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# N-FOCUS Major Release Combined All Divisions March 29<sup>th</sup>, 2026

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A Major Release of the N-FOCUS System is being implemented March 29<sup>th</sup>, 2026. 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, OEA, CFS, DD and BH.

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

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

**Note:** Alerts, Work Tasks, Correspondence, Interfaces, Document Imaging, N-FOCUS Tips, and other sections will be added as appropriate for the release.

**The new Medicaid Work Requirement functionality included in this release must be used for applications submitted on/after May 1, 2026, and for renewals with an expiry date on/after July 31, 2026. All Medicaid Work Requirements items are grouped together in these Release Notes in the Medicaid Work Requirements section starting on Page 9.**

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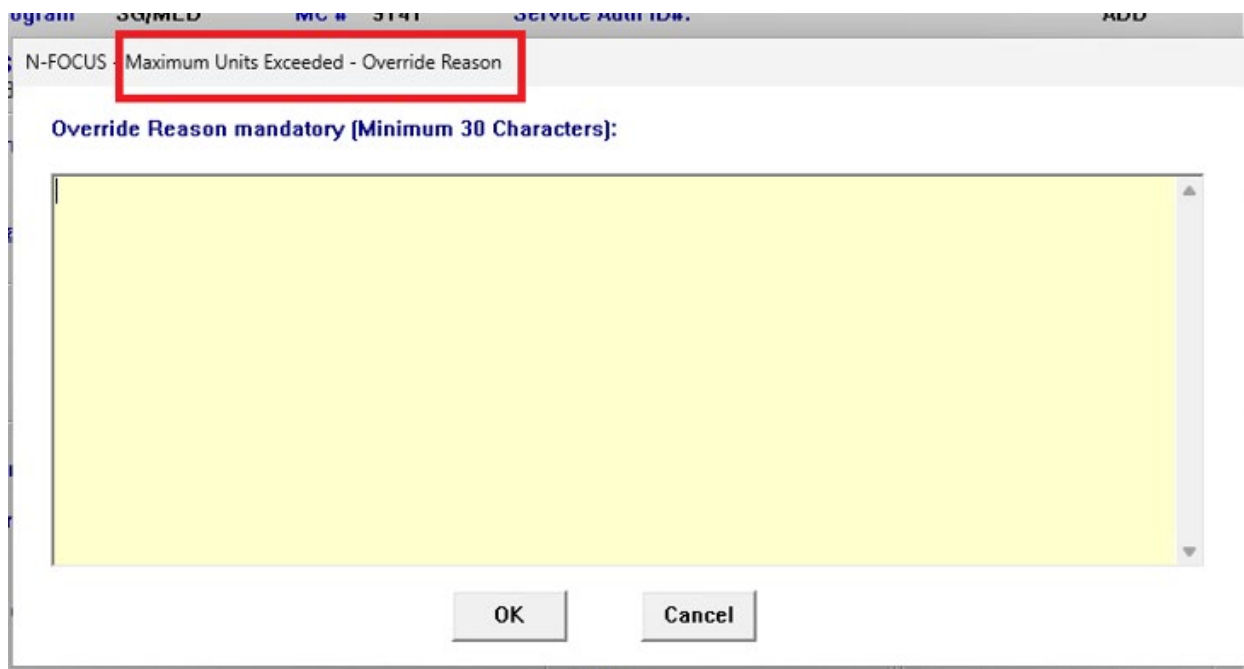
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## General Interest and Mainframe

### All Divisions – Service Authorization Maximum Unit Override (Change)

For programs other than Child Care, when the total units entered on a Service Authorization is more than the maximum allowed for the frequency and dates, a reason for the maximum unit override must be captured to document the reason for override. The new 'Maximum Units Exceeded – Override Reason' dialog box will display after a user selects 'Yes' on the 'Maximum Units Exceeded' dialog box. The reason must have a minimum of 30 characters and cannot be more than 500 characters. A new 'Reason' push button will display on the 'Units and Rates' window and will be selectable when the line for a specific Units and Rate has been selected, and that unit and rate has a maximum unit override. When the 'Reason' push button is selectable and is clicked, the 'Maximum Units Exceeded – Override Reason' dialog box will display along with the latest maximum unit override reason that was saved.

The image shows a screenshot of a software dialog box titled "Maximum Units Exceeded - Override Reason". The dialog box is part of an application window titled "N-FOCUS". The main content area of the dialog box is a large yellow rectangular text field. Above this field, the text "Override Reason mandatory (Minimum 30 Characters):" is displayed. At the bottom of the dialog box, there are two buttons: "OK" and "Cancel". The "Maximum Units Exceeded - Override Reason" title bar is highlighted with a red rectangular box.

After a user clicks the 'OK' Push button and all validations have passed, the focus returns to the 'Units and Rates' window and the service authorization can be saved. Notice in the 2<sup>nd</sup> screenshot the "Reason" Push button is selectable.

N-FOCUS - Units and Rates

File Actions Goto Help

S.Auth Dates ADD

01-15-2026 01-28-2026 Service Auth ID#

Freq.	Begin Date	End Date	Rate
WK	01-15-2026	01-28-2026	300.000

Units and Rates

Frequency  Rate  Add U/R

Begin Date  End Date  Adjust U/R

For  frequency the total number of units authorized is  and remaining balance .00 Remove U/R

Reason...

02-23-2026 11:42:06

N-FOCUS - Units and Rates

File Actions Goto Help

S.Auth Dates UPDATE

01-15-2026 01-28-2026 Service Auth ID# 52199663

Max Unit Override

Freq.	Begin Date	End Date	Rate
WK	01-15-2026	01-28-2026	300.000

Units and Rates

Frequency  Rate  Add U/R

Begin Date  End Date  Adjust U/R

For WEEKLY frequency the total number of units authorized is  and remaining balance 3.00 Remove U/R

Reason...

02-23-2026 11:44:26

For service authorizations or claims, and for claims submitted via the Claims portal, when the frequency entered is month and the maximum units allowed for the frequency and dates is calculated, a partial month will be included in the maximum units allowed.

## Correspondence

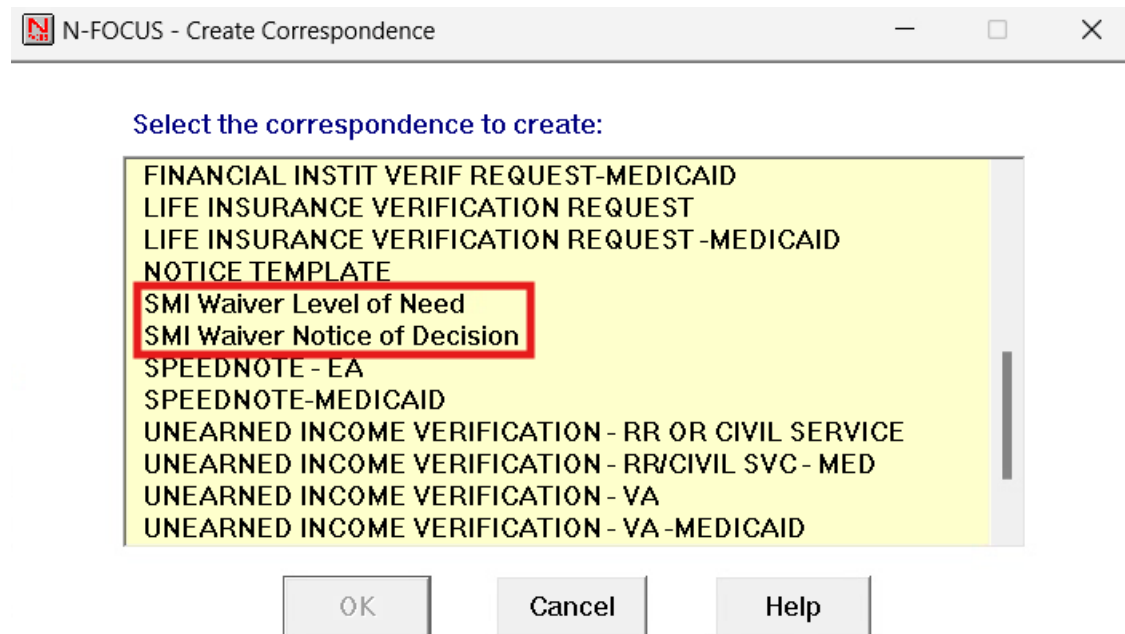
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### BH – SMI Correspondence Options (New)

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There are two new correspondence options for SMI and SMISC program cases:

- SMI Waiver Level of Need
- SMI Waiver Notice of Decision



### OEA - Medicaid and 599 CHIP Administrative Roles (Update)

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For Medicaid and 599 CHIP programs, notices will always be sent to the Case Name, even when there is an Authorized Representative. The 'Change Notice' button will be disabled for the Case Name person with the active role. If notices are set to send to the Case Name and any other representative, the 'Change Notice' button will still be disabled for the Case Name person.

Program Case Persons

Last	First	MI	Ext	Birth Date	Role	Status	Reason	Assi
BUCHANNO	MITCH			07-17-2000	PARTICIPANT	PENDNG		
HOLDEN	CAROLINE			06-15-2006	PARTICIPANT	PENDNG		

Administrative Role

Name	Birth Date	Role	Notice	Begin Date	En
HOBIE BUCHANNON		CONSERVATOR	Y	02-25-2026	
MITCH BUCHANNON	07-17-2000	CASE NAME	Y	02-26-2026	

- Select Role
- Change Notice
- Close Role

OK Cancel Help

## OEA – Medicaid Renewal Forms (Update)

A QR code and help text has been added to the first page of the MAGI, Non-MAGI, Combined and Non-MAGI FFC renewal forms. The QR code links to the iServe customer portal as an option to complete the renewal online.

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PO BOX 2992  
OMAHA NE 68103-2992

### Medicaid Renewal

Case Number - 00000025  
Case Name - EDDIE MONEY  
CONTACT - Medicaid  
Fax Number - (402)595-1901  
Date of Notice - 04-01-2026  
Mail Date - 04-01-2026

EDDIE MONEY  
555 SHAKIN AVE  
LINCOLN NE 68510



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

Due Date: 05-01-2026

This form is needed to renew your Medicaid benefits. Failure to complete the renewal process could result in cancellation of your Medicaid Coverage. Complete, sign, and return to the address above or complete your renewal online by using the QR code above or by visiting [iServe.nebraska.gov](https://iServe.nebraska.gov).

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

Clients Name: EDDIE MONEY	Social Security Number: XXX-XX-XXXX	
Address: 555 SHAKIN AVE	LINCOLN NE 68510	
Address:		
Home Phone:	Cell Phone: (602)617-6190	
By checking 'this box' [ ], 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>		
E-Mail Address:		
By checking 'this box' [ ], I elect to receive notification of my written notices and other correspondence regarding my benefits from DHHS through the above email address. These benefits include; Medicaid, CHIP, SNAP, ADC, LIHEAP, CC Subsidy, AABD payment and SSAD. I will no longer receive information through the mail. I understand I will receive an email notification of the correspondence, which will provide a link to the DHHS iServe website where I can access the correspondence. I understand that I must create an authenticated account on the iServe website in order to view my correspondence in Benefit Inquiry.		
Do you plan to file a federal income tax return next year?	YES / NO	
Will you file jointly with Spouse?	YES / NO	Spouse name:
Will you claim any dependents on your tax return?	YES / NO	Dependent's Names:
Will you be claimed as a dependent on someone's tax return?	YES / NO	Name of tax filer claiming you: Relationship to tax filer:

#### Renewal of coverage in future years

To make it easier to determine my eligibility for help paying for health coverage in future years, I agree to allow the Department of Health and Human Services (DHHS) to use income data, including information from tax returns. DHHS will send me a notice, let me make any changes, and I can opt out at any time.

#### Yes, renew my eligibility automatically for the next:

[ ] 5 years (the maximum number of years allowed), or for a shorter number of years:  
[ ] 4 years, [ ] 3 years, [ ] 2 years, [ ] 1 year, [ ] Do not automatically renew my eligibility.




[← Back](#)

Extend your benefits


### Renew, review or recertify your benefits

From here you can review/recertify Economic Assistance (EA) benefits or renew Medicaid eligibility. **These need to be done separately.** Help us guide you to the correct application.


Select an option below.

 **Economic Assistance Review & Recertification**  
Start a review/recertification application for your Economic Assistance benefits. If you've already started an application you can continue your saved draft here.

[Start EA Review/Recertification](#)

 **Medicaid Renewal**  
Start a Medicaid renewal application. If you've already started an application, you can continue to your saved draft here. Medicaid typically uses an annual renewal process. Your Medicaid case must be due for renewal to use this feature.

[Start Medicaid Renewal](#)

 **Apply for Benefits**  
If you would rather do a new application for benefits, you can do so here. This application allows you to choose programs related to both Medicaid and Economic Assistance.

[Apply for benefits](#)

## Medicaid Work Requirements Functionality

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**The new Medicaid Work Requirement functionality included in this release must be used for applications submitted on/after May 1, 2026, and for renewals with an expiry date on/after July 31, 2026.**

## Medicaid Work Requirements Correspondence

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### OEA – Medicaid Work Requirements Verification of Compliance Notice Request (New)

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Updates have been made to the current Verification Request functionality in Gen/Mainframe and Expert to allow DHHS to notify an individual about their 30-day compliance Medicaid Work Requirements time frame. A new Medicaid Work Requirements Verification of Compliance Notice will be created through the existing Verification Request window. A new category called MWR Verification of Compliance Notice and a new checklist item of Medicaid Work Requirements Compliance were added to the selection list. While this functionality also exists in the Expert System, workers should use the Gen version due to differences in due date functionality.

N-FOCUS - Add Person, Verification Type(s), Program(s)

Division	Person	Birth Date	Person Number	
<input type="checkbox"/> EA	BRYABLUE A FETNAME	05-01-1984	10226802	Select Person requiring Verification(s)
<input checked="" type="checkbox"/> MLTC	COLEBLUE M FETNAME	08-28-2007	5733394	
	KASSBLUE M FETNAME	04-12-2009	72144202	

Program(s)	Program Case Name	St	Program ID	
MEDICAID	BRYABLUE A FETNAME	PE	5120093	Select Program(s) that require the selected Verification(s)

Category:

Select Verification(s)

MEDICAID WORK REQUIREMENTS COMPLIANCE [SEE COMMENTS BELOW FOR DETAILS]

Comments Add / Next Selection

OK Cancel

The new Medicaid Work Requirement category and checklist selection items will not be allowed to be paired with any of the regular Verification Request categories and checklist items. They will have their own separate verification request correspondence specific to Medicaid Work Requirements. If you try to mix them with the other categories or verification checklist items, you will get an error message.

N-FOCUS - Add Person, Verification Type(s), Program(s)

Division	Person	Birth Date	Person Number	
<input type="checkbox"/> EA	KENA STHATCHER	06-24-1988	72318445	Select Person requiring Verification(s)
<input checked="" type="checkbox"/> MLTC				

Program(s)	Program Case Name	St	Program ID	
MEDICAID	KENA STHATCHER	AC	20577238	Select Program(s) that require the selected Verification(s)

Category:

Select Verification(s)

HOSPITAL DISCHARGE

MEDICAL DOCUMENTATION

TAX FILER INFORMATION

PERMISSION TO WORK

TAX HOUSEHOLD INFORMATION

MEDICAID WORK REQUIREMENTS COMPLIANCE [SEE COMMENTS BELOW FOR DETAILS]

OTHER - SEE COMMENTS SECTION

Comments Add / Next Selection

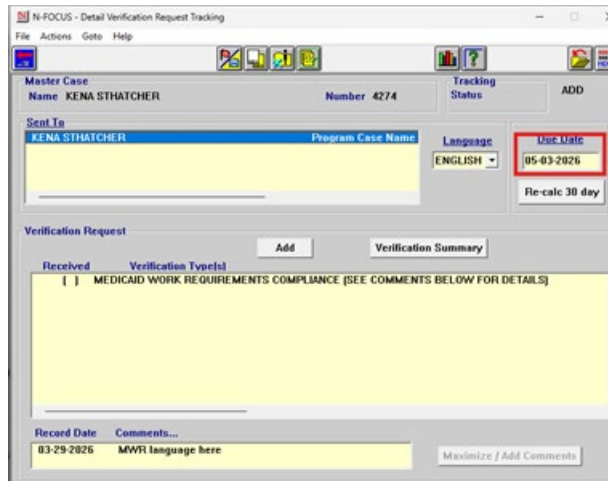
OK Cancel

N-FOCUS - Test Date: 03-29-2026 12:

If you select the Medicaid Work Requirements category or verification checklist item and another regular category or verification checklist item and have not clicked on the Add/Next selection, you can OK the error message, update the selections and continue with the creation of the verification request. If you select the Medicaid Work Requirements category or verification checklist item or another

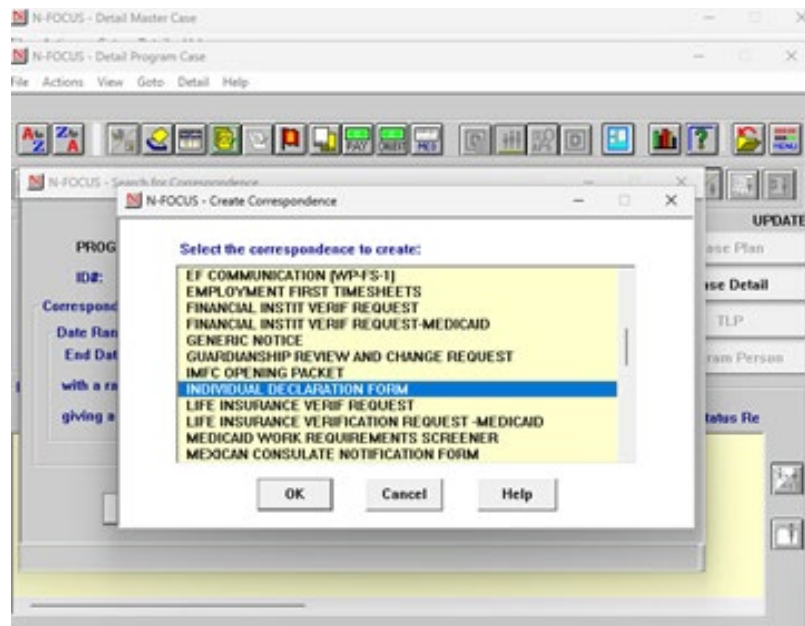
regular category or verification checklist item, click on the Add/Next selection and get the error message, click OK to the error message, cancel out of the verification request and start over to create a new one.

The due date on the window in GEN will default to 35 days from the correspondence creation date.

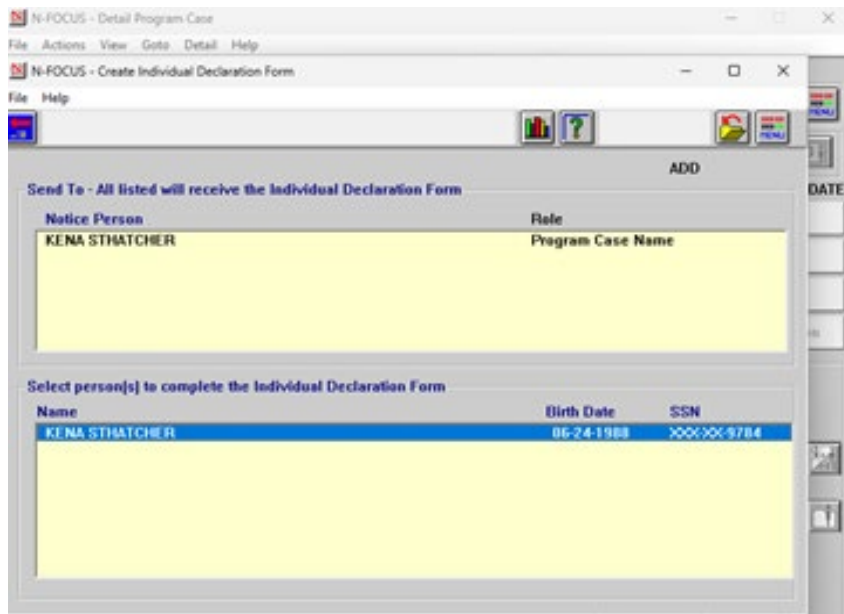


## OEA – Medicaid Work Requirements Individual Declaration Form (New)

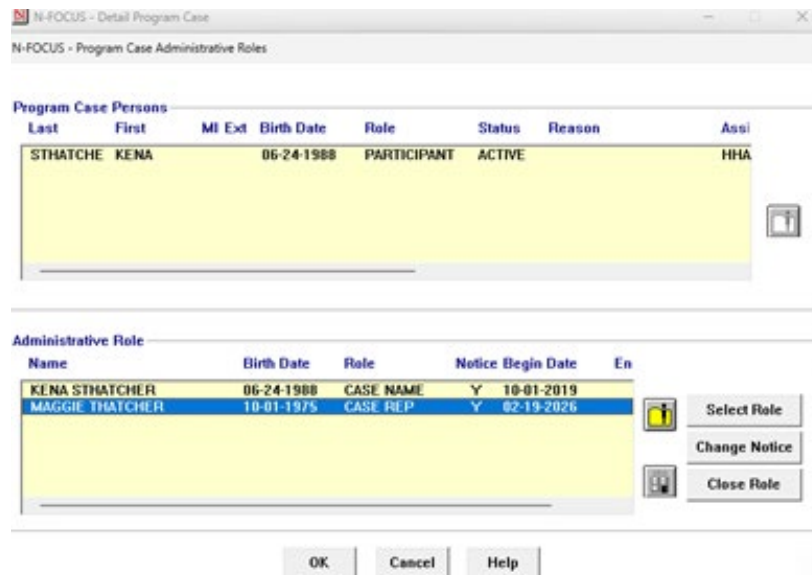
A new correspondence type of Individual Declaration Form (IDF) is now available. The correspondence is to be created for Medicaid participants eligible for the MAGI Expansion category to provide information demonstrating compliance with certain Medicaid Work Requirements. This correspondence will only be available through the Detail Program Case window and not available on the Detail Master Case level.

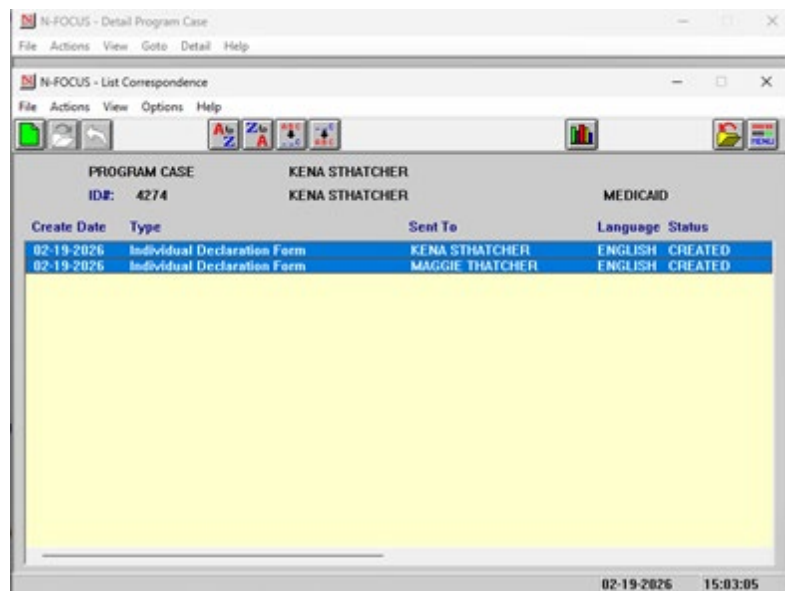
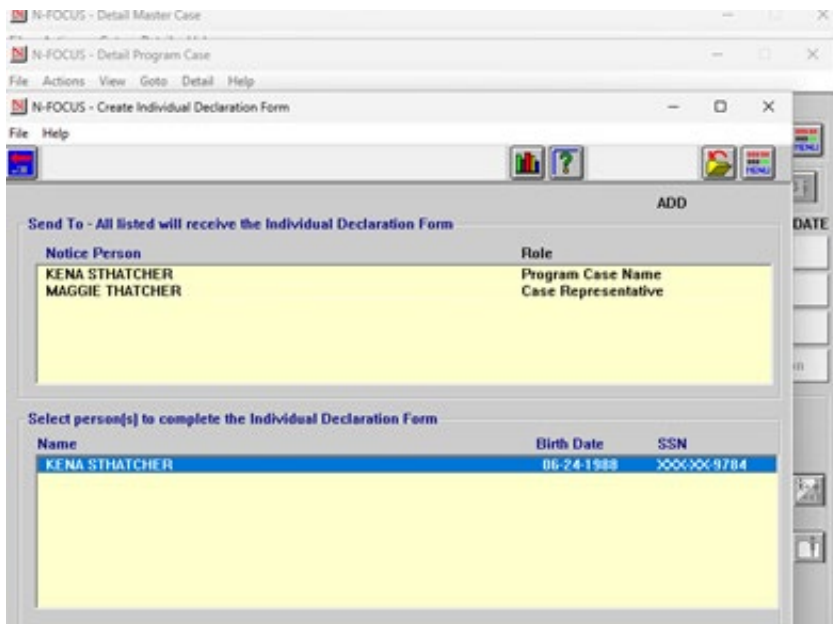


Household members that are eligible to receive this form (individuals between the ages of 19-65, active or pending status with a participant role) will be listed in the 'Select person(s) to complete the Individual Declaration Form' box.



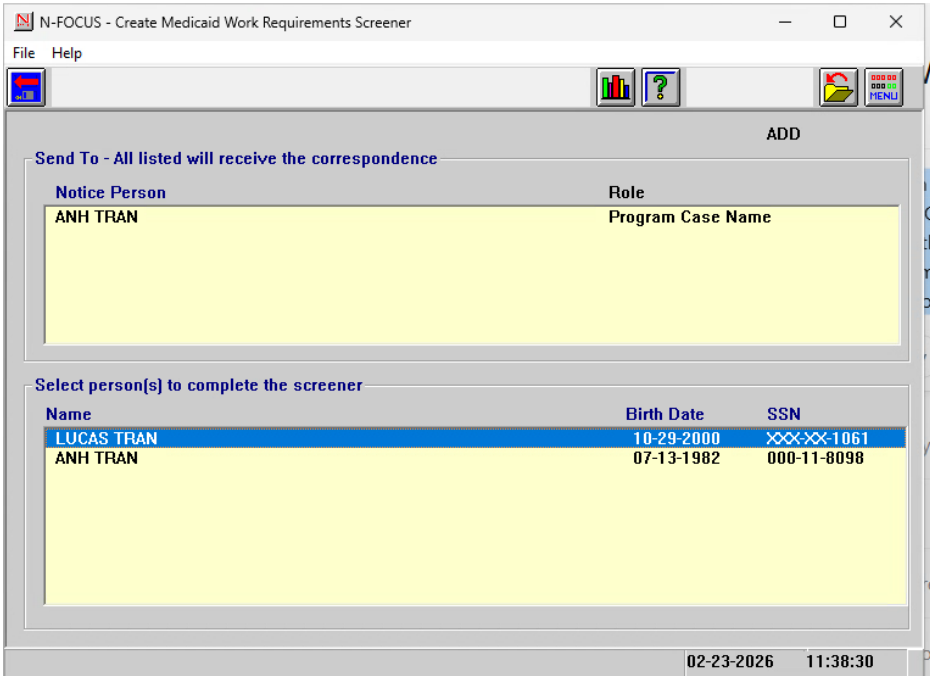
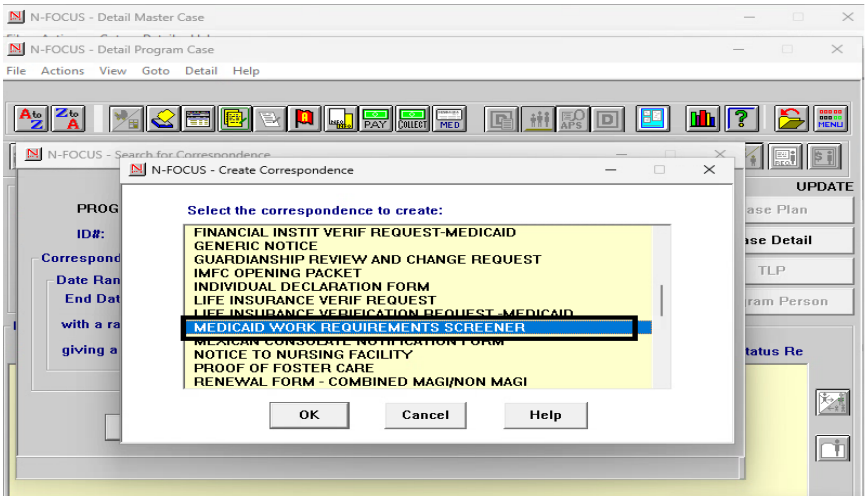
Workers can select a single person or multiple people to create the IDF. Each person that is selected will have their own separate correspondence created along with any other role that has a 'Y' indicator to receive a notice, e.g. Case Representative. Workers will be able to 'Print now' or 'Print Later' as they do with other correspondence.





## OEA – Medicaid Work Requirements Screener (New)

A new correspondence type 'Medicaid Work Requirements Screener' has been added to NFOCUS. This correspondence can be created from the Detail Program Case screen for an active or pending Medicaid program participant ages 19 to 65. Users may select one or multiple individuals in the 'Select person(s) to complete the screener' section. The individual(s) selected will be displayed in the household member section of the generated screener. All the people in the 'Send To Box' will be receiving the correspondence. Only the select person(s) will appear on the form.



## Medicaid Work Requirements Screener

### Medicaid Work Requirements

(Household Members Ages 19-64)

The following optional questions are being asked of household members 19 through 64 years of age who may be eligible for Nebraska Medicaid through Medicaid expansion. Household members eligible for Nebraska Medicaid through Medicaid expansion are required to demonstrate compliance with Medicaid work requirements to qualify under Medicaid expansion. Providing responses to these optional questions will assist DHHS in screening for compliance with work requirements under Medicaid expansion.

Qualifying Month(s):

For **new applicants**, or individuals being added to a household, these optional questions should be answered, and will be assessed, based on the month before the month in which the individual applied (last month).

For **existing members**, these optional questions should be answered, and will be assessed, based on the time between now and your initial determination or last Medicaid renewal.

### Household Members

Full Name	Date of Birth
LUCAS TRAN	10/29/2000

1. Did anyone in the household volunteer in their community in a qualifying month?

Yes  No Who? (list all that apply):

## Medicaid Work Requirements Narrative

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### OEA – Medicaid Work Requirements Narrative Subheading (New)

A new Subheading (Medicaid Work Requirements) was added. It has a begin date of 5/1/2026 and is only associated with Medicaid Program. Additionally, it is available for the following Subjects:

- Approval
- Change Management
- Review/Recert/Renewal

N-FOCUS - Detail Narrative

File Actions Edit Goto Help

Master Case Name MARINA LORIC MC # 10360 ADD

Recorded 05-01-2026 Recorded Time Recorded By DSSZ790 Updated By DSSZ790

Subject APPROVAL Program

Subheading Deselect All Third Party Liability Medicare - Buy In Services Other Medicaid Work Requirement MEDICAID

Document Medicaid Work Requirement qualifying activities or exemptions for all household members eligible under Medicaid Expansion. If the individual is compliant, identify the qualifying month.

Narrative Detail

WRP: Testing new Helpful Hint for Medicaid Work Requirement.

Approval

Save and Next Prior Narrative... Spell Check Maximize Narrative Text Previous Next

This information may contain Federal Tax Information(FTI)

N-FOCUS - Test Date 02-19- 05-01-2026 12:21

N-FOCUS - Helpful Hint

**Subheading Helpful Hint Text**

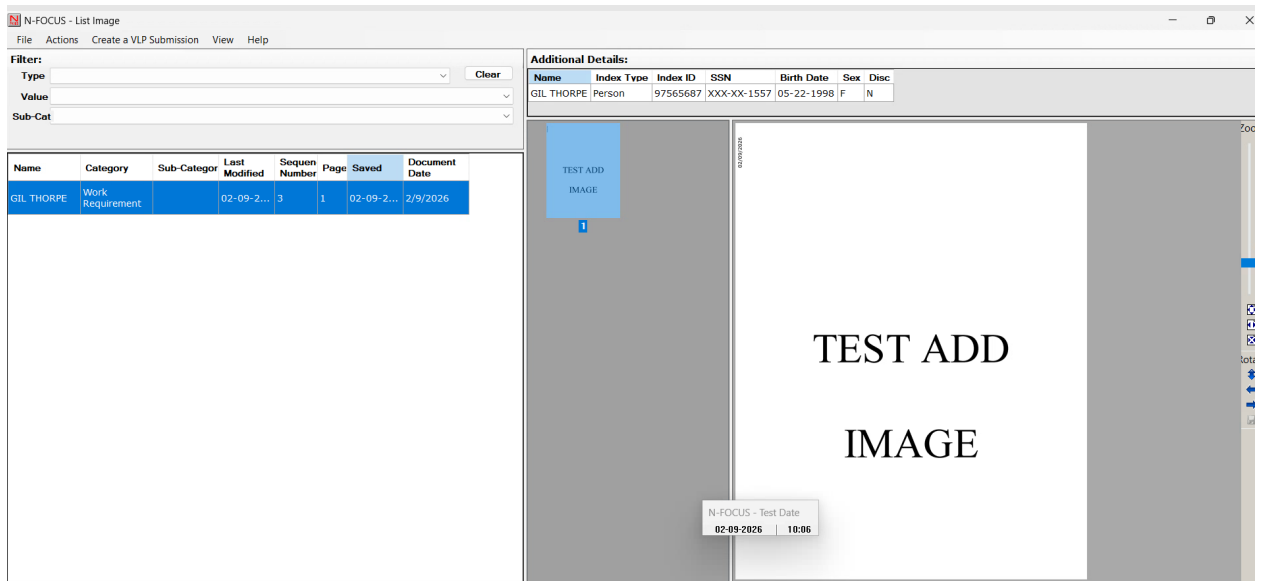
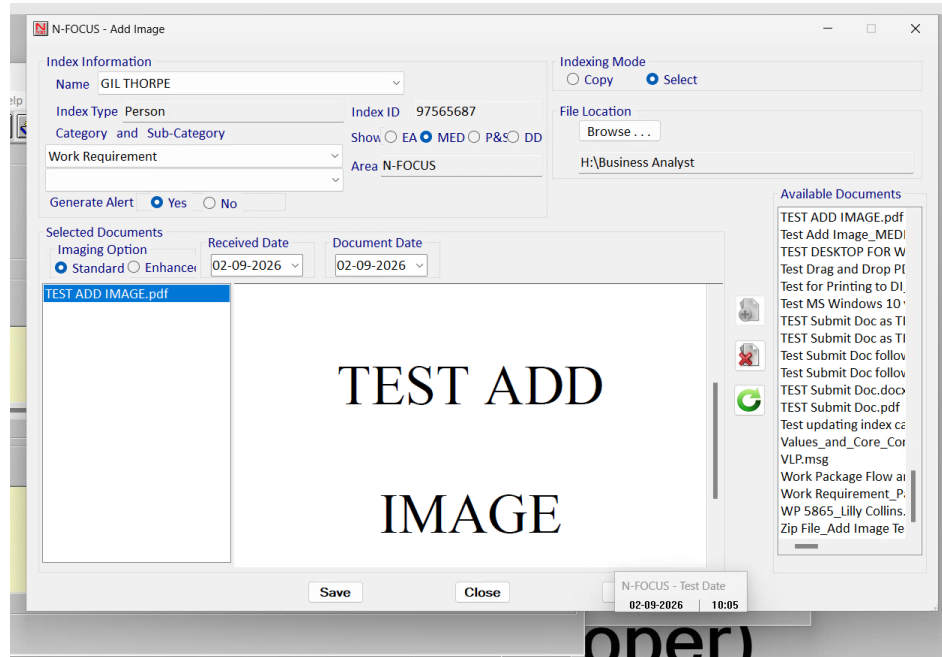
Document Medicaid Work Requirement qualifying activities or exemptions for all household members eligible under Medicaid Expansion. If the individual is compliant, identify the qualifying month.

ABC OK Cancel

# Medicaid Work Requirements Document Imaging

## OEA – Work Requirement Document Imaging Category and Alert for Medicaid (Update)

The 'Work Requirement' document imaging category is now available for Medicaid use. Existing MLTC Alert #470 – Mail Received will display when documents are scanned to this category.



## Medicaid Work Requirements Interfaces

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### OEA – Medicaid Work Requirements Outreach Text Messages (Update)

Starting in December 2025 the Medicaid Work Requirement Outreach text message campaign (MC006) began and will run through May 2026. Text messages are being issued (to notify the Program Case role that has Text Messaging enabled) about the new Medicaid Work Requirements. Case narratives for the text messages are begin entered in N-FOCUS. Following are the English and Spanish text messages:

#### **English Text**

"NE DHHS Eligibility Programs: We just sent you a Medicaid notice about new Work Requirements. Please go to <https://dhhs.ne.gov/WorkRequirements> to learn more about the new Work Requirements and for a copy of the Medicaid notice "

#### **Spanish Text**

"Programas de Elegibilidad de NE DHHS: Le acabamos de enviar un aviso de Medicaid sobre los nuevos requisitos laborales. Por favor, vaya a <https://dhhs.ne.gov/WorkRequirements> para obtener más información sobre los nuevos requisitos laborales y para ver una copia del aviso de Medicaid."

## Medicaid Work Requirements Expert System

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### OEA – Medicaid Work Requirement Task (New)

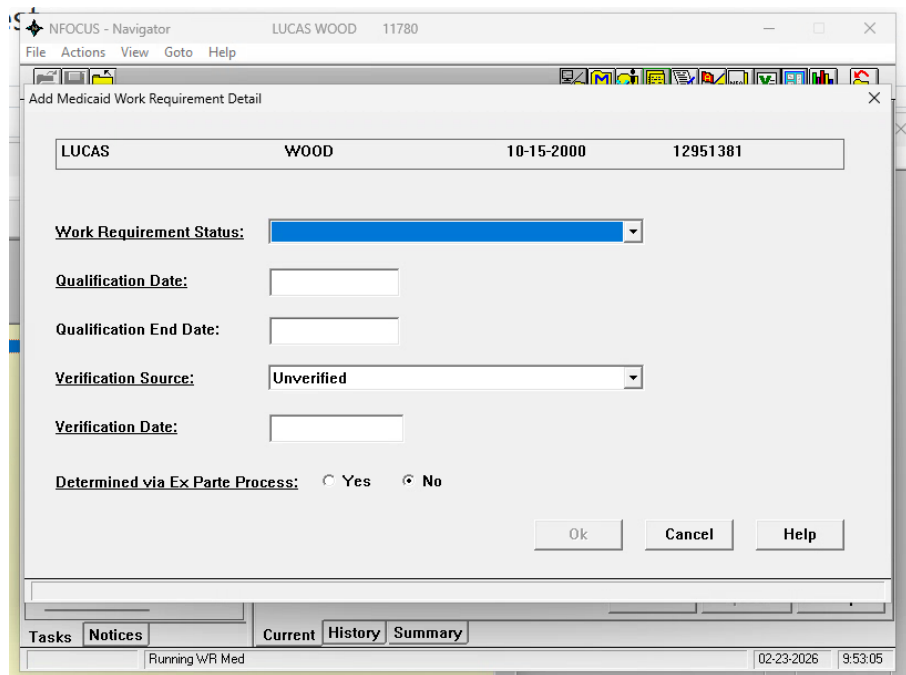
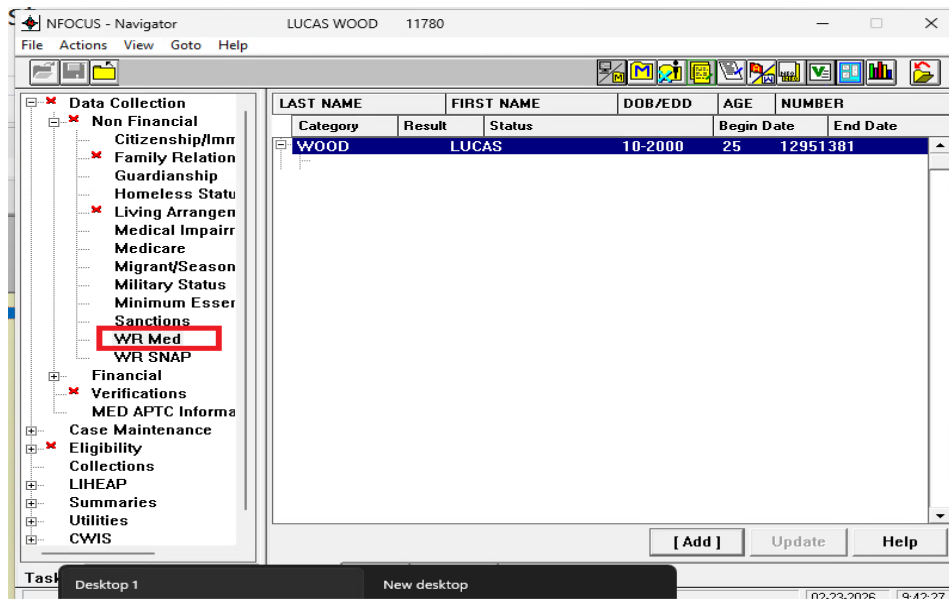
A new Non-Financial 'WR Med' task has been created, and the existing Work Requirement task has been renamed to 'WR SNAP.' Data entry for Medicaid Work Requirements must be completed within the Expert System and cannot be entered through GEN screens.

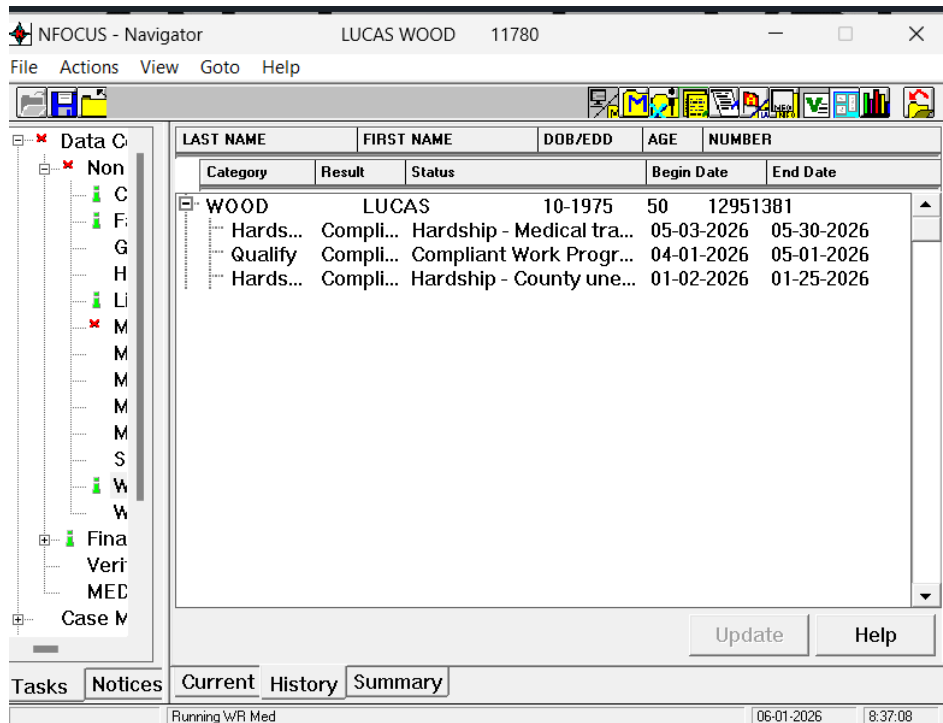
The main list window displays all household members who are pending or active in a Medicaid Program between ages 19 and 65 and have a role code of Participant (PA). The window shows the participant's name, ARP ID, date of birth, and whether they are pending or active. The Current tab displays any record effective for the current date as well as future-dated records and includes columns for Work Requirement Status, Result, Begin Date, and End Date (if applicable). The grid will be blank if no records exist. Only one active Medicaid Work Requirement Status may exist per individual at a time. Overlapping date ranges are not allowed, although gaps between periods are permitted.

Users may add or update Medicaid Work Requirement records at the individual level using the Add and Update buttons. When creating a new record, all fields will be blank. NFOCUS captures Work Requirement Status, Qualification Date (Begin Date), Qualification End Date, Verification Source, Verification Date, and whether the determination was made via the Ex Parte process. Work Requirement Status, Qualification Date, Verification Source, and Verification Date are required fields. The Qualification End Date must be greater than or equal to the Qualification

Date, and Verification Date cannot be a future date. The system defaults the Ex Parte indicator to 'No.' Records cannot be saved unless all required fields are completed and date validations are satisfied.

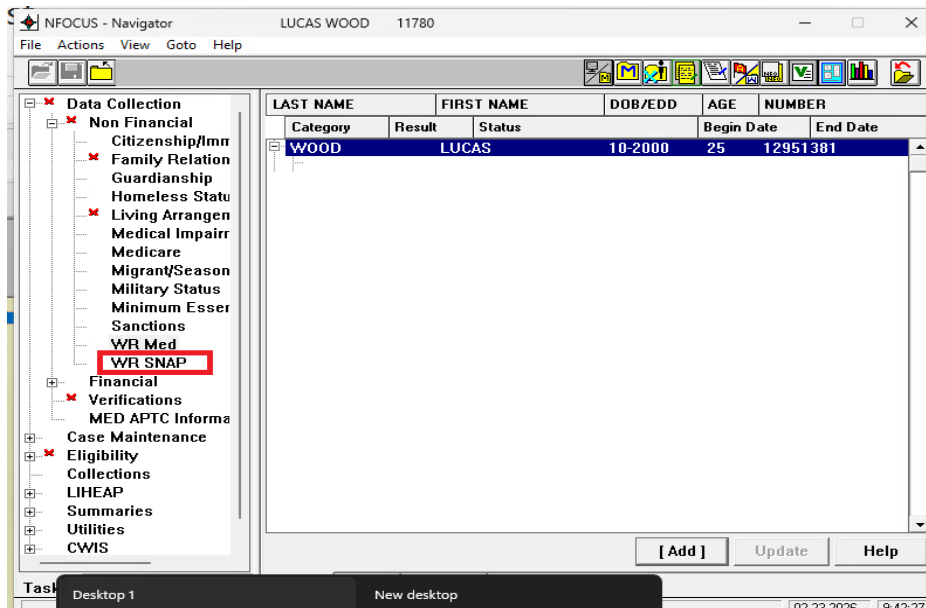
Entry of WR MED information is not required to run a Medicaid budget.





Only one WR MED record can be active at a time. WR MED records **cannot overlap** in effective dates. There may be a **gap (lapse)** between record periods.

The existing Work Requirement tab has been renamed WR SNAP.



## OEA – Medicaid Work Requirements Closure Reasons (New)

Two new closure reasons have been added:

- Failure to provide Med Work Requirement compliance
- Failure to meet Medicaid Work Requirements

These are available in both Case Maintenance Case Actions [Close] and Participant Actions [Close] in the Closure Reason drop-down list box.

**Close Case Actions**

**Program Case:**  

BLAKE	BELLAMY	MEDICAID	66068595
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**Work Requirement Reason:**

**Responsible Person:**

**Date of Death:**

Change All case Participant(s) Household Status to 'Out'?  
 Yes  No

Take action for this month only?  
 Yes  No

**Closure Reason:**  
  
 Failed to Furnish Citizenship Documentation  
 Failed to Provide Information  
**Failure to meet Medicaid Work Requirements**  
**Failure to provide Med Work Requirement compliance**

**Delay Reason:**

Next OK Cancel Help

**Close Participant Actions**

**Participant:**  

BLAKE	BELLAMY	07-04-1980	30986158	In HH
BLAKE	OCTAVIA	03-01-1985	51732012	In HH

**Closure Reason:**  
  
 Failed to Furnish Citizenship Documentation  
 Failed to Provide Information  
**Failure to meet Medicaid Work Requirements**  
**Failure to provide Med Work Requirement compliance**

**Work Requirement Reason:**

**Date of Death:**

Change selected Participant(s) Household Status to 'Out'?  
 Yes  No

**Program Case:**  

BLAKE	BELLAMY	MEDICAID	66068595
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**Program Case Name:**

Take action for this month only?  
 Yes  No

Next OK Cancel Help

## OEA –Notice of Eligibility Notice of Action New Close/Denial Reasons (New)

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When a Case or Participant is Closed for either not providing verification of compliance or not meeting Medicaid Work Requirements, the new reason will be listed on the Notice of Eligibility Notice of Action in either English or Spanish. **Effective May 1<sup>st</sup>, Medicaid Work Requirements denials/closures are manual participant or case actions, they will not happen automatically as a result of running a budget. This functionality will come in a future release.**

### NOTICE OF ACTION

#### Medicaid

##### Close

Medical coverage for the following individual(s) has ended effective 04-01-2026.

Individual	Status	Reason
CLARK GRIFFIN	Ineligible	Failure to provide Med Work Requirement compliance
MADDIE GRIFFIN	Ineligible	Failure to provide Med Work Requirement compliance

If your circumstances change you may reapply for assistance at anytime.

#### Comments

Close Active Case FTP

Additionally, you will note (above) that the wording previously displayed (below) for other Closure Reasons have been removed for the 5/1/2026 Work Requirements rollout. These may be included in a future release. The policy team will provide predefined language that will be copy/pasted in the Comments of the Notice.

### NOTICE OF ACTION

#### Medicaid

##### Denial

The following individual(s) are denied for medical coverage effective 01-01-2026.

Individual	Status	Reason
AARON SMITH	Ineligible	Income Exceeds Standards

##### INFMEDIF1000 tag

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.

##### INFMEDIF1300 tag

You might still be able to get health coverage-and financial assistance to help pay for it-through the Federal Marketplace. We sent your information to them. The Federal Marketplace will send you a letter. For more information you can go to HealthCare.gov or contact the Federal Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).

##### RFR tag

The manual references which support this action are- 477 NAC 16-001.01 to 16-001.14 477 NAC 29-002.01, which can be found online at: ACCESSNebraska.ne.gov

Comments (copy/paste) will be available in both Expert System or in Gen before printing.

## OEA – Medicaid Work Requirements Verification of Compliance Notice Request (New)

Updates have been made to the current Verification Request functionality in GEN and Expert to allow DHHS to notify an individual about their 30-day compliance time frame. A new Medicaid Work Requirements Verification of Compliance Notice will be created through the existing Verification Request window. A new category called MWR Verification of Compliance Notice and a new checklist item of Medicaid Work Requirements Compliance were added to the selection list. See the Gen/Mainframe Functionality in the General Interest and Mainframe section of this document.

The screenshot shows the 'Add Verification Request' window. It contains several sections:

- Division:** Radio buttons for 'EA' and 'MLTC' (selected).
- Person:** A table with columns: First Name, Last Name, Birth Date, Person Nbr.

First Name	Last Name	Birth Date	Person Nbr
JEREMIAH	LEERY	01-25-2015	64705657
JOEY	POTTER	12-18-1978	60586710
DAWSON	LEERY	03-08-1977	40851814
- Program:** A table with columns: Program, Case Name, Status, Program ID.

Program	Case Name	Status	Program ID
MEDICAID	DAWSON LEERY	Active	90749561
- Category:** A dropdown menu showing 'MWR Verification of Compliance Noti'.
- Verification Type:** A list box with a checked item: 'Medicaid Work Requirements Compliance (see comments below for details)'. There is a 'Select' button to the left.
- Comments:** A text area with a 'Spell Check' button to its right.
- Buttons:** 'Add/Next Selector', 'OK', and 'Cancel' at the bottom.

The new Medicaid Work Requirement category and checklist selection items will not be allowed to be paired with any of the regular Verification Request categories and checklist items in GEN and Expert Verification Request windows. They will have their own separate verification request correspondence specific to Medicaid Work Requirements. If you try to mix them with the other categories or verification checklist items, you will get an error message.

If you select the Medicaid Work Requirements category or verification checklist item and another regular category or verification checklist item and have not clicked on the Add/Next selection, you can OK the error message, update the selections and continue with the creation of the verification request. If you select the Medicaid Work Requirements category or verification checklist item or another regular category or verification checklist item, click on the Add/Next selection and get the error message, click OK to the error message, cancel out of the verification request and start over to create a new one.

The Expert System window will still have the current due date of 15 days. Workers will need to adjust the due date to reflect the 35-day requirement. **Workers should use the Gen version that has the 35-day due date default.**

## Interfaces

### All Divisions – Department of Labor Unemployment Disqualified Reason (New)

The Department of Labor has added a new disqualification reason of 'USCIS Continued Week' that will now be displayed on the Integrated Unemployment interface window.

## Work Tasks

### OEA – Service Delivery Group Updates (Fix)

With the February interim release, an issue was introduced in which the Service Delivery Group (SDG) drop-down list was blank. This has been corrected to allow workers to re-assign an existing SDG to a different one on existing Work Tasks.

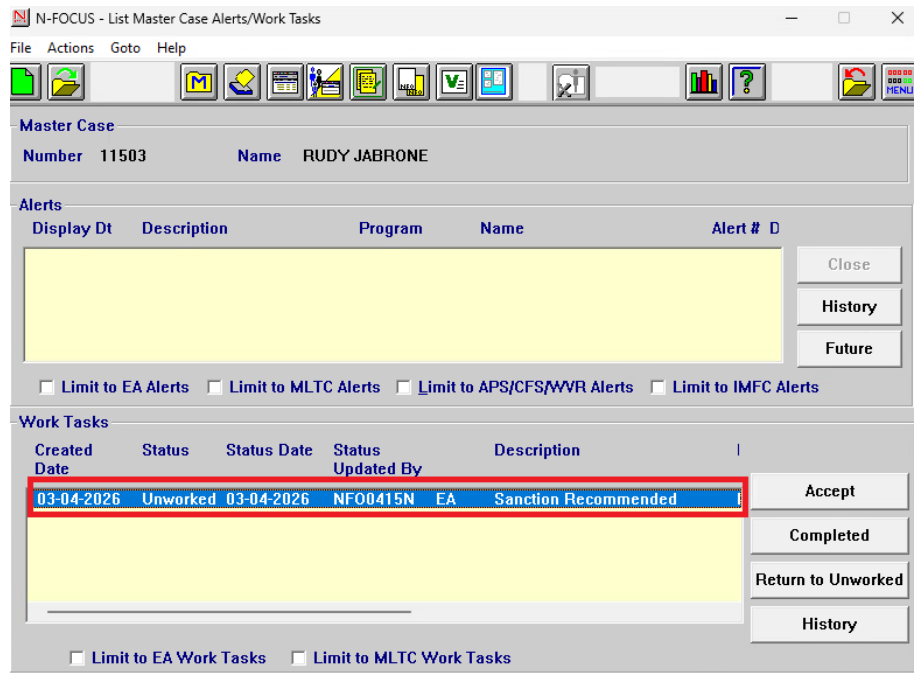
Click the Alerts/Work Tasks button in either Mainframe (GEN) or Expert System if the case is checked out.

Last	First	MI Ext	Birth Date	Household Status	Status Reason	Begin Date	Unborn's Mor
JABRONE	LOTTA		12-15-2020	In HH		03-01-2026	
JABRONE	RUDY		12-15-1960	In HH		09-01-2025	

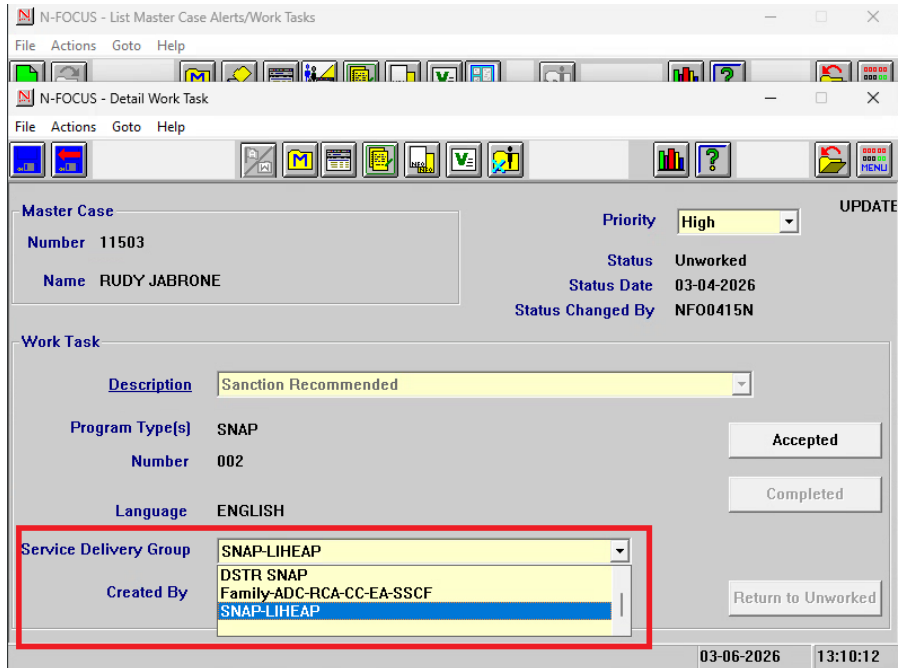
  

Program	Assistance	Case Name	St	Stat	Beg Dte	Mode	Program ID
SNAP		JABRONE RUDY	AC		02-01-2026	CHG MGMT	33649196
MEDICAID	NON-MAGI	JABRONE RUDY	AC		01-01-2026	ASSIGN	79706692

Double-click on the Work Task.



Click on the SDG drop-down and highlight the SDG you would like to re-assign the Work Task to.



## Expert System

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### OEA – Caretaker Indicator on Family Relationship Window (New)

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A new Caretaker field has been added to the Update Family Relationship screen within the Expert System.

To support accurate eligibility determination, workers must verify that any non-parental caretaker relationship is correctly identified and recorded. The Caretaker Indicator can be set on the Add/Update Family Relationship screen in Expert.

#### **Relationship Types Supported**

The Caretaker Indicator will display on the Relationship Listing within Expert when the relationship type is one of the following:

- Non-Relative
- Relative
- Sibling (Adopt)
- Sibling (Bio)
- Sibling (Step)

#### Indicator Display Logic

The Caretaker Indicator will display a value of “Y” in the CR column when:

- A relationship instance has been added, and
- The Caretaker field is set to one of the following values:
  - Caregiver for Disabled Person
  - Caretaker Relative
  - Court-Ordered Caretaker

If no caretaker relationship exists or the caretaker status is unknown, the field will remain blank.

The Caretaker field also includes the following values to reflect the direction of the relationship and to address situations where relatives may be listed in reverse order:

- Disabled Person cared for by
- Cared for by – Relative
- Cared for by - Court-ordered

The “Y” indicator for these values will be implemented in the next release.

### Additional Information

- The Caretaker Indicator will not display on the Family Relationship screen within the GEN screens.
- This enhancement does not impact any existing elements or screens that support guardianship or conservator relationships.
- The default value for the Caretaker field is Undetermined.
- When the Caretaker field is set to Undetermined or Non-Caretaker, a "Y" will not be displayed under the CR column.

The screenshot shows the 'Add Family Relationship' dialog box in the NFOCUS - Navigator application. The window title is 'NFOCUS - Navigator ANH TRAN 10198'. The dialog box has a menu bar with 'File', 'Actions', 'View', 'Goto', and 'Help'. Below the menu bar is a toolbar with various icons. The main area of the dialog box is divided into several sections:

- Person:** A table with columns for Name, Surname, and Birth Date. The data is as follows:

Person:		
TRAN	ANH	07-13-1982
TRAN	LUCAS	10-29-2000
TRAN	ALEXA	01-01-2009
TRAN	KEVIN	05-01-2012
- Relationship Type:** A list of relationship types: Divorced, Non-Relative, Parent (Adopt), Parent (Bio), Parent (Step), Relative, Sibling (Adopt), Sibling (Bio), Sibling (Step), and Widowed.
- Person(s):** A table with columns for Name, Surname, and Birth Date. The data is as follows:

Person(s):		
TRAN	KEVIN	05-01-2012
- Caretaker:** A dropdown menu with 'Undetermined' selected.
- Marital Status:** A list of marital statuses: Divorced, Married, Never Married/Annulled, and Widowed.
- Begin Date:** A text field containing '05-01-2012'.
- Verification Source:** A dropdown menu with 'Unverified' selected.

At the bottom of the dialog box are buttons for 'Next', 'OK', 'Cancel', and 'Help'. Below the dialog box, in the main application window, there is a 'CWIS' tab and buttons for 'Add', 'Update', and 'Help'.

NFOCUS - Navigator ANH TRAN 10198

File Actions View Goto Help

Update Family Relationship

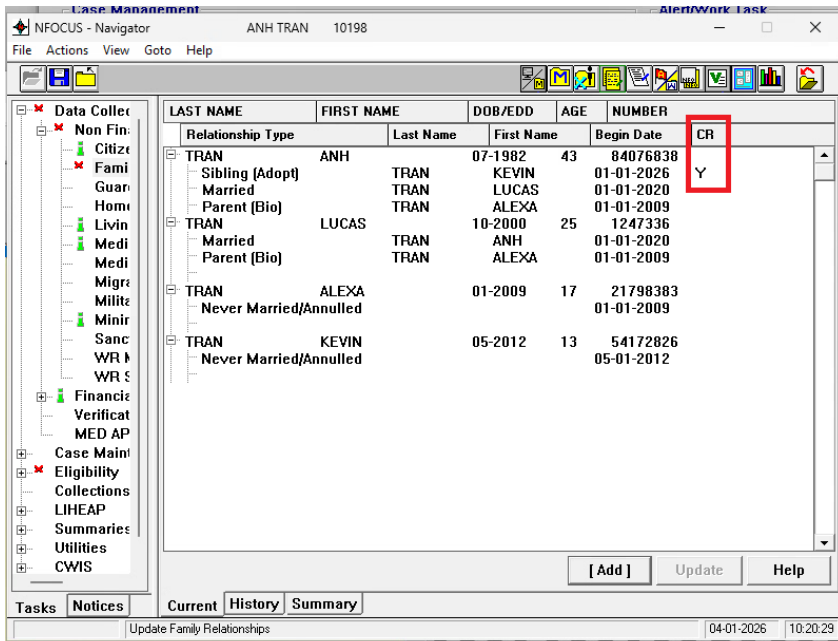
<b>Person:</b> TRAN ANH 07-13-1982	<b>Relationship Type:</b> Divorced Married Non-Relative Parent (Adopt) Parent (Bio) Parent (Step) Relative Sibling (Adopt) Sibling (Bio) Sibling (Step) Widowed	<b>Person(s):</b> TRAN KEVIN 05-01-2012
<b>Caretaker</b> Caretaker Relative	<b>Marital Status:</b> Divorced Married Never Married/Annulled Widowed	<b>Begin Date:</b> 01-01-2026 <b>Verification Source:</b> Birth Certificate

OK Cancel Help

CWIS Add Update Help

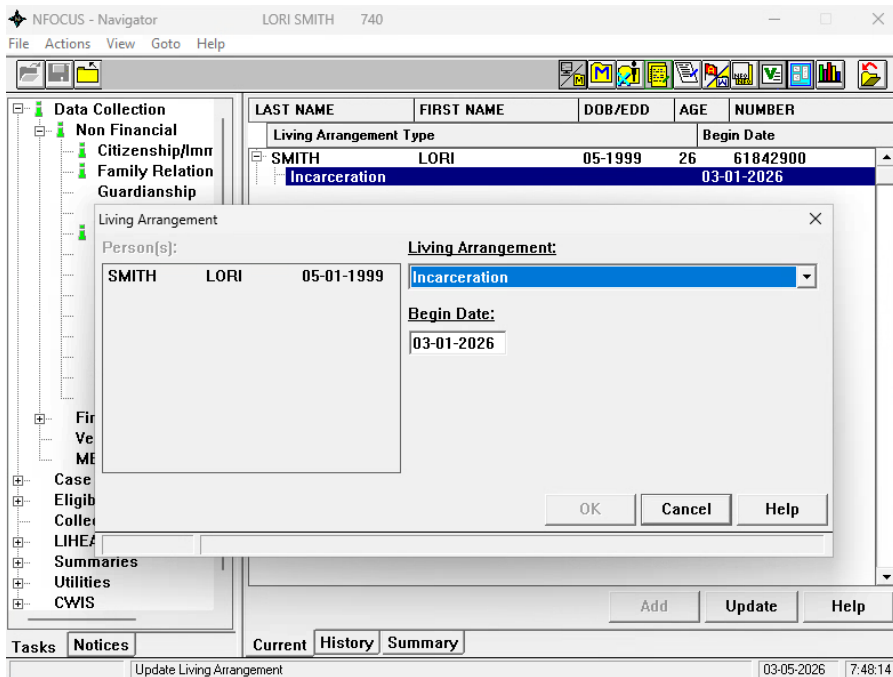
Tasks Notices Current History Summary

Update Family Relationships 04-01-2026 10:53:32



## OEA – Incarceration Living Arrangement (New)

A new living arrangement option of 'Incarceration' has been added. This living arrangement will be used for incarcerated individuals in Suspended Medicaid status. It should only be entered by the Suspended Medicaid team.



## OEA – Medicaid Minimum Essential Coverage Task (New)

A new Non- Financial 'Minimum Essential Coverage' task has been added. This window allows workers to record Minimum Essential Coverage (MEC) information for a selected household member, including coverage status, effective begin and end dates, and verification source.

**Person:**

TRAN	ANH	07-13-1982
TRAN	LUCAS	10-29-2000
TRAN	ALEXA	01-01-2009
TRAN	KEVIN	05-01-2012

**Minimum Essential Coverage:** [Dropdown menu]

**Effective Begin Date:** [Text field]

**Effective End Date:** [Text field]

**Verification Source:** [Dropdown menu: Unverified]

Buttons: Next, OK, Cancel, Help

**Person:**

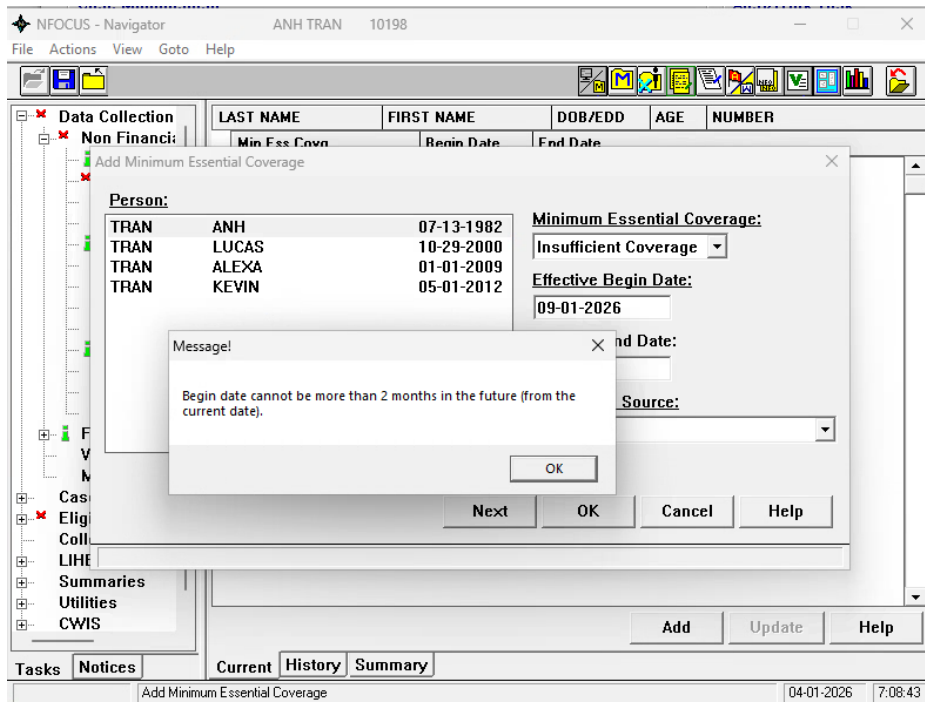
TRAN	ANH	07-13-1982
TRAN	LUCAS	10-29-2000
TRAN	ALEXA	01-01-2009
TRAN	KEVIN	05-01-2012

**Minimum Essential Coverage:** [Dropdown menu: Full Coverage, Insufficient Coverage, No Coverage]

**Effective End Date:** [Text field]

**Verification Source:** [Dropdown menu: Unverified]

Buttons: Next, OK, Cancel, Help



There may be a gap in MEC coverage, but overlapping coverage is not permitted.

