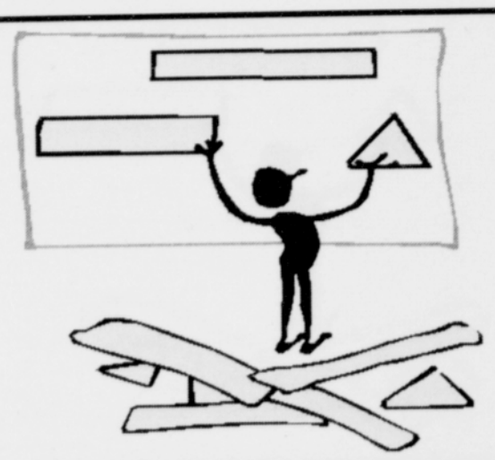
Precontemplative Stage

"Not Even Thinking About Quitting"

Contemplative Stage

"Thinking About Quitting, But Not Planning to Quit Soon"



Desire Stage

"Planning to Quit Using"

Action Stage

"Started a Quit Plan"

Quit Tip #1

Know Where You Are At Before You Begin

Little Bit of Planning Can Go a Long Way Toward a Successful Quit

For more information, contact: DeAnna Pearl, TPEP Coordinator
Siletz Community Health Clinic
541-444-9659
800-648-0449, ext. 1659
or
Oregon Quit Line
877-270-7867

Maintenance Stage

"Has Not Used For an Extended Period of Time"

Contract Health Service Update

by Judy Muschamp, Health Director

The Contract Health Service program for 2008 will begin the year authorizing services within Priorities I, II and high IIIs. What does this mean to you?

Most orthopedic surgeries will continue to be deferred until the end of the year, then reviewed if funding is available. In dental, bridges, crowns and dentures continue to be deferred to the tribal health clinic. Many treatments and specialty care, however, will be reviewed for medical appropriateness by the Gatekeepers Committee and funded if determined to be appropriate.

The easing of priority level funding is made possible by the implementation of Medicare-like rates regulations that went into place July 5, 2007. This law, combined with InterPlan repricing strategies that were already in place, is making life in CHS a little happier because the staff likes being able to say **"yes."**

As always, services must be preauthorized and if you qualify for an alternate resource, you must apply.

Emergency services must be reported to CHS within 72 hours. After-hours consultation as to emergency treatment options is available to Siletz Tribal members by calling the CHS number – 541-444-1236 or 800-628-5720.

Attention Medicare Beneficiaries

Any Siletz Tribal elder or disabled person who qualifies for Medicare can receive reimbursement from the tribe if you sign up and have to pay for Part B Medicare. Part B pays for physician services and non-hospital care.

The standard 2008 monthly premium is $96.40 for Part B. Hospital coverage is provided by Part A at no cost to you.

If you pay a different amount than $96.40, please send the documentation consisting of the Social Security Benefits Statement and a copy of your Medicare card to the Siletz Tribal Health Department, Attn: Wendi Schamp, P.O. Box 320, Siletz, OR 97380.

If you currently are not enrolled in Medicare but think you might qualify, please call Medicare at 1-800-772-1213. January, February and March are open for enrollment and benefits begin in July.

Send us a copy of your benefit statement and Medicare card and we will arrange for monthly reimbursement checks. These funds are **non-taxable**.

Happy New Year from the Siletz Tribal Health Department Staff

DHS: DIVISION OF MEDICAL ASSISTANCE PROGRAMS

The information in this brochure applies only to OHP Standard. OHP Plus and other benefit packages have different eligibility requirements. You already may qualify for coverage through one of these packages. To see if you or anyone in your household is eligible, you must complete an OHP Application. To request an OHP Application, call 1-800-359-9517 or pick one up at your local DHS branch office.

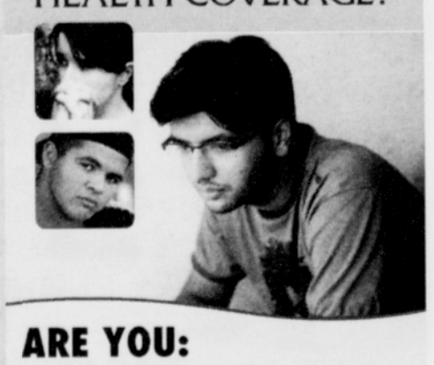
Upon request this publication can be furnished in an alternate format for individuals with disabilities by contacting: DMAP Office at 503-945-5772. Available formats are: large print, Braille, audio tape recording, electronic format and oral presentation.

DHS Oregon Department of Human Services — Oregon Health Plan

Oregon Department of Human Services
500 Summer Street NE
Salem, OR 97301-1097
Telephone: 503-945-5772
www.oregon.gov/DHS

OHP 3205 (Rev. 11/2007)

Tired of not having HEALTH COVERAGE?



ARE YOU:

- ☑ Without health care insurance?
- ☑ Not pregnant?
- ☑ 19 years old or older?
- ☑ An Oregon resident?
- ☑ With an income below 100% of the federal poverty level?

DHS Oregon Department of Human Services — Oregon Health Plan

HOW IT WORKS

If you answered **"yes" to all** of these questions, you may qualify for free or low-cost health insurance coverage through the Oregon Health Plan (OHP).

The Oregon Department of Human Services has received federal approval to enroll approximately 10,000 new adults in OHP Standard, a health insurance program for low-income Oregonians.

Because there are not enough openings to meet everyone's needs, DHS is creating a list of people who would like to apply for OHP Standard. You must place your name on the reservation list during January 28 - February 29, 2008.

DHS will randomly select names monthly from the list starting in March. If your name is selected, DHS will mail you an OHP Standard application form. If you apply and qualify, you will be enrolled in OHP Standard.

DHS wants you to be independent, healthy and safe. The Oregon Health Plan can help make that possible.

GET STARTED

There are three ways to get on the reservation list:

FILL OUT A REQUEST ONLINE.
Visit the OHP Standard reservation list Web site at www.oregon.gov/DHS/open and enter your information electronically.

MAIL A REQUEST.
Complete the OHP Standard reservation request form. Forms are available at DHS or Area Agency on Aging (AAA) offices, county health departments and most major hospitals and clinics.

SIGN UP BY PHONE.
Call 800-699-9075 or 503-378-7800 (TTY) Monday through Friday, 7:00 a.m. to 7:00 p.m. PST. If you cannot call during the hours listed, you can have anyone call for you – they just need your name, date of birth and mailing address.

REMEMBER

You MUST place your name on the reservation list during January 28 - February 29, 2008, if you want to apply for OHP Standard.