

The Oregon DHS MMIS 834
Maintenance Reason Code Crosswalk

Code	What this code means	Used	Maintenance Reason Code	Description
AC	Access to Care	When care cannot be received for current medical needs.	16	Quit
AD	Adoptions	Used when a case transfers from the biological parent to an adoption case.	05	Adoptions
AP	Alternate Prime	When a duplicate prime is identified. Close enrollment on one prime and transfer to another.	22	Plan Change
CC	Contract Change	When there are changes with a managed care plan or provider that either reduces or increases their access within a specific geographic area.	22	Plan Change
DP	Deceased person	When a clients managed care enrollment is ended due to death.	03	Death
EE	Enrollment error	When a data entry error has been made	14	Voluntary Withdrawal
EX	Exemption	When an approved exemption from managed care enrollment is	18	Suspended
LE	Loss of eligibility Auto/HMU	When it is determined that a client is no longer eligible for enrollment.	07	Termination of benefits
MC	Medicare	When a client opts out of a Medicare plan or when a plan requests disenrollment for an absent 7208M form.	22	Plan Change
MM	Medical Management	When a client is closed to managed care plan and	22	Plan Change
MO	Moved out of Area Auto/HMU	When an address change has been done and the client is retaining the same plan but it has a different H, D, P or M number	22	Plan Change

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OR	Client request at re determination	When client recertifies	14	Voluntary Withdrawl
PC	Program Code Change Auto/HMU	Primarily used when a client changes from plus to standard and the plan does not serve standard clients.	22	Plan Change
QC	Continuity of Care	When an established plan of care can not be maintained and could result in decling client outcomes	33	Personnel Data
RO	Rollover	When a plan has a name change or other reason DMAP is required to change client to new PHP.	22	Plan Change
TP	Client has third party resource (TPR)	When managed care enrollment is ended due to TPR	37	Leave of Absence with benefits
TR	Client transferred to a non PHP area Auto/HMU	When a client moves to an area not services by the same managed care plan. If the new area is mandatory, the client will have to choose a new plan, otherwise auto enrollment will take place.	22	Plan Change

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DMAP Maintenance Reason Codes	Description	Maintenance Reason Code	Description	Comments
AG	Age Requirement Not Met	AI	No Reason Given	
AW	Appointment Wait Time	AI	No Reason Given	
CF	Confidential	AI	No Reason Given	
DC	Dual Coverage	AI	No Reason Given	
ER	Emergency Room	AI	No Reason Given	
ET	Emergency Time	AI	No Reason Given	
FP	File Problem	AI	No Reason Given	
HR	Hearing Scheduled	AI	No Reason Given	
LN	Language Barrier	AI	No Reason Given	
ME	Maternity Ended (discontinued 1/92)	AI	No Reason Given	
MV	Motor Vehicle Administration	AI	No Reason Given	
PD	New Plan Covers Dental	AI	No Reason Given	
PE	Doctors Explanation Poor	AI	No Reason Given	
PL	Provider Location	AI	No Reason Given	
PN	Provider No Longer Enrolled	AI	No Reason Given	
PS	Physicians Staff Rude	AI	No Reason Given	
PW	Provider Wait Time	AI	No Reason Given	
RL	Religious Considerations	AI	No Reason Given	
SE	Stop Loss Status Ended (HMG use only)	AI	No Reason Given	
SL	Stop Loss (HMG use only)	AI	No Reason Given	
SP	Special Needs Children	AI	No Reason Given	
SR	Special Referral	AI	No Reason Given	
TS	Transfer within area (discontinued 5/95)	AI	No Reason Given	
UM	Client Unmanagable (HMG use only)	AI	No Reason Given	

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WC	Workers Compensation Insurance	AI	No Reason Given	
WT	Wait Time in Office	AI	No Reason Given	