

**Amerigroup Washington
Foundational Community Supports
Disenrollment Form**

Please complete this form if you are enrolled in supportive housing and/or supported employment services in the Foundational Community Supports program and you want to disenroll. If you choose to fill out this form, please complete it entirely, sign it and return it to us. If we have any questions, we'll call you. We'll send you a letter to tell you we got the form and let you know when you are no longer enrolled in the service(s) you selected.

Please call us if you need help filling out this form. You can call the Foundational Community Supports program at 1-844-451-2828 (TTY 711) from 8 a.m. to 5 p.m. Pacific time.

Name: _____

Date of birth: _____

Phone number: _____

Foundational Community Supports #: _____

Please check the support(s) you don't want:

_____ Supportive housing

_____ Supported employment

Please tell us the reason(s). Use more paper if needed.

Your signature: _____

Date: _____

By signing this form, you give Amerigroup the right to disenroll you from the Foundational Community Supports checked above. Please return this form to:

FCS TPA
Amerigroup Washington, Inc.
705 5th Ave. S., Suite 300
Seattle, WA 98104

For enrollees who don't speak English, we offer free oral interpretation services for all languages. If you need these services, call Member Services toll free at 1-800-600-4441 (TTY 711).