Items Needed for Medicaid Application For Nursing Home Care

Please bring in copies (**both sides of <u>every</u> document**) of any and all of the following documents that concern the Medicaid applicant. If you have any questions, please feel free to call upon us.

- □ Driver's License or state issued photo identification card
- \Box Social security card, both sides
- □ Birth certificate or other birth record (i.e. baptismal certificate)
- □ Marriage license, divorce decree, death certificate of spouse, military service records
- Check or "Award Letter" from Social Security, SSI, Veterans Benefits, Worker's Compensation or other disability
- □ Check or "Award Letter" from pension, retirement benefits or Unemployment Insurance
- □ Proof of money from other sources (loans, gifts from friends, relatives, rental income)
- □ Deed, current tax bill and most recent mortgage statement
- □ Title, registration, contract and/or payment book for all motor vehicles
- □ All long term care insurance (individual and group) policies
- □ All life insurance policies (individual and group) including cash surrender value, face value and death benefit for each policy
- \Box Copies of both sides of health insurance card and premium notices
- \Box All stock certificates
- \Box All savings bonds
- Monthly, quarterly or annual statements or passbook for all financial accounts owned during the last five (5) year period, even if the account is now closed, including checking, savings, money market, certificates of deposit, credit union accounts, trust funds, retirement accounts, investment accounts and annuities
- \Box Copies of all checks issued for an amount over \$1,000
- \Box Copies of all deposits for an amount over \$1,000

- \Box Copies of tax returns for last five (5) years
- \Box Safe deposit box information
- □ Proof of ownership and value of burial lots or prepaid burial plans
- \Box Medicare card, both sides
- \Box Doctor, hospital or dental bills or prescription forms for last three (3) months
- \Box Nursing home bills for the last three (3) months
- □ Power of Attorney for Health Care and Power of Attorney for Property
- $\hfill \mbox{ and/or Trust}$