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DMAP Operations

**Authorized Signature**

**Number:** DMAP-IM-09-057

**Issue Date:** 05/01/2009

**Topic:** Medical Benefits

**Subject:** Provider Announcement-Red-letter forms required for CMS-1500 and UB-04 claims beginning August 1, 2009

**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, AMH and DMAP transmittal lists |

**Message:** During the week of April 27, DMAP will post the attached announcement on the DMAP Provider Announcements Web page at:

[http://www.oregon.gov/DHS/healthplan/tools\\_prov/main.shtml#announcements](http://www.oregon.gov/DHS/healthplan/tools_prov/main.shtml#announcements)

Beginning August 1, 2009 DMAP *will return* CMS-1500 and UB-04 claims submitted on black-ink versions (sold commercially) or black and white copies.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Dale Elder		
<b>Phone:</b>	503-945-6589	<b>Fax:</b>	503-947-5359
<b>E-mail:</b>	dale.elder@state.or.us		

# **Important Information**

## **DMAP declares August 1, 2009, a **Red Letter Day!****

### **Mark your calendars!**

Beginning **August 1, 2009**, DMAP will only accept “red form” versions (red-ink, commercially produced forms) of the CMS-1500 and UB-04 claim forms. If you submit forms printed on black-ink stock or black and white copies of the forms, DMAP will return the forms to you.



Red forms:

- Process faster
- Are available through most forms distributors
- Are available to purchase online

### **For fastest processing - Go electronic!**

- Faster claims processing
- No more paper forms to purchase
- No more postage
- Quick online access to information

### **Provider Web Portal**

- ✓ To submit claims and claims *adjustments* online
- ✓ Best to use when you have a small volume of claims or adjustments to submit at once

To learn how to submit or adjust claims on the Web, go to:

[www.oregon.gov/DHS/healthplan/webportal.shtml/](http://www.oregon.gov/DHS/healthplan/webportal.shtml/)

For assistance, call **Provider Services**: 800-336-6016

### **Electronic Data Interchange (EDI)**

EDI is best used when you have a large volume of claims to submit at once.

To get started with EDI, contact EDI Support Services at:

[DHS.EDIsupport@state.or.us](mailto:DHS.EDIsupport@state.or.us) or call 888-690-9888



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