
MAINE INTEGRATED HEALTH MANAGEMENT SOLUTION ENROLLMENT CHECKLIST FOR FACILITIES, AGENCIES, AND ORGANIZATIONS

Part A. Definitions

A facility/agency/organization (FAO) provider is an entity that provides health care services. FAO providers include hospitals, home health agencies, mental health clinics, nursing facilities, laboratories, group homes, residential facilities, and so on. These providers can operate either under a Type 1 Individual NPI as a sole proprietorship or under a Type 2 Organization NPI.

FAO providers also include atypical providers (fiscal employer agent and transportation services). Although some atypical providers have obtained NPIs, it is not a requirement for enrollment. For atypical providers that have not obtained an NPI, an Atypical Provider Identification number (API) will be assigned when their application is entered into the MIHMS system.

An FAO may or may not have rendering providers associated to them, depending on the type of services provided, as defined in MaineCare policy. The individual practitioners are associated to the FAO provider as rendering providers with a Type 1 Individual NPI.

Part B. Checklist

When enrolling an FAO provider, it will be useful to have the following information, forms, and other documents on hand:

- For the pay-to provider:
 - NPI
 - Tax ID—Federal Employer Identification Number (FEIN) and/or Social Security Number (SSN)
 - Name, title, and email address of the office contact person
 - Phone numbers—primary (required), secondary, emergency, mobile, and fax
 - A copy of the provider's W-9 form
 - Copy of a cancelled check or bank letter to meet the requirements for Electronic Funds Transfer enrollment (if applicable)
 - Signed and dated EFT Agreement document (if applicable)
- For owners and/or board members:
 - The name, Social Security Number, tenure dates, and address information for all owners and/or board members
 - If any owner or board member is an organization, the FEIN for the owner or board member
 - Information regarding sanctions, exclusions, or convictions of owners and/or board members
 - Information regarding owners' and/or board members' participation in other organizations that bill Medicaid for services
 - The relationships among owners and/or board members
 - Information regarding the provider, owners, and employees with respect to certain legal situations

- For service locations:
 - The physical and mailing addresses of the provider's service location(s)
 - For re-enrolling providers only—the current MeCMS ID assigned to the provider's service location(s)
 - A list of any languages spoken by the provider and his or her staff, in addition to English
 - General information about each service location, such as accessibility, office hours, whether the service location is accepting new patients, and the age range and gender restriction for patients
 - The provider type/specialty pairs that represent the provider's practice, as well as all licensing and certification documents for those provider type/specialty pairs
 - Information about the individual facilities, including whether the facility has a gero-psychiatric unit or a distinct part unit, the groups of people that the facility services (e.g., children, adults, etc.), fiscal year end date, and the number and types of beds in the facility
 - Information about participation in MaineCare programs, including specifics for the Primary Care Case Management program, if applicable
- For rendering providers:
 - Each rendering provider's NPI, name, address, gender, phone number, and fax number
 - The provider type/specialty pairs that represent the provider's practice, as well as all licensing and certification documents for those provider type/specialty pairs
 - Information about participation in the Primary Care Case Management program, if applicable
 - A list of the service locations to which the provider is affiliated