



---- Subsidized Adoptions ----
Medical Non-emergent Transportation
Reimbursement Request

Division of Medical Assistance Programs - Operations



Prior Authorization is required for reimbursement of all medical non-emergent transportation

1. Child's Name	2. Child's Medical ID # / Case
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3. Parent/Guardian's Name	Mailing Address	4. Daytime Phone
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5. Date/PA#	6. From (City)	7. To (City)	8. # of Miles (Round Trip)	9. Name of Service Provider	10. Phone Number	11. Appt. Time
				_____ Authentication of Service Signature		
				_____ Authentication of Service Signature		
				_____ Authentication of Service Signature		
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Refer to page two for instructions.

Instructions for completing the Co-60 non-Medical Transportation Form Reimbursement Request

Mileage is not covered for transportation to school; school-based services such as IP, IFSP meetings, etc.; day camps; athletic or recreational activities, even though a medically related service may be provided. Meals and lodging are covered under limited circumstances for child and one parent/guardain only.

Time of appointment and leave and return times need to be listed when requesting meals/lodging.

1. Be sure you have requested and received Prior Authorization (PA) from the Co-60 Transportation Coordinator before completing the transport.
 2. Complete one form for each child, unless a second child goes to the same health care facility on the same trip. List appointment times for multiple trips on the same day. Attach receipts when requesting meals/lodging compensation.
 3. Complete the form by entering information in each box; do not leave any boxes blank **except for the signature.**
 4. **Ensure a service provider representative signs that the child was present to receive the service identified.**
 5. Request forms should be submitted for payment on a monthly basis.
 6. Complete additional pages as needed.
 7. Mail or fax the completed request form to: DMAP Co-60 Transportation Coordinator/Claims Management Group, P.O. Box 14016 Salem, Oregon 97309 or fax to 503-947-5359.
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If you require assistance completing this form contact the DMAP Co-60 Transportation Coordinator at 1-800-527-5772 or 503-945-6562.
