February 2012

On Target

February '12 Contributors

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Click here to link to the Family Services Manual

Child Support Information

1. **Access to Child Support Program (CSP) Mainframe Screens**
2. **Using the CSP Website for Client Information**
3. **CSP Cases with a Safety Issue**

1. *What CSP (SMUX) mainframe screens can SSP and OHA workers access?*
Beginning January 11, 2012, ERDC, TANF, Medicaid, SNAP and TPR workers have access to: SESR, SJ7F, SMCL, SMIC, SMR1, SMU1, SMUA, SMUX, SOPA, WPAY and SOYA. (Note: This is updated information for ERDC. In addition, for all programs listed, SMIC and SMR1 have been added back as screens available to SSP and OHA.)

A quick reference guide on using these screens is available at http://www.dhs.state.or.us/caf/ss/tanf/docs/CSP_screens_quick_ref.pdf.

(If you are not able to access the screens listed above for the SSP or OHA program(s) you administer, please contact Security-Requests, CAFRACF.)

2. *May DHS and OHA workers use the CSP website to get information about a client's child support case, including payments?*
DHS and OHA workers may use the CSP website to get client-related child support case and payment information only when the client has completed and signed the MSC 2099 (Authorization for Release of Information) specifically authorizing this access. (Note: If the DHS or OHA worker is getting information about a client's child support case from the CSP (SMUX) mainframe screens or from a DCS worker, an authorization for release of information is not required.)

3. *How do SSP and OHA get information on child support cases that are restricted from view because of a safety issue?*
Beginning December 13, 2011, SSP and OHA staff may no longer access any CSP (SMUX) mainframe screen for a child support case coded claim of risk (COR), good cause for noncooperation with support (GC) or Address Confidentiality Program (ACP).

To get information on these cases, workers can do the following:

- When a case is coded COR or ACP, have the client complete and sign the MSC 2099 authorizing the access and use the CSP website. (Information on cases coded GC is not available on the CSP website.)
- Contact the DCS worker, branch office or appropriate DCS point person. Note: DCS cannot give DHS or OHA information about the person on the child support case who requested the COR, GC or ACP. However, DCS can give DHS or OHA information, including payment information, when it is not about the person on the child support case who requested COR, GC or ACP.

  For example, TANF recipient/obligee Cindy has COR on her child support case. DHS contacts DCS to find out how much support Cindy has received. DCS tells DHS they cannot give DHS this information because Cindy asked for COR. DHS then asks how much support the obligor on this case paid to DCS. DCS tells DHS the obligor paid $110 last month and the $60 of this payment was applied to the state account. (The "state account" means the amount of a payment that was kept by the state.) The DHS worker knows, then, that last month Cindy received $50 of the $110 payment.

  Remember: DHS and OHA do not need to have an authorization for release of information completed to get information about a client from a DCS worker. An authorization is needed only when DHS or OHA is accessing the CSP website for client information.
- Ask the client to provide the information that is needed.

Amy Sedvy, TANF Analyst

Mortgage Assistance Program (MAP) & SNAP Shelter…What does it all mean?

Mortgage Assistance Programs are usually referred to as 'MAP' but may also go by many other names (Oregon Homeowner's Stabilization, Hope for Homeowners, Making Home Affordable, etc). Most of these programs pay a person's mortgage for a set amount of time, typically about a year. After that year, a person may or may not have to repay that year's worth of mortgage payments. The question is, do we allow a shelter deduction while MAP is paying their mortgage or not?

The SNAP policy team has been researching these programs and has a clarification on how to treat shelter deductions & MAP's. If there are conditions for repayment on the year's worth of mortgage payments, a shelter deduction should be allowed. If there are no conditions for repayment, a shelter deduction is not allowed.

Example #1: A family receives a year's worth of mortgage payments thru a MAP. If they sell their home within 5 years, they must repay that year of payments. If they stay in their home and do not default for 5 years, they do not have to repay the year of payments. As there are conditions on the year of payments, a shelter deduction is allowed.

Example #2: A family receives a year's worth of mortgage payments thru a MAP. They never, under any circumstances, have to repay that year of MAP payments. As there are no conditions for repayment, no shelter deduction is allowed. The family may report when they resume making their own mortgage payments.

If you run into a MAP you are not sure on, please contact any of your friendly SNAP policy analysts.

SNAP Policy Analysts

To Scan or Not To Scan

The State of Oregon received a SNAP Participation grant in 2008 which was used to implement the SNAP recertification mail out and scanning project. This project encouraged clients to mail their recertification applications to a central location in Salem where the application was scanned and made available to the worker by computer. In the spring of 2011 the agency determined that all the funds would not be spent before the grant expired on August 31. The state contacted the federal agency and requested approval to spend the remaining funds on scanners for the SSP offices. The request was approved and scanners were purchased.

A few branch offices had already received scanners based on an earlier purchase however, beginning in December 2011, scanners started to be deployed to the bulk of the SSP offices. At present about 50% of districts have received their equipment and been hooked up. All SSP branches should have functioning scanners by the beginning of June.

Now that scanners are becoming functional there have been many questions around the use of scanners and which documents can be scanned. The only documents that can currently be scanned and sent to ODM by field offices are those related to SNAP. The current SNAP tabs include the 415F, 1005, 7280 and miscellaneous. The miscellaneous tab includes verification, documents that support CAPI and documents like the 853 that have been submitted and for which there is no existing file. At this time ODM is not accepting the 852. The agency is in the process of determining the programming cost of adding this document and the storage and staff capacity for accepting the form. The field will be notified when the 852 can be accepted.

A transmittal (SS-IM-11-053) issued on 12/28/11 related to this subject. The transmittal contains a link to the deployment schedule as well as the procedure developed by ODM for the preparation and scanning of documents. Any questions on how to use the scanners can be direct to HELP, EDMS. Any policy questions can be directed to Policy SNAP or SNAP.POLICY@dhs.oregon.gov

SNAP Policy Analysts

Have a SNAP policy question? Contact our SNAP Analysts at Group Wise:SNAP.POLICY@dhs.oregon.gov

Have an SSP medical policy question? Contact our SSP Medical Analysts at Group Wise: Medical SSP-Policy.

New SNAP QC Error Trend

A new error trend has emerged due to changes in the QC review process for negative actions: If a notice is mailed to the wrong address, QC must cite the case with an error on SNAP cases.

Here are some reminders about updating SNAP cases when a new address is reported:

1. Update the address as soon as possible because if the computer generates a notice and it goes to the wrong address, it will be cited as an error.
2. If mail is returned without a new address--marked unable to forward or no such address--check the hard file and UCMS to see if we have been informed of a new address or if the address was typed on the computer incorrectly. Also check HZIP to attempt to get the correct address because sometimes it is as easy as the direction is missing (E Lancaster DR, instead of Lancaster DR.)
3. If you are issuing a notice through Notice Writer, make sure the correct address is listed before sending.

Cases that are in SRS cannot be closed because mail is returned, but the case must always be updated when we have a new address. If there is not a new address, narrate that mail was returned with no forwarding address.

Cases that are in CRS can be closed for returned mail (RM). For details on CRS cases, see SS-PT-10-013.

SNAP Policy Analysts

MEQC Review Pilot

The Medicaid Quality Control (MEQC) unit began a new review pilot for Federal Fiscal Year 2012 last month and our reviews have shown some distinct error trends. Our review pilot consists of a random monthly sampling of 40 Active (approvals) and 40 Negative (Closures or Denials) actions in the OHP categories (aside from CHP) and the TANF related medical programs (MAA, MAF and EXT) in APD, AAA and DSO offices.

Although the review pilot is specific to APD, AAA and DSO offices, these scenarios should help reduce issues in other agencies determining Medicaid. A few recent error trends from our negative action reviews include:

1) Closing an OPU recipient before the end of their certification period based on a reported change in income and/or resources or for failure to provide requested information that would not affect OPU eligibility.

> *Per OAR# 461-115-0530 (2), 461-170-0011 (3)(h) and the SPD Staff Tools page under the OHP program manual: "Once a person is determined eligible for OHP, any changes in the filing group's household composition, income or resources, do not affect their eligibility during their current certification period. However, other changes (such as residency and citizenship) can affect eligibility."*

2) Failing to allow the client 45 days to provide requested pending items in accordance with the application processing timeframes before closing or denying medical (for MAA, MAF, EXT and the OHP categories.)

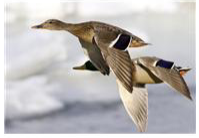
> *Per OAR# 461-115-0190 (1): "In all programs except the EA, Pre-TANF, SNAP, and TA-DVS programs, the Department determines eligibility and sends a decision notice not later than the 45th day after the date of request."*
>
> *This timeframe includes the time the agency begins to review the application and the time necessary to request eligibility items that were not provided initially.*

3) Closing a deceased client's medical on a date other than the date of their death.

> *Per OAR# 461-180-0050 (2): "In all programs except the ERDC, REF, SNAP, and TANF programs, when the only individual in a benefit group dies, the effective date of the closure is the date of the death."*
>
> *Note: If the system will not allow you to back date the effective date for the closure, an MCR148 can be sent to the Client Maintenance Unit (CMU) at: MAINTENANCE Client to adjust the end date. Also, contact Client Enrollment Services (CES) at: DMAP CES so they can retroactively close the client out of their Managed care plan.*

We hope these initial findings can provide a "heads up" for future eligibility actions and lessen the potential for future incorrect decisions.

Medicaid Quality Control



January 2012

Targeted SNAP Reviews

100% Accuracy Honor Roll

0913	LaPine SPD	1404	Refugee Branch SSP	2111	Toledo ADS
1202	Condon SSP	1612	Madras SPD	3013	Hermiston SPD
1301	Burns SSP	1802	Lakeview SSP	3112	Enterprise SPD
1311	Burns SPD	1811	Klamath Falls SPD	3417	Beaverton SPD
		1911	Woodburn ADS		

90% or Better

96.67	West Medford Proc Ctr	1504	94.00	Springfield SSP	1101	91.11	D8 Processing Center	1503
96.67	Cottage Grove SSP	2003	93.33	Canby SPD	0310	90.00	St. Helens SSP	0501
96.67	Newport SSP	2101	93.33	Redmond SPD	0914	90.00	LaPine SSP	0903
96.08	D4 Processing Center	2203	92.00	Medford SSO	1513	90.00	New Market Theater	1402
96.00	Grants Pass DSO	1717	92.00	Albany ADS	2211	90.00	South Valley SSP	1502
96.00	North Salem ADS	2411	92.00	North Salem SSP	2402	90.00	Cave Junction SSP	1702
95.00	Integrated Services SSP	0702	92.00	West Portland ADS	2518	90.00	Lebanon SSP	2202
94.44	Bend SPD	0911	92.00	LaGrande SSP	3101	90.00	Hood River SSP	3302
94.12	Corvallis SSP	0201	91.30	Ptld Mid-Area ADS	3515	90.00	Hillsboro SSP	3402

Major Medical definition change

This is a reminder that on January 1, 2012 the definition of *private major medical insurance* was amended (OAR 461-135-1100). This is important for medical eligibility determinations.

To determine if your client has major medical insurance, contact the insurance company and ask them if the policy has:

- Inpatient and outpatient hospital
- Physician
- Lab
- X-ray
- Pharmacy (this includes any type of pharmacy benefit)

If the policy has all six, the client has a major medical policy. Workers no longer need to ask if there are policy limits (the old $10,000 amount has been removed), or if the insurance is "comprehensive". Just ask if the policy has the benefits listed above.

For a FAQ and more information about the January TPL changes see SS-IM-12-009 or call HIG at (503) 378-6233 or send email to: Referrals TPR (tpr.referrals@state.or.us)

Carolyn Thiebes, TPL Section Analyst Office of Payment Accuracy and Recovery

Janaury 2012

Targeted Medical Reviews

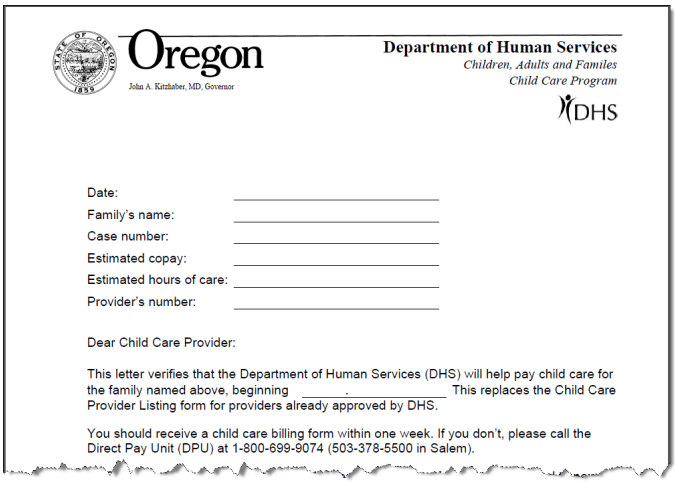
100% Accuracy Honor Roll

0101	Baker City SSP	1502	South Valley SSP	2101	Newport SSP
0201	Corvallis SSP	1504	West Medford Proc Ctr	2202	Lebanon SSP
0501	St. Helens SSP	1505	Rogue Family Center	2203	D4 Processing Center
0701	Alberta SSP	1601	Prineville SSP	2601	St. Johns SSP
0702	Integrated Services SSP	1603	Warm Springs SSP	2701	Dallas SSP
1102	Gateway Center	1701	Grants Pass SSP	3004	Milton-Freewater SSP
1402	New Market Theater	1802	Lakeview SSP	3201	Florence SSP
1404	Refugee Branch			3503	D2 ERDC Proc Center

90% or Better

96.55	Springfield SSP	1101	95.00	Wa County Proc Ctr	3404	90.00	North Clackamas SSP	0303
95.65	Gresham SSP	3502	94.44	Keizer SSP	2405	90.00	South Umpqua Center	1002
95.24	Woodburn SSP	1901	93.33	McKenzie Center	2001	90.00	Multnomah Teen Branch	1406
95.00	D8 Processing Ctr	1503	93.33	Cottage Grove SSP	2003	90.00	The Dalles SSP	3301
			92.86	McMinnville SSP	3601			

Why is Form 7494E important to give to your ERDC client?



Oregon
John A. Kitzhaber, MD, Governor

Department of Human Services
Children, Adults and Familes
Child Care Program
DHS

Date: _____
Family's name: _____
Case number: _____
Estimated copay: _____
Estimated hours of care: _____
Provider's number: _____

Dear Child Care Provider:

This letter verifies that the Department of Human Services (DHS) will help pay child care for the family named above, beginning _____. This replaces the Child Care Provider Listing form for providers already approved by DHS.

You should receive a child care billing form within one week. If you don't, please call the Direct Pay Unit (DPU) at 1-800-699-9074 (503-378-5500 in Salem).

Form 7494E the Child Care Provider Listing Letter, should be given to any ERDC parent/caretaker when **their provider is already approved and listed on the provider pay system with Direct Pay Unit (DPU).** The 7494E tells the provider the ERDC effective date, the copay amount and hours of care authorized. Some provider's will not accept a child in their facility without proof the parent has the ERDC subsidy.

The form also tells the provider when to expect a billing form and to call DPU if it isn't received.

When you give your client the 7494E, for their listed provider, it will make the process easier for the client and provider.

Annette Aylett, ERDC Analyst

Food and Nutrition Services (FNS) Reviews

FNS staff completed reviews in January at the Estacada APD and Beaverton SSP offices. They reviewed every aspect of our work with SNAP applicants including client access, scheduling intakes, our actual interview process, notices, customer service and workers' knowledge of policy and processes. They also met with some of our client advocates. The Program Integrity Steering Committee wishes to express our appreciation to Estacada and Beaverton managers and staff for their preparation and professionalism during the FNS visit!

Matthew Bogart, Program Accuracy Manager