

**Health Services
Office of Medical Assistance Programs**

Allison Knight, Acting Manager
OMAP Program and Policy Section

Number: OMAP IM-06-028
Issue Date: 03/02/2006

Authorized Signature

Topic: Medical Benefits

Subject: Reminder to Submit Pharmacy Claims on UC 5.1

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): OMAP + Plans |

Message: OMAP will post the attached message online and e-mail it to Pharmacy eSubscribers this week, advising them to stop using the obsolete OMAP 502 when submitting paper claims.

If you have any questions about this information, contact:

Contact(s):	Brian Olson, OMAP Pharmacy Policy Analyst		
Phone:	(503) 945-6492		
E-mail:	brian.olson@state.or.us		



Oregon

Theodore R. Kulongoski, Governor

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Health Services

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March 2, 2006

To: Pharmacy Providers

From: Allison Knight, Manager
OMAP Program and Policy Section



Subject: Reminder to Submit Pharmacy Claims on UC 5.1

OMAP accepts *only* the Universal Claim Form (UC 5.1) for pharmaceutical paper claims (OAR 410-121-0200). If claims continue to arrive on the old OMAP 502 forms, we will return them to the sender, unread and unpaid, starting March 6, 2006.

You can find all rules governing the OMAP pharmacy program online at <http://www.dhs.state.or.us/policy/healthplan/guides/pharmacy/main.html>.

Questions?

Contact Provider Services at:

(503) 378-4697

(800) 336-6016, or

omap.prov-callcenter@state.or.us.

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