

Kansas Soldiers' Home
714 Sheridan – Unit 128
Fort Dodge KS 67843
(620)227-2121
FAX (620) 225-6331

Kansas Veterans' Home
1220 World War II Memorial Drive
Winfield KS 67156
(620) 221-9479
FAX (620) 229-9050

Applicant Name: _____ Date: _____

	Document	Purpose	Status
Part I – To be completed prior to admission			
1	Admission Application	General Required Information (in application packet)	
2	Authorization to Receive & Release Protected Health Information	Medical Care Evaluation (in application packet)	
3	VA Form 10-10EZ (veterans only)	VA Requirement (in application packet)	
4	DD214 or Military Honorable Discharge & Enlistment Record or VA verification	VA Requirement Eligibility Confirmation	
5	CARE Assessment Certificate	State of Kansas Requirement	
6	Copy of Social Security Card & Photo ID (Drivers' License, VA ID card and etc.)	Medicaid & Facility Requirement Identity Confirmation	
7	Hospital - One (1) Month of Medical Records to include - Nursing reports, Behavior reports, Doctors Orders, etc. Home – Most recent doctor notes from visit	Facility Requirement Medical Care Evaluation	
8	Copies of Medicare & all other health insurance cards front & back. (If needing Medicare assistance)	Facility Requirement (If needing Medicare assistance) Medical Care & Financial Information	
9	Verification of income (Social Security, Retirement, Pension, Disability, etc.)	Facility Requirement Financial Information	
Note: All non-veterans will need to complete number 15			
Part II – To be complete within one (1) week after admission			
10	Three (3) Months of statements on all bank accounts (CDs, Checking, Savings, IRAs, etc.)	Facility Requirement Financial Information	
11	Power of Attorney for Healthcare and/or Finances (If Applicable)	Medicaid Requirement (if applicable) Financial Information	
12	Guardianship/Conservator (if applicable)	Medicaid & VA Requirement (if applicable) Financial Information	
13	Funeral Contract (if applicable)	Medicaid Requirement (if applicable) Financial Information	
14	Birth Certificate (if applicable)	Medicaid Requirement (if applicable) (For Non-Vets)	
15	Death Certificate and/or Marriage Certificate (if applicable)	Medicaid & VA Requirement (all non-veteran applicants)	
16	Living Will and/or Advanced Directive/DNR (if applicable)	(If Applicable)	

Notes:

Under certain circumstances the VA allows a limited number of non-veteran admissions to a Veterans State Home. Non-veterans are eligible only if they are Gold Star Parents, spouses or surviving spouses of veterans.

The Kansas Soldiers' Home or Kansas Veterans' Home will contact you if additional documentation is necessary to complete review of your application documents.

Note: The original of all **Part I** forms included in this packet must be returned by the time of admission. **Part II** forms or information must be received or completed within one (1) week after admission.

Forms received by FAX cannot be substituted for the original.