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☐ Provider Enrollment (PE) - 503-378-3074 ☐ Claim Documentation - 503-378-3086 ☐ Prior Authorization (PA) For PA requests, also check one box below: ☐ Routine Processing - 503-378-5814 ☐ Urgent Processing (72 hours) ☐ Immediate Processing (24 hours)		Hearing Documentation (no central fax #) Grievance Documentation (no central fax #) Correspondence - 503-378-3086 Justification and additional documentation is required for Urgent or Immediate processing (summarize below). If your PA request does not meet Urgent or Immediate criteria, it will receive Routine processing.		
documentation requirements at www.oregolink for your program). Documentation Identification Numlink documents to a specific Recipient ID, Foundation and the specific Recipient ID, Foundation or number (s) below. Use one character or number (s)	bers: Provide PA, claim or c	er ID is required o	on all requests from	m providers. To
PE Application Tracking Number (ATN):				
Provider ID (NPI or Oregon Medicaid ID):				
Recipient ID (as listed on the Medical ID):				
Prior Authorization Number (PAN):				
Internal Claim Number (ICN):				
Hearings/Grievances Number (HGN):				
Contact Tracking Number (CTN)*:				
*For DHS/OHA staff use only: Enter the CT Management System (CTMS) entry. Include If the CTN is linked to a specific provider or	CTMS questi	on number and no	tes number, as ap	oplicable.
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