

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner



Maine Department of Health and Human Services
Office of MaineCare Services, Member Services
11 State House Station
Augusta, Maine 04333-0011
Toll Free: (800) 977-6740; TTY: Dial 711 (Maine Relay)
Fax: (800) 314-8775

MaineCare Member Education Request Form

Type or print clearly

1. Select One: Primary Care Specialty (*Required Information)

2. Date Faxed: _____ *Submitter Fax #: _____

*3. Submitter Name: _____ *Submitter Phone #: _____

*4. Submitter Service Location: _____

5. Primary Care Provider / Service Location: _____

*6. Member Name: _____ *MaineCare ID#:

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*7. Member Date of Birth: _____

8. Select One: Child Adult

9. EDUCATION ~ This MaineCare member needs to be educated regarding:

(Check all that apply and please be specific in the explanation)

- Bringing MaineCare card to appointments
- Copayment(s)
- Following Primary Care Case Management (PCCM) rules
- Following practice rules
- No-showing for appointments (note dates below)
- Obtaining referrals for care (PCCM members only)
- When to access emergency services
- Other (explain below)

Details: _____

10. ACTION REQUIRED ~ This MaineCare member requires action regarding:

- Family has Moved or Gone Elsewhere (MOGE) (PCCM members only)
- Unable to contact patient. Request MaineCare to contact family and encourage them to return to the practice for care.
- Member in danger of discharge within 30 days from practice due to:
 - Three unsuccessful attempts, through different methods, to contact family
 - Other reason: _____

This action may result in the member's permanent discharge from this practice.

Please review MaineCare PCCM discharge policy. Document reasons for discharge, mail formal discharge letter to member, and forward copy of discharge letter to MaineCare PCP Network Services. Using this form does not replace the discharge process.

MaineCare Services ~ PCP Network Services
11 State House Station ~ Augusta, ME 04333-0011
You may FAX completed form to 207-287-3373 or mail completed form to address above.
For questions, email PCP-Network-Services.DHHS@maine.gov