

Pre-Admission Checklist

To expedite the processing of admission, please plan to bring the following:

- **INSURANCE CARD(S)**
(If any) – If paying a supplemental insurance, have the policy number, monthly premium and due date for next payment.
- **LIVING WILL OR POWER OF ATTORNEY FOR HEALTHCARE**
If one has been executed.
- **MEDICAID CARD**
If applicable.
- **MEDICARE CARD**
To secure a replacement card contact 800-642-6930.
- **COVID VACCINATION CARD**
- **LIST OF HOME MEDICATIONS**
- **PUBLIC AID APPLICATION**
If applicable.
- **SOCIAL SECURITY CARD**
To secure a replacement card contact 800-772-1213.
- **ADVANCE PAYMENT**
If not covered by Medicare/Medicaid, Insurance a thirty (30) day advance payment is required.
- **MEDICAID RESIDENT**
Monthly liability due, (if applicable).

It is important, that if possible, a family member or responsible party call the Admission Department (574) 272-0100 ext. 208 and schedule a time to complete admission paperwork prior to admission.

Thank you for your cooperation.