



My enrollment checklist

Here is a complete list of the information you'll need in order to enroll in a Medicare plan.

Documents

	Medicare card for current state	Checking acco	Banking information Checking account number: Routing number:			Previous year's insurance If you're replacing coverage, we'll have a few questions about your previous plan.	
Pe	ersonal information	1					
	Date of birth		Social Sec	urity number		Email address	
	Primary address including county		Mailing ad	dress		Phone numbers	
	City: !	State:	City:	State:	-		
	Zip: County:		Zip:	County:			
Н	ealthcare informati	on					
	Healthcare providers (pri	mary specialists h	osnitals)				
	•	Specialty:	ospitatsy	Address:		Phone:	
☐ Current prescription medications (name, dosage and frequency)							
	Medication name:	Dosage:		Refill quantity:		Refill frequency:	

If you are purchasing plans for your dependents, you will need the same information for each dependent.