

**APD/SSP/CW
Regional Meetings
2014**

MMIS Training
Packet 4

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2014 Regional Meetings Presentation Guide

Navigation Tips & Recipient Data Inquiry

7/22/2014

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[1] Purpose of this Guide

The 2014 Regional Meetings Presentation Guide includes navigation tips to help you use the MMIS more efficiently and effectively. The Guide also provides step-by-step instructions on querying recipient information, including demographics, eligibility and enrollment information.

[2] MMIS Access & Login

Access to the MMIS is user-specific and based on the employee's job duties. Some employees may have both update and read access to certain areas of the MMIS, while others have read-only access. If you need additional access in the MMIS to perform your job duties, talk with your supervisor or manager. For a panel image of the MMIS Logon page, see Figure 1. If you need help logging in to the MMIS or have other technical problems, contact the DHS/OHA Service Desk at 1-503-945-5623 or email: dhs.servicedesk@state.or.us

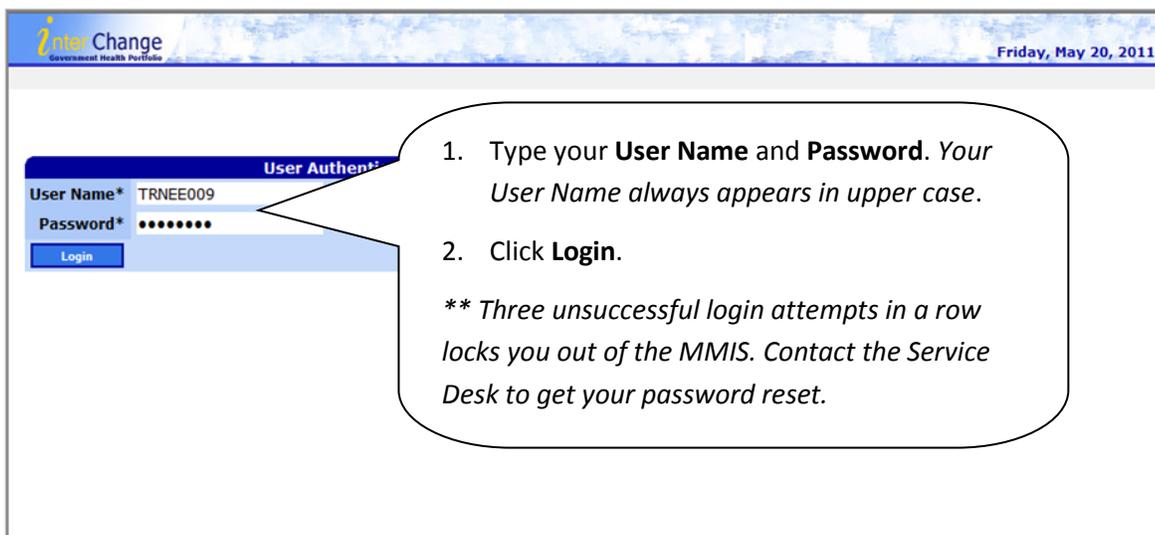


Figure 1 – MMIS Logon Page

[3] Introduction: MMIS Navigation Tips

Sections 4 through 9 of the 2014 Regional Meetings Presentation Guide provide a number of navigation tips to help make your work life easier and your use of the MMIS more efficient and effective.

[4] MMIS Home Page

interChange

At the top of the MMIS Home page is the *interChange* logo. *interChange* is the core product produced by HP. The MMIS is essentially the same as the *interChange* application but has been customized to meet the needs of the State of Oregon.

Menu Structure

The MMIS consists of a Main Menu of subsystems listed horizontally across the top of the page beneath the *interChange* logo. There is a submenu of choices within each subsystem. See Figure 2.

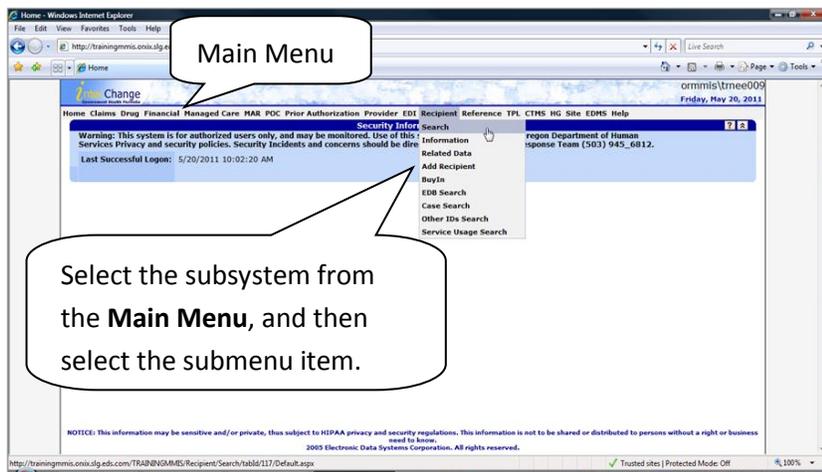


Figure 2 - MMIS Home Page

When you select a submenu item from one of the subsystems, a second horizontal row of submenu choices appears below the Main Menu. These are the same submenu choices you see in the subsystem's drop-down list. See Figure 3.

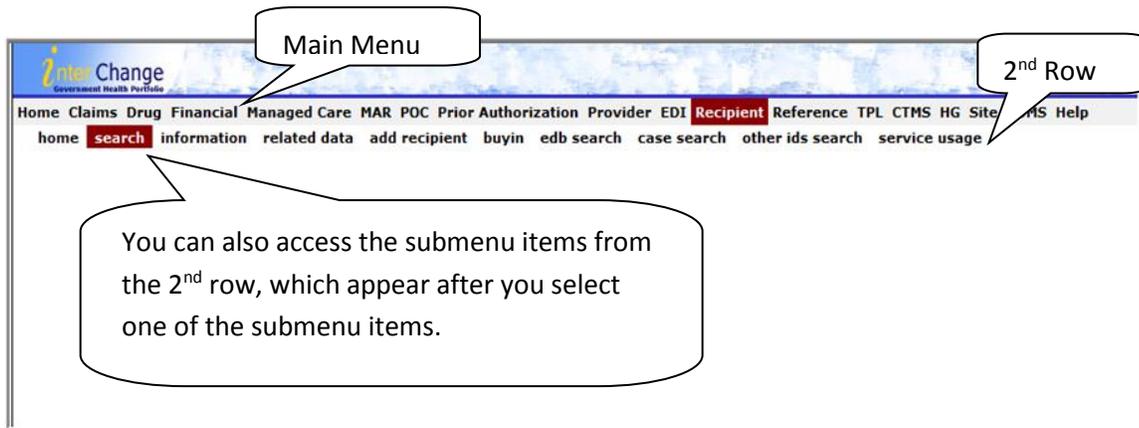


Figure 3 – Main Menu and Submenu

[5] Browser Features to Enhance MMIS Navigation

The MMIS is a web-based system accessed via a web browser. This document refers to the Internet Explorer (IE) web browser. There are a number of browser features to help you navigate the system more efficiently.

Opening Multiple Browser Windows and Tabs

The MMIS can operate in multiple windows and tabs simultaneously, which gives you the ability to display a variety of information while performing a task. For example, you can look up claim information while researching a recipient's eligibility. When you open a new window from the IE File menu, the browser will clone the MMIS window currently being displayed and open another MMIS session. Each session has its own separate 20-minute timer, but as long as you have at least one MMIS window open you are still logged in. See Figures 4 and 5.

If you use dual monitors, you can place an MMIS session on each monitor. Or if you use just one monitor, you can resize the windows and place them on your single monitor.

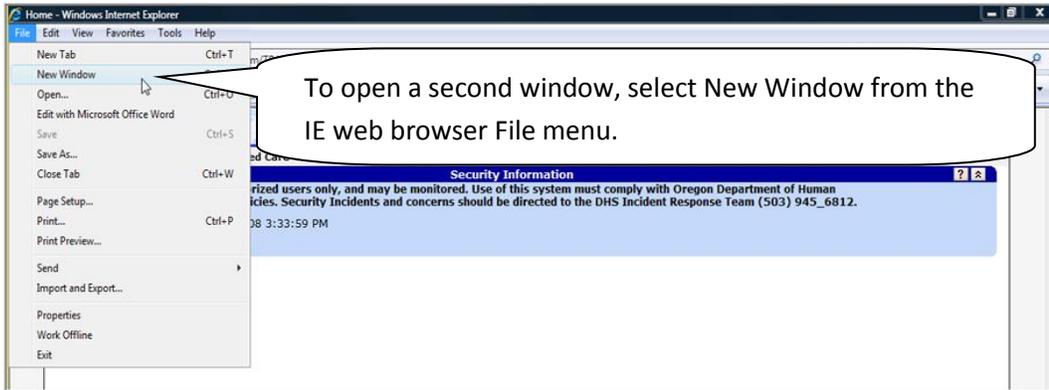


Figure 4 – IE File Menu



Figure 5 – Multiple MMIS Windows

In the IE web browser, you can set up tabs and open multiple web pages within one browser session. This can be helpful if you want to navigate to another website, such as the DHS or OHA Home page, on a second tab. See Figures 6 and 7.

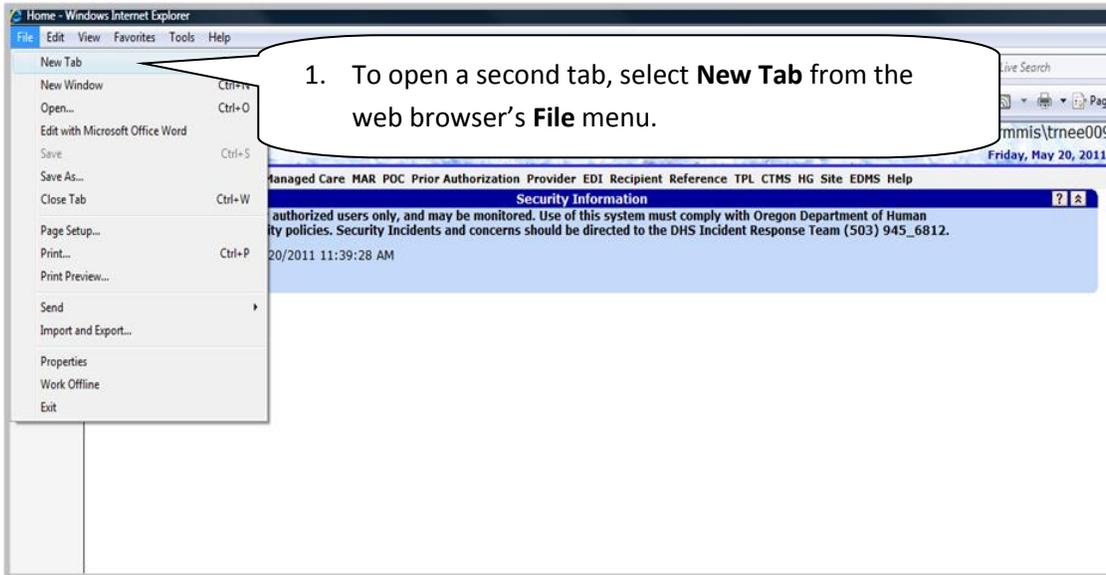


Figure 6 – Open New Tab

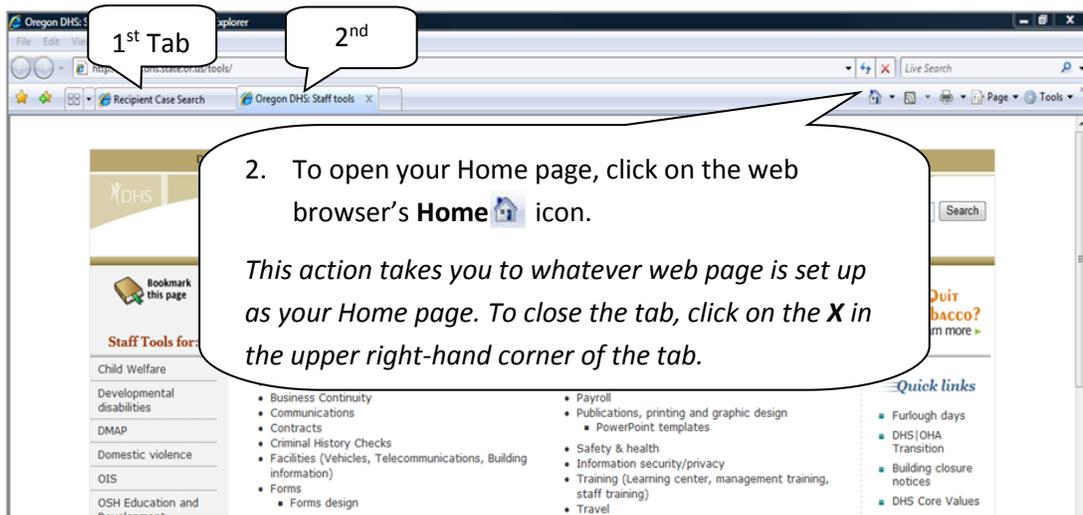
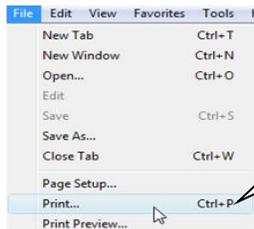


Figure 7 – Multiple Tabs & Home Icon

In the Figure 7 example, there are two tabs in one browser session. The first tab is the MMIS session (Recipient Case Search) and the second tab is the DHS Staff Tools website.

Printing

There's more than one way to print from the MMIS, including clicking the IE browser's printer icon or pressing Control P on your keyboard. You can also print from the browser's File menu by selecting File > Print. See Figure 8.

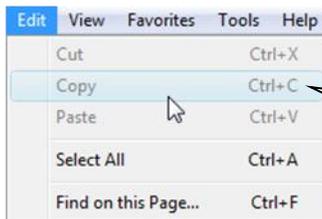


Select **Print** from the web browser's **File** menu to print from the MMIS (for example, Temporary ID cards).

Figure 8 – IE Print Command

Copying & Pasting

You can use the Copy and Paste feature in the IE web browser to copy and paste information from within the MMIS or from a source system into the MMIS. See Figure 9. For example, you might copy a prime number from your source system and paste it into the Current ID field when you do a Recipient Search.



Select **Copy** from the web browser's **Edit** menu to copy information and select **Paste** to paste information.

Figure 9 – IE Copy and Paste Commands

Changing Text Size

You can change the size of the text on a page from the View menu in your web browser. See Figure 10. If you increase the text size, it might be easier to read, but you'll probably have to scroll back and forth across the page more often.

Another way to change the text size is to hold down the Control key on your keyboard while at the same time scroll your mouse wheel up and down.

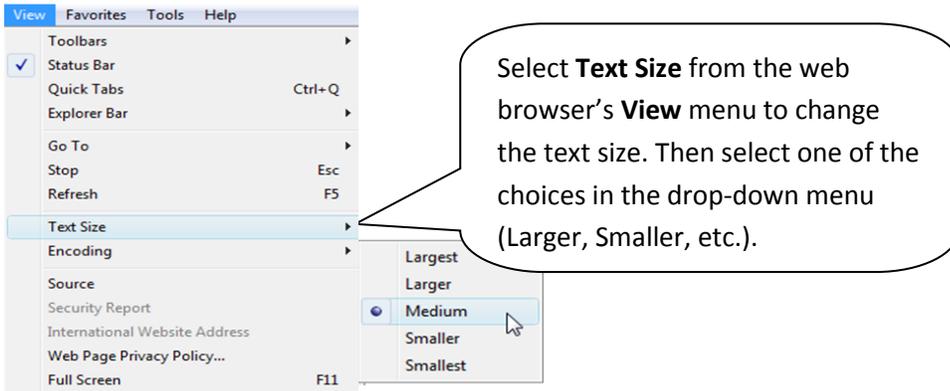


Figure 10 – IE View Menu

The Back Button



It is important to avoid using the browser's Back button while working in the MMIS.

Normally when you click the Back button while viewing web pages, the web browser returns you to a previously viewed page that is displayed exactly the same as when you left it. The Back button has been disabled in the MMIS. The system handles information in real

time and clicking the Back button could return you to a page that is displaying outdated data. If you inadvertently click the Back button, the system may log you out, but you can simply log in again.

The Home Button



The Home button takes you to the web page you have set up as your Home page. If you click the Home button while in the MMIS, you will be logged out of the system and taken directly

to your Home page. If you'd like to access your Home page while continuing to work in the MMIS, select New Tab or New Window from the browser's File menu, and then click the Home button.



Figure 11 – IE Back and Home Buttons

[6] Help Menu

The Help menu can be found on the MMIS main menu at the top of the page. Two types of help are available from the main menu: User Manuals and Topic Search.

User Manuals

The User Manuals in the Help menu is organized by subsystem and the subsystems are divided into sections: Introduction, Panels, and Reports. The Introduction section provides basic information about the subsystem. The Panels section includes a list of all panels in a subsystem, and each one is a hyperlink that opens a help topic. The Reports section lists reports available in that subsystem, and each item in the list is a hyperlink to more details. Figures 12 through 14 describe how to look up User Manuals information for Recipient Data Maintenance. Figure 15 is an example of Online Panel Help for the Recipient Search Criteria panel.

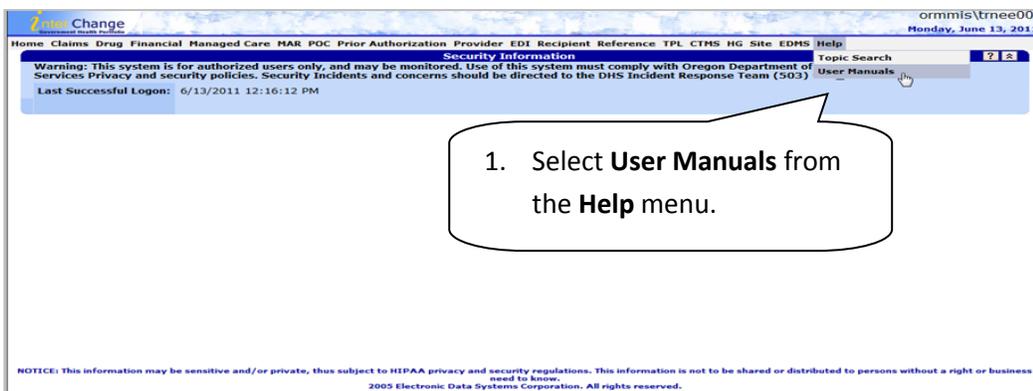


Figure 12 – MMIS Help Menu

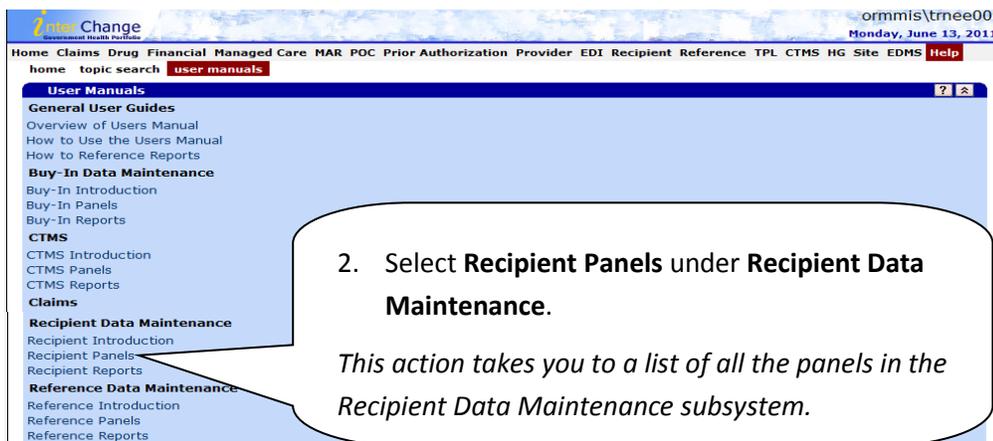


Figure 13 – MMIS User Manuals

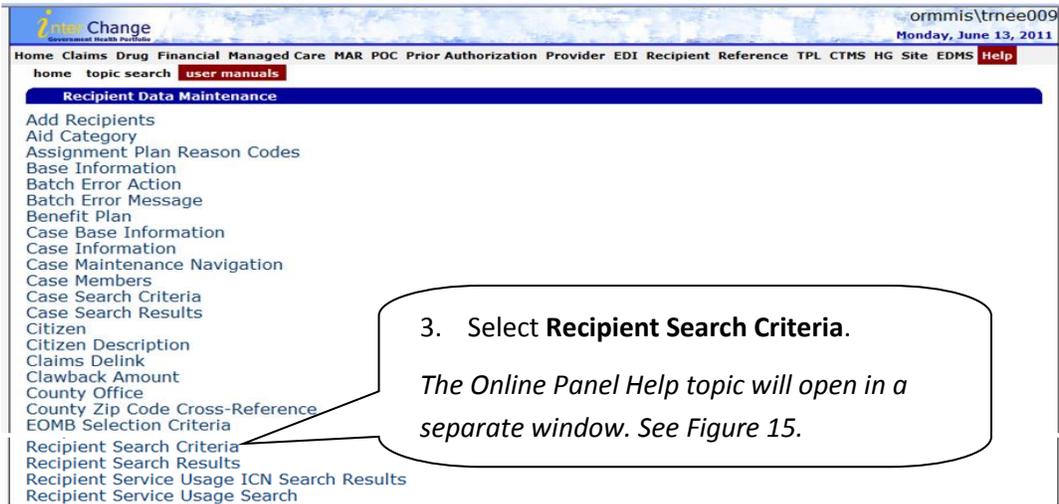


Figure 14 – Help Topic Hyperlinks

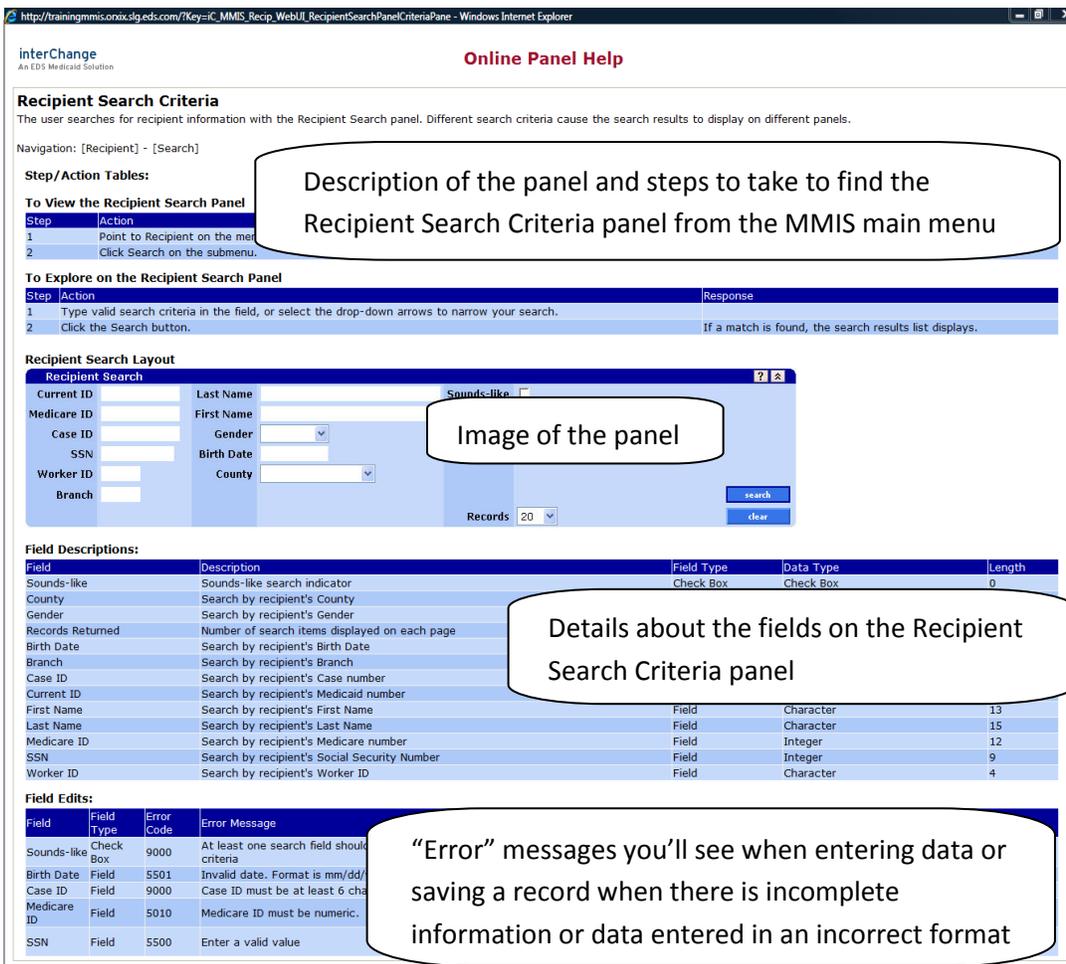


Figure 15 – Online Panel Help

Topic Search

In the Topic Search submenu under Help, you can search for a keyword or keywords that are part of a panel name or panel description. The Topic Search can be helpful if you are not sure which subsystem contains the information you're seeking. For example, if you're not sure how to do a Recipient Search, you can search by the keywords "recipient search" and then view a list of all panels in the MMIS with the words "recipient search" in the panel name or panel description. See Figures 16 through 18 describing how to do a Topic Search for the keywords: "recipient search."

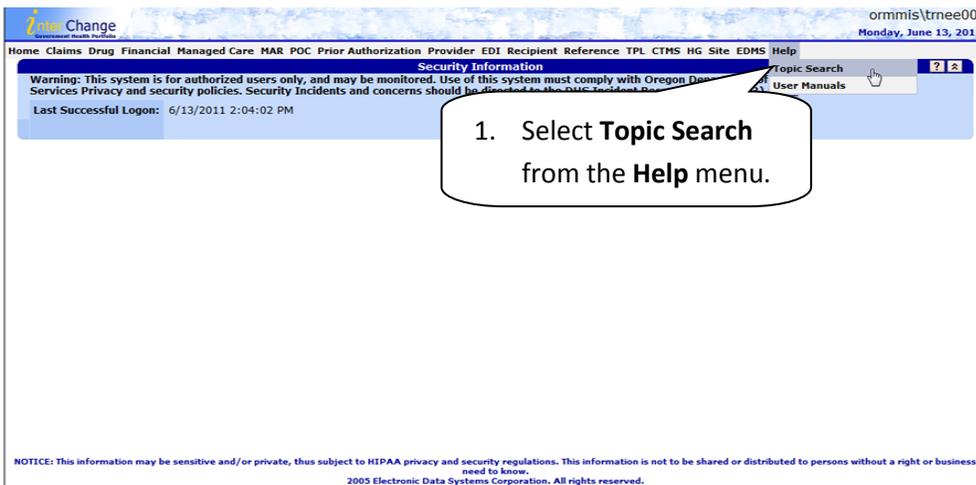


Figure 16 – Topic Search Submenu Item

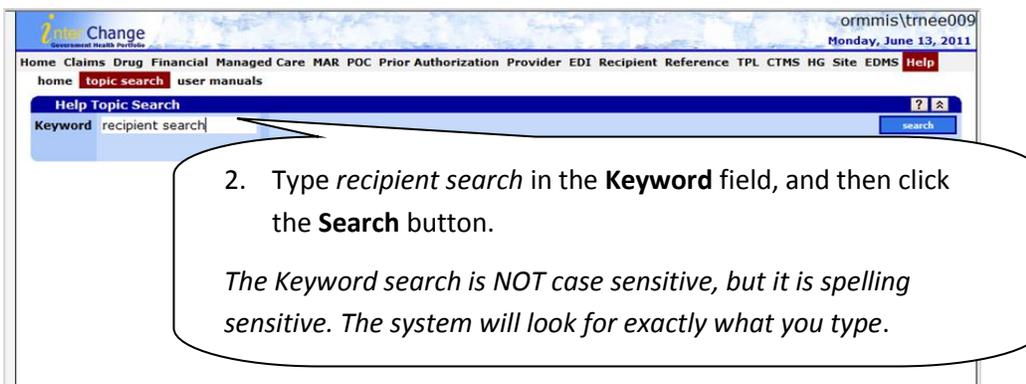


Figure 17 – Keyword Search

3. Select one of the panel rows in the Search Results. The Online Panel Help topic will open in a separate window for the row you chose.

The Search Results display two rows of information that contain panels in the MMIS with the keywords "recipient search" in the panel name or panel description.

The screenshot shows the interChange website interface. At the top, there is a navigation menu with 'Home', 'Claims', 'Drug', and 'Financial'. Below this is a search bar with the text 'Help Topic Search' and 'Keyword recipient search'. The main content area displays 'Search Results' with a table of results. A callout bubble points to this table. Below the search results, a help window is open, showing the 'Recipient Search Criteria' panel. A second callout bubble points to the 'X' button in the window's title bar.

Name	Description
Recipient Search Criteria	<P>The user searches for recipient information with the Recipient Search panel. Different search criteria cause the search results to display on different panels. </P> <P>Navigation: [Recipient] - [Search]</P>
Recipient Search Results	<P>The user views the results of a search for recipient information on the Recipient Search Results panel. </P> <P>Navigation: [Recipient] - [Search] </P>

Step	Action	Response
1	Point to Recipient on the menu bar.	Drop-down submenu displays.
2	Click Search on the submenu.	Search panel displays.

4. To close the Online Panel Help topic, click the X in the upper right-hand corner of the window.

Figure 18 – Keyword Search Results

[7] Common Types of Panels

The Search Panel

Most subsystems in the MMIS contain a Search panel where you can input specific search criteria to locate information. See Figure 19 showing an example of the Search panel from the Recipient subsystem. You can search by the client's Current ID (Prime Number) if you have it. Or you can enter other search criteria, such as Last Name, First Name, and Birth Date. You will not see the words "Prime Number" in any of the MMIS fields. The MMIS refers to Prime Number as Current ID, Client ID, or Recipient ID. There is also a "Sounds-like" feature in the Recipient Search panel where you can search for a recipient whose name sounds similar to what you type in the Last Name field. Once you've entered the search criteria, click the Search button to see the results. If the system cannot find any information based on your search criteria, you'll see "No rows found" in the Search Results. If the system finds one record based on your search criteria, then that record will open. If the system finds multiple rows of information, those rows will display in the search results.

The screenshot shows the 'Recipient Search' panel in the MMIS. The panel has a blue header with the 'iChange' logo and 'Government Health Portfolio' text. Below the header is a navigation bar with links: Home, Claims, Drug, Financial, Managed Care, MAR, POC, Prior Authorization, Provider, EDI, Recipient, and Refe. The main search area is titled 'Recipient Search' and contains several input fields: 'Current ID' (with the value 'KX277V5U'), 'Last Name', 'Medicare ID', 'Case ID', 'SSN', 'Worker ID', and 'Branch'. A 'Sounds-like' checkbox is located to the right of the 'Last Name' field. At the bottom right of the search area are 'search' and 'clear' buttons. Two callout boxes are present: one pointing to the 'Current ID' field with the text 'Search by the **Current ID** or enter other search criteria, such as **Last Name, First Name, and Birth Date.**' and another pointing to the 'Sounds-like' checkbox with the text 'Check the **"Sounds-like"** box if you want to search for records with a last name that sounds like what you typed.'

Figure 19 – MMIS Search Panel

The Mini Search Panel

A mini search panel appears at the top of most records, such as the Recipient Information record. Type the ID (Current ID or Case ID) in the corresponding field to do a quick search. See Figure 20.

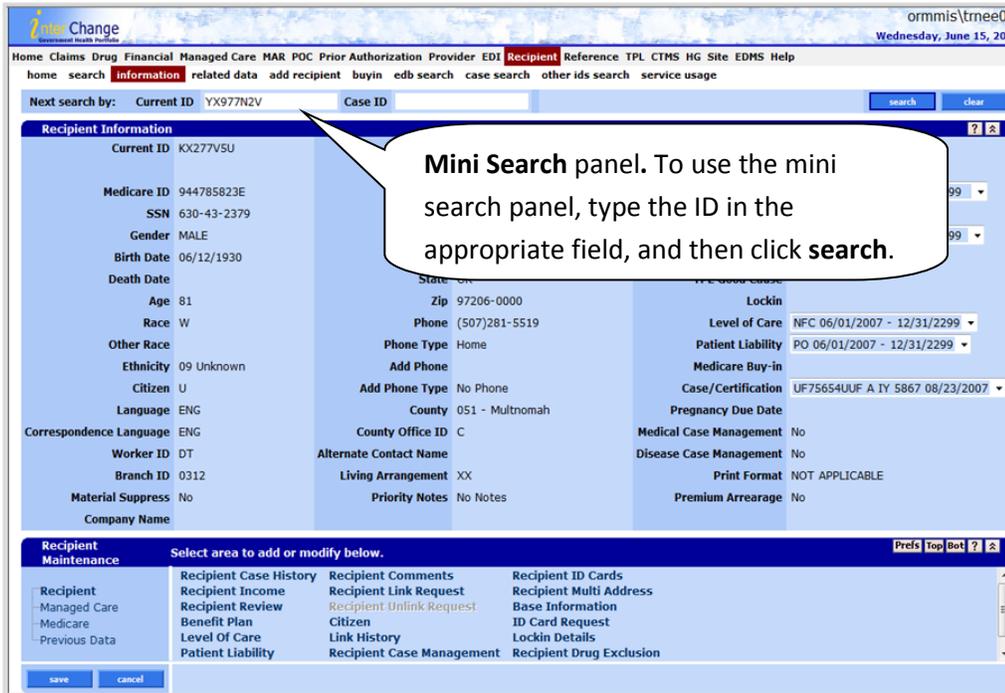


Figure 20 – Mini Search Panel

The Information Panel

The Information panel shown in Figure 21 displays recipient information.

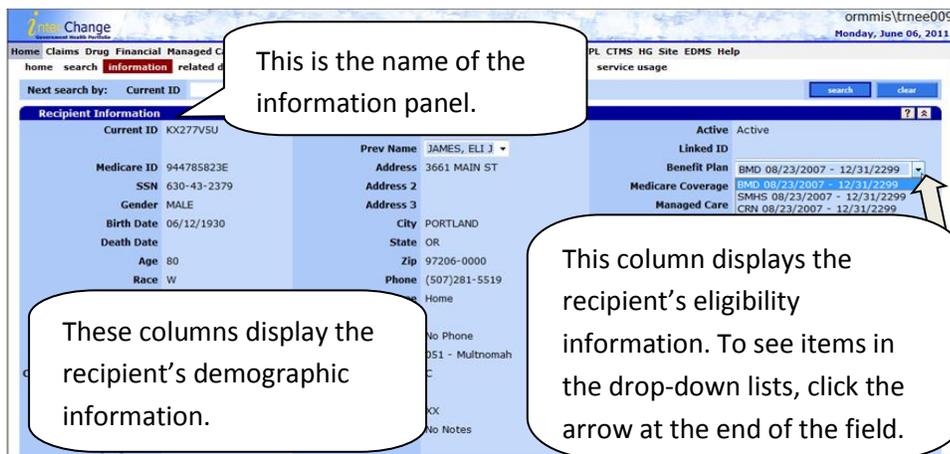


Figure 21 – Information Panel

The Maintenance Panel

Most MMIS records contain a Maintenance panel that is used to retrieve more detailed information contained in the record.

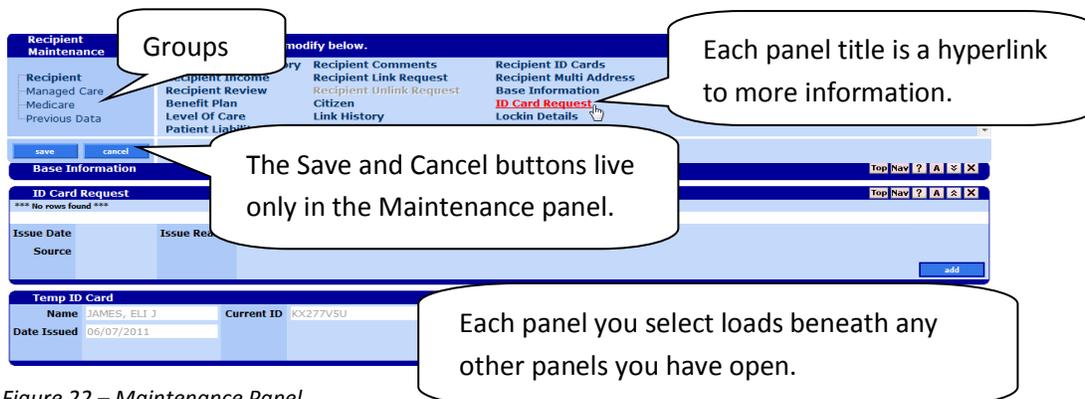


Figure 22 – Maintenance Panel

The Maintenance panel is organized into groups of information in the left pane with a corresponding list of panels available within each group in the right pane. Each panel title is a hyperlink that opens the corresponding panel so you can view the data contained in it. When you select a panel hyperlink, the panel loads below all the panels already open. The Base Information panel loads automatically when you choose any of the panels. The Save and Cancel buttons can be found only on the Maintenance panels. See Figure 22.

Panel Components: Columns, Fields, and Rows

Each panel within a record can include a combination of columns, fields, and rows. See Figure 23. Each row is a hyperlink to additional information. When selecting a row, either a separate window will open or nearby fields will populate with information associated with the row you selected.

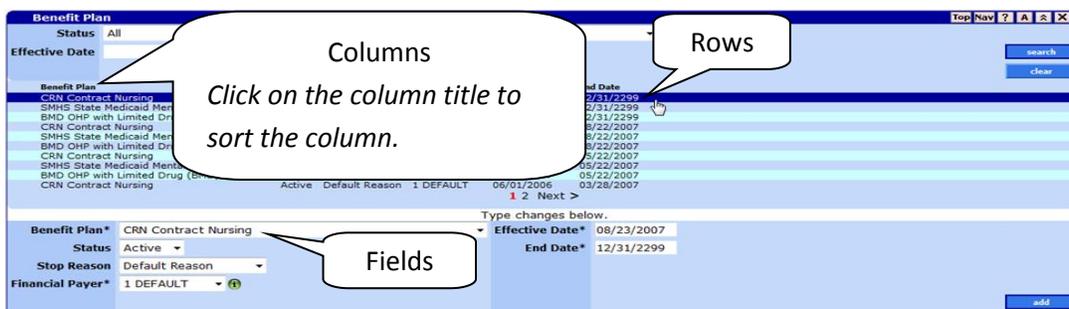


Figure 23 – Columns, Fields, and Rows

Panel Navigation Buttons

There are navigation buttons in the upper right-hand corner of each panel and each button performs a different action. See Figures 24 and 25.

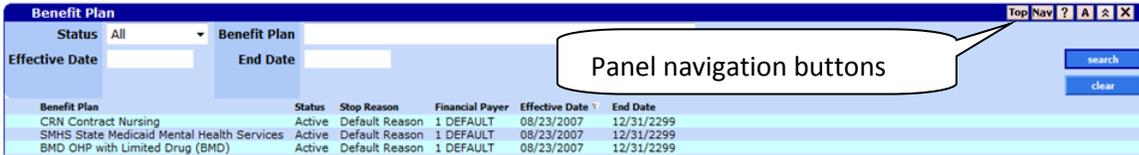


Figure 24 – Panel Navigation

Image	Description	Image	Description
	To customize your panel display by choosing the panels you want to automatically open each time you access a record		Audit History (tracks changes, edits, etc.)
	Jumps to the top or bottom of the page		Minimizes/Maximizes panels
	Jumps to the Maintenance panel (also called the "Navigator Menu")		
	Online Panel Help		

Figure 25 – Panel Navigation Buttons

Field and Panel Help

In addition to the help available from the MMIS main menu, you can also access help directly from the panels. A question mark (?) appears when you hover the cursor over any field title. When you click on the field title, a description is displayed with more details. When you click on a question mark in the upper right-hand corner of a panel, a separate window opens to the Online Panel Help topic for that specific panel. See Figure 26.

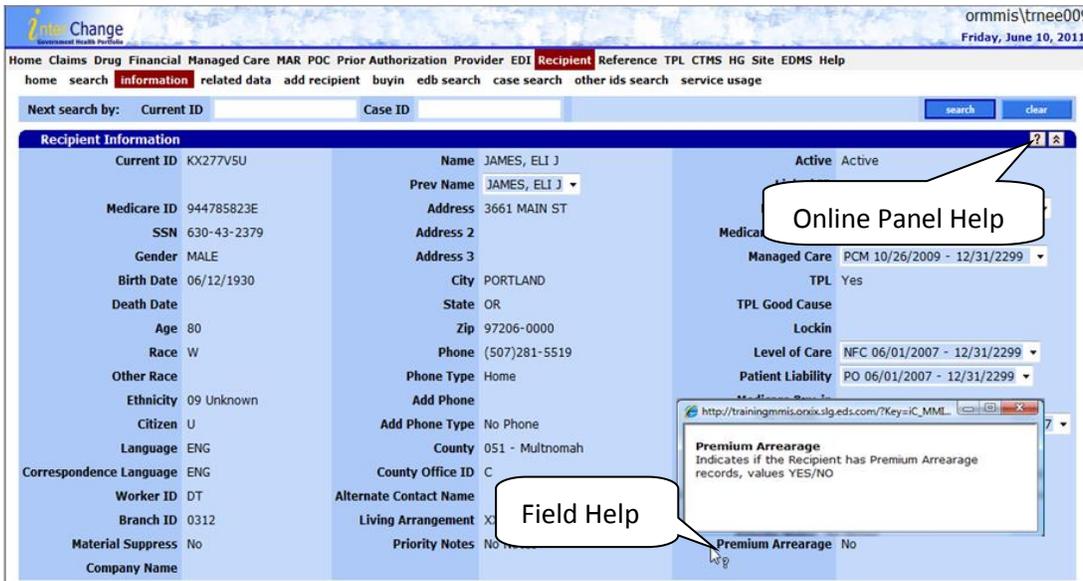


Figure 26 – Field and Panel Help

[8] Setting Preferences

All Maintenance panels have a “Preferences” feature that allows you to customize which panels open automatically whenever you access a record. For example, you may routinely look up Benefit Plan details and print Temporary ID cards. You can set up your Preferences to automatically open those panels every time you look up a recipient record. The following example shows how to set Preferences so that the Benefit Plan and Temp ID Card panels open automatically each time you access a recipient record. See Figure 27.

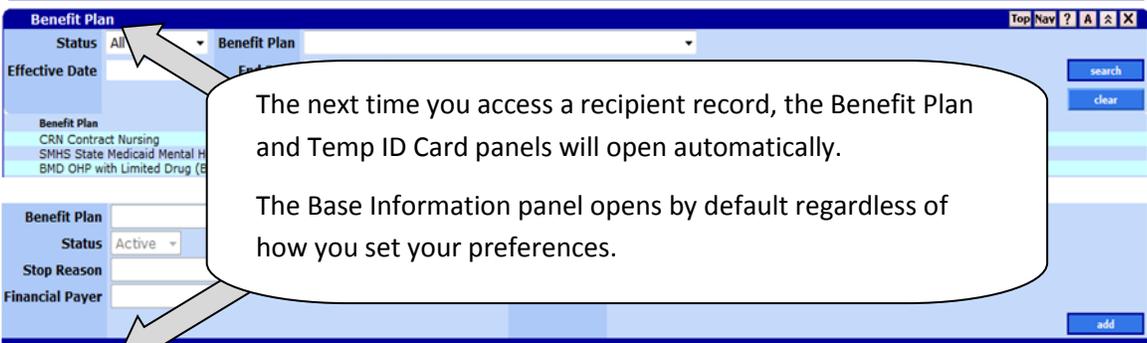
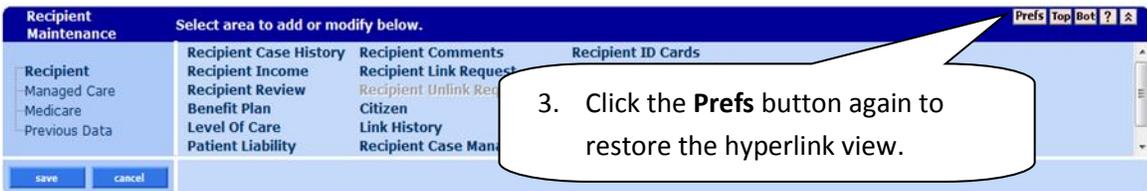
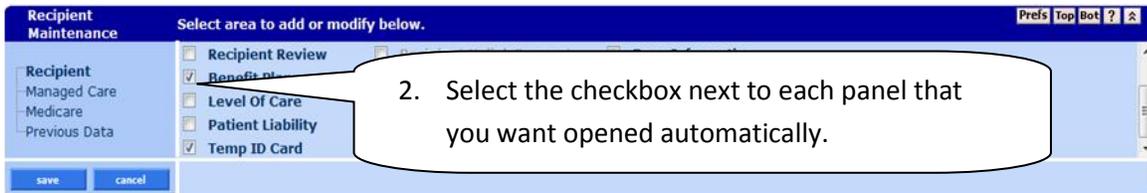
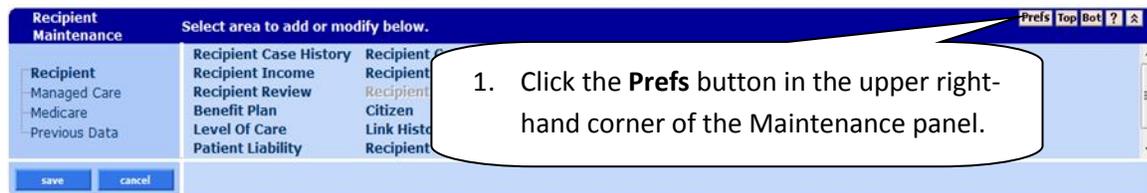


Figure 27 – Setting Preferences

[9] Additional Navigation Tips

Right-Click and Open a New Tab or Window

From the MMIS main menu, you can right click on any of the submenu items and select “Open in New Tab” or “Open in New Window” to access a specific submenu item without closing your first window. This can be helpful if, for example, you want to keep a recipient record open in one window or tab and search for information in the TPL subsystem in a second window or tab. Once you’ve performed the right-click “Open in New Window” or “Open in New Tab”, you can keep two MMIS pages open. If you have dual monitors, you can place one MMIS window on each monitor. If you have just one monitor, you can open one MMIS page on each tab, or stack two windows on a single monitor. See Figures 28 through 30.

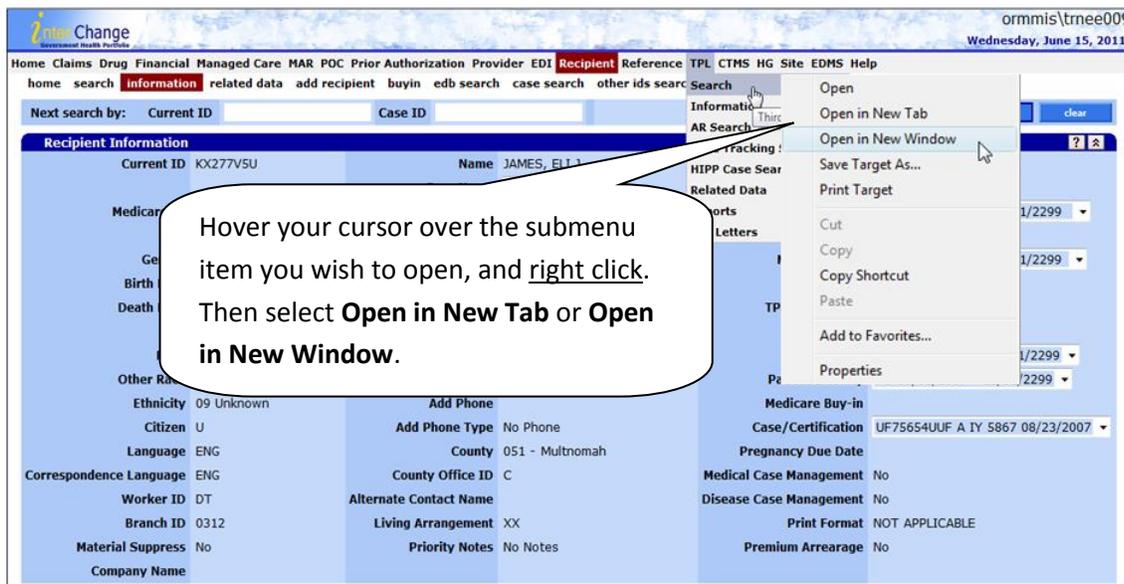


Figure 28 – Open a New Tab or Window

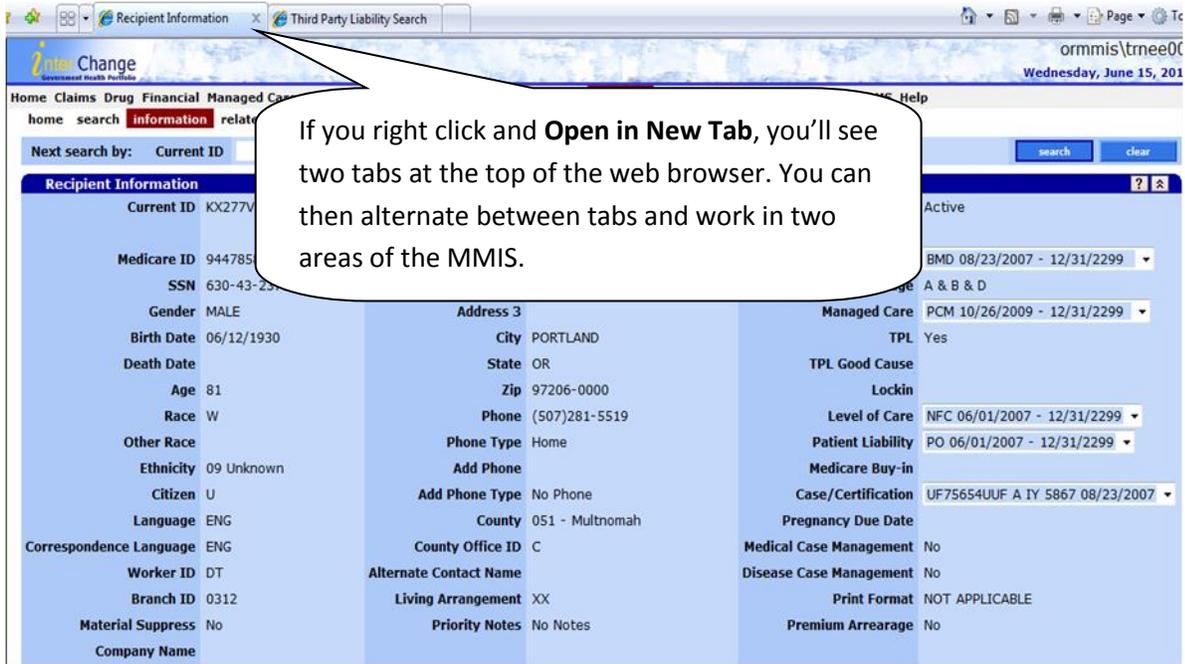


Figure 29 – Multiple MMIS Tabs

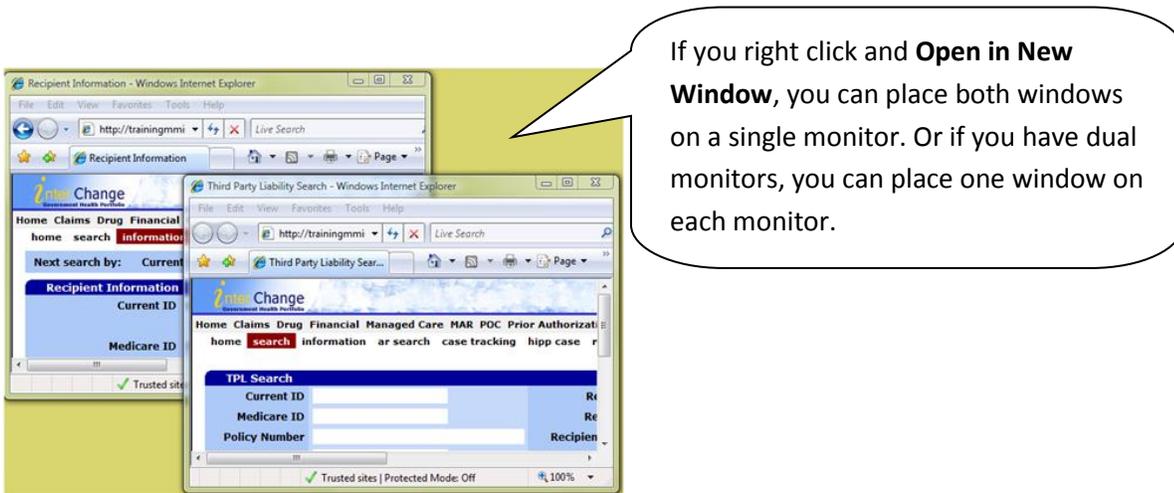


Figure 30 – Multiple MMIS Windows

Activate Row Selection Links

The Activate Row Selection Links setting, sometimes called the “eyeglass” feature, replaces the row’s hyperlink with an eyeglass icon next to each row. If you want to copy information from a row, such as an invoice number or ICN, you can’t do that when the row itself is a hyperlink. When you turn on the Activate Row Selection Links setting, the eyeglass icon becomes the hyperlink and you can then copy information from the row. You might use this feature when reviewing a list of ICNs in the Claims subsystem. For example, you could turn on Activate Row Selection Links, open a list of claims in one MMIS window or tab, and then copy/paste the ICN number in a second MMIS window or tab to review that specific claim. You can then alternate between windows or tabs and look up multiple ICNs. Figures 31 through 35 describe how to set up the Activate Row Selection Links feature and use it to look up multiple ICNs in the Claims subsystem.

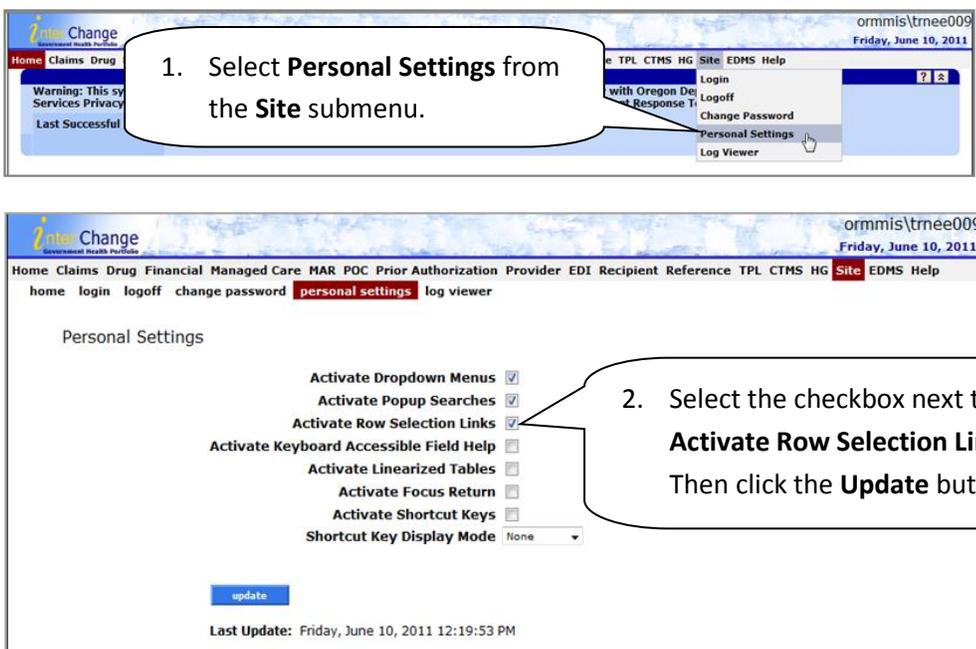
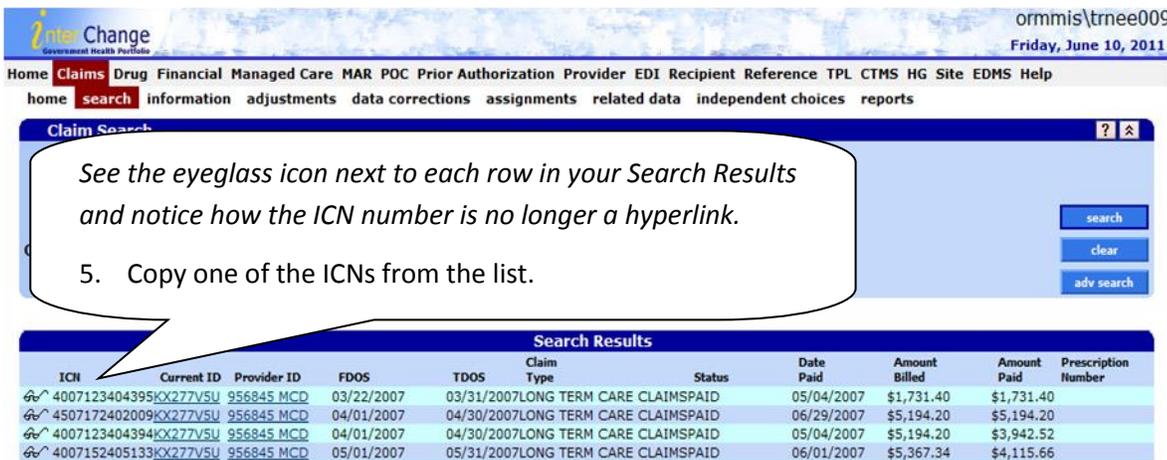
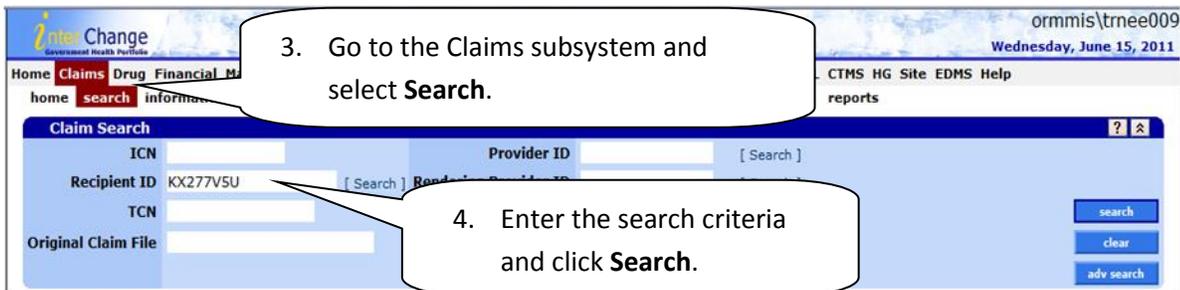
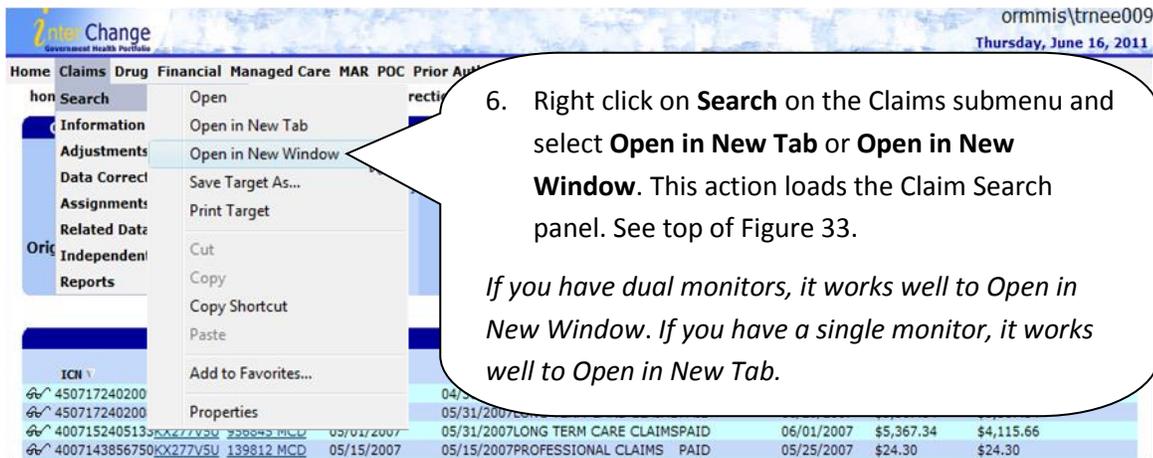


Figure 31 – Setting the Activate Row Selection Links



See the eyeglass icon next to each row in your Search Results and notice how the ICN number is no longer a hyperlink.

5. Copy one of the ICNs from the list.



6. Right click on **Search** on the Claims submenu and select **Open in New Tab** or **Open in New Window**. This action loads the Claim Search panel. See top of Figure 33.

If you have dual monitors, it works well to Open in New Window. If you have a single monitor, it works well to Open in New Tab.

Figure 32 – Using Activate Row Selection Links

ormmis\trnee009
Thursday, June 16, 2011

Home **Claims** Drug Financial Managed Care MAR POC Prior Authorization Provider EDI Recipient Reference TPL CTMS HG Site EDMS Help

home search information adjustments data corrections assignments related data independent choices reports

Claim Search

ICN 4507172402009

Recipient ID

TCN

Original Claim File

7. Paste the ICN in the ICN field and click search.
You'll see claims information for that ICN.
See example below.

search clear adv search

ormmis\trnee009
Thursday, June 16, 2011

Home **Claims** Drug Financial Managed Care MAR POC Prior Authorization Provider EDI Recipient Reference TPL CTMS HG Site EDMS Help

home search information adjustments data corrections assignments related data independent choices reports

Next Search By: ICN

UB04 Claim

ICN 4507172402009
ADJUSTMENT

Prev ICN

Current ID* KX277V5U [Search]

Last Name JAMES

First Name ELI

DOB 06/12/1930

Cert #

Diagnosis 1 - 1533

Pat Status* 30 [Search]

MRN

TPR Code

Claim Type LONG TERM CARE CLA

Provider 956845 MCD [Search]

Attend Prov 185326 [Search]

Other Prov 1 [Search]

Other Prov 2 [Search]

Facility ID 956845 MCD [Search]

Status* PAID

FDOS* 04/01/2007

TDOS* 04/30/2007

Date Billed* 06/21/2007

Date Paid 06/29/2007

Admit Date

Details 1

Total Days 0

Cvd Days 0

Ncvd Days 0

Billed \$5,194.20

TPL \$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

You can now alternate between the two windows or two tabs and review multiple claims by copying and pasting the ICNs. See Figures 34 and 35.

UB04 Claim Select an area to add or modify

Additional Claim Information Adjustment Information Attachment CAS Inquiry

Case Descriptors Cash Disposition Check Claim Batch File

Claim Image Condition Data Correction Note Decision Rules

Diagnosis Display TCN DRG EOB

Error Health Program ICD-9-CM Link Image

Location Medicare Information Misc Information Occurrence

adjust

Figure 33 – Using Activate Row Selection Links

Claims Search x Claims Search

ormmis\trnee009
Thursday, June 16, 2011

Home **Claims** Drug Financial Managed Care MAR POC Prior Authorization Provider EDI Recipient Reference TPL CTMS HG Site EDMS Help

home search information adjustments data corrections assignments related data independent choices reports

Claim Search

ICN

Recipient ID KX277V5U [Search] Rendering Provider ID [Search]

TCN

Case Number

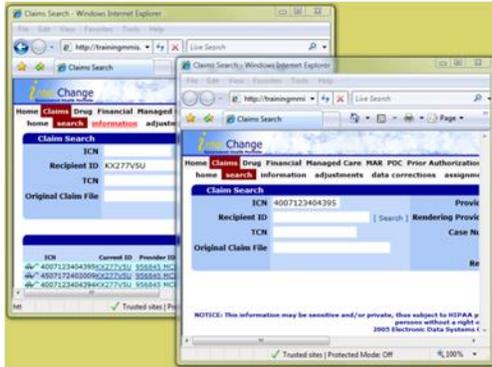
Original Claim File

Records 20

search clear adv search

If you opened two tabs, you can alternate between them.

Figure 34 – Alternating Between Two Tabs



If you opened two MMIS windows, you can stack both windows on a single monitor.

OR

You can place one MMIS window on one monitor and one window on the other monitor.

Figure 35 – Viewing Options for Two Windows

[10] Introduction: Recipient Data Inquiry

Sections 11 through 15 of the 2014 Regional Meetings Presentation Guide provide step-by-step instructions on how to query recipient information, including recipient demographics, recipient benefit plans and managed care/coordinated care enrollment, TPL, and managed care exemptions.

[11] MMIS as the Final Authority

The MMIS should always be considered the final authority when verifying any aspect of a recipient's Medicaid coverage. A number of systems interface with the MMIS and provide data updates. These updates can occur in real time or in overnight batch processes. The MMIS also receives information periodically, such as during daily, weekly, semi-monthly, or monthly processes. However, it is the current information in the MMIS that is used to verify everything related to a recipient's Medicaid coverage. For example, providers verify a recipient's eligibility through the Provider Web Portal and the Automated Voice Response (AVR) system. Both of these systems access the most recent eligibility information directly from the MMIS. Claims are also processed using the recipient's most recent eligibility and enrollment information available in the MMIS. So it is important to always look to the MMIS when verifying a recipient's benefit plan, coordinated care or managed care enrollment, TPL, managed care exemption, or any other aspect of the recipient's Medicaid coverage.

[12] Recipient Record

A number of new fields have been added to the Recipient Information panel and most are self-explanatory. There are, however, two new fields that require some explanation and those are described in Figure 1, which was taken from the Production MMIS (no PHI). All other Recipient Information panel images in this document have been copied from the MMIS Training environment and do not display all the new fields.

The screenshot shows the Recipient Information panel in MMIS. The interface includes a search bar at the top right and a list of fields on the left. The main area displays the recipient's information, including Active status, Linked ID, Benefit Plan, Coverage, TBQ Record, Managed Care, TPL, TPL Good Cause, Lockin, Level of Care, Patient Liability, Medicare Buy-in, Case/Certification, Pregnancy Due Date, Renewal Date, and Case Management. Two callouts provide explanations for the TBQ Record and Renewal Date fields.

The TBQ Record field indicates the status of the recipient's TBQ Record. TBQ (Territory Beneficiary Query) is the process by which data is exchanged between the MMIS and CMS for recipients with Medicare. Status categories include NA, Pending, Mismatch, and Applied.

The Renewal Date field indicates the date the recipient's recertification is due.

Figure 1 - TBQ and Renewal Date Fields

Recipient information can be found in the Recipient subsystem and includes information about a recipient's demographics, eligibility, and enrollment.

Figures 2 through 5 describe how to search for a Recipient and view the record.

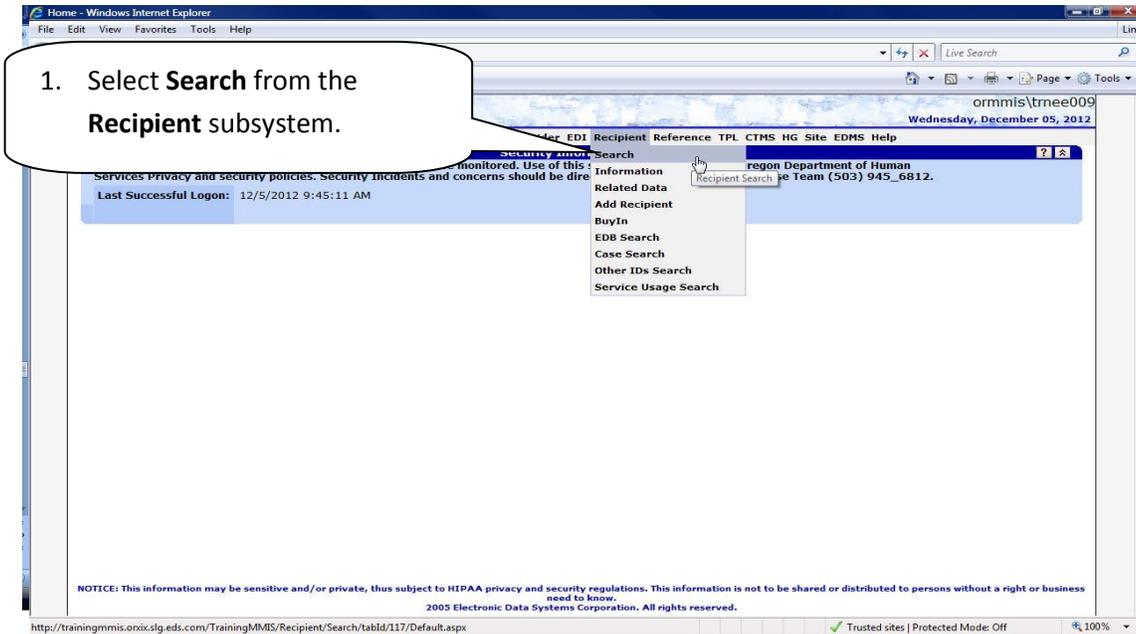


Figure 2 - Recipient Search

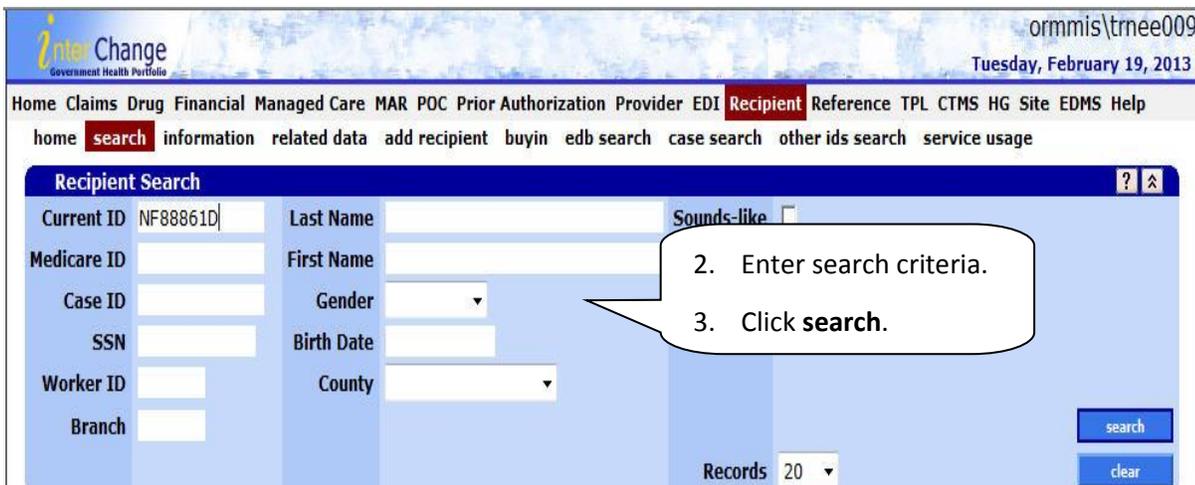


Figure 3 - Recipient Search Panel

Recipient Demographic Information

Recipient Information			
Current ID	NF88861D	Name	HOOTS, FREDRIC
Medicare ID	2976503980	Prev Name	HOOTS, FREDRIC
SSN	484-72-3842	Address	1558 WOODRIDGE LANE
Gender	FEMALE	Address 2	
Birth Date	04/14/1942	Address 3	
Death Date		City	BERTHOUD
Age	70	State	OR
Race	A	Zip	97236-0000
Other Race		Phone	(250)144-5336
Ethnicity	00 Not Hispanic	Phone Type	Home
Citizen	U	Add Phone	
Language	HMN	Add Phone Type	No Phone
Correspondence Language	HMN	Country	051 - Multnomah
Worker ID	ZN	Lockin	
Branch ID	3515	Level of Care	APDL 06/01/2012 - 04/30/2013
Material Suppress	No	Patient Liability	
Company Name		Medicare Buy-in	
HNA Indicator	No	Case/Certification	ED28610SSD A ZN 3515 06/01/2010
		Pregnancy Due Date	
		Medical Case Management	No
		Disease Case Management	No
		Print Format	NOT APPLICABLE
		Premium Arrearage	No
		NF/Hospice Restrict	No

The recipient's demographic information is displayed in the left-hand columns of the **Recipient Information** panel.

The **HNA Indicator** field indicates if the recipient has Native American or Alaska Native status.

Figure 4 - Recipient Information Panel

Active	Active
Linked ID	
Benefit Plan	CRN 01/20/2009 - 12/31/2299
Medicare Coverage	A & B & D
Managed Care	DCO 07/01/2007 - 12/31/2299
TPL	No
TPL Good Cause	N Recipient has no private health insurance
Lockin	
Level of Care	APDL 06/01/2012 - 04/30/2013
Patient Liability	
Medicare Buy-in	
Case/Certification	ED28610SSD A ZN 3515 06/01/2010
Pregnancy Due Date	
Medical Case Management	No
Disease Case Management	No
Print Format	NOT APPLICABLE
Premium Arrearage	No
NF/Hospice Restrict	No

The recipient's eligibility and enrollment information is displayed in the right-hand column of the **Recipient Information** panel.

Important: Do not use the **TPL** or **TPL Good Cause** fields in this panel to verify a recipient's **TPL** or **Good Cause** status. Always view this information in the **TPL** subsystem for the recipient's most recent **TPL** information available in the **MMIS**. See more details starting on page 42.

Figure 5 - Recipient Information Panel (2)

Recipient Eligibility and Enrollment Information

Benefit Plan: Indicates the recipient's current and former Benefit Plans and dates of enrollment. A date range ending in 12/31/2299 (the MMIS infinity date) indicates the recipient's current enrollment.

Medicare Coverage: Indicates whether or not the recipient is covered under Medicare A, B, and D. If the recipient has Part C coverage, there is no Part C flag in this field. However, you will find Part C information in the same panels as Part D.

Managed Care: Indicates the recipient's current and former enrollment in a Managed Care or Coordinated Care Plan, and displays the dates of enrollment.

TPL (Third Party Liability): This field may not reflect the most recent information about a recipient's TPL coverage. For the most recent information available in the MMIS about a recipient's TPL, always view the recipient's TPL record in the TPL subsystem. See more details starting on page 42.

Good Cause: This field may not reflect the most recent information about a recipient's Good Cause status. For the most recent information available to the MMIS about a recipient's Good Cause status, always view the recipient's TPL record in the TPL subsystem. See more details starting on page 42.

Level of Care & Patient Liability: Refers to patient care in a nursing facility. These fields indicate the Level of Care and whether the recipient has Patient Liability entered on their record.

Medicare Buy-In: Indicates if a recipient with Medicare coverage participates in a Medicare Buy-In Program.

Case/Certification: Displays the recipient's case number and their most recent eligibility date in that case. If the recipient is currently in or has been in more than one case, then multiple rows display. The last three letters of the case number is the agency code and indicates the agency where the recipient's eligibility was determined (example: ED28610SSD). See the following list of agency codes:

Agency Codes

- AFS – Adult and Family Services
- CSD – Children’s Services Division
- FST – SNAP
- HIX – Health Insurance Exchange/Cover Oregon
- MHA – Mental Health Agency
- OHA – Oregon Health Authority
- OYA – Oregon Youth Authority
- SSD – Senior Services Division

Medical Case Management - Disease Case Management: Indicates whether the recipient is enrolled in a case management program for individuals with certain chronic conditions, such as asthma or diabetes.

Premium Arrearage: Indicates whether the recipient is in arrears on their OHP Premium payments.

NF/Hospice Restrict: Indicates if the recipient is receiving hospice care while residing in a nursing facility.

[13] Benefit Plan and Case Information

Information about the recipient's current and former benefit plans can be found on the Benefit Plan panel in the Recipient subsystem. See Figures 6 through 9.

1. Select the **Recipient** group on the **Recipient Maintenance** panel.

2. Click the **Benefit Plan** hyperlink.

Current ID	NF88861D	Name	HOOTS, FREDRIC	Active	Active
Medicare ID	2976503980	Prev Name	HOOTS, FREDRIC	Linked ID	
SSN	484-72-3842	Address	1558 WOODRIDGE LANE	Benefit Plan	CRN 01/20/2009 - 12/31/2299
Gender	FEMALE	Address 2		Medicare Coverage	A & B & D
Birth Date	04/14/1942	Address 3		Managed Care	DCO 07/01/2007 - 12/31/2299
Death Date		City	BERTHOUD	TPL	No
Age	70	State	OR	TPL Good Cause	N Recipient has no private health insurance
Race	A	Zip	97236-0000	Lockin	
Other Race		Phone	(250)144-5336	Level of Care	APDL 06/01/2012 - 04/30/2013
		Phone Type	Home	Patient Liability	
				Medicare Buy-in	A & B
				Case/Certification	ED28610SSD A ZN 3515 06/01/2010
				Pregnancy Due Date	
				Medical Case Management	No
				Disease Case Management	No
				Print Format	NOT APPLICABLE
				Premium Arrearage	No
				NF/Hospice Restrict	No

Figure 6 – Maintenance Panel

The Benefit Plan panel displays the recipient's current and former Benefit Plan enrollments.

3. Select any of the **Benefit Plan** line items to view additional information.

Benefit Plan	Status	Stop Reason	Financial Payer	Effective Date	End Date
SMHS State Medicaid Mental Health Services	Active	Default	1 DEFAULT	01/20/2009	12/31/2299
BMM QMB + OHP with Limited Drug Package (BMM)	Active	Default	1 DEFAULT	08/01/2011	12/31/2299
CRN Contract Nursing	Active	Default	1 DEFAULT	01/20/2009	12/31/2299
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2012	04/30/2013
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	09/01/2011	05/31/2012
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2011	07/31/2011
BMM OHP Plus	Active	Default	1 DEFAULT	01/20/2009	07/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2010	05/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2009	05/31/2010
CRN Contract Nursing	Active	Default	1 DEFAULT	06/01/2008	01/19/2009

Figure 7 - Benefit Plan Panel

Benefit Plan Details

The Benefit Plan panel displays information that provides more details about the recipient's Benefit Plan enrollment. See Figure 8. The **Benefit Plan** column displays the names of the recipient's Benefit Plans. The **Status** column indicates if the Benefit Plan is in an Active (valid) status or History (invalid) status during the date segments listed in the Effective Date and End Date columns. The **Effective Date** and **End Date** columns display the dates that enrollment in each plan became effective and the dates each plan ended or will end.

Benefit Plan	Status	Stop Reason	Financial Payer	Effective Date	End Date
SMHS State Medicaid Mental Health Services	Active	Default	1 DEFAULT	01/20/2009	12/31/2299
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2012	04/30/2013
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	09/01/2011	05/31/2012
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2011	07/31/2011
BMH OHP Plus	Active	Default	1 DEFAULT	01/20/2009	07/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2010	05/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2009	05/31/2010
APD Aged and Physically Disabled	History	Default	1 DEFAULT	06/01/2008	05/31/2009
BMH OHP Plus	Active	Default	1 DEFAULT	06/01/2008	01/19/2009
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2008	01/19/2009

Figure 8 - Benefit Plan Columns

Aid Category and Case Descriptors Data

The Benefit Plan panel also displays the recipient's Aid Category and Case Descriptors Data for each benefit plan. Figure 9 describes how to view the Aid Category and Case Descriptors Data.

Benefit Plan

Status: Active Only | Benefit Plan: [Dropdown]

Effective Date: [Text] | End Date: [Text]

Benefit Plan	Status	Stop Reason	Financial Payer	Effective Date	End Date
SMHS State Medicaid Mental Health Services	Active	Default	1 DEFAULT	01/20/2009	12/31/2299
CRN Contract Nursing	Active	Default	1 DEFAULT	01/20/2009	12/31/2299
BMM QMB + OHP with Limited Drug Package (BMM)	Active	Default	1 DEFAULT	08/01/2011	12/31/2299
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2012	04/30/2013
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	09/01/2011	05/31/2012
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2011	07/31/2011
BMH OHP Plus	Active	Default	1 DEFAULT	01/20/2009	07/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2010	05/31/2011
APD Aged and Physically Disabled	Active	Default	1 DEFAULT	06/01/2009	05/31/2010
CRN Contract Nursing	Active	Default	1 DEFAULT	06/01/2008	01/19/2009

1 2 3 4Next >

Type changes below.

Benefit Plan* BMM QMB + OHP with Limited Drug Package (BMM) | Effective Date* 08/01/2011

Status Active | End Date* 12/31/2299

Stop Reason Default

Financial Payer* 1 DEFAULT

-Aid Category Data-

Select row below to update -or- type data below to add.

Aid Category	Aid Category Effective Date	Aid Category End Date	Case Number
1 Old Age Assistance	11/28/2011	12/31/2299	ED286105
A1 OAA Medical Only	08/01/2011	11/27/2011	

Aid Category* 1 Old Age Assistance

Case Number* ED286105 SD [Search]

Worker ID ZN

Branch ID* 3515 MID MULT ADS

Person Status Code* AD

-Case Descriptors Data-

Select row below to update -or- type data below to add.

Case Descriptor
IHC
APD

1. On the **Benefit Plan** panel, select the line item for the **Aid Category Data** you wish to view.
The Aid Category Data populates.

2. Select a line item in the **Aid Category Data** section of the panel to view the **Case Descriptors Data**.

Figure 9 - Aid Category & Case Descriptors Data

The Mailing Address Data shown on the Benefit Plan panel displays the address that is used for all recipient mailings. See Figure 10. The Residential Zip and Residential County codes are used to determine a recipient's Coordinated Care or Managed Care enrollment. If the recipient's residential address is different from the mailing address, then the Residential Address Data will display a different address.

Mailing Address Data Select row below to update -or- type data below to add.

Address	Address 2	Address 3	City	State	Mailing Zip	Mailing Zip 4	Residential Zip	Company Name
1487 WOODRIDGE LANE			BERTHOUD	OR	97236	0000	97236	

Type changes below.

Address* 1487 WOODRIDGE LANE Mailing Zip* 97236 0000
 Address 2 Residential Zip* 97236
 Address 3 Residential County* 051 Multnomah
 City* BERTHOUD Company Name
 State* OR

Residential Address Data Select row below to update -or- type data below to add.

*** No rows found ***

Select row above to update -or- click Add button below.

Address City
 Address 2 State
 Address 3 Zip
 County

Figure 10 - Mailing Address Data

Case Information

To find the names of all members who are part of the same case, you can perform a Case Search from the Recipient subsystem. See Figures 11 through 13.

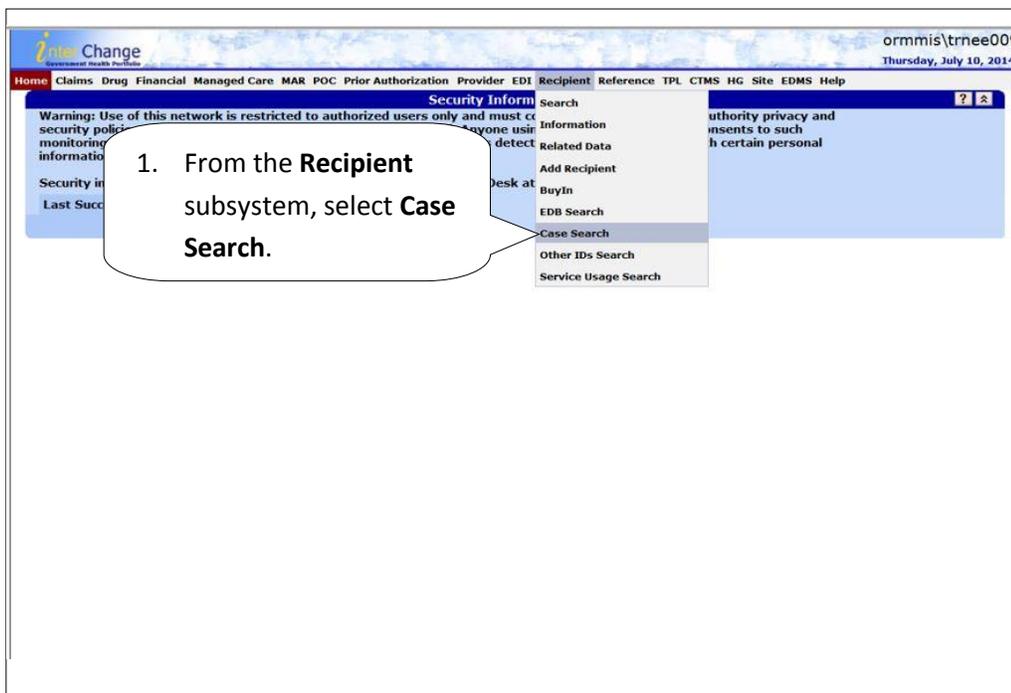


Figure 11 - Recipient Case Search

ormmis\trnee009
Thursday, July 10, 2014

Home Claims Drug Financial Managed Care MAR POC Prior Authorization Provider EDI Recipient Reference TPL CTMS HG Site EDMS Help

home search information related data add recipient buyin edb search case search other ids search service usage

Case Search

Case Number: Last Name:
 Current ID: HK17711U First Name:
 Worker ID: MI:
 Branch ID:

Records: 20

search clear add

Search Results

Case Number	Last Name	First Name	MI	Worker ID	Branch ID	In-Grant	Case Status
AMR1992AFS	QUARTERMAN	KEELEY	U	CH	1403	Child	VP
DL06783AFS	QUARTERMAN	KEELEY	U	CH	1403	Ineligible	CL

2. Enter search criteria.
This example shows a search by Current ID.

3. Click **search**.

4. From the **Search Results**, select the active case.
If the recipient is in only one case, then the system will not display Search Results and will take you directly to the recipient's case record.

Figure 12 - Case Search Results

ormmis\trnee009
Thursday, July 10, 2014

Home Claims Drug Financial Managed Care MAR POC Prior Authorization Provider EDI Recipient Reference TPL CTMS HG Site EDMS Help

home search information

Case Number: AM
 Worker ID: CH
 Branch ID: 1403
 Company Name:

Case Maintenance

Select area to add or modify

Base Information

Case Members

Current ID	Person Letter Code	Last Name	First Name	MI	Certification Date
HK17711U	G	QUARTERMAN	EDWIN	B	05/31/2011
SR47721X	H	QUARTERMAN	DUNG	D	05/31/2011
SR47721Y	J	QUARTERMAN	JAYME	L	05/31/2011

save cancel

Current ID: [Search] Certification Date:
 Person Letter Code: In-Grant:
 Last Name:
 First Name:
 MI:

5. Select **Case Members** on the **Case Maintenance** panel. A list of all case members for this case will display in the **Case Members** panel.

6. To view the recipient's record in a separate window, select the recipient's ID number under the **Current ID** column.

7. To view additional case information, select a row in the **Case Members** panel. This action populates the fields and removes the Current ID hyperlinks.
*To get the Current ID hyperlinks to reappear, click on the **Current ID** column heading.*

Figure 13 - Case Members Panel

[14] Coordinated Care and Managed Care Enrollment

Transitioning to Coordinated Care

The State of Oregon began transitioning from Managed Care Organizations (MCOs) to Coordinated Care Organizations (CCOs) in August of 2012 as part of an overall effort to improve health care for all Oregonians. At that time, the MMIS began displaying both MCO and CCO enrollment information for recipients. Throughout this guide, there are references to both Coordinated Care and Managed Care enrollment for OHP (Medicaid) clients. The goal of the CCO transition is to move all Managed Care Organizations into a Coordinated Care Organization over time. However, even after this CCO transition is complete, you will still see MCO enrollment data in the MMIS because the system maintains a history of each recipient's current and former MCO and CCO enrollment.

Recipient Case Enrollment

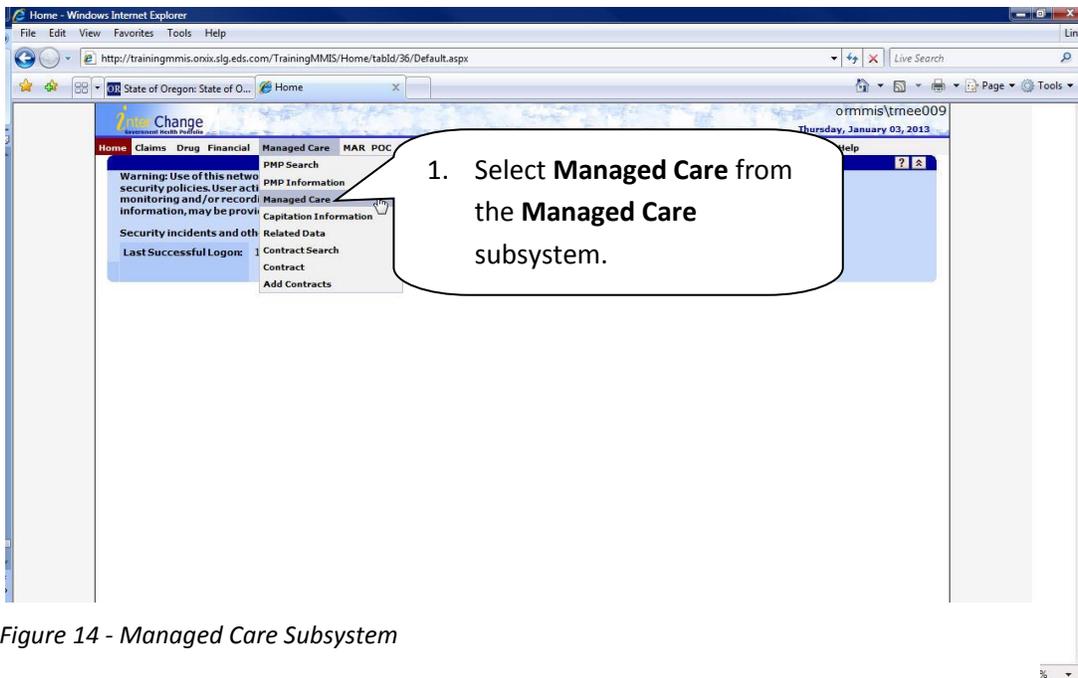


Figure 14 - Managed Care Subsystem

Information about a recipient's current and former Coordinated Care or Managed Care enrollment can be found in the Managed Care subsystem. You can also view a list of Managed Care and Coordinated Care Organizations available to the recipient in their geographic region based on their address of residence. Figures 14 - 18 describe how to view the recipient's enrollment information.

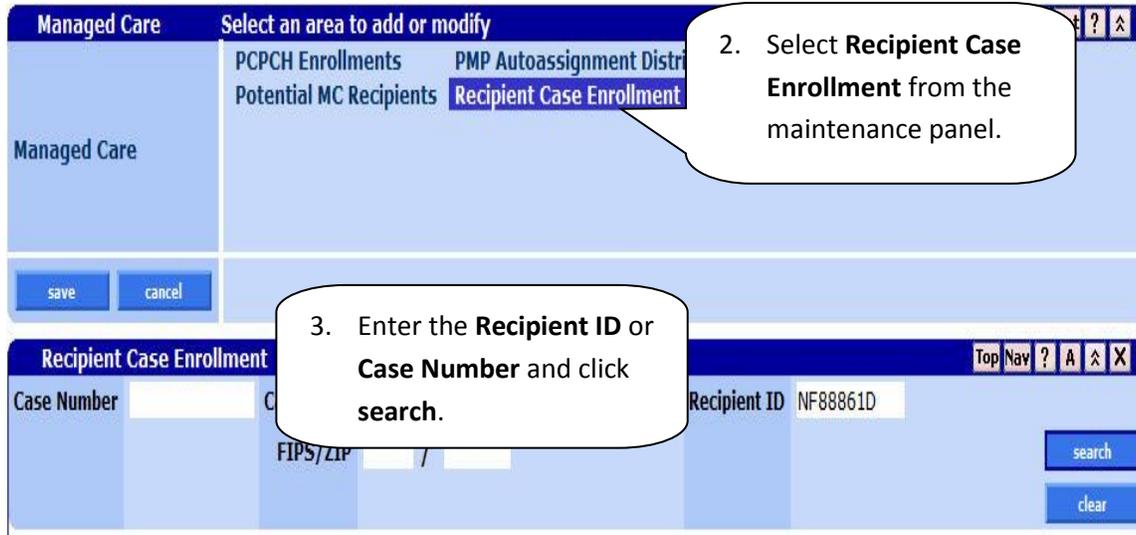


Figure 15 - Recipient Case Enrollment Search

A list of the recipient's current and former Coordinated Care and Managed Care enrollments is displayed in the Enrollments panel.

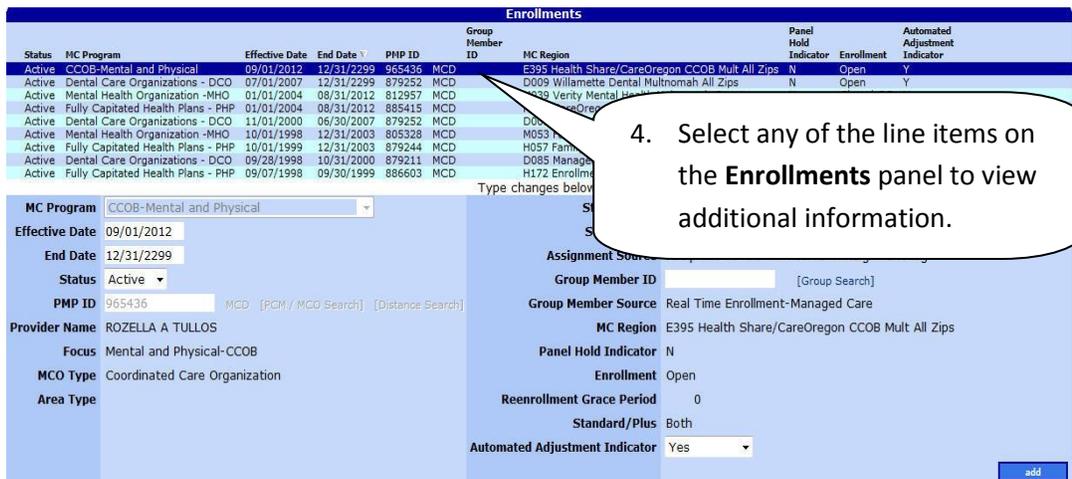


Figure 16 - Enrollments Panel

Enrollments Details

The Enrollments panel displays information that provides additional details about a recipient's current and former Coordinated Care and Managed Care enrollments. See Figure 17.

Enrollments										
Status	MC Program	Effective Date	End Date	PMP ID	Group Member ID	MC Region	Panel Hold Indicator	Enrollment	Automated Adjustment Indicator	
Active	CCOB-Mental and Physical	09/01/2012	12/31/2299	965436	MCD	E395 Health Share/CareOregon CCOB Mult All Zips	N	Open	Y	
Active	Dental Care Organizations - DCO	07/01/2007	12/31/2299	879252	MCD	D009 Willamette Dental Multnomah All Zips	N	Open	Y	
Active	Mental Health Organization -MHO	01/01/2004	08/31/2012	812957	MCD	M039 Verity Mental Health Multnomah County	Y	Closed CC	Y	
Active	Fully Capitated Health Plans - PHP	01/01/2004	08/31/2012	885415	MCD	H163 CareOregon Multnomah All Zips	Y	Closed CC	Y	
Active	Dental Care Organizations - DCO	11/01/2000	06/30/2007	879252	MCD	D009 Willamette Dental Multnomah All Zips	N	Open	Y	
Active	Mental Health Organization -MHO	10/01/1998	12/31/2003	805328	MCD	M053 FamilyCare Mental Health Tri-Counties	Y	Closed CC	Y	
Active	Fully Capitated Health Plans - PHP	10/01/1999	12/31/2003	879244	MCD	H057 FamilyCare Multnomah All Zips	Y	Closed CC	Y	
Active	Dental Care Organizations - DCO	09/28/1998	10/31/2000	879211	MCD	D085 Managed Dental Multnomah All Zips	N	Open	Y	
Active	Fully Capitated Health Plans - PHP	09/07/1998	09/30/1999	886603	MCD	H172 Enrollment	Y	Closed ME	Y	

Figure 17 - Enrollments Panel Columns

The **Status** column indicates if the Enrollment is in an Active (valid) status or History (invalid) status during the date segments listed in the Effective Date and End Date columns. The **MC Program** column displays the type of Coordinated Care or Managed Care Organization. The **Effective Date** and **End Date** columns display the dates that enrollment in each plan became effective and the dates each plan ended or will end. The **MC Region** column displays the region code and name of the Coordinated Care or Managed Care plan. The **Enrollment** column indicates whether or not that specific Coordinated Care or Managed Care plan is open for new enrollment.

The PCM/MCO section of the Recipient Case Enrollment panel displays all the Coordinated Care and Managed Care plans available in the recipient's geographic region based on the recipient's address of residence (FIPS/ZIP). See Figure 18.

PCM / MCO										
MCRegion	Provider ID	Provider Name	Provider ID Type	MC Program	NPI	MCD	Standard/Plus	Panel Hold Indicator	Enrollment	Reenrollment Grace Period
D013 Capitol Dental Multnomah All Zips	879394	MENDY R SIDWELL	MCD	Dental Care Organizations - DCO		879394	Both	N	Open	0
D221 CareOregon Dental Multnomah All Zips	257311230	SIU H RIZZI	MCD	Dental Care Organizations - DCO		257311230	Both	N	Open	0
D213 Advantage Dental - Multnomah County All Zips	815761	PRINCE H SKATES	MCD	Dental Care Organizations - DCO		815761	Both	N	Open	0
D202 Access Dental Plan Multnomah County All Zips	960020	CODY L FABRY	MCD	Dental Care Organizations - DCO		960020	Both	N	Open	0
M039 Verity Mental Health Multnomah County	812957	ELVINA C KINKEAD	MCD	Mental Health Organization - MHO		812957	Both	Y	Closed CC	0
PACE Multnomah County	752340	CHRIS E SHUEY	MCD	PACE Assignment Plan - PACE		752340	Both	N	Open	0
C2JT Enrollment	8106854849	VIVA R MARTINE	NPI	Primary Care Managers - PCM	8106854849	807046	Both	N	Open	0
C2JH Enrollment	8095826778	ALISTIA P BOTELLO	NPI	Primary Care Managers - PCM	8095826778	724100	Both	Y	Closed	0
C2LB Enrollment	8681635300	DALENE M EARLEY	NPI	Primary Care Managers - PCM	8681635300	789006	Both	N	Open	0
C2L5 Enrollment	8570661318	SHALA X TUNE	NPI	Primary Care Managers - PCM	8570661318	737290	Both	Y	Closed	0

< Previous 1 2 3 4 5 6 7 8 9 10 ...Next >

Figure 18 - PCM/MCO Panel

Managed Care Exemptions

A Managed Care Exemption is placed on a recipient's record to prevent auto-enrollment into a Coordinated Care or Managed Care plan. Managed Care Exemption information can be found in the Recipient subsystem and is titled MC Special Conditions. Figures 19 and 20 describe how to look up a recipient's Managed Care Exemption.

Citizen	U	Add Phone Type	No Phone	Case/Certification	IK35144SSD A QU 3417 06/10/2010
Language	ENG	County	067 - Washington	Pregnancy Due Date	
Correspondence Language	ENG	County Office ID	C	Medical Case Management	No
Worker ID	QU	Alternate Contact Name		Disease Case Management	No
Branch ID	3417	Living Arrangement	XX	Print Format	NOT APPLICABLE
Material Suppress	No	Priority Notes	No Notes	Premium Arrearage	No
Company Name				NF/Hospice Restrict	No
HNA Indicator	No				

Recipient Maintenance	
Select area to add or modify below.	
Encounter Threshold	MC Special Conditions
PMP Lockout	
Recipient Managed Care	
Medicare	
Previous Data	

1. Select **MC Special Conditions** on the **Recipient Maintenance** panel.

Figure 19 – MC Special Conditions Panel

The example below displays a Managed Care Exemption with three separate MC Special Condition codes, one for FCHP, PCO, and CCOB. These three codes ensure that the recipient will not be auto-enrolled into any physical health plan, including Kaiser (the only PCO). You may see additional CCO Special Condition codes to prevent auto-enrollment into other CCOs that cover physical health.

The screenshot shows the 'MC Special Conditions' panel. At the top, there are navigation tabs: 'Encounter Threshold', 'MC Special Conditions', 'PMP Assignment History', and 'PMP Lockout'. Below these is a table with the following data:

Special Condition Code	Effective Date	End Date	Start Reason	Stop Reason
Exempt from FCHP enrollment	01/01/2013	12/31/2299	Third Party Liability	Future Close
Exempt from PCO enrollment	01/01/2013	12/31/2299	Third Party Liability	Future Close
Exempt from CCOB enrollment	01/01/2013	12/31/2299	Third Party Liability	Future Close

Below the table is a form to add or edit a condition. The 'Special Condition Code' is 'EXF - Exempt from FCHP enrollment'. The 'Effective Date' is '01/01/2013' and the 'End Date*' is '12/31/2299'. The 'Start Reason*' is 'Third Party Liability' and the 'Stop Reason*' is 'Future Close'. An 'add' button is at the bottom right.

A callout box contains the text: "The recipient's exemption is displayed on the MC Special Conditions panel." Below this, a numbered list item reads: "2. Select one of the line items to populate the fields."

Figure 20 – MC Special Conditions Panel (2)

[15] Third Party Liability (TPL)

A recipient's third party insurance information can be found in the TPL subsystem, including policy details, coverage information, and a list of dependents covered on each policy. You can also determine whether Good Cause has been applied to the recipient's third party insurance. Figures 21 through 28 describe how to view TPL information.

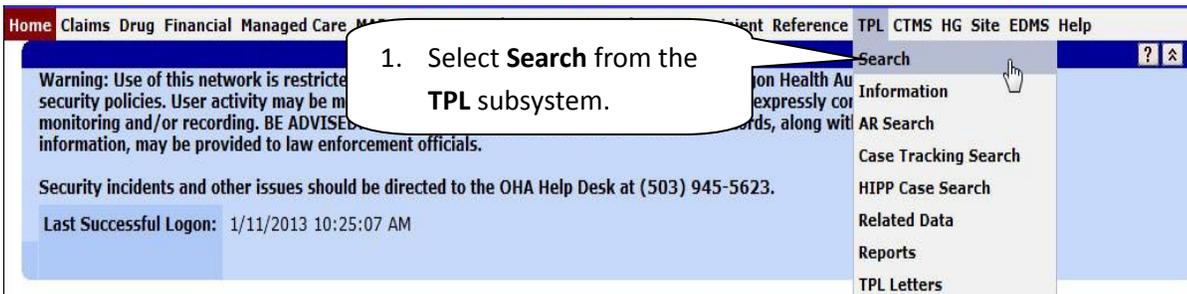


Figure 23 - TPL Subsystem

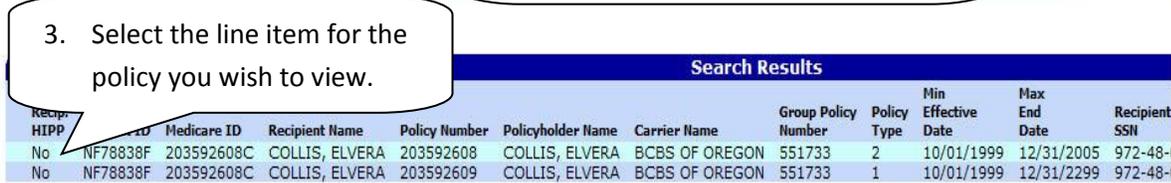
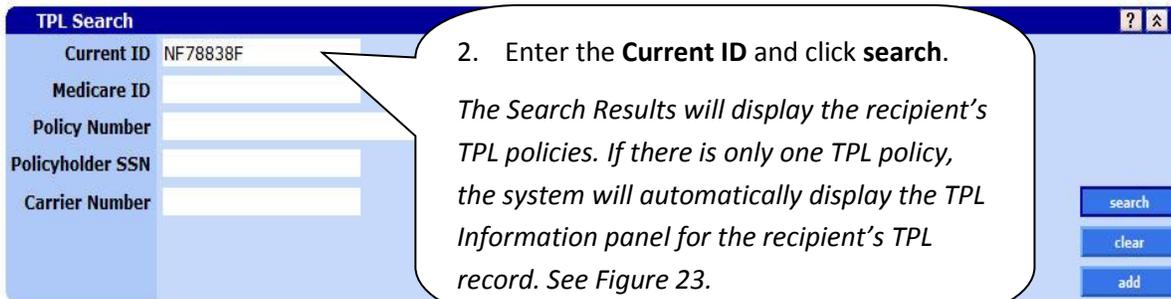
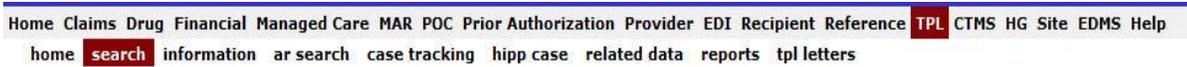


Figure 22 - TPL Search

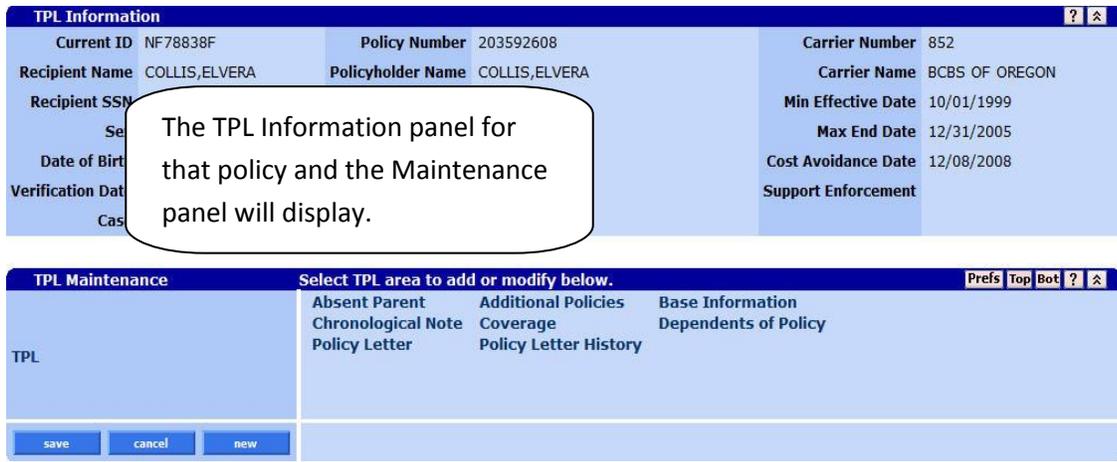


Figure 21 - TPL Information & Maintenance Panels

TPL Information			
Current ID	NF78838F	Policy Number	203592
Recipient Name	COLLIS,ELVERA	Policyholder Name	COLLIS
Recipient SSN	972480236	Policyholder SSN	972480
Sex	F	Policy Type	2
Date of Birth	08/22/1964	Absent Parent	
Verification Date	12/08/2008	Date of Death	
Case	IK35144SSD		

4. To view additional details about the recipient's TPL, select panels such as **Additional Policies**, **Coverage**, and **Dependents of Policy** from the **TPL Maintenance** panel.

TPL Maintenance									
TPL	Select TPL area to add or modify below.								
	<table border="0"> <tr> <td>Absent Parent</td> <td>Additional Policies</td> <td>Base Information</td> </tr> <tr> <td>Chronological Note</td> <td>Coverage</td> <td>Dependents of Policy</td> </tr> <tr> <td>Policy Letter</td> <td>Policy Letter History</td> <td></td> </tr> </table>	Absent Parent	Additional Policies	Base Information	Chronological Note	Coverage	Dependents of Policy	Policy Letter	Policy Letter History
Absent Parent	Additional Policies	Base Information							
Chronological Note	Coverage	Dependents of Policy							
Policy Letter	Policy Letter History								
<input type="button" value="save"/> <input type="button" value="cancel"/> <input type="button" value="new"/>									

Figure 24 - TPL Maintenance Panel

The Base Information panel loads automatically when you select any panel from the TPL Maintenance panel. If Good Cause has been applied to the recipient's third party insurance, the Cost Avoidance, Suspect Code, and Policy Type fields display as indicated in Figure 25.

Base Information			
Current ID*	NF78838F [Search]	Cost Avoidance*	No
Recipient Name	COLLIS ELVERA	Lead Origin*	OTHER
Carrier Number*	852 [Search]	Lead Date	10/21/1999
Carrier Name	BCBS OF OREGON	Last Change Origin	
Employer ID	[Search]	Suspect Code*	GOOD CAUSE
Employer Name		Suspect Date	12/08/2008
Bill To*	Carrier	Court Order Code	
Relationship*	G [Search]	270 Sent Date	
Relationship Description	SELF	271 Received Date	
Policyholder*	Recipient	Date Last Reviewed	10/21/1999
Policyholder ID*	NF78838F [Search]	Next Review Date	04/21/2000
Policyholder Name	COLLIS ELVERA	Send 270 Inquiry	No
		Policyholder SSN	972-48-0236
		Policy Number	203592608
		Group Number Policy	551733
		Policy Type*	PRIVATE PAY NON-MM
		delete	copy

Figure 25 - Base Information Panel and Good Cause

The Coverage panel displays details for the policy. The Dependents of Policy panel displays a list of all dependents covered by the policy. The Additional Policies panel displays a list of the recipient's other TPL policies if there is more than one. See Figures 26 through 28.

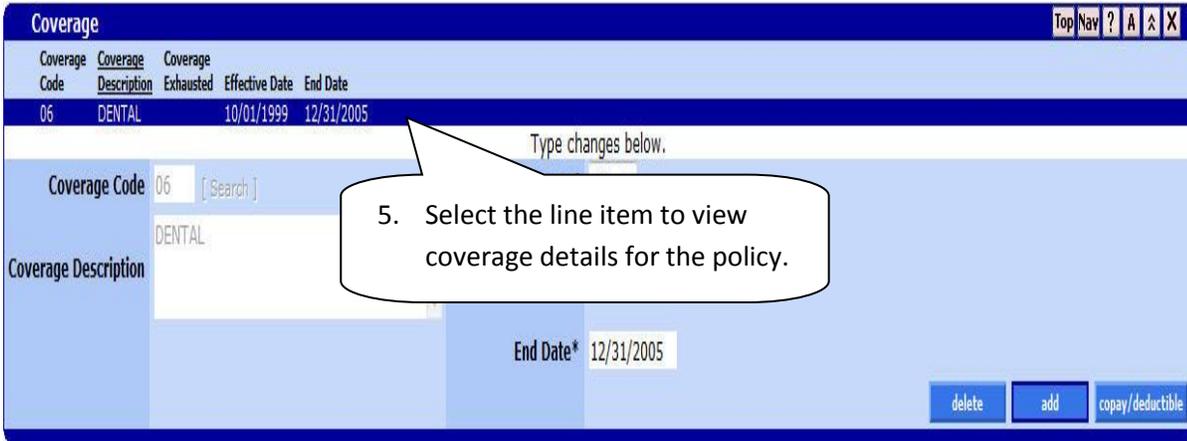


Figure 26 - Coverage Panel

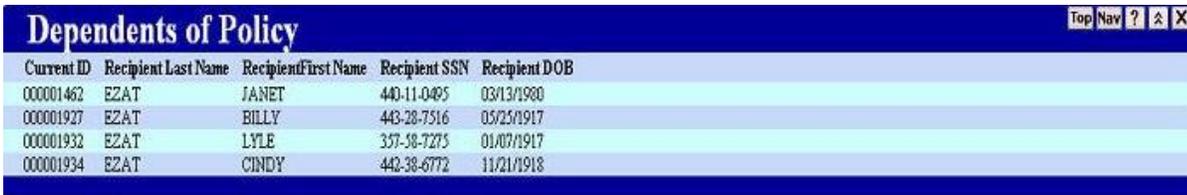


Figure 27 - TPL Dependents of Policy



Figure 28 - TPL Additional Policies Panel

[16] Additional Resources & Contact Information

Do you have MMIS training-related questions? Contact Robert Costa, MMIS Training Manager, OHA, at robert.m.costa@state.or.us

Do you want to sign up for MMIS training? Go to the DHS/OHA Learning Center at the following link: <https://dhslearn.hr.state.or.us> If you cannot find the training you're looking for, contact Robert Costa.

Does your department need customized MMIS training, or would you like to schedule a one-on-one tutorial? Contact Robert Costa.

Are you experiencing technical issues with the MMIS, such as not being able to log in? Contact the DHS/OHA Service Desk at 1-503-945-5623 or dhs.servicedesk@state.or.us