

Jon Pelkey, Manager
DMAP Quality Improvement & Medical Section

Authorized Signature

Number: DMAP- IM-10-073

Issue Date: 06/07/2010

Topic: Medical Benefits

Subject: Staff information: Fax forms for CareOregon disenrollment for families served by Children's Health Alliance providers

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): DMAP staff, plans, and DHS field staff in Multnomah, Washington, Clackamas, Marion, Clatsop, Columbia and Yamhill counties |

Message:

To comply with Centers for Medicare and Medicaid Services (CMS) standards, DMAP Client Services will only accept disenrollment requests from Children's Health Alliance (CHA) clinics when the requests are submitted on one of the following forms. This change is effective Monday, June 7.

The forms are based on the client letters sent to CareOregon families who have seen a CHA provider in the past year. For more information and a phone script about these letters, see [DMAP IM 10-058](#).

Client Services is faxing copies of these letters/forms to all clinics who have submitted fax requests related to the CHA transition.

Process for CHA-related enrollment changes:

If field staff receive a call from a client who wants to change their medical plan enrollment because of the CHA transition, **do not change their enrollment**. Instead:

- Send a daily list of the requests to Kris Kersine, Client Services Manager at kristine.kersine@state.or.us. Include the client's case ID and county;
- Have them complete the appropriate form, then fax the completed form to Client Services; or
- Have them call Client Services at 1-800-273-0557 (TTY 711).

All enrollment changes for these clients must go through Client Services so that DMAP can track the number of enrollment changes due to the CHA transition.

For more information about the transition, you can also read the frequently asked questions at www.oregon.gov/DHS/healthplan/docs/cha-fc-faq-0510.pdf.

If you have any questions about this information, contact:

Contact(s):	Tom van der Veen, DMAP Delivery Systems Manager		
Phone:	503-945-6349	Fax:	503-947-5221
E-mail:	tom.vanderveen@state.or.us		

You have a choice to make

About your CareOregon enrollment

On July 1, 2010, your children's primary care pediatrician will no longer serve CareOregon members. Your children's primary care pediatrician now serves Oregon Health Plan (OHP) members who are enrolled in FamilyCare.

Your family's health care benefits will not change; however, you have a choice to make about who you receive your OHP medical benefits from. OHP will continue to cover dental and mental health services through your current plans and providers.

You have two options: 1) You may do nothing and stay with CareOregon, or 2) you may choose to move to FamilyCare so that you can keep your children's current primary care pediatrician.

Stay with CareOregon:

You will need to choose a new primary care provider for your children; but all of your other medical and vision care providers will stay the same.

If you want to stay with CareOregon, you don't need to do anything. CareOregon will send you information about choosing a primary care provider for your children. You may also call CareOregon Customer Service for help (see other side of this letter).

Move to FamilyCare:

You will be able to keep your children's primary care pediatrician. Your family will receive medical benefits through FamilyCare. However, you may have to change your other medical providers. Ask your other providers if they accept FamilyCare.

If anyone in your family has Medicare, they may need to change their Medicare Advantage Plan to FamilyCare's plan.

If you want to change to FamilyCare:

- Complete and return the information below in the enclosed pre-paid envelope; or
- Call OHP Client Services at 1-800-273-0557 (TTY 711).

Please complete and return the form on the other side of this letter. Questions?

 **Call OHP Client Services** at 1-800-273-0557 if you have questions about changing medical plans.

 **Call CareOregon Customer Service** at 1-800-224-4840 with questions about changing your CareOregon provider. Select Option 4 for a Customer Service Representative who can help you select a new primary care provider for your children.

 **Call FamilyCare** at 1-800-458-9518 with questions about available providers.

 **Call your local Senior and Disabled Services Office** for help changing Medicare Advantage Plans.

 **Call your worker** if you need this letter in another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.

 **Foster parents: Call your local DHS office** if you have questions about changing medical plans.

 **For TTY service:** Call 711.

CareOregon Disenrollment Request

Children's Health Alliance transition for Marion and Clatsop county households

To: Kris Kersine, Client Services Unit
503-945-6898 (fax); 800-273-0557 (phone)

Confidentiality Notice: The information contained in this facsimile may be confidential and legally privileged. It is intended only for use of the recipient named. If you are not the intended recipient, you are hereby notified that the disclosure, copying, distribution, or taking of any action in regards to the contents of this fax – except its direct delivery to the intended recipient – is strictly prohibited. If you have received this fax in error, please notify the sender immediately and destroy this cover sheet along with its contents, and delete from your system, if applicable.

To disenroll from CareOregon and change your plan to FamilyCare, complete and return this form to DHS. Once DHS processes your request, you will receive an updated coverage letter; until then, you will receive medical services through CareOregon. FamilyCare will send you information about itself and a list of providers.

Household information

Patient Names	Client IDs (as listed on DHS Medical Care ID)
Patient Representative (e.g., parent or guardian)	
Mailing Address	
City, State, ZIP	

Disenrollment request - To be completed by patient representative only

I would like to change my family's medical plan to FamilyCare. I understand that by making this change, I may have to change other providers for me and other family members. My mental health and dental care plans/providers will not change.

Do you have an appointment with your child's current doctor after June 30? This information will help DHS make sure the change occurs before the appointment.

Yes, my appointment is scheduled for:

No, I don't have an appointment.

_____ (Date of appointment)

Representative Signature _____

Date _____

You have a choice to make

About your CareOregon enrollment

On July 1, 2010, your children's primary care pediatrician will no longer serve CareOregon members. Your children's primary care pediatrician now serves Oregon Health Plan (OHP) members who are enrolled in FamilyCare.

Your family's health care benefits will not change; however, you have a choice to make about who you receive your OHP medical and mental health benefits from. OHP will continue to cover dental services through your current plan and providers.

You have two options: 1) You may do nothing and stay with CareOregon, or 2) you may choose to move to FamilyCare so that you can keep your children's current primary care pediatrician.

Stay with CareOregon:

You will need to choose a new primary care provider for your children; but all of your other medical, mental health and vision care providers will stay the same.

If you want to stay with CareOregon, you don't need to do anything. CareOregon will send you information about choosing a primary care provider for your children. You may also call CareOregon Customer Service for help (see other side of this letter).

Move to FamilyCare:

You will be able to keep your children's primary care pediatrician. Your family will receive both medical and mental health benefits through FamilyCare.

- However, you may have to change your current mental health provider and other medical care providers. Ask your other providers if they accept FamilyCare.
- If anyone in your family has Medicare, they may need to change their Medicare Advantage Plan to FamilyCare's plan.

If you want to change to FamilyCare:

- Complete and return the information below in the enclosed pre-paid envelope; or
- Call OHP Client Services at 1-800-273-0557 (TTY 711).

Please complete and return the form on the other side of this letter. Questions?

-  **Call OHP Client Services** at 1-800-273-0557 if you have questions about changing medical plans.
-  **Call CareOregon Customer Service** at 1-800-224-4840 with questions about changing your CareOregon provider. Select Option 4 for a Customer Service Representative who can help you select a new primary care provider for your children.
-  **Call FamilyCare** at 1-800-458-9518 with questions about available providers.

-  **Call your local Senior and Disabled Services Office** for help changing Medicare Advantage Plans.
-  **Call your worker** if you need this letter in another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.
-  **Foster parents: Call your local DHS office** if you have questions about changing medical plans.
-  **For TTY service:** Call 711.

CareOregon Disenrollment Request

Children's Health Alliance transition for Tri-County households in FamilyCare service area

To: Kris Kersine, Client Services Unit
503-945-6898 (fax); 800-273-0557 (phone)

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To disenroll from CareOregon and change your plans to FamilyCare, complete and return this form to DHS. Once DHS processes your request, you will receive an updated coverage letter; until then, you will receive medical services through CareOregon. FamilyCare will send you information about itself and a list of providers.

Household information

Patient Names	Client IDs (as listed on DHS Medical Care ID)
Patient Representative (e.g., parent or guardian)	
Mailing Address	
City, State, ZIP	

Disenrollment request - To be completed by patient representative only

I would like to change my family's medical and mental health plans to FamilyCare. I understand that by making this change, I may have to change other providers for me and other family members. My dental care plan/providers will not change.

Do you have an appointment with your child's current doctor after June 30? This information will help DHS make sure the change occurs before the appointment.

Yes, my appointment is scheduled for: _____

No, I don't have an appointment. *(Date of appointment)*

Representative Signature _____ Date _____

You have a choice to make

About your CareOregon enrollment

On July 1, 2010, your children's primary care pediatrician will no longer serve CareOregon members. Your family's health care benefits will not change; however, you have a choice to make about how you receive your Oregon Health Plan (OHP) medical benefits.

OHP will continue to cover dental and mental health services through your current plans and providers.

You have two options: 1) You may do nothing and stay with CareOregon, or 2) you may choose to disenroll from CareOregon's medical plan so that you can keep your children's current primary care pediatrician.

Stay with CareOregon:

You will need to choose a new primary care provider for your children; but all of your other medical and vision care providers will stay the same.

If you want to stay with CareOregon, you don't need to do anything. CareOregon will send you information about choosing a primary care provider for your children. You may also call CareOregon Customer Service for help (see other side of this letter).

Disenroll from CareOregon:

Your family may have to choose new health care providers. Ask your current health care providers if they accept "open card" (or fee-for-service) OHP clients. If they accept "open card" clients, you can still see them.

You will no longer have guaranteed access to medical care through an OHP medical plan. You will need to arrange for your own specialty care, hospital care, and medical transportation.

If you want to disenroll from CareOregon:

- Complete and return the information below in the enclosed pre-paid envelope; or
- Call OHP Client Services at 1-800-273-0557 (TTY 711).

Please complete and return the form on the other side of this letter. Questions?

-  **Call OHP Client Services** at 1-800-273-0557 if you have questions about changing your medical plan enrollment.
-  **Call CareOregon Customer Service** at 1-800-224-4840 with questions about changing your CareOregon provider. Select Option 4 for a Customer Service Representative who can help you select a new primary care provider for your children.
-  **Call your local Senior and Disabled Services Office** for help changing Medicare Advantage Plans.
-  **Call your worker** if you need this letter in another format, such as (but not limited to) large print, Braille, audio recordings, Web-based communications and other electronic formats.
-  **Foster parents: Call your local DHS office** if you have questions about changing your medical plan enrollment.
-  **For TTY service:** Call 711.

CareOregon Disenrollment Request

Children's Health Alliance transition for households in Yamhill and Columbia counties, and Washington County ZIPs not served by FamilyCare

To: Kris Kersine, Client Services Unit
503-945-6898 (fax); 800-273-0557 (phone)

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To disenroll from CareOregon, complete and return this form to DHS. Once DHS processes your request, you will receive an updated coverage letter; until then, you will receive medical services through CareOregon.

Household information

Patient Names	Client IDs (as listed on DHS Medical Care ID)
Patient Representative (e.g., parent or guardian)	
Mailing Address	
City, State, ZIP	

Disenrollment request - To be completed by patient representative only

I would like to disenroll from CareOregon's medical plan. I understand that by making this change, I may have to change other providers for me and other family members. My mental health and dental care plans/providers will not change.

Do you have an appointment with your child's current doctor after June 30? This information will help DHS make sure the change occurs before the appointment.

Yes, my appointment is scheduled for:

No, I don't have an appointment.

_____ (Date of appointment)

Representative Signature _____ Date _____