NFOCUS Major Release Combined EA & MLTC April 11, 2021

A Major Release of the N-FOCUS system is being implemented April 11, 2021. 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 NFOCUS users should read this section.

ACCESSNebraska: NFOCUS users responsible for case activity received through the Web based Electronic Application should read this section.

Developmental Disabilities Programs: NFOCUS 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 NFOCUS 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 NFOCUS 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 may be documented in both the primary location that describes the entire process in addition to being in the Alerts, Work Tasks and Correspondence sections. P

Interfaces, Document Imaging and NFOCUS Tips sections will be added as appropriate for the release.

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General Interest and Mainframe

EA & MLTC – Emergency Impact Indicator (New)

A new window has been added from of the Person Detail window to track participants whose eligibility has been impacted by an event or situation that requires a participant to remain eligible at a level that may not be accurate.

Policy will send further instructions for use of this new functionality at a later date.

The new Emergency Impact Indicator window is accessed from the Detail menu on Person Detail.





If any records exist, the Emergency Impact Indicator window will display with the records listed.

N-FOCUS - Emerge	ency Impact Indica	tor			
e Help					
Name GEORG	E BAY		Birth Date 10-22-1	998 ID 20	212296
Current Emerge	ncy Impacts				
Begin Date	Туре	Begin Reason	End Date	End Reason	Cr
04-01-2021	PUBLIC HEAD	LTH E CHANGE IN ELIGIBIL	ITY		03
K					>
Begin Date	Туре	Begin Reason	End Date	End Reason	Cı
01-01-2020	OTHER	START OF EMERGEN	ICY 01-31-2021	END OF EMERGE	NCY OS
<					>
				03-18-2021	15-23-10

- The Emergency Impact Indicator window will display all indicators without an End date or reason, or with a future End Date, in the top Current Emergency Impacts box.
- All indicators with an End date on, or before, the current date will display in the bottom History box.

Add or Update Emergency Impact Indicator

To add a new indicator, click the new icon.

To update or delete an existing indicator, highlight the row and double click, or click on the open icon at the top of the page, to open the Detail Emergency Impact Indicator window for that record.

See screen print on next page.

N-FOCUS - Detail Emergency Impac	t Indicator	- 🗆 X
Name GEORGE BAY	Birth Date 10-22-1998 ID 20212296	ADD
Emergency Impact Begin		
Begin Date 04-01-2021	Reason CHANGE IN ELIGIBILITY	
Type PUBLIC HEALT	H EMERGENCY	
Emergency Impact End		
End Date	Reason	•
	03-18-2021	15:09:25

- The Begin Date, Reason and Type fields, in the Emergency Impact Begin section, are mandatory to create a new Emergency Impact Indicator.
- End Date and Reason fields, in the Emergency Impact End section, can be entered at creation or by updating an existing record. Both fields must be completed in the section to save End Date and Reason.
- If a mandatory field is incomplete, N-FOCUS will not allow the indicator to be saved, and display a message that required fields are missing.

Delete Emergency Impact Indicator

To Delete an indicator, select Actions>Delete and click Yes on the Delete Confirmation message. Once an indicator is deleted, it will no longer display.

EA & MLTC - Activity History List Window (Fix)

This window will now display over 99 Master Case rows when over 99 Master Cases are assigned to the same worker on the same day.

ACCESSNebraska

MLTC - Client Change Report (Update)

The Health Insurance change type has been updated with new questions to capture more detailed information regarding an individual's private health insurance. Screenshots below display the updated content and questions that will be displayed.

Starting Insurance

- Did the health insurance coverage start, stop or change?:
 - Reason Coveraged Stated (Drop Down)
 - Are you HIPP (Health Insurance Premium Payment) program participant? (Yes/No)
 - Was the coveraged offered through an employer? (Yes/No)

Health Insurance
Did the health insurance coverage start, stop, or change?
started stopped Changed
uale u overage started meson to verage started meson to ve
Are you a HIPP (Health Insurance Premium Payment) program participant?
was this coverage of tests in trough an employer /
Policy Holder Policy or Group Number
varine or insolarise company
Address of insurance company
Address Line 1
Address Line 2
Address Line 3
City State Zip Code
<pre><</pre> < select >> • [99999-9999]
rnone runneer or insurance company (1999)999-999
Penium Amount
Name(s) of household member(s) covered by the health insurance policy
~
Comments
• CANCEL • SAVE

Stopping Insurance

Health Insurance
Did the health insurance coverage start, stop, or change?
Started Stopped Changed
Date Coverage Stopped Reason Coverage Stopped mm-dd-yyyy m
Was this coverage offered through an employer? Yes No
Policy Holder Policy or Group Number
Name of insurance company
Name(s) of household member(s) whose coverage ended for this policy
~
Comments
• CANCEL • SAVE

- Did the health Insurance coverage start, stop or change?
 - Reason Coverage Stopped (Drop Down)
 - Was this coverage offered through an employer? (Yes/No)
 - Policy Holder
 - Policy or Group Number

Changing Insurance

Health Insuran	e		
Did the health insurance cov	erage start, stop, or change?		
Started Stopped (Changed		
Date Coverage Changed	eason Coverage Changed		
mm-dd-yyyy 🛛 🔹	× select >> •		
Was this coverage offered t	rough an employer?		
🔵 Yes 💿 No			
Policy Holder	Policy or Group Number		
Name of insurance compan	1		
Address of insurance cor	pany		
Address Line 1	1		
Address Line 0			
Address Line 2	1		
Address Line 3			
	1		
City State	Zip Code		
< se	ect >> 999999-9999		
Phone number of insurance	company		
(999)999-9999			
Premium Amount			
Name(s) of household mem	ver(s) covered by the health insurance policy		
Comments			
· CANCEL	SAVE		

- Did the health insurance coverage start, stop or change?
 - Reason Coverage Changed (Drop Down)
 - Was this coverage offered through an employer? (Yes/No)

EA & MLTC - Exit Button Changes in Web Apps (Update)

With Internet Explorer browser being phased out by IS&T, all NFOCUS and ACCESSNebraska Web Apps will now use Chrome or a Custom Web Browser.

These changes affect the following pages:

MLTC Program pages

- ACA Healthcare Page
- MED Renewal Page
- CBI Page

EA Program page

• EA Application

Children and Family Service Program

• PSA

When the Yes button is selected on the Exit Button, the new Exit page will display.

The new exit page which will display with the message "You may close the webpage now."

To close the webpage, click the X on the upper right hand corner of the browser.



Protective Service Alert Page (Update)

The following Protective Service Alert page an Exit Confirmation pop up will display.



Select Yes, and the following message will display:

You may close the webpage now.

EA – Exit Confirmation Changes (Update)

After selecting the Exit on the EA Application, the following pages will display. Answer the questions as appropriate.

 I am the applicant I am a Guardian/Conservator for the applicant I am a Power of Attorney for the applicant I am the Authorized Representative for the applicant's Supplemental Nutrition Assistance Progra I am a person authorized to act on behalf of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. 	ho is comp	leting the application?
I am a Guardian/Conservator for the applicant I am a Power of Attorney for the applicant I am the Authorized Representative for the applicant's Supplemental Nutrition Assistance Progra I am a person authorized to act on behalf of the applicant I am a person authorized to act on behalf of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. * EXIT * BACK	✓ I am th	e applicant
I am a Power of Attorney for the applicant I am the Authorized Representative for the applicant's Supplemental Nutrition Assistance Progra I am a person authorized to act on behalf of the applicant I am a relative of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature ✓ Yes, telephonic signature has been recorded. × EXIT	📃 I am a	Guardian/Conservator for the applicant
I am the Authorized Representative for the applicant's Supplemental Nutrition Assistance Progra I am a person authorized to act on behalf of the applicant I am a relative of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature ✓ Yes, telephonic signature has been recorded. * EXIT ★ BACK Submit ♥	📃 I am a	Power of Attorney for the applicant
I am a person authorized to act on behalf of the applicant I am a relative of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature ✓ Yes, telephonic signature has been recorded. EXIT ◆ BACK Submit ●	📃 I am th	e Authorized Representative for the applicant's Supplemental Nutrition Assistance Progr
I am a relative of the applicant Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature ✓ Yes, telephonic signature has been recorded. * EXIT * BACK Submit ©	I am a	person authorized to act on behalf of the applicant
Contracted Medicaid Provider Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. EXIT + BACK Submit •	📃 I am a	elative of the applicant
Sign by typing your name below (this is your electronic signature). Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. * EXIT * BACK Submit ©	Contra	ted Medicaid Provider
Mike Test Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. EXIT Submit O	Sign by typ	ing your name below (this is your electronic signature).
Contracted Medicaid Provider Name To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. EXIT Submit O	Mike Test	
To receive an e-mail confirmation, enter your e-mail address below Phone Signature Yes, telephonic signature has been recorded. EXIT BACK Submit O	Contracted	Medicaid Provider Name
Phone Signature Yes, telephonic signature has been recorded. EXIT BACK Submit O	To receive	n e-mail confirmation, enter your e-mail address below
× EXIT	Phone Sign	sture lephonic signature has been recorded.
* EAH " BACK Submit	EVIT	PICK Salaria
	LAII	" DACK Sublin V

I am a Guardian/Conservator for I am a Power of Attorney for the I am the Authorized Representation	the applicant applicant ve for the applicant's Supplemental Nutrition Assistance Prog
I am a person authorized to act or	n behalf of the applicant
Contracted Medicaid Provider	Exit Confirmation ×
Sign by typing your name below (this Mike Test	Are you sure you want to exit?
Contracted Medicaid Provider Name	✓ Yes × No
To receive an e-mail confirmation, en	ter your e-mail address below
Phone Signature	in recorded

Select the Yes to exit. The following message will display.



MLTC - Update on Managed Care on display on CBI -

Healthy Blue will now display under Managed Care Provider if the Managed Care Provider is Healthy Blue.

Expert System

EA – AABD Closing/Denial Reason (Update)

AABD has added a Closing/Denial reason in Case and Participation Actions. The new reason code is Social Security suspended/terminated (AABD). The notice that generates will contain this reason and the NAC reference.

lose Case A	ctions						>
Program C	ase:				Work Requir	ement Reaso	n:
ORILEY	MARTHA	AABD/PMT	16288900				Ψ
				1	Responsible	Person:	
				1			Ŧ
				3	Date of Deat	h¢.	
				1			
					Change All	case Particin	antí sì
					Household	Status to' Ou	117
Closure Re	eason;				⊂ Yes ⊂ M	lo	
Soc. Secu	irity suspend	ed/terminated ((AABD)	•	Television		
Sanction T	ype:				Take action	for this mont	n only?
					A TESA P	40	
Delay Rea	ison:						
				Ŧ			

EA - SNAP Maximum Allotment Update

The changes to the SNAP Maximum Allotment (15% increase) implemented in January 2021 related to the pandemic were initially slated to end July 1st. The Federal Government recently released changes to extend those through the end of the Federal Fiscal Year. This change will be implemented with the 4/11 release, any July budgets run prior to the release will have the normal, pre-15% pandemic increased amount. Budgets run after the 4/11 release will have the extended increased amount.

EA - Disaster SNAP Income Limits (Update)

The Disaster SNAP Income Limits have been updated with the FY 2021 standards effective October 1, 2020 through September 30, 2021.

EA – Medicare Supplement Expense added to SNAP (Update)

The expense type of Medicare Supplement will now be included in SNAP budgets.

EA - Verification Request Add Program Case Number (Update)

An update has been made to available information related to Verification Requests. Prior to this release, the specific Program Case Number that a Verification Request was created for was not able to be identified through the Verification Request. You could only see that the request had been created for a SNAP program. This was resulting in issues for some of our ongoing reports. There were instances where a Master Case would have two program cases of the same type (ex: a SNAP program case in Closed status and a second SNAP program case that was in Pending status), and you would not be able to tell which Program Case the Verification Request was associated with.

> N-FOCUS - Summary of Selected Verification Type(s) × File Actions Help \mathbf{E} Master Case Name JERRY JERM Number 56 Summary of Verification Types(s) Verification Types(s) Program(s) Received Person EMPLOYER FORM (SEE COMMENTS BELOW FOR DETAILS) Remove Person(s) Remove Program(s) Delete Verification Type

The following screen shows the display prior to this release:

With this release, the Summary of Selected Verification Type(s) window will allow a worker to select an individual the screen, by selecting the appropriate row, then click the Open icon.

See screen print on next page.

	📫 🛜 🔰 🎽
Aaster Case	
Name RUTH E CITIZEN	Number 65
Summary of Verification Types(s)	
Verification Types(s)	
Received Person	Program(s)
UTILITY BILLS (ELECTRIC, GAS, WATER, SEWER, F	PROPANE, GARBAGE, TELEPHONE)
() RUTH E CITIZEN	SNAP
EMPLOYER FORM (SEE COMMENTS BELOW FOR DETAILS	5)
EMPLOYER FORM (SEE COMMENTS BELOW FOR DETAILS () ROTH E CITIZEN	SNAP

Selecting the Open Icon will then display the Detail Program(s) window, which displays the Program Case ID for which the selected item from the Summary of Selected Verification Type(s)" window request was sent.

rification Typ	Employer Form (see comments be	low for details)	
Person Nan	RUTH E CITIZEN		
Program(s)	Program Case Name	Status	Program ID
2Mat.	ROTH E CITIZEN	н	<u>8032/1440</u>
		Close	

EA - Recalculated ADC budgets Pro-Rate Logic (Fix)

An issue was identified in situations where a Regular ADC budget had been calculated with pro-rated benefits was needing to have a Recalculated budget run after the benefits had been issued.

In these situations, logic was not applying the proration to the Recalculated ADC benefits. This resulted in household being issued recalculated benefits in excess of what they were eligible for and required overpayments to be created.

Logic has been updated with this release which now correctly applies the proration logic in Recalculated ADC budgeting.

MLTC – MAGI Determinations for Parent/Caretaker Relatives (Update)

With this release, Adult MAGI determinations for Parent/Caretaker Relatives will show the parent/caretaker question correctly during budgeting.

There is a known issue with the Minimum Essential Coverage for dependents question for Parent/Caretaker Relatives, which may be HHA eligible, for married couples with a pregnancy being reported. The Minimum Essential Coverage for dependents question is only populated if Yes was answered to the Parent/Caretaker Relatives question.

The parent/caretaker question is being asked for both parents when a pregnancy is added to an active MED case, however the Minimal Essential Coverage for dependent children question is not being asked for the father. If the father is over income for MAGI PC and the Minimal Essential Coverage question was answered No for the pregnant mother, then this is causing the father to fail MAGI PC and no determination to be made for HHA.

Workaround – Must answer YES to the Minimum Essential Coverage dependents question for the mother who is pregnant to populate the question for the father.

MLTC – Earned Income Disregard Issue (Fixed)

The Earned Income Disregard has been corrected and will now calculate correctly in budgeting.

- For a disabled individual the disregard is the first \$65 plus half of the remainder. For a blind individual it is the first \$85 plus half of the remainder.
- This fix also impacts TMA(Child Care disregard only), and for MN and MAGI budgets it is correctly allowing the \$100 disregard.

NFOCUS Tips

EA & MLTC - Unearned Income Adjustment issue

We have discovered an issue with the IUC Pandemic Stimulus payment as well as when there is a Prior Overpayment on Assistance. This is all related to the Unearned Income adjustment rules.

The adjustment reasons of IUC Stimulus Exclusion and Prior Overpayment on Assistance does not work in the following situations:

- IUC Stimulus Exclusion
 - 599 CHIP and AABD Payment program cases
 - The Adjusted Amount does not get deducted and it should be deducted from the total amount
 - To determine the amount that should be counted:

- Subtract the adjusted amount from the total amount and create a new IUC row for this amount in the Unearned Income Task.
- On the Calculate Window, select only this IUC amount to average\convert
- NOTE: Reminder, that these manually entered workaround payments will need to be excluded when running budgets for the other EA/MED programs.

Earned Income	[Fluctuating Unearned In	ncome] SE Le	dger Income	
Owner	T	уре	Frequency	Source

Unemployment Co... Weekly

See screen	print on next page	2.				
Support C Compare Supp C Count Support	oort to Budgetary Need as Unearned Income	Calculation Method		Average/Convert		-
Display Month(s)	of Unearned Income From	03-2021	▼ ^T 0 02-2021	•	Multiplier	~
Date Rcvd	Amount	Adj Amount	Net Amount	Assigned	Verif Source	
03-15-2021	568.00	0.00	568.00		IUC Interface	
03-09-2021	568.00	0.00	568.00		IUC Interface	
03-01-2021	568.00	0.00	568.00		IUC Interface	
02-01-2021	268.00	0.00	268.00		TALX file viewe	d

- Prior Overpayment on Assistance
 - AABD and ADC Payment program cases
 - The Adjusted Amount does not get deducted and it should be deducted from the total amount
 - To determine the amount that should be counted:
 - Subtract the adjusted amount from the total amount and create a new row for this amount in the Unearned Income Task.
 - On the Calculate Window, select only this amount to average\convert
 - NOTE: Reminder, that these manually entered workaround payments will need to be excluded when running budgets for the other EA/MED programs.

This will be corrected May 9, 2021.

EA & MLTC - Administrative Role:

If an Organization is the Administrative Role and the Organization's Name has an "&" in the name, it may cause a correspondence error where you are not able to view or pint the correspondence. If this happens, call NFOCUS Production Support so the Organization Name can be changed.