



Securing today
and tomorrow

SSA Medicare Part B Online Application

Screen Package

April 29, 2020

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Application Landing Page:



Apply Online for Medicare Part B During a Special Enrollment Period

Instructions

Medicare Part B Enrollment During the COVID-19 Pandemic:

Social Security Field Offices are currently closed. During the COVID-19 pandemic, the Social Security Administration will be taking Medicare Part B enrollment applications online for working aged individuals who qualify for a Special Enrollment Period (SEP).

You may use this online enrollment application if you are 65 or older and you have or had group health plan (GHP) coverage within the last 8 months through your or your spouse's current employment.

To complete this online enrollment application you will need:

- Your Medicare number
- Your current address and phone number
- A valid email address
- Documentation verifying your GHP coverage through your or your spouse's current employment.

I understand that I am entering a U.S. Government System to file a benefit application with the Social Security Administration. I understand that I need to provide the Social Security Administration information to process the benefit application. I understand that failing to agree to the statements below will result in my inability to file a benefit application online, which may prevent the Social Security Administration from making an accurate and timely decision about eligibility for benefits.

I understand that:

- the Social Security Administration will validate the information I provide against the information in Social Security Administration's systems.
- my activities may be monitored within this site.
- any person who knowingly and willfully tries to obtain Social Security benefits falsely could be punished by a fine or imprisonment, or both.
- I am authorized to file a claim on my own behalf or on behalf of someone else with the Social Security Administration.

Information about Social Security's Online Policies

The privacy of our customers is always very important to us. We encourage you to read our [Privacy Act Statement](#).

I understand and agree to the above statements

Start Application



BOT Handling Page:



Apply Online for Medicare Part B During a Special Enrollment Period

! Oops...Something went wrong. Please try again. If you continue to have problems you can call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778. En español: Llame a SSA gratis al 1-800-772-1213 y oprima el 2 si desea el servicio en español y espere a que le atienda un agente.



Enrollment Application:



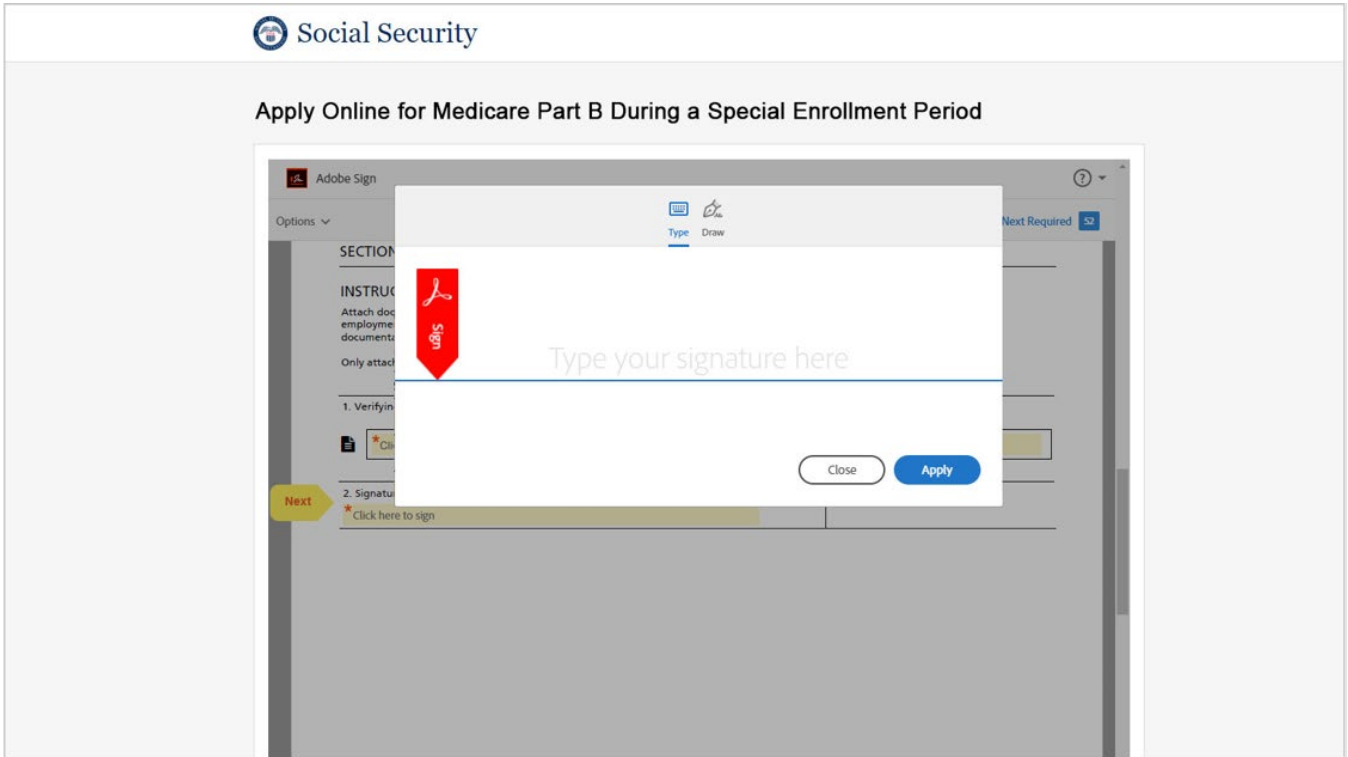
Apply Online for Medicare Part B During a Special Enrollment Period

The screenshot shows a web browser window with the Adobe Sign interface. The page title is "Please sign: Medicare Part B Online Enrollment Application". The form is titled "APPLICATION FOR ENROLLMENT IN MEDICARE PART B (MEDICAL INSURANCE)" and is from the "DEPARTMENT OF HEALTH AND HUMAN SERVICES, CENTERS FOR MEDICARE & MEDICAID SERVICES". The form contains the following sections:

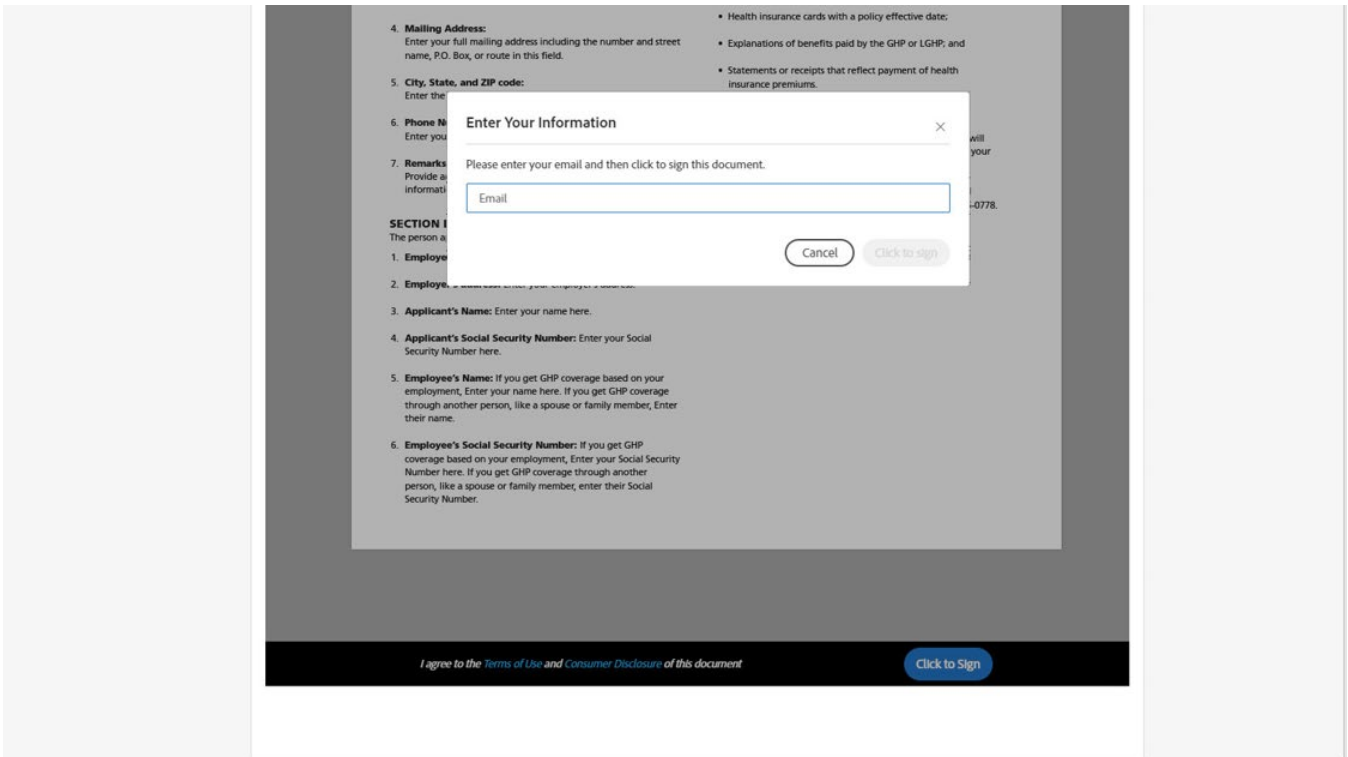
- SECTION 1: Applicant Info
- 1. Your Medicare number (with a "Start" button)
- 2. Do you wish to sign up for Medicare Part B (Medical Insurance)? YES
- 3. Your Name (Last Name, First Name, Middle Name)
- 4. Mailing Address (Number and Street, P.O. Box, or Rural Route)
- 5. City (with a "Stop" button) and Zip Code
- 6. Phone Number (including area code) in the format (* * * *) * * * * - * * * * *
- 7. Remarks

A large red watermark is overlaid on the form, reading "See attached PDF for in Appendix complete form language".

Signature Block:



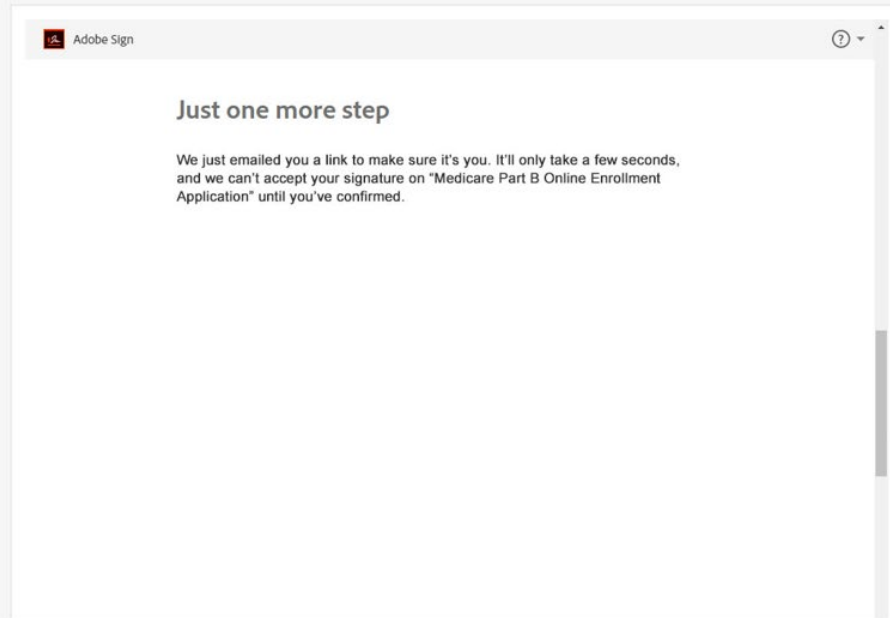
E-signature and applicant email input:



E-signature confirmation instructions:

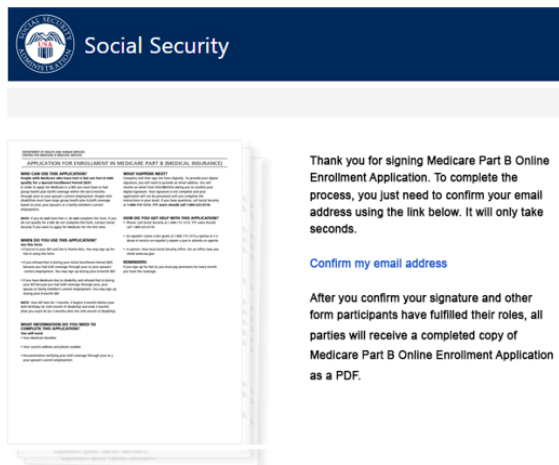


Apply Online for Medicare Part B During a Special Enrollment Period



E-signature confirmation email:

SOCIAL SECURITY ADMINISTRATION <echosign@echosign.com>
to David, me



After you have confirmed your electronic signature and we receive your application, we will:

- Review your application and contact you if we need more information or if we need additional documentation;
- Process your application once we have all of the necessary information and documents; and
- Mail you a decision letter.

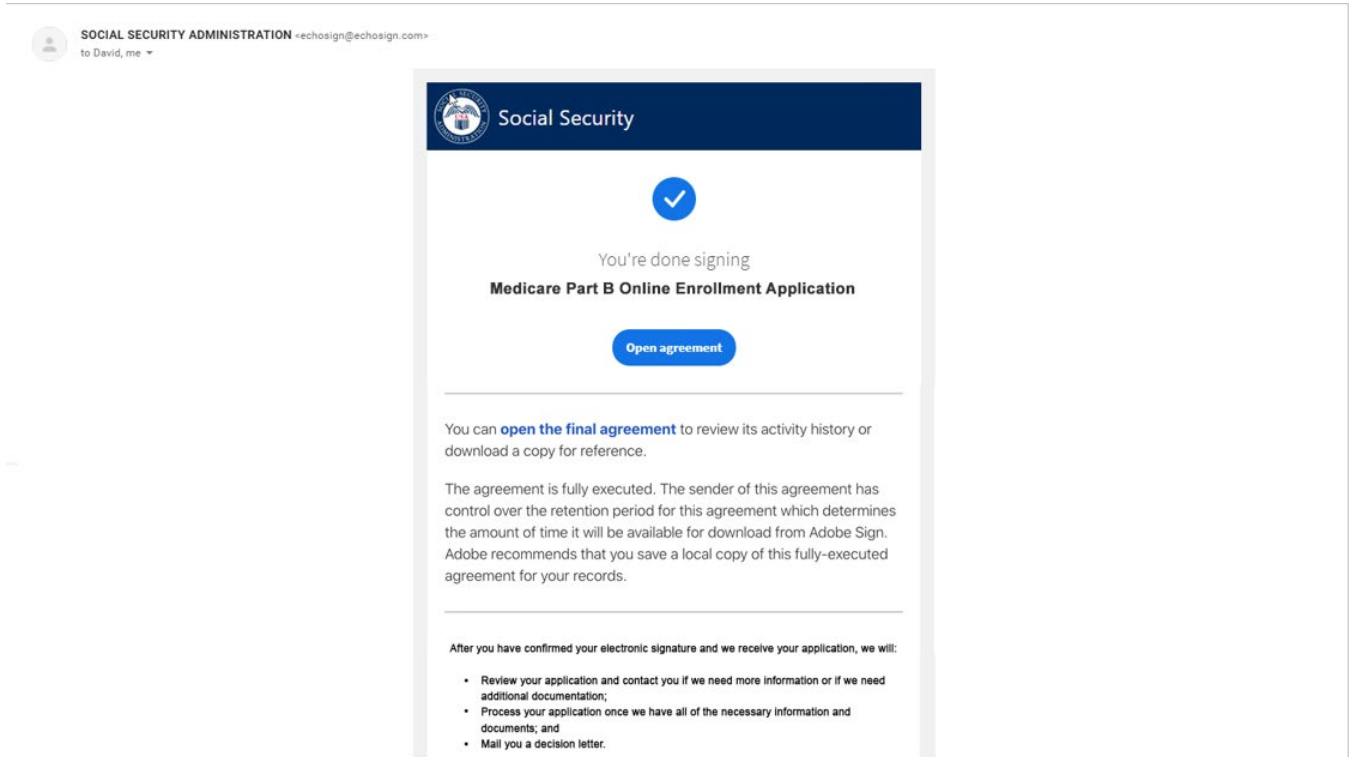
If your application is approved, the Centers for Medicare & Medicaid Services will send you a Welcome to Medicare packet in the mail with your Medicare card. You will also receive the most current version of the Medicare & You handbook, with important information about your Medicare coverage choices.

E-signature completion messaging:



The screenshot shows a web interface for Social Security. At the top left is the Social Security logo and the text "Social Security". Below this is the heading "Apply Online for Medicare Part B During a Special Enrollment Period". A central white box contains an Adobe Sign notification. The notification header reads "Adobe Sign" and includes a help icon. The main message in a green bar states: "Your e-signing of Medicare Part B Online Enrollment Application has been verified. A link of the signed document is being sent to you."

E-signature completion email:



APPENDIX:



Medicare Part B
WebForm - Final.pdf