

Important Information

Change in OHP premiums

Beginning June 1, 2006, the Department of Human Services (DHS) is changing who is charged premiums for Oregon Health Plan (OHP) Standard coverage. Clients with an income of 10 percent or less of the Federal Poverty Level (FPL) will no longer have to pay premiums.

The last time you applied for OHP coverage, your income was 10 percent or less of the FPL.

What this means to you

Beginning June 1, DHS will stop charging you a premium for your OHP Standard coverage. You will no longer receive a premium billing statement. However, if you reapply for OHP coverage and your income goes up, you may be charged a premium again.



OHP Plus clients do not pay premiums

You may qualify for OHP Plus coverage if you meet one of the following conditions. Contact your worker if you are or become:

- Pregnant.
- Under age 19.
- Eligible for Temporary Assistance to Needy Families (TANF).
- An SSI recipient.
- Age 65 or older.
- Blind or disabled and receiving income at or below the SSI standard.
- Blind or disabled and receiving DHS-paid long term care services.

American Indian/Alaska Native clients or clients otherwise eligible for benefits through an Indian Health Services program also do not pay premiums. Contact your worker if this applies to you.

Questions?

-  **If you have any questions about this notice** — Call OMAP's Client Advisory Services Unit at 1-800-273-0557, or TTY 1-800-375-2863.
-  **If you need this notice in a larger print size or different format** — Call your worker.