

### Revisions to Form CMS 4040 (OMB 0938-0245) Request for Enrollment in Medicare Part B (Medical Insurance)

The form was updated to add the optional collection of email addresses. In response to SSA technician's feedback, the form now includes a question that allows the applicant to select a Medicare start date. CMS' Office of Communications provided feedback on the form design and the layout of the questions. The form was redesigned to give the applicant's a more user friendly experience. No additional changes were made and the burden was not impacted by the changes.

#### Changes

Updated Form	Original Form	Reason for Change	Burden Effect
Title: Request for Enrollment in Medicare Part B (Medical Insurance)	Title: Request for Enrollment in Supplementary Medical Insurance	OC plain language suggestion	N/A
Instructions page	Instructions page	Updated to plain language.	N/A
Condensed form and removed the step-by-step instructions. The instructions are now included with the questions instead of on a separate page.	Questions numbered without having a specific section or category.	<ul style="list-style-type: none"><li>• Updated formatting to match Medicare brand &amp; style</li><li>• Updated language to align with Medicare.gov program info</li><li>• Linked to Medicare.gov for program details so info is current &amp; comprehensive</li><li>• Added SHIPs resource language to the "Get help" section</li><li>• Removed field numbers unless used for</li></ul>	N/A

		<p>navigation (i.e. "go to item 4")</p> <ul style="list-style-type: none"><li>• Standardized field labels across forms</li><li>• Standardized the "witness" section across forms</li></ul>	
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