

CCO Transition in Lane County – Frequently Asked Questions for Oregon Health Plan (OHP) Members

Last updated: Dec. 30, 2025. Oregon Health Authority will update this document as more questions and answers become available.

What is changing?

PacificSource Community Solutions (“PacificSource”) will no longer be a coordinated care organization (CCO) in Lane County in February 2026.

- Most OHP members in Lane County covered by PacificSource will have a new CCO on February 1: Trillium Community Health Plan (Trillium).
- Some other members, including American Indian/Alaska Native OHP members, will instead move to OHP Open Card with the option to choose Trillium instead.

Oregon Health Authority (OHA), PacificSource and Trillium are working together to make sure you keep getting the coverage and care you need during this change.

This Frequently Asked Questions (FAQs) can help you understand what is happening, what you can expect, and how you can get support during this transition.

Important terms

Oregon Health Plan (OHP)

OHP is Oregon’s Medicaid program, providing free health coverage.

Coordinated care organization (CCO)

Most OHP members get their benefits through a CCO. A CCO is a health plan that works with local health care providers to care for OHP members. OHP members contact their CCO for help using their benefits, finding providers, and more. Until Jan. 31, 2026, OHP members in Lane County have two choices of CCO, PacificSource Community Solutions (“PacificSource”) and Trillium Community Health Plan (“Trillium”).

Oregon Health Plan (OHP) Open Card

Some OHP members do not have a CCO and instead get their benefits through OHP Open Card (also known as Fee-for-Service). They can see any provider in the state who takes OHP Open Card, but there may be fewer local providers taking patients.

OHP Open Card is only available to certain members, including those who have Medicare or other health coverage, are American Indian/Alaska Native, or have a serious health care reason to continue care with a provider outside of a CCO.

General questions

Will I lose my Oregon Health Plan coverage because PacificSource is leaving?

No, you will not lose your Oregon Health Plan coverage due to this change. Please continue to respond to any OHP renewal letters.

Will my health benefits change because of this transition?

No, this does not change whether you qualify for OHP benefits. You will not lose your health care.

Even if you change CCOs, your OHP benefits mostly stay the same. All CCOs need to offer the same set of OHP benefits.

However, each CCO has some differences. Some health care providers that work with PacificSource may not be part of Trillium’s network. Each CCO can also choose to add more services and may have different preferred drugs (known as a formulary).

When does PacificSource coverage end for OHP members in Lane County?

PacificSource coverage for OHP members in Lane County will end on Jan. 31, 2026.

- Most members will move to Trillium on February 1.
- American Indian/Alaska Native OHP members will move to OHP Open Card on February 1 unless they choose Trillium.

OHA is working with PacificSource on plans for services during the transition and for transition of care periods and will continue to provide updates.

Do I need to do anything right now?

You do not need to do anything right now, but there are things you can do to help prepare:

Keep contact information up to date:

Especially if you have recently moved, make sure OHP has your correct address and other contact information. Learn how to report changes at [OHP.Oregon.gov/Changes](https://www.oregon.gov/oha/ohi/medicaid/eligibility/Pages/Changes.aspx), or in the question below. You will get a letter in the mail before you move to Trillium.

Ask your health care providers if they accept Trillium:

You can also ask your health care providers if they are part of Trillium's network or plan to join. Contact Trillium at 877-600-5472 or use their online provider search tool at [TrilliumOHP.com](https://www.TrilliumOHP.com) to learn more about health care providers in Trillium's network.

Some members can choose OHP Open Card or Trillium:

Some members can get OHP Open Card instead of Trillium.

- American Indian/Alaska Native OHP members will automatically move to OHP Open Card on February 1, unless they choose Trillium.
- OHP members with Medicare can choose OHP Open Card at any time.
- Other members may qualify for OHP Open Card if they have a serious health need to continue care with a provider who accepts OHP Open Card but not Trillium (you will need to work with your providers to make this request).

For questions about OHP Open Card, contact OHP Client Services at 800-273-0557.

How can I update my contact information?

There are many ways to update your contact information:

- You can report changes online at ONE.Oregon.gov.
- Call 800-699-9075. Help is available in many languages, and we accept all relay calls. You can call Monday through Friday, 7 a.m. to 6 p.m. Pacific Time. Hold times are lowest from 7 to 8 a.m.
- You can also find a local ODHS office at ODHSOffices.Oregon.gov, or get free help from a community partner near you at OregonHealthCare.gov/GetHelp

You can learn about all your options to report changes at OHP.Oregon.gov/Changes.

Keeping your contact information, such as address, phone number, and email up to date helps OHP reach you with important information about your health coverage. This includes letters about the change in CCOs. This is important to check if you have recently moved or do not have a stable address.

Will I receive a new ID card?

You will keep your same Medicaid ID number, but you will get a new Trillium member card. Most members will receive a new ID card in January from Trillium. If you do not get this card, contact Trillium at 877-600-5472 to re-order one.

Members who move to OHP Open Card can continue to use the paper “Oregon Health ID” card they received when they were approved for OHP. OHP Open Card does not issue ID cards. If members need to request a new Oregon Health ID card, they can:

- Call 800-699-9075 (all relay calls accepted, and help is available in many languages).
- Have one printed at a local office. Find one at ODHSoffices.oregon.gov.

Can new OHP members sign up with PacificSource in Lane County?

No. New OHP members will be automatically enrolled in Trillium. PacificSource is no longer taking on new OHP members in Lane County.

Questions about access to health care providers

What is the transition of care period?

The transition of care period is a window of time after February 1 when you can keep getting services and treatments approved by PacificSource. You also may be able to continue accessing providers in PacificSource's network who do not accept Trillium during this time.

This lasts for either 30, 60 or 90 days depending on your benefits and the type of care you need:

- 90 days for members who have Medicare in addition to OHP.
- 60 days for other members' behavioral health physical and dental needs.

Timelines may be able to extend even longer to complete certain treatment, including:

- Pregnancy and postpartum care.
- Organ transplants, including care during the first year after the transplant.
- Radiation or chemotherapy for a current illness.
- Prescriptions that require a longer treatment period than the standard transition time.

What happens to my services that are already scheduled or approved (like a surgery or ongoing treatment)?

PacificSource will serve Lane County OHP members through the end of January. Any care before then will be unaffected. Please keep getting services as usual during this time.

If you have had services or treatments approved by PacificSource, they will still be covered for some time during your transition of care period to Trillium.

If you have questions about your pre-approved services, or for help getting care before February 1, please call PacificSource at 800-431-4135 on weekdays from 8 a.m. to 8 p.m.

Will I have to change doctors or clinics?

Right now, there are no immediate changes to your provider network. Until the change, please keep seeing your health care providers.

After the change and transition of care period, whether you need to change doctors or clinics will depend on if your current providers are part of Trillium's network. Most providers available through PacificSource are also part of Trillium's network, but not all are.

Will I have to change dentists or pharmacies?

Probably not. Trillium expects their dental and pharmacy network will have access to all the providers available through PacificSource.

There are no changes to your provider network until February 1. Until the change, please keep seeing your health care providers.

What if my medicine is not on Trillium's formulary?

If your medicine is not on Trillium's list, your doctor has 30 days to help you switch to a similar medicine.

If you take medicines like insulin, the switch may take longer. Trillium will work with your doctor to help you change.

Sometimes you may need to stay on the same medicine. If that happens, Trillium will work with your doctor to make sure you get it.

How do I find out if I can keep seeing my current providers after the Transition of Care period ends?

You will need to find out if your providers are part of Trillium's network. To do this:

- Call Trillium at 877-600-5472.
- [Use Trillium's online provider search tool at TrilliumOHP.com](https://www.trilliumohip.com)

Trillium is working to add more providers to their network, so it's a good idea to keep checking if your provider is not listed yet.

You can also ask your current health care providers and pharmacy if they accept Trillium. If they do, you do not need to do anything. You can keep seeing them.

What happens to my approvals (prior authorizations) after PacificSource leaves?

If PacificSource said “yes” to your medical care (gave you a prior authorization or PA) before Feb. 1, 2026, Trillium will also say “yes” and cover your care for a certain amount of time. If you need care in the future, your doctor may need to ask Trillium for a new approval. Your doctor can contact Trillium to find out how long your approval lasts.

When your provider sends a new request for approval, Trillium usually decides within 7 days. For example, if you have an appointment soon, your doctor should ask Trillium for approval at least a week ahead of time to make sure there’s enough time for a decision.

My behavioral health provider is not in Trillium’s network. Can I still see them in March?

Yes. You have 60 days for behavioral health care under the transition of care.

If your provider is not in Trillium’s network and the 60 days are over, your provider must ask for approval with a prior authorization to keep seeing you.

If your provider is in Trillium’s network, a prior authorization is only needed for certain services. Your provider will check for you.

I have a child with special needs. They are getting services out of state. What do I need to do?

Your child should keep seeing their doctors.

If your child gets help from PacificSource Case Management, Trillium will get their information.

If your child does not have a Case Manager and you want one, please call Trillium Member Services **after Feb. 1, 2026**. Their number is 541-485-2155 or toll free at 877-600-5472. Ask for a Care Manager for your child.

If I need to schedule an appointment for after February 1, what should I do?

Ask the provider you are scheduling with if they accept Trillium. If they do, you can go ahead and schedule the appointment.

Trillium can help answer some questions about their provider network before February 1. Just know that your information won't show up in Trillium's system until February 1, so they won't be able to help you with everything until then.

If you are American Indian/Alaska Native, or have Medicare or a special health need and will be requesting OHP Open Card, instead ask the provider if they accept OHP Open Card.

What if my providers don't accept Trillium?

If your current health care providers and pharmacy do not accept Trillium, ask if they plan to join Trillium's network soon.

If they will not take Trillium after you change CCOs, you might still be able to keep seeing them for a short time under OHP's Transition of Care rules. During this time, Trillium can help you:

- Find in-network providers that meet your needs.
- Make sure your care continues without interruption.

I plan on giving birth in February. My provider is not in Trillium's network yet. What should I do?

Keep seeing your doctor and do not miss your appointments, even if your doctor is not in Trillium's network.

Care before and after delivery will be covered during the transition period. This ends when your doctor says your treatment is complete.

Questions about Health-Related Social Needs (HRSN) benefits

If I submitted an application for HRSN benefits but it has not been approved, what will happen during the transition?

PacificSource, OHA, UniteUs, and Trillium are working together to ensure a smooth transition of HRSN service requests and authorizations.

- You will keep your place in the waitlist.
- If you are currently receiving authorized HRSN services, you will continue to receive those services during the transition.
- If you have submitted an HRSN application to PacificSource, you do not need to re-submit. During the transition, Trillium will review the HRSN application you submitted to PacificSource.

Questions about OHP Open Card, and options for people with Medicare or who are American Indian/Alaska Native

Can I move to OHP Open Card (also known as Fee-for-Service)?

Maybe.

OHP Open Card is a type of Medicaid some people get instead of being enrolled in a CCO. OHP Open Card is only available in certain situations. Most OHP members are required to be in a CCO.

If you are American Indian/Alaska Native:

- You can choose Open Card at any time.
- You will automatically move to Open Card unless you choose Trillium.

If you have Medicare:

- You will be automatically enrolled in Trillium as your CCO.
- You can choose Open Card at any time, but only for physical health care. You will keep Trillium for dental and behavioral health care.

In some cases, other members may qualify for temporary OHP Open Card if they have a serious health reason to keep seeing a provider who accepts OHP Open Card but not Trillium. You need to work with your provider to make the request.

To learn more, visit the [OHP Open Card page](#) or call OHP Client Services at 800-273-0557. OHP Client Services is open Monday through Friday from 8 a.m. to 5 p.m. Pacific Time.

Will American Indian/Alaska Native members move to Trillium?

Under federal law, American Indian/Alaska Native members cannot be automatically enrolled in a CCO. Instead, they will move to OHP Open Card unless they choose to enroll in Trillium. You can choose to enroll in Trillium at any time, whether before or after February 1. OHP Client Services (800-273-0557) can help with this request and answer questions.

How can I find OHP Open Card providers?

To find OHP Open Card providers, you can use the online search tool at [OHPCC.org](https://www.ohpcc.org), or call OHP Open Card at 800-562-4620. You can also ask your providers if they accept OHP Open Card (also known as fee-for-service).

Who can I contact if I have more questions?

Who can I contact if I have questions or concerns about my coverage or the transition?

If you have any questions or concerns about this change you want to share with OHA, please email us at CCOSpecialprojects@oha.oregon.gov.

- **For questions about your health care before the change**, please call PacificSource at 800-431-4315 (available weekdays, 8 a.m. to 5 p.m.).
- **For questions about your health care after the change**, please call Trillium at 877-600-5472 (all relay calls are accepted).
- **For questions about changing CCOs, OHP Open Card or other questions about OHP benefits**, please call OHP Client Services at 800-273-0557 (all relay calls are accepted).

- **For questions about renewing or reporting changes to OHP**, please call ONE Customer Service at 800-699-9075 (all relay calls accepted). [Help is available in many languages.](#)

You can get this document in other languages, large print, braille or a format you prefer free of charge. Call 800-699-9075. We accept all relay calls.

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