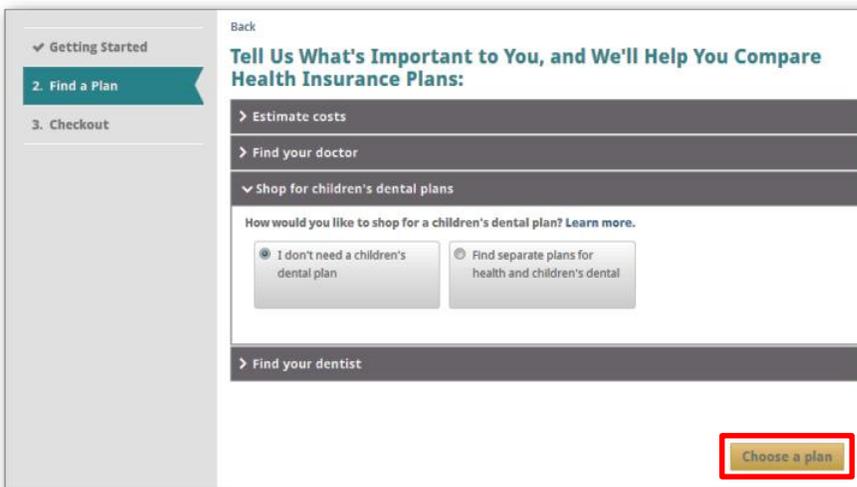
74. Click on the plus sign in the appropriate category to add a household member to that category. Click the minus sign to remove a member if making a change. After all members on the application are added, the fields are grayed out (you can still remove using the minus sign).

75. Next click on the expansion button (▶) for the section titled **Shop for children's dental plans**.



76. If the applicant has children and may want a separate children's dental plan, click the radio button labeled **Find separate plans for health and children's dental**. At the end of the plan selection process, a prompt for finding a dental plan will appear.

77. Click **Choose a plan** to proceed to the *Plan Comparison* page.



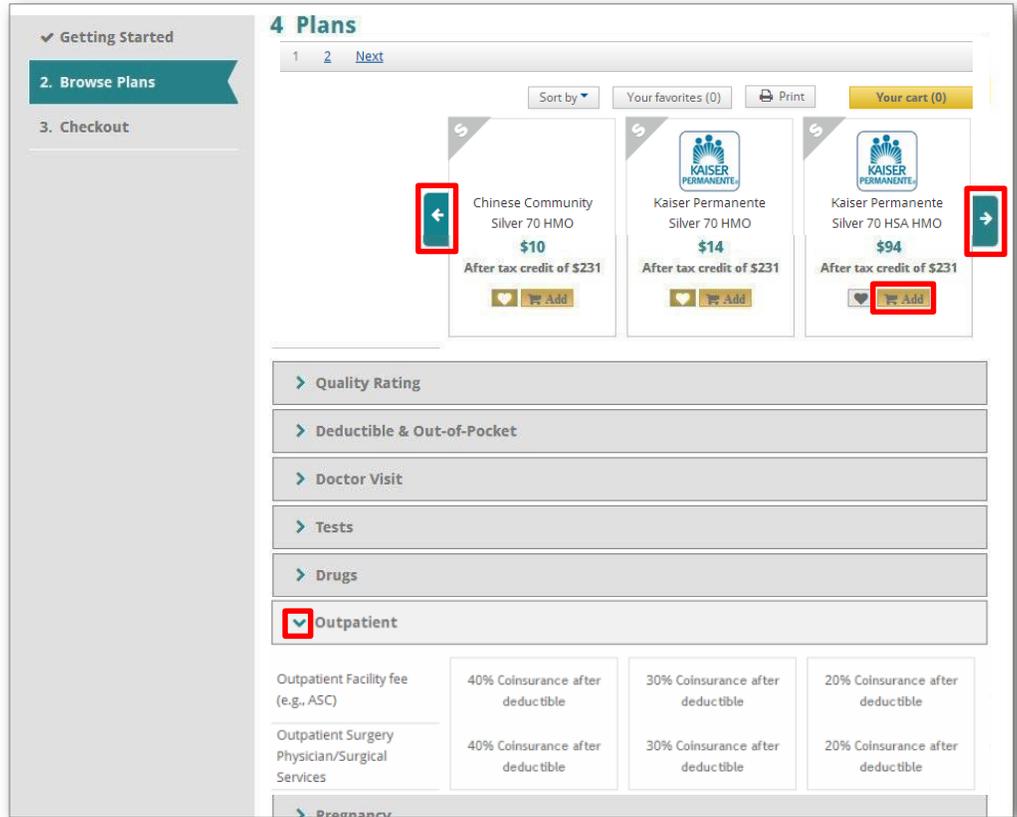
Plan Comparison page

The *Plan Comparison* page displays custom results for the applicant based on the preferences listed in the application. All plans available in the applicant’s area are listed, with closest matches to the applicant’s preferences listed first.

78. The arrow buttons to the left and right of the listed plans will scroll through the available plans not yet displayed.

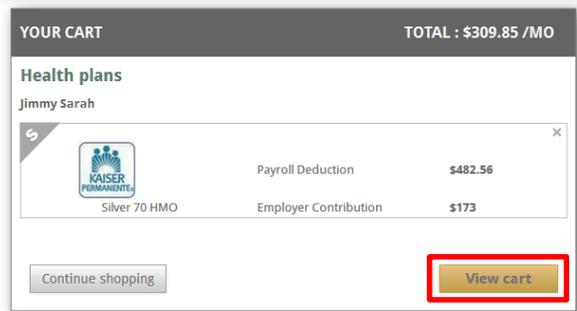
79. The sections below the available plans expand to display details of services offered by each plan.

80. Click on the **Add** button to add a plan to the Cart.



81. The **Your Cart** popup message appears, showing the plan just added to the Cart.

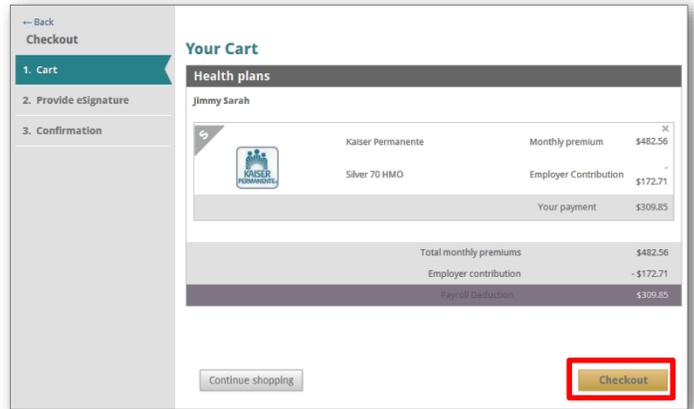
82. Click on **View Cart** in the popup message to navigate to the Cart to see all contents.



Your Cart page

Your Cart displays the plan for the household eligible for health plan subsidies. The Children’s Dental Plan may be in the cart as well, if that was an option for this application.

84. Click **Checkout** to proceed to purchase the plan in your cart.



Provide eSignature page

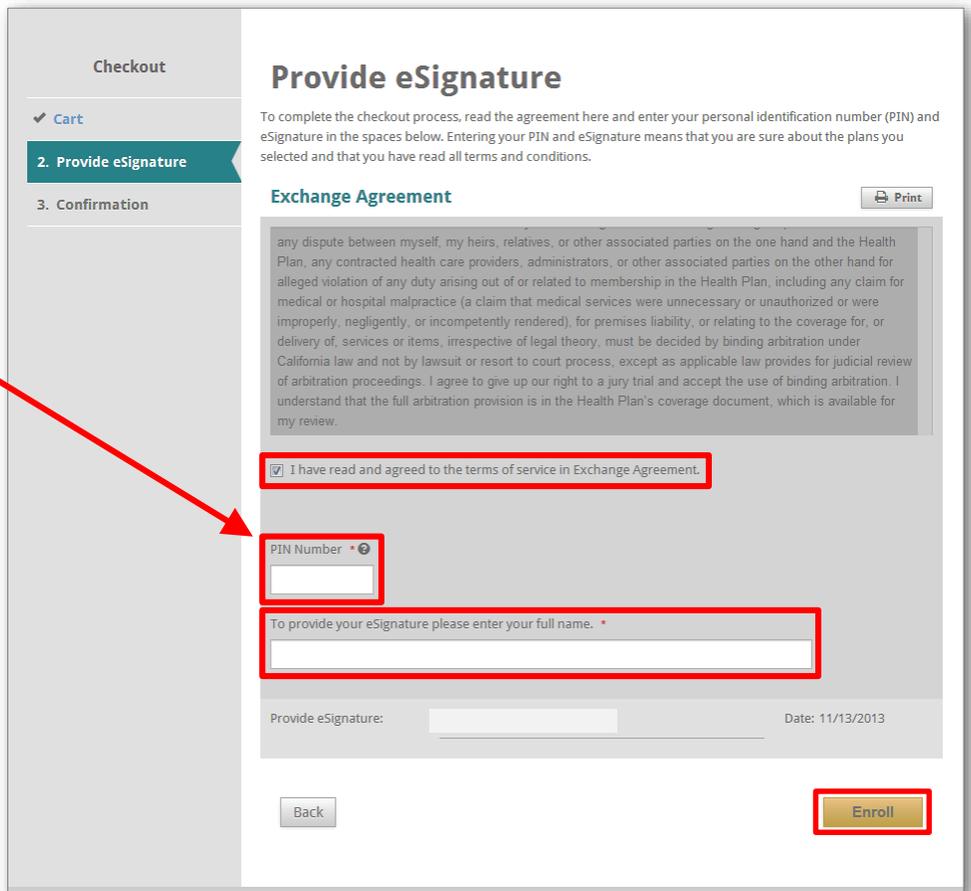
The eSignature page is the final confirmation step in Plan Enrollment. The applicant’s signature and PIN finalize their enrollment. They also need to agree to the Rights and Responsibilities listed, similar to the Application Submission page.

85. Click the checkbox next to the statement agreeing to the terms of service.

86. If you are an Agent, CEC, or PBE, **you must enter your own PIN, not the applicant’s.** This is the only link to give you credit for the completed enrollment.

87. Enter the applicant’s full name as the eSignature.

88. Click **Enroll** to finalize the enrollment and proceed to the *Confirmation* page.



Confirmation page

The Health Plan selection process is complete. The plan purchased is shown, along with the premium cost and any tax credit or employer contribution.

89. Click **Continue** to return to the Consumer’s home page.

Optional Children’s Dental Plan

If the application includes children, you can return to Plan Select by clicking on the tab and then click on the **Choose Dental Plan** button to proceed with shopping for a plan. Follow the same steps outlined above to select and enroll in a dental plan.

Immigration Status Document Type Crosswalk

Document Type	Alien Number	Card Number	Visa Number	Passport Number	I-94 Number	SEVIS ID	Receipt Number	Document Expiration Date
a. Reentry Permit (I-327)	x							x
b. Permanent Resident Card (“Green Card,” I-551)	x	x						x
c. Refugee Travel Document (I-571)	x							x
d. Employment Authorization Card (I-766)	x							x
e. Machine Readable Immigrant Visa (with Temporary I-551 Language)	x		x	x				x
f. Temporary I-551 Stamp (on passport or I-94, I-94A)	x			x				x
g. Arrival/Departure Record (I-94, I-94A) issued by U.S. Citizenship and Immigration Services					x	x		x
h. Arrival/Departure Record (I-94, I-94A) issued by U.S. Customs and Border Protection					x	x		x
i. Arrival/Departure Record in Unexpired Foreign Passport (I-94)					x	x		x
j. Unexpired foreign passport			x	x	x	x		x
k. Certificate of Eligibility for Nonimmigrant (F-1) Student Status (I-20)					x	x		x
l. Certificate of Eligibility for Exchange Visitor (J-1) Status (DS2019)					x	x		x
m. Notice of Action (I-797)							x	x
n. Document indicating American Indian born in Canada – LPR – I-551	x				x			x
o. Document indicating member of a federally-recognized Indian tribe	x				x			x
p. Certification from U.S. Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR)	x				x			x
q. Office of Refugee Resettlement (ORR) eligibility letter	x				x			x
r. Cuban/Haitian Entrant, Document indicating withholding of removal	x				x			x
s. Resident of American Samoa	x				x			x
t. Resident of Commonwealth of the Northern Mariana Islands	x				x			x

The Relationships Grid

This section is a guide to understanding how to set up relationships between household members on an application, when there are more than two household members listed.

Rules governing the left-hand column in the relationships grid:

- For Person 1, there should be (HHD size - 1) relationships
- For Person 2, there should be (HHD size - 2) relationships
- For Person 3, there should be (HHD size - 3) relationships
- For Person 4, there should be (HHD size - 4) relationships
- For Person 5, there should be (HHD size - 5) relationships

Person 1	X	Person 2
Person 1	X	Person 3
Person 1	X	Person 4
Person 1	X	Person 5
Person 2	X	Person 3
Person 2	X	Person 4
Person 2	X	Person 5
Person 3	X	Person 4
Person 3	X	Person 5
Person 4	X	Person 5

Relationship Types listed on the Relationships Dropdown:

- | | | |
|------------------------------|----------------------------|---------------------------|
| Husband/Wife | Son-in-law/Daughter-in-law | Domestic partner |
| Brother-in-law/Sister-in-law | Parent | Former spouse |
| Stepparent | Guardian | Parent’s domestic partner |
| Father-in-law/Mother-in-law | Son/Daughter | Sponsored dependent |
| Stepson/Stepdaughter | Trustee | Child of domestic partner |
| Ward | Brother/Sister | Court-appointed guardian |
| Uncle/Aunt | Collateral dependent | Nephew/Niece |
| Other relative | First cousin | Other unrelated |
| Grandparent | Stepbrother/Stepsister | Grandchild |
| Stepbrother/Stepsister | Adopted Son/Daughter | Foster child |