



Emergency Medical Services (EMS) Cover Sheet for Application/Verifications

Instructions:

1. Use this cover sheet **any** time you send information or documents about any EMS case.
2. Mark each page with “EMS APPLICATION” at the top.
3. Attach the original application form **and** original fax confirmation if you can.
4. Mail or fax this page and other documents to:

Tennessee Health Connection (TNHC)
 P.O. Box 305240
 Nashville, TN 37230-5240
 Fax: 1-855-315-0669

Patient's Full Name (First, Middle, Last):		Patient's Telephone #:	
Mailing Address:			
Apt:		City, State and ZIP:	
Date of Birth:		SSN (if patient has one):	
Date of Emergency Room Visit/Hospital Admission:		Date of EMS Application to TNHC:	

Background Information: As required by federal law, TennCare reimburses hospitals for emergency medical services (EMS) for certain non-citizens. These noncitizens include qualified aliens subject to the 5-year bar and non-qualified aliens who are not eligible for regular TennCare because of their immigration status. TennCare reimburses hospitals for EMS only if the noncitizen:

- Would be eligible for an existing TennCare eligibility group but for his/her immigration status; **and**
- Has an EMS period on the date on which he or she received emergency services; **and**
- Got emergency services that meet the federal standards.

EMS applicants should submit the FFM application form to **both** TNHC and the FFM. EMS applicants should also send income, residency, and emergency medical documentation to TNHC as soon as it is available.

TennCare will **not** provide reimbursement for EMS if an applicant is a citizen or eligible immigrant. Citizens and eligible immigrants can instead apply for regular TennCare. For more information about eligibility for EMS and about regular TennCare, visit tn.gov/tennCare.

Attachments: Original EMS Application (if available)
 Fax confirmation TNHC received original EMS Application (if available)