Ontario health coverage

This brief overview addresses the eligibility of foreign workers and their dependents to secure Ontario provincial health insurance coverage, also known as the Ontario Health Insurance Plan (OHIP).

Foreign nationals authorized to work in Canada are entitled to government health coverage, provided they can demonstrate residence in a specific province. Tourists or individuals with study permits are not covered by OHIP.

In Ontario, based on current provincial law, a foreign worker who holds a work permit with the notation “Case Type 20” is entitled to OHIP coverage when the following documentation is provided to OHIP:

1. A work permit valid for six months or more and which names the petitioner and the occupation
2. A support letter from the individual’s employer indicating that he/she is going to reside in Ontario (the actual address must be noted in the letter).
3. Proof of identity – passport, Social Insurance Number (SIN) card, etc.

For a dependent spouse of a “Case Type 20” work permit holder, the following conditions must be met:

1. The spouse must be named on the work permit as an “accompanying family member” or hold his/her own visitor record/work permit.
2. The spouse must have a support letter from the work permit holder’s employer indicating that employment in Ontario will be for three years or more.
3. The spouse must have independent proof of residence in Ontario such as a driver’s license, lease or telephone bill with spouse’s name and Ontario address.

For a dependent son or daughter of a “Case Type 20” work permit holder, the following conditions must be met:

1. The dependent must be named on the work permit as an “accompanying family member” or hold his/her own visitor record.
2. The dependent must have a support letter from an employer of his/her parents indicating that employment in Ontario will be for three years or more.
3. The dependent must be under the age of 19.

Applications must be made in person at a local Ministry of Health office. Office locations and telephone numbers are listed in the blue pages of the local telephone directory.
A three-month waiting period (from the date of residency in Ontario) applies to all applicants. Please note: The written interpretation guidelines issued by the Ministry of Health provide that a new resident to Ontario is eligible to receive Ministry of Health Coverage three months from the date residency is established (and documented) in Ontario. We are aware, however, that certain Ministry officials have advised applicants that coverage is available only following three months from the date of “application” for coverage. We have confirmed with senior management at the Ministry that this interpretation is incorrect.

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We hope you have found this information useful. However, please note that this document provides general information only and should not be construed as legal advice. Please seek information specific to each case by contacting us at:

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