



Department of Health and Human
Services
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TO: Interested Stakeholders

From: Donald Chamberlain

Re: Two Initiatives of OAMHS and APS Healthcare:

1. Enrollment and RDS Information submission through APS CareConnection
2. Integration of PA/UR of Non-MaineCare Consumers into the Existing APS Review Process

Date: June 17, 2008

For providers of MaineCare funded Community Integration and ACT services

OAMHS is working with APS Healthcare to transition the reporting of the Resource Data Summary (RDS) and Enrollment from OAMHS and the Enterprise Information System (EIS) to APS as part of the information providers are largely already submitting through APS CareConnection.

OAMHS and APS are currently testing the transmission of data and reviewing reporting. We expect that this process will take several more weeks to assure that the system is operational. The transition to APS will most likely be in the beginning of August but we are not going to set a firm date as it really is dependent on the results of the testing.

We will give providers a two week notice at a minimum when we are ready for the transition. We will not be requiring dual data entry in EIS and APS but rather selecting a specific day and stopping the EIS submission. On that date all Enrollment and RDS information will be submitted only via APS CareConnection. Providers will discontinue all separate submissions of Enrollment and RDS information to DHHS/OAMHS, including existing batch uploads and online submissions through eNetME.

To ensure that current RDS data is submitted, the authorization length for Initial Registrations and Continued Stay Requests for Community Integration (CI) and ACT will change from 180 days to 90 days.

Once the transition date is announced, providers will be required to submit the client's next Continued Stay Request at the date that coincides with the consumer's next 90 day ISP review, rather than waiting for the 6 month review date. This will speed the transition and the accumulation of usable unmet needs data.

In summary:

- 1) Transition to APS for Enrollment and RDS information is projected for early August with a two week minimum notification to providers;
- 2) Change authorization length from 180 days to 90 days for CI and ACT; and
- 3) Once the transition date occurs, providers will submit a Continued Stay Request to coincide with the next 90 day ISP/RDS review date and not wait till the already approved 180 day authorization is expended.

For providers of non MaineCare funded Community Integration, ACT, and Daily Living Supports

OAMHS and APS are developing a Prior Authorization and Utilization Review (PA/UR) process for those clients who are applying for Community Integration, ACT, and Daily Living Supports, funded by General Funds. The process will essentially be the same as the existing PA/UR process used with MaineCare clients. This system is also expected to be in place in early August. At the point that we implement the transition of the RDS and Enrollment from EIS to APS, we will also stop accepting the enrollment and RDS information for non-MaineCare funded clients in EIS.

We are excited about this partnership with APS and what we expect will be a reduction in the administrative burden for providers. Please contact me should you have any questions.

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