

# ***OKLAHOMA CARES Breast and Cervical Cancer Treatment Program***

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## **Important Information—Keep for Future Reference**

The Oklahoma Cares, Breast and Cervical Cancer Treatment Program (BCCTP), provides Medicaid benefits (SoonerCare) to eligible women with breast/cervical cancer (including pre-cancerous conditions and early stage cancer).

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## **How to Apply**

1. Complete the Oklahoma Cares application (BCC-1)
2. Have your health care provider (CDC certified screener) complete last page of application
3. Attach proof of identity/citizenship (copies only – not originals)
4. Attach medical documentation supporting either breast or cervical abnormality
5. Either mail or fax the application, medical documentation and proof of identity and citizenship

Fax Number: 405-530-3217

Mailing Address: Oklahoma Health Care Authority - BCC  
PO Box 18476  
Oklahoma City, OK 73154

## **Application Status**

Within 30 days of applying, the Oklahoma Department of Human Services (ODHS) will mail you a notification regarding your eligibility. If have you questions about application status or denial reasons, please call SoonerCare at 1-877-252-6002 for assistance. For general eligibility questions, please call 866-550-5585 or email [OkCares@health.ok.gov](mailto:OkCares@health.ok.gov).

## **Member ID Card**

If approved, a member ID card will be mailed to you within 2 weeks after receiving notification, unless you have previously been covered on SoonerCare. Your member ID card must be used to receive benefits (fill prescriptions, see your health care provider, etc.), so keep it with you at all times. If your member ID card has not arrived within 45 days of applying, call SoonerCare at 1-877-252-6002 for assistance.

## **Receiving Care**

Once you have received notice that your application was approved, please seek care from a current SoonerCare provider within 60 days. If you fail to do so, you will be removed from the program. If you need help finding a SoonerCare provider and/or have questions, call the SoonerCare at 1-877-252-6002.

## **Denial or Benefits Ending**

If for any reason you are denied coverage or your SoonerCare benefits end, you will be notified by mail. You have the right to appeal. Appeals must be requested within 20 days of receipt of notice. Instructions for appeal are listed on the notification sent by Oklahoma Health Care Authority (OHCA). If you need additional information regarding a denial, please contact SoonerCare at 1-877-252-6002.

