Community Support Program with Justice Involved (CSP-JI) Notification for In-Network Providers Only

TUFTS Health Plan
a Point32Health company

Rev. 4/2026

Completed forms can be faxed to the following locations:

- For **Tufts Health Together** and **Tufts Health Direct**, fax to 888-977-0776
- For **Tufts Health One Care**, fax to 857-304-6304
- For **Tufts Health Plan Senior Care Options** (SCO), fax to 617-673-0930

Today's date / / Initial date of service / /

Notification required within one week of the start of services.

For Tufts Health Together and Tufts Health One Care, Notification allows the provider to use and bill up to 6 months from the date services are initiated.

For SCO, Notification allows the provider to use and bill up to 1 year from the date services are initiated.

Member Information

Member name

THP member ID # DOB / /

Member address Member phone

City State ZIP

Provider Information

Provider organization name

Organization phone

NPI # Tax ID #

Provider address Phone

City State ZIP

CSP-JI worker name Phone

Supervisor name Phone

Fax number to fax authorization letter

Clinical Information

List ICD-10 alpha-numeric diagnosis codes

Attestation

CSP Provider attests *to the fact that they have confirmed they have met with the member listed on this form and meet the performance specifications for this level of care.*

Signature Date / /