

Alice LaBansky, DMAP Operations Manager

**Authorized Signature**

**Number:** DMAP IM 09-131

**Issue Date:** 10/07/2009

**Topic:** Medical Benefits

**Subject:** *ClientServices*, DMAP e-mail address closes October 9, 2009.

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

**Message:**

Effective October 9, 2009 at 5:00 p.m., DMAP's Client Service Unit e-mail, [DMAP.clientservices@state.or.us](mailto:DMAP.clientservices@state.or.us) or GroupWise *clientservices*, *DMAP* will close.

DMAP created the temporary address to assist field staff with ordering replacement Medical Care IDs. The workaround is no longer required.

Branch and field staff can use **MMIS** to request replacement Medical Care ID/coverage letters. The instructions on the next page describe the process step-by-step.

**Reminder.** IDs and coverage letters are always mailed together as a packet. Let the client know they will receive both a replacement ID card and coverage letter.

However, the system will not allow you to request a replacement Medical Care ID if the client has overlapping benefit plan eligibility dates (BMM, BMD, BMH, KIT, MED, CWM, CWX). In addition, the client may not be able to receive services until the correction is made.

Contact Client Maintenance Unit (CMU) to correct the client's eligibility information at [client.maintenance@state.or.us](mailto:client.maintenance@state.or.us) or GroupWise *maintenance*, *client*. If your request is urgent, add RUSH to the e-mail's subject line or call CMU at 503-378-4369.

CMU will notify you when the problem is fixed. At that time, you can use MMIS to request the replacement Medical Care ID to be mailed to your client.

You will still be able to print a temporary Medical ID. The temporary ID will show only the client's name and prime number. It does not show eligibility information.

## Instructions

Complete instructions about printing temporary and requesting replacement Medical Care IDs, click [http://www.dhs.state.or.us/training/caf\\_ss\\_medical/mmis/issue\\_id\\_ltr-02.pdf](http://www.dhs.state.or.us/training/caf_ss_medical/mmis/issue_id_ltr-02.pdf).

## How to report MMIS problems

Contact the Service Desk at 503-945-5623 or e-mail [dhs.servicedesk@state.or.us](mailto:dhs.servicedesk@state.or.us) or GroupWise search [servicedesk](#), [dhs](#).

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Kristine Kersine
<b>Phone:</b>	503-947-5489
<b>E-mail:</b>	<a href="mailto:Kristine.Kersine@state.or.us">Kristine.Kersine@state.or.us</a>