
N-FOCUS Major Release

MLTC

November 8, 2015

A Major Release of the N-FOCUS system is being implemented November 8, 2015. 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 N-FOCUS users should read this section.

Electronic Application: N-FOCUS users responsible for case activity received through the Web based Electronic Application should read this section.

Developmental Disabilities Programs: N-FOCUS 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 N-FOCUS 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 N-FOCUS 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 will be documented in both the primary location that describes the entire process and in the Alerts, Work Tasks and Correspondence sections.

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General Interest and Mainframe

Interim Social Security Number (New)

Effective with the 11/8/15 Major Release, workers will be able to assign Interim Social Security numbers to clients who do not provide a valid Social Security number.

This can be done either when a new Master Case is registered, and a person is added, or when a new person is added to an existing Master Case, using the “Add Person” window.

N-FOCUS - Add Person

Name

First ERIC

Middle

Last BLAIR

Ext [NONE]

Sex MALE

SSN Interim SSN

Birth Date 06-20-1999

Ethnicity [NONE]

Race (Select ALL that apply)

American Indian or Alaska Native

Asian

Black or African American

Declined

Native Hawaiian or Other Pacific Islander

Unknown

White

Perform Clearance Cancel Help

Clicking on the “Perform Clearance” push-button will bring up the following message window explaining the conditions for assigning an interim SSN.

N-FOCUS - Assign Interim Social Security Number

An interim SSN may be generated in the following situations:

- * Client does not have a Social Security Number (ineligible aliens, etc.)
- * Client does not know their Social Security Number
- * An infant, under the age of one year, for whom a Social Security Number has not been assigned.

Do you still want to assign an interim SSN?

Yes No

By clicking Yes, the SSN field will automatically populate with the next available Interim Social Security number.

The “Interim SSN” push-button, located next to the “SSN” field, will automatically populate the field with the next available Interim Social Security number.

The screenshot shows the 'N-FOCUS - Add Person' window. The 'Name' section includes 'First' (ERIC), 'Middle' (empty), 'Last' (BLAIR), and 'Ext' ([NONE]). The 'Sex' is set to MALE. The 'SSN' field contains 000-11-0011 and is highlighted with a red box. To its right is an 'Interim SSN' button. The 'Birth Date' is 06-20-1999. The 'Ethnicity' is [NONE]. The 'Race' list box is open, showing options: American Indian or Alaska Native, Asian, Black or African American, Declined, Native Hawaiian or Other Pacific Islander, Unknown (selected), and White. At the bottom are 'Perform Clearance', 'Cancel', and 'Help' buttons.

An Interim SSN may also be assigned to an existing client in the “Person Detail” window using the “Actions” drop-down menu.

Clicking on “Assign Interim SSN” from the Person Detail window will also bring up the message window explaining the conditions for assigning an interim SSN.

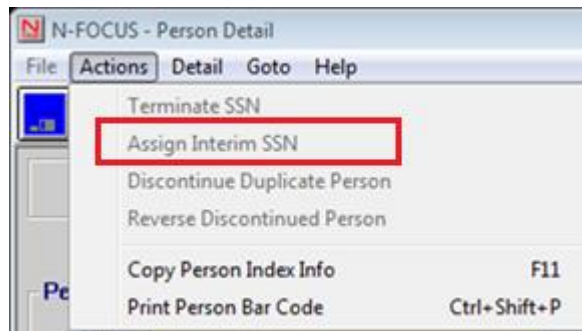
The screenshot shows the 'N-FOCUS - Person Detail' window with the 'Actions' menu open. The menu items are: Terminate SSN, Assign Interim SSN (highlighted with a red box), Discontinue Duplicate Person, Reverse Discontinued Person, Copy Person Index Info (F11), and Print Person Bar Code (Ctrl+Shift+P).

Note: An Interim SSN cannot be assigned to a client whose Social Security number has been verified in “Person Verification”. The “Assign Interim SSN” menu option will be disabled in this situation. (See screen prints on the following page)

N-FOCUS - Person Verification Data

KELLBLUE S BALDNAME

SSN	Verification Source	Date	Hub Verification Source	Date
310-92-9091	SVES Interface	08-29-2015	HUB SSA Interface	07-24-2015
Citizenship		07-25-2015	HUB SSA Interface	07-24-2015
Identity		07-25-2015	HUB SSA Interface	07-24-2015
Birth Date 11-04-1982	Unverified			
Deceased Date				



The correspondence that will be sent to the client, to inform them of the temporary SSN, is shown on the next page.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PO BOX 85801
LINCOLN NE 68501-5801

Case Number - 00642876
Case Name - KELLBLUE BALDNAME
CONTACT - ACCESSNebraska
Fax Number - (402)471-9209
Date of Notice - 11-09-2015
Mail Date - 11-10-2015

GUY NEWMAN
SYSTEM TEST FOURTH FLOOR N-FOCUS
LINCOLN NE 68509-5026

An Interim Social Security Number has been assigned to the following individual: GUY NEWMAN.

The Interim Social Security number is assigned only for the purpose of identification of applicants who lack a valid Social Security number.

Please contact DHHS at (800)383-4278 in order to obtain this information for your records. You may also contact the Lincoln office at (402)323-3900, or the Omaha office at (402)595-1258.

If your case is assigned, you may contact the assigned worker at the number in the CONTACT section above.

If this person already has a valid Social Security number, please contact DHHS so that your case information may be updated.

The last 4 digits of the Social Security number are required for establishing an ACCESSNebraska account, as well as for activating an Electronic Balance Transfer (EBT card), or a ReliaCard.

Economic Assistance
Toll Free: (800)383-4278
Lincoln: (402)323-3900
Omaha: (402)595-1258

Go online:
ACCESSNebraska.ne.gov

Nebraska Medicaid Eligibility
Toll Free: (855)632-7633
Lincoln: (402)473-7000
Omaha: (402)595-1178

Standardized Narrative (New)

Effective 10/19/2015 a new Sub-Heading, **DOMESTIC VIOLENCE**, has been added to the Special Circumstances and Change Management Categories.

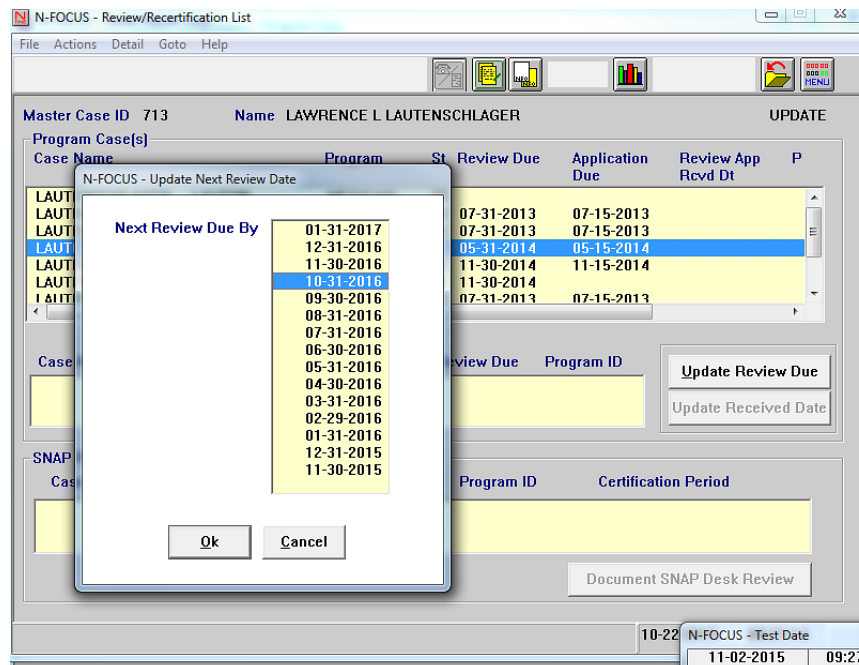
- It indicates to workers “DO NOT GIVE OUT ANY INFORMATION OR MAKE UPDATES ON THIS CASE. Notify the assigned worker of any changes.”

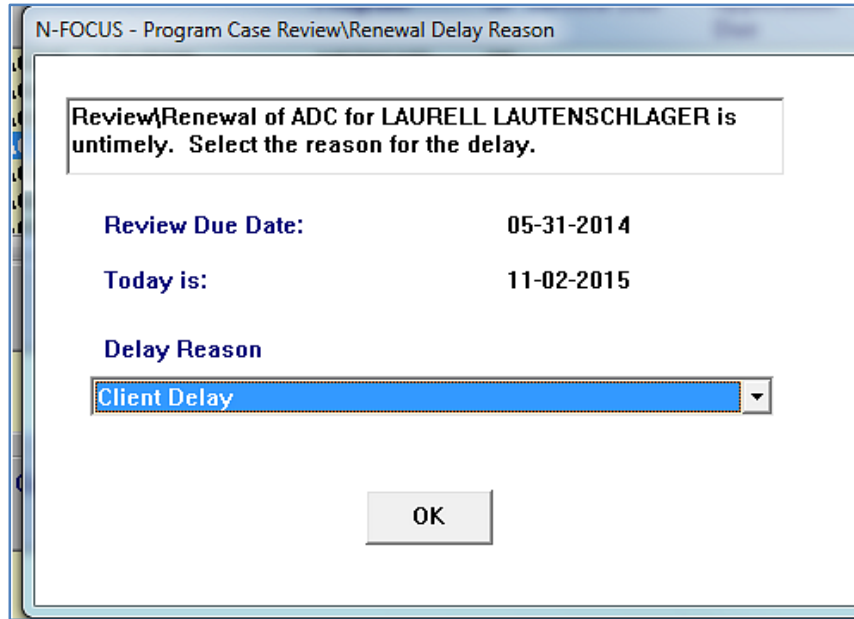
Effective 11/09/15 the subheading **Sanction/Disqual/FTC** has a new sanction type of **ABAWD** in the sanction type list.

Review Tracking Mainframe and Expert System (Change)

Legislation requires that we track timeliness on Review/Renewal processing for AABD PMT, ADC, CC and Medicaid program cases. Effective with this release, when the worker updates the Next Review Date on any date later than the current Review Due Date a pop-up window will ask that the Delay reason the Review/Renewal be identified.

This will take place in all 3 Review/Renewal update locations, in the Mainframe in Review Tracking and in the Expert System in Budget Authorization and in the Case Maintenance task of Review/Recertification.





Note: Delay reasons include:

- Client Delay
- Agency Delay
- Third Party Delay

During Budget Authorization, Reopen Case/New Application Not Required is also included in the list.

List Organization Window (Change)

The List Organization window now has two columns, showing if the ORG is a Medicaid Provider or an Energy Provider.

EIN/SSN	Dup	Organization	Medicaid Provider	Energy Provider
9134627		A-1 APPLIANCE	N	Y
7284151		ADAMS COUNTY SHERIFF'S OFFICE	N	Y
45441	476006068	PERM ALBION WATER DEPARTMENT	N	Y
5031657	470175460	PERM ALL POINTS COOPERATIVE	N	Y
4121654	476006082	AUBURN BOARD OF PUBLIC WORKS	N	Y

MED Only Organization and Investigations (Fix)

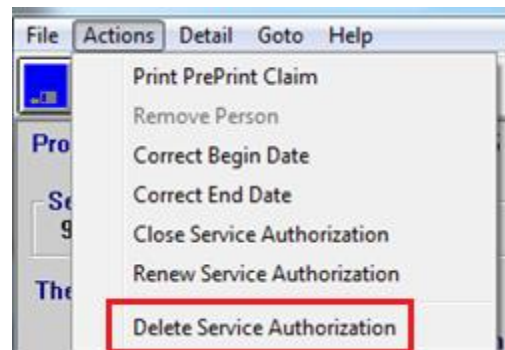
Workers have been unable to Tie Intakes and to view other Icons related to Organization Investigations to Organizations when the Organization is designated as "MEDICAID ONLY". This has been fixed; workers will now be able to access ORG Investigation, Intake, ORG Complaint, Alerts, Questions and Home Details.

Deleting Service Authorizations Created in Error (New)

When a Service Authorization to a Provider or Contractor is created in error, it can be deleted if:

- It is deleted the same day it is created and
- There are no claims associated with the Service Authorization.

N-FOCUS will delete the correspondence to the client and provider when the Service Authorization is deleted. The Service Authorization will not display in the List Correspondence window after being deleted.



Note: The Service Authorization can be deleted even if the Service Authorization notices have been printed by selecting the Print Now option. If the notices are printed and then the Service Authorization is deleted, the worker must be sure they are NOT mailed.

If **Print Later** was selected, the Correspondence will be deleted and nothing will be mailed to the client.

Person Search (Change)

The Search by Account button located on the person Search window is used to access the Search Person(s) by LIHEAP Account Number window.

A rectangular button with a thin border and a light gray background. The text 'Search by Account' is centered on the button in a bold, black, sans-serif font.

Search Office Position (Change)

With this release, when a search is made for an Office Position, only active position numbers or vacant position numbers that are assigned to an active Program Case or have no Program Cases assigned to the position will display.

To filter the search criteria, the following options have been added:

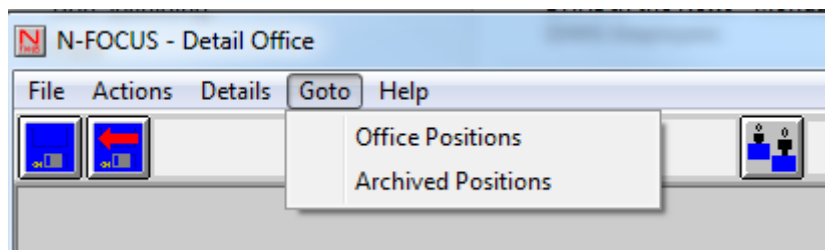
- Include Inactive Positions
- Include Archived Positions
- Show Archived Positions Only

An Archived Positions will have Closed or Denied program cases assigned to the position. This will assist users who are searching for position numbers without any Closed or Denied program Cases assigned to the position number.

Archived Office Positions has also been added to Goto, on the Detail Office window.

Detail Office Window (Change)

An Office's Archived positions can viewed from the Detail Office window by selecting menu option GoTo >Archived Positions.



Reporting of Minimum Essential Coverage (New)

In January 2016 the State of Nebraska will be issuing 1095-B tax forms to all of those individuals who were provided credible coverage via State of Nebraska Medicaid. The 1095-B is a required tax form and it will be essential to clients to receive this form. As a result of this it is imperative clients addresses are up to date in the N-FOCUS system. More notes will be provided to the field prior to the form release date.

The form will look something similar to this:

Form 1095-B		Health Coverage		<input type="checkbox"/> VOID		560115 OMB No. 1545-2252										
Department of the Treasury Internal Revenue Service		▶ Information about Form 1095-B and its separate instructions is at www.irs.gov/form1095b .		<input type="checkbox"/> CORRECTED		2015										
Part I Responsible Individual																
1 Name of responsible individual		2 Social security number (SSN)		3 Date of birth (if SSN is not available)												
4 Street address (including apartment no.)		5 City or town		6 State or province		7 Country and ZIP or foreign postal code										
8 Enter letter identifying Origin of the Policy (see instructions for codes): ▶ <input type="checkbox"/>		9 Small Business Health Options Program (SHOP) Marketplace Identifier, if applicable														
Part II Employer Sponsored Coverage (see instructions)																
10 Employer name		11 Employer identification number (EIN)														
12 Street address (including room or suite no.)		13 City or town		14 State or province		15 Country and ZIP or foreign postal code										
Part III Issuer or Other Coverage Provider (see instructions)																
16 Name		17 Employer identification number (EIN)		18 Contact telephone number												
19 Street address (including room or suite no.)		20 City or town		21 State or province		22 Country and ZIP or foreign postal code										
Part IV Covered Individuals (Enter the information for each covered individual(s).)																
(a) Name of covered individual(s)	(b) SSN	(c) DOB (if SSN is not available)	(d) Covered all 12 months	(e) Months of coverage												
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Interface

MLTC – Federally Facilitated Market Place Transfers (Change)

The Federal Marketplace is the US Healthcare exchange, operated by the Federal Government, where people in FFM states obtain health care coverage. The Marketplace began handling healthcare insurance and offering the Advanced Premium Tax Credit (APTC) on October 1, 2013. People can apply for healthcare and tax credit assistance; select a policy; change to a different policy; report a change in circumstance. For some states, including Nebraska, the FFM assesses applications to see if the person could be eligible for Medicaid. If the person is assessed as potentially eligible for Medicaid, an Account Transfer of the application will occur to Nebraska. If an existing Medicaid client reports a change in circumstance to the Marketplace, an Account Transfer of that information will also occur to Nebraska. In both of these situations, the Account Transfer is processed and sent to the appropriate work queue.

N-FOCUS released new functionality on October 19, which will assist in the handling of Account Transfers. Automation is now utilized to determine and direct the work to the appropriate work queue. Prior to this release, all Account Transfers entered through the Application queue where staff had to determine if application was initial, add a person, a change in circumstance, or a duplicate. With the start of Open Enrollment, November 1, 2015, we anticipate a large amount of account transfers coming in to the state. The changes noted below should assist with the handling of these transfers.

Definitions:

- **Application Received Date:** Date the application was initially received at Healthcare Marketplace. The application date stays with a person’s Marketplace account for the life of the account.
- **Federal Referral Date:** Date the account was transferred to Nebraska.
- **Add a Person:** An application has been received for a person who is currently in a Medicaid household.
- **Change:** Information related to the Medicaid eligibility determination has changed.
- **Duplicate:** This information is the same as a previous Account Transfer.
- **Initial Application:** This is a new applicant to Medicaid
- **36B GAP:** This is an Account Transfer where the FFM is asking us to relook at the income calculation from an annual basis instead of a monthly basis.

Queue Chart:

Account Transfer	Universal Queue
Add A Person	Processing
Change	Current Mode of Case (Change or Processing)
Duplicate	No task created, information is attached to case.
Initial Application	Application Management
36B GAP	Processing

Note: *Cases that are in an Assigned Mode will remain in Assigned and the worker will receive Alerts.*

Application for Medicaid and Insurance Affordability Programs	
Application Received Date: 02-26-2013	Healthcare Confirmation Number: 25573 Federal Referral Date: 11-03-2015

[Healthcare Marketplace Applications Tied with a Reason of Add a Person](#)

When a new applicant is identified, a Healthcare Marketplace PDF is created and tied with a reason of *Add a Person*. A work task is generated, and the selected program case(s) case mode is updated to processing. An alert will be generated for the assigned Cases.

The Healthcare Marketplace PDF tied with a reason of *Add a Person* will display the name(s) and DOB of the new applicant(s) under the “New Applicant” heading. If the new applicant has a referral activity code of “*Gap Filing*”, their name and DOB will display under the “Gap Filing Applicant” heading.

If the new transfer does not include household members that were on the previous application from the Federal Marketplace, then the name(s) and DOB of those who were removed will display under the “*Removed Household Members*” heading.

Healthcare Marketplace Application with a New Applicant and Removed Household Member

Application for Medicaid and Insurance Affordability Programs		
Application Received Date: 08-30-2013		Healthcare Confirmation Number: 25692 Federal Referral Date: 11-15-2015
Application Information		
Compared to Application 24088	Submit Date 08-30-2013	Application Type (for internal use only) Healthcare Marketplace Non-MAGI
Household Contact Name DAVID FORBESAR 10-28-1973		New Applicant MICHAEL HYDEAR 03-18-1999
Federal Application ID FMM2323241425557		Removed Household Members MICHELLE MYDEAR 03-08-1994
<input checked="" type="checkbox"/> I agree to allow my information to be used and retrieved from data sources for this application. I have consent for all people I will list on the application for their information to be retrieved and used from data sources.		

Applicant with a Gap Filing Referral Activity Reason Code

Name	US Citizen?	American Indian/ Alaska Native	Full Time Student	Physical/ Mental Disability	Federal Referral ID	Referral Activity Reason Code
FANNIE THOMAS 01-24-1970	Yes	No		No	FFM1234567891011121	Gap Filing

Healthcare Marketplace Application for a Gap Filing applicant

Application for Medicaid and Insurance Affordability Programs		
Application Received Date: 02-26-2013		Healthcare Confirmation Number: 25587 Federal Referral Date: 11-04-2015
Application Information		
	Submit Date 02-26-2013	Application Type (for internal use only) Healthcare Marketplace MAGI
Household Contact Name FANNIE THOMAS 01-24-1970		Gap Filing Applicant FANNIE THOMAS 01-24-1970
Federal Application ID FFM1234568		
<input checked="" type="checkbox"/> I agree to allow my information to be used and retrieved from data sources for this application. I have consent for all people I will list on the application for their information to be retrieved and used from data sources.		

When a Healthcare Marketplace application is tied with a reason of *Add a Person* a thorough review of the application and the selected program case(s) will need to be completed to determine what action should be taken.

Note: If a participant needs to be added to a master case/ program case, please follow the process found in the [Medicaid Change Management Guide](#) “ADDING PARTICIPANTS TO MASTER CASE/PROGRAMS” (pg. 15).

List Change Report Window (Change)

Healthcare Marketplace PDF Tied with a Reason of Change

Master Case

Name RAE JONES
Number 367

Rcvd Date	Client Name	DOB	SSN	HH	Inc Res	Exp	Svc Oth	Rej

Federal Marketplace Change Reports

Rcvd Date	Contact Name	DOB	SSN	Upd Userid	Submit Time
11-15-2015	RAE JONES	01-24-1964	XXX-XX-8661	NFOSP343	09:10:08

10-20-2015 08:25:29

If no new applicants were identified, the Federal Marketplace information will be reviewed to determine if a change is being reported. This review consists of comparing the new information to the most recent Federal Marketplace information on file, for the contact name. When no previous Federal Marketplace information is found on file for the contact name and all the applicants have been verified as an active participant in the selected program case(s), the information will be considered a change report. When Federal Marketplace information has been determined a change report, a Healthcare Marketplace PDF will be available for viewing from the *Federal Marketplace Change Reports* box found in the List Change Report window, an alert is generated for assigned cases and an alert and or work task for universal case.

Note: When a change of circumstance has been received from Federal Marketplace, and a thorough review of the information determines that the information is already known to the agency, workers should narrate that an FFM change report was received, no changes identified.

Healthcare Marketplace PDF with Compare

When the Federal Marketplace information is compared, the Healthcare Marketplace PDF will be highlighted where a change was detected. The confirmation number of the application the new information was compared to will be displayed under the “Compared to Application” heading, and section where a change was identified will display under the “Changes Identified” heading.

Healthcare Marketplace PDF that was Compared

Application for Medicaid and Insurance Affordability Programs		
Application Received Date: 08-01-2014		Healthcare Confirmation Number: 25693 Federal Referral Date: 11-15-2015
Application Information		
Compared to Application	Submit Date	Application Type (for internal use only)
25692	08-01-2014	Healthcare Marketplace MAGI
Changes Identified		
Contact Information Address Information Tax Household Section Personal Information Income Section Review and Sign Section Additional Questions Section		
Household Contact Name		
DAVID FORBESAR 10-28-1973		
Federal Application ID		
FMM23232414255557		
<input checked="" type="checkbox"/> I agree to allow my information to be used and retrieved from data sources for this application. I have consent for all people I will list on the application for their information to be retrieved and used from data sources.		

Healthcare Marketplace PDF with Highlighting within a Section

Start Section		
Contact Information-DAVID FORBESAR		
Home Address	Mailing Address	Phone/Email
500 WOODLANE AVE STE 136 LITTLE ROCK, AR 72201-1008		5555550015 (Home) (preferred) HUKLKJHN@GMAIL.COM
	Contact Preference	Phone/Email(REMOVED)
Language	Email	308-555-9999 (Friend) 308-555-8989 (Work) 308-555-9854 (Home)
Russian (Spoken)		
Russian (Written)		

The compare process only reviews the information that affects an individual’s eligibility. The table on the following page is a list of items that are compared in each section.

Application Section	Items compared for changes/Highlighted
Contact Information	Contact name home/ mailing address, phone and email.
Household Members section	Household members last name, marital status, pregnancy indicator, citizenship indicator, physical/mental disability indicator.
Authorized Representative Section	Authorized Representatives name, phone number, email address, designation date, and organization name
Tax household section	Tax return filing status, claims dependent indicator, tax household members, and individual tax status.
Address information section	All household members', home and mailing address. The name is highlighted if the address has changed.
Personal Information section	Citizenship indicator and eligible immigration status.
Income section	Income for each person with income. If a change is detected the "Changed/Removed Income" will be present under the individuals name with the income type that changed highlighted.
Additional Question section	Insurance. If a change in the insurance type was detected, the individual's the name will be highlighted.
Review and Sign	Attested to not be incarcerated, Tax Return Access indicator and Number of year's tax return access.

[Healthcare Marketplace PDF without Compare](#)

When the Federal Marketplace information did not complete the comparison process, the information will need to be reviewed by the worker, to determine if a change was reported. The PDF will display a message to notify the worker that a full review of all the information is required.

[Healthcare Marketplace PDF Not Compared](#)

Application for Medicaid and Insurance Affordability Programs		
Application Received Date: 07-15-2015		Healthcare Confirmation Number: 25647 Federal Referral Date: 11-15-2015
Application Information		
Compared to Application	Submit Date	Application Type (for internal use only)
NO COMPARE COMPLETED	07-15-2015	Healthcare Marketplace
Changes Identified		Non-MAGI
Please review all information for changes that may have been reported		

Healthcare Marketplace Applications Tied with a Reason of *Duplicate*

If the information sent from the Federal Marketplace was compared and the information received previously did not change, a Healthcare Marketplace PDF will be created and tied with a reason of *Duplicate*, no alerts or work task are created.

Alerts

Alert #518 Service Approval Review (New)

This is a new alert for RD workers. The alert is to notify workers assigned to Medicaid Organizations that a Service Approval is due for an annual review. The alert is created 60 days prior to the review due based on the Medicaid Provider Eligibility Dates.

Alert Text:

Service Approval/Contract is due for annual review in 60 days.

Alert 520 Pregnancy Overdue (New)

This is a new alert created for MLTC. This alert is created on the first of the month when the expected due date falls in a previous month.

Alert Text:

Verify Status of Pregnancy for <First Name Last Name> expected delivery date (EDD) <date>.

Note: If the status of the pregnancy is unknown (e.g. no VSTAT Alert, no client report), call the client to determine the status of the pregnancy. If you are unable to contact the client, send a Verification Request form asking that they contact the agency to report the status of the pregnancy.

Correspondence

Suspension Notice for Medicaid (Change)

To support the Suspended Medicaid process, the Notice Template has been changed to allow for sending a notice to Suspended inmates. Suspended Medicaid cases are Assigned. For more information about Suspended Medicaid, refer to the Suspending Medicaid for Incarcerated Individuals guide on the Medicaid Eligibility Staff Process and Procedure web page.

To create a Suspension Notice for Med/PI Suspension follow these steps:

1. From the Search Correspondence window, click New.

The Create Correspondence window displays.



2. Select Notice Template
3. Click OK

The Notice Template window displays.

4. Add Program Case Names, Send To, Language, and Reason for Actions
5. Click Med button on right hand side of Notice Template Window

The Notice Template – Medical window will display.

6. Select the PE medical program
7. Enter effective date of suspension
8. Select Suspended under Medical Notice Type

9. Enter the Manual Reference Number

Note: Do not mark anything in the Eligibility box as none of these apply.

10. Click Ok
11. Save and Close

Result: The Notice will now show up as Created Correspondence in the List Correspondence Window

Medicaid Renewal Forms (Change)

To support the Suspended Medicaid Process, Medicaid Renewal Forms can now be created for Pending Medicaid Public Institution cases.

Note: For Med/PI cases are not included in the auto-batch renewal process. Workers will manually create the form and track with worker created alerts.

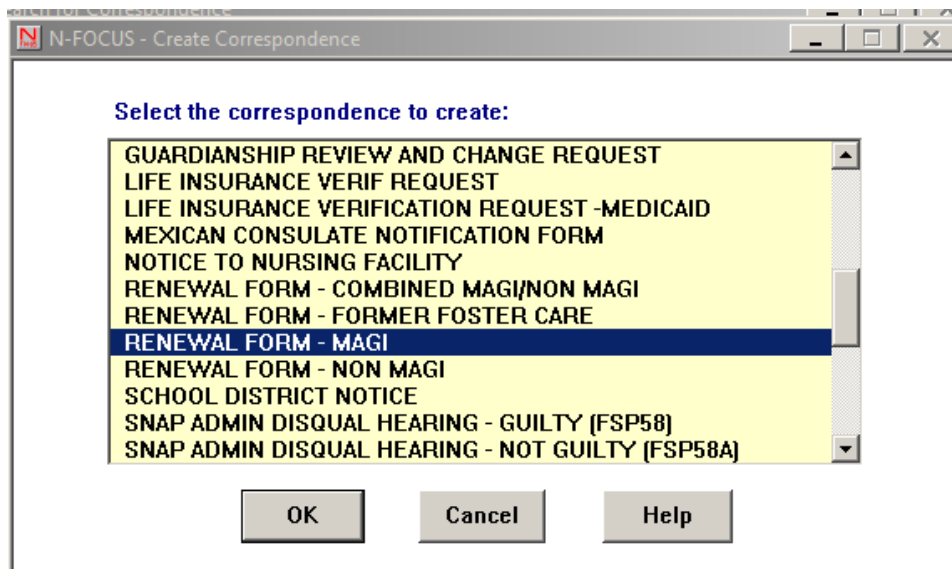
To create a renewal form on pending MED/PI Case follow these steps:

1. From the MED/PI Detail Program Case window select the Correspondence icon.



The Create Correspondence window displays.

2. Click New
3. Select the appropriate renewal form for the client from the list of Combined, Magi, Non-Magi, or Former Foster Care



4. Click OK

The Renewal Form – MAGI window will display.

5. Update Language if necessary.
6. Enter the return form by date.

Note: These are generally due back by the 5th of the month of renewal.

7. Select the Save and Close icon.

Result: The correspondence can be located under Created Correspondence in the List Correspondence Window.

Expert System

Monthly MESA (New)

Effective 01/15/2016 a Monthly MESA will run budgets for all AABD PMT, ADC, Child Care, SNAP, Medicaid and 599 CHIP program cases when a change in Social Security (SSA) or Supplemental Security Income (SSI) benefits has been detected in the past month.

It will continue to be run on the night of 15th of the month when N-FOCUS detects an amount change in SSA or SSI from the BDE or SDX interface in the previous one month period (the 16 of the previous month until the 15th of the current month).

Note: If the 15th of the month is a Sunday or Holiday the Monthly MESA will be run on the nearest work day.

If the MESA budget results in a benefit change a notice will be created and mailed to the client.

Monthly MESA will not run budgets for State Disability Program cases. Cases that have a Medical Impairment reason of 'SDP Medical Consultant – Blind' and 'SDP Medical Consultant Disabled' will be excluded. An Alert will be created indicating an action needs to be taken and the Mass Change Detail window will display "Invalid Medical Impairment Type" in the Grant Case Category.

With the beginning of the Monthly MESA , the Interface Information Alerts 259 and 434 will no longer be created when N-FOCUS detects a change in SSA or SSI benefit amounts.

Those Alerts will continue to be created when N-FOCUS detects a change in Unemployment (IUC) or Long Term Care information.

MESA Process by Worker

In certain circumstances, it is necessary for a case to be bypassed during the Monthly MESA run or yearly COLA and FPL runs. The reason for this is a change needs to be made to the living arrangement, but a new budget should not yet be run. The need to change the living arrangement is to facilitate notification on the Medicare Part D file that the person is exempt from Part D copays (as per federal law). The following scenarios call for a living arrangement to be changed, but a budget should not be run:

- **Move to Nursing Home** (even if just a rehab stay) and on Medicare Days. At day 21 Medicare (A and B) may send copays to Nebraska so the living arrangement change is necessary for MMIS to pay claims. However, the customer is still allowed to maintain the apt/house standard for budgeting.
- **Assisted Living (not waiver)** for two months to save a place at the assisted living facility should the customer be able to return to the Assisted Living facility.
- **Assisted Living Waiver for 30 days** after the move to the nursing home. The waiver worker should be aware if the person will return home or not and notify us.
- **SSI** recipient where they stay at full benefit for up to 3 months.

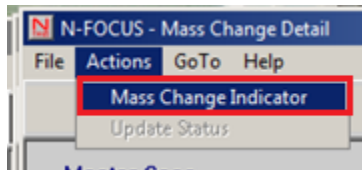
Items to remember:

- Facilities should be reporting via the online Change Report when a person leaves the facility or goes off Medicare days.
- Customers are given a period of time where they are allowed the higher standard to allow for possibly returning to the previous arrangement.

In these particular scenarios, the worker should change the MESA Mass Change processing indicator to “Process By Worker.” To do so, follow these steps:

1. Select Mass Change on the Detail drop-down window on the Detail Master Case window:

The Mass Change Detail window displays.

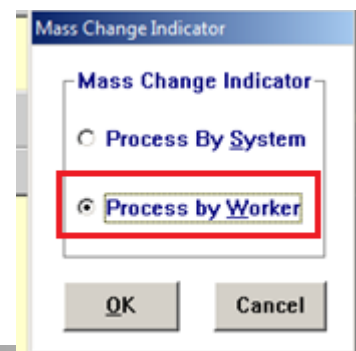


2. Select Mass Change Indicator from the Actions drop-down menu:

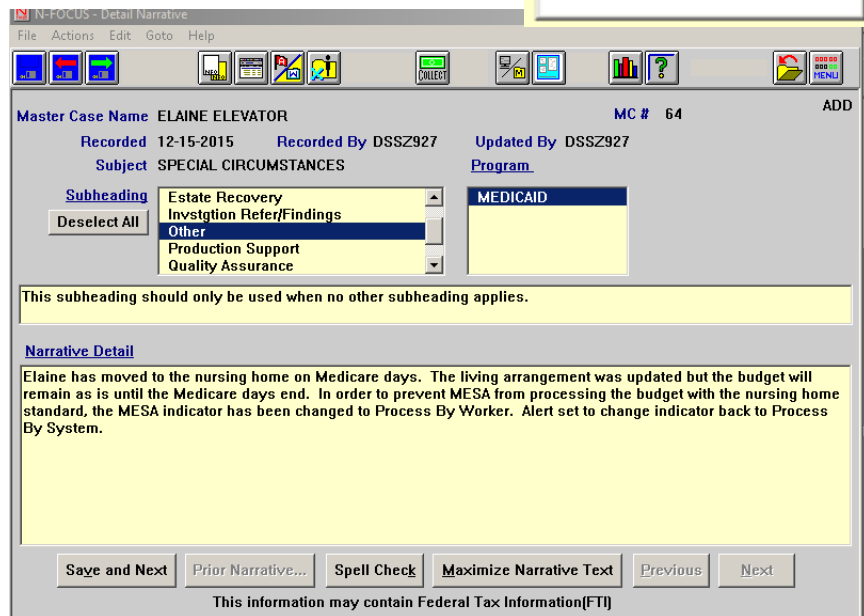
Result: The Mass Change Indicator box displays.

3. Select the Process by Worker button.
4. Select the Ok button and close the window.

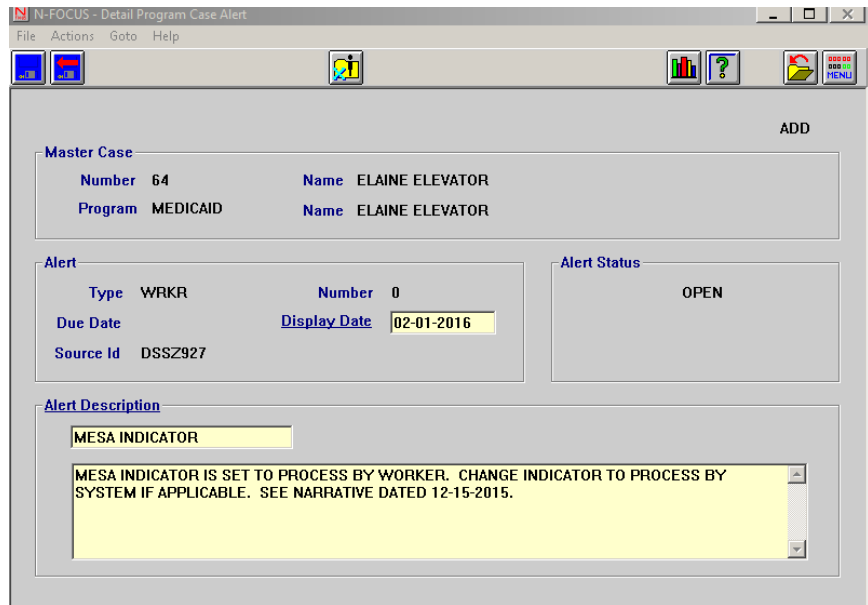
The Detail Narrative window displays.



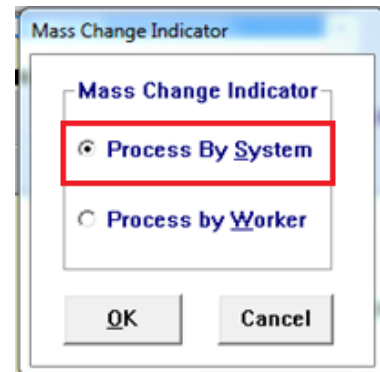
5. Enter a narrative on the case explaining the specific situation and need for setting the Mass Change indicator to Process by Worker.



6. Create an Alert to display when the budget should be run depending on the scenario.



- Update the MESA Mass Change indicator to Process By System.



Verification Requests in Expert System (New)

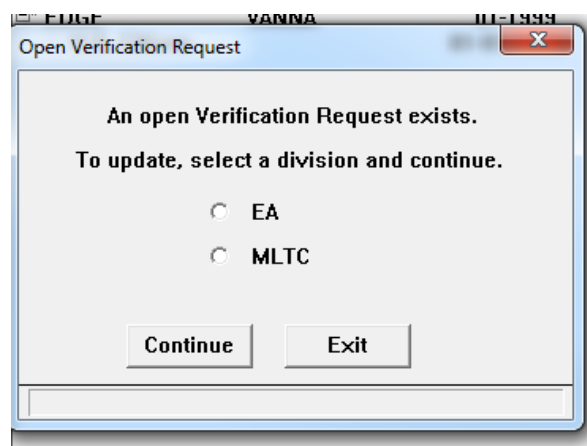
Open verification requests can now be updated in the Expert System. Workers can mark items as received or close the entire verification request.

Note: Comments cannot be updated from the Expert System.

Workers will be prompted when exiting certain data collection tasks if an open verification request exists for that category. The prompt will allow you to select either the EA or MLTC verification request to update. If only one division has an open verification request then only that division will appear on the prompt.

The data collection tasks involved are

- Citizenship/Immigration
- Expenses
- Earned Income



- Other Income
- Self-Employment Income
- Unearned Income
- Resources.

Select continue to update the VR. Cancel will return to the main window of the task.

When continue is selected the Update Open Verification Requests window will open. All open items pertaining to the task are displayed. The first 40 characters of the comments are also displayed.

If multiple verification requests are open the worker will select the one they want to update. After updating the selected VR either click Next to advance to another open VR or OK to exit the task.

A Verification Request tab has been added to the Verification task. From this tab you can see the list of open requests. The request can be updated or closed.

Open Verification Requests:				
Create Date	Sent To	Division	Due Date	Tracking Status
04-01-2015	ELMER EDGE	MLTC	04-11-2015	Open

Verification Types:				
Received	Name	Verification Type	Program	Category
<input type="checkbox"/>	ELMER EDGE	Veterans Administration Benefits	MEDICAID	Unearned Inco...

Comments:

Close VR Next OK Cancel

Create Date	Sent To	Division	Due Date	Status
11-09-2015	VANNA EDGE	EA	11-19-2015	Open
11-09-2015	ELMER EDGE	MLTC	11-19-2015	Open
04-01-2015	ELMER EDGE	MLTC	04-11-2015	Open

Update Help

Tasks Notices Unverified History Summary **Verification Request**

Running/verifications 10-21-2015 8:21:31

Select the verification request and click Update. The Update Open Verification Request window opens.

Open Verification Requests:				
Create Date	Sent To	Division	Due Date	Tracking Status
11-09-2015	VANNA EDGE	EA	11-19-2015	Open

Verification Types:				
Received	Name	Verification Type	Program	Category
<input type="checkbox"/>	VANNA EDGE	Native American Tribal document	ADC	Citizenship an...

Comments:

Close VR Next OK Cancel

From this tab you can update individual items as received or close the entire Verification Request.

[Interview Tracking \(Change\)](#)

Interview Held dates in Interview Tracking may now be updated from the Expert System while the case is checked out.

[Month Seven of TMA \(Fix\)](#)

Prior to the release if a client was in at least month seven (7) of ADC/TMA and was manually configured back to MAGI and there is enough income to take the case to Premium Due, it was putting the entire household into ADC/TMA with a premium due and not checking to see if other eligibility existed for CHIP, MAGI or PW as clients should not be subject to the premium due if they are eligible for another program with no premium due. This issue has been resolved.

[Unborn not counting in Major Mom MAGI Budget \(Fix\)](#)

In MAGI budgeting in determining family size for the eligibility determination of the other individuals in a household that includes a pregnant woman, the pregnant woman is counted as herself, plus the number of children she is expected to deliver. This was not working correctly if a MAGI budget was using non-filer rules prior to release, it should now be working correctly for both filer and non-filer households.

Deprivation Requirements Removed for Medicaid (Change)

Effective November 1, 2015, deprivation is no longer a requirement for Medicaid. This means workers will no longer have to select a deprivation type for a MAGI PC or ADC/MN participants.

Effective with this release (11-8-2015) workers will no longer be prompted to select a deprivation type for MAGI PC category. For Medically Needy they will select MN/PC for those who have a medical need. Participants currently in a category with a deprivation type will be updated to the new category when a new budget is ran.

Add Medical Category

Program Case:
JONES JANE MEDICAID 61748016

'Medical Assistance Only' Program Case(s) require that all participants have a medical category. Select the appropriate 'Medical Category' for each participant.

Participant:	Medical Category	Medical Category
JONES JANE	09-01-1980	AABD/OMB
JONES JALEN	03-03-2002	ADC/TMA
		MAGI
		MN/PC

TMA Begin Date: _____

Next OK Cancel Help

Note: Effective 11-1-2015 please select the deprivation reason of death for all participants who require a deprivation type, until the changes go into effect on 11-8-2015.

Deprivation Type:

- Unemployed or Underemployed
- Incapacitated
- Absence
- Death**
- Deprivation Not Met: Ineligible for Medicaid

When a participant is eligible for the MAGI PC category due to their age, but they were previously found in a children's Medicaid category, AABD non-aged category or TMA category, a pop-up window will stop the worker and ask if the participant is a parent/caretaker of a child.

Medicaid Category

Is ANDREW APPLE MORTON born 10-25-1996 a parent/caretaker of a child in the month of 11-2015?

Yes No Cancel

- If No is selected the person will be closed for Eligibility Requirements Not Met
- If Yes is selected the person will be configured into the MAGI PC category

Note: The MAGI PC-Death and ADC/MN-Death categories were renamed to the generic category names mentioned above (MAGI PC and MN/PC). Medicaid budgets

recalculated prior to the cut date will have the category codes with the deprivation reasons available. If the deprivation reason of death is used the summary behind the unit size will display the new generic category of MAGI-PC.

Benefit Summary		Begin Date: 10-2015	
MAP, MANUEL	MEDICAID	MAGI PC-Death	Regular
Unearned Income	0.00	Unit Size	2
Earned Income	0.00	Net Countable Income	0.00

MEDICAID MAGI PC-Death MAGI Unit Size Detail for 10/2015					
PERSON(S) WHOSE ELIGIBILITY IS BEING DETERMINED IN THIS BUDGET UNIT.					
Name	Role	MED Cat	Lvng Arrgt	St	Rsn
MAP MANUEL	PA	MAGI PC	Apartment or House	PE	

MAGI PC is now reading as a % of FPL (Change)

Starting in November 2015 MAGI Parent Caretaker budgets will now be 58% of the FPL. Income limits will be as follows:

HH size	.58% as of FPL after 11/1/2015
1	569
2	770
3	971
4	1172
5	1373
6	1574
7	1775
8	1977
9	2177
10	2379

MAGI FW and MAGI IMD will now be 51% of the FPL. Income limits will be as follows:

HH size	As .51% of FPL
1	500
2	677
3	854
4	1031
5	1208
6	1384
7	1561

N-FOCUS Tips

Addresses

- **Addresses** – DO NOT add a Mailing Address for a person unless the Mailing Address is DIFFERENT than the Physical Address.
- **Adding Aliases and Previous Names** – Add this information under Name History
 - Name History Button is located on the Person Detail window



Copy/Paste Keyboard Short Cuts

- **Copy/Paste Keyboard Short Cuts**
 - Copy = Ctrl + Insert
 - Paste = Shift + Insert

Viewing Family Relationships

- **Viewing Family Relationships from Program Case Window**
 - Select a person from the Program Case Persons list box
 - Click the Family Relationships Summary icon
 - The Family Relationships Summary window displays relationships and legal status (i.e. HHS Ward)



Searching EA/MLTC Narrative

- **Searching EA/MLTC Narrative** – to quickly search for specific Narrative information by only selecting one (1) Subject/Program/Subheading. (Example: Approval or SNAP or Earned Income)

Program Case Actions Affecting Service Authorizations

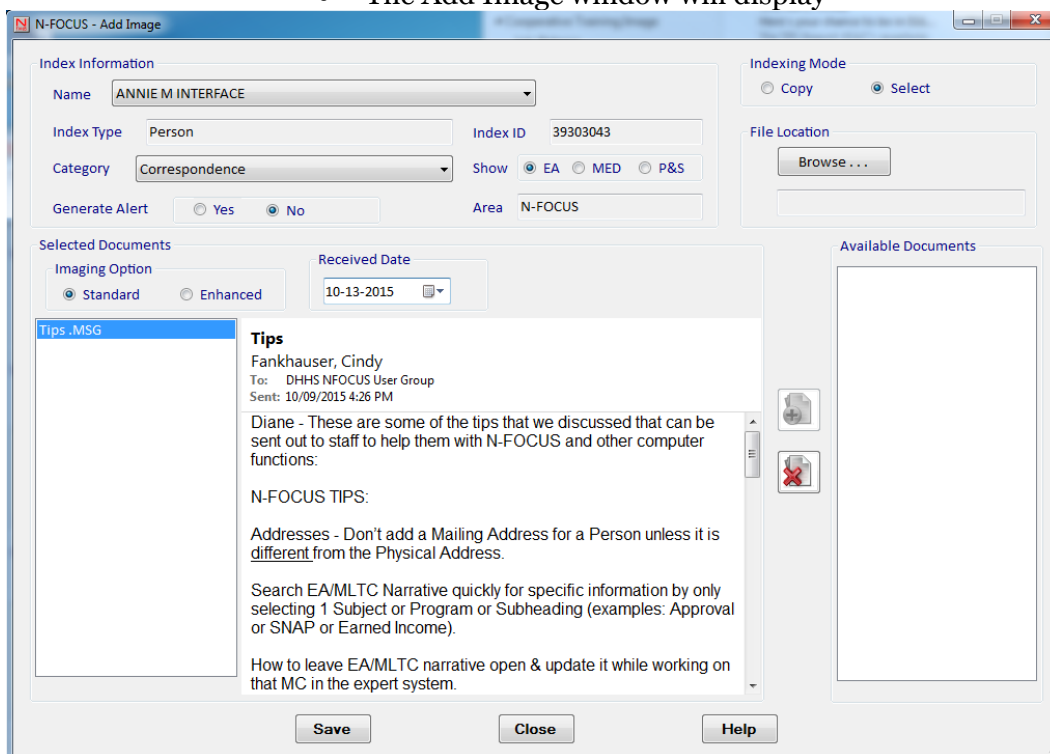
- **Program Case Actions Affecting Service Authorizations**
 - Actions taken on a Program case may affect the Service Authorizations in that case.
 - When a Program Case is closed, and there are Service Authorizations with a Future Dated End Date, the service Authorization will be end-dated as of the date the Program Case Closes. Until the end of month process occurs, the Service Authorization will remain unchanged.
 - **EXAMPLE:** A Child Care Program contains a Service Authorization with an end date of 12/31/2015. On 11/15/2015 the Child Care Case is closed for 11/30/2015. The Service Authorization will remain active and continue to display the Original End Date of 12/31/2015 until the end of the month closing program is run. After the end of month closing program is run, the Service Authorization End Date will change to 11/30/2015.
 - If the Program Case is Closed for a Future Month, and then Pended for the Future Month and Denied from the Pending Status, all Service Authorizations that exist as of the Date of Denial are deleted.
 - **EXAMPLE:** A Child Care Program Case contains a Service Authorization with an End Date of 12/31/2015. On 11/15/2015, the Child Care Program Case is closed for

11/30/2015. Lather on the same date, the Child Care Program Case is closed for 11/30/2015, and denied from the Pending Status. Denying the Program Case will cause the Service Authorizations with the End Date of 12/31/2015 to be deleted. Notices to the Providers and Client are not deleted in Correspondence.



Document Imaging

- **Document Imaging**

- When searching for a Document Image, you can change the date range to narrow the search criteria.
 - Date Range can be up to a 6 month timeframe
- Column Headings can be moved to different positions to fit your needs.
 - Point to the column heading (Example: Saved, Last Modified, etc)
 - Hold down your left mouse button
 - Drag and drop to the location you wish to have the column sit
 - The column order will remain in the order you set
- Scanning Documents (CPS)
 - Do not scan the same document more than once
 - Scan document under one child's name
 - When Searching, highlight all children in the MC and Category Headers
- Saving an E-Mail to Document Imaging
 - From the Detail Master Case window select the Add Image icon
 - The Add Image window will display



- Locate the e-mail to be added in Outlook
- Click and Drag the email to the Add Image window
 - Select the message to view the image

- Complete the Index Information fields
- Complete the Selected Documents field
- Save
- Saving a PDF to Document Imaging
 - From the Detail Master Case window select the Add Image icon
 - The Add Image window will display
 - Click the Browse button
 - You can also click and drag from your Explorer window to the Available Documents group box
 - Navigate to the location where you have stored the PDF files
 - Click OK
 - The files will display in the Available Documents group box of the Add Image window
 - All of the documents saved in the area you selected will be copied to this area.
 - Select the document and click the Select Document icon 
 - The file names will display on the left side of the Add Image window
 - Highlight the file names to view the document image
 - Click the Remove Image if appropriate 
 - Complete the Index Information fields
 - Complete the Selected Documents field
 - Save

Search Providers

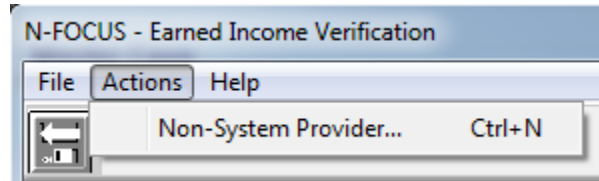
- **Searching for Providers from the Main Menu**
 - Select the Services icon
 - The Search Service Type window displays
 - Select the Providers button
 - Select this button in combination with a program to go to the Search Provider window.
 - Select a program from the Program drop down list to enable the Providers button.
 - The Search Provider window allows a search for and printing of a list of Organizations that have been approved to provide one or more Program Service Types.

Earned Income Verification Correspondence

- **Earned Income Verification Correspondence**

- When creating an EIV in Correspondence, if you don't find the right Employer by clicking the Find Provider (Employer) Select arrow, you can do the following:

- From the Earned Income Verification window, Select the Actions>Non-System Provider menu
- Type the Employer's Name and Address
- Click OK
- Save and Close



- This action is especially helpful for small employers that are not listed on N-FOCUS as an Organization

Narrating in Expert System

- **Narrating in Expert System**

- Check out the Master Case
- Open the Case Status window and move it to the side
- Click the Search Master Case icon on the TOP LEFT
 - DONOT click the Master Case icon on the right
- Enter the Master Case Number and Search
- Open the Search Narrative window and leave it open.
- Click the Case Status window to bring it forward
- Open the case in Expert System
 - Now you can check and update Narrative while updating the case from the Navigator window without having to back out in order to work with Narrative.
 - This really helps when you are trying to remember narrated info (employer's name, bank's name, etc. that wasn't listed on the application) that you need to enter into Expert modules.

Snipping Tool

- **Snipping Tool**

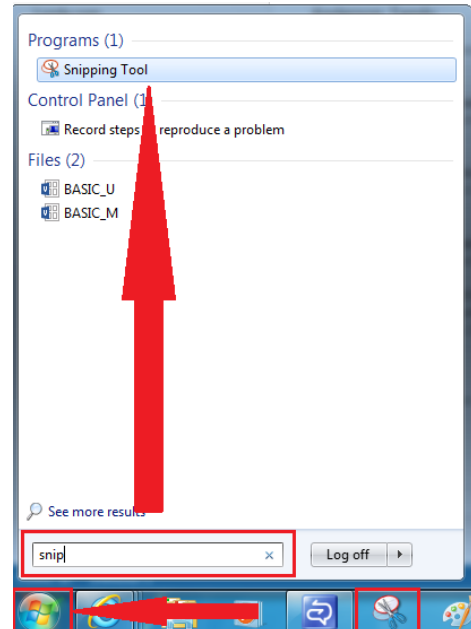
- The Snipping Tool allows you to take a partial or full size screen shot. To locate the Snipping Tool on your PC follow these steps:

- Click the Start Menu in the lower left corner of your desktop
- In the Search Programs and Files text box type Snip
- The Snipping Tool will appear under Programs
- Click the Snipping Tool program to open

- To locate this program quickly in the future, Pin the program to the Task Bar (Right-click the Program name and select Pin to Task Bar)

- **Using the Snipping Tool**

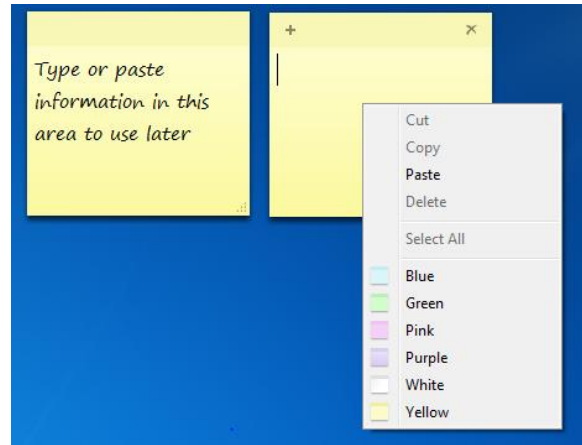
- When you open the Snipping Tool program, the desk top will appear grey
- Use your mouse to click and drag around the item you wish to screen print
- The selected area will display in the Snipping Tool window
- Use the tools in the toolbar as desired
 - Save, Copy, Email Snip as an Attachment, write or draw with the Pen, Highlight an area or Erase an area of the snipped item



Sticky Notes

- **Sticky Notes**

- The Sticky Notes program allows you to place notes on your desktop for later use. To locate the Sticky Notes program on your PC follow these steps:
 - Click the Start Menu in the lower left corner of your desktop
 - In the Search Programs and Files text box type Sticky
 - Sticky Notes will appear under Programs
 - Click the Sticky Notes program to open
 - To locate this program quickly in the future, Pin the program to the Task Bar (Right-click the Program name and select Pin to Task Bar)
- Type in the note as appropriate
 - To create a new Sticky Note – click the + sign
 - To delete the Sticky Note – click the x sign
 - To change the color of the Sticky Note – right-click on the Sticky Note and select the desired color



N-FOCUS Public Web Site Child Care Roster

- **N-FOCUS Public Web Site Child Care Roster**

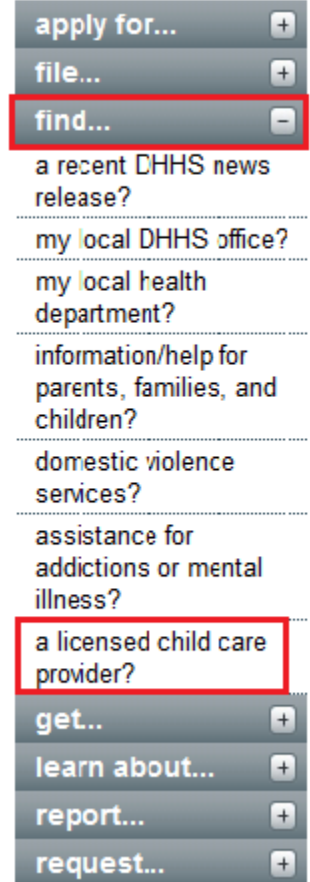
- This roster can be used to search for licensed Child Care Providers in Nebraska

- From the DHHS Intranet, click the Public Website located in the upper right of the screen
 - The DHHS Public Web Site will display



- From the How Do I section, click the Find option
- Click the “a licensed child care provider?” option
 - The Child Care in Nebraska window displays
- Click the “Search for a Child Care Provider” link
- Click the “Choosing Child Care for Your Children” link
 - The Choosing child Care for Your Children window displays
- Click the “Search for Licensed Child Care Providers” link
 - The License Information System Search window displays. This window allows you to search for both Individual, Business/Service and Facility/Service type licenses

How do I...?



OR

- From the Child Care in Nebraska window, click the “Search for a Child Care Provider” link
 - The Roster of Licensed Child Care and Preschool Programs in Nebraska displays
 - This roster is categorized by Zip Code