

Cathy Cooper  

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**Authorized Signature**

**Number:** SPD-AR-10-015  
**Issue Date:** 3/12/2010

**Topic:** Long Term Care

**Due Date:**

**Subject:** MMIS Provider Number Change and Name Change for Nursing Facility

**Applies to (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> All DHS employees                 | <input type="checkbox"/> County Mental Health Directors                  |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services                                 |
| <input type="checkbox"/> Children, Adults and Families     | <input checked="" type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> County DD Program Managers        | <input checked="" type="checkbox"/> Other (please specify): DMAP         |

**Action Required:**

Workers with clients receiving Medicaid-funded service at Harmony House Nursing Home must change the provider number on the MMIS plan of care.

**Effective March 1, 2010 - New MMIS Provider Number: 500616900**

Harmony House Nursing Home  
2366 NW Lakeside Place  
Bend, OR 97701

**To update POC with new provider number please take the following steps:**

1. Start with the Service Plan in ACCESS
  - End old service plan with the end effective date
  - Create new service plan with new provider number new effective date. (No need to change the end date.)
2. Integrate with a change – and don't forget to change the Need Resource to the new provider #.
3. Do a live update in UCMS
4. Go to MMIS
  - to POC/Search with client prime number
  - select current POC line item
  - end the current POC with 12/31/2009 end date (On the Line Item NOT Base Info) and save
  - select same line item and then go to "Add" button on the line item

- then create a new POC with the effective date and new provider number and save (You will need to go through the regular process of adding a new POC).

Hopefully you will see – “Save Successful” and you have updated your POC with the new provider #.

**Reason for Action:**

MMIS provider number is changed due to Nursing Facility change of owner/operator and name change.

**Field/Stakeholder review:**      Yes      No

**If yes, reviewed by:** SPD Operations Committee

*If you have any questions about this action request, contact:*

<b>Contact(s):</b>	Renee Shearer: Nursing Facility change of owner/operator name Carol Mauser: Technical Assistance to MMIS changes		
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