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Authorized Signatures

SS-IM-04-015

Numbers: OMAP-IM-04-056

Issue Date: June 9, 2004

Topic: Medical Benefits

Subject: OHP Program Changes Update and Client Information

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Other (please specify): DHS staff and others on the SPD, CAF, OMHAS, and OMAP transmittal lists |

Message: Effective July 1, 2004 the OHP-OPU medical program will be closed to new enrollment.

Eligibility workers should continue to process applications for OHP-OPU with a date of request through June 30th. As long as the applicant has a date of request of June 30th or earlier, OHP-OPU benefits may begin after June 30th.

Clients have the right to request benefits at any time. Branches should continue to accept all medical applications.

We are mailing informational flyers to affected clients advising them of the changes. One flyer will be sent to OHP-OPU clients receiving the Standard benefit package. A separate flyer will be sent to OHP-OPU clients receiving the CAWEM Emergency Medical benefit.

Brief Overview of the July 1st Eligibility Changes

Additional information will be sent about the changes and training will be offered in July. However, as a brief overview:

- To maintain eligibility, current OHP-OPU clients, including CAWEM OHP-OPU clients, must reapply timely. There must be no gap in medical eligibility dates

(must remain “continuously eligible”).

- OHP-OPU clients required to pay premiums must continue to pay premiums timely. If disqualified, they will not be continuously eligible. When reapplying after their penalty period they would be treated as new applicants and may not be considered for OHP-OPU eligibility.
- Closing OHP-OPU to new enrollment will NOT affect new OHP-OPU applicants with a date of request prior to July 1st. For example:

A new medical applicant requests OHP medical on June 25, 2004. The applicant is not eligible for any Plus medical benefit program (no disability, children, pregnancy, etc.). As the date of request is prior to July 1, 2004, the applicant may be considered for OHP-OPU and will have the usual 45 days from the date of request to complete the application process. If eligible, the worker may begin the applicant’s eligibility the first of the month after the eligibility decision.

- Closing OHP-OPU to new enrollment will not affect OHP-OPU applicants transitioning from a Plus benefit package program. For example:

An OSIPM client loses SSI eligibility effective September 1, 2004. They are not eligible for any Plus medical benefit program. In August, the worker may consider eligibility for OHP-OPU and if eligible transition the client to OHP-OPU effective September 1st.

Client Information

Current OHP-OPU clients will receive special informational flyers explaining the changes. One flyer will be mailed to OHP-OPU clients who receive the Standard benefit package. A copy of the flyer is included in this transmittal.

The flyer to Standard clients will also be sent with Premium bills for the next few months, until the premium bill can be revised to include this information. A similar statement will be included with reapplication packets.

A separate flyer will be mailed directly to affected CAWEM clients whose medical eligibility is based on OHP-OPU program rules. The notice informs them of closure of the CAWEM Emergency Medical OHP-OPU benefit to new enrollment on July 1 and reminds CAWEM clients to reapply on time.

Questions?

If you have questions about this information, call Roger Staples at 503-945-9072, Joyce Clarkson at 503-945-6106, or Michelle Marks at 503-947-5129.

If you have any questions about this information, contact:

Contact(s):	For contact information, please see above text		
Phone:		Fax:	
E-mail:			



Important Information

OHP Standard Benefit Package Closes to New Enrollment on 7/1/04

This information is for OHP Standard benefit package clients only

Look at Field 9b (Benefit Package) of your OMAP Medical Care ID. Any member of your household who has a "B" in Field 9b is on the OHP Standard benefit package.

Due to a lack of state funds, we will stop enrolling **new** clients into the Oregon Health Plan (OHP) Standard benefit package on July 1, 2004.

The Department regrets having to take this action, but finds it necessary because of the reduced OHP budget. We will notify you as soon as possible of any other changes that become necessary.

What this means to you

At this time, there is no change for clients who are currently on the OHP Standard benefit package. *You are on the OHP Standard benefit package if you have a "B" in Field 9b of the OMAP Medical Care ID.*

If you stay enrolled and pay your premiums on time, there will be no change for you, at this time.

If you are disenrolled from the OHP, you will **not** be able to enroll as an OHP Standard client until enrollment is open again.

To keep your OHP enrollment be sure to:

- ✓ **pay your premiums on time every month**, and
- ✓ **reapply on time.** If you return your completed application on time, and are eligible, your coverage will continue at this time.

No change for OHP Plus clients

There is no change for clients applying for or getting OHP Plus benefits. The OHP Plus benefit package has different eligibility and funding rules. To be on the OHP Plus benefit package, you must be:

- Pregnant, or
- Under age 19, or
- Receiving Temporary Assistance to Needy Families (TANF), or
- Receiving SSI, or
- Age 65 or older, blind, or disabled and receiving income at or below the SSI Standard, or
- Age 65 or older, blind, or disabled and receiving Department paid long-term care services.

Contact your worker if you believe you should be on the OHP Plus benefit package.

Questions?

- ☎ If you have any questions about this information, call the OMAP Client Advisory Services Unit at 1-800-273-0557, or TTY 1-800-375-2863.
- ☎ If you need this information in a larger print size or different format, call your worker.



Information date: 6/10/04 - Standard