DHHS-CBHS/ Beacon
65 M/N Regional Contacts
Region I
1-800-482-7520

Team Leader: Rachel Posner
Phone: 822-0246
Email: rachel.posner@maine.gov
Mailing Address: 161 Marginal Way, Portland, ME 04101

Central Enrollment Referral Contact: Jana Colby (Cumberland Cty)
Phone: 822-0134
Fax: 822-2358
Email: jana.colby@maine.gov
Mailing Address: 161 Marginal Way, Portland, ME 04101

Central Enrollment Referral Contact: Brenda Smith (York County)
Phone: 490-5440
Fax: 490-5465
Email: brenda.smith@maine.gov
Mailing Address: 890 Main St. Suite 208, Sanford, ME 04073

Beacon Contact: Rita Siavelis
Phone: 1-800-807-7921 x378
Fax: 772-0872
Email: rita.siavelis@beaconhs.com
Mailing Address: 600 Sable Oaks Drive, S. Portland, ME 04106

Capacity Reporting Contact: Mike Parker
Phone: 822-0139
Email: mike.parker@maine.gov

- **Referral Packet send to Jana Colby or Brenda Smith**
- **Treatment Authorization Packet send to Rita Siavelis**
- **Treatment Re-Authorization Packet send to Rita Siavelis**
- **Discharge Packet send to Rita Siavelis**
- **Change of Status Forms (For any changes in service except at time of discharge) send to Clarice Dunn (Phone 822-0249, fax 822-2226)**
- **Transition Form send to Clarice Dunn (Phone 822-0249, fax822-2226)**