



# Member Incentive Form

Use this form if your patient forgets to bring the incentive form we mailed to them. Not all members are eligible. Please be sure your patient is eligible for one of the incentives below.

**Note:** Please do not use this form for CareOregon Advantage members.

## Help our members earn a gift card for selected preventive care:

- **Adolescent immunizations [IMA]** – Age 11 to 13 (\$50 for Metro, \$25 for Columbia Pacific CCO and Jackson Care Connect)
- **Well-child visits [W34]** – Age 3 to 6 (\$15)
- **Childhood immunizations [CIS]** – Age 2 or under (\$50 for Metro, \$25 for Columbia Pacific CCO and Jackson Care Connect)
- **Post-partum visit [PPC]** – 7-84 days after delivery – Metro and Jackson Care Connect only (\$15)
- **Diabetes screenings [DIA]** – Age 18 to 75, with diabetes diagnosis (HbA1c check, eye exam, and nephropathy test) (\$50 for Metro, \$25 for Columbia Pacific CCO and Jackson Care Connect)
- **Flu shot [FLU]** – Columbia Pacific CCO and Jackson Care Connect only (\$10)
- **Annual well visit - children [AWC]** – Age 12 to 21 – Metro and Columbia Pacific CCO only (\$15)
- **COVID-19 vaccine or booster [C19]** – Jackson Care Connect only (\$25)

Member ID number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

### CLINIC fills out this part

Clinic name: \_\_\_\_\_ Date of appointment: \_\_\_\_\_

Reason(s) for visit:  IMA  W34  CIS  PPC  DIA  FLU  AWC  C19

Signature: \_\_\_\_\_

### MEMBER fills out this part (Please print clearly)

**Check one box below to pick which gift card you'd like us to send you.**

Shell Oil\*  Subway  T.J. Maxx  Starbucks  Target  Walmart

Note: If you do not check a box, members will receive a Walmart card.

**Send or bring us this form.**

CareOregon, 315 SW Fifth Ave, Portland OR 97204 or fax it to 503-416-1316.

Your gift card will be mailed to your address in six to eight weeks.

**Receive your gift card sooner.**

Get a link to claim your gift card. Email: \_\_\_\_\_

\* Shell not available as digital gift card.

**See reverse for important information ►**

## Questions?

Please call your health plan's Customer Service 8 a.m. to 5 p.m., Monday through Friday.

**CareOregon:** 503-416-4100 or toll-free at 800-224-4840

**Columbia Pacific CCO:** 503-488-2822 or toll-free at 855-722-8206

**Jackson Care Connect:** 541-500-0567 or toll-free at 855-722-8208

**TTY:** 711

## Frequently asked questions

**How long do I have to do this?** You must receive this service by Dec. 31, 2022. We must receive this completed form by Jan. 31, 2023.

**What if I lose my gift card?** Lost or stolen cards will not be replaced.

**What if I don't get my gift card email? Can you send it to my home?** Once you select email or home, you cannot change that option. If you haven't received your email after four weeks, please call Customer Service.

**Does my provider need to sign this form?** Any clinic staff may sign it.

**What if you have the wrong address for me?** If your address has changed, please call the Customer Service number listed above for your health plan and speak with a person about where to mail your gift card.

**Does everyone get this gift card offer?** No. We identify certain wellness activities of key importance. Our gift card program is based on those activities.

**What if I already did this?** If your provider did not already send in a form for you, please fill in the date of service, and your provider name. No signature is required. We will verify with your provider. Select your gift card and return this form. You may receive only one gift card for this care.

**I got the same letter twice in one year. Can I earn two gift cards?** No. You can only earn one gift card for each activity per year.

The wellness incentive program is available only to our health plan members. Only completely filled-out forms are eligible for the incentive. Incentives are valid only if you are a member at the time of service and as of the postmark date on your return envelope. Lost or stolen gift cards will not be replaced. We may verify the information provided on your form at any time. Gift cards must be used only by our members. Your doctor or a clinic staff member must complete and sign your form before you return it in the prepaid envelope provided. We may discontinue the wellness incentive program at any time, without notice. Members are only eligible to earn one gift card per activity per calendar year. Any wellness incentive received in the form of a gift card is considered gross income for Federal and State tax purposes. If your income, including any wellness incentive gift card received, falls below the tax filing threshold, you are automatically exempt from filing a return.

## Thank you!



## CIF Incentives information

Measure	Code	Member incentive description	Eligible health plan	Eligible members	Eligible CPT
Well-child visit	W34	Children ages 3 to 6 years who had one or more well-child visits with a PCP during the calendar year.	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born from 2016 to 2019	99381-99385, 99391-99395, 99461
Adolescent well visit	AWC	Members ages 12 to 21 years who had one or more well-child visits with a PCP during the measurement year.	Columbia Pacific CCO, Health Share of Oregon	Members born from 2001 to 2010	99381-99385, 99391-99395, 99461
Childhood immunization	CIS	Children who turned 2 years old during the 2022 calendar year and are up to date on Dtap, IPV, MMR, HiB, HepB and VZV vaccines by their second birthday (four DTap, three IPV, one MMR, three HepB, three HiB, one VZV).	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born in 2022	N/A
Adolescent immunizations	IMA	Adolescents who turned 13 years old during the measurement year and had the meningococcal, Tdap and HPV vaccines by their 13th birthday (one MCV4, one Tdap, two to three HPV).	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born in 2009	N/A
Flu vaccine	FLU	Patients 18 years of age and older who receive an influenza vaccination.	Jackson Care Connect, Columbia Pacific CCO	Members at high risk (as identified by CareOregon)	90653, 90662, 90672, 90674, 90682, 90685, 90686, 90687, 90688, 90756
A1C check for adults with diabetes	DIA	Patients 18 to 75 years of age with diabetes who have had their A1C checked in the last six months.	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born from 1947 to 2004	N/A
Postpartum care	PPC	Deliveries of live births between October 8, 2021 and October 7, 2022 that had a postpartum visit on or between seven and 84 days after delivery.	Jackson Care Connect, Health Share of Oregon	Members who gave birth from October 8, 2021 to October 7, 2022	N/A
Preventive dental visit	DEG	Patients ages 1 to 14 years who are continuously enrolled with the CCO for at least six months and have at least one preventive dental service with a dental provider.	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born from 2008 to 2021	CDT codes D1000 to D1999
Oral evaluation for adults with diabetes	DID	Members 18 years or older with type 1 or type 2 diabetes during the 2021 or 2022 calendar years—identified through medical or pharmacy claims—who have an oral evaluation with a dental provider.	Jackson Care Connect, Columbia Pacific CCO, Health Share of Oregon	Members born in or before 2004	CDT codes D0120, D0150, D0180