



APAC - 1

Waiver or Exception of Reporting Requirements Form

Oregon Revised Statutes (ORS) [442.464](#) and [442.466](#) establish who must report and authorizes OHA to set reporting times and content by rule. ORS [442.993](#) establishes a civil penalty for failure to comply. Oregon Administrative Rules (OAR) [409-025](#) provide additional information on mandatory reporters, schedules, content and compliance.

Use this form ***in advance of the reporting deadline*** to request:

- waivers from reporting for those identified as mandatory reporters or
- deadline extensions for APAC reporting or
- exceptions to validation requirements (data file quality thresholds).

Submit completed forms to: APAC.Admin@dhsosha.state.or.us

Date:

Reporting entity name:

Name of organization

Mandatory reporter name:

Name of organization required to report to APAC if different than Reporting Entity

Commercial carrier

Pharmacy Benefits Manager

Third Party Administrator

Coordinated Care Organization

Doing business as:

Name of business active in Oregon if different than name of Mandatory Reporter

APAC Payer ID:

Contact information of person filing request

Name:

Title:

Mailing address:

Number and street or PO Box

City

State Zip

Phone:

Email:

Section 1. Type of Request

Waiver of reporting. Check this box if you are requesting an annual waiver of all reporting requirements. **Complete Section 2.** A completed request for waiver must be submitted at least 60 days prior to applicable submission deadline. *If OHA denies the waiver request, your entity will be responsible for submitting data as outlined in Appendix A-H by the dates published in Schedule A.*

Deadline extension for a quarterly submission, data correction or validation requirement. **Complete Section 3.** A completed request for deadline extension must be submitted at least 14 days prior to applicable submission deadline. If the need for an extension is identified after the submission date, the request must be initiated through Milliman's FFQ system.

Exception to data file quality thresholds **prior** to data submission. **Complete Section 3.** A completed request for data exceptions must be submitted at least 14 days prior to applicable submission deadline. Exception requests for data file quality thresholds **during** data submission must be made through Milliman's FFQ system.

Section 2. Waiver of reporting

- a. Number of covered lives in Oregon for reportable lines of business:
- b. Reason waiver is requested:

c. Waiver previously granted? Yes No If yes, date

Signature:

Date:

Section 3. Deadline extension or exception to data file layout, format or threshold

Oregon Administrative Rule (OAR) [409-025-0120](#) establishes the data layout, format and quality required for APAC compliance. OAR [409-025-0130](#) establishes the submission schedule.

a. Which data file(s) are affected?

Appendix A - Eligibility

Appendix B - Medical Claims

Appendix C - Pharmacy Claims

Appendix D - Dental Claims

Appendix E - Provider

Appendix F - Subscriber Billed Premium

Appendix G - Control Totals

Appendix 1 - Payment Arrangement File and Appendix 2 - Payment Arrangement Control

b. Explain your request (what date change for which files or what file layout, file format or field threshold cannot currently be met):

c. Extensions/exceptions in past 24 months:
(count)

Date of last extension/exception:

d. Extension or exception requests, whether through an APAC-1 filed with OHA directly or Milliman's FFQ system, are meant for issues that cannot be easily resolved. Exceptions are not meant for minor issues or those that can be easily solved if resources are allocated. Explain the extenuating circumstances of your organization that supports the extension or exception at this time:

e. If an exception request is granted, OHA’s expectation is that grantees continue to work to meet the deadlines, requirements or quality threshold as quickly as possible. Explain steps and resources that will be used to become fully compliant (i.e., meet statutory deadlines or data quality in the future):

f. Anticipated date for full compliance with law and rule:

Signature:

Date:

OFFICIAL USE ONLY Decision on request

Section 2. Waiver to reporting to APAC is If approved, end date _____	Approved	Denied	N/A
Section 3. Extension to _____ (Date)	Approved	Denied	N/A
Exception to quality threshold to _____ (Date)	Approved	Denied	N/A

Date request received: _____ Date of decision: _____

Signature: _____