

How to apply

1. Get an application.

- On our website at www.dshs.state.tx.us/cshcn/
- From the local office shown below, or
- By calling 1-800-252-8023.

2. Fill out the application.

A complete application includes:

- Filled out and signed application form
- Proof of Texas residency
- Proof of date of birth
- Proof of income
- Completed and signed Physician/ Dentist Assessment Form (in the application booklet)
- Proof of insurance, if any (includes Medicaid, CHIP or private insurance)

3. Send completed application to the local CSHCN Services Program office shown below.

If you have private health insurance, the CSHCN Services Program might be able to help you pay your premiums. Call the local office for help.

If there is no local office shown here, call 1-800-252-8023 for help.

Put local Program office information here.
Use Avery Label type 5160.

Children with Special Health Care Needs Services Program MC-1938

Department of State Health Services
P.O. Box 149347
Austin, TX 78714-9347
1-800-252-8023
Fax 1-800-441-5133



www.dshs.state.tx.us/cshcn



05-09

Stock No. 4-1

CHILDREN *with* SPECIAL HEALTH CARE NEEDS SERVICES PROGRAM



Improving the quality of life
for children
with special health care needs
and their families.*



*The Children with Special Health Care Needs (CSHCN) Services Program is for children with special needs from birth to 21 years of age and for people of any age with cystic fibrosis.

What we help with:

Medical, dental, and mental health care

- Doctor visits
- Hospital and outpatient care
- Medicines and medical supplies
- Durable medical equipment
- Hearing and vision care
- Rehabilitation
- Physical and other therapies



Case management

- Finds needed services
- Develops care plans
- Helps fill out applications
- Helps get needed supplies
- Helps with family or school problems
- Coordinates care

Family support services

- Vehicle and home modifications
- Respite care
- Other family support services

Payment for medical transportation

Who can apply?

Anyone who meets all 4 conditions:

1. Lives in Texas;
2. Has a physical condition that is expected to last 12 months;
3. Is under 21 years of age (or any age for people with cystic fibrosis);
4. Meets family income limits.
Call 1-800-252-8023 or the local office shown on the back for more information.

Any applicant who is younger than 19 years and a U.S. citizen or legal resident must also apply for Medicaid or CHIP. Call the local CSHCN Services Program office for more information.



*Visit our website at
www.dshs.state.tx.us/cshcn*



*It's easy to apply to our program.
Contact the local office shown on the
back, or call us toll-free at
1-800-252-8023.*

Waiting List

At times, clients are put on the waiting list due to limited Program funds.

- Clients on the waiting list can receive case management to help them find the services they need.
- The Program takes clients off the list and pays for their health benefits as funds become available.

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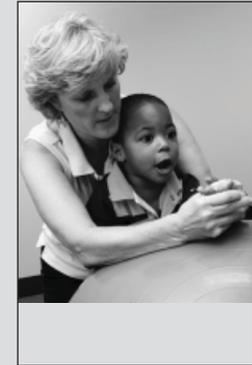
www.dshs.state.tx.us/cshcn



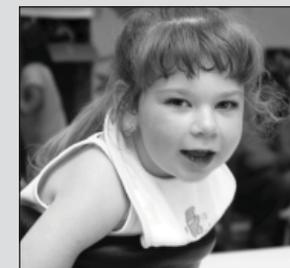
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