Countermeasures Injury Compensation Program (CICP) – Required Documentation

To complete your Request for Benefits package, you must submit the following CICP Required Documents:
☐ Request for Benefits form (electronic filing or mail fillable PDF)
☐ Proof of administration or use of a CICP covered countermeasure, such as proof of vaccination (e.g. CDC COVID-19 Vaccination Record card) in case of vaccine injury claims.
Authorization for Use or Disclosure of Health Information form (PDF - 161 KB). Please note that you need to fill out a separate form for each health care provider who treated you and send the original form to your health care provider. Also, please send copied of each authorization form to the CICP.
The following medical records must be submitted by you or your health care provider(s):
\Box All medical records documenting medical visits, procedures, consultations, and test results that occurred on or after the date of administration or use of the covered countermeasure.
☐ All hospital records, including the admission history and physical examination, the discharge summary, all physician subspecialty consultation reports, all physician and nursing progress notes, and all test results that occurred on or after the date of administration or use of the covered countermeasure.
☐ All medical records for one year prior to administration or use of the covered countermeasure as necessary to indicate an injured countermeasure recipient's pre-existing medical history.
$\hfill \square$ Death certificate, if filing on behalf of a deceased countermeasure recipient.
The CICP prefers that medical records are sent directly to the program

by your health care provider(s).