Insurance Application Checklist

When you apply for financial assistance through Connect for Health Colorado (insurance marketplace) or Medicaid, you'll need to provide some information about you and your household.

Use the checklist below to help you gather what you need to apply.

| = | Erlidawn Roy, Health Coverage Guide at (303) 953-6616 |
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| | For More information contact: |
| | Policy numbers for any current health insurance plans. |
| | Information about any public assistance that you or your family members are receiving |
| | Information about any job-related health insurance available to your family. |
| | Employer information for each member of your family |
| | Information about any additional income your receive (for example, child support, so cial security, retirement). |
| | Number of household dependents that you will claim on your tax forms. |
| | Income information for each member of your household (for example, wage and tax statements such as pay stubs or W2 forms). |
| | Social Security numbers (or document numbers for any legal immigrants) of each member of your household who need insurance. |
| | Documents that demonstrate your status as a member of a federally recognized tribe (Tribal Identification card, BIA form, Certificate of Degree of Indian Blood (CDIB). |
| | Residency status |
| | Contact information: Name, address, birthdates, etc. |

Kelly Poleyestewa, Enrollment Specialist at (303) 953-6602