

Division of Medical Assistance Programs

Jon Pelkey, Manager
DMAP Quality Improvement & Medical Section

Authorized Signature

Number: DMAP-IM-07-177
Issue Date: 12/19/2007

Topic: Medical Benefits

Subject: KSEL Notice: Capitol Dental Care (D015) Jackson County

Applies to:

- | | |
|--|---|
| <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 identified on the SPD, CAF, AMH and DMAP transmittal lists |

Message:

Effective December 21, 2007 Capitol Dental Care (D015) Jackson County will close to new enrollment with a 60 day re-enrollment.

****Remember to check the KSEL screen for the most current information****

If you have any questions about this information, contact:

Contact(s):	Donna Harles, Prepaid Health Plan Coordinator, DMAP		
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E-mail:	donna.harles@state.or.us		