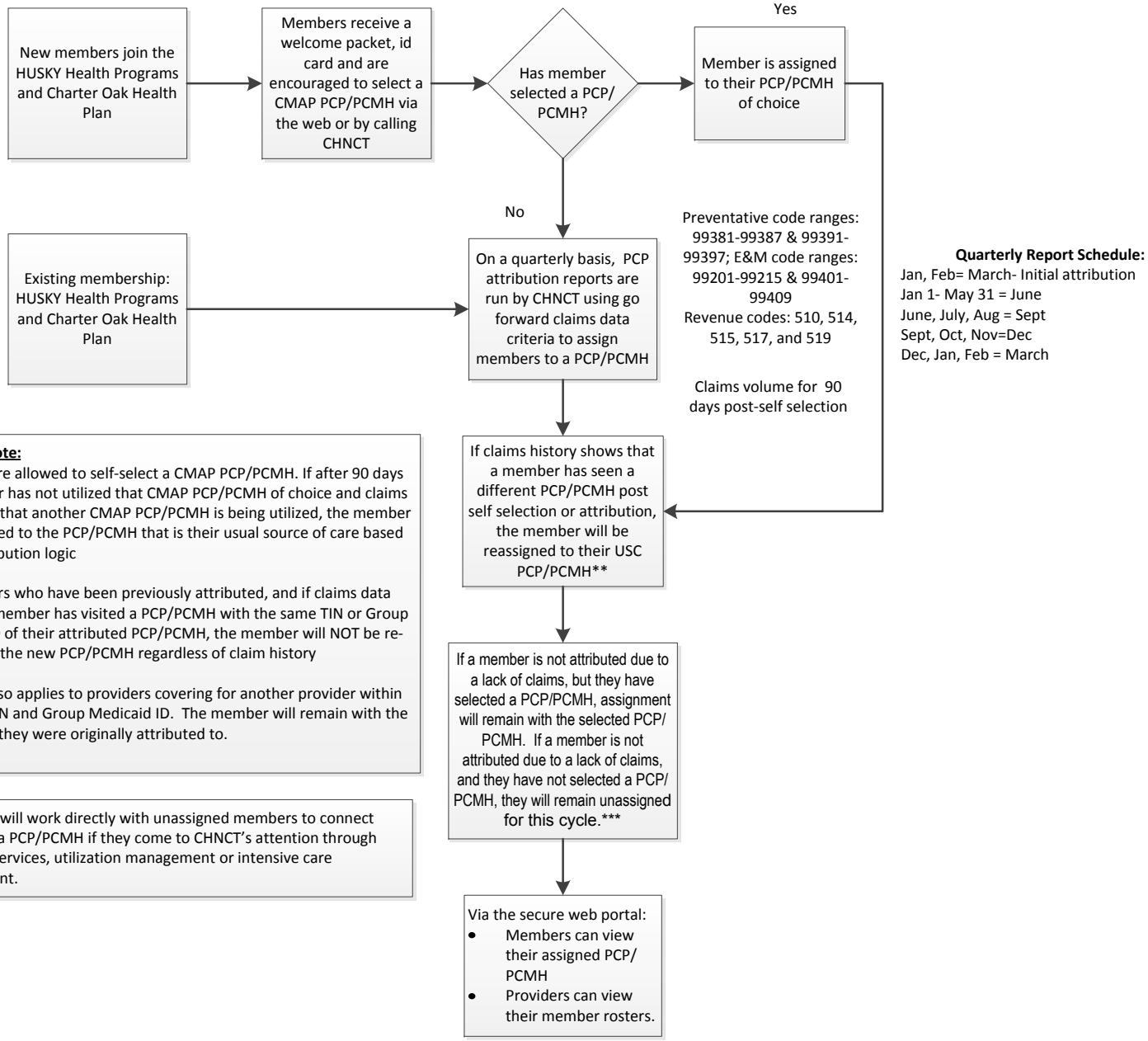
DRAFT

New and Ongoing Membership



Please note:
Members are allowed to self-select a CMAP PCP/PCMH. If after 90 days the member has not utilized that CMAP PCP/PCMH of choice and claims data shows that another CMAP PCP/PCMH is being utilized, the member will be moved to the PCP/PCMH that is their usual source of care based on the attribution logic

For members who have been previously attributed, and if claims data shows the member has visited a PCP/PCMH with the same TIN or Group Medicaid ID of their attributed PCP/PCMH, the member will NOT be re-assigned to the new PCP/PCMH regardless of claim history

This logic also applies to providers covering for another provider within the same TIN and Group Medicaid ID. The member will remain with the PCP/PCMH they were originally attributed to.

***CHNCT will work directly with unassigned members to connect them with a PCP/PCMH if they come to CHNCT's attention through members services, utilization management or intensive care management.