

Referral Management Frequently Asked Questions (FAQ)

Q1: How do I report capacity for a member that I see on the waitlist in the Atrezzo portal?

A1: If you are requesting a child from the referral management report, send an email to IntakeME@kepro.com and reference the case ID shown on the report.

Q2: I have requested a member in a specific town, however, was matched with a different town. Why?

A2: Acentra Health matches children who have been waiting the longest in the area. This is to ensure longer waiting children can be served as soon as possible.

Q3: How often is the Acentra Health referral management report updated?

A3: The children waiting for service changes throughout the day due to providers reporting capacity, and when referrals are approved by Acentra Health, and added to the waitlist. The report in the Atrezzo portal is refreshed each night with any updates that have occurred throughout the day.

Q4: How do I report a special staffing need when reporting capacity?

A4: Please be as specific as possible so your request can be reviewed. Staff town preference is not an approved exception to bypass children who are waiting for service.

Q5: The member has a preferred provider. Why can't the agency open them up now? We are the members' preferred provider. Why can't we be matched with them now?

A5: There are multiple children who need to be served in Maine who may have been waiting longer for the service. All referrals approved by Acentra Health are added to the General Waitlist. The member will not move to the Preferred Provider's Family Choice Waitlist until that member has reached the top of the General Waitlist. Once the referral is moved to the preferred provider's family choice waitlist, the provider can open for services when they have capacity to serve.

Q6: Can you tell me where the member is on the waitlist?

A6: The waitlist changes daily because of provider capacity reports and children who may be transitioning from higher levels of care. Waitlists reflect days waiting, and do not estimate wait times, as that depends on provider capacity in their area.

Q7: Why isn't this member on the waitlist?

A7: Monthly outreach calls starting at 60 days on the waitlist are conducted by Acentra Health staff. Three call attempts are made to a family and if there is no response, a letter will be sent to the family. A note is placed in the Atrezzo portal to alert the referral source. Referrals are good for 365 days. If the need continues beyond 365 days, an extension request is required. An extension is good for 180 days.

Q8: If the member becomes psychiatrically hospitalized, do providers need to alert Acentra Health?

A8: No.

Q9: Can I request a female or male client specifically?

A9: When reporting capacity if there is a clinical need for a certain gender, please include those specifics in the capacity request.

Q10: If the CM gets a new client who is already on the waitlist and they are now with a new agency, can Acentra Health make it so the new CM can have access to the referral to be able to monitor it?

A10: Yes, please contact our Provider Relations team and they can enter a referral that is able to be seen by the new agency.

Q11: I noted a preferred provider, and the preferred provider cannot see the member on their family choice waitlist. Why is that?

A11: Members do not move to a family choice waitlist until they have risen to the top of the general waitlist.

Q12: How long is the referral good for?

A12: A referral for both HCT and RCS services is good for 365 days. If a member continues to require service after waiting 365 days, an extension can be requested for an additional 180 days. An extension is required every 180 days until the member is served to ensure they still require the service.

Q13: How do providers access the waitlist.

A13: Referral management reports for each service are available to providers approved by CBHS for those services and the agency staff assigned to access Acentra Health reports. Report access is granted for providers based on how they are set up in the Atrezzo portal by their agency.

Q14: If a member is on the waitlist for services and an agency can serve them but the family is not feeling ready, can they defer and still remain on the waitlist?

A14: If the member does not need the service, a referral should not be made until the service is needed. It is expected the member will work with the first available provider if a preferred provider has not been identified. If the member/family decides they are not ready, they should withdraw the referral and re-refer when ready.

Q15: For members transitioning out of residential, how soon should we be completing the HCT referral prior to discharge

A15: A service referral can be made as soon as a discharge date is set. The HCT team can begin working with a member transitioning home 30 days prior to discharge.

Q16: Can families call Acentra Health and ask to remain on the waitlist for services without needing the monthly check in calls from Acentra Health?

A16: Yes. Guardians can contact Acentra Health and make the request to opt out of any outreach calls. The referent will still have to request extensions to assure the referral remains current. Families can only opt out of outreach calls but continued maintenance by the referent is needed.

Q17: Who puts the member back on the referral management list if they cannot be served? Is it the case manager or the HCT provider?

A17: If any agency is matched with a member from Acentra Health and cannot serve the member, it is the agency's responsibility to report back to Acentra Health via IntakeME@kepro.com as soon as they know they will be unable to serve the member. This is to ensure the member is returned to the general waitlist correctly. Case managers may follow-up with Acentra Health to confirm their client was returned to the waitlist.

Q18: Is it possible for a member to start with Specialized RCS and when they learn the skills they need, they can move to Non-Specialized RCS to work on new skills without going back on the waitlist?

A18: RCS is not a step-down service. Members would need referrals for any new service and must follow the referral management process.

Q19: If a child is on a Specialized RCS program waitlist, can they be referred for Non-Specialized RCS? Can a client be on the waitlist for Specialized 28 and Non-Specialized 28 services?

A19: A member can be on both the Specialized and Non-Specialized RCS waitlists at the same time but can only receive one service at a time. Similarly, a member can be receiving Non-Specialized RCS and remain on the Specialized waitlist until a Specialized provider becomes available.

Q20: If a case manager calls and asks to keep a member on the list, will Acentra Health honor this?

A20: Acentra Health completes outreach calls starting at 60 days to guardians for updated information on a monthly basis. A case manager/referent may contact Acentra Health as well.

Q21: If a youth is under DHHS guardianship, but is staying with family or a foster care provider, can Acentra Health contact who the youth is staying with rather than the guardian? Sometimes the case manager is not aware there has been a change in DHHS guardianship.

A21: Acentra Health is required to contact the guardian.