

**PHYSICAL ADDRESS, MAILING ADDRESS, PHONE, FAX, & E-MAIL CHANGES
(NON-MEDICARE PROVIDERS)**

Dear Provider:

To change the mailing address, phone number, fax number, or e-mail address of your agency submit the following information and/or documentation:

A letter on your agency's letterhead and include the following:

- The agency's license number. The number is located on agency's license.
- The new mailing address, phone number, fax number, or e-mail address of your agency.
- Please specify if this change is to be made to the corporation's (owner) address, phone number, fax number, or e-mail address. If this is not included in the letter the Department will not change the legal entity's address (*i.e. corporation, llc*).
- Effective date of the change.
- Signature of administrator on the letter (the name must be on record with the Department).

Once the above mentioned documents are submitted and approved, the Department will update our database to reflect the changes and send a confirmation letter to the agency.

For Medicare providers, see the letter: ***Medicare Agency Address Changes***

Submit change request to:

Kelly Hemmelgarn
Program Director, Acute Care
Indiana State Department of Health
Acute Care Division
2 N Meridian St., Section 4A 07

Indianapolis, IN 46204