N-FOCUS Major Release Combined All Divisions December 7, 2025

A Major Release of the N-FOCUS System is being implemented December 7, 2025. This document provides information explaining new functionality, enhancements and problem resolutions made effective with this release. This document is divided into two main sections and addresses all the Divisions, MLTC, EA, CFS, DD and BH.

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

Home and Community Based Services:

N-FOCUS workers who work directly with DD or BH Programs and those who work with the related Medicaid cases should read this section.

This section will only appear when there are tips,

enhancements or fixes specific to Developmental Disabilities or

Behavioral Programs.

Expert System: All N-FOCUS workers with responsibilities for case entry for AABD, ADC, SNAP, LIHEAP, Medicaid, CFS, etc. should read this section.

Note: When new functionality is added to N-FOCUS that crosses multiple topics (i.e., 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.

> Interfaces, Document Imaging and N-FOCUS Tips sections will be added as appropriate for the release.

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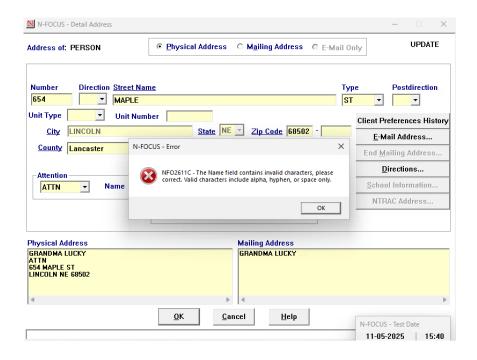
General Interest and Mainframe

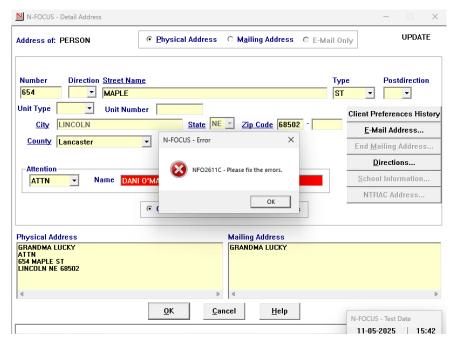
All Divisions - Claim Validation Defect (Fix)

Previously in GEN when a claim was submitted where the frequency matched the related service authorization and the rate entered on the same claim was more than the rate from the related service authorization, an incorrect validation message of "Submitted frequency code does not match units & rates" was displayed. The expected validation message in this situation is, "Submitted rate is more than the authorized rate". The correct validation message of "Submitted rate is more than the authorized rate" will now display when a claim is submitted via GEN and the frequency entered is correct and the rate entered is more than authorized amount.

All Divisions – Address Name Field Special Character Restrictions (Change)

Due to downstream issues with special characters in the Name field in Address, a change was made to restrict the entry of special characters. The only valid characters allowed are alpha, hyphen or spaces. Users will receive an error message stating that there are invalid characters and the Name field will highlight in red when an invalid character is entered. The data will not be saved, and the user will not be able to navigate from the window until the error is fixed.



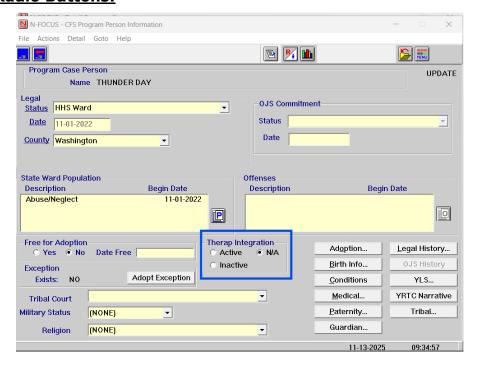


CFS - Preparation for CFS to Therap Integration (New)

To support the NFOCUS CFS to Therap integration coming soon, the following changes are going into Production for the December Major Release.

It is important to note that the **integration is not live** for this release, and these release notes are for **informational purposes**, only.

New Radio Buttons:



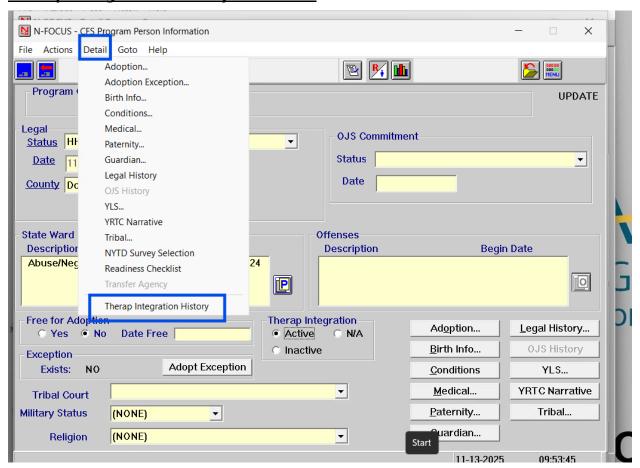
Therap Integration buttons are Located on the CFS Program Person screen. These buttons will control if NFOCUS will send (or not send) demographic information to Therap.

Active – NFOCUS will send a nightly file to Therap for this person and Master Case combination

N/A – NFOCUS has not sent a file to Therap for this person and Master Case combination

Inactive – NFOCUS previously sent a file to Therap for this person and Master Case combination but is not any longer

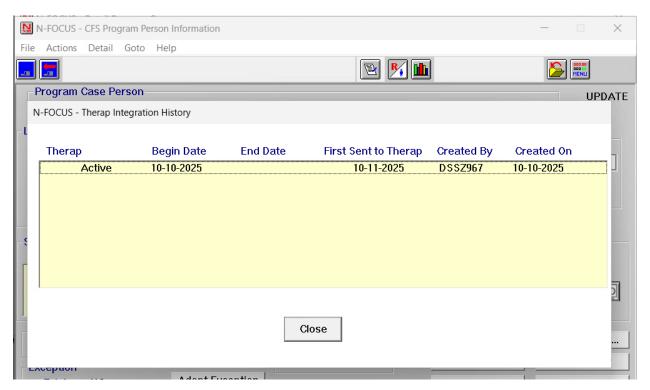
Therap Integration History Selection:



Also, within the CFS Program Person Information, a user may select from the menu:

DETAIL THERAP INTEGRATION HISTORY

This option will enable if there is CFS Integration History to display.



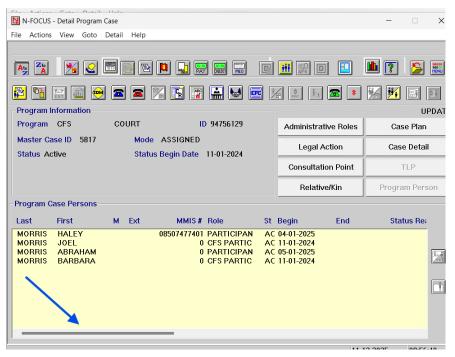
In the NFOCUS-Therap Integration History box, the user will see the following:

- Status of the Therap integration
- Begin date of the integration (when a user selected ACTIVE)
- End date of the integration (when a user selected INACTIVE)
- First Sent to Therap (when the Batch file was sent to Therap)
- Created By (who initiated the status change)
- Created On (when the status change was initiated by the user)

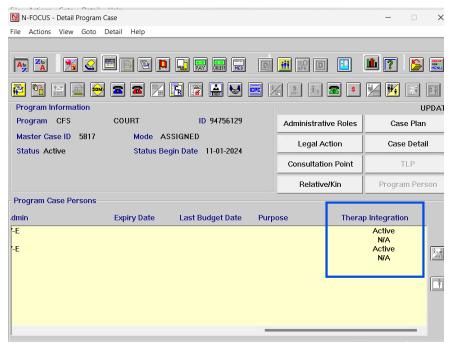
IMPORTANT NOTE

If a user selects Active and within the same day and selects N/A, the file will not generate, and no change history will be displayed.

Program Case Persons List Box:



Located in the Detail Program Case Screen, the Program Case Persons List has a new column located to the far right of the screen. Scroll to the right.

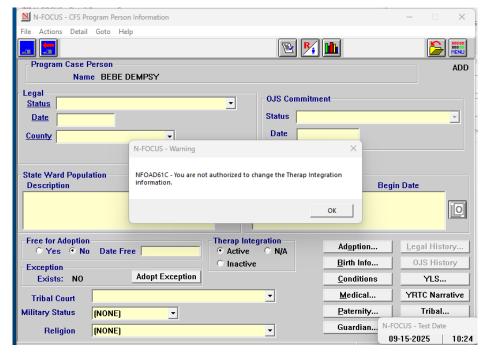


The Therap Integration column displays the integration status of everyone within the program case.

WARNING MESSAGES:

There are now a series of warning messages that will appear in different situations.

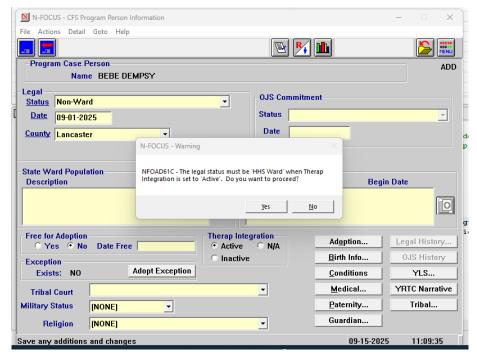
Not Authorized to Make Changes Warning Message:



If a user does not have the new security role: CFS_CLINICAL, even if the user is able to update the program case, they will not be able to update the Therap Integration radio buttons.

If a user sees this message, whatever the original status was prior to the change, the system will revert to the original status.

Legal Status Warning Message:



If a user clicks the Active Therap Integration radio button but the person is not an HHS Ward, a warning message will appear. The user may click Yes and continue, the status change will remain.

Active Developmental Disabilities Service Coordination Program Case Warning Message:



If a person is in an active Developmental Disabilities Service Coordination (DDSC) Program Case, in an active or pending CFS Program Case, and a user selects the Active Therap Integration radio button within the CFS Program Case, a warning message will appear. The Therap Integration status will not change. A similar message will appear if there is a Pending DDSC Program Case.

It is important to note that this message will only appear upon Save in the CFS Program Case once the Therap Integration Active button is selected by the user.

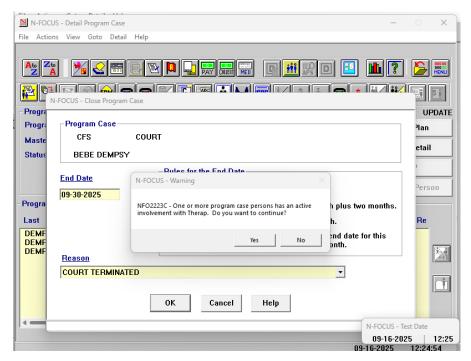
N-FOCUS - CFS Program Person Information File Actions Detail Goto Help 📳 🎉 📠 Program Case Person UPDATE Name BECKY DEMPSY Legal **OJS Commitment** Status Non-Ward • Status Date 09-15-2025 Date County Lancaster N-FOCUS - Error State Ward Population NFOAD61C - The CFS Case Persons information has not been sent to Therap. The Therap Integration must be 'Active' or 'N/A' Begin Date Description 0 ОК Free for Adoption Therap Integration <u>L</u>egal History... Ad<u>o</u>ption... Date Free Active Yes @ No Inactive Birth Info... Exception Adopt Exception Exists: NO $\underline{C} on ditions$ YLS... Medical... YRTC Narrative Tribal Court Tribal... Military Status (NONE) Paternity... Guardian... N-FOCUS - Test Date Religion (NONE) 09-16-2025 11:02

Changing Therap Integration Status Warning Message:

This warning message is engaged if any of the following criteria are met:

- The user moves a person from Active to N/A, and a file was already sent to Therap
- The user moves a person from N/A to Inactive
- The user moves a person from Inactive to N/A

CFS Program Case Close with Active Therap Persons:



This warning message is engaged when a CFS Program Case is being closed by a user and there are still people who are marked as Active for the Therap Integration. The user may click through this warning message and the CFS Program Case will still close.

New CFS Security Role: CFS CLINICAL

This new security role will move to Production for the December Major Release but will not be implemented until the integration with Therap for CFS is active.

This security role will be applied to the CFS Clinical team's various roles to allow them to update the CFS Therap status radio buttons.

It's important to note that the role will only allow those who can already edit CFS program cases to update the CFS Therap status radio buttons.

CFS - Payment Determination Window Copy Forward Error (Fix)

Prior to this release, when a Payment Determination was copied forward and the narratives under Caregiver Responsibilities were copied over, the user would sometimes receive an error message stating, "Payment Determination Record Already Exists" due to a defect in the code. This has been corrected and a more clearer error stating, "Narrative Already Exists" will appear if duplicate narratives are present.

OEA - Benefit Summary Display of Self-Employment (Fix)

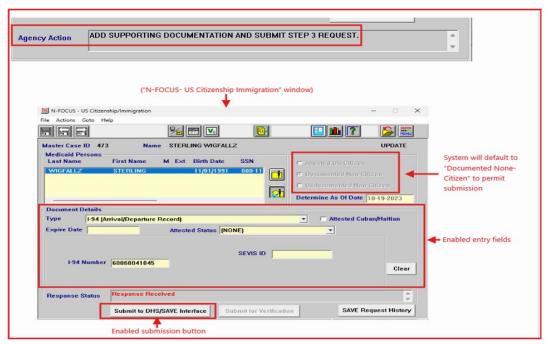
The Benefit Summary screen in Gen previously only displayed 40 lines of self-employment data causing some cases not to display the full amount of data that was entered in the Expert System. The benefit summary will now display up to 200 lines of self-employment data.

OEA - Employment First Work Participation Rates (Update)

The work participation rates for Employment First participation hours have been updated with 2026 requirements for 20/30/35 hour per week households.

OEA – Medicaid Verify Lawful Presence Window Updates (Change)

Prior to the release, if the 'Attested US Citizen' radio button was selected, citizenship status indicators, entry fields and the submission button were all disabled. This caused issue for submission of a pending Step 3 request. To address this, the following changes have been implemented:



OEA - Medicaid Renewal Communication Updates (Change)

The following updates have been implemented to improve the renewal reminder process:

Targeted Reminders

Renewal reminders will now be sent only to Medicaid participants who have selected email and/or text as their preferred communication method. (This rule was suspended by the Centers for Medicare/Medicaid Services (CMS) during the Public Health Emergency).

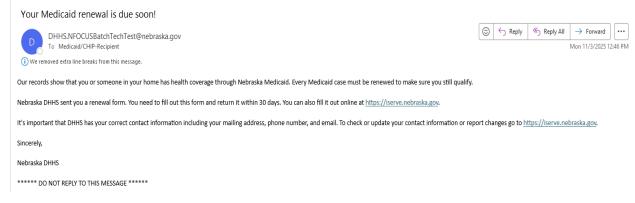
Improved Reminder Timing

- Renewal text and email reminders are now triggered when the renewal form is generated (daily) instead of on fixed dates (1st, 8th, 15th).
- Initial reminder Sent 15 days later if the renewal has not been received or completed.

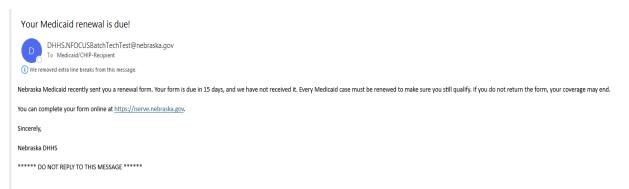
Message Content Updates

Message templates (both email and text) have been refreshed in English and Spanish.

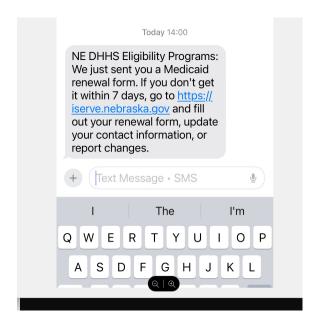
Initial Email



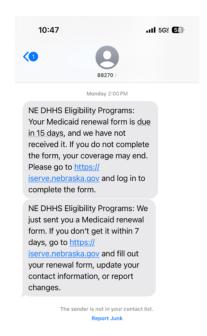
Reminder Email



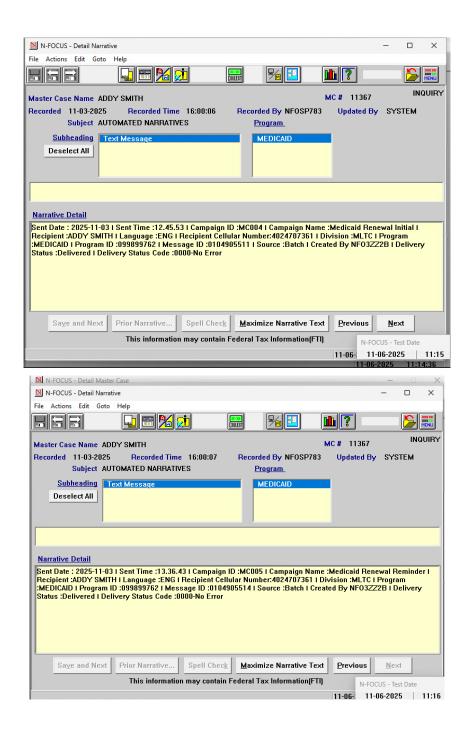
Initial Text



Reminder Text



The text campaign names have been updated from Public Health Emergency Unwind Initial and Reminder to Medicaid Renewal Initial and Reminder. This is reflected in the Automated Narratives and Text History areas of N-FOCUS.



Home and Community Based Services

BH – SMI and SMISC Additional Program Case Functionality (New)

Eligibility correspondence alerts, reports and narrative function have been added to SMI and SMISC program case functionality. Additional correspondence will be implemented in future releases.

Alerts

The following alerts are now connected to the SMISC program case:

Alert 36 - 1619b Eligibility

Alert 37 – 1619b Ineligibility

Alert 50 - Out of State SSI Received

Alert 51 – Legal Status Changed

Alert 242 - Death Verified

Alert 367 - Review Completed

Alert 368 - Waiver Status Change

Alert 370 - Renewal Form Sent

Alert 623 Renewal Form Received

Alert 624 Verification Due

Alert 625 Renewal Overdue

Alert 626 - Renewal Not Received

Alert 9998 - Worker Alert EA no WT

Alert 9999 - Worker alert EA

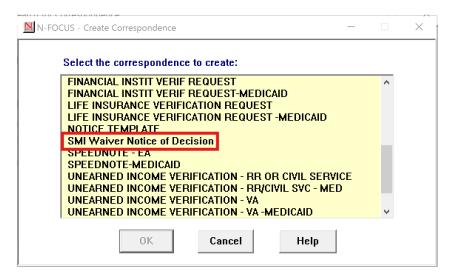
Reports

Three new reports will be created for SMI and/or SMISC:

- SMI Case Assignment
- SMI Case Status
- SMIT and SMISC Closed and Pending Cases

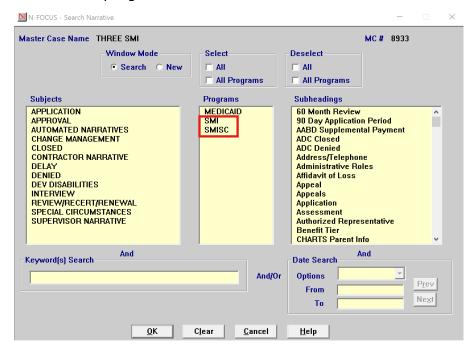
Correspondence

The SMI Waiver Notice of Decision has been added as a correspondence option.



Narrative

The SMI and SMISC programs have been added to narrative functionality.



Document Imaging

CFS - New Conditions for Return Sub-Category (New)

A new sub-category titled 'Conditions for Return' will be added. This sub-category can be found under the main category of Casework.

Interfaces

OEA/CFS - Claims Portal Validation (Fix)

When a provider via the Claims Portal enters a number of units that is more than the maximum allowed for the service dates and frequency, the Units too high for service dates and frequency (UN) edit will now be invoked for all programs. Previously UN edit was added for Child Care. This request is adding the UN edit for all other programs that can have a claim submitted through the Claims portal that use the frequencies of day, hour, partial day, quarter hour, week, and year. When a provider submits a claim via the Claims Portal and the claim fails the UN edit for the service dates and frequency, the following error message will display "The claim could not be submitted because of the following reason(s)" "Invalid unit(s) - units too high for service date and frequency. Please reference service authorization and re-submit. For further assistance please contact your RD worker or email dhhs.claims@nebraska.gov." The provider must correct the Unit number entered to continue with the claim submission process.

OEA – SNAP Healthy Choice Waiver Text Message Campaign (New)

Effective January 1, 2026, the allowable food purchases using SNAP will change, specifically eliminating soft drinks and energy drinks. The SNAP policy team wants to get ahead of the timeline to inform SNAP recipients of the changes, so that there are no surprises when exercising their SNAP benefits.

There will be three different text messages sent between 11/20/2025 and mid-December 2025 to Active Households with Text Messaging preferences enabled. Initial text message will be sent on 11/20/2025, including a link to the Healthy Choice Waiver page.

English: NE DHHS - Changes are coming to allowable purchases in January 2026. Please visit https://dhhs.ne.gov/Pages/Healthy-Choices-Waiver.aspx for additional information. Reply STOP to End Msgs.

Spanish: NE DHHS - Se avecinan cambios en las compras permitidas en enero de 2026. Visite https://dhhs.ne.gov/Pages/Healthy-Choices-Waiver.aspx para obtener información adicional. STOP para dejar de recibir mensajes.

A follow up text message will be sent on 11/25/2025, including a link to an optional survey.

English: NE DHHS - Nebraska DHHS invites you to take a quick, confidential 10-minute survey about your grocery choices, what you eat and drink, and how you feel about your health and quality of life. Your voice will help shape nutrition programs that fit real lives. Interested? https://s.alchemer.com/s3/NE-Healthy-Food-Healthy-Life. Reply STOP to End Msgs.

Spanish: NE DHHS - Mensaje adicional para enviar entre el mensaje inicial y el actual: El DHHS de Nebraska lo invita a realizar una encuesta rápida y confidencial de 10 minutos sobre sus elecciones de comestibles, lo que come y bebe, y cómo se siente con respecto a su salud y calidad de vida. Tu voz ayudará a

dar forma a programas de nutrición que se adapten a vidas reales. Interesado? https://s.alchemer.com/s3/NE-Healthy-Food-Healthy-Life. STOP para dejar de recibir mensajes..

A final text message will be sent in mid-December (TBD), includes a link to the Healthy Choice Waiver page.

English: NE DHHS - Are you aware of the changes to allowable purchases starting January 2026? Please visit https://dhhs.ne.gov/Pages/Healthy-Choices-Waiver.aspx for additional information. Reply STOP to End Msqs.

Spanish: NE DHHS ¿Está al tanto de los cambios en las compras permitidas a partir de enero de 2026? Visite https://dhhs.ne.gov/Pages/Healthy-Choices-Waiver.aspx para obtener información adicional. STOP para dejar de recibir mensajes.

Expert System

OEA - Medicare Savings Programs Resource Standards (Update)

Resource limits for MSP/QMB/SLMB and QI-1 have been updated in N-FOCUS effective 1-1-2026:

Individual: \$9,950Couple: \$14,910

OEA – Medicaid Budgeting Spousal Impoverishment Figures (Update)

Spousal Impoverishment figures have been updated in N-FOCUS effective 1-1-2026:

Maximum Monthly Maintenance Needs Allowance: \$4,067

• Minimum Community Spouse Resource Standard: \$32,532

• Community Spouse Maximum Resource Standard: \$162,660

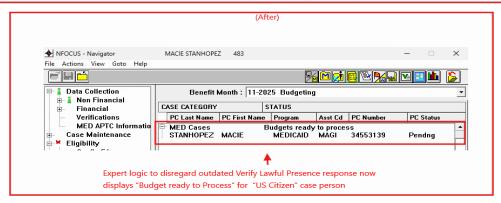
OEA – Medicaid Budgeting Use of Verify Lawful Presence Data (Change)

Medicaid budgeting is not permitted for case persons with a budget status of 'Invalid Immigration Status Participant(s).' In situations where an individual has attained U.S. citizenship and is verified by the Social Security Administration (SSA) HUB interface, a new Verify Lawful Presence (VLP) request cannot be submitted. Prior to this release, expert was reading the outdated Verify Lawful Presence (VLP) interface response which indicated the case person has not met the 5-Year Bar requirement. To address this issue, Expert System logic has been updated to disregard the outdated Verify Lawful Presence (VLP) interface response that shows the case person has not met the 5-Year Bar, if there is an up to date 'US Citizen'

Status in Expert for the case person.

(Before)

(Before



subject to 5 year bar message

OEA - SNAP Work Requirements Wizard - ABAWD Screen (New)

A new SNAP Work Requirements exemption 'Has the individual been determined unfit for employment?' has been added.

- The new exemption was inserted as exemption/question #4.
- Previous exemptions/questions 4 through 6 have been renumbered
 5 through 7 respectively.
- The new exemption question will only apply to individuals 60 years of age and older and younger than 65.
 - For individuals 18 years of age or older and younger than 60, this exemption/question will be <u>disabled</u>.
 - For individuals 60 years of age or older and younger than 65, this exemption/question will be enabled.
 - For individuals 65 years of age and older, the current logic will remain in place and the entire ABAWD screen will be disabled.

1.	Is the individual meeting another Work Requirement?	Yes	No	
2.	Does the individual have any non-dependent children 14 or younger in the same SNAP unit?	Yes	No	
3.	Is the individual Pregnant?	Yes	No	
4.	Has the individual been determined unfit for employment?	Yes	No	
5.	Is the individual meeting the ABAWD work requirement by working 20 hours per week on an average of 80 hours per month through paid employment, in-kind income, volunteer work, participation in and compliance with an approved work program, or any combination of these?	Yes	No	_
6.	Is the individual an Indian, Urban Indian, or California Indian, or other Indians who are eligible for Indian Health Service? (Q10)	Yes	No	
7.	Is the individual residing in Thurston County/Winnebago or Omaha Reservation? (Q6)	Yes	No	

OEA – Verification Requests (Change)

Expert System Verification Requests will now have a combined Economic Assistance and Medicaid footer with contact information for both. The Access Nebraska web address still shows but the link will take respondents to iServe. The iServe web address will be added to the footer soon with a future update.

Economic Assistance	Go online:	Nebraska Medicaid Eligibility
Toll Free: (800)383-4278	ACCESSNebraska.ne.gov	Toll Free: (855)632-7633
Lincoln: (402)323-3900	Federal Health Insurance Marketplace	Lincoln: (402)473-7000
Omaha: (402)595-1258	Healthcare.gov	Omaha: (402)595-1178