NFOCUS Major Release MLTC August 8, 2021

A Major Release of the N-FOCUS system is being implemented August 8, 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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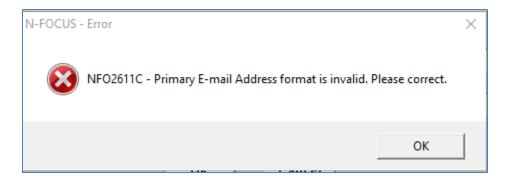
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General Interest and Mainframe

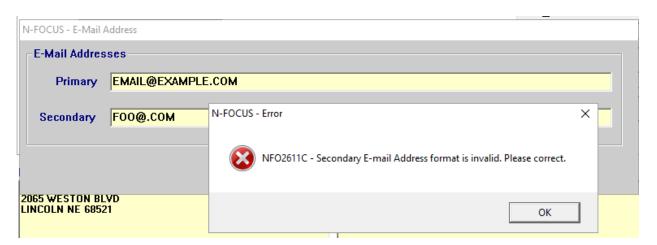
Invalid E-Mail Address (Fix)

If an invalid email address is entered on the Detail Address>Email Address window or the Detail Staff Person or the following error message will display. The worker is to check the address and enter correctly if appropriate. If the address entered was entered correctly, they will need to contact the client to get a new email address that meets E-Mail Address Standards.

Note: On the Detail Staff Person>E-Mail Address field, the field will turn Red when an invalid email address is entered. If you try to save when the field is Red, the Error window will display.



Note: On the Detail Address window, there are two fields available to enter an email address. The error will indicate which email address is invalid and needs to be corrected.



The following provides examples of allowed configuration of an email address in NFOCUS:

- 1. The recipient's name or prefix that appears to the left of the @ symbol
- 2. The domain appears to the right of the @ symbol
- 3. Allowable prefix formats
 - a. Allowed characters: Letters (a-z), numbers, underscores, periods, and dashes
 - b. An underscore, period, or dash must be followed by one or more letters or numbers
- 4. Acceptable email domain formats
 - a. Allowed characters are letters, numbers dashes
 - b. The last portion of the domain must be at least two characters, for example .com, .org. cc

Alerts

Alert Clear/Close Logic (Change)

When an alert is closed from the List Master Case Alerts/Work Task window it will be cleared from all assigned worker's List Position Alert.

When an alert is cleared from a worker's List Position Alert window it will also be closed and cleared from any other assigned worker's list.

Correspondence

One Time MAGI Adult Notification Letter (New)

On September 1st a batch process will be run to send a letter to all HHA participants showing as eligible for October 1st. This letter will explain the change and provide FAQ information to client.

Reopening a Previously Closed Case (Fix)

Fixed an issue when reopening previously closed cases in future months. This action will now correctly generate the appropriate notice of action.

NOAs will display all consecutive actions taken (Fix)

Notices will now correctly display all consecutive actions taken when processing a Medicaid case.

Retro Medicaid followed by a denial for the initial month of application

It was found that when approving someone for Retro Medicaid followed by a denial for first month of regular Medicaid, the NOA will display only the 'Closed Retro Med' on the NOA, ignoring the following denial.

Workaround: SSW will need to delete or not save the Expert System generated NOA and create their own Notice Template including the appropriate denial reason along with the NAC reference.

Example:

Individual applied in December and requested Retro Medicaid for September, October, and November. They were approved for the retro months but were denied beginning in December (application month).

No NAC Reference Displayed on NOA When Manually Closing an MIWD Case Workaround

Currently when selecting a manual closure reason from the drop down menu a NOA will not display an NAC reference.

Workaround: SSW will add the correct NAC into the notice comments.

Expert System

Fund Code HHA Federal/State (New)

The new fund code HHA Federal/State will be used for HHA categories to replace the fund code of Federal/State Match. The new fund code will be used for any HHA category determined to meet Not-Newly status per existing HHA fund code rules. All HHA determinations previously found Federal/State Match will be converted to the new HHA Federal/State.

Budget MIWD (Change)

Medicaid Insurance for the Working Disabled (MIWD) is a program designed for Medicaid recipients ages 16-64 with an SSA/SRT approved disability, or an IRT approved medical improvement, and who are employed. To be eligible for MIWD, they must have a failed AABD budget due to excess income. Those eligible for MIWD can fall into one of two groups, MIWD Basic or MIWD Medical Improvement.

To be approved for MIWD Medical Improvement, the individual must have been eligible under MIWD Basic but lost their SSA/SRT disability determination due to a medical improvement. The individual_must qualify for a medical improvement determination from DHHS's Internal Review Team (IRT). MIWD eligibility is determined by DHHS.

The steps for processing an MIWD Basic case are as follows:

- Pend a Non-MAGI MED case
- View the SSA interface to determine disability status
- In Expert, select the Medical Impairment task
- If not already interfaced, choose the appropriate Med Impairment SSA/SSI or SRT from the option list
- Add the verified earned income, in addition to other verified points of eligibility (unearned income, resources, expenses, living arrangement, family relationships, health insurance premiums, etc.)
- Run the MED budget, select MIWD when prompted, review and approve

The steps for processing an MIWD – Medical Improvement case are as follows:

- A Medical Impairment record of IRT approved MIWD Medical Improvement must exist (MLTC-75)
- In Expert, select the Medical Impairment task under Non-Financial
- From the option list, choose MIWD MED IMPROVEMENT and choose IRT (Internal Review Team) as the verification source
- Enter a start date and review date set for 12 months after the start date
- Add the verified earned income, in addition to other verified points of eligibility (unearned income, resources, health insurance premiums, etc.)
- Run the MED budget, select MIWD when prompted, review and approve
- Standardized Narrative Template titled Medical Improvement Group, is available to document action taken

MIWD LTC Issue Workaround (Targeted Release Date 12/12/2021)

Residents of Long-Term Care facilities are not given the option to be budgeted under MIWD.

Workaround: Workers should contact N-FOCUS Production & Support

MIWD Pregnant Person Issue Workaround (Targeted Release Date 12/12/2021)

Applicants who report a pregnancy are not given the option to be budgeted under MIWD.

Workaround: Workers should contact N-FOCUS Production & Support

MIWD Medical Improvement Medical Impairment Issue Workaround (Targeted Release Date 12/12/2021)

MIWD cases are not able to be budgeted using only MIWD Medical Improvement as a Medical Impairment reason.

Workaround:Workers should ensure there is not an end date to the existing SSA/SRT disability when adding MIWD Medical Improvement. If no end date exists, add MIWD Medical Improvement and proceed with budgeting and narrate thoroughly.

Married MIWD Recipients Issue Workaround (Targeted Release Date 12/12/2021)

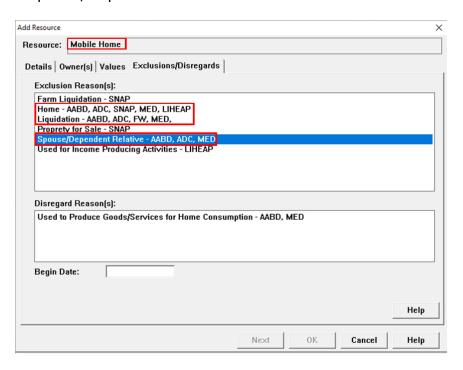
A married couple, both of whom are eligible for MIWD, will be budgeted together under a Basic category only, even if one of them is eligible for MIWD Medical Improvement.

Workaround: Workers should contact N-FOCUS & Support

AABD PMT/Medicaid Resource Exclusion/Disregard (Change)

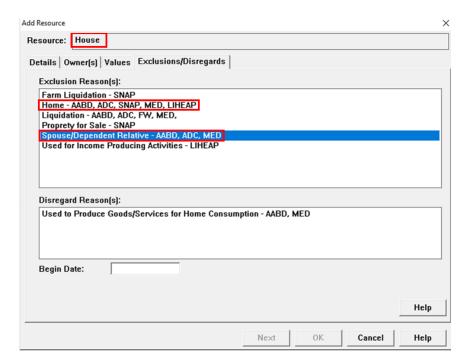
The following changes to the Exclusion/Disregard window have been made for AABD payment and Medicaid budgeting:

- The following has been added as a property resource covered by the Exclusion Reason of Liquidation Period
 - Mobile Home
- The following has been added as property resources for the exclusion reason of Home
 - Mobile Home
 - House
- The following new exclusion has been added for the property resources of Mobile Home or House
 - Spouse/Dependent Relative
- With Property of Mobile Home, the following will be additional options available for selection
 - o Home
 - Liquidation
 - o Spouse/Dependent Relative



- With Property of House, the following have been added as additional options available for selection
 - o Home
 - o Spouse/Dependent Relative

See Screen Print on next page.



HHA Fund Code with Overrides (Fix):

Issue with HHA fund code when MAGI IMD, MAGI FW or MAGI PC is overridden to an HHA category has been fixed.

Budgets for Pregnant Clients Using Past Determinations (Fix)

An issue was identified where category determinations were using a past denied/closed status or a non-issued budget (a budget being reran for the same day) in error. This has been fixed.

Example:

A client was determined HHA Prime and in the same month reports a pregnancy (after application date). The previous determination of HHA prime was not being looked at for the new determination causing the client to go to MAGI PW.

MLTC - MEC Pop-Up Not Displaying (Fix)

An issue with the Minimum Essential Coverage (MEC) pop-up question not displaying after a pregnancy has been added has been fixed.

PCR Dependent Retro Med Popup Issue Workaround (Targeted Release Date 12/12/2021)

An issue with the PCR pop-up question not displaying correctly after Retro Med is still an issue.

WORKAROUND:

In the instance the Parent Caretaker Relative (PCR) pop-up question is not asked an override may need to be completed to put the client into the correct category. If the correct category is determined an override is not needed. If the PCR

question is not asked after a Retro Med budget has been run then an override needs to be completed for only the first month. Then the override can be removed for the following months.

Note: Overrides can be performed by Leads/Supervisors with the security clearance for overrides and Production Support.

Example: New application was received in August 2021 and Retro Med was

requested. After Retro Med budget has been processed and authorized, continue to run the budget for August 2021. Authorize the August 2021 budget and complete override to the correct category. After authorizing the overridden budget for August 2021, remove the override for September 2021 forward.

PCR Pop-up Question Cancelled Workaround (Targeted Release Date: TBA)

An issue with selecting Cancel from the PCR pop-up question has been discovered.

Workaround: In the certain instances the 'Cancel' button is selected from the

PCR pop-up question during budgeting and the budgeting continues through until the Budget Authorization screens displays and bypasses the PCR rules. This could place the individuals into a MAGI PC budget when they are not eligible for this category. When the Budget Authorization screen displays select Cancel from this screen to cancel the budgeting for that month.

Note: This does not apply to Retro Med budgets.

AABD/MN Earned Income Disregard (Fix)

The correct earned income disregard for single and married couples has been fixed for the following scenarios:

- AABD/MN single person aged, blind or disabled
- AABD/MN married couple, one participant aged, blind or disabled with a financially responsible only spouse that is not otherwise Medicaid eligible.

MAGI IMD with Correct Living Arrangement (Fix):

An issue has been fixed where MAGI IMD determinations were allowed with non-IMD living arrangements. As of this release the living arrangement must be Institution – Psychiatric Care – IMD for a 19-20 year old in order to be determined as MAGI IMD.

Non-MAGI Earned Income Disregard Workarounds (Target Release Date 12/12/2021)

MN-PC/Child

Disregard of \$100 and Child Care (CC) expense not being applied in the Medically Needy (MN) Parent/Relative and Medically Needy Children budgets when a Financially Responsible (FR) parent if receiving either AABD or MAGI PC.

The MN Child's income is counting in the MN/Child's budget.

Workaround: Add another allowable medical expense equal to the amount of

the disregard that is not counting for the FR parent receiving

either AABD or MAGI PC.

Workaround: Exclude the child's income when budgeting for each month.

AABD/OMB or AABD/MN

The Earned Income Disregard is not calculating correctly. It is only using the AABD participant's income and not including the Financially Responsible (FR) spouse's income in the Earned Income calculation. This is happening in the scenario when the FR spouse included in the AABD budget is an applicant or active in their own MAGI category and both have earned income when the AABD budget is run.

Workaround: Add an allowable medical expense equal to the disregard amount for the FR spouse.

AABD/QMB, SLMB, QI-1

The wrong disregard amount for the Blind Medical Impairment is being applied at \$65 and not \$85 in the following scenarios:

- AABD/QMB single person with Blind Medical Impairment with Medicare Buy-in,
- AABD/QMB married couple, one participant with Blind Medical Impairment with Medicare Buy-in and a financially responsible only spouse.
- SLMB single person with Blind Medical Impairment with Medicare Buy-in
- SLMB married couples one participant with Blind Medical Impairment with Medicare Buy-in and a financially responsible only spouse.
- QI-1 single person with Blind Medical Impairment with Medicare Buy-in.
- QI-1 married couples one participant with Blind Medical Impairment with Medicare Buy-in and a financially responsible only spouse.

Workaround: Add an allowable medical expense equal to the amount of the difference in the calculation to the AABD recipient.

Verify Current Income - VCI (Change)



The VCI screen will now display the following additional values under Employee Status code:

- Active
- Works as Needed Active (Contractor)
- Inactive (Contractor)

The following additional values will display for the Pay Rate Frequency:

- Hourly or Commission
- Per trip
- Per task
- Monthly Academic 9 Month
- Monthly Academic 10 Month
- Academic per semester
- Monthly Academic 12 Month
- Annual Academic 9 Month
- Annual Academic 10 Month
- Annual Academic 12 Month
- Annual Academic 11 Month

Updates have also been made to the minimum and the maximum value of the following fields:

- Name
- Fed Tax ID

- Pay Rate/Income Amount
- Annualized Income
- Base Compensation
- Total Compensation
- Income Amount
- Income Net Payment Amount

You may now see a negative value under the following:

- Pay Rate/Income Amount
- Annualized Income
- Base Compensation
- Total Compensation
- Income Amount
- Income Net Payment Amount

NFOCUS Tips

VPN Users

If you have been switched to a VPN Laptop:

- N-FOCUS runs very, very slow using VPN
 - o Open N-FOCUS through CITRIX and it will run at the normal speed.

If you do not have CITRIX call the Level One Help Desk (402-471-9069) and ask for CITRIX.