



# Oral Health, Total Health

*How to enroll in our program for diabetics and pregnant women*

## For diabetics:

*Enrolling is as easy as 1-2-3*

1. Complete the form below
2. Include proof of diagnosis
3. Mail or fax both to ODS

## For expecting moms:

*Enrolling is a one-step process*

If you are pregnant, you can enroll in the **Oral Health, Total Health** program by calling ODS Dental Customer Service at **503-265-5680** or toll-free at **1-877-277-7280** after you have scheduled your third trimester cleaning appointment. Be sure to tell the customer service representative the date of your appointment. It's that easy.

**If you are diabetic** and wish to enroll in the **Oral Health, Total Health** program, complete this enrollment form and fax it, along with proof of diagnosis, to **503-243-3959** or send it via mail to The ODS Companies, Attn: Billing and Eligibility Department, 601 S.W. Second Avenue, Portland, OR 97204.

Member name: \_\_\_\_\_

Subscriber name: \_\_\_\_\_ Subscriber ID number: \_\_\_\_\_

Group (plan) number\*: \_\_\_\_\_ Group name\*: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's date: \_\_\_\_\_

\* This information is displayed on your ODS ID card and through myODS at [www.odskompanies.com](http://www.odskompanies.com)

Please select **one** of the following:

- Proof of diagnosis is attached. *Examples of proof of diagnosis include a doctor's note or a copy of a prescription supportive of a diabetes diagnosis.*
- I have ODS medical coverage and have had a claim paid by ODS for medical or pharmacy services related to my diabetes. *We will verify the diagnosis on your behalf.*

You will be enrolled in the **Oral Health, Total Health** program, effective the first of the month following receipt of a completed **Oral Health, Total Health** enrollment form and proof of diagnosis.



A complete description of this program is available in your member handbook or through myODS at [www.odskompanies.com](http://www.odskompanies.com).

Attn: Billing and Eligibility