

Information Memorandum Transmittal

Aging and People with Disabilities

Jane-ellen Weidanz	<u>Number</u> : APD-IM-16-083
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Topic: Forms Subject: APD 287 form series updated of the series and the series updated of the series to (check all that apply): All DHS employees Area Agencies on Aging Aging and People with Disabilities Self Sufficiency Programs County DD Program Managers ODDS Children's Residential Services Child Welfare Programs	

Message: The APD 287 series Provider Payment Adjustment forms have all been revised on the Form Server. Forms included in the update are as follows:

- APD 0287A CEP and In-Home Care Agency Adjustment Request Underpayment form
- APD 0287B CEP and In-Home Care Agency Adjustment Request Overpayment form
- APD 0287C SPD CBC Adjustment Request Underpayment form
- APD 0287D SPD CBC Adjustment Request Overpayment form
- APD 0287E SPD CEP Forced Payment Request form
- APD 0287F SPD CBC Late Payment Request form
- APD 0287G SPD OPI Adjustment Request Underpayment form
- APD 0287H SPD OPI Adjustment Request Overpayment form
- APD 0287i SPD OPI Forced Payment Request form

You may also find each of these forms on the Case Management Tools website on the Provider Payment Adjustments page (click here).

For those that use an internet browser other than Internet Explorer (such as Firefox or Chrome), you may experience difficulty opening the PDF forms and will therefore,

need to install an Adobe Reader plugin to the browser (https://helpx.adobe.com/acrobat/kb/pdf-browser-plugin-configuration.html)

If you have any questions about this information, contact:

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