

NYS Medicaid Application Form and "Supplement A" for Age 65+ or Disabled or Blind

Since 2010, the New York State Department of Health Medicaid application form is called the **Access NY Application or Health Insurance Application or form DOH-4220 - available** at [this link](#). (As of 2-06-25 the form was last updated in January 2023.) See [GIS 23 MA/17 - Revised DOH-4220: Access NY Health Care Application \(PDF\)](#) and [attached form](#).

Links to the form in various languages can be found at this State Dept. of Health webpage https://www.health.ny.gov/health_care/medicaid/how_do_i_apply.htm (SCROLL DOWN to "Medicaid Application for Non-MAGI Eligibility Group ([DOH-4220](#))")

- **Second form is also required - Supplement A** - for those age 65+ or who are disabled or blind. As of Jan. 2021 the same Supplement A form is used statewide - **DOH-5178A** ([English](#)). The DOH 4495A form is obsolete. Links to the form in various languages can be found at this State Dept. of Health webpage https://www.health.ny.gov/health_care/medicaid/how_do_i_apply.htm - SCROLL DOWN.
- See more information here about Jan. 2021 changes for NYC applicants regarding Supplement A.
- This supplement collects information about the applicant's current resources and past resources (for nursing home coverage).

All local districts in New York State are required to accept the revised DOH-4220 for non-MAGI Medicaid applicants (Aged 65+, Blind, Disabled) (including for coverage of long-term care services both in the community and in a Nursing Home, [Medicare Savings Program](#), the [Medicaid Buy-In Program for Working People with Disabilities](#). But it must be submitted with the [Supplement A](#) form.

The state revised the [DOH-4220 Medicaid Application form](#) in January 2023 - see [GIS 23 MA/17 - Revised DOH-4220: Access NY Health Care Application \(PDF\)](#) . That directive instructed local Medicaid offices that if an applicant is using an older version of the DOH-4220 form (dated 8/2021), the applicant must also submit the [QHIP-0112](#) and [DOH-5130](#).

DO NOT USE THE DOH-4220 FOR:

- Medicaid applicants in the [MAGI category](#) (generally those under age 65 or, if younger and disabled, are not receiving Medicare). All MAGI applicants should go through the [NYS of Health Exchange](#) to apply for Medicaid. They can contact a [Navigator](#) or [Community Health Advocates](#) for assistance. See [this article](#) for more about these different Medicaid categories.
- Applicants who only want ONLY a **[Medicare Savings Program \(MSP\)](#)** and not Medicaid too. They should use the [MSP-only application](#) .

WHAT IF THE APPLICANT CANNOT SIGN THE APPLICATION - or wants to appoint someone as their "Authorized Representative" to discuss their case?

- Spouse or "authorized representative" can sign. On page 1 Section A of the Application there is space to authorize a representative to apply and renew Medicaid, discuss the case, and receive notices and other correspondence. If this section is not completed on the application, a representative can be authorized later using Form DOH-5247, which is an Attachment to DOH GIS 17 MA/017: Introduction to Form DOH-5247 - Medicaid Authorized Representative Designation/Change Request. The form is available in several languages at this link.
- *If neither spouse or authorized representative cans sign the application, use Form DOH-5147, "Submission of Application on Behalf of Applicant" (Attachment 1 to 17ADM-02 - Asset Verification System)*

DOH APPLICATION - WHERE TO FIND ONLINE

Check https://www.health.ny.gov/health_care/medicaid/how_do_i_apply.htm

- **Warning - The top of the State webpage above says "You may apply for Medicaid in the following ways" - listing FOUR options - the NYS of Health Exchange, managed care plans, calling the Medicaid helpline and 4th - at your local Department of Social Services. THIS IS MISLEADING for those who are age 65+, disabled or blind. Their ONLY Option is the 4th option - to apply at their local Dept. of Social Services.**

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