



Provider Relations Outreach Specialist

The Do's and Don'ts (DMS-2609)

This form must be fully completed before primary care physician (PCP) assignment or change can be made. It will supersede a provider's maximum caseload and/or age restriction.

A copy of the completed DMS-2609 must be kept in the beneficiary's record for auditing purposes.

Do:

1. Print legibly.
2. Check eligibility by name and DOB to ensure the beneficiary's correct Medicaid number is provided.
3. Complete the date of assignment AND the date the beneficiary/legal guardian signs the form. The dates do NOT have to match. If the date of assignment is not indicated, assignment will be made as of the date signed by the beneficiary/legal guardian.
4. Submit the form within 30 days of the beneficiary/legal guardian's dated signature; otherwise, assignment cannot be made. Contact your AFMC Outreach specialist for additional direction.
5. Request assignment within 90 days of the date the form was signed by the beneficiary/legal guardian. If it is more than 90 days, you will need to contact your [AFMC Outreach specialist](#).
6. Provide an email address if available. It will be used to send the beneficiary educational updates.
7. Use the provider's Medicaid number, not their NPI.
8. Check eligibility to confirm the beneficiary's demographics and compare address to the counties from which your provider accepts Medicaid beneficiaries.
9. Have the beneficiary/legal guardian sign AND print their name in the designated area.
10. Retain a copy of the completed form in the beneficiary's record.

Please note: The Voice Response System (VRS) should be used if a PCP is unassigned on the day of service. That number is 1-800-805-1512.



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Do Not:

1. Submit/fax the form to your local DHS office or AFMC ConnectCare if you made the assignment through the Voice Response System (VRS). If retro assignment is needed, reach out to your [AFMC Outreach specialist](#). Retain a copy in the beneficiary's record.
2. Submit/fax the form until the demographics of the beneficiary match the counties from which your provider accepts Medicaid beneficiaries. If the beneficiary's demographics are incorrect in MMIS, the beneficiary can update it by calling the AFMC Service Center at 1-888-987-1200.
3. Request a PCP assignment if the beneficiary has IABP or Medicare Primary – a PCP is not required.
4. Submit/fax the form more than once. If assignment hasn't been made after five days of the initial fax, contact your [AFMC Outreach specialist](#).

Assignment cannot be made:

1. If the form is not legible or the form is altered.
2. Without the signature of the beneficiary/legal guardian
3. If the beneficiary/legal guardian's name is not printed, in addition to their signature
4. If the beneficiary/legal guardian's signature is not dated
5. If changes to the form are made after the beneficiary/legal guardian's dated signature
6. The provider is out of the beneficiary's region
7. If your provider's license isn't updated with Provider Enrollment