



# Kidney Health Care

## Client Application Checklist

People in Texas interested in Kidney Health Care (KHC) benefits must partner with their social worker where they get care and treatment for their end-stage renal disease (ESRD). The social worker must submit the application on behalf of the person being treated. For questions about eligibility or program benefits, call 800-222-3986.

### **Complete Form 3035 – Kidney Health Care Program Application**

This is a fillable PDF form that can be completed or printed in dark ink. Please ensure that all sections are complete and accurate to avoid processing delays.

### **Complete CMS 2728 – Medical Evidence Report**

This form is part of the KHC application to be completed by applicant's physician.

### **Gather required documentation:**

#### **Proof of residency**

The proof can be a utility bill, voter registration card, mortgage payment receipt, valid Texas driver's license or ID card. It must:

- Show the applicant's name.
- Match the home address listed on the application.
- Be current (if using a Texas driver's license, ID card or voter registration).
- Be dated within the last three months (if using a utility bill or mortgage payment receipt).

Applicants can also submit a letter establishing residency written by a family member they live with. The family member must provide proof of residency with a document listed above.

#### **Proof of income**

The applicant or person legally obligated to support the applicant must provide proof of all income, unearned or earned. This includes income from the client (and spouse, if married) in addition to other obligated person(s).

One of the following proofs of income dated within 90 days may be provided:

- Pay stubs.
- Employer verification letter.
- SSI check or award letter.
- Unemployment benefit award letter.
- If the applicant is self-employed, the first three pages of Form 1040 for the most current tax year may be submitted. It must have the client's name (and spouse's name, if married) and be signed and dated.

If there is no proof of income available, a signed and dated statement written by the client (and spouse, if married) or obligated person(s) must be provided.

**Proof of insurance**

Submit a copy of an ID card (front and back) or official letter for each type of health insurance coverage.

**Proof of Social Security number**

Submit a copy of a social security card or document from the Social Security Administration with the person's name and social security number listed.

**Submit the application files.**

Send a complete Form 3035 and CMS 2728 and the required documentation by mail to:

Kidney Health Care Eligibility Services  
MC 1938  
P.O. Box 149030  
Austin, TX 78714-9947

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### **Important Information for Former Military Services Members**

People who served in any branch of the United States Armed Forces, including the Army, Navy, Marines, Air Force, Coast Guard, Reserves or National Guard, may be eligible for additional benefits and services. Visit the Texas Veterans Portal at [veterans.portal.texas.gov](https://veterans.portal.texas.gov) for more information.