

**Health Services
Office of Medical Assistance Programs**

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OMAP Program and Policy Section

Authorized Signature

Number: OMAP IM 05-030
Issue Date: 3/24/2005

Topic: Medical Benefits

Subject: OMAP allows quarterly incontinence supply billing

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Other (please specify): DHS staff and others identified on the SPD, CAF, OMHAS and OMAP transmittal lists |

Message: OMAP is sending DME providers the attached postcard this week.

If you have any questions about this information, contact:

Contact(s):	Rosanne Harksen, OMAP Policy Analyst		
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Notice to DMEPOS providers

OMAP now allows quarterly billing of incontinence supplies. The change is shown in the DME Supplement, p. 14, How to Complete the CMS 1500, section 24A

www.dhs.state.or.us/policy/healthplan/guides/dme/dmesupple_0504.pdf