

What you will need to bring for your Oregon Health Plan (OHP) appointment.

- Full legal names of anyone who will be applying for OHP. (Anyone claimed on your taxes, needs to be on your application)
- DOB's for everyone
- SSN's for everyone
- Home and/or mailing address
- Document information to verify citizenship or immigration status (if available)
- Income of any kind for the last 30 days, and last year's annual income for everyone applying (Job, self-employment, alimony, SSI, SSDI, SSBI)
- Information on any deductions (that are claimed on your tax's)
- Current health insurance plan information
- Incarcerated information: Incarcerated date and release date

Appointment Date: _____ **Time:** _____ **Assister:** _____

Any question's call Columbia Health Services
Call 503.397.4651 x2005 or text 503.877.4173

_____ cut here _____

Referral Form

Date of Request: _____ **Referring Agency:** _____

Check box: **Called Office** **Cell/Texted** **Emailed** **Walk-in**

First name: _____ **Last name:** _____

City resides in: _____ **Contact number:** _____

Number of house members applying: _____ **Income:** YES / NO or SSD/SSDI

CHS Staff use only below:

Date Contacted:(1) _____ (2) _____ (3) _____

New **Renewal** **FFM** **Appointment: Date:** _____ **Time:** _____