

Family Service Workers send **completed** forms to their Regional ICPC Representative for review. The Regional ICPC Representative will submit completed forms to [Selectkids GM@BCBST.com](mailto:Selectkids_GM@BCBST.com) and CC Robyn.L.Witherspoon@tn.gov for a SelectKids Specialist, as needed.

Referral Date:		Name of Child:		Date of Custody:	
DOB:		SSN:		TennCare ID#:	

Tentative Date of ICPC Placement:			
Will placement be receiving a board payment:	Yes	No	
Is the youth IV-E Eligible:	Yes	No	
Does youth have Medical needs: Yes	No	Does youth have Behavioral Health needs: Yes	No
Date of Last EPSDT Dental:		Date of Last EPSDT Medical:	

List services the youth is currently receiving & specify any **medical** and/or **behavioral service needs** upon transition: (i.e. PCP, mental health services, etc.)

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How does the placement intend to access coverage for medical/behavioral services? Check one:

- ☐ **Youth is IV-E eligible and placement will be receiving a board payment** (youth will be categorically eligible for receiving state's Medicaid. Refer to SelectKids only if there is a delay in coverage and services are needed before coverage is provided).
- ☐ **Youth is IV-E eligible, but placement will not be receiving a board payment** (DCS to follow up with ICPC worker in receiving state to determine Medicaid eligibility as this varies across different states; SelectKids Specialist needed in case youth is denied Medicaid).
- ☐ **Youth will be placed on placement's private insurance once full legal custody is obtained** (SelectKids Specialist needed until private insurance becomes active).
- ☐ **Youth is placed in receiving state that has a Child Only grant the placement can apply for upon placement.**
- ☐ **Youth is a recipient of SSI** (There are currently 10 states that do not automatically provide Medicaid to their SSI recipients and they must apply for Medicaid separately---Connecticut, Hawaii, Illinois, Minnesota, Missouri, New Hampshire, North Dakota, Ohio, Oklahoma and Virginia. For these identified states, a referral should be made to SelectKids Specialist as a back up while coverage is pending).
- ☐ **No insurance has been identified. Youth will need to remain on TennCare and SelectKids Specialist will be assigned.**
- ☐ **Youth is placed at a Residential Treatment Center and will remain on TennCare.**

List the medical/behavioral health services youth needs while placed at the RTC:

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Note: for cases where a SelectKids Specialist is needed, the youth will remain on TennCare Select while the SelectKids Specialist will be reaching out to identified providers in the receiving state to continue services. Placement should be made aware that if no TennCare providers are identified, the youth may need to come back to TN for services until other insurance coverage has been established.

List the preferred out of state providers and their contact information the ICPC placement wishes to utilize:

Current Medications:

Treatment History (ER visits or inpatient stays, Residential Treatment Center stays, medical equipment, etc.):

DCS Region:					
Family Service Worker:		Email:		Cell:	
Team Leader:		Email:		Cell:	
Regional ICPC Representative:		Email:		Cell:	

Out of State Caregiver (foster parent, relative caregiver, RTC Case Manager, etc.):					
Name:		Relationship:		Email:	
City, State of Current Placement:			City, State of ICPC Placement:		

INSTRUCTIONS FOR USE OF FORM CS-1234 ICPC Behavioral/Medical Health Referral

Anytime DCS is planning to place a youth out of state this form is to be completed and sent to your Regional ICPC Representative, identified on the chart below.

If the youth being placed out of state does not have insurance coverage identified in the receiving state and is in need of a *SelectKids* Specialist from TennCare Select to assist in identifying out of state providers, the Regional ICPC Representative will send this completed form to Selectkids_GM@BCBST.com.

The FSW should also notify the youth's placement that a *SelectKids* Specialist from TennCare Select/BCBST will be reaching out to coordinate a medical care plan until insurance is obtained.

Note: If youth are not eligible to receive Medicaid in the receiving state, the Health Advocacy Division can work with BCBST to build a TennCare Select network around their behavioral/medical health needs. This takes time as most states do not have TennCare providers already in place. It is very important that your Regional ICPC Representative is contacted as early as possible in order to start making a medical action plan.

Please see the attached list of DCS ICPC Regional Representatives.

Region	Representative	Representative 2	Representative 3
Davidson	Shenall Booker		
East	Patricia Trentham		
Knox	Julie Clower	Kelley Cooper	
Mid Cumberland	Jamin Pena	Jajuan Turrentine	Una Norwood
Northeast	Katie Wilhoit		
Northwest	Jennifer Hodge		
Shelby	Jacqueline L. Sandidge	Toni Davis	
Smoky	Angela Mueller	Antonia Zimmer	
South Central	Sandra Mottola		
Southwest	Maurice Gastelum		
TN Valley	Rita Morson		
Upper Cumberland	Cynthia Hagan	Jennifer Watts	Julia Cook