

Jon Pelkey, Manager  
DMAP Delivery Services Section

**Number:** DMAP AR 11-002

**Authorized Signature**

**Issue Date:** 04/19/2011

**Topic:** Medical Benefits

**Subject:** Client Announcement: Former CAREAssist/OMIP clients removed from managed care enrollment

**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"/>            | Seniors and People with Disabilities  |
| <input type="checkbox"/> | Children, Adults and Families | <input checked="" type="checkbox"/> | Other (please specify): DHS staff and others identified on the SPD, CAF, AMH and DMAP transmittal lists |
| <input type="checkbox"/> | County DD Program Managers    |                                     |   |

**Action Required:** CAREAssist clients transitioning from OMIP to DHS medical should **not** be enrolled into a medical managed care plan.

To prevent new CAREAssist clients from being automatically enrolled into a medical plan:

- Send DMAP Client Enrollment Services (CES) a **red envelope** e-mail asking them to exempt the CAREAssist client from medical plan enrollment.
- The e-mail subject should be "OMIP CAREAssist client."
- Include the client's prime number and medical start date.

Other managed care enrollment is unchanged. Enroll clients into a DCO. MMIS will automatically enroll in an MHO.

**Note:** The PHP screen allows exempted clients to be enrolled. Please check on the client's recipient home page on MMIS to see if the client has already been exempted.

For step-by-step instructions, review "*How to Find Managed Care Information*" in the MMIS Training Material & Resources section at:

[http://www.dhs.state.or.us/caf/caf\\_ss\\_medical/index.htm](http://www.dhs.state.or.us/caf/caf_ss_medical/index.htm)

For managed care exemptions see page 17 - 19. Exempted CAREAssist clients will display with a "continuity of care" exemption, "agency request".

**Reason for Action:** About 300 clients who were formerly in the Oregon Medical Insurance Pool (OMIP) and receiving coverage through CAREAssist have been found eligible and enrolled in the OHP Standard program.

Because of the special needs associated with these clients we have decided to disenroll them from their medical plans and put them in fee-for-service status.

The following letters will be mailed to these clients, depending on their situation. The letters, are:

- 11-236 Written to FamilyCare clients who have been disenrolled from FamilyCare Medical Plan **and** FamilyCare MHO.
- 11-237 Written to clients who have only been disenrolled from their Medical Plan.
- 11-238 Written to clients who have been disenrolled from their Medical Plan and who are being seen by the Multnomah County Clinic.

**Field/Stakeholder review:** Yes, CAF Medical Program Analyst

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

<b>Contact(s):</b>	Client Enrollment Services
<b>E-mail:</b>	<a href="mailto:ces.dmap@state.or.us">ces.dmap@state.or.us</a>



Date

500 Summer St NE  
Salem, OR 97301  
Voice 503-945-5772  
FAX 503-373-7689  
TTY 711

First/Last Name  
Address  
City, OR 97xxx

Dear **First Name**,

This letter is to tell you about a recent change to your Oregon Health Plan (OHP) managed care enrollment.

Your medical benefits are not changing; however, when you enrolled in the Oregon Health Plan you were assigned to FamilyCare Medical Plan and FamilyCare MHO as your Mental Health Plan. Unfortunately, this was an error.

To correct this error and ensure that you have uninterrupted care, we have disenrolled you from both FamilyCare plans. Below is some information about how your coverage will continue:

- **Medical care:** You can receive medical care from any provider who sees OHP clients on a fee-for-service basis.  
  
If you were already seeing a provider through FamilyCare you can ask if that provider sees OHP clients on a fee-for-service basis. If they do, you will be able to continue seeing them. If they do not, or if you do not have a provider, contact the OHP Care Coordination Program at 1-800-562-4620.
- **Mental health care:** Because your Mental Health plan is connected to your Medical Plan, we are moving you from FamilyCare MHO to a new Mental Health Plan. Your new Mental Health Plan will send you information about their providers and how to use their services.
- If you are in a Dental Plan, you will stay in that Plan.

CAREAssist will continue to provide the support services you have been receiving.

We recently mailed you a new OHP Coverage Letter. The section titled "Managed Care/TPR enrollment" on page 3 shows that you have been disenrolled from both FamilyCare plans and lists your new Mental Health Plan.

### **What this means to you**

- Your OHP enrollment and health care benefits are not changing.
- You will now receive your medical services from any provider who sees OHP clients on a fee-for-service basis.
- You will receive mental health services from your new Mental Health Plan.

### **Questions?**

If you have questions or concerns about this information:

- Call OHP Client Services at 1-800-273-0557.
- Call the OHP Branch at 1-800-699-9075 if you need this letter in another language or another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.
- For TTY service: Dial 711.

Making sure you have the information you need to receive your health care is important to us. We regret and apologize for any confusion this change may cause you.

Sincerely,



Jon Pelkey, Manager  
Quality Improvement and Medical Section  
Division of Medical Assistance Programs, OHA



Date

First/Last Name  
Address  
City, OR 97xxx

Dear **First Name**,

This letter is to tell you about a recent change to your Oregon Health Plan (OHP) managed care enrollment.

Your medical benefits are not changing; however, when you enrolled in the Oregon Health Plan you were assigned to **[Plan name]** Medical Plan. Unfortunately, this was an error.

To correct this error and ensure that you have uninterrupted care, we have disenrolled you from **[Plan name]**. You can now receive medical care from any provider who sees OHP clients on a fee-for-service basis.

If you were already seeing a provider through **[Plan name]** you can ask if that provider sees OHP clients on a fee-for-service basis. If they do, you will be able to continue seeing them. If they do not, or if you do not have a provider, contact the OHP Care Coordination Program at 1-800-562-4620.

If you are in a Mental Health Plan, you will stay in that Plan.

If you are in a Dental Plan, you will stay in that Plan.

CAREAssist will continue to provide the support services you have been receiving.

We recently mailed you a new OHP Coverage Letter. The section titled "Managed Care/TPR enrollment" on page 3 shows that you are not enrolled in a Medical Plan.

### **What this means to you**

- Your OHP enrollment and medical benefits are not changing.
- You will now receive your medical services from any provider who sees OHP clients on a fee-for-service basis.

**Questions?**

If you have questions or concerns about this information:

- Call OHP Client Services at 1-800-273-0557.
- Call the OHP Branch at 1-800-699-9075 if you need this letter in another language or another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.
- For TTY service: Dial 711.

Making sure you have the information you need to receive your health care is important to us. We regret and apologize for any confusion this change may cause you.

Sincerely

A handwritten signature in cursive script that reads "Jon C. Pelkey".

Jon Pelkey, Manager  
Quality Improvement and Medical Section  
Division of Medical Assistance Programs, OHA



Date

First/Last Name  
Address  
City, OR 97xxx

Dear **First Name**,

This letter is to tell you about a recent change to your Oregon Health Plan (OHP) managed care enrollment.

Your medical benefits are not changing; however, when you enrolled in the Oregon Health Plan you were assigned to **[Plan name]** Medical Plan. Unfortunately, this was an error.

To correct this error and ensure that you have uninterrupted care, we have disenrolled you from **[Plan name]**. You can now receive medical care from any provider who sees OHP clients on a fee-for-service basis.

- If you were already seeing a provider through **[Plan name]** you can ask if that provider sees OHP clients on a fee-for-service basis. If they do, you will be able to continue seeing them. If they do not, or if you do not have a provider, contact the OHP Care Coordination Program at 1-800-562-4620.
- This does not change any services or treatment you are receiving from the Multnomah County Clinic. If you are currently seeing a provider with the Multnomah County Clinic you may continue to see that provider.

CAREAssist will continue to provide the support services you have been receiving.

If you are in a Mental Health Plan, you will stay in that Plan.

If you are in a Dental Plan, you will stay in that Plan.

We recently mailed you a new OHP Coverage Letter. The section titled "Managed Care/TPR enrollment" on page 3 shows that you are not enrolled in a Medical Plan.

**What this means to you**

- Your OHP enrollment and medical benefits are not changing.
- You will now receive your medical services from any provider who sees OHP clients on a fee-for-service basis.
- You can continue to see providers at the Multnomah County Clinic.

**Questions?**

If you have questions or concerns about this information:

- Call OHP Client Services at 1-800-273-0557.
- Call your worker if you need this letter in another language or another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.
- For TTY service: Dial 711.

Making sure you have the information you need to receive your health care is important to us. We regret and apologize for any confusion this change may cause you.

Sincerely,



Jon Pelkey, Manager  
Quality Improvement and Medical Section  
Division of Medical Assistance Programs, OHA