



**K I L M A R T I N
& K I L M A R T I N P.C.**

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REQUIRED INFORMATION FOR MEDICAID APPLICATION

Set forth below is a list to be used as a guideline in gathering documentation that must be submitted together with a Medicaid application for Institutional Care Benefits. Please note that the financial information and other information requested pertains to both the Medicaid applicant and spouse (if applicable).

IDENTITY:

- Birth Certificate
- Baptismal Certificate
- Driver License
- U.S. Passport

U.S. Citizenship:

- Naturalization Certification
- U.S. Passport
- Alien Registration Card

SOCIAL SECURITY NUMBER:

- Social Security Card
- Printout from Social Security Administration.

MARITAL STATUS:

- Marriage Certificate
- Divorce Decree/Separation Agreement
- Spouse's Death Certificate

RESIDENCE:

Provide one of the following

- Deed
- Lease or Rent Receipt
- Coop Stock & Lease

INCOME:

- Copy of Social Security Check
- Pension Check and Stub

- Document Dividend, Annuity, Partnership, Rental or other Income.

RESOURCES:

- ANY PROPERTY THAT YOU OR YOUR SPOUSE OWNED IN THE PAST FIVE YEARS, including:
 - Passbooks
 - Bank Statements
 - Stocks
 - Bonds
 - Annuities
 - Investment/Brokerage Funds
 - C.D.'s
 - Credit Union Account
 - IRA's
 - Trust Agreement and Principal
 - (Include any accounts/resources which may have been closed, cashed in, or transferred IN THE PAST 5 YEARS)
 - (Verification and Clarification of any withdrawals or deposits over \$2,000)

TAX RETURNS:

- Income Tax returns, including 1099's for the past 5 years

LIFE INSURANCE:

For each policy owned by your spouse

- Policy owner
- Policy number
- Face value
- Current Cash Value

HEALTH INSURANCE:

- Medicare Card
- Policy and Policy Identification Card
- Premium Amount
- Proof of Payment

VETERAN STATUS:

- Military Discharge papers for applicant or spouse.

OTHER DOCUMENTS:

- Copy of Power of Attorney
- Financial Summary of any private payment made to nursing home(s)