

Instructions: 1) Complete form,
2) Date and sign, 3) Attach death
certificate (include documents listed
if requesting a deferral/exception),
4) Mail or fax to TennCare.

Date received:



STATE OF TENNESSEE
BUREAU OF TENNCARE—ESTATE RECOVERY
310 Great Circle Road, 3rd Floor • Nashville, Tennessee 37243
Phone 866-389-8444 • Fax 615-413-1941

TENNCARE REQUEST FOR RELEASE OF ESTATE RECOVERY CLAIM

INFORMATION ABOUT THE DECEASED PERSON				
Full name				
Date of birth	Date of death	Social Security number		
Marital status	<input type="checkbox"/> widow/widower <input type="checkbox"/> divorced <input type="checkbox"/> married <input type="checkbox"/> single			
Did the deceased receive TennCare CHOICES (home and community-based or nursing facility care)?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Do not know		
Last known address of deceased prior to nursing facility or assisted living				
INFORMATION ABOUT THE SPOUSE OF THE DECEASED PERSON (complete even if spouse is already deceased)				
Full name				
Date of birth	Date of death	Social Security number		
INFORMATION ABOUT PROBATE COURT CASE				
Probate Court case filed?	<input type="checkbox"/> Full probate <input type="checkbox"/> Small estate <input type="checkbox"/> Muniment of title <input type="checkbox"/> NO			
County		Case number		
If not, do you anticipate filing?	<input type="checkbox"/> Full probate <input type="checkbox"/> Small estate <input type="checkbox"/> Muniment of title <input type="checkbox"/> NO			
INFORMATION ABOUT THE PERSON COMPLETING THIS FORM				
Full name	Relationship to deceased			
Address	Phone number			
	Email			

The person completing the Request for Release is executing it as the estate representative. TennCare will rely upon this representation when communicating the value of TennCare's claims and/or executing a release or deferral of TennCare's claim. TennCare shall be held harmless of any action brought by heirs or other interested parties due to the payment of TennCare's claim by the person presenting themselves as the estate representative.

Signature _____

Date _____

Deferral/exception request on page 2 (OVER)→

DEFERRAL/EXCEPTION REQUEST

Are you requesting a release or deferral/exception for any of the following reasons?
(Check ALL that apply)

- Decedent never received benefits
- Surviving spouse
- Child or children under age 18 survives decedent (you must provide a copy of each child's birth certificate)
- Adult disabled child or children of the decedent survives (you must provide a copy of the Social Security Administration determination of permanent total disability AND a copy of each child's birth certificate)

LONG-TERM CARE INSURANCE

For TennCare enrollees: Did the decedent have long-term care insurance?

- Yes (please find documentation of this)
- No
- Not sure (please look for documentation of this as it could offset any TennCare recovery)

Need free language help? Call 866-389-8444 ♦ Necesita ayuda con el idioma gratuita? Llame 866-389-8444 ♦
هل مساعدة تريد هل 866-389-8444 اتصل مجاناً؟ اللغة في مساعدة تريد هل 866-389-8444 ♦ 需要免费的翻译服务吗? 请致电866-389-8444 ♦
무료로 통역 도움이 필요하십니까? 전화866-389-8444 ♦ Cần giúp đỡ miễn phí ngôn ngữ? Gọi 866-389-8444
♦ ما u baahan tahay gargaar luqadda oo bilaash ah so wac 866-389-8444 ♦ Ma u baahan tahay gargaar luqadda oo bilaash ah so wac 866-389-8444

Have a disability and need free help or an auxiliary aid or service (Braille, large print)? Call 866-389-8444 ♦
Tiene una discapacidad y necesita ayuda gratuita? Llame 866-389-8444 ♦
هل مساعدة وتحتاج اعاقه لديك هل 866-389-8444 اتصل مجانية؟ مساعدة وتحتاج اعاقه لديك هل 866-389-8444 ♦ 您是否因残障而需要免费的帮助呢? 请致电866-389-8444 ♦
장애가 있으신 분으로서 무료 도움이 필요하십니까? 전화866-389-8444 ♦ Có khuyết tật và cần sự giúp đỡ miễn phí Gọi 866-389-8444 ♦ ما u baahan tahay gargaar luqadda oo bilaash ah so wac 866-389-8444 ♦
Ma leedahay naafo oo u baahan tahay gargaar luqadda oo bilaash ah so wac 866-389-8444 ♦♦

Free TRS call 711 866-389-8444 ♦ Gratis TRS llame 711 866-389-8444

TennCare does not treat anyone differently based on race, color, national origin, disability, age, sex, religion, or other protected statuses. If you think you may have been treated differently for these reasons you can file a written complaint. For more information see TennCare's Civil Rights Compliance Website at <http://www.tn.gov/tenncare/topic/non-discrimination-compliance>. If you need help, call 866-389-8444.