



Notice of RI EOHHS Approval, Conditional Approval, or Rejection of

Marketing & Member Communications Request for Approval

Instructions: This Form serves as the notification to submitter of *Approval*, *Conditional Approval*, or *Rejection* of submission(s). If document(s) are conditionally approved or rejected, please review the entire document before returning the redlined version and this Form to OHHS.MCOOversight@ohhs.ri.gov and the [designated RI EOHHS Marketing Department contacts](#).

File and Use:

Approved:

This notification serves as RI EOHHS' **approval** of the following document(s):

Reviewed by:

Date:

Conditionally Approved:

This notification serves as RI EOHHS' **conditional approval** of the following document(s):

Reviewed by:

Date:

Reference redlined document(s) comments and track changes. Revise document(s) accordingly and submit the final version of the document(s). The document(s) is not considered to be approved until the final version has been sent to RI EOHHS. Upon reviewing the revised version, EOHHS will issue final approval / rejection notice, indicated on this form.

Rejected:

This notification serves as RI EOHHS' **rejection** of the following document(s):

Reviewed by:

Date:

Reference redlined document(s) comments and track changes. Revise document(s) accordingly and resubmit: (1) This form; (2) Marketing and Member Communications Request for Approval form; (3) rejected version; (4) new version with revisions redlined; (5) final, clean version. EOHHS will review the new version and provide a decision within 30 days from the date submitted.