## Process for an Entity Experiencing a Shift in Main Funding Source

### 2019

<table>
<thead>
<tr>
<th>AGENCY CONTACT INFORMATION</th>
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<tbody>
<tr>
<td>DHS/DMH: DHS.DMHP <a href="mailto:ProviderAssist@illinois.gov">ProviderAssist@illinois.gov</a></td>
</tr>
<tr>
<td>DHS/BALC: <a href="mailto:DHS.Rule132BALC@illinois.gov">DHS.Rule132BALC@illinois.gov</a></td>
</tr>
<tr>
<td>DCFS/Designee: <a href="mailto:DCFS.Medicaid@illinois.gov">DCFS.Medicaid@illinois.gov</a></td>
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### Step 1: Entity Contacts Their Certifying State Agency (CSA)

When an entity experiences a shift in main funding source from the Illinois Department of Human Services, Division of Mental Health (DHS/DMH) to the Illinois Department of Children and Family Services (DCFS) or vice versa, the entity shall notify their current CSA via email of the change. The notification must include the:

- **a.** entity name, general mailing address, general email address and general telephone number;
- **b.** primary contact name/title, primary contact mailing address, primary contact email address and primary contact telephone number;
- **c.** entity name and FEIN on file by the CSA;
- **d.** site(s) address; and
- **e.** site(s) NPI number (if a Community Mental Health Center/CMHC)

### Email Addresses:

For certification currently through the Bureau of Accreditation, Licensure and Certification (BALC) on behalf of DHS/DMH: DHS.Rule132BALC@illinois.gov

For certification currently through DCFS: DCFS.Medicaid@illinois.gov
STEP 2: IMPACT (ILLINOIS MEDICAID PROGRAM ADVANCED CLOUD TECHNOLOGY) SYSTEM UPDATED IF THE SITE IS A CERTIFIED COMMUNITY HEALTH CENTER (CMHC)

If the site is a CMHC, the site shall access their enrollment in the IMPACT System and modify the enrollment by selecting and completing the following steps on the "Business Process Wizard" screen:

a. "Associate MCO Plan" step - end date the association with the previous CSA and associate with the new CSA. All sites must either be associated with the Department of Human Services (DHS) or the Department of Children and Family Services (DCFS). To now associate with DHS, enter the "Plan ID" of 3000004 or to now associate with DCFS, enter the "Plan ID" of 3000007.

b. "Complete Modification Checklist" step; and


The following link accesses the IMPACT System:
https://impact.illinois.gov/

General questions about IMPACT or enrollment should be addressed to:
Email: IMPACT.Help@illinois.gov
Phone: 1-877-782-5565 select option #1 (English), option #2 (provider), option #1 (IMPACT)

For difficulties experienced in logging into the IMPACT System, contact:
Email: IMPACT>Login@illinois.gov
Phone: 1-888-618-8078

Once the IMPACT modification has been submitted, the entity shall receive a Request Number which needs to be retained for future reference.

NOTE: The IMPACT System serves as the SYSTEM OF RECORD for the receipt of Federal funding, therefore, all CMHC sites are responsible for maintaining their IMPACT enrollment up-to-date and accurate at all times.

STEP 3: NEW CSA APPROVES THE IMPACT MODIFICATION

The new CSA, either DHS/BALC or DCFS/Designee, shall approve the IMPACT modification. The site shall electronically receive an IMPACT generated notification regarding the approval of the modification.