

Information Needed to Apply For Special Health Services (SHS)

Name, address (street, city, state, zip code and county), and telephone numbers of professionals that help your child and family:

- Medical providers such as:
 - your child's physician
 - other medical specialists (e.g., pediatric cardiologist or neurologist)
 - multidisciplinary clinic teams (e.g., an organized service or program where many professionals see the child together at one place and time)
- Dental providers such as your child's dentist or orthodontist
- Other professionals such as your child's occupational therapist, physical therapist, speech language pathologist, public health nurse, dietician, home health nurse, case manager, social worker, vocational rehabilitation counselor, or Human Service Center staff, etc.
- Pharmacy
- Educational providers such as Infant Development, Head Start, Special Education staff, or child's school

Demographic Information:

- Child's social security number, birth date, race, sex, and age
- Names of family members, relationship to child, birth date, and grade in school or occupation

Insurance or Health Care Coverage Information:

- Copy of Insurance Card(s) front and back
- Name and address of insurance company
- Start and end date of coverage
- Policy number
- Verification of provisions or limitations in coverage such as pre-existing conditions, riders, or excluded services
- Verification of premium paid out-of-pocket such as a paycheck stub or premium notice and cancelled check

Financial Information:

- Income verification such as tax forms or paycheck stubs
- Information about other sources of income such as Child Support, SSA, SSDI, Workforce Development (Workers Compensation), Unemployment, Veterans Benefits, etc.
- Information regarding one or both parent's self-employed status

Medical Information:

- Provide a description of your child's medical condition and related needs
- Send a current medical report that describes your child's medical conditions to the state SHS office
- Provide a list of your child's medications related to his/her medical condition

Care Coordination Information:

- Describe your family's strengths
- Describe your child's and family's needs
- Describe ways the county SHS worker can assist you in developing a plan to help your family