

Policy Clarifications – Medical Assistance – BCCPT PMC16979317

Submitted: 01/15/2014

Agency: CAOs

**Subject: Breast and Cervical Cancer Prevention and Treatment program (BCCPT)
Renewal Address**

Question: What is the correct mailing address for the BCCPT renewal form PA 600 BR?

Response By: Bureau of Policy

Date: 01/15/2014

The preferred method to submit BCCPT Renewal forms is to fax them to OMAP at 717-772-6179.

They may also be mailed to:

Department of Public Welfare
Office of Medical Assistance Programs
Division of Medical Review/BCCPT
PO Box 8050
Harrisburg, PA 17105

PA 600 BR is being updated. The MAEH Chapter 317.7, 317 Appendix C and 317 Appendix D are being updated with the correct PO Box.