



DEPARTMENT OF DEFENSE
MANPOWER DATA CENTER
400 GIGLING ROAD
SEASIDE, CA 93955-6771

DEERS Control:
0200199279-70

SAMPLE VERIFICATION OF MED.
COVERAGE



11477

Susanne [REDACTED]
[REDACTED]
Richmond VA 23229-5335

Certificate of Creditable Coverage

IMPORTANT This certificate provides evidence of your prior health care coverage under one of the TRICARE administered programs. You may need to furnish this certificate if you become eligible under a group health plan that excludes coverage for certain medical conditions that you have before you enroll (also known as pre-existing conditions). This certificate may need to be provided if medical advice, diagnosis, care, or treatment was recommended or received for the condition within a certain time period (often six months to one year) prior to your enrollment in the new plan. If you become covered under another group health plan, check with the plan administrator to see if you need to provide this certificate. You may also need this certificate to buy, for yourself or your family, an insurance policy that does not exclude coverage for medical conditions that are present before you enroll.

1. Date of this certificate: September 30, 2011
2. Participant (Sponsor) name: Sylvester Gibson
3. Participant (Sponsor) Identification Number: XXX-XX-7985
4. Names of individual(s) to whom this certificate applies:

Susanne Gibson

5. All questions concerning this certificate should be directed to the address listed above, ATTN: CoCC, or call for further information: 1-800-538-9552; TTY/TDD: 1-866-363-2883
6. Date coverage began: November 23, 1990
7. Date coverage ended: September 21, 2011

NOTE: *Separate certificates will be furnished if information is not identical for the participant and each dependent.*