
N-FOCUS Major Release

MLTC

March 15, 2015

A Major Release of the N-FOCUS system is being implemented March 15, 2015. This document provides information explaining new functionality, enhancements and problem resolutions made effective with this release. This document is divided into four main sections:

General Interest and Mainframe Topics: All N-FOCUS users should read this section.

Electronic Application: N-FOCUS users responsible for case activity received through the Web based Electronic Application should read this section.

Developmental Disabilities Programs: N-FOCUS users who work directly with DD programs and those who work with the related Medicaid cases should read this section.

Note: This section will only appear when there are tips, enhancements or fixes specific to Development Disabilities Programs.

Expert System: All N-FOCUS users with responsibility for case entry for AABD, ADC Payment, SNAP, CC, FW, IL, MED, and Retro MED should read this section.

Note: When new functionality is added to N-FOCUS that crosses multiple topics (ie General Interest and Mainframe, Alerts, Correspondence, Expert System etc) the functionality will be described in one primary location. This location will usually be the General Interest and Mainframe section or the Expert System section. Alerts, Work Tasks and Correspondence that are part of the new functionality will be documented in both the primary location that describes the entire process and in the Alerts, Work Tasks and Correspondence sections.

Table of Contents

General Interest and Mainframe	2
FFM Referral ID Number (Change)	2
CHARTS Referral (Change)	2
CHARTS Referral List Window (Change)	3
CHARTS Referral Detail Window (Change).....	3
Navigating to I-CHARTS (Change).....	7
Ribicoff Program Case Name (Change)	7
Mainframe and Expert System Review/Recertification (Change)	8
List Service Type Window Sort/Filter Options (Change)	9
Search Claim Window (Change)	9
Search Payment Window (Change)	9

Detail Service Approval (Change)	11
Home Again Service Authorization (Change)	12
Interfaces	12
Cancel Interface Request (New)	12
Tax and SSA Interface Response Status (Change).....	13
Interfaces Menu (Fix)	14
Correspondence.....	14
Service Needs Assessment/Plan Notice (Change)	14
PASS Notice of Action Spanish (Change)	14
Service Needs Assessment Plan Notification (Change).....	14
Electronic Application	15
ACCESSNebraska Training Site (New)	15
ACCESSNebraska PIN Request with a Future Closed Date	15
Expert System	15
Health Check (Change)	15
Notice Language for Renewal (New)	15
Child's Income (Change)	16
Child's SSA Income (Change)	16
PW and CHIP Eligibility (Change)	18
SCHIP Eligibility (Change)	18
Pregnant Woman Program (Change)	19
Pregnant Woman Reconfiguration (Change).....	19
Remove Exemption Rules from AABD/MN Cases (Change)	19
Medicaid Budgeting (Fix)	19
MED APTC Information (Tip)	20

General Interest and Mainframe

FFM Referral ID Number (Change)

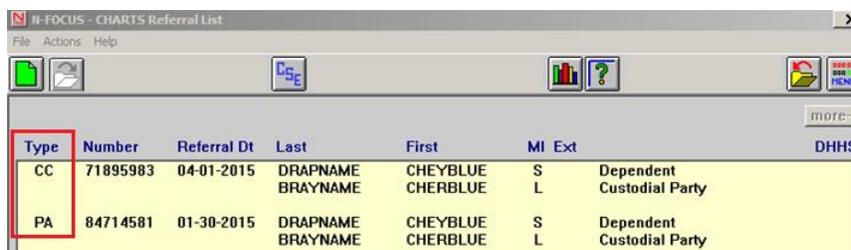
The FFM Referral ID Number Box will now display when an FFM application is tied to a Medicaid case. Before the fix the box was only active when the case was pending or active. This will work for active, closed, denied, and pending cases. As long as there is a Health Care Market Place application tied to Master Case the dialog box will be open to fill in.

CHARTS Referral (Change)

The following changes have been made to CHARTS Referral.

CHARTS Referral List Window (Change)

On the CHARTS Referral List window, you will now see a Type code that will be used so CSE can distinguish the difference between a Child Care Only (CC) and Public Assistance (PA) case.

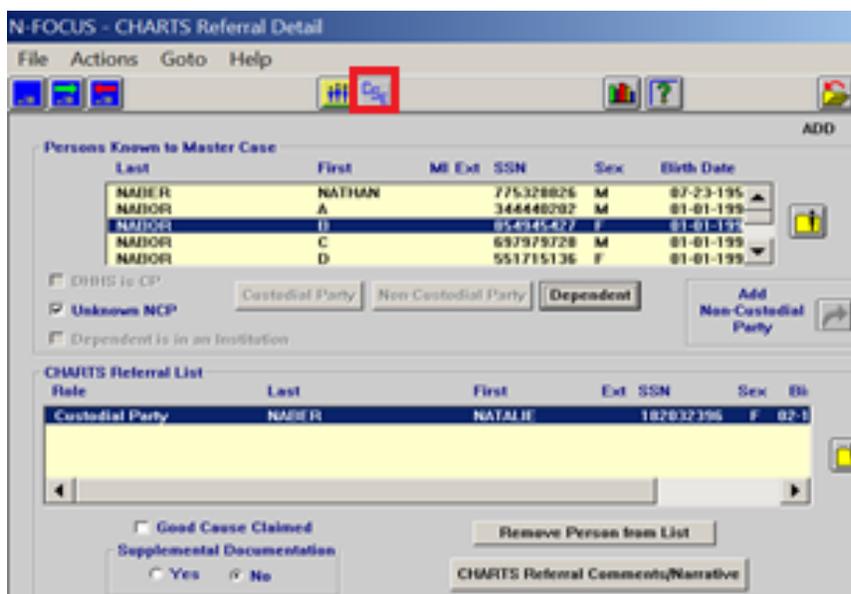


Type	Number	Referral Dt	Last	First	MI	Ext	DHHS
CC	71895983	04-01-2015	DRAPNAME BRAYNAME	CHEYBLUE CHERBLUE	S L	Dependent Custodial Party	
PA	84714581	01-30-2015	DRAPNAME BRAYNAME	CHEYBLUE CHERBLUE	S L	Dependent Custodial Party	

CHARTS Referral Detail Window (Change)

The following changes have been made to CHARTS Referrals:

- On the CHARTS Referral Detail window, the worker will be required to select a custodial parent, non-custodial parent and/or Unknown NCP before they will be allowed to select any dependents.
- The selected Dependent must be in Active Status within the case, CC only program cases the Dependent must either be Pending or Active.
- Once the CP, NCP and/or Unknown NCP are selected, the Dependent push button will be enabled.
- If the CP, NCP, Unknown NCP, and dependent do not pass all the requirements for a CHARTS Referral, the worker will receive a pop-up message stating why the referral for that dependent cannot be created.



Persons Known to Master Case

Last	First	MI	Ext	SSN	Sex	Birth Date
NATHAN	NATHAN			775328826	M	07-23-195
NATHAN	A			344448282	M	01-01-199
NATHAN	B			044145477	F	01-01-199
NATHAN	C			697979728	M	01-01-199
NATHAN	D			551715136	F	01-01-199

DHHS is CP
 Unknown NCP
 Dependent is in an Institution

Custodial Party New Custodial Party Dependent Add Non-Custodial Party

CHARTS Referral List

Rate	Last	First	Ext	SSN	Sex	Bi
Custodial Party	NATHAN	NATHAN		182832396	F	02-1

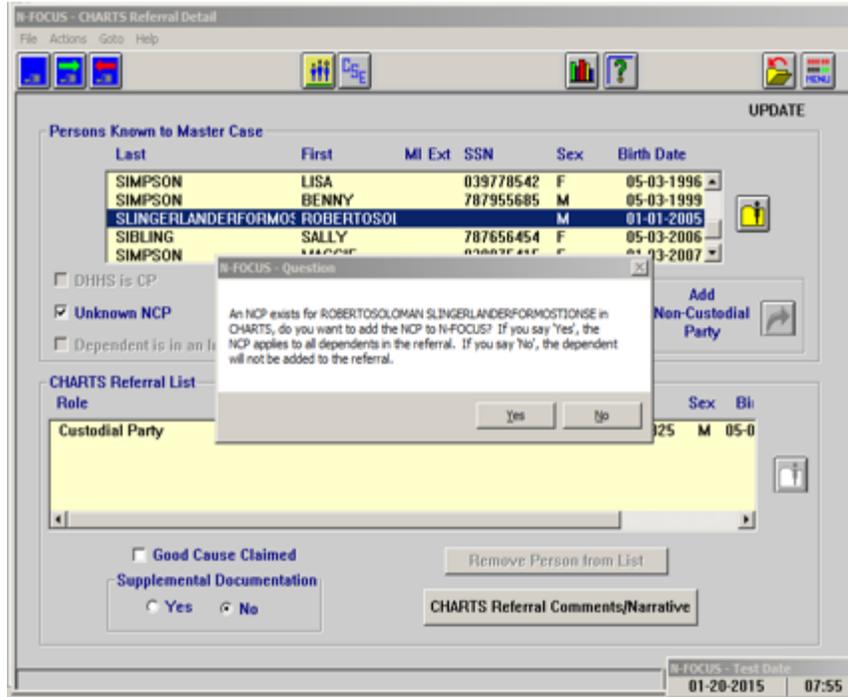
Good Cause Claimed
Supplemental Documentation
 Yes No

Remove Person from List
CHARTS Referral Comments/Narrative

The following are new edits to determine if a CHARTS Referral can be created. These edits will be conducted automatically by N-FOCUS:

- When the new button is selected in the CHARTS Referral List window, the master case must have at least one active CHARTS referable program in order for the

- referral to be created, if it does not the worker will receive this message: The referable program case is not in active status or pending status (CC). Pending CC cases can be referred in pending status, and will not receive this message.
- When a worker tries to create a new referral on a dependent that is in a referable program, but the dependent is not in active status in the program, the worker will receive the message, “Dependent Name” is not in active status or pending status (CC) in a CHARTS referable program’. (Except CC only, as the dependent can be in pending status).
 - If the referral is for a Children’s MED program case, and the CP is not in active status, or Spend Down status in a med program, the worker will receive a message stating, ‘Current case status does not allow for a CHARTS referral’ The reason for this is because it will still be considered a Children’s MED case, which is not a referable program. No referral will be created. If the CP is active or in Spend Down status in a MED case, no message will be created and a referral will be created.
 - If the CP is not in active status or an FR in a referable program the worker will also receive the message, ‘Current case status does not allow for a CHARTS referral’.
 - If the referral does not contain a CP (or DHHS is CP or Dependent is in an institution), NCP (or Unknown NCP) and at least one dependent and a worker selects “Save & Close” or “Save & Next”, the worker will get the following message: ‘A CHARTS referral must contain a CP, NCP and at least one dependent before saving/sending’. If the worker selects OK and selects “Save & Close” or “Save & Next” again, they will receive the same message. The worker will have to close out the window in order to get out of the Charts Referral Detail window
 - When a worker creates a new referral on a dependent, N-FOCUS will check CHARTS to determine if there is an open CHARTS case, which included that dependent, CP and NCP (or Unknown-NCP). If there is an open CHARTS case, the worker will receive a message stating, ‘CHARTS case already open’. That dependent will not be moved into the Charts referral List box in the Charts Referral Detail window, and no referral will be created.
 - When a worker creates a new referral, and selects an Un Known NCP for a dependent(s), N-FOCUS will check CHARTS to determine if there is a NCP listed for that dependent. If there is an NCP listed, the worker will receive a message stating: **‘An NCP exist for “dependent name” in CHARTS. Do you want to add the NCP to N-Focus? If you say ‘Yes’, the NCP applies to all dependents in the referral. If you say ‘No’, the dependent will not be added to the referral’**.



- If the worker selects “No”, that dependent will not be added to the CHARTS Referral, and no referral will be allowed for that dependent using a NCP, because CHARTS shows an NCP for them. If no NCP is found for the first dependent selected, that dependent will be added to the CHARTS Referral List box, N-FOCUS will then continue through the list of dependents highlighted until or unless, it finds an NCP for a dependent. Once an NCP is found for any dependent, N-FOCUS will not continue to check any of the remaining dependents for an NCP.
- If the worker selects “Yes” to the above message, N-FOCUS will take the worker to the Add Person window. The Add Person window will be pre-populated with the person data that CHARTS has on the NCP.
- Once the worker has completed the ARP resolution process to add this NCP to N-FOCUS, the NCP will be brought back into the referral. The worker can select the NCP, and add them to the referral.
- After this has been completed, all selected dependents in the referral will move down to the CHARTS referral List box in the CHARTS Referral Detail window, then a referral will be created for that dependent(s) using the found NCP.

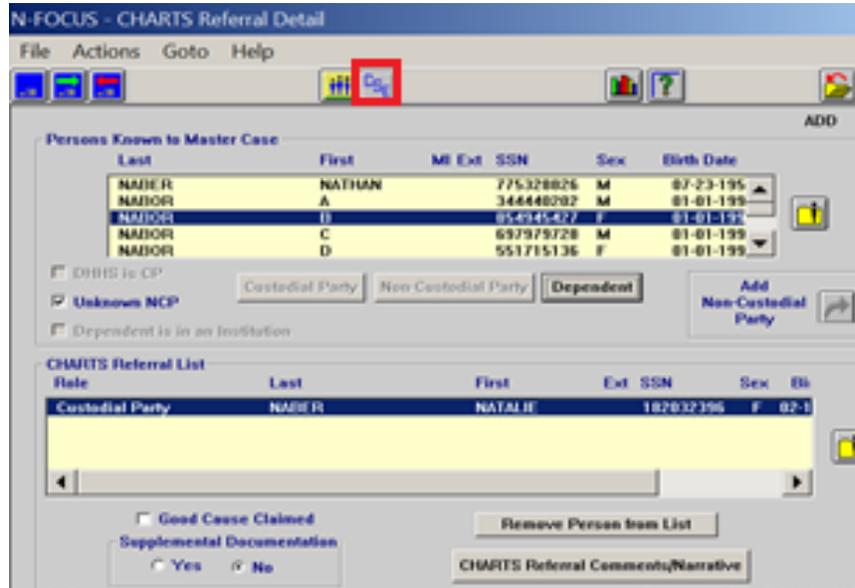
- If the worker does not want to use the NCP listed in the referral that was brought back on another dependent, then they will need to remove that dependent from the CHARTS Referral List box, and a new referral for that dependent will need to be created.

When the worker has selected all the dependents that they want to use for the NCP that is in the CHARTS Referral List, they can select “Save and Next”, or “Save and Close”.

- If the worker selects “Save and Close” and says “Yes” to the message **Do you want to send a Charts referral now?** a referral will be created and sent, once a referral is sent, no updates will be allowed on that referral.
 - The worker can then create additional referrals for the other dependents by selecting the “New” button.
- If the worker says “No” to the message, then the referral will be left in pending status, and no other referrals will be allowed to be created until action is taken on the pending referral.
 - If the worker does try to create a new referral and there is a pending referral, they will receive this message **‘There is a pending referral. Complete or delete referral before adding a new CHARTS referral.’**
 - The worker will either have to send the pending referral(s) or delete them in order to create a new referral. The list window has a delete referral button under Actions, on the menu bar, in order to delete the referral.
- When the window is opened on a saved referral in order to make any updates before sending, N-FOCUS will run that referral through all the edits, on each entry in the CHARTS Referral List to confirm that the referral still passes all the edits.
- If the worker has created a Child Care only referral, and then the client applies for a PA program (ADC etc.), the worker will need to create a new referral for the Public Assistance program.
 - This is because CHARTS handles Public Assistance referrals differently from Child Care Only referrals.

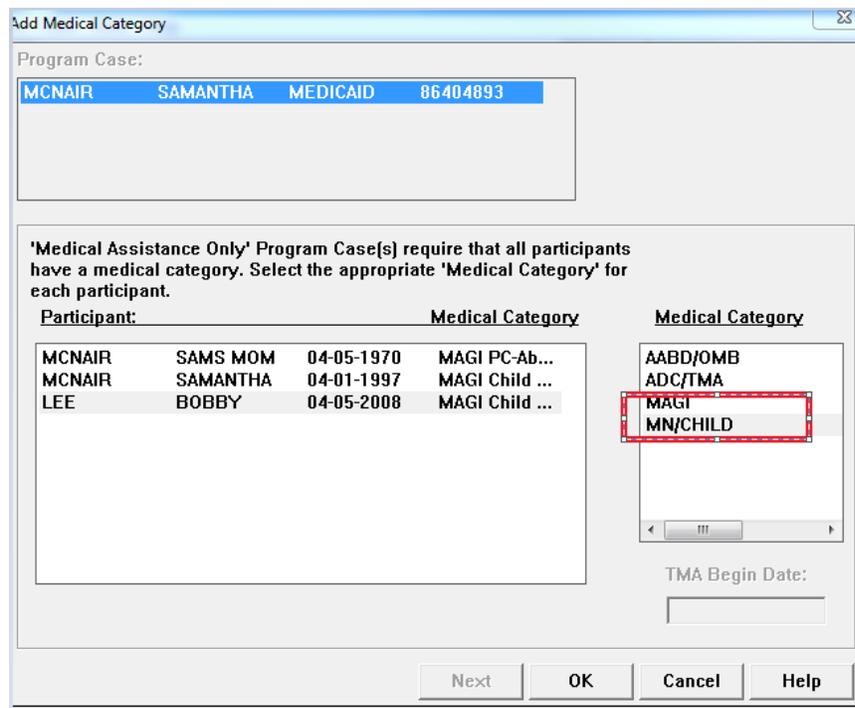
Navigating to I-CHARTS (Change)

The CSE Interface Icon is now located on the CHARTS Referral Detail window. Selecting this icon will navigate you directly to I-CHARTS.



Ribicoff Program Case Name (Change)

N-FOCUS will now no longer refer to a program case as RIB (Ribicoff), this MED category will now be called MN/CHILD.

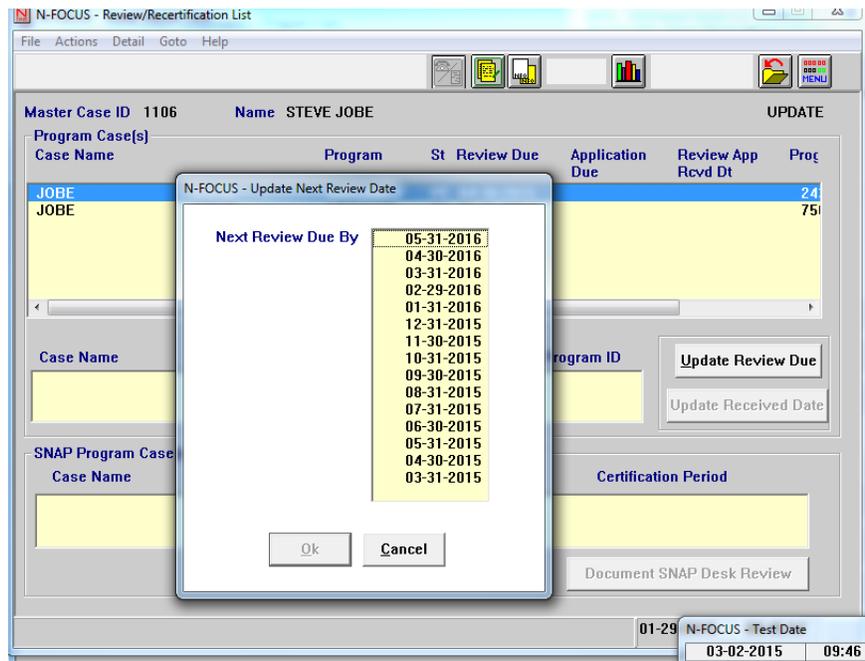


Mainframe and Expert System Review/Recertification (Change)

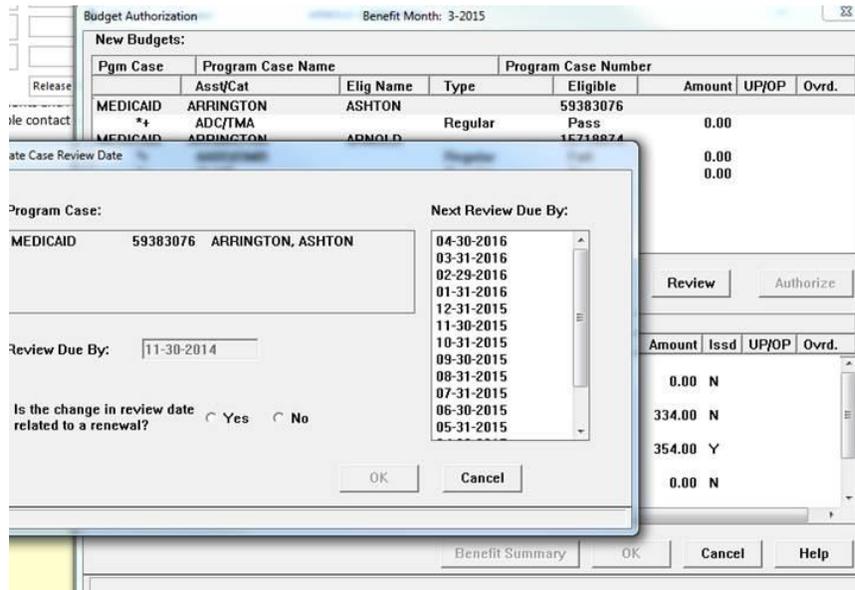
Review Tracking for program cases in Denied Status will now display.

In Review Tracking the Update Next Review Date drop down list has been changed to start at the top with the most future month and year and to end with the most current month and year. The same change was made in the Expert System Review/Recertification task and in Budget Authorization when authorizing Review budgets in the Expert System.

This should make Next Review Date easier to select.



Expert System, Budget Authorization Review Tracking



List Service Type Window Sort/Filter Options (Change)

All of the column headings on the List Service Type window are now available for selection in both the Sort and Filter options. The following fields have been added to each dialog box.

Sort Dialog Box Fields:

- Identification Number
- Status Begin Date
- Status End Date

Filter Dialog Box Fields:

- Name
- Identification Number
- Status Begin Date
- Status End Date

Search Claim Window (Change)

From the Search Claim window, you will now be able to search for claims based on either Service Dates or by Paid Dates. The default will be Service Dates but can be changed by selecting Paid Dates from the dropdown.

Note: The search will look at the date that the claim status was changed to Paid which is not the same as the Issued Date on the payment. The process to pay a claim typically begins (claim status is set to Paid) approximately 3 days prior to the Issued Date on the payment.

The screenshot shows the 'N-FOCUS - Search Claim' window. It features several input fields and dropdown menus. A red box highlights a dropdown menu with the following options: 'Service', 'Paid', and 'End'. The 'Service' option is currently selected. The window also includes fields for 'Claim Number', 'Line Number', 'Provider Number', 'Provider Name', 'Case Person Number', 'Case Person Name', 'Program', 'Status', 'Service Type Number', 'Service Type Name', 'Status' (with radio buttons for 'Postponed' and 'Suspended'), and 'Agency Office Name'. At the bottom, there are buttons for 'Search', 'New', 'Preprint', 'Clear', 'Cancel', and 'Help'.

Search Payment Window (Change)

It is now possible to search for payments by Payee from the Search Payment window.

The pushbutton in the upper right corner of the Search Payment window has been changed from Owner Organization Payments to Owner/Payee Payments. When this button is selected, the Search Payments for Owner/Payee window displays.

Owner Organization Group Box – This search works as it has in the past and will be used to searches payments by owner Organization.

Payee Group Box – This new search option will allow you to identify either budget payments or claim payments based on the ID of the Payee.

Note: First you must specify whether the payee is a Person or an Organization. Then, because an Organization can be a payee

for either claims or budget payments, you must specify either Claim or Budget. The out select arrow is used to navigate to either the Person Search or Search Organization to get the appropriate ID number. The date parameters are defaulted but can be changed.

Issued Date Group Box - The date fields to tailor the search are now located at the bottom of the search window. N-FOCUS will set default dates but you can change the dates as needed.

Note: You will only be able to search by Payee for payments made on or after 3/18/15.

The screenshot displays the N-FOCUS Search Payment interface. It features two overlapping windows. The background window, titled 'N-FOCUS - Search Payment', has a 'Payment' section with 'NFO Number' and 'NIS Number' input fields, and a red-bordered box labeled 'Owner / Payee Payments'. The foreground window, titled 'N-FOCUS - Search Payments For Owner / Payee', contains three red-bordered sections: 'Owner Organization' with 'Number', 'EIN/SSN', and 'Name' fields; 'Payee' with radio buttons for 'Person' and 'Organization', and 'Payment Type' with radio buttons for 'Claim' and 'Budget'; and 'Issued Date' with 'Begin' (08-03-2014) and 'End' (02-10-2015) date pickers. At the bottom of the foreground window are 'Search', 'Clear', 'Cancel', and 'Help' buttons. A status bar at the bottom right shows the date '02-03-2015' and time '14:29:00'.

Detail Service Approval (Change)

The following changes have been made to updating a Payee for a Detail Service Approval:

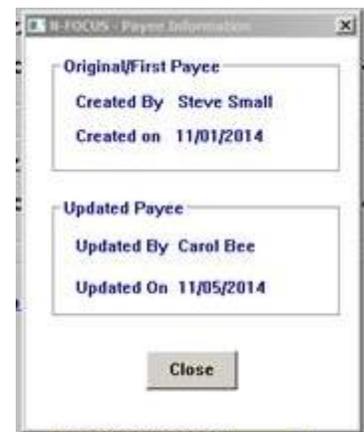
1. When a new Detail Service Approval is created and saved the ability to update/change the payee will be disabled.
2. When the Payee Out Select button is selected a dialogue box will be display the following message:



Payee Tracking Attributes:

Tracking attributes will be added to the Service Approval Detail to determine who originally created the service approval and entered the payee information and who last update the Service Approval and Payee information.

To see the Tracking Attributes select the "Payee Information" from the Detail drop down within the Detail Service Approval window. If the Payee was create prior the N-FOCUS release the Original Payee will state "Payee Created Before Tracking Implemented."



Home Again Service Authorization (Change)

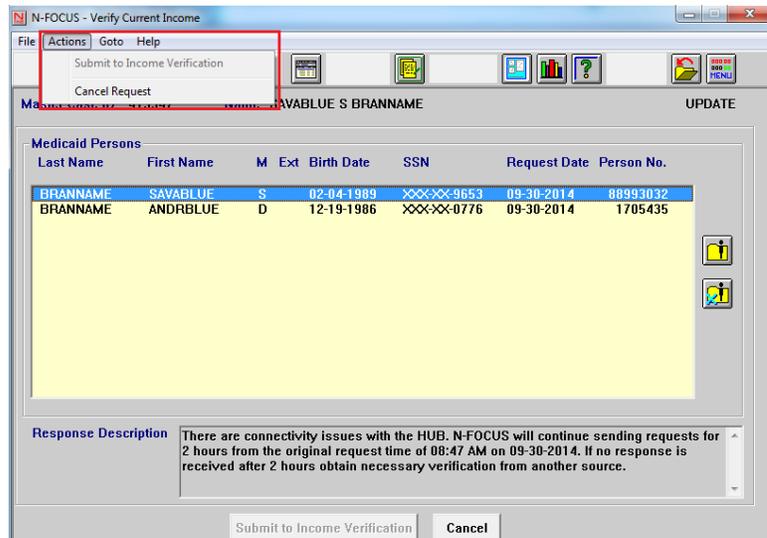
With this release, staff will only be allowed to create Service Authorizations for Home Again Services for the A&D Waiver Program.

Interfaces

Cancel Interface Request (New)

In Verify Current Income (VCI/TALX) some messages have stayed in place for months and workers haven't been able to send a new request. With this release you may Cancel the current request and make another. To cancel an Interface request, follow these steps:

1. From the Verify Current Income window, select Actions>Cancel Request.
2. Submit to Income Verification for a new version of the Interface.



Tax and SSA Interface Response Status (Change)

A Response Status or Description box has been added to the Tax Household Information Request/Response window and the SSA List window.

To view the Status, select the Request Row and the Response Status will display.

Tax Household Information Request Response Window

Case Person
 Name ROBERT MACY SSN 007-96-9606 SEX FEMALE Birth Date 03-21-1958

Requested By	Request Date	Request Time	Response Status
DSSZ913	02-18-2015	14:28:29	Request Submitted
DSSZ913	01-20-2015	10:10:02	
DSSZ913	12-30-2014	15:02:41	

Request Information

Last Name	First Name	M	SSN	Tax Filer Category	Person Number
MACY	ROBERT		XXX-XX-9606	PRIMARY	22501461

Response Information

Last Name	First Name	Return Year	MAGI Amount	Taxable SSA Amount	Adj Tax Return Amount	Total No. of Exemptions

SSA Interface List Window

Person
 Name ROBERT MACY
 SSN 007-96-9606 Sex FEMALE Birth Date 03-21-1958

Create Date	Response Date	SSN Verified	Citizenship
01-20-2015			
01-20-2015			
08-08-2014	08-08-2014		
10-02-2013	05-04-2009		

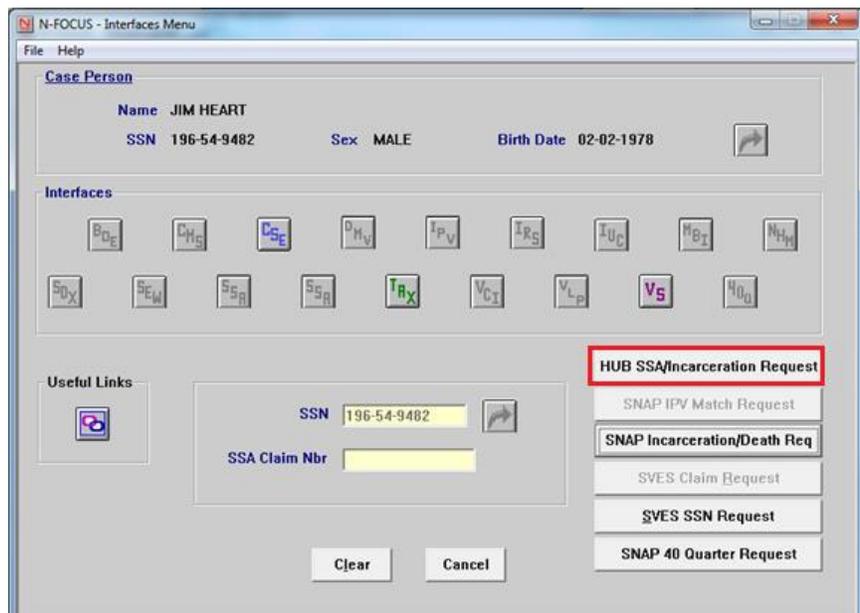
Response Description

There are connectivity issues with the HUB. N-FOCUS will continue sending requests for 2 hours from the original request time of 02:19 PM on 01-20-2015. If no response is received after 2 hours obtain necessary verification from another source.

Interfaces Menu (Fix)

The HUB SSA/Incarceration Request button was not enabling if the person's case was in Spenddown or Premium Due status. This has been fixed.

The button should be enabled for all persons in Pending or Active status in a Medicaid case regardless of status.



Correspondence

Service Needs Assessment/Plan Notice (Change)

In order to be able to send the Service Needs Assessment Plan Notice to a client prior to a Provider being identified, this notice will now be separated into two notices. One for the Client and one for the Provider.

This change will apply to both PAS and SSAD/Chore.

PASS Notice of Action Spanish (Change)

The PASS Notice of Action is now available in Spanish with this release.

Service Needs Assessment Plan Notification (Change)

The following information has been added to the Service Needs Assessment Plan Notice:

- The Client's Person Number has been added to the Notice Header
- The SNA Assessment ID Number has been added to the Notice Header
- A description field has been added to provide specific parameters to a selected task

Electronic Application

ACCESSNebraska Training Site (New)

With this release, we now have an ACCESSNebraska Training Site. Instructional information will be shared with service areas for office use and training. The site was developed as a way for DHHS staff to navigate ACCESSNebraska from a client view.

ACCESSNebraska PIN Request with a Future Closed Date

With the March release, clients who have an ACCESSNebraska account will be able to request a new PIN if their case has a future closed date. They will have this ability as long as the date of their request is within a month that they still have a program case in active status.

Expert System

Health Check (Change)

The Health Check task has been removed from the Expert System. Health Check activities are now handled by the Managed Care Organizations.

Notice Language for Renewal (New)

A new Notice of Action has been created that is specific to Renewals. This notice will be generated in Expert System. To generate this notice you will need to run the budget. When you run the budget update the next review date and the change in review date will prompt the language on the notice.

You can also update the review date by clicking on the Review/Recertification on the tree.

Note: The Medically Needy Share of Cost, Premium Due and Former Foster Care Renewal Notices will be available with a future N-FOCUS release.

Budget Authorization Benefit Month: 12-2014

New Budgets:

Pgm Case	Program Case Name	Elig Name		Type	Eligible	Amount	UP/OP	Ovrd.
MEDICAID	MIKKELSEN	LUKAS		Regular	49022449	Pass	0.00	
*+	AABD/OMB							

Previously Authorized Budgets: Budget Override Review Authorize

Update Case Review Date

Program Case: MEDICAID 49022449 MIKKELSEN, LUKAS

Next Review Due By: 11-30-2014, 12-31-2014, 01-31-2015, 02-28-2015, 03-31-2015, 04-30-2015, 05-31-2015, 06-30-2015, 07-31-2015, 08-31-2015, 09-30-2015, 10-31-2015

Review Due By: 10-31-2014

Is the change in review date related to a renewal? Yes No

OK Cancel

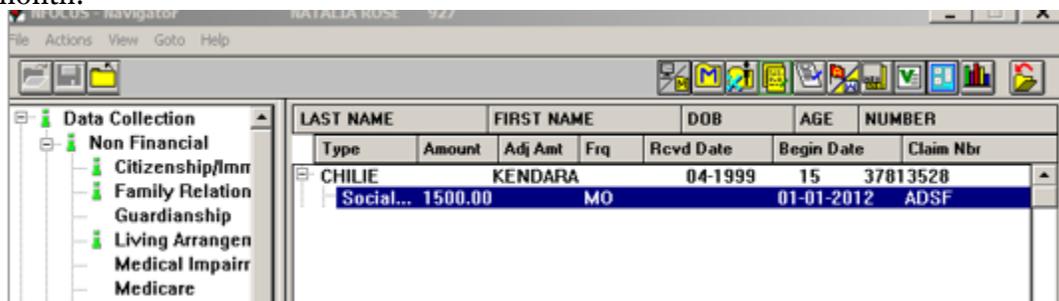
Child's Income (Change)

If a child is in the household and under age 19 their income will only count if they meet or exceed the tax filing threshold. If a child is NOT in the same MED benefit HH as their parent then all income they have will be counted in the budgets.

Child's SSA Income (Change)

Any SSA income a child is receiving will be excluded from MAGI and CHIP budgets for both the child and parent budget. However, if the child has a filing requirement based on other income, the full amount of his/her Social Security benefits will be included in total household income.

In this case Kendara is the child of Natalia. Kendara is receiving SSA in the amount of \$1500 per month:



LAST NAME	FIRST NAME	DOB	AGE	NUMBER		
Type	Amount	Adj Amt	Frq	Rcvd Date	Begin Date	Claim Nbr
CHILIE	KENDARA	04-1999	15	37813528		
Social...	1500.00		MO		01-01-2012	ADSF

The SSA income is excluded from the parent and the child's budget and they both pass:



Pgm Case	Program Case Name	Elig Name	Type	Eligible	Amount	UPJOP	Ovrld.
MEDICAID	ROSE	NATALIA		54014521			
*s	MAGI Child 6-18	KENDARA	Regular	Pass	0.00		
*s	MAGI PC-Absence	NATALIA	Regular	Pass	0.00		

Behind the unearned income window the amount will still show in the filing requirements section but will show as excluded in the unearned income section:

MEDICAID MAGI Child 6-18 Unearned Income Detail for 11/2014

Fluctuating Unearned Income:
No Fluctuating Unearned Income for this budget

Stable Unearned Income:
No Stable Unearned Income for this budget

Excluded Unearned Income:
Social Security CHILIE KENDARA
Reason Code: MAGI no filing requirement

MAGI filing requirement comparison:
CHILIE KENDARA Tax Dependent of Parent

Monthly EI:	0.00	Annual EI:	0.00	EI Limit:	6100.00
Monthly UI:	1500.00	Annual UI:	18000.00	UI Limit:	1000.00
Monthly GI:	0.00	Annual GI:	0.00	GI Limit:	1000.00

[OK]

However, if the child has a filing requirement based on other income, the full amount of his/her Social Security benefits will be included in total household income. In the case below Kendara has SSA of \$1500 and earned of \$600 per month. Because she now has a filing requirement all of her income will count resulting in a failed MAGI PC and failed MAGI 6-18.

Budget Authorization Benefit Month: 11-2014

New Budgets:

Pgm Case	Program Case Name	Elig Name	Type	Eligible	Amount	UP/OP	Ovrd.
MEDICAID	ROSE	NATALIA		54014521			
*r	MAGI Child 6-18	KENDARA	Regular	Fail	0.00		
*	MAGI PC-Absence	NATALIA	Regular	Fail	0.00		
*4	MAGI CHIP	KENDARA	Regular	Pass	0.00		

Looking at Kendara's failed MAGI 6-18 budget we see all of the income as counting:

Benefit Summary Begin Date: 11-2014

ROSE, NATALIA	MEDICAID	MAGI Child 6-18	Regular
Unearned Income	1500.00	Unit Size	2
Earned Income	600.00	Net Countable Income	2100.00
Gross Income	2100.00	Medical Income Level	1744.00
MAGI Allowable Deductions	0.00		
Total Income Before Disreg	2100.00		
5% FPL Disregard	0.00		
Resource Test:	Exempt		
Income Test:	Fail		
*Income Exceeds Standards		Creation Date	01-30-2015

*This information may contain Federal Tax information (FTI)

OK Help

Looking behind the earned or unearned income window you can see the MAGI filing requirement comparison showing that the Earned Income is above the filing limit. This will result in all income counting in the budgets:

MAGI filing requirement comparison:					
CHILIE KENDARA		Tax Dependent of Parent			
Monthly EI:	600.00	Annual EI:	7200.00	EI Limit:	6100.00
Monthly UI:	1500.00	Annual UI:	18000.00	UI Limit:	1000.00
Monthly GI:	2100.00	Annual GI:	25200.00	GI Limit:	6100.00

PW and CHIP Eligibility (Change)

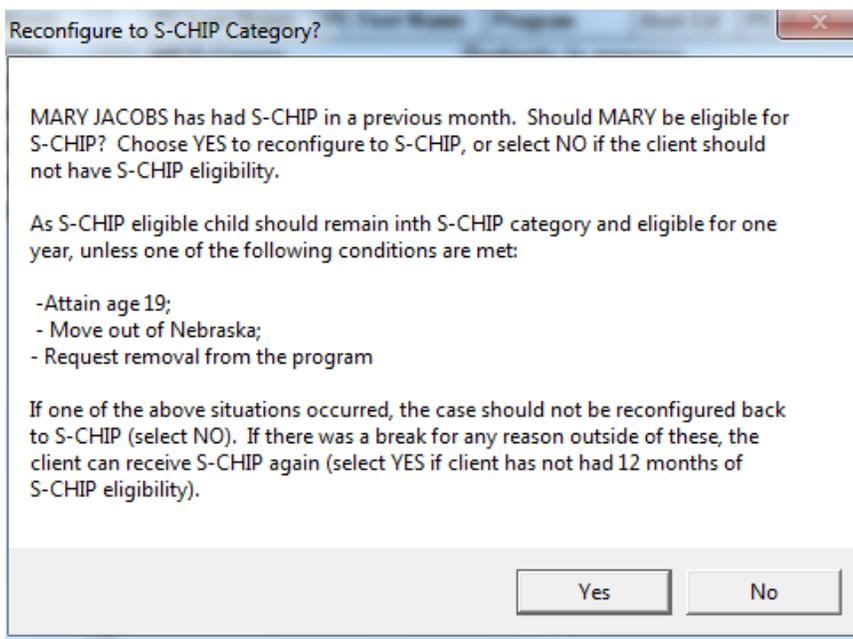
Previously if a child was pregnant and failed MAGI 6-18, it would move on to check for PW MED, however if the PW failed we were not doing a check to see if the client could be eligible for CHIP. This has been changed to look for CHIP eligibility after checking for PW.

SCHIP Eligibility (Change)

Once a child has been determined eligible for SCHIP the child should be continuously eligible and will stay in SCHIP for one year unless one of the following conditions are met:

- Attain age 19
- Move out of Nebraska
- Request removal from the program; or if the household requests removal from the S-CHIP program there is no going back to S-CHIP at a later date.
- Deceased

Once a client has had 12 months of SCHIP they will not be able to be configured into SCHIP again. If the client turns age 19 the configuration window will pop up and not allow the client to be SCHIP anymore.



If there was ever a break in SCHIP and the client has not had 12 months of SCHIP the following pop up box will appear:

Selecting YES will configure the client into SCHIP, selecting NO will NOT configure the client back into SCHIP and will fail the clients CHIP budget.

Also, starting 4/1/2015 we will no longer want to have the option of configuring cases to SCHIP. Anything approved to be SCHIP prior to this month can still be configured to SCHIP and can receive SCHIP for 12 months.

Pregnant Woman Program (Change)

Currently if a client is pregnant and no deprivation is selected then the budget will just fail and not configure the case to PW. Now budgeting will still start at the MAGI PC level of MED if the client is eligible for this. If it fails either due to income or no deprivation, then we look at the PW level of MED next.

Pregnant Woman Reconfiguration (Change)

Previously NFOCUS was configuring a client right to ADC/TMA if they met the requirements and was not first checking to see if the client should be eligible for PW first. What now will happen in these scenarios is that the budget will stop at PW (if eligible for this category) and not reconfigure to ADC/TMA.

Remove Exemption Rules from AABD/MN Cases (Change)

Cases that are AABD/MN will now count income, resources, and expenses from those clients that are current pay SSI to count for the 4th full month in a nursing home.

Medicaid Budgeting (Fix)

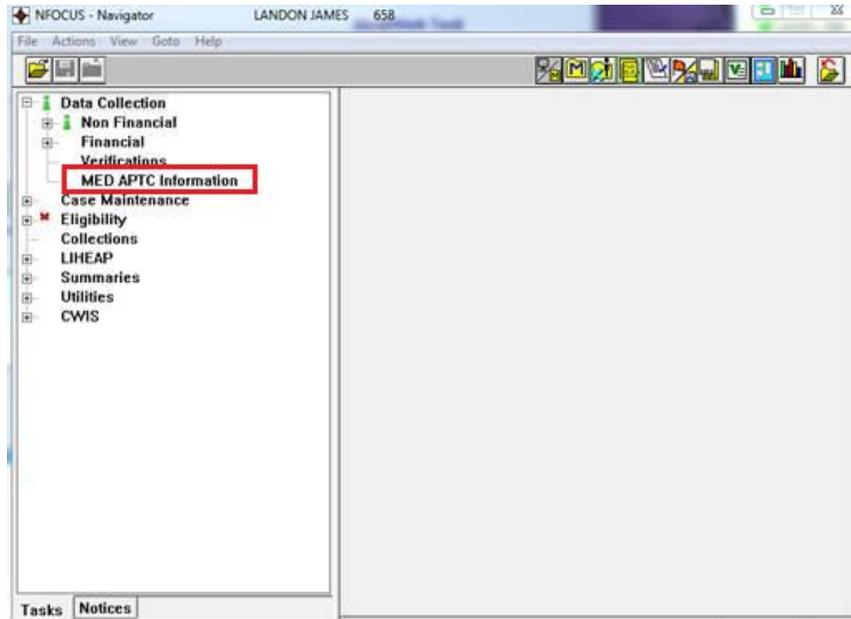
A change has been made to better determine 1619 B Status for certain Disabled Adult Children. Previously, Medicaid budgeting was not correctly placing all eligible people into 1619b status that should have been. With this release we will be looking at those in SSI Nonpay status of E01, as well as N01 status, that meet other requirements to determine 1619b eligibility.

The screenshot shows the 'SDX List' application interface. At the top, there are tabs for 'SDX List', 'Eligibility', 'Financial', 'Payment', 'Demographics', 'Ineligible Relative', and 'Technical'. Below the tabs, there are input fields for 'SSN: 503-06-6355', 'Birth Date:', 'Name:', and 'Gender:'. The main part of the interface is a table with the following columns: 'Select', 'Date Received', 'Date Effective', 'Record Source', and 'Payment Status'. The table contains 10 rows of data, all with a 'Payment Status' of 'E01'. A red box highlights the 'E01' status in the last row of the table. At the bottom of the table, it says '10 result(s) found, displaying 10 results, from 1 to 10. Page 1 / 1'.

Select	Date Received	Date Effective	Record Source	Payment Status
<input checked="" type="radio"/>	10-27-2014	12-2014	SDX-UPDATE 2	Nonpay - Eligible but no payment due E01
<input type="radio"/>	09-17-2014	10-2014	SDX-UPDATE 6	Nonpay - Eligible but no payment due E01
<input type="radio"/>	08-21-2014	10-2014	SDX-UPDATE 2	Nonpay - Eligible but no payment due E01
<input type="radio"/>	06-19-2014	07-2014	SDX-UPDATE 6	Nonpay - Eligible but no payment due E01
<input type="radio"/>	05-21-2014	07-2014	SDX-UPDATE 2	Nonpay - Eligible but no payment due E01
<input type="radio"/>	04-18-2014	05-2014	SDX-UPDATE 6	Nonpay - Eligible but no payment due E01
<input type="radio"/>	02-19-2014	04-2014	SDX-UPDATE 2	Nonpay - Eligible but no payment due E01
<input type="radio"/>	01-19-2014	02-2014	SDX-UPDATE 5	Nonpay - Eligible but no payment due E01
<input type="radio"/>	12-18-2013	01-2014	SDX-UPDATE 6	Nonpay - Eligible but no payment due E01
<input type="radio"/>	11-20-2013	01-2014	SDX-UPDATE 2	Nonpay - Eligible but no payment due E01

MED APTC Information (Tip)

The MED APTC Information is entered into N-FOCUS when a client has submitted the MLTC-53 Medicaid and Insurance Affordability paper application. To view this information, select the MED APTC Information option from the tree list. The Add Advanced Premium Tax Credit will display.



Add Advanced Premium Tax Credit

Person:	APTC Type:	App Received Date:
JAMES LONDON 07-13-1984	Health Plan	<input type="text"/>
JAMES JERRY 03-03-1997	Tribal Payment Tribe	

OK Cancel