



Checklist For Online Medicare, Retirement, and Spouses Applications

This checklist will help you gather the information you may need to complete the online Medicare, Retirement, and Spouse's applications. We recommend you print this page to use while you gather your information. We hope you find our online application easy and convenient.

Information	Medicare Only	Retirement and/or Spouses		
Date and Place of Birth If you were born outside the United States or its territories: <ul style="list-style-type: none"> • Name of your birth country at the time of your birth (it may have a different name now) • Permanent Resident Card number (if you are not a U.S citizen) 	X	X		
Medicaid (state health insurance) Number & Start and End Dates	X			
Current Health Insurance <ul style="list-style-type: none"> • Employment start and end dates for the current employer (of you or your spouse) who provides your health insurance coverage through a Group Health Plan • Start and end dates for the Group Health Insurance provided by you (or your spouse's) current employer 	X			
Marriage and Divorce <ul style="list-style-type: none"> • Name of current spouse • Name of prior spouse (if the marriage lasted more than 10 years or ended in death) • Spouse(s) date of birth and SSN (optional) • Beginning and ending dates of marriage(s) • Place of marriage(s) (city, state or country, if married outside the U.S.) 		X		
Names and Dates of Birth of Children Who <ul style="list-style-type: none"> • Became disabled prior to age 22, or • Are under age 18 and are unmarried, or • Are aged 18 to 19 and still attending secondary school full time 		X		
U.S. Military Service <ul style="list-style-type: none"> • Type of duty and branch • Service period dates 		X		
Employer Details for Current Year and Prior 2 Years (not self-employment) <ul style="list-style-type: none"> • View your Social Security Statement online at http://www.socialsecurity.gov/myaccount/ • Employer name • Employment start and end dates 		X		
Self-Employment Details for Current Year and Prior 2 Years <ul style="list-style-type: none"> • View your Social Security Statement online at http://www.socialsecurity.gov/myaccount/ • Business type • Total net income 		X		
Direct Deposit: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Domestic bank (USA) <ul style="list-style-type: none"> • Account type and number • Bank routing number </td> <td style="width: 50%; vertical-align: top;"> International bank (non-USA) <ul style="list-style-type: none"> • International Direct Deposit (IDD) bank country • Bank name, bank code, and currency • Account type and number • Branch/transit number </td> </tr> </table>	Domestic bank (USA) <ul style="list-style-type: none"> • Account type and number • Bank routing number 	International bank (non-USA) <ul style="list-style-type: none"> • International Direct Deposit (IDD) bank country • Bank name, bank code, and currency • Account type and number • Branch/transit number 		X
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We may contact you for additional information after you submit your online application.