



Division of Medical Assistance Programs

# Information Memorandum Transmittal

Donald Ross, Manager  
DMAP Policy and Planning Section

**Number:** DMAP IM 12-052

**Authorized Signature**

**Issue Date:** 7/3/2012

**Topic:** Medical Benefits

**Subject:** Pharmacy announcement: Clarification about 2011 claim discrepancy reporting

**Applies to:**

- All DHS employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Seniors and People with Disabilities
- Other (please specify): DHS and OHA staff and others identified on the SPD, CAF, AMH and DMAP transmittal lists

**Message:**

DMAP will mail the following letter to 82 pharmacies. It provides clarification about [a letter DMAP sent last month](#) about 2011 point of sale claim discrepancies.

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

<b>Contact(s):</b>	DMAP Pharmacy Program
<b>E-mail:</b>	<a href="mailto:dmap.rxquestions@state.or.us">dmap.rxquestions@state.or.us</a>



**Date:** July 3, 2012

«AddressBlock»

**To:** Pharmacies

**From:** Kristine Kersine, Manager  
Provider Services Unit, DMAP

**NPI:** «NPI»

*(additional NPIs on reverse, if applicable)*

**Subject:** Please report any unpaid 2011 point of sale (POS) claims to DMAP by Thursday, Aug. 16

Last month, we mailed you a letter asking about any POS claims submitted to DMAP from **Mar. 1, 2011** to **Aug. 31, 2011** that did not report on your 835 Electronic Remittance Advice, paper remittance advice, or Provider Web Portal claim search.

This letter is to answer questions we have received, and extend the deadline for reporting your potential unpaid claims.

### **Answers to your questions about potential 2011 claim discrepancies**

#### ***Why do we need to report claims DMAP did not pay? Don't you have this information?***

The claims in question did not pay because they did not enter our system for processing. Unfortunately, we cannot identify or reprocess them for you because we do not have the information needed to do so.

#### ***How am I supposed to find out which claims DMAP did not receive?***

Other pharmacies have used their internal claims aging reports to identify claims their system submitted and reported as paid, but that DMAP did not submit payment for. If these claims did not report as paid on the 835 ERA, paper RA, or Web claim search, we searched for the claim in our system.

If we were unable to find it in our system, we concluded that the claim did not enter our system and manually entered it for appropriate processing and payment.

#### ***I need more time to verify if this is an issue for us. Can you give us more time?***

Yes. You now have until **Thursday, Aug. 16** to send us your potential unpaid 2011 claim information.

If we do not hear from you by this date, we will conclude that you had no outstanding unpaid claims for the March-August 2011 time period.

## **Thank you for your support**

Thank you for your continued support of the Oregon Health Plan and the services you provide to our clients. We regret any confusion this may have caused, and appreciate your patience as we continue our research.

## **Questions?**

If you have any questions about this announcement, or do not know who would identify unpaid claim issues for your pharmacy, contact Kris Kersine, DMAP Provider Services Manager at 503-945-6501 or e-mail [kristine.kersine@state.or.us](mailto:kristine.kersine@state.or.us). Then we can explore finding a different contact to confirm this message has reached everyone and our inquiry is understood.