
NFOCUS Major Release

MLTC

December 13, 2020

A Major Release of the N-FOCUS system is being implemented December 13, 2020. 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 and in the Alerts, Work Tasks and Correspondence sections.

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

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Mainframe/General Interest

Combined and MAGI Medicaid Renewal Forms (Change)

Heritage Health Adult has been added to the title of the MAGI and Combined Medicaid renewal forms.

Combined:

Medicaid Renewal Combined Household-Family/Aged, Blind, Disabled, Heritage Health Adult

Due Date: 08-05-2021

This form is needed to renew your Medicaid benefits, failure to complete the renewal process could result in cancellation of your Medicaid Coverage.

SECTION 1: Please complete/update if information has changed or is missing.

Clients Name: JAMES BURTON	Social Security Number: 000-11-4891
Address: 6314 TESTING DR	LINCOLN NE 68502
Address:	
Home Phone:	Cell Phone:
By checking 'this box' [<input type="checkbox"/>], I agree to receive text messages on the above cell phone number from DHHS regarding my benefits. These benefits include; Medicaid, CHIP, SNAP, ADC, LIHEAP, CC Subsidy, AABD payment and SSAD. I agree to contact DHHS if my cell phone number changes or if this number is no longer in my possession. I understand that I can opt out of this in the future by contacting DHHS.	
<i>NOTE: Text messaging is currently under development and is targeted to be available in the near future.</i>	

MAGI :

Medicaid Renewal Parent / Caretaker Relatives, Pregnant Women and Children, Heritage Health Adult

Due Date: 08-05-2021

This form is needed to renew your Medicaid benefits, failure to complete the renewal process could result in cancellation of your Medicaid Coverage.

SECTION 1: Please complete/update if information has changed or is missing.

Clients Name: JAMES BURTON	Social Security Number: 000-11-4891
Address: 6314 TESTING DR	LINCOLN NE 68502
Address:	
Home Phone:	Cell Phone:
By checking 'this box' [<input type="checkbox"/>], I agree to receive text messages on the above cell phone number from DHHS regarding my benefits. These benefits include; Medicaid, CHIP, SNAP, ADC, LIHEAP, CC Subsidy, AABD payment and SSAD. I agree to contact DHHS if my cell phone number changes or if this number is no longer in my possession. I understand that I can opt out of this in the future by contacting DHHS.	
<i>NOTE: Text messaging is currently under development and is targeted to be available in the near future.</i>	

Unable to Open Verification Requests (Fix)

An issue exists when opening a previously created verification request the worker would occasionally receive an error message and are unable to open or act on this. This issue is now resolved.

Document Imaging

Add Image via Citrix (New)

The following information is for Citrix users only:

Any document that is being added to Document Imaging, when connected to NFOCUS via Citrix, gets sent to the Citrix server to be checked-in to File Director. There are users all across the state that can be adding documents to this server and documents will be processed on a first in, first out order.

For Citrix users, a "Check-In Queue Count" field has been added to the Add Image window. This counter will display the number of documents still waiting to be processed by the Citrix server. If the worker does not see their documents in the List Image window right away, it may be because there are numerous documents to be processed by the server and the counter will provide an indication.

The counter will display the queue count once the worker has clicked "Save" in the Add Image Window to execute the Add Image function.

See screen print on next page.

The screenshot shows the "N-FOCUS - Add Image" window. The "Index Information" section includes fields for Name (ANGUS MACGYVER), Index Type (Person), Index ID (00110049), and Area (N-FOCUS). The "Indexing Mode" is set to "Select". The "File Location" is H:\Business Analyst. The "Selected Documents" section shows "Imaging Option" set to "Standard" and "Document Date" set to 11-02-2020. The "Check-In Queue Count" field is highlighted with a red box and displays the value 0. The "Available Documents" list on the right includes files like "saved date vs received date", "SEND SECUREtest.msg", "SNAP Replacement.docx", "Sticky Notes.docx", "System Integrators.xlsx", "System Test run Request ex", "Telework_Tracking Progress", "TEST AccessNE Upload Plan", "TEST AccessNE Upload.docx", "TEST ADD IMAGE for Citrix A", "TEST ADD IMAGE.docx", "TEST ADD IMAGE.pdf", "Test Add Image_MEDICALLY", "TEST DESKTOP FOR WINCLIE", "Test MS Windows 10 v 1960", "TEST Submit Doc.docx", "TEST Submit Doc.pdf", "Test updating Index categor", and "WP 5865_Lilly Collins.docx".

Expert System

N-FOCUS Error When Expert Creates Approval Notices for Retro Medicaid Cases (Fix)

When HHA cases are processed in both Retro and current Medicaid months, saving notices would trigger an error that would shut down N-FOCUS. This issue is now fixed, NOAs with HHA eligibility in both Retro and current months will generate a notice as shown below:

Screen print on next page.

NOTICE OF ACTION

Medicaid

The following individual(s) are eligible for Heritage Health Adult:

<u>Individual</u>	<u>Status</u>
JEFF JEFFRIES	Eligible

See the benefit tier information below.

Heritage Health Adult - Benefit Tier Information

Individual	Benefit Tier	Effective Date
JEFF JEFFRIES	Basic	01-01-2021

Benefit Tier Eligibility

All enrollees in Heritage Health Adult will receive Basic benefits except for individuals identified as Medically Frail, pregnant, or age 19 and 20. Basic benefits will include a comprehensive package of physical health, behavioral health, and prescription drug coverage. If you have a pending Medical Frailty determination, you will be notified of the result in a separate notice.

Individuals identified as Medically Frail, pregnant, or age 19 and 20 will receive Prime benefits. Prime benefits include all Basic benefits and will add dental, vision, and over-the-counter medication coverage. Individuals who are age 19 and 20 will receive Prime benefits until they reach age 21, at which time they will receive Basic benefits. Individuals who are pregnant will receive Prime benefits until they reach 60 days postpartum, at which time they will receive Basic benefits, unless they are 19 - 20 or Medically Frail for which they will continue to receive Prime benefits.

Medicaid

Approval

The following individual(s) are approved for medical coverage effective 10-01-2020.

See Reverse

Expert System Notice

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15794801

<u>Individual</u>	<u>Status</u>
JEFF JEFFRIES	Eligible

JEFF JEFFRIES are eligible for Heritage Health Adult.

See the benefit tier information below.

Heritage Health Adult - Benefit Tier Information

Individual	Benefit Tier	Effective Date
JEFF JEFFRIES	Basic	10-01-2020

Benefit Tier Eligibility

All enrollees in Heritage Health Adult will receive Basic benefits except for individuals identified as Medically Frail, pregnant, or age 19 and 20. Basic benefits will include a comprehensive package of physical health, behavioral health, and prescription drug coverage. If you have a pending Medical Frailty determination, you will be notified of the result in a separate notice.

Individuals identified as Medically Frail, pregnant, or age 19 and 20 will receive Prime benefits. Prime benefits include all Basic benefits and will add dental, vision, and over-the-counter medication coverage. Individuals who are age 19 and 20 will receive Prime benefits until they reach age 21, at which time they will receive Basic benefits. Individuals who are pregnant will receive Prime benefits until they reach 60 days postpartum, at which time they will receive Basic benefits, unless they are 19 - 20 or Medically Frail for which they will continue to receive Prime benefits.

If you applied through the Federal Marketplace your application was sent to Nebraska DHHS for a Medicaid eligibility determination. The Medicaid eligibility determination for the individuals noted has been communicated to the Federal Marketplace. If further information is needed you will be contacted.

If you have not previously received a permanent Medicaid ID card, you will receive a card within the next week. Please keep this card. You must show this card to all providers when getting medical/dental care. If you are required to participate in managed care, you will be contacted with more information.

The current HHA approval will display first, followed by the Retro HHA approval.

Override Group Function (Fix)

Override grouping function for three or more program cases will now display information correctly on the Notice of Action as well as merge correctly.

Note: There is currently an issue where situations of two program cases merge automatically and cannot be changed.

Example of the involuntary merging of NOAs:

The screenshot shows the NFOCUS - Navigator application window. The title bar indicates the user is JOHN JAMES with ID 5993. The menu bar includes File, Actions, View, Goto, and Help. The main window is divided into a left pane labeled 'Notices of Action' and a right pane. The right pane contains a table with the following data:

Notice	Notice Recipient(s)	Program	PC Number	PC Asst
Notice 1 JAMES	JOHN JAMES JOHN	MEDICAID	36976611	

At the bottom of the right pane, there are three buttons: 'Override Groupings' (highlighted with a red box), 'Update Recipients', and '[Help]'. The status bar at the bottom shows 'Running Notices of Action' and the date/time '12-02-2020 15:02:33'.

The screenshot shows the NFOCUS - Navigator application window. The title bar indicates the user is JOHN JAMES with ID 5993. The menu bar includes File, Actions, View, Goto, and Help. The main window is divided into a left pane labeled 'Notices of Action' and a right pane. The right pane contains a table with the following data:

Notice	Notice Recipient(s)	Program	PC Number	PC Asst
Notice 1 JAMES	JOHN JAMES JOHN	MEDICAID	36976611	

The 'Notices of Action' pane on the left has a red box around the 'Notice 1' entry. The 'Override Groupings' button from the previous screenshot is no longer visible. The status bar at the bottom shows 'Running Notices of Action' and the date/time '12-02-2020 15:05:31'.

Example of NOA:

NOTICE OF ACTION

Medicaid

Approval

The following individual(s) are approved for medical coverage effective 12-01-2020.

<u>Individual</u>	<u>Status</u>
CHILD JAMES	Eligible
JOHN JAMES	Eligible

The following individual(s) are eligible for Heritage Health Adult:

<u>Individual</u>	<u>Status</u>
CHILD JAMES	Eligible
JOHN JAMES	Eligible

See the benefit tier information below.

Heritage Health Adult - Benefit Tier Information

Individual	Benefit Tier	Effective Date
JOHN JAMES	Basic	01-01-2021
CHILD JAMES	Prime	01-01-2021

Benefit Tier Eligibility

All enrollees in Heritage Health Adult will receive Basic benefits except for individuals identified as Medically Frail, pregnant, or age 19 and 20. Basic benefits will include a comprehensive package of physical health, behavioral health, and prescription drug coverage. If you have a pending Medical Frailty determination, you will be notified of the result in a separate notice.

Individuals identified as Medically Frail, pregnant, or age 19 and 20 will receive Prime benefits. Prime benefits include all Basic benefits and will add dental, vision, and over-the-counter medication

See Reverse

coverage. Individuals who are age 19 and 20 will receive Prime benefits until they reach age 21, at which time they will receive Basic benefits. Individuals who are pregnant will receive Prime benefits until they reach 60 days postpartum, at which time they will receive Basic benefits, unless they are 19 - 20 or Medically Frail for which they will continue to receive Prime benefits.

The manual references which support this action are- 477 NAC 29-003.01, which can be found online at: ACCESSNebraska.ne.gov

If you applied through the Federal Marketplace your application was sent to Nebraska DHHS for a Medicaid eligibility determination. The Medicaid eligibility determination for the individuals noted has been communicated to the Federal Marketplace. If further information is needed you will be contacted.

If you have not previously received a permanent Medicaid ID card, you will receive a card within the next week. Please keep this card. You must show this card to all providers when getting medical/dental care. If you are required to participate in managed care, you will be contacted with more information.

Note: The fix for this is scheduled for the January interim release.

Duplication of Same Month Action on Approved Notices (Fix)

The Notice of Actions will no longer show duplication of the same month actions on approval Notices.

Example of Error:

JILL JONES are eligible for Heritage Health Adult.

See the benefit tier information below.

Heritage Health Adult - Benefit Tier Information

Individual	Benefit Tier	Effective Date
JILL JONES	Basic	10-01-2020

Benefit Tier Eligibility

All enrollees in Heritage Health Adult will receive Basic benefits except for individuals identified as Medically Frail, pregnant, or age 19 and 20. Basic benefits will include a comprehensive package of physical health, behavioral health, and prescription drug coverage. If you have a pending Medical Frailty determination, you will be notified of the result in a separate notice.

Individuals identified as Medically Frail, pregnant, or age 19 and 20 will receive Prime benefits. Prime benefits include all Basic benefits and will add dental, vision, and over-the-counter medication coverage. Individuals who are age 19 and 20 will receive Prime benefits until they reach age 21, at which time they will receive Basic benefits. Individuals who are pregnant will receive Prime benefits until they reach 60 days postpartum, at which time they will receive Basic benefits, unless they are 19 - 20 or Medically Frail for which they will continue to receive Prime benefits.

The following individual(s) are eligible for Heritage Health Adult:

See Reverse

System Notice

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3043409E

Individual
JILL JONES

Status
Eligible

See the benefit tier information below.

Heritage Health Adult - Benefit Tier Information

Individual	Benefit Tier	Effective Date
JILL JONES	Basic	10-01-2020

Benefit Tier Eligibility

All enrollees in Heritage Health Adult will receive Basic benefits except for individuals identified as Medically Frail, pregnant, or age 19 and 20. Basic benefits will include a comprehensive package of physical health, behavioral health, and prescription drug coverage. If you have a pending Medical Frailty determination, you will be notified of the result in a separate notice.

Individuals identified as Medically Frail, pregnant, or age 19 and 20 will receive Prime benefits. Prime benefits include all Basic benefits and will add dental, vision, and over-the-counter medication

Previously Approved Medicaid with no Benefit Change (Fix)

An error is occurring when an HHA Medicaid budget is processed and there is no change in benefit. A Notice of Action is generated in error showing the original approval start date. Now Medicaid cases will no longer generate this Notice of Action.

Reopen Waiver Case Pop-Up Message (New)

When a Medicaid Program Case has been closed within the past 90 days, if there is a Waiver case of AD, CDD and DDAD Program Cases, the following pop up message will display prompting the worker to reopen the Waiver case if appropriate.

The screenshot shows a 'Budget Authorization' window for 'Benefit Month: 11-2020'. It features a 'New Budgets:' section with a table of budget items. A pop-up message box is overlaid on the table, displaying an information icon and the text: 'An AD or DD waiver program case closed in the past 90 days. Please reopen the waiver case if appropriate.' The table below the pop-up lists budget items for 'MEDICAID' with columns for 'Asst/Cat', 'Elig Name', 'Type', 'Eligible', 'Amount', 'UP/OP', and 'Ovrd.'.

Pgm Case	Program Case Name	Program Case Number				
Asst/Cat	Elig Name	Type	Eligible	Amount	UP/OP	Ovrd.
MEDICAID	TRAN	SONYA	38074675			
	HHA Basic	SONYA	Regular	Pass	0.00	
	MAGI Child 1-5	LILA	Regular	Pass	0.00	
	MAGI Child 1-5	ANH	Regular	Pass	0.00	

Pgm Case	Asst/Cat	Elig Name	Begin Date	End Date	Type	Elig	Amount	Issd	UP/OP	Ovrd.
MEDICAID	TRAN	SONYA			38074675					
	HHA Basic	SONYA	10-01-2020	10-31-2020	Regular	Pass	0.00	N		
	MAGI Child ...	LILA	10-01-2020	10-31-2020	Regular	Pass	0.00	N		
	MAGI Child ...	ANH	10-01-2020	10-31-2020	Regular	Pass	0.00	N		
	MAGI Child ...	BOBBY	10-01-2020	10-31-2020	Regular	Pass	0.00	N		

MAGI Parent/Caretaker Relative Question (Change)

The MAGI Parent/Caretaker Relative question has been fixed and will now correctly be asked for any adult applicants during MAGI Configuration. This includes movement from Non-MAGI categories and new applicants that do not have any dependent children in the home.

MAGI 5% Disregard (Change)

The MAGI 5% disregard has been updated to not consider MAGI IMD when it is not the last category of possible eligibility. The 5% disregard is now correctly applied to MAGI PC or HHA.

Medicaid Budget Override Indicator (Change)

For Medicaid budgets that have a Configuration Override applied, the override indicator has been updated to only display on the applicable budget. This change will display on the Budget Authorization screen in Expert and Benefit Summary screen in both Expert and Mainframe.

Budget Authorization Benefit Month: 12-2020

New Budgets:

Pgm Case	Program Case Name			Program Case Number			
	Ass/Cat	Elig Name	Type	Eligible	Amount	UP/OP	Ovrd.
MEDICAID	STAR	BETH		65049087			
*+	MAGI Child 6-18	COLIN	Regular	Pass	0.00		Y
*+	MAGI PC	BETH	Regular	Pass	0.00		

Previously Authorized Budgets: Budget Override Review Authorize

Pgm Case	Program Case Name			Program Case Number					
Ass/Cat	Elig Name	Begin Date	End Date	Type	Elig	Amount	Issd	UP/OP	Ovrd.
MEDICAID	STAR	BETH		65049087					
MAGI Child ...	COLIN	12-01-2020		Regular	Pass	0.00	N		Y
MAGI PC	BETH	12-01-2020		Regular	Pass	0.00	N		

Benefit Summary OK Cancel Help

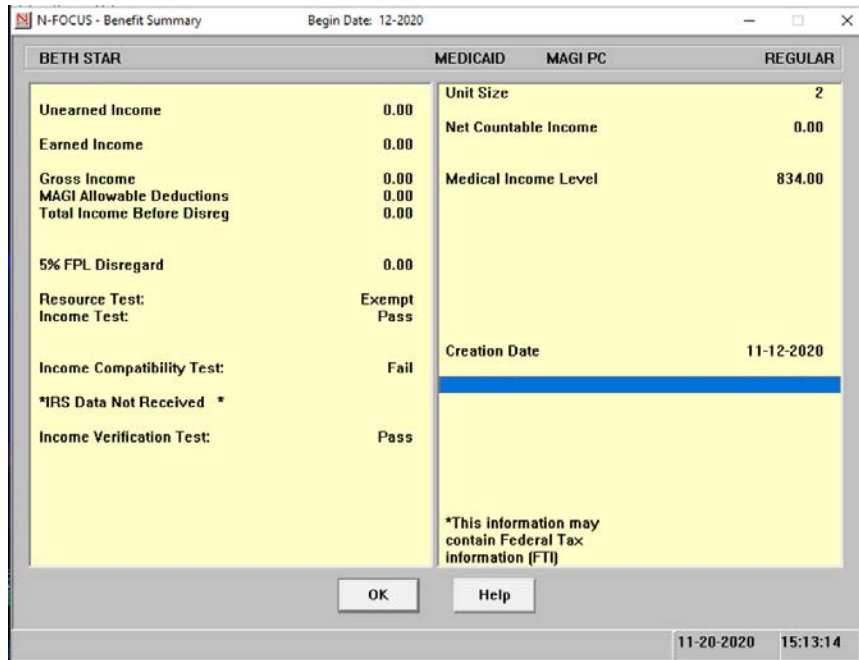
N-FOCUS - Benefit Summary Begin Date: 12-2020

BETH STAR		MEDICAID	MAGI CHILD 6-18	REGULAR
Unearned Income	0.00	Unit Size		2
Earned Income	0.00	Net Countable Income		0.00
Gross Income	0.00	Medical Income Level		1912.00
MAGI Allowable Deductions	0.00			
Total Income Before Disreg	0.00			
5% FPL Disregard	0.00			
Resource Test:	Exempt			
Income Test:	Pass			
Income Compatibility Test:	Fail			
*IRS Data Not Received *				
Income Verification Test:	Pass			
		Creation Date		11-12-2020
		** Overridden Budget **		
		*This information may contain Federal Tax information (FTI)		

OK Help

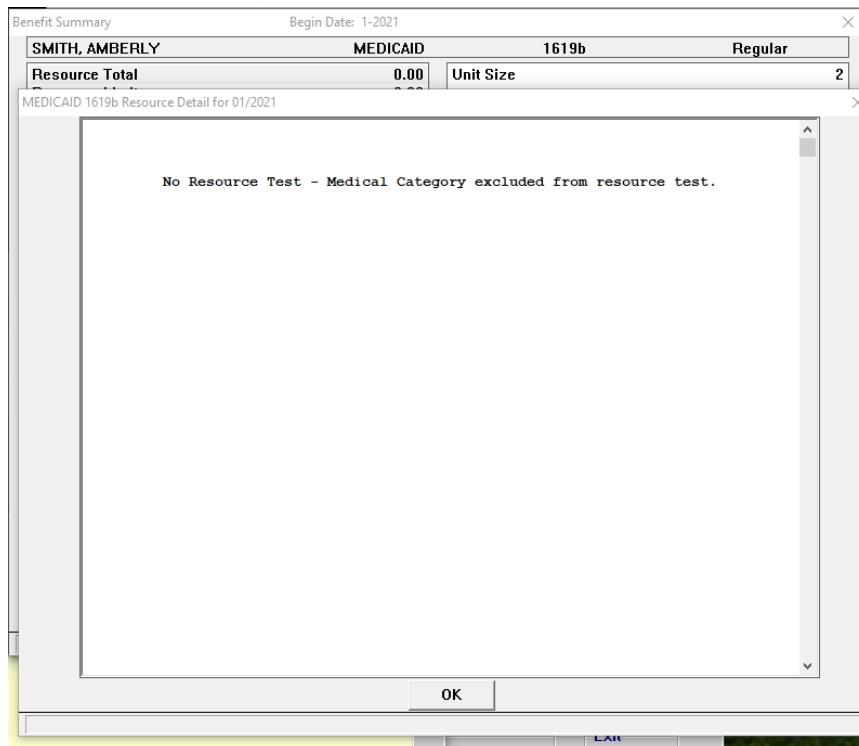
11-20-2020 15:12:57

Additional screen print on next page.



1619 B Budget Exempt from Resources (Change)

The 1619 B participants are now exempt from the resource test in Expert System budgeting. On the benefit summary screen for Resource it will show Exempt.



Additional Screen Print on next page.

DD Waiver/AD Waiver Status Code (Change)

Claims received from the Tellus System new Reason Codes have been added.

- If a DD Waiver or AD Waiver claim is received and a Share of Cost is found on the Medicaid budget the claim will suspend for a new reason of 'Electronic Claim received – SOC Review Needed'
- If a PAS claim is received and a Share of Cost is found on the Medicaid budget the claim will suspend for a new reason of 'Electronic Claim received – Spenddown Review Needed'
- If an AD Waiver Disability Related In Home Child Care claim is received the claim will suspend for a new reason of 'Parental Portion Review Needed'.

The screenshot shows the 'N-FOCUS - Detail Claim Item' window. The claim details are as follows:

Claim		External Claim ID	
Number	8525531	T795590319	
Line	1	Agency Office	CENTRAL
Version	1		

Case Person: Number 48474390, Name EVE ANGEL
Service Auth: Nbr 30170042, Type Provider
Service: Code 1113, RESPITE IN HM

Service Dates: Begin 11-20-2020, End 11-20-2020
Service Frequency: Hour
Relative Provider:

Charges:

	Submitted	Validated
Units Prov	.25	
Rate	9.500	
Total Chrg	\$2.38	
Cust Oblig		
Reduction		
Net Charge	2.38	
Local Oblig		
FICA		
Backup Withholding		
Approved Payment Amount		

Status: SUSPENDED As Of 11-23-2020
Created By NF01040B 11-23-2020 03:01 PM
Modified By

A dropdown menu at the bottom is highlighted with a red box, showing the selected status code: **Electronic Claim Received | SOC Review Needed**

TMA Budgeting Issue with Unearned Income (Fix)

PCR budgets should now correctly go TMA if they are otherwise eligible. (The earned income is below the FPL and the addition of unearned income places them over the FPL.)

NFOCUS Tips

Duplicate Persons

Please call Production Support when duplicate is identified as the duplicate MUST be discontinued.

Same Sex Married Parents

When married parents are of the same sex, if both are female, only one can have the Role of Bio Parent of the child. The other parent should be listed as either the Step or Adoptive parent.