

Hepatitis C Case Management Member Opt-Out Form

FAX Request Form to 503-416-1328

Member name:	Member ID #:
Member DOB:	Date:
Treating physician name:	Treating physician phone number:

Before opting out of the Hepatitis C Case Management Program, please read the following sections and initial each one showing you understand the benefits of the program and the risks of opting out.

Initials			
	The goal of case management is to support you to successfully complete your hepatitis-c treatment, including but not limited to:		
	Getting required lab tests		
	Help coordinating your prescriptions		
	Lab test scheduling		
	Transportation		
	Benefits of participating in case management are:		
	 Coordinating with your prescribers, pharmacies, and labs 		
	Education and support in accessing care		
	Support for staying on track with your medications		
	You will be responsible for scheduling, transportation and getting your required lab tests performed as needed.		
	If you don't refill your hepatitis-c medications or take your medication as prescribed by your specialist, including getting your required lab test performed we reserve the right to cancel your prior authorization.		
	You may rejoin the case management program at any time by contacting the CareOregon Pharmacy Department.		
	Your treating physician needs to support your opt-out. Please have them sign below.		
If you still want to opt-out of the Hepatitis C Case Management Program, please sign and date the form below. Fax or mail this form to the fax number or address listed below.			
Member signature: Date:		Date:	

Get help

If you need help or have questions, please contact us. We are open Monday through Friday, 8 am to 5 pm.

Date:

 Mail: CareOregon, Attention Pharmacy Dept. 315 SW Fifth Ave Portland, OR 97240

• Phone: 800-224-4840 or TTY 711

• Fax: 503-416-1328

Treating physician signature