

Member incentives/rewards program

Not all members qualify for these rewards. Please be sure the member is eligible for one of the incentives below.

Note: Please do not use this form for CareOregon Advantage members.

Help our members earn a gift card for selected preventive care:

Incentive	Who is it for?	Reward amount	Online form
Childhood immunizations [CIS]	Members who turn 0-2 in 2026	\$15 (up to three visits per year)	jacksoncareconnect.org/childvax 
Well-child visits [W34]	Members who turn 1-6 in 2026	\$25	jacksoncareconnect.org/childcheckup 
Annual well visit - adolescents [AWC]	Members who turn 7-18 in 2026	\$15	jacksoncareconnect.org/youthcheckup 
Adolescent immunizations [IMA]	Members who turn 9-13 in 2026	\$15 (up to three visits per year)	jacksoncareconnect.org/youthvax 
Diabetes screenings [DIA]	Members age 18+ with a diabetes diagnosis (HbA1c check, eye exam, and nephropathy test)	\$25 (up to two visits per year)	jacksoncareconnect.org/bloodtest 
Postpartum visit [PPC]	Members who gave birth in 2026	\$50	jacksoncareconnect.org/postpartum 

Member incentives/rewards form

**Please only use this form if you (or your patient) cannot use the online forms.
Online forms can be found at the web addresses on the previous page.**

Please fill out this form completely, and print clearly

Member ID number: _____

Name: _____

Address: _____

Clinic name: _____ Date of appointment: _____

Reason(s) for visit: CIS W34 AWC IMA DIA PPC

Signature: _____

Check one box below to pick which gift card you'd like us to send you.

Baja Fresh* Chipotle Jamba Juice Old Navy Shell* Starbucks Subway TJ Maxx

Note: If you do not check a box, members will receive a Subway card.

Send or bring us this form.

CareOregon, 315 SW Fifth Ave, Portland OR 97204 or fax it to 503-416-1316.

Your gift card will be mailed to your address in six to eight weeks.

Receive your gift card sooner.

Get a link to claim your gift card. Email: _____

* Baja Fresh card **only** available via email. Shell card **not** available via email.

2026 incentives

Measure	Code	Member incentive description	Eligible members	Eligible CPT
Well-child visit	W34	Children turning ages 1 to 6 years who had one or more well-child visits with a PCP during the calendar year.	Members born from 2020 to 2025	CPT codes: 99381-99385, 99391-99395, 99461 HCPCS codes: G0438, G0439, S0302
Adolescent well visit	AWC	Members turning ages 7 to 18 years who had one or more well-child visits with a PCP during the measurement year.	Members born from 2008 to 2019	99381-99385, 99391-99395, 99461
Childhood immunization	CIS	Children who turned 2 years old during 2026 and are up to date on Dtap, IPV, MMR, HiB, HepB and VZV vaccines by their second birthday (four DTap, three IPV, one MMR, three HepB, three HiB, one VZV).	Members born in 2024 or later	N/A
Adolescent immunizations	IMA	Adolescents turning ages 9 to 13 years during the measurement year and had the meningococcal, Tdap and HPV vaccines by their 13th birthday (one MCV4, one Tdap, two to three HPV).	Members born in 2013 to 2017	N/A
A1C check for adults with diabetes	DIA	Patients ages 18 and higher with diabetes who have had their A1C checked in the last six months.	Members born in 2008 or earlier	N/A
Timely postpartum visit	PPC	Members who had a postpartum visit to an OB/GYN or other prenatal care practitioner or primary care provider on or between 7 and 84 days after delivery.	Members who gave birth in 2026	CPT codes: 59400, 59410, 59510, 59515, 59610, 59614, 59618, 59622, 57170, 58300, 59430, 99501, 0503F HCPCS codes: G0123, G0124, G0141, G0143- G0145, G0147, G0148, P3000, P3001, Q0091, G0101

Questions?

Please call your health plan's Customer Service 8 a.m. to 5 p.m., Monday through Friday.

Jackson Care Connect: 541-500-0567 or toll-free at 855-722-8208

TTY: 711

Frequently asked questions

How long do I have to do this? You must receive this service by Dec. 31, 2026. We must receive this completed form by Jan. 31, 2027.

What if I lose my gift card? Lost or stolen cards will not be replaced.

What if I don't get my gift card email? Can you send it to my home? Once you select email or home, you cannot change that option. If you haven't received your email after four weeks, please call Customer Service.

Does my provider need to sign this form? Any clinic staff may sign it.

What if you have the wrong address for me? If your address has changed, please call the Customer Service number listed above for your health plan and speak with a person about where to mail your gift card.

Does everyone get this gift card offer? No. We identify certain wellness activities of key importance. Our gift card program is based on those activities.

What if I already did this? If your provider did not already send in a form for you, please fill in the date of service, and your provider name. No signature is required. We will verify with your provider. Select your gift card and return this form. You may receive only one gift card for this care.

I got the same letter twice in one year. Can I earn two gift cards? No. Unless stated otherwise, you may only earn one gift card for each activity per year.

The wellness incentive program is available only to our health plan members. Only completely filled-out forms are eligible for the incentive. Incentives are valid only if you are a member at the time of service and as of the postmark date on your return envelope. Lost or stolen gift cards will not be replaced. We may verify the information provided on your form at any time. Gift cards must be used only by our members. Your doctor or a clinic staff member must complete and sign your form before you return it in the prepaid envelope provided. We may discontinue the wellness incentive program at any time, without notice. Unless stated otherwise, members are only eligible to earn one gift card per activity per calendar year. Any wellness incentive received in the form of a gift card is considered gross income for Federal and State tax purposes. If your income, including any wellness incentive gift card received, falls below the tax filing threshold, you are automatically exempt from filing a return.

Thank you!