



Reminder: Send paper claims to PO Boxes



DMAP Provider Services Unit is receiving many paper claims and forms sent in error to the DHS Summer Street address. Most of these forms are original, “clean” claims (*i.e.*, they would have processed correctly without our intervention) that should have been mailed to a PO Box on the reverse side of this reminder. The PO Box mail is picked up and processed at another building, so sending original claims to the DHS building may delay your payments.

You may still send your problem claims, administrative errors, exception requests or claims over a year old with a cover letter explaining the problem and requested action to DMAP Provider Services by fax (503-945-6873) or to 500 Summer St. NE, E-44, Salem, OR 97301-1079.

Thank you for your cooperation. Mailing forms to the correct addresses will help expedite everybody’s claims.

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For a complete list of DMAP mailing addresses and contacts, download the DMAP Provider Contacts booklet on the OHP Web site at www.oregon.gov/DHS/healthplan/data_pubs/add_ph_conts.pdf.

Claim Type	Correct PO Box	City & ZIP
CMS-1500: Medical	PO Box 14955	Salem, OR 97309
CMS-1500: Speech-Language Pathology, Audiology and Hearing Services, Private Duty Nursing	PO Box 14018	
DMAP 505 Crossover	PO Box 14015	
5.1 Universal Drug	PO Box 14951	
ADA 2006 Dental	PO Box 14953	
UB-04 Institutional	PO Box 14956	
TADS	PO Box 14954	
DMAP 741/742 Hysterectomy/Sterilization Consent	PO Box 14958	
Out-of-State Claims (from providers located more than 75 miles from the Oregon border)	PO Box 14016	
Administrative Exam billing	PO Box 14165	
DMAP 1036 Individual Adjustment Requests	PO Box 14952	