

CAO Notification Form

Effective 02/21/2023

The Health Choices Behavioral Health Program Standards and Requirements ([PS&R, pg. 12, 11-3, A, 1](#)) outlines that “the BH-MCO must establish mechanisms to inform the CAO of any change or update to the Member’s residency or eligibility status within 10 days of the date of learning of the change.”

With the issuance of this systems notice, the BH-MCO must use the **CAO Notification Form** (attachment 1) to report recipient changes or updates to the CAO. The BH-MCO will email the form to the CAO Ombudsmen (attachment 2) within 10 days of the date of learning of the change. When sending more than one form on an email, ensure that they are for the same county and district office, place the county and district office in the subject field of the email. Sending multiple counties and district office on the same email will delay processing.

If after 30 days of sending the form to the CAO it appears no action was taken, forward the form to RA-PWELIGDISCREPANCY@pa.gov. Follow-ups after the first email to this resource account are not required or requested.

The CAO will only take immediate action for a change of address if the MCO has received direct verification of the change of address. Direct verification is defined as the member, authorized representative or other adult member of the household confirming the address change is correct.

Please contact RA-PWELIGDISCREPANCY@pa.gov if you have any questions.

Attachments

1. [CAO Notification Form](#)
2. [CAO Ombudsmen Contact List](#)