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Sept. 22 is deadline to return OHP-Standard applications mailed in August

Monday is the deadline for low-income Oregonians who received applications in August for the Oregon Health Plan's Standard benefit package to return them to the Oregon Department of Human Services.

Applications may be mailed to the DHS health plan office in Salem or may be submitted to any DHS field office. People who have questions or need assistance may call 1-800-699-9075.

"So far, nearly 5,900 low-income Oregonians who returned OHP-Standard applications have been found eligible for medical coverage," said Jim Edge, state Medicaid director in DHS. "To ensure they are considered for eligibility, people should return their applications by the deadline even if they are still obtaining needed income or citizenship documents."

Edge said DHS will hold applications and wait for required documents if applicants are making a good-faith effort to obtain them.

OHP-Standard now covers more than 26,200 people in a program designed to provide health care coverage to adults who do not qualify for traditional Medicaid. DHS has mailed 27,000 applications since March 5 and will mail a final round of 3,000 applications Oct. 7. Applications are mailed to people whose names are randomly drawn from a state reservation list that was open for five weeks last winter.

The OHP-Standard budget, supported by taxes on hospitals and Medicaid managed care plans, federal matching funds and client premiums, will support a monthly average of 24,000 adults during the two-year budget period that ends June 30,

2009. Because fewer than 24,000 were covered during the first half of the biennium, more than that can be covered during the second half.

More than 14,000 OHP-Standard applications have been returned so far. The most frequent reasons applicants are found ineligible is their income over a three-month period averages more than the federal poverty level (\$867 for an individual or \$1,467 for a household of three, for example).

OHP-Standard covers physician visits, prescription drugs, mental health and chemical dependency services, emergency medical treatment and limited dental, hospital and vision services. OHP-Standard clients pay monthly premiums ranging from nothing to \$20, depending on household income and size.

Meanwhile, the Oregon Health Plan's Plus benefit package is always open to low-income people who are 65 or older, blind, disabled, pregnant, younger than 19 or who qualify for Temporary Assistance for Needy Families. Applications for OHP-Plus are available by calling 1-800-359-9517 weekdays between 8 a.m. and 5 p.m., Pacific time.

In all, the Oregon Health Plan covers approximately 430,000 Oregonians, 56 percent of whom are children and adolescents.

An estimated 576,000 of Oregon's 3.7 million residents have no health insurance. To expand health care coverage to more Oregonians, Governor Ted Kulongoski last year named a seven-member board that recently issued draft recommendations. The panel, created by Senate Bill 329 and known as the Oregon Health Fund Board, is currently conducting a series of 10 community meetings across the state and has scheduled a Sept. 30 town hall meeting in Portland. Details are on the board's Web site at <http://www.oregon.gov/OHPPR/HFB/index.shtml> on the Internet.

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