I. GENERAL INFORMATION

Case Management Report

The Eligibility Information System produces a monthly report entitled, “Case Management Report” for Work First, Special Assistance, Refugee Assistance, Medicaid, Breast and Cervical Cancer Medicaid (BCCM), and Foster Care/Adoptions Assistance programs. This report is printed the last workday of each month after the last update is applied. Two copies are mailed to each county to be received by the first week in the following month.

The retention period is printed on the report as, “DESTROY IN OFFICE WHEN SUPERSEDED OR OBSOLETED”. Use this report as a management tool to help supervisors and workers manage caseloads and reduce errors.

The Case Management Report is also available in XPTR. The report name is “DHREJ CASE MANAGEMENT REPORT”. Each report is kept in XPTR for 1098 days.

II. FORMAT – CASE MANAGEMENT

A. The report is sorted by county and district number and consists of the following three major sections within each district:
   1. Cases Due for Review
   2. Cases Overdue
   3. Special Messages

B. Within each of the sections listed above, the report is sorted by aid program/category and alphabetically by the casehead's last name, first name, and middle initial. Authorized Representative and/or the PACE Agency/CAP Manager is displayed on the Case Management Report, if there is one on the case.

III. CASES DUE FOR REVIEW – CASE MANAGEMENT REPORT

A. For all NC Health Choice and Medicaid only cases, EIS bases the review month on the certification thru date. For Work First, Refugee and Special Assistance cases, EIS bases the review month on the payment review period through date.

Note: MPW presumptive only cases that are approved with a P6 disposition code are excluded from the Case Management Report.
III. (CONT’D)

B. A case initially appears on the report under “Cases Due for Review” three months before the certification through date or payment review through date and continues to be listed until action is taken to complete a redetermination or terminate the case. MAF-C cases that are transferred from transitional appear on the report two months before the certification through date and continue to be listed until action is taken to complete a redetermination or terminate the case. (NOTE: MIC, MQB-E, and NCHC cases initially appear on the report two months before the certification through date. Re-enrollment forms and mailing labels are produced at this time.) A redetermination appointment notice is produced (except for NC Health Choice, MIC, BCCM, MQB-E, SA, IAS, and HSF) when the case first appears on the report three months before the redetermination is due. At no other time is an appointment notice produced.

NOTE: If a county does not want the State to provide the DSS-8189 Appointment Notices, contact the Eligibility Information System Unit in the Division of Medical Assistance. Refer to EIS 1200, State Office Contacts, for contact information.

For example, if the certification period is November through April, the case appears for the first time on the report run on January 31. The report indicates “Medicaid Red Due In April”. The case appears again on the report run the last workday in February. If the redetermination is not completed by the last workday in March, the case appears on the report a third time with a message “Medicaid Red Due April”. If the redetermination is not completed by the report run date in April, the message on the report received in May is listed under “Cases Overdue”.

IV. CASES OVERDUE – CASE MANAGEMENT REPORT

If the redetermination is not completed, EIS prints the first three letters of the month the review is past due on the report after the redetermination is due. The message may state “ELIGIBILITY RED PAST DUE SEP” or “MEDICAID REDETERM PAST DUE SEP”. This message continues to print on the report until the redetermination is completed.

NOTE: REVIEWS THAT ARE DUE OR OVERDUE THAT WERE NOT IN EIS, AND WERE THEREFORE NOT LISTED ON THE PREVIOUS MONTH'S REPORT, WILL BE INDICATED WITH AN ASTERISK (*). SINCE MPW PRESUMPTIVE ONLY ELIGIBILITY WILL ALWAYS BE AUTHORIZED IN THE PAST AND THEREFORE WOULD ALWAYS SHOW OVERDUE, THEY ARE EXCLUDED FROM CASE MANAGEMENT IF THE DISPOSITION CODE ON THE CASE IS P6.

V. SPECIAL MESSAGES – CASE MANAGEMENT REPORT

A. The Special Message section consists of different messages used to notify the caseworker of an action(s) that needs to be taken on a case or individual. These messages are based on the Special Review Code and Date(s) entered on the DSS-8125 by the caseworker or by conditions identified by the system.
These special messages are listed below.

1. Budget Not Balance
2. Payment Not Agree
3. FL 2/MR 2 Due
4. Review Living With
5. Review For Contribution
6. Age 6 In MMM (e.g., AUG), Re-eval PIL (Not printed for NC Health Choice)
7. Recoupment Ends In MMM
8. Delete 1/3 Disregard
9. Entry Exceeds 8 Mths in MMMM
10. Work Expense Not 00 or 90
11. Auto “CC” Cap Term In 60 Days
12. No Recip In Case
13. Age 3 In MMM
14. Age 61 In MMM
15. Age 16 In MMM
16. Age 18 In MMM
17. Age 19 In MMM
18. Age 21 In MMM
19. Age 65 In MMM
20. Age 56 in MMM
21. Review For Work Registration
22. Income To Begin
23. Income To Change
24. Income To End
25. Medical Review Due
V. A. (CONT'D)

26. Reserve To Increase
27. SSA-SSI Follow-Up
28. Follow-Up Temporary Age
29. Follow-Up Final Adoption
30. Age 1 In MMM, Re-Eval PIL - (Not printed for NC Health Choice)
31. Delete $30 Disregard
32. Student Disregard To End
33. 3 Month JOBS/STATE Work Sanction
34. Delete Property Disregard
35. Baby Due MM
36. Evaluate for Sanction Ending MMCCYY
37. Work Exemption To End MMCCYY
38. Casehead Ineligible, Child 19
39. Age 65 Or Over
40. Age 21 Or Over
41. Upgrade Level Of Care
42. Medicare - A Must Be Y
43. No MAD XFR To MAA, No Spouse
44. No MAD XFR To MAA, No Claim #
45. No MAD GF XFR TO MAA, Ind Unk
46. Age 13 In MMM
47. Baby Due In 30 Days
48. Auto "CC" CAP Term In 30 Days
49. Auto Add Determ Due
50. Mth Trans Ctaker Employed
51. No MAD To MAA XFR, Expired CP
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V. A. (CONT'D)

52. Medicare A Is Y, Must Have B
53. Medicare A Is N, Med Class Q
54. Job Bonus Ends
   This special message is displayed from the data entered on
   the Job Bonus History Screen (not the 8125).
55. Eval Pay After Performance MMCCYY
56. 60 month hardship exempt ends MMCCYY
57. Check for School Attendance MMCCYY
58. Review for Sale of Property
59. Verify Current Alien Status
60. Review Disqualification MMCCYY
61. SSI-SSA-EITC-TAX ends MMCCYY
62. Citizen/Identity Due MMCCYY
63. Resolve Citizenship MMDDYYYY
64. Age 19 CAP Code Term in MMM (Month prior to birth month. Applicable to HC, SC, and IC).
65. Citizen/ID Newborn Due MMCCYY
66. HCWD turning age 65
67. MAA HCWD needs Exparte
68. AGE 65 IN AN IMD MMM

B. Special Review Codes to be entered by the Income Maintenance Caseworker on the DSS-8125 are found in EIS 4000, Codes Appendix.

C. Special Messages appear either one or two months prior to the month that a special review action is needed.

1. For Medicaid with critical ages, the message appears two months before the birth month and ongoing until the caseworker takes necessary corrective action based on the appropriate program policy.

2. For Work First Cases with critical ages, the message appears two months before the birth month only. For example, a Work First child is age 3 in January. The message “Age 3 in Jan” appears on the report received in November and on the report received in December.
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V. C. (CONT'D)

3. For Work First cases including an individual(s) with case status of "M", the message appears one month following the month of entry. For example: A Work First child is added in July. The message "Auto Add Determ Due" appears on the report received in August and continues to show each month until action has been taken to change or terminate the case.

3. For cases with a Job Bonus, the special message appears two months prior, one month prior, and the month Job Bonus ends. This same time frame applies to cases with citizenship and/or identity documentation pending.

5. For MAABD cases to indicate when the balance of the resource becomes countable. For example, a review is due in July. The special message "ssi-ssa-eltc-tax ends mmccyy" appears on the "as of May 1", "as of June 1", and "as of July 1" reports.

6. For HSF (non-SSI) and IAS cases, the special message “Age 18 in MMM” appears two months prior to the birth month, one month prior to the birth month, and in the birth month.

  HSF (SSI-Y) cases do not appear on the Case Management Report Report for a child turning 18. For HSF and IAS, the special message “Age 21 in MMM” appears two months prior to the birth month and one month prior to the birth month. For HSF and IAS the special message “Age 21 or Over” appears in the birth month and ongoing until the caseworker terminates the case.

7. For Health Coverage for Working Disabled (HCWD) cases, the special message “HCWD recipient reaching age 65”, appears 2 months prior to the recipient turning age 65, 1 month prior to turning age 65, and the month the recipient turns age 65. After the recipient turns age 65, the case will transfer to MAA with the special message “MAA HCWD needs Exparte”.

D. Special Messages that are due or overdue that were not in EIS, and were therefore not listed on the previous month’s report, will be indicated with an asterisk (*)

E. The caseworker must take necessary action to review the case record, update, change, or delete information based on the message(s) received.