

Required	Children’s Special Health and Dental Services Annual Update Form (CSH-10)
	<p>Purpose: To document the required annual visit with a family in order to update vital information. Each client has to have a completed Annual Update form. The completed financial may accompany this form to the State CSH Office</p> <p>Completed by: PHN Care Coordinator</p> <p>Note: Marital status applies to parents of client</p> <p>When: Yearly in the month the child was made eligible for CSH. If there is more than one client in the same family, the annual updates will all be due at the same time, regardless of eligibility date.</p> <p>Retention: Original sent to the State. A copy can be kept at the local county office.</p> <p>Updated: Annually/any changes found at time of annual update can be noted on this form. Do not send additional change form.</p>