



# Department of Medicaid

## Medicaid Managed Care Enrollment Request Form

**COMPLETE THIS FORM AND MAIL TO:**

Ohio Medicaid Consumer Hotline  
505 South High Street, Suite 200  
Columbus, Ohio 43215  
or **FAX TO:** (614) 280-0977  
**QUESTIONS?** Call (800) 324-8680

1. Choose the Medicaid managed care plan you wish to enroll in:

[Check the box next to the plan you are selecting]

Buckeye       CareSource       Molina       Paramount       United

2. Your information

[Please fill in the spaces below. Be sure to print clearly.]

|                                 |                                 |  |
|---------------------------------|---------------------------------|--|
| Your Name [first, middle, last] |                                 | Medicaid Id or Social Security Number: |
| Home address:                   |                                 |  |
| City:                           | Zip Code:                       | County:                                |
| Emergency contact name:         | Emergency contact phone number: |  |

3. Tell us where you usually get health services:

[Please print clearly.]

|   |                      |
|---|----------------------|
| Name of primary care provider, clinic, or health center |                      |
| Primary care doctor phone number:                       |                      |
| Current medical conditions:                             |                      |
| Scheduled medical appointments or treatment:            | Date of appointment: |

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **What is a managed care plan?**

A managed care plan is a private health care insurance company, which works with the Ohio Department of Medicaid, to coordinate your care, provide care management, and provide your health care needs. Some of the benefits you will receive at no additional cost are:

- Nurse advice line, available 24 hours a day, 7 days a week.
- Care management to help you coordinate your medical care.

Some managed care plans offer additional benefits, such as:

- Transportation to and from medical and Medicaid renewal appointments.
- No or lower co-pays for prescriptions, dental services, routine eye exams, glasses, and non-emergency services provided in a hospital emergency room.

## **Do I have to be in a managed care plan?**

- Most individuals on Medicaid must be in a managed care plan. Enrollment is optional if you are a member of a federally recognized Indian tribe or are receiving waiver services from the Ohio Department of Developmental Disabilities.
- You cannot enroll in managed care plan if you are enrolled in the Program of All-Inclusive Care for the Elderly (PACE) or are living in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID).

## **What happens next?**

Your managed care plan will send you your member ID card and a member handbook. Your plan will also give you access to their health care provider directory. You will get health care from doctors and hospitals that work with your plan.

If your doctor does not work with your managed care plan, you can talk to your doctor about becoming part of the plan's network. If you have a medical appointment or a scheduled service and your health care provider does not work with your plan, call your managed care plan right away.

## **Where can I get more information?**

For more information or if you have questions call the Ohio Medicaid Consumer Hotline at 800-324-8680 Monday through Friday 7 a.m. to 8 p.m. and Saturday 8 a.m. to 5 p.m. or online at [www.ohiomh.com](http://www.ohiomh.com).