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Authorized Signature

Number: OMAP-IM-05-006

Issue Date: 01/18/05

Effective Date: 02/01/05

Topic: Medical Benefits

Subject: OHP Clients to be Enrolled in Managed Care

Applies to (check all that apply):

- All DHS Employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Health Services
- Seniors and People with Disabilities
- Other (please specify): DHS staff and others identified on the SPD, CAF, OMHAS and OMAP transmittal lists

Message:

The attached notice will be mailed to approximately 1,100 households this week.

These clients live in mandatory managed care areas and are required to be enrolled in a medical plan. The notice informs them they are being enrolled into a medical plan on February 1, 2005. They may change medical plans in the first 30 days of their enrollment and are instructed to call their workers to do so. Clients with continuity of care issues may be exempted.

If you have any questions about this information, contact:

Contact(s):	Jennifer McKinley		
Phone:	(503) 945-6491		
E-mail:	jennifer.mckinley@state.or.us	Fax:	(503) 947-5221

On February 1, 2005, OMAP will enroll affected members of your household in a Medical Plan. OMAP has contracted with this Plan to manage and provide your medical care.

This Means

Your health care benefits will not change; however, you will receive them through your Medical Plan.

Your Plan will send you information about itself and a list of Primary Care Providers (PCP).

Your PCP will:

- Provide or coordinate your medical services and treatments;
- Keep your medical records in one place to give you better service;
- Provide access for you to medical care 24 hours a day, 7 days a week;
- Be your first contact when you need medical care;
- Arrange for your specialty or hospital care when needed.

Benefits of managed care:

- You and your family will have guaranteed access to health care.
- You will have access to health care 24 hours a day, 7 days a week.

Medical Care ID

Field 8 of your February OMAP Medical Care ID will list you and your household's new Medical Plan.

30 Day Enrollment Change

Depending on the area of the state you live in, you may be able to change Medical Plans in the first 30 days of enrollment in your new plan. Call your worker about your options.

Delayed Enrollment

Your enrollment may be delayed if you are scheduled for surgery or are in the last 3 months of a pregnancy. Call your worker to do this.

Native Americans are not required to be in managed care

If you are a Native American, you can choose to be enrolled in a Medical Plan or receive medical services from any provider who will take your OMAP Medical Care ID. *Contact your worker if you do not want to be enrolled in a Plan.*

Questions?

 **Call your caseworker** - if you need this notice in a larger print size or different format, or if you wish to change Medical Plans.

 **Call the OMAP Client Advisory Services Unit** at 1-800-273-0557 -- if you have questions about this notice.

