



Medical Programs Ex Parte RRR and Auto Re-Enrollment RRR Process

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Description	This document is a process guide for CBMS users, instructing them on the automated business process for the Medical Programs <i>Ex Parte RRR</i> and <i>Auto Re-enrollment RRR Process</i> .	
Overview	Section	Page
	1.0 Overview	2
	2.0 Summary of Changes	2
	3.0 View RRR Detail Listing Window Changes	4
	4.0 Ex Parte RRR Process	7
	5.0 Auto Re-Enrollment RRR Process	9
	6.0 Medical Redetermination Notice	10
	7.0 Notice of Action Client Correspondence	15
	8.0 Case Comments	16
	8.1 Ex Parte Case Comments	16
	8.2 Auto Re-Enrollment Case Comments	17
	9.0 Alerts	18
	10.0 CBMS Ex Parte RRR Reports	21
	10.1 CBMS Authorized Ex Parte RRR Detail List Report	21
	10.2 CBMS Ex Parte RRR County/Med Site Summary	23
	10.3 CBMS Ex Parte RRR State Summary	25
	11.0 CBMS Auto Re-Enrollment RRR Reports	28
11.1 CBMS Authorized Auto Re-Enrollment RRR Detail List Report	28	
11.2 CBMS Auto Re-Enrollment RRR Pending Results Detail List Report	30	
11.3 CBMS Auto Re-Enrollment RRR County/Med Site Summary	32	
11.4 CBMS Auto Re-enrollment State Summary	34	



1.0 Overview

General Information

By relying on information received from another source, the State can avoid unnecessary and repetitive requests for information from families in the form of multiple redetermination/recertification requests. In order to increase retention of Medical coverage, use of an *Ex Parte Process* and an *Auto Re-enrollment Process* is required by the federal Health Care Financing Administration (HCFA).

PL111-3, Children's Health Insurance Program Reauthorization Act of 2009, Section 203 and Section 212, *Code of Federal Regulations (C.F.R.), 42 CFR 435.902* and *435.916*, requires State CHP and Medicaid agencies complete an Ex Parte determination for Medicaid cases if information is received from another source. This federal legislation is authorized for Colorado by policy at *10-CCR 2505-10 HCPF Staff Manual Volume 8* at *8.100.3.Q.3* and *8.100.3.Q.4*.

The *Ex Parte Process* is the procedure to use other Programs' redetermination data for Medical programs redetermination if received within three months of the due date for the Medical redetermination due date.

The *Auto Re-enrollment Process* is to automatically start the *RRR* determination for all specified Medical programs even if the Redetermination Notice is not returned. This will eliminate the auto termination of Medical benefits at RRR.

2.0 Summary of Changes

General Information

In an effort to streamline the redetermination process for Medical and CHP+ clients, two new processes are automated:

1. The *Ex Parte RRR Process* automates the receipt of other Programs' redetermination data for use by Medicaid programs, if that redetermination is received within three months of the Medicaid redetermination due date.
2. The *Auto Re-Enrollment RRR Process* automatically runs the Medical programs *RRR* on the **Mail In Due Date** whether or not the new Redetermination Notice has been returned.
3. To support both the *Ex Parte RRR Process* and the *Auto Re-enrollment RRR Process*, new fields and field edits are added to the View RRR Detail Listing window.
4. Case Comments are system generated for both the *Ex Parte RRR Process* and the *Auto Re-enrollment RRR Process*.
5. A new Alert is system generated when an *Ex Parte RRR Process* is started for a Medical program.
6. Medical programs' Decision Tables are updated to set a new **RRR Due Date** for the *Ex Parte RRR Process*. The new **RRR Due Date** will be set for 12 months from the other program's current **RRR Due Date**. The **Reassessment Date** determination is based on when the other program's *RRR* is received.
7. For the *Ex Parte RRR Process*, if the worker that is completing the other program's *RRR* does not have update access for the Medical program, CBMS will automatically set the Authorization for the Medical program when that worker Authorizes the other program.



8. New *NOAs* have been created to be used for approval at *Ex Parte RRR* and *Auto Re-enrollment RRR*.
9. A new *Redetermination Form* is created for the Medical Programs. This new *Redetermination Form* is pre-populated with current case data for each individual.
10. Three new CBMS reports are created for the *Ex Parte RRR Process*.
11. Three new CBMS reports are created for the *Auto Re-enrollment RRR Process*.



3.0 View RRR Detail Listing Window Changes

General Information

The View RRR Detail Listing window has been changed to include two new fields:

- **Auto Re-Enrollment Date** is a system generated field that displays the date the **Auto Re-enrollment RRR Process** was run.
- **Ex Parte Date** is a system generated field that displays the date the **Ex Parte RRR Process** was run.

The screenshot shows the 'View RRR Detail Listing' window. It features a search criteria section with dropdown menus for County, Office, and Unit, and text boxes for Program Group, Status, User, Case #, Begin Month (08/2011), and End Month (10/2011). A 'Search' button is located to the right of the End Month field. Below the search criteria is a 'Search Results' table with the following data:

User Name	Case #	Case Name	Program Group	RRR Month	Current RRR Type	RRR Status
			Childrens Health Plan	08/2010	Regular	Discontin
			Family Medical Assis	09/2011	Regular	Generate
			Food Stamps	07/2011	Regular	Generate

At the bottom of the window, there are four buttons: 'CheckList...', 'Edit RRR...', 'Start RRR...', and 'More'.

View RRR Detail Listing

Search Criteria

County: Office: Unit:

Program Group: Status: User: Find...

Case #: Begin Month: 08/2011 End Month: 10/2011 Search

Search Results

RRR Status	Original RRR Month	Re-Assess Month	Mail-In Due Date	HH Type	CheckList Exists	Auto Re-enrollment Date	Packet Received	Ex Parte Date
Discontinued	08/2010	00/0000	00/00/0000		No	00/00/0000	00/00/0000	00/00/0000
Generated	09/2011	00/0000	09/09/2011		No	00/00/0000	00/00/0000	00/00/0000
Generated	07/2011	00/0000	00/00/0000	Simplified	No	00/00/0000	00/00/0000	00/00/0000

CheckList... Edit RRR... Start RRR... More

Field Information	
Field Name	Description
Search Criteria	
County	County where case is located.
Office	Office where case is located.
Unit	Unit where case is located.
Program Group	High Level Program Group (HLPG) for which the RRR is to run.
Status	The Status of the RRR .
User	The worker for the case (use the Find button).
Case #	CBMS Case #.
Begin Month	The Begin Month of the RRR period.
End Month	The End Month of the RRR Period.

Field Information Changes	
Field Name	Description
Search Results – New Fields	
Ex Parte Date	The date the Ex Parte is run.
Auto Re-enrollment Date	The date the Auto Re-enrollment is run.

Manual Update Edits

The following are the window edits for the new fields on the View RRR Detail Listing window:

1. The **Ex Parte Date** cannot be entered, updated, or deleted. The field is system populated when another program's **RRR** is started. The date entered is the **Packet Received Date** or



the **RRR Start Date**.

2. The **Auto Re-enrollment Date** cannot be entered, updated, or deleted. The field is system populated when the *Auto Re-enrollment RRR Process* is run. This occurs on the 15th of the **RRR Due Month**.



4.0 Ex Parte RRR Process

General Information

The *Ex Parte* (done by, for, or on the application of one party alone) *Process* automates the receipt of other Programs' redetermination data for use by Medicaid programs, if that redetermination is received within three months of the Medicaid **Redetermination Due Date**. This Ex Parte action allows a redetermination to occur without requiring an additional redetermination form to be completed or an additional eligibility determination.

The eligibility determination (that occurs when the Ex Parte action is initiated) will use current Decision Table logic for all programs. The guaranteed FM programs individuals' eligibility determination retains the guaranteed eligibility period.

The **Medical RRR Status** must be in **Pending, Initiated, or Generated** Status for an *Ex Parte RRR* to be started.

Process

The following are the processing steps that occur for the *Ex Parte RRR Process*:

1. When another program's **RRR Packet** is received, if the Medicaid program's **RRR Due Date** is within three months from the **Packet Received Date** or the Date the **RRR** is started, the date entered or started will be posted into the **Ex Parte Date** for the Medicaid program;
2. The **Case Complete** field will not be updated on the Medicaid case.
3. Any changes made on the case will also be used by the Medicaid program.
4. If **EDBC** is run online for the other program, the Medicaid case will also be run online.
5. If Authorization is completed online, CBMS will automatically select and complete the Authorization for the Medicaid case at the time the other program is Authorized.
6. If EDDB and Authorization are run in the nightly batch process, both programs will be completed.
7. Mass Update Exceptions will need to be resolved manually.
8. For Medicaid cases without a guaranteed program, once the RRR case action is complete, if the Medicaid case is determined eligible, the next **RRR Due Date** for the Medicaid case is determined based on the other program's current **RRR Due Date**. That is, for example, if the Medicaid case's current **RRR Due Date** is 8/31/2011 and the other program's current **RRR Due Date** is 7/31/2011, the next Medicaid **RRR Due Date** will be set to 7/31/2012.
9. For Medicaid cases with a guaranteed program, once the RRR case action is complete, if the Medicaid case is determined eligible, the next **RRR Due Date** for the Medicaid case is set the earliest reassessment date which is greater than three months from the other program's current **RRR Due Date**. That is, for example, if the Medicaid case's reassessment date is 10/31/2011 and the other program's current **RRR Due Date** is 7/31/2011, the Medicaid's next **Reassessment Date** will be set to 10/31/2011. The **original RRR Due Date** for the Medicaid program will be set to 7/31/2012.
10. New approval **NOAs** will be generated for approved Medicaid cases. Refer to **Section 7** of this document for the **NOA** text.
11. If the Medicaid case is discontinued, the current discontinuation **NOAs** will be generated.



12. The Medicaid *View RRR Detail Listing* record will be updated with **Complete** or **Discontinued Status** based on the result of the eligibility determination.

Miscellaneous Information

1. *Redetermination Notice Generation Process:*

- A *Redetermination Notice* will be generated and mailed 60 days before the Medicaid **RRR Due Date**.
- If the *Ex Parte RRR* is completed prior to the scheduled mailing date, the *Redetermination Notice* will not be generated.
- If the *Ex Parte RRR* is started, but not completed, the *Redetermination Notice* will be generated and mailed on the scheduled mailing date.
- If the **Ex Parte RRR** is completed and the **Reassessment Date** is less than 90 days from the **RRR Due Date** used to set the next **RRR Due Date**, the *Redetermination Notice* will be suppressed.
- If the *Ex Parte RRR* is completed and the **Reassessment Date** is less than 90 days from the other program's (see **Step 9 of the Ex Parte Process** above), the *Redetermination Notice* will be suppressed.
- If the *Ex Parte RRR* is completed and the **Reassessment Date** is greater than 90 days from the other program's (**Step 9 of the Ex Parte Process** above), the *Redetermination Notice* will be generated.

2. If the *Ex Parte RRR* is not completed at the time the *Auto Re-enrollment RRR* is started, the **Ex Parte Date** will be removed and the case will run for *Auto Re-Enrollment RRR*.
3. The *Ex Parte RRR Process* will be used for any program in Adult Medical, Family Medical, Long Term Care, and Medicare Savings Program that requires a redetermination. Programs that do not require a redetermination, such as SSI Mandatory, will not be included in the *Ex Parte RRR Process*.
4. CHP+ will not be included in the *Ex Parte RRR Process*.
5. The other programs that will start a Medicaid *Ex Parte RRR* include Food Assistance, Colorado Works, Adult Financial, and another Medical program.



5.0 Auto Re-Enrollment RRR Process

General Information

The *Auto Re-enrollment RRR Process* will pre-populate the new *Redetermination Notice* with current case data. The clients will be prompted to return the *Redetermination Notice* with any changes that have occurred. If the *Redetermination Notice* is not returned, the *RRR* is to be automatically started under the assumption that there are no changes.

The eligibility determination that occurs when the Auto Re-enrollment action is initiated will use the current Decision Table logic for all programs, including the guaranteed FM programs and CHP+ individuals.

The **Medical RRR Status** must be in **Pending, Initiated** or **Generated Status** for an *Auto Re-enrollment RRR* to be started.

Process

The following are the processing steps that occur for the *Auto Re-Enrollment RRR Process*:

1. *Auto Re-enrollment RRR* will run on the 15th of the month for all Medical programs whose **RRR Due Date** or **Reassessment Date** is in the current month.
2. *Auto Re-enrollment RRR* will run during the nightly batch process.
3. The **Case Complete** field will not be updated on the Medicaid case.
4. EDBC and Authorization will be also run in the same nightly batch process.
5. Mass Update Exceptions will need to be resolved manually.
6. For the Medical cases, once the RRR case action is complete, if the Medical case is determined eligible, the next **RRR Due Date** for the Medical case is determined based on the Medical case's current **RRR Due Date**.
7. New approval *NOAs* will be generated for approved Medical cases. Refer to [Section 7](#) of this document for the *NOA* text.
8. If the Medical case is discontinued, the current discontinuation *NOAs* will be generated.
9. The Medicaid *View RRR Detail Listing* record will be updated with **Complete** or **Discontinued Status** based on the result of the eligibility determination.
10. If the Medical case is pending due to Mass Update Exceptions, the case will be written to the daily *Mass Update Exceptions Report*.

Miscellaneous Information

1. A *Redetermination Notice* will be generated and mailed 60 days before the Medical **RRR Due Date**.
2. If the *Ex Parte RRR* is not completed at the time the *Auto Re-enrollment RRR* is started, the **Ex Parte Date** will be removed, and the case will run for *Auto Re-Enrollment RRR*.



6.0 Medical Redetermination Notice

General Information

A new Medical *Redetermination Notice* has been created. The *Redetermination Notice* will be used in place of the *RRR Packet* and the *Recertification Letter*.

The *Redetermination Notice* is pre-populated with the current case data for all case members. The *Medical HIPPA Notice* is removed from the *RRR Packet* and included with the *Redetermination Notice*. The *RRR Checklist*, which lists the forms that can be selected to be sent with the *RRR Packet*, is set to allow the same forms to be selected to be sent with the *Redetermination Notice*.



STATE OF COLORADO



09/22/2011

REDETERMINATION NOTICE

Dear

It is time to see if you are or your family is still eligible for your medical benefits. Please review the current information we have in **Section I** below. If there are changes, please complete **Section II** and return the information to us by 07/2010 .

If you do not have changes, do not do anything. We will check to see if you are still eligible for benefits with the information we have. You may need to give us documents to see if you are or your family is still eligible. If we need documents from you, we will let you know.

You must report your changes. If you have changes and you don't report them, you may have to pay back medical payments paid by Medicaid.

Section I: Your information on file:

Client's Name :			
Date of Birth:	Requesting Medical Assistance Y/N: N	Employed Y/N: N	
Employer Name	Inc Type	Amount	Frequency
Self-Employed Y/N: N			
Unearned Income Y/N: N			
Roomers/Boarders Y/N: N			
CHP+ HMO:			

Aged, Blind, Disabled or Long-Term Care Clients:

The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$2,000 or \$3,000 if married.

Medicare Savings Program Clients:

The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$8,180 or \$13,000 if married.

For Low Income Subsidy Program Clients:

The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$12,640 or \$25,260 if married.



HCPF-3
Med Redetermination Notice



Client's Name : ██████████			
Date of Birth: ██████████	Requesting Medical Assistance Y/N: N	Employed Y/N: N	
Employer Name	Inc Type	Amount	Frequency
Self-Employed Y/N: N			
Unearned Income Y/N: Y	████████████████████		
Roomers/Boarders Y/N: N			
CHP+ HMO:			

Aged, Blind, Disabled or Long-Term Care Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$2,000 or \$3,000 if married.

Medicare Savings Program Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$8,180 or \$13,000 if married.

For Low Income Subsidy Program Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$12,640 or \$25,260 if married.

Client's Name : ██████████			
Date of Birth: ██████████	Requesting Medical Assistance Y/N: N	Employed Y/N: N	
Employer Name	Inc Type	Amount	Frequency
Self-Employed Y/N: N			
Unearned Income Y/N: N			
Roomers/Boarders Y/N: N			
CHP+ HMO:			

Aged, Blind, Disabled or Long-Term Care Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$2,000 or \$3,000 if married.

Medicare Savings Program Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$8,180 or \$13,000 if married.

For Low Income Subsidy Program Clients:
The things you own, other than your home, like bank accounts, life insurance policies, stocks and a second vehicle are not more than \$12,640 or \$25,260 if married.



HCPF-3
Med Redetermination Notice



REDETERMINATION NOTICE - Section II

I have No changes. (If you do not have changes, do not do anything.)

I am reporting the following change(s): (Check the boxes next to each change.)

Change of Address or Phone Number: _____

Pregnancy:
Pregnant Womans Name: _____ Due Date: _____
*Please send a pregnancy statement signed by a medical professional including the expected due date.

Person Leaving My Home:
Name: _____ Date of Birth: _____
Date left my home: _____
Relationship of this person to you: _____

Person Added to Household:
Name: _____ Date of Birth: _____

*If this person is requesting Medical Assistance, please include the information below:

Social Security Number or Date Applied: _____
Date entered my home: _____
Relationship of this person to you: _____

For more information, call me or visit <http://www.Colorado.gov/HCPF>

Changes to Work (For Example: new job, change in hours, lost job, new self employment):
Name: _____
Gross monthly amount received: \$ _____
Date received: _____
Type of income: _____

*If anyone is currently self employed, please send a copy of a profit and loss statement or business ledger from this or last last month.

Changes to Non-Work Income (For Example: child support, social security, unemployment, gifts or cash)
Name: _____
Gross monthly amount received: \$ _____
Date received: _____
Type of income: _____



- Changes to Health Maintenance Organization (HMO):** (For CHP+ Clients Only)
 Choice: _____
 For information on HMO s, visit www.ChpPlus.org or call 1-800-359-1991.

- Changes to Vehicle:** (For Adult Medicaid, Long Term Care, Medicare Savings Program and Low Income Subsidy Program Clients Only)
 Owner s Name: _____
 Make/Model: _____ Year: _____ Value: _____

- Changes to Resources:** (For Adult Medicaid, Long Term Care, Medicare Savings Program and Low Income Subsidy Program Clients Only)
 Name: _____
 Resource Type: _____ Dollar Value: _____

- Sold or Gave Away any Resources:** (For Adult Medicaid, Long Term Care, Medicare Savings Program and Low Income Subsidy Program Clients Only)
 Name: _____
 Date: _____ Type: _____ Value: _____

- Other Changes:** (For Example: Social Security Number for newborn children, name change, marriage, divorce, change in immigration status, school attendance, etc.)
 Please explain: _____

 Signature Date

If you have any questions, please call me right away.

Thank you,



7.0 Notice of Action Client Correspondence

General Information

Approval Notice of Action (NOA)

At the time an *EX Parte RRR* is completed, if the Medicaid case is approved, a *NOA* will be generated and mailed. Each HLPG's *NOA* will contain the basic text as follows:

Your Medicaid redetermination dated [Ex Parte Date] has been approved beginning [First of the month following Ex Parte Date]. You will continue to receive Medicaid benefits. We determined your benefits based on the current information we have on file. If you have received a Medicaid redetermination packet, you do not need to return the information.

Please use your current Medicaid card for services; you will not receive another one automatically. If you need a replacement card; please call your worker.

At the time an *Auto Re-enrollment RRR* is completed, if the Medical case is approved, a *NOA* will be generated and mailed. Each HLPG's *NOA* will contain the following:

Your Medicaid redetermination dated [Auto Re-enrollment Date] has been approved beginning [Current Eligibility – Eligibility Begin Date]. You will continue to receive Medicaid benefits. We determined your benefits based on the current information we have on file. Your Medicaid redetermination packet was not returned, so we understand that there were no changes to the information.

Please use your current Medicaid card for services; you will not receive another one automatically. If you need a replacement card, please call your worker.

Discontinue Notice of Action (NOA)

If a Medical case is discontinued at RRR, either an *Ex Parte RRR* or an *Auto Re-enrollment RRR*, the appropriate *NOA* from the current discontinuation *NOAs* will be generated and mailed.



8.0 Case Comments

General Information

System generated case comments will be posted for each Medical case at the time of an *Ex Parte RRR* or an *Auto Re-enrollment RRR*.

8.1 Ex Parte RRR Case Comments

General Information

At the time an *Ex Parte RRR* is started, a system generated **Case Comment** will be created. The **Case Comment** will contain the following:

General field entries:

1. **Case Number** = from case data
2. **Name** = case name
3. **Status** = case status
4. **Status Date** = case status date
5. **Pending Alerts** = number of current alerts
6. **WP [Y/N]** = from case data
7. **Type** = RRR (code 14)
8. **Program Group** = the Medical HLPG
9. **Date** = date and time comment created
10. **Individual** = leave blank
11. **System-Generated Comment** = *Ex Parte RRR initiated.*



Search Case Comments

Search Criteria

Case # ▶ [REDACTED] First Name: [REDACTED]
 Type: [REDACTED] Last Name: [REDACTED]
 Text: [REDACTED] Program Group: [REDACTED]
 Date Range
 From: [07/01/2011] To: [08/08/2011] [Search]

Search Results

Type	Date	Program Group	User	Indi
RRR	08/05/2011 01:27 PM	Family Medical Assistan	[REDACTED]	[REDACTED]

Maintain Case Comments [?] [X]

Case

Number: [REDACTED] Name: [REDACTED] Programs [REDACTED]
 Status: [Open] Status Date: [02/24/2009] Pending Alerts: [5] WP [Y/N]: [N]
 Type: [RRR] Program Group: [Family Medical As]
 Date: [08/05/2011 01:27 PM] Individual: [REDACTED]
 System Generated Comment: [Ex Parte RRR initiated]
 Enter Comment: [REDACTED]

8.2 Auto Re-Enrollment RRR Case Comments

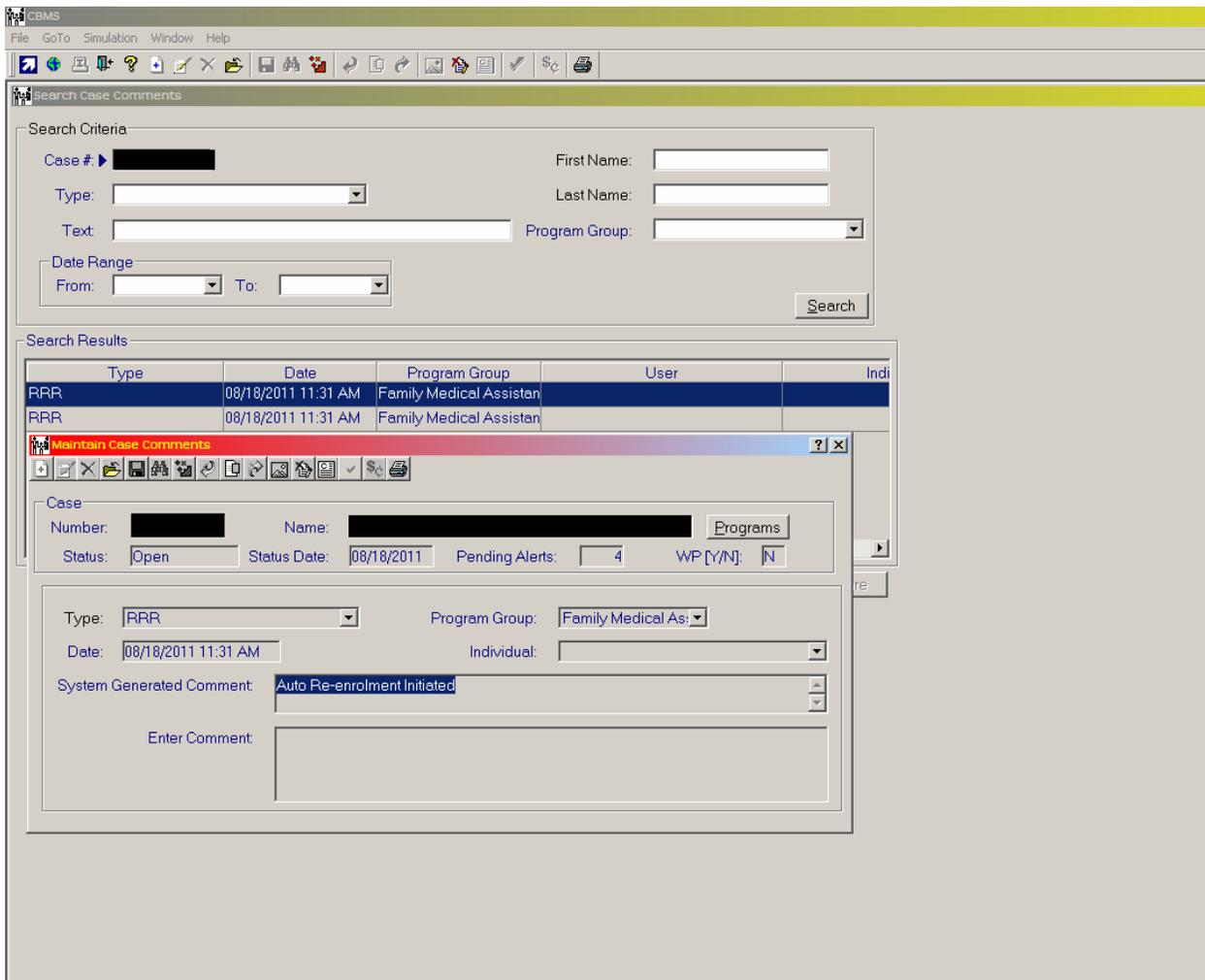
General Information

At the time an *Auto Re-enrollment RRR* is started, a system generated **Case Comment** will be created. The **Case Comment** will contain the following:

General field entries:

1. **Case Number** = from case data
2. **Name** = case name
3. **Status** = case status
4. **Status Date** = case status date
5. **Pending Alerts** = number of current alerts
6. **WP [Y/N]** = from case data
7. **Type** = RRR (code 14)
8. **Program Group** = the Medical HLPG
9. **Date** = date and time comment created
10. **Individual** = leave blank
11. **System-Generated Comment** = *Auto Re-enrollment RRR initiated.*





9.0 Alerts

General Information

An Alert will be sent to the Medical Primary Worker at the time an *Ex Parte RRR* has been initiated.

An Alert will be sent to the Medical Primary Worker at the time EDBC has been run on an *Auto Re-enrollment RRR* in batch.

Both Alerts will be system resolved after 10 calendar days if the Alert is not manually resolved.

9.1 Alert for *Ex Parte RRR*

The screenshot shows a software window titled "Resolve Case Alert" with a standard Windows-style title bar and toolbar. The window is divided into several sections:

- Case:** Contains fields for "Number" (redacted), "Name" (redacted), and a "Programs" button. Below these are "Status" (Open), "Status Date" (02/24/2009), "Pending Alerts" (5), and "WP [Y/N]" (N).
- Individual:** A "Name:" field with a text input box.
- Alert Details:** Contains fields for "Date Created" (08/05/2011), "Due Date" (08/15/2011), "Priority" (Medium), and "Category" (Informational). Below these is a "Program Group" field containing "Family Medical Assistance". Further down are "Title" (Ex Parte RRR Initiated) and "Description" (An Ex Parte RRR has been initiated.) fields.
- Resolution:** Contains a "Reason:" dropdown menu and a "Date:" field (00/00/0000).

9.2 Alert for *Auto Re-enrollment RRR*

The screenshot shows a software window titled "Resolve Case Alert" with a standard Windows-style title bar and toolbar. The window is divided into several sections:

- Case:** Contains fields for "Number:" (redacted), "Name:" (redacted), and a "Programs" button. Below these are "Status:" (Open), "Status Date:" (08/01/2004), "Pending Alerts:" (3), and "WP [Y/N]:" (N).
- Individual:** A "Name:" text input field.
- Alert Details:** A larger section containing:
 - "Date Created:" (08/15/2011) and "Due Date:" (08/25/2011)
 - "Priority:" (Medium) and "Category:" (Informational)
 - "Program Group:" (Long Term Care)
 - "Title:" (Auto Re-enrolment RRR Initiated)
 - "Description:" (An Auto Re-enrolment RRR has been initiated.)
- Resolution:** A "Reason:" dropdown menu and a "Date:" field (00/00/0000).

10.0 CBMS Ex Parte RRR Reports

General Information

Three new reports have been created for the *Ex Parte RRR Process*. The three reports are:

1. ***CBMS Authorized Ex Parte RRR Detail List Report***
ACCESS: County/Med site workers have access to their county only. State workers have access to the entire report.
2. ***CBMS Ex Parte RRR County/Med Site Summary Report***
ACCESS: County/Med site workers have access to their county only. State workers have access to the entire report.
3. ***CBMS Ex Parte RRR State Summary Report***
ACCESS: State workers only.

These reports will run on the 7th of every month and report the prior month's data. All ***CBMS Ex Parte RRR Reports*** are located in the RRR folder within Cognos.

10.1 CBMS Authorized Ex Parte RRR Detail List Report

General Information

This monthly report is created on the 7th of the month reporting the prior month's data. The report will include a listing of all CBMS individuals that have an *Ex Parte RRR* processed and authorized.

The *County Detail Report* will be sorted by:

- **County Name**
- **Office Name**
- **Primary Medical Worker**

In addition, this data will be included on the report.





CBMS Authorized Ex Parte RRR Detail List



Reporting Month: May 2011

County [Redacted]
Office [Redacted]
Primary Medical Worker [Redacted]

HPLG	Number of Active Individuals	Number of Closed Individuals	Total Number of Individuals
AM	1000	800	1800
FM	800	1000	1800
LTC	50	20	70
Grand Total	1850	1820	3670

HPLG	Case #	Case Name	Ex Parte Date	RRR Month	RRR Started User	RRR Status	Authorized Date	Client Status	Individual Name	
AM	[Redacted]	[Redacted]	5/15/2011	May-11	[Redacted]	Completed	5/20/2011	Active	[Redacted]	
								Closed		
			5/20/2011	June-11		Completed	5/20/2011	Active		
Total Number of Records for AM									3	
FM	[Redacted]	[Redacted]	5/1/2011	May-11	[Redacted]	Completed	5/1/2011	Active	[Redacted]	
			5/5/2011	May-11		Completed	5/10/2011	Active		
Total Number Records for FM									2	

Date Created: 2/12/11
6:13 PM

Page 1 of 1



Total number of records for the User	
Field Name	Description
HLPG	High Level Program Group
Number of Active Individuals	Total number of individuals that continue to be active after an <i>Ex Parte RRR</i> has been processed and authorized.
Number of Closed Individuals	Total number of individuals that were closed after an <i>Ex Parte RRR</i> has been processed and authorized.
Total Number of Individuals	Total number of individuals that were processed and authorized by an <i>Ex Parte RRR</i> .

CBMS Authorized <i>Ex Parte RRR</i> Detail List	
Column Name	Description
HLPG	High Level Program Group.
Case #	The CBMS case number.
Case Name	The CBMS case name.
Ex Parte Date	The <i>Ex Parte RRR Date</i> .
RRR Month	The Medical RRR Due Month.
RRR Started User	The user that started the other program's RRR.
RRR Status	The resulting RRR Status .
Authorized Date	The date the EDBC run for the <i>Ex Parte RRR</i> was authorized.
Client Status	The resulting Client Status .
Individual Name	The name of the individual who was included in the <i>Ex Parte RRR</i> .

Total number of records for the HLPG	
Field Name	Description
Total Number of Records for XX	Total number of individuals that were processed and authorized by an <i>Ex Parte RRR</i> for the HLPG.

10.2 CBMS *Ex Parte RRR* County/Med Site Summary

General Information
<p>This monthly report is created on the 7th of the month reporting the prior month's data. The report will include a summary of the <i>Ex Parte RRR</i> records that have been processed and authorized.</p> <p>The <i>County/Med Site Summary Report</i> will be sorted by:</p> <ul style="list-style-type: none"> ▪ County/Med Site Name <p>In addition, this data will be included on the report.</p>





CBMS Ex Parte RRR County/Med Site Summary

Reporting Month: May 2011

County/Med Site ██████████

Primary Medical Worker	HPLG	Total Active Authorized Individuals	Total Closed Authorized Individuals	Total Authorized Individuals
	AM	300	150	450
	FM	400	200	600
Primary Medical Worker Totals		700	350	1050
Blank line				
	FM	200	80	280
	LTC	50	10	60
Primary Medical Worker Totals		250	90	340
Blank line				
County/Med Site Total		950	440	1390

Date Created: 2/12/11 6:13 PM

Page 1 of 1



CBMS Ex Parte RRR County/Med Site Summary	
Column Name	Description
Primary Medical Worker	The name of the Primary Medical Worker.
H LPG	The High Level Program Group.
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.

Primary Worker Total	
Field Name	Description
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.

County/Med Site Total	
Field Name	Description
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.

10.3 CBMS Ex Parte RRR State Summary

General Information
This monthly report is created on the 7th of the month reporting the prior month's data. The report will include a summary of the individuals processed and authorized by an <i>EX Parte RRR</i> , by Medical County/Med Site, H LPG, and authorized result.





CBMS Ex Parte RRR State Summary
Reporting Month: May 2011

County/Med Site	HPLG	Total Active Authorized Individuals	Total Closed Authorized Individuals	Total Authorized Individuals
	AM	300	150	450
	FM	400	200	600
		700	350	1050
	FM	200	80	280
	LTC	50	10	60
		250	90	340
Blank line				
State Total		950	440	1390

Date Created: 2/12/11 6:13 PM

Page 1 of 1



CBMS Ex Parte RRR State Summary	
Column Name	Description
County/Med Site	The name of the County/Med Site.
HLPG	The HLPG.
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.

County/Med Site Total	
Field Name	Description
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.

State Total	
Field Name	Description
Total Active Authorized Individuals	Total number of individuals whose authorized result was active.
Total Closed Authorized Individuals	Total number of individuals whose authorized result was closed.
Total Authorized Individuals	Total number of individuals who were authorized.



11.0 CBMS Auto Re-Enrollment RRR Reports

General Information

Four new reports have been created for the *Ex Parte RRR Process*. The three reports are:

1. ***CBMS Authorized Auto Re-enrollment RRR Detail List Report***
ACCESS: County/Med site workers have access to their county only. State workers have access to the entire report.
2. ***CBMS Auto Re-enrollment Pending Results RRR Detail List Report***
ACCESS: County/Med site workers have access to their county only. State workers have access to the entire report.
3. ***CBMS Auto Re-enrollment RRR County/Med Site Summary Report***
ACCESS: County/Med site workers have access to their county only. State workers have access to the entire report.
4. ***CBMS Auto Re-enrollment RRR State Summary Report***
ACCESS: State workers only.

These reports will run on the 7th of every month and report the prior month's data. All **CBMS Auto Re-enrollment RRR** reports are located in the **RRR** folder within Cognos.

11.1 CBMS Authorized Auto Re-Enrollment RRR Detail List Report

General Information

This monthly report is created on the 7th of the month reporting the prior month's data... The report will include a listing of all CBMS individuals that have an **Auto Re-enrollment RRR** processed and authorized.

The **County Detail Report** will be sorted by:

- **County Name**
- **Office Name**
- **Primary Medical Worker**

In addition, this data will be included on the report.





CBMS Authorized Auto Re-enrollment RRR Detail List



Reporting Month: May 2011

County

Office

Primary Medical Worker



H LPG	Case #	Case Name	Auto Re-enrollment Date	RRR Month	RRR Status	Client Status	Individual Name
CH			5/15/2011	May-11	Completed	Authorized	
Total Number of Individuals for H LPG - CH							1
FM			5/15/2011	May-11	Completed	Authorized	
						Pending	
			5/20/2011	May-11	Completed	Authorized	
Total Number of Individuals for H LPG - FM							3
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Total Number of Individuals for H LPGs							4
Blank Line							

Date Created: 2/12/11 6:13 PM

Page 1 of 1



CBMS Authorized Auto Re-enrollment RRR Detail List	
Column Name	Description
HLPG	The High Level Program Group.
Case #	The CBMS case number.
Case Name	The CBMS case name.
Ex Parte Date	The <i>Auto Re-enrollment RRR Date</i> .
RRR Month	The Medical RRR Due Month.
RRR Status	The resulting <i>RRR Status</i> .
Client Status	The resulting <i>Client Status</i> .
Individual Name	The name of the individual who was included in the <i>Ex Parte RRR</i> .

Total number of records for the HLPG	
Field Name	Description
Total Number of Individuals for XX	Total number of individuals that were processed and authorized by an <i>Auto Re-enrollment RRR</i> for the HLPG.
Total Number of Individuals for HLPGS	Total number of individuals that were processed and authorized by an <i>Auto Re-enrollment RRR</i> for the worker.

11.2 CBMS Auto Re-Enrollment Pending Results RRR Detail List Report

General Information
<p>This monthly report is created on the 7th of the month reporting the prior month's data... The report will include a listing of all CBMS individuals that have an <i>Auto Re-enrollment RRR</i> processed but the case is Pending due to Mass Update Exceptions.</p> <p>The <i>County Detail Report</i> will be sorted by:</p> <ul style="list-style-type: none"> ▪ County Name ▪ Office Name ▪ Primary Medical Worker <p>In addition, this data will be included on the report.</p>





CBMS Auto Re-enrollment Pending Results RRR Detail List

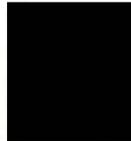


Reporting Month: May 2011

County

Office

Primary Medical Worker



H LPG	Case #	Case Name	Auto Re-enrollment Date	RRR Month	RRR Status	Client Status	Individual Name
AM			5/15/2011	May-11	Started	Authorized	
Total Number of Individuals by H LPG - AM							1
FM			5/15/2011	May-11	Completed	Pending	
			5/20/2011	May-11	Started	Authorized	
Total Number of Individuals by H LPG - FM							3
Total Number of Individuals							4

Date Created: 2/12/11 8:13 PM

Page 1 of 1



CBMS Auto Re-enrollment RRR Pending Results Detail List	
Column Name	Description
HLPG	The High Level Program Group.
Case #	The CBMS case number.
Case Name	The CBMS case name.
Ex Parte Date	The Auto Re-enrollment RRR Date .
RRR Month	The Medical RRR Due Month.
RRR Status	The current RRR Status .
Client Status	The current Client Status.
Individual Name	The name of the individual who was included in the <i>Auto Re-enrollment RRR</i> .

Total number of records for the HLPG	
Field Name	Description
Total Number of Individuals for XX	Total number of individuals that were processed by an <i>Auto Re-enrollment RRR</i> for the HLPG.
Total Number of Individuals	Total number of individuals that were processed by an <i>Auto Re-enrollment RRR</i> for the worker.

11.3 CBMS Auto Re-Enrollment RRR County/Med Site Summary

General Information
<p>This monthly report is created on the 7th of the month reporting the prior month's data. The report will include a summary of the <i>Auto Re-enrollment RRR</i> individuals that have been processed and authorized or processed and are pending due to Mass Update Exceptions.</p> <p>The <i>County/Med Site Summary Report</i> will be sorted by:</p> <ul style="list-style-type: none"> ▪ County/Med Site Name <p>In addition, this data will be included on the report.</p>



CBMS Auto Re-enrollment RRR County/Med Site Summary



Reporting Month: May 2011

County/Med Site ██████████

Primary Medical Worker	HPLG	Total Authorized Individuals	Total Pending Individuals	Total Individuals
	AM	300	450	900
	FM	400	600	1220
Primary Medical Worker Totals		700	1050	2120
	CHP+	200	280	570
	LTC	50	60	120
Primary Medical Worker Totals		250	340	690
County/Med Site Total		950	1390	2810

Date Created: 2/12/11 6:13 PM

Page 1 of 1



CBMS Auto Re-enrollment RRR County/Med Site Summary	
Column Name	Description
Primary Medical Worker	The name of the Primary Medical Worker.
HLPG	The High Level Program Group
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to Mass Update Exceptions .
Total Individuals	Total number of individuals who were processed.

Primary Worker Total	
Field Name	Description
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to Mass Update Exceptions.
Total Individuals	Total number of individuals who were processed.

County/Med Site Total	
Field Name	Description
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to <i>Mass Update Exceptions</i> .
Total Individuals	Total number of individuals who were processed.

11.4 CBMS Auto Re-enrollment RRR State Summary

General Information
This monthly report is created on the 7th of the month reporting the prior month's data. The report will include a summary of the individuals processed and authorized or processed and pending due to Mass Update Exceptions by an <i>Auto Re-enrollment RRR</i> , by Medical County/Med Site, and HLPG.





CBMS Auto Re-enrollment RRR State Summary



Reporting Month: May 2011

County/Med Site	HLPG	Total Authorized Individuals	Total Pending Individuals	Total Individuals
	AM	300	450	900
	FM	400	600	1220
		700	1050	2120
	CHP+	200	280	570
	LTC	50	60	120
		250	340	690
State Total		950	1390	2810

Date Created: 2/12/11 6:13 PM

Page 1 of 1



CBMS Auto Re-enrollment RRR State Summary	
Column Name	Description
County/Med Site	The name of the County/Med Site.
HLPG	The HLPG.
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to Mass Update Exceptions.
Total Individuals	Total number of individuals who were processed.

County/Med Site Total	
Field Name	Description
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to Mass Update Exceptions.
Total Individuals	Total number of individuals who were processed.

State Total	
Field Name	Description
Total Authorized Individuals	Total number of individuals who were authorized.
Total Pending Individuals	Total number of individuals who are pending due to Mass Update Exceptions.
Total Individuals	Total number of individuals who were processed.

