



DDSD Due Dates and General Guidelines

Individual Data Form (IDF/EDF) Completed by 1/1/11

ID Number format for DDSD NM: LAS-FI-1234 (First three letters of last name - first 2 letters of first name - last 4 digits of SS#)

Choose the ID type associated w/ region (NM, Southwest Region, Developmental Disability Supports)

Some of this data will be transferring to e-CHAT

Medication Histories within Health Tracking Completed by 1/1/11

Some of this data will transfer to the MAAT & e-CHAT

e-CHAT & Custom Forms to begin using 10/1/10: Should be completed in this order:

1. Aspiration Risk Assessment
2. MAAT
3. e-Chat

MAR's:

The MAR is not required at this time.

Any provider may utilize the Therap MAR (either electronic or paper) but they must notify Jennifer Thorne-Lehman to receive an exemption letter from DDSD for some of the NM-specific MAR requirements that Therap does not currently include. If an agency is not using the Therap MAR, they do not need to do anything. It is only if an agency is choosing to use the Therap MAR that they need to contact DDSD for an exemption letter.