

WF610 - REPORTS
Change #1-2012
June 1, 2012

WF610.01 EIS REPORTS

A. APPLICATION PROCESSING REPORTS

Reports are generated to capture EIS statistics for pending applications. All of the reports are located in NCXPTR. The State does not print copies of any of these reports for the county dss. There are 3 years versions of the reports, unless otherwise noted.

1. ADJUSTED APPLICATION MANAGEMENT REPORT

- a. Every pending application with a date of application on or after October 1, 2002, displays on the "Adjusted Application Management Report" daily in NCXPTR.
- b. This report is sorted by county number, district number, due date, and worker number.
- c. If the calculated 45th date is a weekend or state/county holiday, the due date is adjusted to the following workday. If the calculated due date is a state holiday but not a county holiday, the due date is not adjusted.
- d. The following information always displays:
 - (1) APPL NAME - Applicant's Name
 - (2) PGM/CAT - Aid Program/Category
 - (3) FAM PLAN - Y or N
 - (4) HLTH CH - Y or N
 - (5) APPL DATE - Application Date
 - (6) DUE DATE - (For all Aid Programs/Categories) Adjusted when necessary.
 - (7) DAYS PENDING - This is the actual time that the application has pended.

- (8) APPL NO - Application Number
- (9) CASE ID
- (10) WORKER NUMBER
- (11) STATUS - HD indicates the application is on hold.
HX indicates the application is on hold due to SSI action.
- (12) APPL TYPE - Application Type
- (13) R/O - Retro/Ongoing indicator (R = Retro; O = Ongoing)
- (14) CTY CASE NO. - County Case Number
- (15) X-REF - Cross - Reference Indicator
 - (a) PA - Individual(s) on this application is/are also on another pending application.
 - (b) AC - Individual(s) on this application is/are active in an ongoing case.
 - (c) AC/PA - Individual(s) on this application is/are active in an ongoing case and is/are also on another pending application.
 - (d) Blank - Individual(s) is/are NOT on another pending application NOR active in an ongoing case.
- (16) Totals by District:
 - (a) TOTAL NUMBER OF EXCLUSIONS FOR MED
 - (b) TOTAL NUMBER OF EXCLUSIONS FOR DDS
 - (c) TOTAL NUMBER OF EXCLUSIONS FOR EMG
 - (d) TOTAL NUMBER OF EXCLUSIONS FOR FL2
 - (e) TOTAL NUMBER OF EXCLUSIONS FOR CAP

- (f) TOTAL NUMBER OF EXCLUSIONS FOR CID
 - (g) TOTAL NUMBER OF APPLICATIONS PENDING WITH EXCLUSIONS
 - (h) TOTAL NUMBER OF APPLICATIONS PENDING FOR DDS DECISION
 - (i) TOTAL NUMBER OF APPLICATIONS PENDING
 - (j) TOTAL NUMBER OF APPLICATIONS DUE WITHIN 5 DAYS
 - (k) TOTAL NUMBER OF APPLICATIONS DUE WITHIN 6-10 DAYS
 - (l) TOTAL NUMBER OF APPLICATIONS DUE WITHIN 11-15 DAYS
 - (m) TOTAL NUMBER OF APPLICATIONS NOT DUE FOR AT LEAST 16 DAYS
 - (n) TOTAL NUMBER OF APPLICATIONS PENDING BEYOND TIME STANDARD
- (17) County Total
- Total applications pending as listed above for each county.
- e. Other Information That May Display:
- 1. EXCL RSN - Citizenship/Identity Excluded Reason
 - 2. EXCL BEG DATE - Citizenship/Identity Excluded Begin Date
 - 3. EXCL END DATE - Citizenship/Identity Excluded End Date
 - 4. TWO-PART - Indicates the application is a two-part application.
 - 5. ADMINISTRATIVE - Indicates the application is Administrative.

6. TRANSITIONAL - Indicates the application is Transitional.
7. DAYS USED - (Medicaid Only)

Displayed for Improper Discouragement, Improper Denial/Withdrawal and Incorrect Denials. This assists in determining how many days are left to dispose of the application within the time standard.

(a) Improper Discouragement

- (1) When discovered by the Monitors, the Days Used is calculated from the day after the Original Date of Discouragement through the date the report is produced.
- (2) When discovered by the county, the Days Used is calculated from the day after the Date of Application through the date the report is produced. This number will be the same as the DAYS PENDING number.

(b) Improper Denial/Withdrawal

- (1) When discovered by the Monitors, the Days Used is calculated from the day after the Original Date of Application through the date the report is produced.
- (2) When discovered by the county, the Days Used is calculated from the day after the Original Date of Application through the Original Date of Disposition and add the day after the Date of Application on the DSS-8124 through the date the report is produced.

(c) Incorrect Denial

The Days Used is calculated from the day after the Original Date of Application through the Original Date of Disposition AND adds the day after the Date of Application on the DSS-8124 through the day the report is produced.

8. IMPRO DISC - Improper Discouragement (Medicaid Only)

Displays ORIG DATE DISC (Original Date of Discouragement) and Y or N by MONITORS. Y = discovered by the Monitors; N = discovered by the county.

9. IMPRO D/W - Improper Denial/Withdrawal (Medicaid Only)

Displays ORIG DATE APP (Original Date of Application), ORIG DATE DISP (Original Date of Disposition), and Y or N by MONITORS. Y = discovered by the Monitors; N = discovered by the county.

10. S/C APPEAL - State/County Appeal Reversal (Medicaid Only)

Displays ORIG DATE APP (Original Date of Application). ORIG DATE DISP (Original Date of Disposition) displays IF entered on the Date Screen.

Displays DATE INFO REQ (Date Information Requested) and DATE LAST INFO RECD (Date Last Information Received) IF entered on the Date Screen.

11. SOC APPEAL - Social Security Appeal (Medicaid Only)

Displays ORIG DATE APP (Original Date of Application) and DDS REQ N (DDS Determination Required = N). ORIG DATE DISP (Original Date of Disposition) displays IF entered on the Date Screen.

12. EXCL REASON - (Medicaid Only)

Displays if entered on the Date Screen when form DMA-5098 or DMA-5099 is mailed.
 13. BEGIN DATE - (Medicaid Only)

Displays if entered on the Date Screen when form DMA-5098 or DMA-5099 is mailed.
 14. END DATE - (Medicaid Only)

Displays the date the last information was received if entered on the Date Screen.
 15. INCORRECT DENIAL - (Medicaid Only)

Displays ORIG DATE APP (Original Date of Application) and ORIG DATE DISP (Original Date of Disposition).
 16. ORIG EXCL REASON - (Medicaid Only)

Displays reason the original form 5098 or 5099 was mailed if entered on the Date Screen.
 17. ORIG BEGIN DATE - (Medicaid Only)

Displays Date Original form 5098 or 5099 was mailed if entered on the Date Screen.
 18. ORIG END DATE - (Medicaid Only)

Displays the date last information received for Original Application if entered on the Date Screen.
- f. To view application information that is "split" between two screens:
1. The cursor is by COMMAND when you access the report. Press the tab key to move the cursor from the COMMAND position to SCROLL in the upper right-hand corner. By SCROLL, where FULL is displayed, key CSR.

2. Move the cursor to the dotted line that is above the application that does not display all the application information and press the PF8 key. This moves that application to the top of the next screen. This procedure can be repeated on each application that "splits" between screens. Remember, dotted lines separate each application.
3. Press the PF7 key when the cursor is on the dotted line to move the information back one screen.

2. ADJUSTED SUMMARY APPLICATION MANAGEMENT REPORT

The "Adjusted Summary Application Management Report" is **not** a duplicate of the Adjusted Application Management Report. It is truly a summary. The report is available daily in NCXPTR.

a. The following information display on the report:

1. APPLICANT NAME
2. APP # - Application Number
3. CTY CASE # - County Case Number
4. WKR # - Worker Number
5. APP DATE - Application Date
6. AP TY - Application Type
7. AID PGM - Aid Program/Category
8. DDS BEG END - DDS Begin and End Dates
9. ST - Status – Displays HD if the application is on hold.
Displays HX if the application is on hold due to SSI action.
10. DD - DDS decision

D = Disabled

N = Not Disabled

I = Insufficient Evidence or Failure To Attend A
Consultative Exam

11. DAYS PND - Days Pending. This is the true reflection of the number of days subtracting any excluded time and counting through the date of the report.
12. CD - Code for Mail Date (Medicaid Only)
If a DMA-5098 or DMA-5099 has been mailed:
 - (a) 'M' = Medical Bills to meet deductible
 - (b) 'D' = Receipt of the DDS disability determination decision
 - (c) 'E' = Request for medical records for emergency dates for non-qualified aliens
 - (d) 'F' = Receipt of FL2/MR2
 - (e) 'C' = Receipt of CAP plan of care
13. DUE - The due date. Adjust when necessary.
14. BEG - The date the DMA-5098 or DMA-5099 was mailed (Medicaid Only).
15. Totals by District Number and by County
 - (a) Total Number of Exclusions for MED (Deductible)
 - (b) Total Number of Exclusions for DDS (Disability Determination Decision)
 - (c) Total Number of Exclusions for EMG (Medical Records for Emergency Dates)
 - (d) Total Number of Exclusions for FL2 (Receipt of FL2/MR2)
 - (e) Total Number of Exclusions for CAP (Receipt of CAP plan of care)
 - (f) Total Number of Exclusions for CID (Receipt of Citizenship/Identity Documentation)

- (g) Total Number of Applications Pending with Exclusions
 - (h) Total Number of Applications Pending for DDS Decision
 - (i) Total Number of Applications Pending
 - (j) Total Number of Applications due Within 5 Days
 - (k) Total Number of Applications due Within 6-10 Days
 - (l) Total Number of Applications due Within 11-15 Days
 - (m) Total Number of Applications Not Due for at Least 16 Days
 - (n) Total Number of Applications Pending Beyond Time Standard
- b. This report is sorted by county, district number, due date, and worker number.
- c. As the report is 80 spaces wide, the following columns are stacked:
- 1. CTY CASE # and WKR #
 - 2. DDS BEG END
 - 3. ST and DD
 - 4. DUE/BEG
3. Other Application Processing Reports

Other application processing reports that are created for the report card can be found at the website address below. These include Apps Excluded Reports, Apps Included Reports, etc.

http://info.dhhs.state.nc.us/olm/manuals/dma/eis/man/Eis2400vii.htm#P13_347

B. CASE MANAGEMENT REPORT

EIS produces a monthly report entitled "Case Management Report" for *Work First Family Assistance* programs. This report is printed the last workday of each month. 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 OBSOLETE. **This report is used as a management tool to help supervisors and workers manage caseloads and reduce errors.**

The Case Management Report is also available in NCXPTR. The report name is "DHREJ CASE MANAGEMENT REPORT".

1. 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.

2. Cases Due For Review

A case initially appears on the report under 'Cases Due For Review' two months before the PAYMENT REVIEW THROUGH date and continues to be listed until action is taken to complete a review or terminate the case. A review appointment notice is produced when the case first appears on the report two months before the review is due. At no other time is an appointment notice produced.

For example, if the PAYMENT THROUGH DATE is September through February, the case appears on the report for the first time in December. The report received in December indicates "ELIGIBILITY RED DUE IN MMM".

The case appears again on the report received in January. If the review is not completed by the last week in January, the case appears on the report a third time in February with a message "ELIGIBILITY RED DUE IN MMM." If the review is not completed by the report run date in February, the message on the report received in March is listed under "Cases Overdue."

3. Cases Overdue

If the review is not completed, EIS prints the first three letters of the month the review is past due on the report after the review is due which states "ELIGIBILITY RED PAST DUE MMM." This message continues to print on the report until the review is completed.

NOTE: Reviews that are due or overdue that was not in EIS and was not listed on the previous month's report will be indicated with an asterisk (*).

4. Special Messages

- 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. 24 Mth Time Limit Ends MMCCYY
4. Review Living With
5. Review For Contribution
6. Recoupment Ends in MMM
7. Delete 1/3 Disregard
8. Work Expense Not 00 or 90

9. Age 16 In MMM
10. Age 18 In MMM
11. Age 19 In MMM
12. Review For Work Registration
13. Income To Begin
14. Income To Change
15. Income To End
16. Medical Review Due
17. Reserve To Increase
18. SSA-SSI Follow-Up
19. Follow-Up Final Adoption
20. Delete \$30 Disregard
21. Student Disregard To End
22. 3 Month *Work First* Sanction
23. Delete Property Disregard
24. Baby Due in MMM
25. Age 13 In MMM
26. Baby Due In 30 Days
27. Auto Add Determ Due
28. 24 Mo Extension Ends MM/DD/YY
29. Sanction Ends (MMCCYY)
30. Job Bonus Ending MMCCYY
31. MMM is 12th Month of S Code

32. Check for School Attendance
 33. Check for graduation of 18 year old.
 34. Work Exemption to end MMCCYY
 35. Eval Work First Benefits MMCCYY
 36. Family Violence Waiver Ends MMM
 37. 60 Month Hardship Exempt Ends MMCCYY
 38. Youngest Child Age 1 in MMM
 39. Youngest Child Age 6 in MMM
 40. 60 Mth Time Limit Ends MMCCYY
 41. Citizen/Identity Due MMCCYY
 42. Resolve Citizenship MMDDCCYY
- b. Special Messages appear either 1 or 2 months prior to the month that a special review action is needed.
1. For *Work First Family Assistance* cases with critical ages, the message appears 2 months before the birth month only. For example, a *Work First Family Assistance* child is age 3 in August. The message "AGE 3 IN MMY" appears on the report received in June and on the report received in July and on the report received in August.
 2. For *Work First Family Assistance* cases including an individual(s) with case status of "M," the message appears 1 month following the month of entry. For example: A *Work First Family Assistance* child is added in August. The message "AUTO ADD DETERM DUE" appears on the report received in September and continues to show each month until action has been taken to change or terminate the case.
- c. The caseworker must take necessary action to review the case record, update, change, or delete information based on the message(s) received.

C. CASEWORKER SUPERVISOR REPORT

1. General Information

The Caseworker Supervisor Report is a system produced report used to monitor performance and productivity and to help improve the management of your caseload. The report is produced after the last workday of the month, and two copies are mailed to the county; one for the caseworker and one for the supervisor.

The report is also located in NCXPTR as "**DHREJ CASEWORKER SUPERVISOR REPT**". Four (4) versions are retained. The report is produced based on the action completed and the worker number entered on the DSS-8124 or the DSS-8125. If a worker number is not entered on the DSS-8125, EIS uses the one previously assigned to that case. If you complete more than one action on a form, the system credits you with only one action. The action you are given credit for is based on the order of 3. below.

2. The report is sorted by county, supervisor, and worker.

3. Actions Displayed on the report:

- a. APPLICATIONS REGISTERED
- b. APPLICATIONS APPROVED.
- c. APPLICATIONS DENIED.
- d. APPLICATIONS WITHDRAWN.
- e. FOR APPLICATION TYPE '3' or '6'
 1. ADD INDIVIDUAL CHANGES TAKEN
 2. ADD INDIVIDUAL CHANGES APPROVED
 3. ADD INDIVIDUAL CHANGES DENIED
 4. ADD INDIVIDUAL CHANGES WITHDRAWN
- f. REDETERMINATIONS COMPLETED
- g. COUNTY TRANSFERS

- h. AID PROGRAM/CATEGORY TRANSFERS not completed in conjunction with a county transfer or a redetermination.
- i. MAIN/TERM - changes made to terminated cases
- j. CASE TERMINATIONS
- k. REOPENS
- l. BENEFIT CHANGES not completed in conjunction with a redetermination, a county transfer, or aid program/category transfer. (A benefit change is a change in the Medicaid effective date or the payment amount.)
- m. Any OTHER CHANGES not listed above and not completed in conjunction with any of the actions listed above.
- n. A total is captured at the end of each action.

NOTE: If you do not perform one of the specified actions, it is not listed on your report.

- 4. If you complete one of the above actions, the following information is reported on the Caseworker Supervisor Report:
 - a. Case ID
 - b. Casehead/payee
 - c. Aid Program/Category
 - d. Application Number
 - e. County Case No
- 5. Changes keyed in the State Office
 - a. Forms keyed by Claims Analysis will appear under worker number DMA.
 - b. Forms keyed by the Eligibility Information System Section will appear under worker EIS.
 - c. Both of these worker numbers will be reported under Supervisor Number 000 at the end of the report.
 - d. These actions will also appear on the Worker Supervisor Summary Report.

D. CASEWORKER SUPERVISOR SUMMARY REPORT

The Caseworker Supervisor Summary Report is located in NCXPTR as “**DHREJ CASEWKR SUPERVSR SUMM REPT**”. Four (4) versions are retained. This report summarizes all actions reported on the Caseworker Supervisor Report. Totals of each action are shown by worker number; the total actions of all workers for each Supervisor Number and on the last cover page, is the accumulated totals for the county.

E. ERROR AND ATTENTION REPORT

The report is available daily in NCXPTR and is printed in each county. The function of this report is to assist Income Maintenance Caseworkers and Data Entry Operators in tracking forms that are not accepted into EIS or have been put on hold. The report uses the Form ID number as the tracking device. The Form ID's remain on the report until the form is rekeyed and accepted into EIS. Please make sure all forms are corrected as soon as possible.

1. Error and Attention Report Messages**MESSAGE: DSS 8125 IN ERROR**

REASON: The DSS-8125 approving an application is in error, causing the DSS-8124 to be placed on hold. This message only displays the first day the form is on hold.

ACTION: Correct the error on the DSS-8125. The DSS-8124 processes when the DSS-8125 is corrected and processed.

MESSAGE: FORMS ALREADY IN HOLD STATUS

REASON: This message displays for a DSS-8124 when the DSS-8125 is in error. The original error message was displayed the first day the form was on hold.

ACTION: Correct the error on the DSS-8125. The DSS-8124 processes when the DSS-8125 is corrected and processed.

MESSAGE: FORM ON HOLD DUE TO SSI ACTION

REASON: An SDX update was received for one or more individuals on the pending application, causing the DSS-8124 to be placed on hold.

ACTION: Determine the effect of the information on SDX update on the pending application. Process the DSS-8124 accordingly.

MESSAGE: ON HOLD DUE TO SSI UPDATE

REASON: An SDX update was received for one or more individuals on an active case, causing the pending DSS-8125 to be placed on hold.

ACTION: Determine the effect of the information on the SDX update on the active case.

If the action is no longer appropriate, delete the pending DSS-8125.

If the action is still appropriate, you must rekey it.

If this was a timely action, key the action again, using an adequate change code, on the day the timely action would have processed. The adequate action will rescind the timely action.

If the action was on hold with errors or placed on hold by the worker, you must rekey it.

If the action was an application approval, you must rekey it.

MESSAGE: ADD IND ONG STATUS TO TERMINATED CASE

REASON: The 8125 is attempting to disposition an add-on application. The 8125 has **no** Case Termination Date but the case itself is terminated.

ACTION: Rekey the approval. Enter a Case Termination Date less than or equal to the Case Termination date on the case.

MESSAGE: ADD IND/PERIOD OF TIME EXCEEDS TIME CASE ESTAB

REASON: The 8125 is attempting to disposition an add-on application. The 8125 has a Case Termination Date which is greater than the termination date on the case.

ACTION: Rekey the approval. Enter a Case Termination Date less than or equal to the Case Termination date on the case.

MESSAGE: NO MATCHING CASE SITUATION FOR ADD INDIVIDUAL.

REASON: The 8125 is attempting to disposition an add-on application.

There is no matching case ID, aid program/category, county number combination for the period of time specified on the 8125.

ACTION: Review the Case Data (CD), Case History (CH), and/or Check History (PC) for the Case ID entered on the DSS-8124 add-an-individual application or inclusion.

If the case was transferred to or from another county and the date of application on the DSS-8124 is prior to the transfer effective date, you must approve and terminate the add-an-individual application or inclusion on the same DSS-8125 (open/shut).

If the case was transferred to or from another aid program/category and the date of application on the DSS-8124 is prior to the Create Date on the Case Data (CD) or prior to the ending date of the previous aid program/category on Case History (CH), you must approve and terminate the add-an-individual application or inclusion on the same DSS-8125 (open/shut).

If the case was terminated and the date of application on the DSS-8124 is prior to the Case Termination Date, you must approve and terminate the add-an-individual application or inclusion on the same DSS-8125 (open/shut).

If the case was terminated and later reopened or reapproved and the date of application on the DSS-8124 is prior to the Create Date on the Case Data (CD), you must approve and terminate the add-an-individual application or inclusion on the same DSS-8125 (open/shut).

MESSAGE: TRYING TO ADD IND ONG STATUS TO TERMINATED C/HI

REASON: The 8125 is attempting to disposition an add-on application. The matching case id, aid program/category, county, and "begin" date belong to a case history segment (which has a termination date), but the 8125 doesn't have a termination date.

ACTION: Rekey the 8125. Enter a Case Termination Date equal to or less than the Case Termination date on the case.

MESSAGE: ADD IND/PERIOD OF TIME EXCEEDS TIME C/HI

REASON: The 8125 is attempting to disposition an add-on application. The matching case id, aid program/category, county, and "begin" date belong to a case history segment and the 8125 termination date is greater than the case history termination date.

ACTION: Rekey the 8125. Enter a Case Termination Date equal to or less than the Case Termination date on the case.

MESSAGE: ADD INDIV C/HI FOUND/CANNOT FIND APC & OR CO NO.

REASON: The 8125 is attempting to disposition an add-on application. The matching case id and "begin" date belong to a case history segment but the case history segment has a different aid program/category and/or county number than what is on the 8125.

ACTION: Rekey the 8125 with the correct aid/program category and/or county number.

MESSAGE: TRYING TO ADD INDIV BUT CANNOT FIND CASE

REASON: The 8125 is attempting to disposition an add-on application and the case id cannot be found.

ACTION: Check the Case ID on the 8125 approval. Rekey the 8125.

2. Timely DSS-8125 Message

- a. The Error and Attention Report also displays actions that are on hold pending a ten day timely notice period.

These actions are listed in case ID order under the header "8125 FORMS ON HOLD-ACTION PENDING 10 DAYS". The message for each entry reads "ACTION PENDING 10 DAYS-WILL PROCESS MM/DD/YY". The date indicates the day the action will process in EIS.

- b. 'ACTION DELETED - QTRLY REPORTING XFER' prints as the message when EIS deletes an action pending the ten workday notice period. This occurs when EIS automatically transfers a Work First case because the payee fails to return a complete quarterly report form.

F. NON-COOP INDIVIDUALS WITHOUT A IVD SANCTION REPORT

1. General Information

The Non Coop Individuals Without A IVD Sanction Report lists each individual eligible to receive a Work First Family Assistance Payment, but the adult(s) has failed to cooperate with Child Support. This report lists each AAF case with payment type '1', '2', and 'S' that includes individuals who have not cooperated with Child Support and there is no sanction in EIS for the individual on the Sanction Data (SA) Inquiry Tracking screen.

The report is run daily and no hard copies are produced. The retention period for the report is seven (7) years and is located in NCXPTR under the name: **DHREJ NON-COOP WITHOUT IVD SANC.**

2. Report Versions

The daily report is entitled, NON-COOPERATION INDIVIDUALS WITHOUT A IVD SANCTION. This report runs daily, is cumulative, and displays data added since the last run date. The data remains on the report until the IVD worker enters 'Y' to indicate the individual has cooperated with child support or a sanction is posted for the individual on the (SA) Sanction Data Inquiry Tracking screen in EIS. A total of 2,562 versions of the report are stored in NCXPTR to meet the seven year retention period.

The Non Coop Without A IV-D Sanction Report contains the following:

- a. County Number
- b. District Number
- c. Last Name
- d. First Name
- e. Case ID
- f. County Case Number
- g. Individual ID
- h. Non Coop Date: The actual date the individual failed to cooperate with child support.

- i. Date Keyed: The date the IVD worker keyed the date of non-cooperation ('N') field in ACTS
- j. Worklist View Date: This date is the first day the county worker can view the individual listed on the Non Coop Individuals Without A IVD Sanction Report in NCXPTR. This date will always be the next work day after the date the individual was listed on the EIS Caseworker Worklist Report.
- k. IVD Worker Number: The IVD worker who keyed the referral for non-cooperation.
- l. Pay Type: '1', '2', and 'S'.
- m. Total Number of Non Coop Cases Without IVD Sanction for County:

The two asterisks (**) displayed at the bottom of the report indicates State Operated Child Support offices.

3. Report Layout

X 1 B02:DHREJ NON-COOP WITHOUT I 03/21/2006							INDEX IS COUNTY			
COMMAND=====>							Scroll=====>FULL			
EJA456-1		NC DEPARTMENT OF HUMAN RESOURCES					PAGE 1			
RUN DATE: 03/21/2006		ELIGIBILITY INFORMATION SYSTEM								
NON-COOPERATION INDIVIDUALS WITHOUT A IVD SANCTION FOR THE DATE OF 03/21/2006										
COUNTY 000		DIST A00								
LAST-NAME	FIRST-NAME	CASE-ID	CNTY-CASE	INDIVIDUAL	NON-COOP DT	DATE KEYED	WORKLIST VIEW DATE	IVD WKR	PAY TYPE	
DEADBEAT	ADULT	00001000	000 90006	999999999L	03/09/2006	03/09/2006	03/10/2006	POOR90000	1	
NUMBER OF NON-COOP WITHOUT IVD SANCTION FOR COUNTY 000							= 2 **			
** = STATE OPERATED CHILD SUPPORT AGENCY										

G. NOTICE REGISTER REPORT

1. General Information

This report lists information related to automated notices produced for Work First, Medicaid, and Special Assistance approvals, denials, withdrawals, changes, and worker initiated terminations.

Two copies of this report are produced each night and mailed to the county the following workday. Retain one copy intact for audit purposes. Destroy the report after three years or when released from all audits, whichever occurs later. The second copy may be distributed to income maintenance caseworkers to use as a case management tool in tracking automated notices and the resulting case actions.

2. The report is sorted by county, worker, and payee name.
3. The following information is displayed on the report:
 - a. Payee Name - First, Middle Initial, Last, Suffix
 - b. Address - The address printed on the automated notice.
 - c. Notice Date - The actual date the automated notice is mailed. This is always the next State workday after the DSS-8124 or DSS-8125 processes. If the automated notice is overridden, this field is blank.
 - d. Action Effective Date - For adequate notices, this is the date the notice is mailed.

For timely notices, this is the system calculated eleventh county workday from the day the notice is mailed, and the night the action will process.

This does not apply to approvals.

- e. Worker Number - The three digit worker number printed on the automated notice.
- f. District Number - The three digit district number printed on the automated notice.
- g. Case ID - The case ID number printed on the automated notice.
- h. Reason Code - The Disposition Reason Code, Secondary Notice Code, Change Code, or Termination Reason Code entered on the DSS-8125 or the Denial or Withdrawal Code on the DSS-8124 that produces the automated notice.
 1. If a Secondary Notice Code is entered on the DSS-8125, the Approval Code displays on the left and the Secondary Notice Code displays on the right.
 2. If both parts of a two-part application are approved at the same time with two different Approval Codes, the ongoing Approval Code displays on the left and the retro Approval Code displays on the right.

3. The Reason Code will be blank for Medicare D notices printed by EIS that result from a change in Medicare status on the CMS response file.
 - i. Aid Category - The aid category for which the notice is produced.
 - j. Payment Type - The payment type for which the notice is produced.

If the automated notice is produced as a result of a change in the payment type on the case, the payment type indicated on the Notice Register Report will always be the payment type that is a result of the action. EIS prints the Payment Type for A-AF cases only.

- j. 10th Appeal Date - The system calculated 10th county workday from the date the automated notice is mailed. If the automated notice is overridden, this field is blank. This date does not apply to approvals, denials, withdrawals, redeterminations, or reopens.
- k. 60th Appeal Date - The system calculated 60th day from the date the automated notice is mailed. If the automated notice is overridden, this field is blank.
- l. Change/Termination Date - This is the month, day, and year the requested action actually affects the recipient's ongoing benefit. It is always the first day of the month for changes and the last day of the month for terminations.

This does not apply to approvals, denials, or withdrawals.

An asterisk (*) in this field indicates that EIS changed the Change/Termination Date. Evaluate the case for an overpayment.

- m. Notice Text - The free-form notice text entered by the caseworker who is keyed and printed on the notice.
- n. Comments - One of the following is displayed:
 1. Form No - The form ID number from the DSS-8124 or DSS-8125 that produced the automated notice.

2. Overridden - Indicates the automated notice was not produced at county request.
 3. Deleted - Indicates an action on hold in EIS was stopped because Data Entry deleted the pending action. This does not apply to approvals, denials, or withdrawals.
 4. Rescinded - Indicates an action on hold in EIS was stopped because a DSS-8125 processed that produced a subsequent notice. This does not apply to approvals, denials, or withdrawals.
 5. Buy-In (Begin/End Date) - The system calculated Buy-In Begin or End effective date that is displayed when an application is approved or an active case terminated. The date appears under form number, rescind, or delete information.
 6. Medicare D - Indicates EIS printed a notice as a result of a change in Medicare status on the CMS response file.
4. The Notice Register is available for inquiry and printing in NCXPTR under the name: '**DHREJ NOTICE REGISTER**'. Six (6) versions of the report are retained.
- a. The NCXPTR Notice Register Report is sorted by county and payee name.
 - b. NCXPTR report contains the same information described above with the following exceptions:
 1. The payee's last name and first and middle initial are shown.
 2. The NOTICE DATE, 10th DAY and 60th DAY are not shown. The NCXPTR report date is the date of the notice.

WF610.02 IEVS REPORTS

I. ENUMERATION DATA SHEETS

Using the 16-digit number entered as the NPN on the DSS-8174, the Social Security Administration's (SSA) files are matched against the EIS files. If the name, date of birth, sex, and individual ID in the NPN field on the DSS-8174 agree with information in EIS, an Enumeration Data Sheet is produced. A second copy is also produced which may be sent to the Food Stamp worker, if applicable.

- A. The Enumeration Data Sheet is a case-specific report produced monthly which contains the following information.
1. County Number
 2. County Case Number
 3. Aid Program/Category
 4. Case ID
 5. District Number
 6. Individual Name
 7. Individual ID
 8. Sex
 9. Date of Birth
 10. Social Security Number (SSN)
 11. Date of Report
- B. Upon receipt of the Enumeration Data Sheet, enter SPECIAL USE DATA CODE "VM" and the date of the Enumeration Report on the 8125 screen.
- C. If the name, date of birth, sex, or individual ID in the NPN field on the DSS-8174 does not agree with information in EIS, the individual appears on an Enumeration Error Report. This report contains the same information as the Enumeration Data Sheet but also includes an error message.

Following is a list of error messages and the action to take on each error listed.

1. **Ind Not Active** - The ID number sent on the SS-5 was found, but the individual is not active in the system.
 - a. If the individual is not an active recipient, take no action.

- b. If the individual is not an active recipient but should be, add the individual and the SSN to the case by entering them on a DSS-8124 and DSS-8125.
2. SSN ID Exists, Info Disagrees - The SSN exists in the system. Either the name, date of birth, or sex listed on the report for the individual does not agree with the name, date of birth, or sex in EIS. If this is the correct individual, follow the instructions in IV. below.
3. Name, DOB, Or Sex Disagree - The ID number sent on the DSS-8174 was found in EIS. Either the name, date of birth, or sex listed on the report for the individual does not agree with the name, date of birth, or sex in EIS. If this is the correct individual, follow the instructions in IV. below.
4. Invalid ID Or Individual Not On File - The data in the NPN field is not numeric or is otherwise invalid. The system could make no match using the data in the NPN field. Research the individual. If the individual is the same, enter a DSS-8125.

It is important to enter the NPN correctly when completing a DSS-8174.

When the individual appears on the Enumeration Error Report with an error message, compare the individual's data listed on the Enumeration Error Report to the individual's data shown in EIS. If it is the same individual and the information in EIS is wrong, complete a DSS-8125. Enter the individual's correct birth date, sex, name, and/or SSN on the DSS-8125 under individual data. If it is the same individual and the information in EIS is correct, do not change EIS information, but update the SSN field if the SSN is not present or is incorrect. If the SSN is present and correct, no action is necessary.

II. SOCIAL SECURITY NUMBER VALIDATION

The SSN validation system ensures that we have the correct person with the correct SSN.

A. Master Client Index (MCI) Validation

Each month, the State sends a tape of unduplicated SSN's for active individuals appearing in the Master Client Index (MCI) to the SSA. SSA compares the vital data to its NUMIDENT file which is used by SSA to issue numbers to wage earners.

When the data submitted from EIS meets the NUMIDENT validation criteria, the system enters a "V" on the MCI validation screen beside the SSN for that program. It is possible that SSA assigned more than one SSN to an individual. When this occurs, more than one validated SSN is returned by the SSA and posted to MCI. These are marked with a "D" (for duplicate) on the MCI validation screen. The caseworker for the program with the incorrect data must make the necessary corrections in EIS or FSIS regardless of whose data validated.

B. BENDEX Validation

1. When an individual applies for SSA benefits, all vital data must be verified. Therefore, an individual's vital data in BENDEX is usually correct. If the name, date of birth, and SSN match **exactly** with the data found on BENDEX and the individual's own SSN is present on the BENDEX record, the SSN is considered validated. A validation code "B" appears on the validation screen in MCI. This "B" code indicates that the SSN was validated by BENDEX, and no further action is needed by the county.
2. If the individual is found on BENDEX but the vital data does not match exactly, a message is printed on the Validation Discrepancy Report indicating that vital data did not match BENDEX.

C. SSN Validation Discrepancy Report

1. When validation cannot be accomplished based on the match with NUMIDENT or BENDEX or when program data differs in MCI, a SSN Validation Discrepancy Report is produced. Counties must resolve the discrepancies to ensure more accurate automated matches.
2. This report is produced monthly for the program specified and is sorted in worker number order.
3. The report indicates the district/worker number (DIST#), county case number (CTY CASE), and Case ID (SYS CASE).
4. The following discrepancy messages may print on the report:

- DOB Does Not Match
 - Name Does Not Match
 - SSN Not In SSA File
 - SSN Does Not Match
 - Items Do Not Match
 - DOB Does Not Match BENDEX
5. If the message on the discrepancy report consists of only a one line error message, the individual data was used in the validation process when it was sent to SSA. This also indicates no other program's data has been validated for the individual. The reason for nonvalidation is indicated by the discrepancy message, and an asterisk (*) is entered by the data in conflict. Research the individual to ensure that EIS contains the correct SSN, name, and date of birth. If the discrepancies in the vital data can be successfully resolved, update the incorrect data field(s) in EIS. The data is then resubmitted automatically to SSA for validation.
6. If the message on the discrepancy report consists of two lines, this indicates that another program's data was previously sent to SSA. The first line contains the other program's validated data. The second line lists the individual matched to an individual in the other program in MCI along with a discrepancy message to indicate what information is different from the validated information. The different data is indicated by an asterisk (*).
- a. If the individual in each program is the same, verify the discrepant data, and correct the information in EIS or FSIS, whichever is incorrect. This should facilitate an automatic validation.
 - b. If the individual listed on the first line is not the same individual listed on the second line, these individuals have been matched in MCI erroneously. Validation is done through MCI. Incorrect information in MCI causes problems with the validation process. (See Appendices - Verification Tools.)
 - c. If individuals are unmatched in MCI, the change causes the unvalidated record to be submitted to SSA for validation. Exercise care when working MCI match reports or when unmatching individuals in MCI to prevent this problem from occurring.

D. SSN Validation Reminder Report

In addition to the SSN Validation Discrepancy Report, a SSN Validation Reminder Report is also produced each month. This report lists individuals from earlier discrepancy reports for which no action has been taken. The report is printed in the same format as the discrepancy report. It is produced when:

1. No action has been taken after 30 days of the original discrepancy report, **or**
2. When an individual has been in EIS more than 90 days with no SSN. The message, "Needs SSN," is printed on the reminder report. Obtain a SSN and update EIS. Without a SSN, the IEVS matches cannot be completed for this individual.

E. Requests For Manual Validations

If an error is discovered in EIS or FSIS data, the caseworker for the program with the incorrect data must make the necessary corrections in EIS or FSIS regardless of whose data validated.

For many years, the information provided to SSA by the wage earners was not verified; thus, in some cases, the vital data in NUMIDENT is incorrect. There is a manual validation procedure to complete the validation process for these situations. See VII. in this section for information regarding the manual validation process.

1. If it is determined that information in EIS is correct but the individual is listed on the discrepancy report, submit a manual validation request. The purpose of the manual validation process is to ensure that the correct SSN is associated with the correct person.
2. Submit your request for manual validation to the following State staff:

Candes Smith, IEVS Coordinator
801 Ruggles Drive
2501 Mail Service Center
Raleigh, NC 27699-2512
Courier # 56-20-06

3. When requesting a manual validation, the following information is required.
 - a. A copy of the discrepancy report;
 - b. Name and telephone number of person submitting the request;
 - c. A copy of the SSA card showing the same name and number as in EIS;
 - d. A copy of the birth certificate or other proof of birth showing the same date of birth as in EIS or FSIS; and
 - e. A copy of the most recent EIS Case Profile or DSS-8590.

Program staff will contact the requestor if there are questions regarding the validation request or will return the request with an explanation if it cannot be completed.
4. Program staff confirms with SSA that this is the correct SSN for this individual. If it is, a validation code "M" is entered by the State Office on the MCI validation screen. The "M" code indicates that a manual validation has been completed for that SSN. The State program staff notifies the county of the SSA's data. The county must notify the family member at the next redetermination that the SSA has incorrect information, and the family member should contact the SSA to make corrections.
5. This manual validation process takes some time to complete, so it is possible that these individuals will continue to appear on the SSN Discrepancy Reminder Report. It is not necessary to send the information to the State Office a second time. Once the "M" code appears on the MCI validation screen, the record no longer appears on the discrepancy or reminder reports.

III. FINANCIAL RESOURCE REPORT (FRR)

- A. This match provides unearned income as reported to the Internal Revenue Service (IRS) by financial institutions, insurance companies, etc. The information on the report is shown by tax year. The FRR is produced annually for all families and monthly for applications in the month following approval.**
- B. The IRS places great emphasis on the confidentiality of the FRR.**

The county must follow these safeguards for the report.

1. One person in each county is designated as the security person for distribution of the report to appropriate supervisors.
2. The supervisors are responsible for ensuring time limits for action on the report are met and that no copies of the report are placed in the family's case record.
3. The case manager must safeguard the reports while they are in his/her office. This includes keeping the report in a locked location when not in use.
4. The final reports, documented with actions taken, must be stored in a single location that is kept locked at all times.
5. The following chart contains all income types that are listed on the FRR.

FINANCIAL RESOURCE REPORT CODES		
Codes You Are Required To Follow Up On		
(Refer to DSS Administrative Letter No. Public Assistance 8-92.)		
FRR Code	Income Type	Description
ADWINIDWG	Additional Winnings or Identical Wagers	Income from identical wagers on horse racing, dog racing, state lottery, keno, casino type bingo, slot machines, jai alai, etc. Reported on Form W2-G.
AGGPROFLOS	Aggregate Profit and Loss	Total profit or loss from regulated futures or foreign currencies contracts. Reported on Form 1099-B.
AGRISUBS	Agricultural Subsidies	Agricultural subsidy payments. Reported on Form 1099-G.
BUSINCOME	Business Income	Beneficiary's share of annuities, royalties, or any other income not subject to passive activity limitation. Reported on Form 1041-K1.
CAPGAINS	Capital Gains	Amount of gross distribution reported as a profit from a stock holding. Reported on Form 1099-DIV.
CSHLIQDIST	Cash Liquidation Distribution	Amount distributed as part of a corporation's partial or complete liquidation. Reported on Form 1099-DIV.
DIVIDENDS	Dividends	Distribution of cash, stock, or other property from a partnership, estate, trust, or merchandise as a shareholder, such as a mutual fund. Reported on Forms 1065-K1, 1041-K, 1120S-K1, and 1099-DIV.

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Change #3-2006

September 1, 2006

FRR Code	Income Type	Description
GROPENSDIS	Gross Pension Distribution	Total amount of distribution from pensions (including disability), profit-sharing plans, retirement plans, employee savings plans, and/or annuities before income tax or other deductions are withheld. Includes premiums paid by a trustee or custodian for current life or other insurance protection, or IRA or SEP distributions; savings bonds distributed from a pension plan; death benefit payments; and death payments made by employers that are not part of a plan. In the case of a distribution representing CDs, the net amount is reported. Reported on Form 1099-R.
GROSWINING	Gross Winnings	Income as a result of wagers on horse racing, dog racing, state lottery, keno, casino type bingo, slot machines, jai alai, etc. Reported on Form W2-G.
GUARANTDPAY	Guaranteed Payments	Partner's share of income for services. Reported on Form 1065-K1.
INTEREST	Interest	Interest income from or credited to: Accounts (including certificates of deposits and money market accounts) with banks, credit unions, and savings and loan associations; Building and loan accounts; Bank deposits, accumulated dividends paid by life insurance companies; Delayed benefits paid by life insurance companies; Notes, loans, and mortgages; Tax refunds; Insurance companies if paid or credited on dividends left with the company; Bonds and debentures (including arbitrage bonds issued by State and local governments after October 9, 1969); Gain on the disposition of certain market discount bonds to the extent of the accrued market discount;

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Change #3-2006

September 1, 2006

FRR Code	Income Type	Description
	Interest (cont'd)	The difference between the stated redemption price at maturity and the issue price of a debt instrument (e.g., stock, bond, or promissory note); U.S. Treasury bills, notes, and bonds. U.S. savings bonds which includes total interest when bond is cashed, when the bond reaches maturity and no longer earned interest, or the yearly increase in the bond's value. Reported on Forms 1065-K1, 1041-K1, 1120S-K1, 1099-INT, and 1099-OID.
LGCAPTAINS	Long Term Capital Gains	Income or loss from partnership or from sales and exchanges of capital assets, stocks, bonds, etc., or real estate held when the time period was more than one year. Reported on Forms 1041-K1, 1065-K1, and 1120S-K1.
NONCSHLIQD	Non-Cash Liquidation Distribution	Fair market value (at time of distribution) of non-cash distributions made as part of a corporation's partial or complete liquidation. Reported on Form 1099-DIV.
NONPATRDIV	Non-Patronage Dividends	Cash, written notice of allocation, or other property distributed by a farmers' cooperative. Reported on Form 1099-PATR.
NONTAXDIST	Non-taxable Distribution	Amount of gross distribution not counted as taxable income. Reported on Form 1099-DIV.
ORDDIVID	Ordinary Dividend	Amount of gross distribution reported as ordinary dividend. Reported on Form 1099-DIV.
ORDINCOME	Ordinary Income	Individual's share of ordinary income, loss, deductions, credits, and other information from corporate activities or from business activities of a partnership. Reported on Forms 1120S-K1 and 1065-K1.

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Change #3-2006

September 1, 2006

FRR Code	Income Type	Description
ORIGISSDSC	Original Issue Discount	The difference between the issue price of a debt instrument (e.g., stock or bond or promissory note) and the stated redemption price at maturity. Reported on Form 1099-OID.
OTHRENTAL	Other Rental	Income or loss activity in which individual did not materially participate. Reported on Forms 1065-K1 and 1120S-K1.
OTHTAXINC	Other Taxable Income	Returns from an annuity contract or retirement bond, retirement account, or death benefit payment that is part of a lump-sum distribution. Reported on Form 1099-R.
PASSINCOME	Passive Income	Rental income from trade or business activities in which beneficiary did not materially participate. Reported on Form 1041-K1.
PATRDIV	Patronage Dividends	Cash, written notice of allocation, or other property distributed by a cooperative. Reported on Form 1099- PATR.
PRIORYRFD	Prior Year State/Local Tax Refund	Refunds, credits, or offsets of State or local income. Reported on Form 1099-G.
PRZS/AWRDS	Prizes and Awards	Income or fair market value (at time of acquisition) of gifted property and/or services. Reported on Form 1099- MISC.
PROFITLOSS	Profit or Loss	Profit or loss realized on closed regulated futures or foreign currencies contracts. Reported on Form 1099-B.
REALESTATE	Real Estate	Income (loss) from activity in which shareholder or partner did not materially participate. Reported on Forms 1065- K1 and 1120S-K1.
REALESTSAL	Real Estate Sales	Gross proceeds from the sale or exchange of real estate. Reported on Form 1099-S.

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Change #3-2006

September 1, 2006

FRR Code	Income Type	Description
REDMPTALLO	Redemption Allocation	Value of written notice of allocation issued as patronage dividends. Reported on Form 1099-PATR.
ROYALTIES	Royalties	Income from oil, gas, mineral properties, copyrights, and patents. Reported on Forms 1065-K1, 1120S- K1, and 1099-MISC.
RENTS	Rental Income	Income received as rents; e.g., owner of housing project real estate rentals for office space, machine rentals, and pasture rentals. Reported on Form 1099-MISC.
SAVINGBOND	Saving Bonds	Interest paid on U.S. Savings Bonds, Treasury Bills, Treasury Bonds, and Treasury Notes. Reported on Form 1099-INT.
SHCAPGAINS	Short Term Capital Gains	Income or loss from partnership or from sales and exchanges or capital assets, stocks, etc., and real estate held for less than one year. Reported on Forms 1041-K1, 1065-K1, and 1120S-K1.
STCKSBNDS	Stocks and Bonds	Gross proceeds from disposition of securities (including short sales), commodities, or forward contracts. Reported on Form 1099-B.
SUBPAYMENT	Substitute Payments For Dividends	Total payments received by a broker on behalf of a taxpayer in lieu of dividends or interest as a result of a transfer of a taxpayer's securities for use in a short sale. Reported on Form 1099-MISC.
UNEMPCOMP	Unemployment Compensation	Payments of unemployment compensation including Railroad Retirement Board payments. Reported on Form 1099-G.

FRR Code	Income Type	Description
UNREALAPPR	Unrealized Appreciation	Portion of distribution that represents net unrealized appreciation in securities of the employer corporation (or subsidiary or parent corporation) attributable to employee contributions. Reported on Form 1099-R.
UNTRETALLO	Retained Allocations	Cash, per-unit retail certificates, and other property distributed by a cooperative. Reported on Form 1099- PATR.

IV. BENEFICIARY EARNINGS EXCHANGE REPORT (BEER)

This monthly match identifies family members who have earnings reported to the Social Security Administration. Earnings reported on this report are:

Identified As	Income Type
SE	Self-Employment Income
PI	Pension Income
FE	Federal Employment Income
ME	Military Employment Income

- One person in each county is designated as the security person for distribution of the report to appropriate supervisors.
- The supervisors are responsible for ensuring time limits for action on the report are met and that no copies of the report are placed in the family's case record.
- The case manager must safeguard the reports while they are in his/her office. This includes keeping the report in a locked location when not in use.
- The final reports, documented with actions taken, must be stored in a single location that is kept locked at all times.

V. INTERSTATE MATCHES

A. These matches are conducted with several other states to determine if family members are receiving benefits in other states. The following matches are run semi-annually.

1. Interstate *Work First Family Assistance* Match
This match identifies the possibility of dual participation by a family member in two states.
2. Interstate ESC Match
This match identifies the possibility of out-of-state employment by a family member.
3. Interstate UI Match
This match identifies the possibility of a family member receiving Unemployment Insurance Benefits in another state.

These matches are forwarded to the county with a letter of instruction on how to interpret the data on the match. Upon completion, the match is to be returned to the Program Integrity Branch.

B. Compare the information shown on each match to the information in the case record.

1. If the income on the match has been previously reported, document on the appropriate page of the ASAP Workbook that the match (by name) was checked and previously verified.
2. If income on the match has not been reported:
 - a. Attempt to verify the source of the income with the family. Verification received from the family should be recorded and filed in the case record.
 - b. If the family cannot verify the income, contact the income source for verification. Remember, information from financial institutions is subject to the Financial Privacy Act and requires a signed DSS-3431, Request For Financial Information.