

Nursing Home Care Medicaid

Document Checklist

The following information is necessary to complete the Medicaid application. **Copies are fine for all documents;** originals are not necessary. The more documentation provided the quicker the processing time.

Please provide at least ONE document from each of the following categories (*for both the APPLICANT and their SPOUSE*):
*and any other adults living in the house

1. PROOF OF AGE/ IDENTITY

- U.S. Passport
- Birth Certificate
- N.Y.S Driver's License

2. PROOF OF CITIZENSHIP

- U.S. Passport
- Birth Certificate
- Naturalization Papers
- Alien Registration Card

3. MARITAL STATUS

- Marriage Certificate
- Divorce Decree/Separation Agreement
- Pre- or Post-Nuptial Agreement
- Spouse's Death Certificate

Please provide ALL applicable documents from the following categories (*for both the APPLICANT and their SPOUSE*):

4. FINANCIAL RESOURCES

All Data Applicable to Resources owned in the last 5 years

- Checking Account Statements
- Saving Account Statements
- Certificates of Deposit
- Credit Union Account Statements
- IRA, RMD, 401K, Keogh Accts
- Annuities, Stocks, Bonds, Mutual Funds
- Trust Accounts
- Life Insurance Policy with Cash Value Statement
- Title to Automobile & Fair Market Value
- Burial Plot Information
- Prepaid Funeral Contracts
- Separate funds for burial
- Life Insurance for burial
- Mortgages/Liens
- Deeds to Property Owned and Listing agreement
- Other Real Estate:
 - Rental/Vacation Property
 - Time Share
 - Land
 - Property right in or out of NYS
- Any legal reason you cannot sell your home
- Anyone else living in your home

**All pages are required
for statements.
Including front & back*

6. ADVANCE DIRECTIVES

- Power of Attorney

5. INCOME

- SSI Award Letter
- Most recent Pay Stubs
- Support/Alimony Checks OR Court Order
- Annuities & Trust Income
- Interest and Dividends
- Pension Statement
- Temp. Disability Check OR Award Letter
- VA Award Letter
- Unemployment Check Stubs
- Temporary (Cash) Assistance
- Student Grants or Loans
- Rental Income
- Repairs
- Contributions from others
- Social Security Gross Monthly Income Letter
This is not the SSA-1099

7. OTHER

- Long-Term Care Insurance
- Veteran: Discharge Paper
- Water bill (if paid separately)
- Additional Insurance Cards
- Medicare Card (front & back)
*Replacement: www.account.mymedicare.gov
Phone: 1-800-633-4227*
- Social Security Card (front & back)
*Replacement: www.ssa.gov/myaccount
Phone: 1-800-772-1213*

The following living expenses will be taken into account if the Medicaid recipient is placed in a nursing facility, but the spouse remains living in the community.

Please provide copies of the following:

- Electric Bill
- Real Estate Tax Bills
- Home/Renter's Insurance
- ALL income verifications (*Social Security Award Letter, Pension Stubs, etc.*)