



SCO Care Managers Job Aid Requests to the Enrollment Department

Type of Request/Question	What Enrollment will need
All Requests	<ul style="list-style-type: none"> • Member's ID Number (if they do not yet have one, please use HICN) • Member's Name
Address Change	<ul style="list-style-type: none"> • New address • Whether the new address is mailing only, residential only, or both <ul style="list-style-type: none"> ◦ If residential: date the member moved/will move
ASAP Change	<ul style="list-style-type: none"> • Name of the new ASAP • Date change should be effective
Deceased Disenrollment	<ul style="list-style-type: none"> • Statement that the member is deceased • Date of death
Name Change	<ul style="list-style-type: none"> • New/correct name • Where the name is showing incorrectly • Please note: we will have to verify the member's name in NewMMIS or MARx before making any changes
New ID Card	<ul style="list-style-type: none"> • Request for new ID card
OOA Disenrollment (to disenroll a member immediately for being OOA)	<ul style="list-style-type: none"> • Date the notification was received by THP • New residential address that is out of the area • Statement that new address is member's permanent address, and that they should be disenrolled • Date the member moved/will move
OOA Notification (to start OOA tracking process)	<ul style="list-style-type: none"> • Statement that member has been out of the area (and where they are, if known)
PCP Change	<ul style="list-style-type: none"> • Name of new PCP • Date change should be effective
Phone Number Change	<ul style="list-style-type: none"> • New phone number
Redetermination Changes	<ul style="list-style-type: none"> • Where you are seeing/hearing about the change in redetermination status • What changes should be made • Please note: Enrollment will check these updates in MH systems to verify before making any changes to the member's record
Language Preferences	<ul style="list-style-type: none"> • Note language preferences

**** All requests must be submitted to SCO_Enrollment@tufts-health.com ****
**** Requests will be turned around within 5 business days ****