



**Home Health
& Therapy^{LLC}**

Corporate Office
1101 E South River Street
Appleton, WI 54915
Phone: 920.830.9911
Fax: 888.910.5355

Referral Documents

- Face Sheet
- Medication List (patient name/dose/route/time)
- Complete Social Security Number (if not on Face Sheet)
 - o If able, can process referral without
- Insurance Information – copy of cards preferable
- POA documents
- Incapacity Statement, if applicable
- PCP information
- DNR documents