



Office of Client and Community Services/Healthy Kids

INFORMATION MEMORANDUM

Karen House, Medical Eligibility Program Manager, Office of Client and Community Services/Healthy Kids, Oregon Health Authority

Number: SS-IM-12-049

Authorized Signature

Issue Date: 08/15/2012

Topic: Medical Benefits

Subject: Revision to the CAPI Medical Checklist

Applies to (check all that apply):

- All DHS employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Health Services
- Seniors and People with Disabilities
- Other (please specify): CAF SSP transmittal group

Message:

The [CAPI medical checklist](#) has been revised to include Coordinated Care Organizations (CCO). This form can be used as a tool when processing a SNAP Online Application using CAPI and a client requests medical benefits. Please recycle any prior versions of the CAPI Medical Checklist you have been using.

If you have any questions about this information, contact:

Contact(s):	Christy Garland	503-947-5519
	Michelle Mack	503-947-5129
	Jewel Kallstrom	503-947-2316
	Vonda Daniels	503-945-6088
	Carol Berg	503-945-6072
	Joyce Clarkson	503-945-6106
Email:	SSP Medical Policy	