North Alabama
**CommunityCare**

# Children with Medical Complexities (CMC) Referral Form

***Cullman, Limestone, Madison, Morgan, Marshall, and Jackson Counties***

Recipient's Name: ____________________________________________ Date: _________________________

DOB: _______________ Medicaid #: _______________________________ Phone: ________________________

Physical Address including city and zip: ___________________________________________________________

Parent/Guardian: ______________________________________________ Phone: ________________________

Emergency Contact: ____________________________________________ Phone: _______________________

Referring Physician / Facility: ____________________________________________________________________

Facility Contact: ______________________ Phone: ____________________ Email: ________________________

**CMC Qualifying Conditions:**

| | | |
|---|---|---|
| Cancer | Transplant | HIV |
| Paraplegia | Cardiac Conditions | Multiple Sclerosis |
| Pulmonary/Respiratory | Cerebral Palsy | Muscular Dystrophy |
| Quadriplegia | Cystic Fibrosis | Neuromuscular Disorders |
| Sickle Cell | Hemophilia | |

Other: ___________________________________________________________________________________

**Reason for Referral:** ______________________________________________________________________

**Special Instructions / Pertinent Information**

____________________________________________________________________________________________

____________________________________________________________________________________________

**This form must be completely filled out in order to be processed.**

**You must include the following with this referral form:**

- Past Medical History including most recent lab work and H&P.
- List of current medications, including dosage, duration, and purpose.

**Send referral form and accompanying documentation to:**

Fax: (256) 382-2715 -OR- Email: referrals@northalcc.org

Children without these conditions must be approved by our Medical Director to be categorized as medically complex. Please contact Diane McCrary @ (256) 382-2387 for more information.