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Authorized Signature

Number: DMAP-IM-13-084

Issue Date: 12/26/2013

Topic: Medical Benefits

Subject: Client letter: Breast and Cervical Cancer Treatment Program (BCCTP) clients' dental care going to CCOs effective February 1, 2014

Applies to:

- | | |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Aging and People with Disabilities |
| <input checked="" type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Other (please specify): DHS and OHA staff and others identified on the APD, CAF, AMH and DMAP transmittal lists |
| <input type="checkbox"/> County DD Program Managers | |

Message:

Effective February 1, 2014, a number of coordinated care organizations (CCO) will incorporate dental care into their network for members enrolled in OHP through the Breast and Cervical Cancer Treatment Program (BCCTP), formerly known as BCCM.

During the last week of December 2013, we will send the attached letter to approximately 480 affected BCCTP case addresses telling clients that they will receive all of their medical, mental health, and dental care through their CCO. These clients will be moved from CCOB to CCOA so MMIS will show CCOA effective 2/1/14. Their benefit level will not change.

Clients will also receive notification of this change directly from their CCO, and a Coverage Letter (via MMIS) when the enrollment change takes place. Coverage letters sent as a result of this roll-over will list the OHP Customer Service (branch 5503) as the return address.

DMAP will process this change using the Stop Reason RO – Roll-over code.

If you have any questions about this information, contact:

Contact(s):	Deborah Weston, Policy Analyst, DMAP Policy and Program		
Phone:	503-945-5796	Fax:	503-947-1119
E-mail:	deborah.g.weston@state.or.us		



December xx, 2013

Case number:

**Your CCO will cover your dental health care starting
February 1, 2014**

Dear Oregon Health Plan client,

Your coordinated care organization (CCO), <CCO Name> will begin covering your dental care on February 1, 2014. <CCO Name> will send you more information soon.

Your Oregon Health Plan benefits will stay the same.

This means your CCO will coordinate your dental health care along with your medical and mental health care making it easier for your providers to work together for your care. There will be no change to your coverage or dental benefits. All of the same services will still be covered.

There will be no break in your care

Most local dentists are part of your CCO plan. It is likely the dentist you have today can be your dentist through your CCO. We will work with you so that there is no break in your care.

Prior authorization for urgent dental care services

If you have been pre-approved for dental services, your CCO will work with you to transition your care. Your current appointments will not change until your CCO works with you to transition your care.

ID card

You can still use your Oregon Health ID card or DHS Medical Care ID card. Both cards are accepted.

Medicare and Medicaid members

Medicare benefits and coverage will not change. If you receive both Medicare and Medicaid, you do not have to be in a CCO. You can ask to change your enrollment to fee-for-service at any time. This means that you can see any provider who accepts Oregon Health Plan clients. They must also accept Medicare coverage since Medicare is the primary payer before OHP. Please call your case manager if you have any questions..

American Indians and Alaska Natives

If you are an American Indian or an Alaska Native you do not have to be in a CCO. You can ask to change your enrollment at any time by calling **1-800-699-9075**.

Why this is happening

Most CCOs are now adding dental care to their coverage for OHP clients. Dental care is important for your overall health. This change will make it easier for your providers to work together for your care.

Questions

- Call OHP Customer Service at 1-800-699-9075 (available from 7 a.m. to 6 p.m., Monday through Friday) if you need this letter in another language or format, such as large print, Braille, audio recording, Web-based communications, and other electronic formats.
- Medicare recipients who receive benefits from Area Agency on Aging or Aging and People with Disabilities: Call your local office.
- Foster parents: Call your local Child Welfare Office.
- For TTY service, dial 711.
- For questions about benefits, contact Client Services Unit at 1-800-273-0557, available Monday through Friday, 8:00 a.m. - 12:30 p.m. and 1:30 - 5:00 p.m.
- For questions about eligibility, contact the Office of Client and Community Services at 1-800-273-0557.

If you have any questions at all, please call us. We want to make sure that you have the information you need.



Judy Mohr Peterson
Oregon Medicaid Director