



PacificSource Community Solutions
 PO Box 5729, Bend, OR 97708-5729
 (800) 431-4135
CommunitySolutions.PacificSource.com

Primary Care Provider (PCP) Change Form

Usted puede recibir este documento en otro idioma, impreso en letra más grande o de cualquier otra manera que sea mejor para usted. Llame al número gratuito (800) 431-4135. Los usuarios del servicio TTY pueden llamar al (800) 735-2900.

You can get this document in another language, large print, or another way that's best for you. Call (800) 431-4135, TTY (800) 735-2900.

If you want to have a new primary care provider (PCP), please fill out this form below and return it to us. The change will take effect on the first day of the next month after we receive the form, unless you ask for a later start date: ___/___/_____

Member Information		
Last Name:	First Name:	MI:
Date of Birth:	Member ID Number:	
Change of Primary Care Provider (PCP)		
Requested PCP Name:		
Clinic Name:		

 Member or Parent Signature

 Date

Mail completed form to:
 PacificSource Community Solutions
 PO Box 5729
 Bend, OR 97708-5729

Fax or email the completed form:
 (541) 322-6423
MedicaidCS@pacificsource.com

If you have any questions or need help, please call our Customer Service Department at (800) 431-4135 (TTY users, call (800) 735-2900).

We are open:

- **October 1 - January 31:** 8:00 a.m. to 8:00 p.m. local time zone, seven days a week.
- **February 1 - September 30:** 8:00 a.m. to 5:00 p.m. local time zone, Monday-Friday.

Nondiscrimination Statement

Do you think PacificSource or a provider treated you unfairly? We must follow state and federal civil rights laws. We cannot treat people unfairly in any program or activity because of a person's:

- Age
- Color
- Disability
- Gender Identity
- Marital Status
- National Origin
- Race
- Religion
- Sex
- Sexual Orientation

Everyone has a right to know about and use our programs and services. We give free help when you need it. Some examples of the free help we can give are:

- Sign language interpreters
- Spoken language interpreters for other languages
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

Everyone has a right to enter, exit and use buildings and services. They also have the right to get information in a way they understand. We will make reasonable changes to policies, practices and procedures by talking with you about your needs.

To report concerns or get more information, please contact our diversity, inclusion and civil rights executive manager:

Customer Service Department

- (800) 431-4135 Toll free
- (800) 735-2900 TTY

Civil Rights Manager

- (888) 977-9299, TTY 711
- Email: crc@pacificsource.com
- Mail: PO Box 7068
Springfield, OR 97475-0068

You also have the right to file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Contact that office in one of these ways:

- Web: <http://www.hhs.gov/>
- Email: OCRComplaint@hhs.gov
- Phone: (800) 368-1019
(800) 537-7697 (TDD)
- Mail: U.S. Department of Health and Human Services
Office for Civil Rights
200 Independence Avenue SW
Room 509F HHH Bldg
Washington, D.C. 20201

