



Oregon

Theodore R. Kulongoski, Governor

Department of Human Services
Division of Medical Assistance Programs
500 Summer Street NE, E44
Salem, OR 97301
Voice (503) 945-5772
Fax (503) 947-1177
TTY (503) 378-6791

OREGON HEALTH PLAN (OHP) ELECTRONIC MEMORANDUM



Date: April 15, 2009
To: FCHPs, DCOs, MHOs, PCO
From: Alice LaBansky, DMAP Operations Section Manager
Re: Provider enrollment options for MCOs

As you know, the replacement Medicaid Management Information System changes the way managed care organizations (MCOs) can submit encounter provider information to DHS. The following page describes the two enrollment options available.

Regardless of the enrollment option you choose, please note the following:

- **Enrollment using the DMAP 3108 (Encounter Data Provider Application) is still the preferred method of enrolling encounter providers.**
- **You only need to provide Tax ID information for encounter providers whom you pay directly and issue a 1099 for tax purposes.** This means if you pay a clinic directly, you must provide the Tax ID information for the clinic. When enrolling the individual providers paid by the clinic, enter the clinic's Tax ID as individual provider's Tax ID.

Questions?

- **If you have questions about the DMAP 3108** – Contact your designated Encounter Data Liaison.
- **If you have questions about enrollment using the Provider Web Portal** – Contact Jennifer McKinley, Provider Services Manager at 503-945-5933 or e-mail jennifer.mckinley@state.or.us.

Thank you for your continuing support of the Oregon Health Plan.

“Assisting People to Become Independent, Healthy and Safe”
An Equal Opportunity Employer

Enrollment options for MCO encounter providers

For both options, MCOs only need to submit Tax ID information for these providers *paid directly and issued a 1099 by the MCO*. When another entity (e.g., a clinic) is paid by the MCO and pays the individual providers, enroll the individual providers using the entity’s Tax ID as the individual provider’s Tax ID.

Note: All enrollment requests submitted using these options will go to Provider Enrollment (not your Encounter Data Liaison) for follow-up.

Option 1: Encounter Data Provider Application (DMAP 3108)

1. Complete the form located at <http://dhsforms.hr.state.or.us/Forms/Served/OE3108.pdf>.
2. Complete the EDMS Cover Sheet (DHS 3970) located at <http://dhsforms.hr.state.or.us/Forms/Served/DE3970.pdf>. Mark the “Provider Enrollment” box at the top of the cover sheet.
3. Print and fax the completed forms to DHS at 503-378-3074 (Salem).

Option 2: Provider Web Portal Enrollment

Complete the following steps to submit a provider enrollment request on the Web.

Step	Action	Response
1	Go to https://www.or-medicaid.gov . Select providers , then enrollment .	Screen 1 displays.
2	Read the instructions on page 1; select next .	Screen 2 (provider type and specialty) displays.
3	Click add to add a provider type and specialty. Place a check mark next to the primary specialty. Select next .	Screen 3 (provider base information) displays.
4	Complete all required or applicable base information. Select next .	Screen 4 (provider service location) displays.
5	Select a county and organization code for your service location. Select next .	Screen 5 (provider taxonomy) displays.
6	Select the add button to add a primary taxonomy. Select the primary taxonomy. Select next .	Screen 6 (Tax ID) displays.
7	Select the appropriate tax type (SSN or FEIN) and enter the Tax ID with no dashes. Select next .	Screen 7 (Provider address) displays.
8	Update usage addresses, if applicable. Select next .	Screen 8 (Contact information) displays.
9	Enter contact information. Select next .	Screen 9 (Submit information) displays.
10	Upon completion of all required and/or applicable fields, click save .	Screen 10 (Completion screen) displays, with Application Tracking Number (ATN) and links to required forms for fee-for-service providers.
11	Print screen and keep for future reference. Disregard additional forms listed; they are not required for encounter provider enrollment requests.	