

Information for Case Managers: MaineCare Waiver Programs, Section 21 and Section 29:

## Changes in Waiver Services

The team meets—in person or by telephone—to discuss the Member’s current needs, any changes, and specific services (what staff will do “to/with/for” the Member) to address those needs. The team will consider the impact of these proposed changes on any other services currently being provided. The team will be aware of the limits on combined Community Support and Work/Employment Support services.

The Case Manager opens and re-versions the Person-Centered Plan **in EIS** so that the Service Provider(s) can complete the MaineCare Service Description(s) with the new service information.

If the chosen Service Provider Agency is not a **current** service provider, the Case Manager will forward the chosen Service Provider’s Release of Information to the local IDS staff person and ask to have a relationship created for the proposing agency. The IDS staff person will notify the Case Manager when the relationship has been created.

The Service Provider will complete the MaineCare Service Description **in EIS** (the Proposal.)

The Member/Guardian will sign the OADS Personal Plan Face Sheet when the service descriptions are complete and agreed to.

The Case Manager has 10 calendar days to review the proposed changes in the Service Description(s) and consult with his/her supervisor, if necessary.

The Case Manager submits to the Resource Coordinator:

1. An Authorization Request Form
2. The **new** OADS Personal Plan Face Sheet—**paper copy**—with Member/Guardian & Case Manager signatures, along with a note that the Service Descriptions are available in the Person-Centered Plan **in EIS**. These signatures indicate approval of the proposed service changes reflected in the MaineCare Service Description(s.)
3. Person-Centered Plan (DS PCP Forms assessment) is re-versioned and current—**in EIS**—with services described in the specific MaineCare Service Description (proposed.)

Within 7 calendar days, the Resource Coordinator will review the services and, if approved, will send the Provider a Prior Authorization email, as well as a carbon copy to the Case Manager.

When the Member begins receiving services and the Provider replies to the Prior Authorization email, the Resource Coordinator will enter the authorization into **EIS**.

Depending upon the reliability of the EIS “tickler” system, the Resource Coordinator may send an email to the Provider(s) and Case Manager that the authorization has been entered.