Passport to Health • Member's Provider Change/Enrollment Form

Questions?
Call the Help Line:
1-800-362-8312

To change a Passport provider: Fill out this form and put a check (✓) next to the reason for changing (see below) or you can call the Montana Health Care Programs Member Help Line at 1-800-362-8312 to change.

If you are enrolling with a Passport provider: Call the Help Line at 1-800-362-8312, or you may fill out this form and mail it.

To complete this form:

1. Write the name, Medicaid /HMK *Plus* ID number, and date of birth for each member you are enrolling. Look at your Medicaid/ HMK *Plus* card to find each member's number. Choose a Passport provider for each member.
2. Write your name, telephone number or message telephone number and sign and date the form.

Mail the form to:
Passport to Health
P.O. Box 254
Helena, MT 59624-9910
Or fax to:
406-442-2328

***The member MUST authorize the change/enrollment.**

	Name of Member(s) Changing Provider	Medicaid/HMK *Plus* ID Number(s)	Date(s) of Birth	Passport Provider (Choose one for each member.)
1.				
2.				
3.				
4.				
5.				
6.				

Relationship to Member Changing Provider is (check all that apply): ☐1. Myself ☐2. Member's Parent ☐3. Member's Guardian ☐4. Medical Power of Attorney

Name (Printed) **Signature** **Date** **Telephone or Message Number**

Reason for Change of Provider

- ☐ 1. My current provider is too far away or I have moved to a new town/new part of town.
- ☐ 2. I want a different provider/specialist.
- ☐ 3. I want my family to go to the same provider.
- ☐ 4. Inconvenient appointment times or I have to wait too long for appointments.
- ☐ 5. Provider retired/moved/left practice.
- ☐ 6. Personality conflict between the provider and me.
- ☐ 7. Provider and/or staff were rude.
- ☐ 8. My provider asked me to choose someone else.
- ☐ 9. Provider did not explain things clearly or I feel I am not getting good medical care.

***Please call the Help Line if you would like to make a complaint.**

- ☐ 10. Other (Please explain)

_____
_____
_____
_____

If you call the Help Line at 1-800-362-8312 to change or enroll, you do not have to fill out this form – open 8 a.m. to 5 p.m.