

Health-e-Arizona

Documentation Needed to Complete Your Health-e-Arizona Application

If you are applying for the first time, or reapplying the items listed below may be needed to determine your eligibility. Please bring all current information to your interview; this will help to speed up the eligibility process. **Keep your appointment**, even if you do not have all the documents on this list.

- Social Security Cards:** Social Security Numbers for everyone, or proof of application for an SSN
- Identification (for everyone)**
 - Drivers License
 - Photo ID issued by federal state or local government
 - Tribal ID
 - School ID with picture
- Citizenship (for everyone)**
 - U.S. Birth Certificate or Certified copy
 - U.S. Naturalization Certificate
 - U.S. Passport
 - Official Military Record of service showing U.S. place of birth (e.g., DD-214)
- Residency/Residential Address:** A statement from a non-relative, not living with you, verifying your address and the names of everyone living with you. The statement must be signed, dated and include their address and telephone number. Current utility bill with applicant name and address.
- Income:** All money your household received from any source last month and this month.
- Terminated Income:** Terminated employment and date last paid from last month and the most recent month.
- Pregnancy:** Proof of pregnancy with estimated date of delivery
- Childcare:** Expense billed for childcare for the most recent month or incapacitated adult.
- Medical Expense**
 - Medical expenses for the last month and this month, if you are applying for AHCCCS health insurance.
 - Medical expenses for those who are age 60 or older or receive disability benefits if applying for Food Stamps.
- Other Medical Insurance:** Insurance cards for any other medical insurance other than AHCCCS

If applying for Food Stamps or TANF additional documentation (listed below) is required. The additional documentation is not a requirement for medical benefits.

- Vehicles:** Registration/title for all vehicles
- Bank Accounts:** Credit Union or Bank (savings or checking) complete statement for the most recent month.
- Other Assets**
 - Savings bonds/securities
 - Retirement plans/life insurance
- Rent/Mortgage (for most recent month)**
 - Rental/lease agreement
 - Mortgage statement/coupon book
 - Rent receipt
- Utility Expenses (for most recent month)**
 - Electric bill
 - Water bill
 - Gas bill

If you need help in obtaining any verification, or you have any other questions, contact your Health-e-Arizona Application Assistor.