

Medicaid Health Plan Choice

v 11/5/14

Date: _____

As a Medicaid member you can choose how you get your health care. Call **HealthColorado** at 303-839-2120 in the Denver metro area, or 1-888-367-6557 outside metro Denver to choose your Medicaid health plan. The call is free. If you call to choose a plan, you do not need to fill out this form.

*You **MUST** qualify for Medicaid before you make this choice. When you choose a health plan for the first time, you may disenroll from your health plan for any reason in the first 90 days. If you are in the ACC Program or a Medicaid health plan, you can change health plans during your open enrollment period - the two months before the month of your birthday. NOTE: If you are enrolled in the Denver Health Medicaid Choice plan, you can call or submit this form at any time to disenroll if you are seeing a provider who is not part of Denver Health Medicaid Choice.*

My Health Plan Choice is: ACC PROGRAM

My PCP/doctor/clinic is PEAK PEDIATRICS Clinic phone number: 303/996-6005

Medicaid ID# (Include all 7 digits)	SSN or Date of Birth	Print Full Name	Signature of Medicaid Member/ Parent/ Legal Guardian <i>(By signing this I confirm that I am the Parent/Legal Guardian)</i>	HC Entry

Does anyone listed above need any medication, therapy or medical care in the next two months? YES

If yes, name _____

Is anyone pregnant? _____ if yes, name _____ Baby due date _____

Current Address: _____

_____ Phone _____

Please fax this form to **HealthColorado** at (303) 832-8352. Or mail to 4500 Cherry Creek Drive South Ste 210 Glendale, CO 80246