DHS Oregon Department of Human Services

Division of Medical Assistance Programs

Information Memorandum Transmittal

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DMAP Research, Education and Development

Authorized Signature

Number: DMAP-IM-08-182
Issue Date: 11/26/2008

Topic: Medical Benefits

Subject: New Medical Care IDs coming in December

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, AMH and DMAP transmittal lists

Message:

The following announcement will be mailed to Oregon Health Plan (OHP) clients with their Medical Care ID for December. This will be the last monthly, old-style, letter-size Medical Care ID clients will receive. Clients found eligible December 5 or before will receive the old-style Medical Care ID. **All** clients will receive a new Medical Care ID and coverage letter in December. Clients should look for the bright yellow envelope. All those who work with OHP clients should know the following:

New Medical Care ID

The new ID cards will:

- List only the client's name, the client's ID (prime) number and the card's date of issue.
- Be the size of a business card and printed on heavy paper.
- Be issued only once – new cards will be issued only if a client's name changes or if the client requests a new one.
- **Not** be a guarantee of eligibility – Providers will have to use the new Provider Web Portal and Automated Voice Response (AVR) system to verify a client's eligibility on each date of service.

New Coverage Letter

The Coverage Letters will:

- List the same information that is on the old-style, letter-size Medical Care ID, except for the dates of coverage.
- List every person in the household with the same case number who is eligible for OHP (foster children have their own medical case numbers).
- Be issued only once, unless information on the coverage letter changes or a client requests a new one (new coverage letters are sent automatically with new Medical Care ID cards).

If you have any questions about this information, contact:

Contact(s):	Tanya Allen, Client and Provider Education Unit
E-mail:	tanya.s.allen@state.or.us

DHS Oregon Department of Human Services

Important Information

New Medical Care ID coming!

Look for the yellow envelope

In the coming month, you will receive your new Medical Care ID in a yellow envelope. **Do not throw it away.** You will not get another ID unless your name changes or you request one. If you do not receive your new Medical Care ID card by January 2, call Client Services at 800-273-0557.

New Medical Care ID

The new Medical Care ID will be the size of a business card and will list only your name, client number and the date it was issued (*see sample on next page*).

Everyone who is eligible in your household will receive their own Medical Care ID.

You will need to take your new Medical Care ID to all health care appointments. Providers will use the information on the Medical Care ID to check your eligibility.

Coverage letter

In addition to your new Medical Care ID, the yellow envelope will have your coverage letter. **Keep your coverage letter.** It will have the information that used to be on the old-style, letter-size Medical Care ID, such as your worker's ID and phone number, your benefit package, copay requirements and managed care enrollment (*see sample on next page*).

The coverage letter will list coverage information for everyone in your household who gets a Medical Care ID.

The coverage letter is just for your information. You will not need to take it to your health care appointments.

We will send you a new coverage letter only if you request one or if the information on the letter changes.

This is your last letter-size Medical Care ID

The December Medical Care ID is the last letter-size Medical Care ID you will receive. Continue using this ID through the end of the month. Start using your new Medical Care ID card in January. Remember, new IDs will be mailed one time, not every month.

Questions and answers

See the questions and answers listed on the last page of this letter for more information about the new Medical Care ID and coverage letter.

Pharmacy computer system changes

Between November 28 and December 9, the Oregon Health Plan is changing its pharmacy computer system. During this time, filling a prescription may take a little longer than usual. **To avoid possible delays**, **be sure to bring your December Medical Care ID with you to the pharmacy**. If possible, you may wish to wait until after December 9 to refill your prescriptions.

The new computer system does not change your pharmacy benefits.

Questions?

- If you have any questions about this notice, call the Client Services Unit at 800-273-0557.
- If you need this information in another language or different format, call your worker.

Oregon HEALTH PLAN

DMAP CAPE
11/08 08-846

New Medical Care ID and Coverage Letter
Questions and Answers

Medical Care ID

Q When will I get my new Medical Care ID?

A The new Medical Care IDs will be mailed during the month of December 2008.

Q What should I do if I don't get my new Medical Care ID by January 2?

A Call Client Services at 800-273-0557.

Q Will you send me a new Medical Care ID every month?

A No. After we send you your new Medical Care ID, we will not send another one unless your name changes or you request one.

Q Will my new Medical Care ID be plastic?

A No. Your new Medical Care ID will be printed on heavy paper and will be the size of a business card.

Q Will I receive one Medical Care ID for my whole family, like I do now?

A No. Everyone who is eligible in your household will receive their own Medical Care ID.

Q What do I do if my Medical Care ID is lost or destroyed?

A Call your worker or Client Services at 800-273-0557 to get a new one.

Coverage Letter

Q Do I have to take my coverage letter to my health care appointments?

A No. The coverage letter is just for your information. You only need to take your Medical Care ID to your health care appointments.

Q Will you send me a new coverage letter every month?

A No. After we send your first coverage letter, we will send a new one only if you request one or if the information on the letter changes.

Q Will everyone in my family receive their own coverage letter?

A No. You will receive one coverage letter that lists coverage information for everyone in your household who is eligible.

Q How will I know what managed care plan I am enrolled in or what my worker's phone number is?

A This information will be included on your coverage letter. Your coverage letter gives you the same information that is on your current Medical Care ID except for the dates your coverage begins and ends.

Sample coverage letter

Page 1 – Explains why you received the letter and gives effective dates for when your coverage will begin.

Page 2 – Lists coverage information for everyone who is eligible in your household.

Page 3 – Lists Managed Care/TPR enrollment.

Page 4 – The front/back of your Medical Care ID.

Page 1

Coverage Letter

5503 XX#### XX P2 EN AT
PO BOX #####
SALEM, OR 97309
DO NOT FORWARD: RETURN IN 3 DAYS

Branch name/Division: OHP/CAF

Worker ID/Telephone: XX/503-555-5555

JOHN DOE
123 MAIN ST

HOMETOWN OR 97000

Keep this letter!

This letter explains your Oregon Health Plan (OHP) benefits.

This letter is just for your information. You do not need to take it to your health care appointments.

We will only send you a new letter if you have a change in your coverage, or if you request one. To request a new letter call your worker.

Welcome to the Oregon Health Plan.

This is your new coverage letter and Medical ID. Keep this letter!

This letter lists coverage information for everyone in your household who is eligible for medical benefits.

We will send you a new letter if you request one or if any of the information in this letter changes.

The enclosed yellow sheet includes a chart that describes the services covered for each benefit package and a list of helpful phone numbers.

If any of the information in this letter is incorrect, call your worker right away. Your worker's phone number is listed at the top of this page just above your name and address.

The information in this letter is effective as follows:

Doe, John – 12/09/2008
Doe, Jane – 12/09/2008
Doe, Timothy – 12/09/2008
Doe, Kathy – 12/09/2008

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The following chart lists coverage information for everyone who is eligible in your household. See the enclosed Benefit Package chart for information about what each benefit package covers. Letters in the Managed Care/TPR enrollments section refer to the plans listed in the chart on the next page.

Name	Date of birth	Client ID #	Copays?	Benefit Package	Managed Care/ TPR enrollment
John Doe	01/01/1968	XX1234XX	No	OHP Standard	A, B, C
Jane Doe	02/01/1968	XX1235XX	No	OHP with Limited Drug	A, B, C, G, H, I
Timothy Doe	03/01/2006	XX1236XX	No	OHP Plus	B, C, D, F
Kathy Doe	04/01/2007	XX1237XX	No	OHP Plus	B, C, E, G, H

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Managed Care/TPR enrollment

Plan Information	Plan Information	Plan Information
A DMAP Medical Plan Care Oregon 800-555-5555	**B** DMAP Dental Plan Managed Dental Care of Oregon 866-555-5555	**C** DMAP Mental Health Plan Clackamas Mental Hlth Org 888-555-55555
D Private Maj Med/Rx/Dent/Vis Blue Cross of Oregon Pol# 12345678 ABC123456789	**E** DCM-FFS Disease Management DCM Care Enhance 1-800-711-6687 DCM-PGM	**F** DMAP Pharmacy Walgreen
G Medicare Part-A Medicare NW - Part A	**H** Medicare Part-B Medicare-B/BC N Dakota	**I** Medicare Part-D Has Part D
J	**K**	**L**

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DHS Medical Care ID

John Doe

Client ID #:
XX1234XX

Date card issued:
12/09/08

Clients – Coverage questions? Call 800-273-0557.

Providers – This card does not guarantee coverage. Verify coverage at: www.or-medicaid.gov or by calling 866-692-3864. Billing questions? Call 800-336-6016.

DHS Medical Care ID

Jane Doe

Client ID #:
XX1235XX

Date card issued:
12/09/08

Clients – Coverage questions? Call 800-273-0557.

Providers – This card does not guarantee coverage. Verify coverage at: www.or-medicaid.gov or by calling 866-692-3864. Billing questions? Call 800-336-6016.

DHS Medical Care ID

Timothy Doe

Client ID #:
XX1236XX

Date card issued:
12/09/08

Clients – Coverage questions? Call 800-273-0557.

Providers – This card does not guarantee coverage. Verify coverage at: www.or-medicaid.gov or by calling 866-692-3864. Billing questions? Call 800-336-6016.

DHS Medical Care ID

Kathy Doe

Client ID #:
XX1237XX

Date card issued:
12/09/08

Clients – Coverage questions? Call 800-273-0557.

Providers – This card does not guarantee coverage. Verify coverage at: www.or-medicaid.gov or by calling 866-692-3864. Billing questions? Call 800-336-6016.