

## Instructions for Completion of the Children's Rehabilitative Services Application

The Arizona Health Care Cost Containment System (AHCCCS) Division of Member Services (DMS) Children's Rehabilitative Services (CRS) Unit reviews applications for customers who want to receive a CRS designation.

In order to receive a CRS designation, AHCCCS members must require active treatment for one of the medical conditions defined in [A.A.C. R9-22-1303](#).

If the applicant is not currently an AHCCCS member, they must enroll by:

- Applying online at [www.healtharizonaplus.gov](http://www.healtharizonaplus.gov); or
- Calling AHCCCS toll free at 1-855-432-7587; or
- Going to <https://www.azahcccs.gov/Members/GetCovered/apply.html>, printing and completing an AHCCCS application.

### How to Apply for the CRS Designation

To apply for a CRS designation, a CRS application (click on the highlighted areas below) can be filled out and submitted with medical records that support the potential CRS condition. Submit the completed application to the CRS Unit. If an application is not completed, the customer's medical condition will be treated by the AHCCCS health plan.

- [CRS Application in English](#)
- [CRS Application in Spanish](#)

Anyone can fill out an application including a family member, doctor, or health plan representative. The CRS Unit can also help with completing the application. You can contact the CRS Unit at: 602-417-4545 or 1-855-333-7828.

Complete the following information on the CRS application:

- The AHCCCS identification number and the current AHCCCS health plan, if the applicant is a current AHCCCS member. If not, indicate if the applicant has applied in section one (1) on the CRS application.
- First name, middle initial and last name;
- Date of birth;
- Gender;
- Social Security number;
- Parent/Representative's name, relationship to the applicant, mailing address, and phone numbers;
- Primary Care Provider's name, address, and contact information;
- Primary diagnosis including treatment plan information;
- Name, agency, and phone number of the referral source (when someone other than the applicant's parent or representative completes an application, this is called a referral); and
- State the relationship between the referral source and the applicant.

NOTE: Applicants cannot receive a CRS designation or CRS services until they become an AHCCCS member.

**Don't forget to send the information supporting the medical diagnosis and the need for treatment.** Applicants can contact their doctor to help collect the medical information.

The completed application along with the medical information can be mailed or faxed to:

AHCCCS/Children's Rehabilitative Services  
801 East Jefferson  
MD3500  
Phoenix, AZ 85034  
Fax: 602-252-5286

CRS Unit: 602-417-4545 or 1-855-333-7828

The CRS Unit will send a written notice indicating when the CRS application has been approved or denied.

Updated 10/18