

KEES August 2020 Release for Medical







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KC-1700 - Passive Elderly and Disabled Review

V008 General Correspondence

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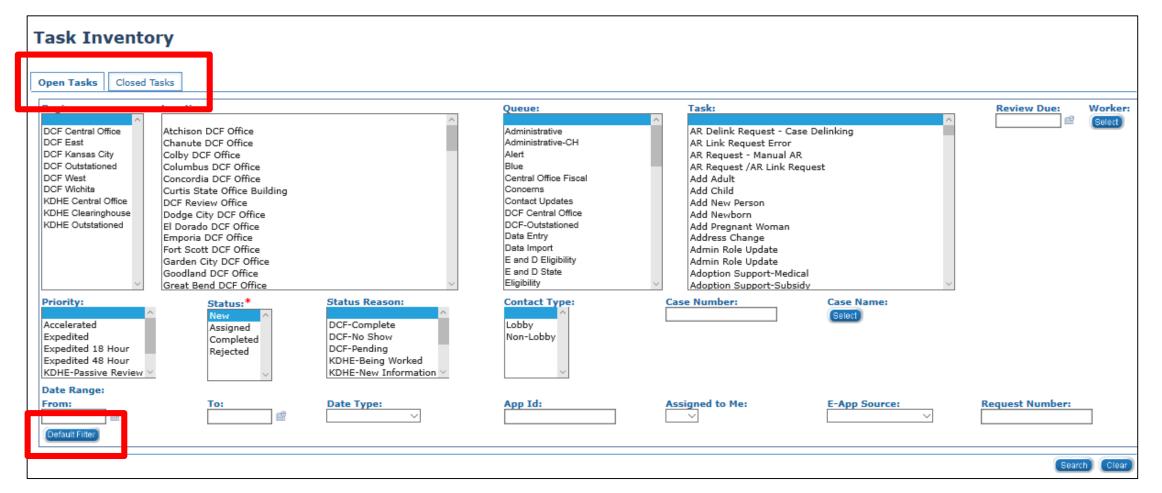




Task Inventory



Changes have been made to Task Inventory filtering options to make it easier for staff when searching for Tasks.

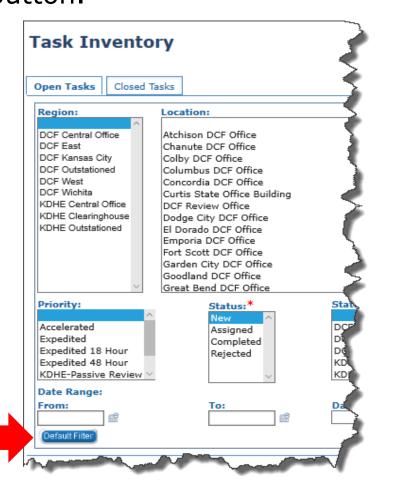


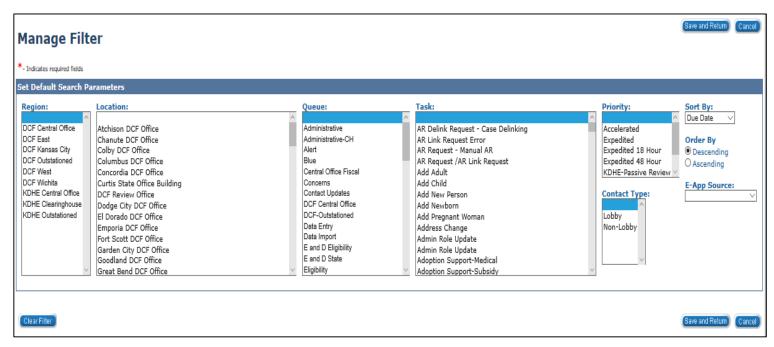


Task Inventory



A worker is now able to set their own defaults for certain search criteria on the **Task Inventory** page. On the **Task Inventory** page, click the **Default Filter** button.





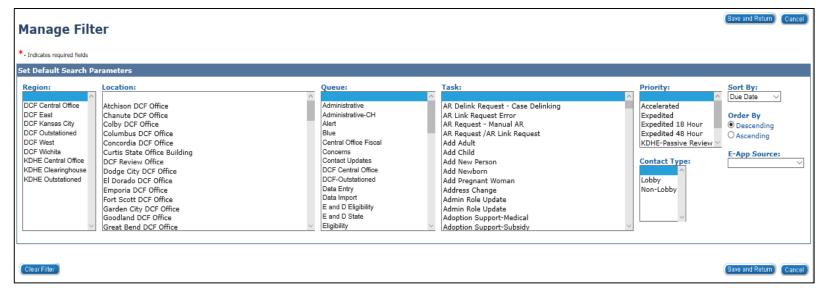
The **Manage Filter** page displays. The worker is then able to select their desired search parameters.

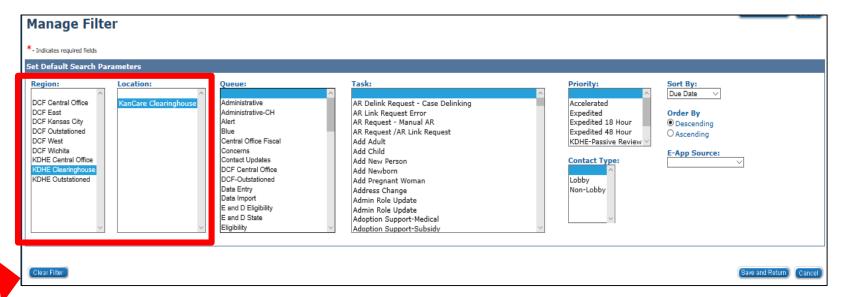


On the Manage Filter page the worker can select a default for the following fields:



Region
Location
Queue
Task
Priority
Contact Type
Sort By
Order By
E-App Source

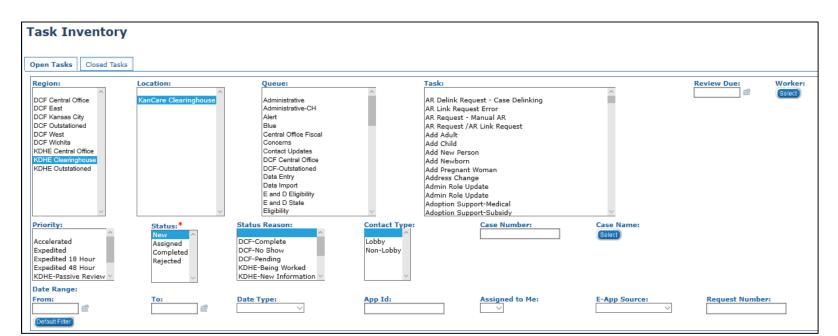




Staff should only select values for the fields they wish to default every time they complete a search.

Click **Save and Return** to save the selections navigate back to **Task Inventory** page.

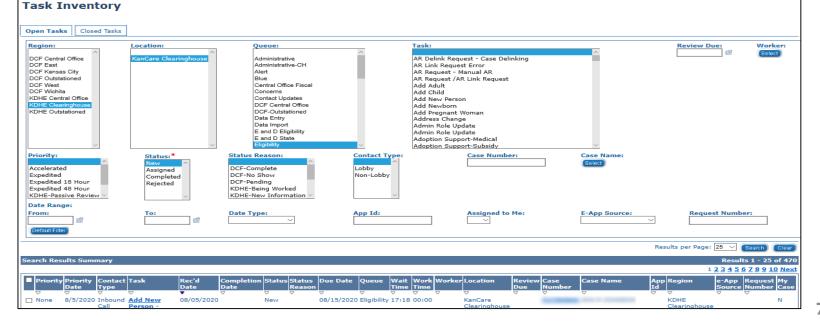
V1.0 The Clear Filter button removes all previously saved selections.





Every time a worker navigates to the **Task Inventory** page the default criteria shows.

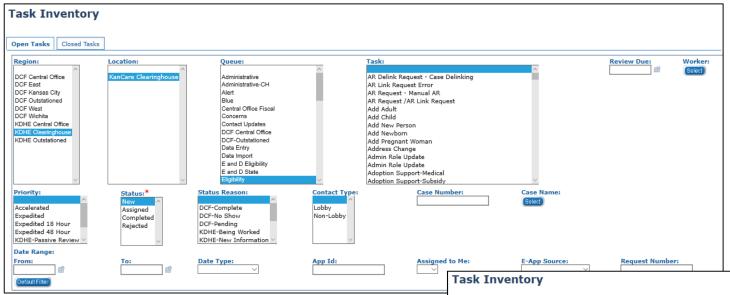
The worker has the ability to update the fields that are defaulted and/or select additional search criteria as needed.



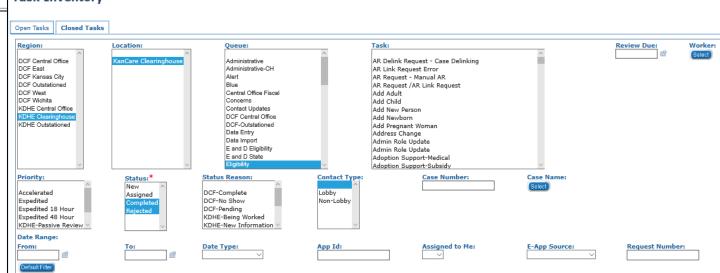


Task Inventory





Search criteria selections are maintained when switching between the **Open Tasks** tab and **Closed Tasks** tabs.

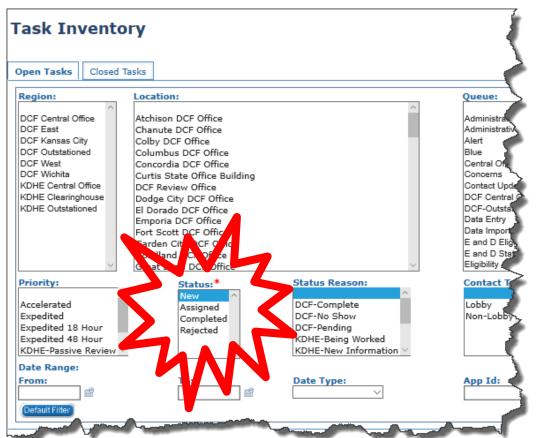




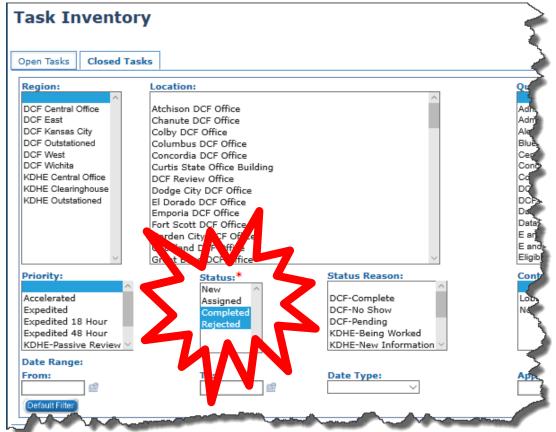


The difference between the two tabs is how the **Status** multiselect box defaults:

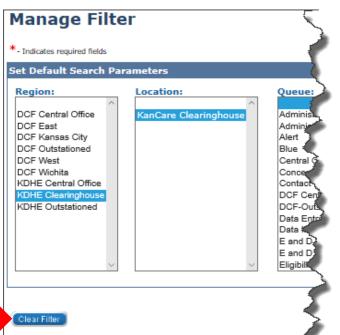
The Open Tasks tab automatically defaults the **Status** field selection to *New*



The Closed Tasks tab automatically defaults the **Status** field selections to *Completed* and *Rejected*



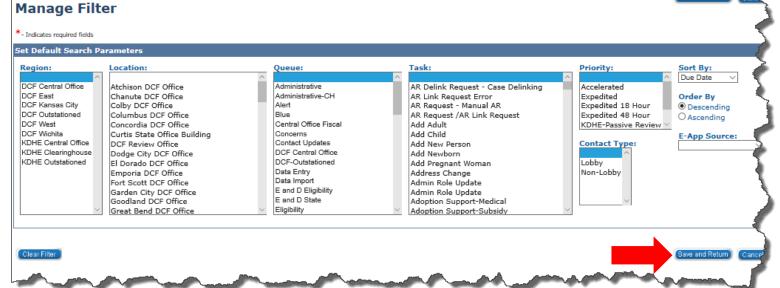




A worker can clear and/or set new default search options by clicking the **Default Filter** button to navigate back to the **Manage Filter** page.

The **Clear Filter** button removes all previously saved selections.

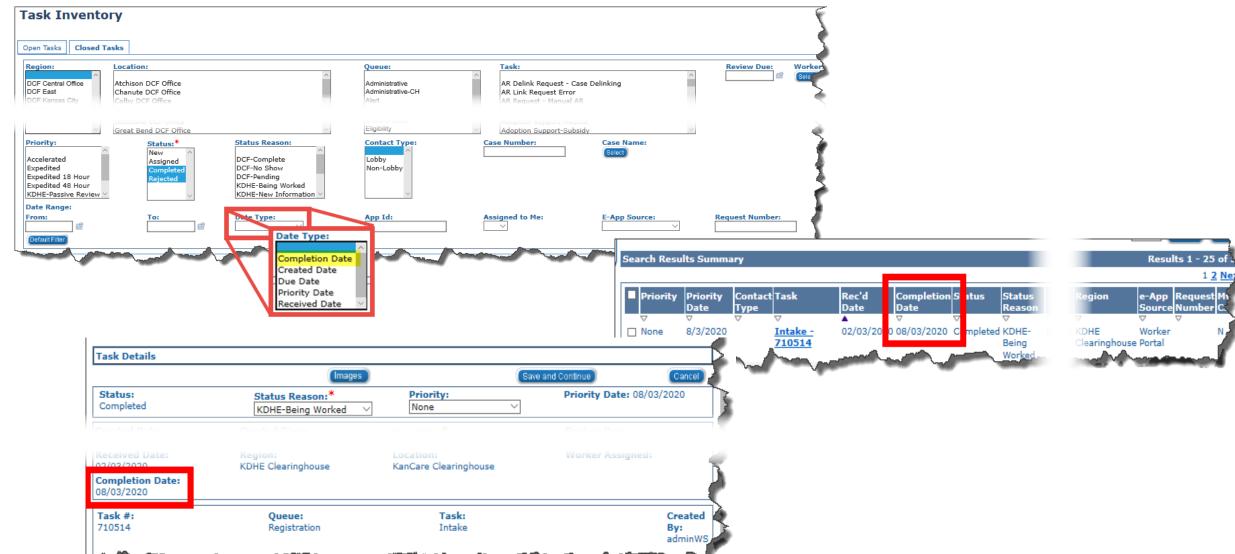
The worker can select new defaults or leave the fields blank then click the **Save** and **Return** button







Tasks can now be filtered by the Date Type of Completion Date. This value has been added to Task Inventory, Search Results Summary, and Task Details.



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Medical Detail Premiums



Medical Detail: Premiums



13

Changes were made to the **Medical Detail** page. The changes relate to how Premiums are displayed. The below screenshot shows how Premiums are currently displayed on the **Medical Detail** page.

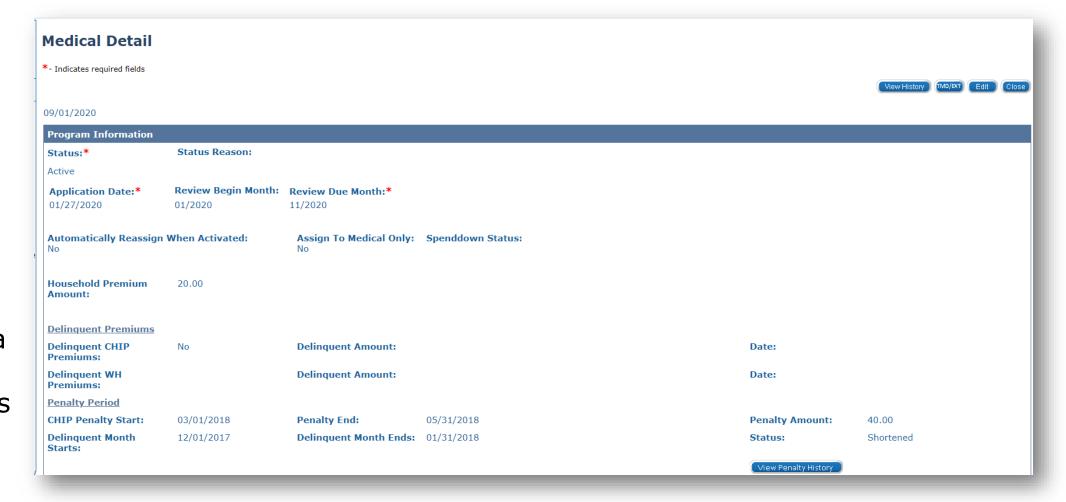
Program Information						
Status:*	Status Reas	on:	Household Premium Amount:			
Active			0.00			
Application Date:* 08/07/2018	Review Begin Month: 07/2019	Review Due Month 04/2020	: *			
Automatically Reassign Yes	When Activated:		Assign To Medical Only: No			
Delinquent CHIP Premiu	ims:					
Delinquent Amount:						
Date:						
Delinquent WH Premium	ns:					
Delinquent Amount:						
Date:						
CHIP Penalty Period						
Penalty Start:	Penalty End	:	Penalty Amount:	Delinquent Month Starts:	Delinquent Month Ends:	Status:
					View Penalty History	
Spenddown Status:					A STATE OF THE STA	



Medical Detail: Premiums



Here is how Premiums on the **Medical Detail** page will display once the August Release is implemented. We will take a closer look at these changes next.



Medical Detail: **Premiums**



Changes to the Premiums section include the:

- Relocation of the Household Premium Amount
- Reformatting of the Delinquent Premiums and Penalty Period data.



- Indicates required fields			
9/01/2020			
Program Information			
Status:*	Status Reason:		
Active			
Application Date:* 01/27/2020	Review Begin Month: 01/2020	Review Due Month:* 11/2020	
Automatically Reassign No	When Activated:	Assign To Medical Only: No	Spenddown Status:
Household Premium Amount:	20.00		
Delinquent Premiums			
Delinquent CHIP Premiums:	No	Delinquent Amount:	
Delinquent WH Premiums:		Delinquent Amount:	
Penalty Period			
CHIP Penalty Start:	03/01/2018	Penalty End:	05/31/2018
Delinguent Month	12/01/2017	Delinquent Month Ends:	04/24/2040

Medical Detail: Premiums



The **Household Premium Amount** displays for CHIP and Working Healthy cases. It is populated by the Medical EDBC Summary page and shows the highest Premium for the household.

Premiums indicates if there are any past due CHIP or Working Healthy Premiums. The amount and date associated with the delinquency will also be listed.



The **Penalty Period** displays the start and end dates as well as the amount of a CHIP Penalty. The Delinquency start, end, and status are also located in this section.



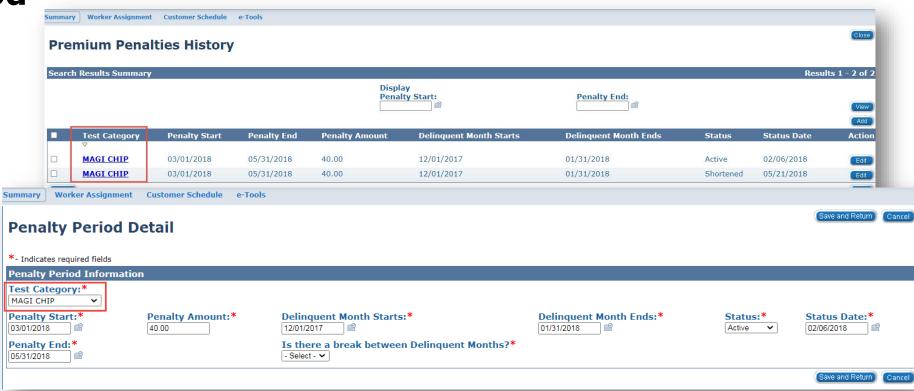
Kansas Eligibility Enforcement System (KEES)

The final
Premium-related
changes are
found on the
Premium
Penalties and
Penalty Period
Detail pages. The
path to both
pages is displayed
to the right.

Click the **View Penalty History** button on the Medical Detail page. The **Premium Penalties History** page displays. Click the **Edit** button by the appropriate record. The **Penalty Period Detail** page displays.

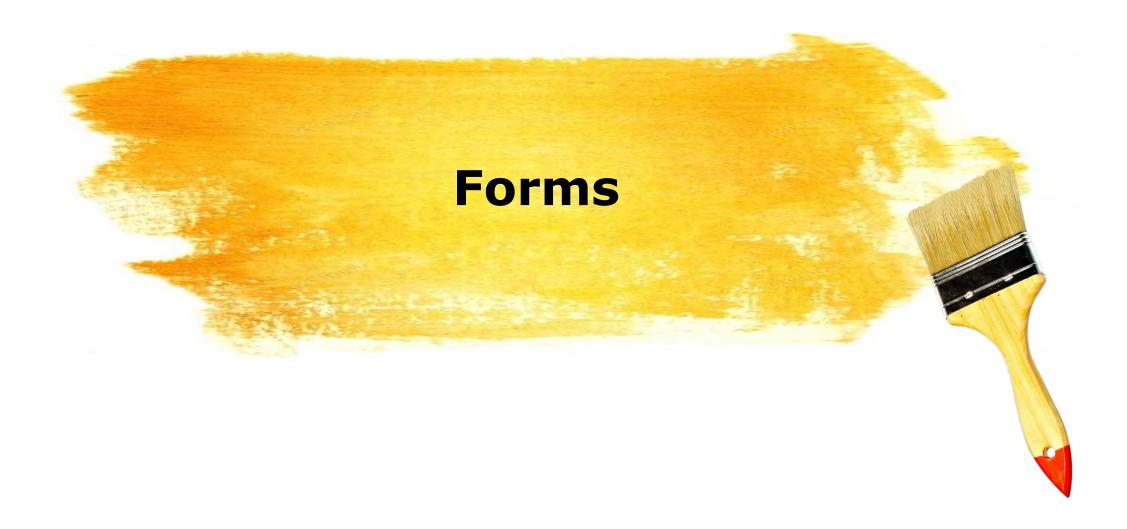
Premium Penalties & Penalty Period Detail





A **Test Category** has now been added to the **Premium Penalties History** and **Penalty Period Detail** pages. *MAGI CHIP* should be the only option displayed in the **Test Category** for both pages.









The **I013 Annuity Referral** and **ES-3122 VA Potential Benefit Request Forms** are now in KEES.

Adding these forms to KEES simplifies and speeds up the process for Eligibility staff.

Both forms can now be printed centrally and viewed in **Distributed Documents**. The forms will no longer be located in their previous locations as they are to be used in KEES moving forward.

KanCare Clearinghouse PO Box 3599 Topeka, KS 66601-9738 Notice Date: 07/21/2020 Case Name: BARRY CASH Case Number: 20293473 BARRY CASH Medical Program: 834 S KANSAS AVE TOPEKA, KS 66612-1203 The State of Kansas has approved the following individual for Long Term Care - Medically Needy medical assistance program: BARRY CASH Under U.S.C. 1917(c)(1)(F), the State of Kansas must be named as a preferred remainder beneficiary of an annuity owned by a Medicaid beneficiary, or the spouse of the beneficiary, receiving long term care assistance. Kansas Medicaid will recover from the funds remaining in the contract at the time of death, up to the amount of medical assistance paid. Our records indicate that the your company. Please list t this individual, or by the ind beneficiary within 90 days of KanCare Clearinghouse

If you have questions call: KanCare Clearinghouse at (800) 792-4884 between the hours of 8 AM and 5

PO Box 3599

BARRY CASH

Topeka, KS 66601-9738

PM Monday through Friday.

KanCare Clearinghouse
PO Box 3599
Topeka, KS 66601-9738

Notice Date: 07/16/2020
Case Name: BARRY CASH
BARRY CASH
834 S KANSAS AVE
TOPEKA, KS 66612-1203

VETERANS ADMINISTRATION POTENTIAL BENEFITS REQUEST
Name of Applicant or Recipient: BARRY CASH
Social Security Number: Case Number: 20293473

Consumers should return these forms to the

uld help them apply for

now but a higher ssistance, they must bunt.

KanCare Clearinghouse.

When this person appears for their scheduled interview, they will sign and date the Authorization to Release Information below and give you this form. Please complete, sign and date the Organization Response section below and return to the person. They will return the completed form to the KanCare Clearinghouse to confirm they have made contact with your organization.

The person whose name is shown above may be eligible for benefits from the Department of Veterans

Affairs (VA). As a condition of eligibility for medical assistance, this person must file for any VA benefits

Thank you for your assistance.

they are potentially eligible to receive.

AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize the Kansas Department of Health and Environment Division of Health Care Finance to release the information shown above. I also authorize your organization to release any information to the Kansas Department of Health and Environment Division of Health Care Finance about any claim I have filed or intend to file with your organization.

Signature:	Date:

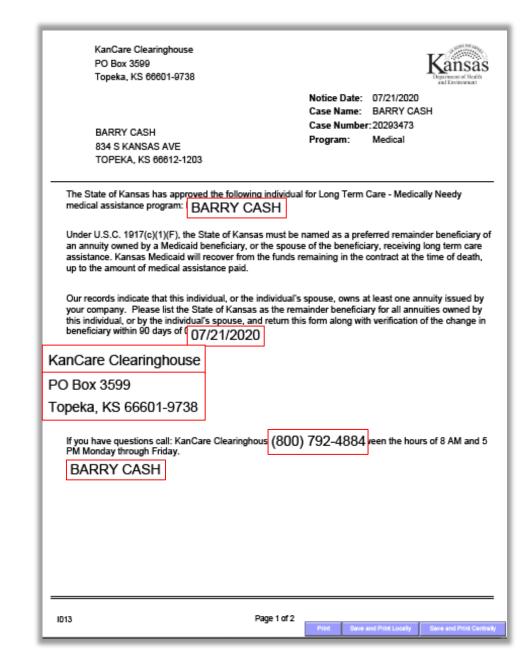
the Kansas Department of Health and Environment Division of Health Care Fir have filed or intend to file with your organization.





The **I013 Annuity Referral Form** is now a KEES Form that auto-populates with:

- 1. Consumer Name
- 2. The date the form was generated, which is used to determine the due date for returning the form with the required verifications.
- 3. Name and address of the office to which the case is assigned.
- 4. Office phone
- Consumer Name or name of the person who should receive additional correspondence.



NOTE:
None of the prepopulated fields
in the **Annuity Referral Form**are editable.





KanCare Clearinghouse PO Box 3599 Topeka, KS 66601-9738



Notice Date: 08/12/2020

Case Name:

Case Number:

Program: Medical

Name of Applicant or Recipient:

Social Security Number:

Case Number:

The person whose name is shown above may be eligible for benefits from the Department of Veterans Affairs (VA). As a condition of eligibility for medical assistance, this person must file for any VA benefits they are potentially eligible to receive.

We told this person to contact your office to make an appointment to see if you could help them apply for VA benefits.

We understand that in some cases the person can get a lower benefit if they apply now but a higher benefit if they apply later. However, they cannot wait. To be eligible for medical assistance, they must apply now and take whatever benefit the VA will give, even if that is a reduced amount.

When this person appears for their scheduled interview, they will sign and date the Authorization to Release Information below and give you this form. Please complete, sign and date the Organization Response section below and return to the person. They will return the completed form to the KanCare Clearinghouse to confirm they have made contact with your organization.

Thank you for your assistance.

AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize the Kansas Department of Health and Environment Division of Health Care Finance to release the information shown above. I also authorize your organization to release any information to the Kansas Department of Health and Environment Division of Health Care Finance about any claim I have filed or intend to file with your organization.

Signature:	Date:	

The **ES-3122 VA Potential Benefit Request Form** is now in KEES.

- 1. The Name of Applicant or Recipient field auto-populates with the Primary Applicant's name, but is also editable. If the request is for the Spouse, Eligibility staff can delete the PA's name from this field and enter the Spouse's instead.
- 2. The **Social Security Number** field is not auto-populated and needs to be completed by the Eligibility worker.





The Review Your Health *Insurance* and *Other* Health Insurance tables in these four forms will now populate with both private health insurance plans as well as Medicare when applicable. This information is autopopulated from the **Third Party Liability – Other Insurance List (TPL)** page and the **Medicare** Expense List page.

- KC-1200 Pre-Populated Family Medical Review
- KC-1300 Passive Family Medical Reviews
- KC-1600 Pre-Populated Elderly and Disabled Review
- KC-1700 Passive Elderly and Disabled Review

F. Review your Health Insurance We have listed the information you told us. Tell us about changes.		
Name	Name of Insurance	Any Change?
BARRY CASH	BLUE CROSS BLUE SHIELD	☐ No ☐ Yes
Is there any change in any of the health insurance listed above? No Yes If yes, answer the question in Step3.		

NOTE: Another change is the *removal* of the Premium amount from the **Other Health Insurance** pre-populated review forms.

Other Health Insurance

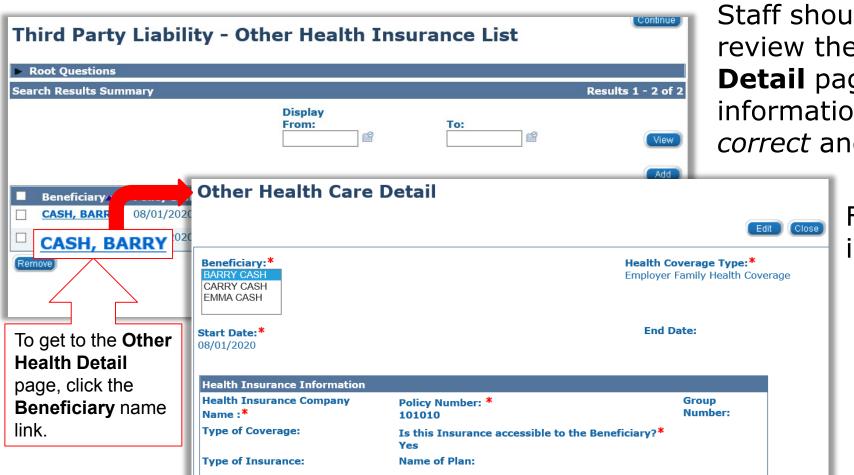
Our records show the following health insurance for your household. If anyone has dropped, added or changed coverage, tell us now.

Person:	Insurance/Company:
BARRY CASH	BLUE CROSS BLUE SHIELD





- KC-1200 Pre-Populated Family Medical Review
- KC-1300 Passive Family Medical Reviews
- KC-1600 Pre-Populated Elderly and Disabled Review
- KC-1700 Passive Elderly and Disabled Review



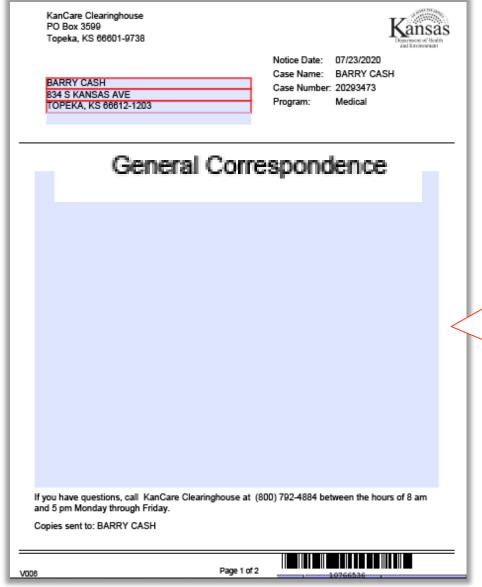
Staff should go to the **TPL** to review the **Other Health Care Detail** page to check insurance information to make sure it is correct and up-to-date.

Failure to check this information results:

- ✓ in wrong information,
- ✓ calls to the KEES Help Desk, and
- ✓ consumer confusion.







The V008 form is now simply titled **General Correspondence.**

The **General Correspondence**Form includes a field for optional user entered text of 90 lines or up to 6,750 characters.





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The **D100 MediKan Approval Form** has been updated to display the correct resource limit.

KanCare Clearinghouse PO Box 3599

Topeka, KS 66601-9738



Notice Date: 07/21/2020 Case Name: BARRY CASH Case Number: 20293473 Program: Medical

BARRY CASH 834 S KANSAS AVE TOPEKA, KS 66612-1203

MediKan Approval

We have approved your application for medical assistance received on 7/1/2019. BARRY CASH is covered under the MediKan program effective.

The Client ID number is 00110385963.

You can only receive MediKan coverage for 12 months.

This action is based on our assessment of your disability. This is also based on the status of your application with Social Security. You must cooperate with Social Security. Failure to cooperate will result in the loss of health care coverage.

This approval is for MediKan coverage. We have determined you do not meet the necessary disability standards to qualify for Medicaid. Therefore, your application for Medicaid will not be held in pending status and is denied. This action is in accordance with Medical KEESM 2638, 2662.10, and subsections. If you have new medical information, it must be reported within 10 days of this letter.

If you are determined eligible for Supplemental Security Income (SSI) in the future, we may be able to backdate your medical coverage. You must report the approval within 10 days from the date you are notified by the Social Security Administration.

MediKan Reporting Requirements

You must tell us about the following changes within 10 days of the time you learn of the change.

- If the source of your income changes.
- 2. If the amount of your income goes up or down.
- If you get married, separated or divorced.
- 4. If you move to a new address.
- 5. If you or your spouse enter or leave a hospital or institution

6. If your total cash, savings or other resources goes over \$3000.00.

8. If the status of your Social Security Disability claim changes.
 We want you to get the correct medical coverage. Please help us by reporting these changes.

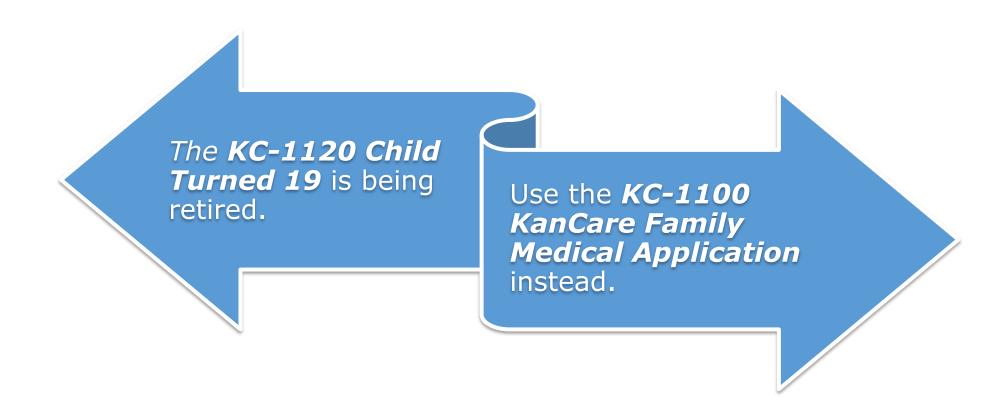
D100

Page 1 of 4

Print Serie and Print Locally Serie and Print Locally Serie and Print Centrally















Several changes have been made to the fragments or snippets that are in NOAs.

- Modifying the <___>is no longer eligible for <___> benefits and extra help with Medicare Part D Prescription Drug Costs (K-M311) to display only when needed.
 - This fragment informs consumers that they are no longer eligible for Medicaid and will not receive further help with Medicare Part D Prescription Drug costs.
 - It will now only display when a consumer has received Medicare Part D coverage, in addition to Medicaid, in the previous EDBC month.





Removed Fragments

The below fragments have been removed as they are no longer needed per KDHE Policy.

This action was taken because a member of the family has access to the State Employees Group Health Insurance through their employment with the state, county, school district, or another public agency.

This action was taken because you became ineligible for cash assistance because of increased income from employment. fragment was previously sent on discontinuances for the Refugee Medical program.

K-R30 Access to Health Insurance K-R54 Refugee Medical









As you know, making changes to KEES is essential to supporting the eligibility determination process. Making changes to KEES requires input from KDHE Policy and Business personnel as well as time to actually change KEES itself.

Sometimes, the changes in KEES are completed before KDHE Policy and Business are ready to implement them. When this happens, the changes are usually suppressed so they are *not* visible to Eligibility staff.

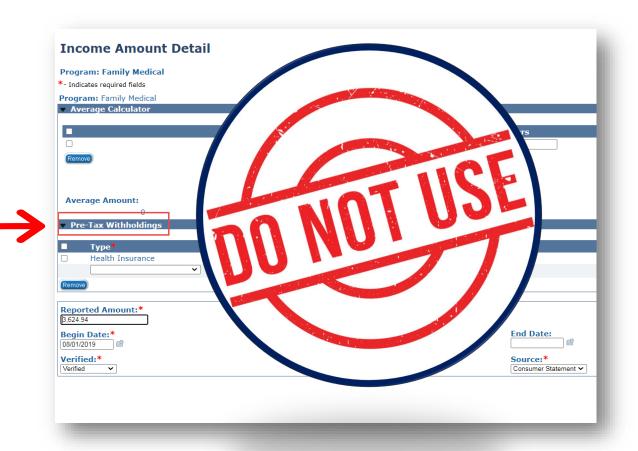
With the August 2020 Release, functionality changes have been made to the **Income Detail** page that Eligibility staff will see but should *not* use when determining eligibility.





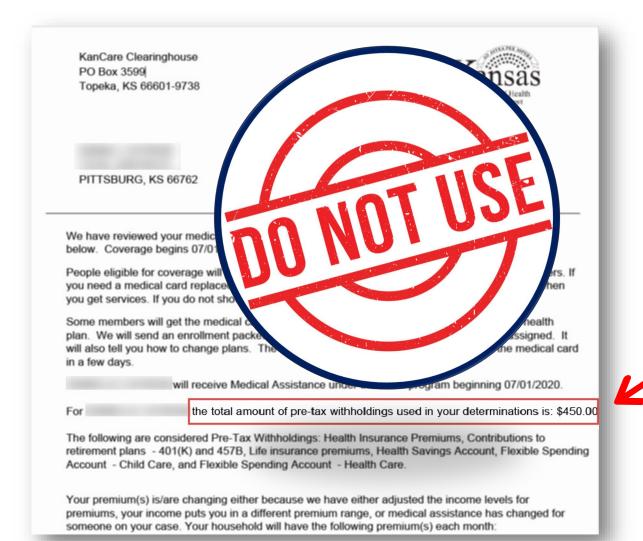
A Pre-Tax Withholdings section has been added to the Income Amount Detail page. Eligibility staff should not use this section until instructed to do so by KDHE Policy and Business.

Using this section prior to its implementation by KDHE Policy and Business will result in incorrect Eligibility determinations.









Two snippets were also created as part of this change. These snippets will only populate when data has been entered in the **Pre-Tax Withholdings** section.

If a NOA or Form includes information about *pre-tax* withholdings, as in this example, delete it and remove the record from the **Pre-Tax** Withholdings section on the **Income Amount Detail** page. Rerun **EDBC** and review the NOA to ensure it is correct.





In addition to the **Pre-Tax Withholdings** functionality, it is possible you will see some other coding or content that should've been suppressed. If this happens, please create a KEES Helpdesk ticket.

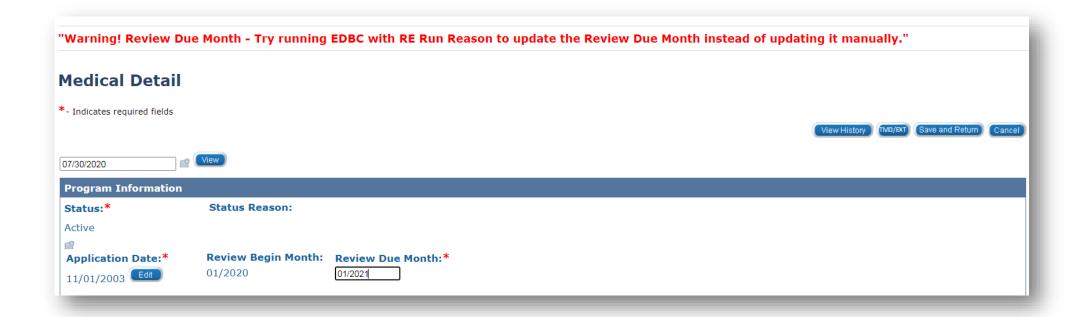








A soft warning has been added to the **Medical Detail** page. The "Warning! Review Due Month – Try running EDBC with RE Run Reason to update the Review Due Month instead of updating it manually" message displays when Eligibility staff attempt to change the **Review Due Month** to a future month.



Reviews



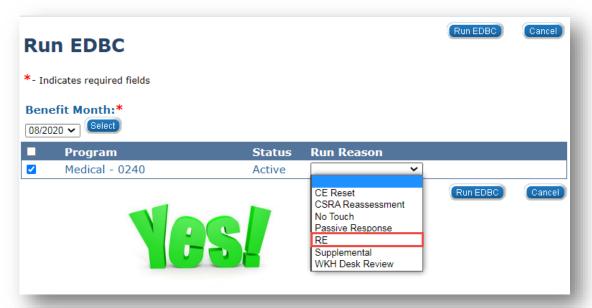
This soft warning message was created because Eligibility workers have incorrectly moved 75,000 **Review Due Month** records forward. Incorrectly changing a **Review Due Month** on the **Medical Detail** page requires data 'clean-up' so the case is picked up by batch.

When Eligibility staff get this warning, they should click **Cancel** and navigate to **EDBC**; once there they should select the correct system month and use the *RE Run Reason* to revise the **Review Due Month**.

The notable exception to this rule is an instruction received from KDHE Policy to manually

extend the **Review Due Month**.









As an Eligibility worker, you may come across an Active case with a **Review Due** date in the past. In some situations, a Pre-Populated Review will need to be manually sent to the household.

When this happens, Eligibility staff must submit a ticket to the KEES HelpDesk who will:

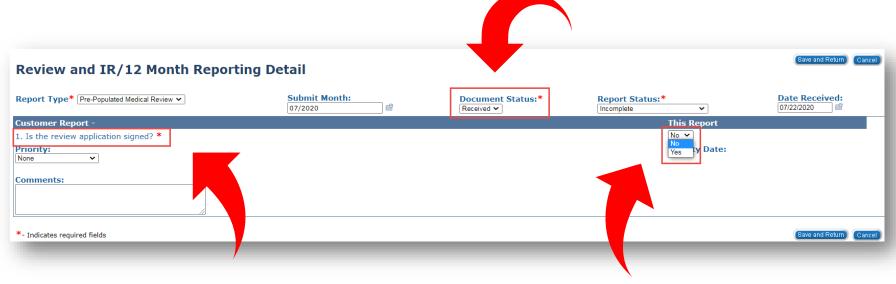
- Adjust the Review Due Date
- Add the Pre-Populated Review

This, in turn, adds the case to the Review Discontinuance batch. By doing so, it will no longer be necessary to create a future task to manually close the case if the Review isn't returned.





A review sent manually will not have a barcode on it. To ensure that the case is picked up by future batches, Eligibility staff need to update the **Document Status** field to *Received* on the **Review and IR/12 Month Reporting Detail** page.



Is the review application signed? must still be completed. Failing to update this field will cause the case to be closed by the Review Discontinuance batch.



