# VIEWING ELIGIBILITY IN MMIS

## MATCHING MMIS BENEFIT PLAN AND CASE DESCRIPTORS TO SOURCE SYSTEM

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## TIPS FOR VIEWING MMIS ELIGIBILITY IN REAL-TIME

### **UCMS**

To send your updates to MMIS in real-time:

- Enter changes in UCMS and double save (press F9 twice) \*OR\*,
- Integrate via ORACCESS, open the case in UCMS, open SCMS, then press F9.

Otherwise, check MMIS the following day to ensure updated eligibility matches UCMS <u>before</u> submitting a <u>CMU</u> <u>request</u>.

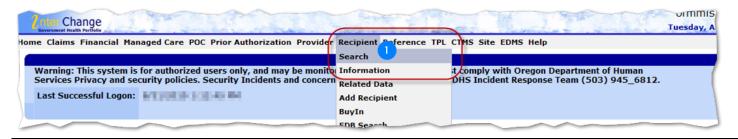
### ONE

Sometimes eligibility does not push over from ONE in real-time. Wait a few minutes and refresh MMIS to confirm eligibility was pushed to MMIS before submitting a CMU request.

### VIEWING MMIS BENEFIT PLANS AND CASE DESCRIPTORS

After logging in to MMIS, you will see the tool bar shown below.

Click on Recipient, then click Search [1].

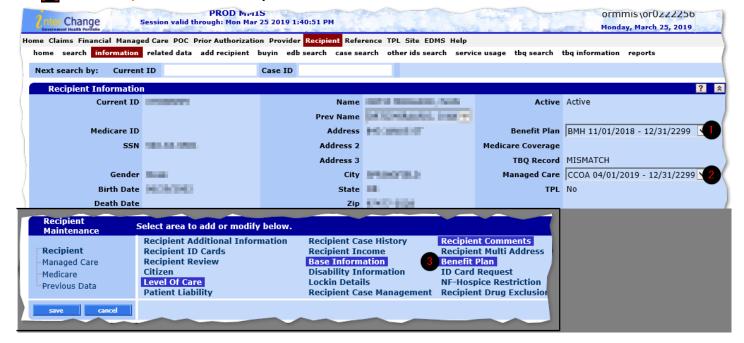


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- In the *Recipient Search* panel (below), enter the Prime#, Case# or SSN [1] in the appropriate field, and click Search [2].
  - Note: Searching by Prime# in the Current ID field is the most direct method.



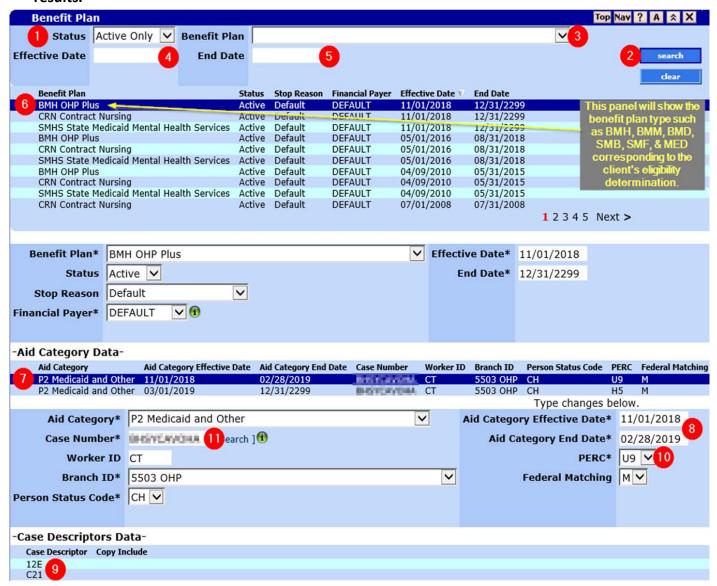
- In the Search Results panel, click any of the lines that are returned for your client [3] and the screen below will display.
- The Benefit Plan eligibility 11 and Managed Care 22 is displayed at the far right of the Recipient Information panel, but a full picture of both current and past eligibility is available by clicking Benefit Plan in the Recipient Maintenance panel.



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- Once the Benefit Plan panel appears, you will see a Status [1] dropdown.
- Select Active Only [1] then click Search [2] on the right (shown below). This will allow you to see only the Active lines.

Note: You can filter by *Benefit Plan* [3], *Effective Date* [4], or *End Date* [5] by using the fields in the upper portion of the Benefit Plan panel, or sort by clicking on the appropriate column heading name above the results.



- Click on the *Benefit Plan* [6] that is most recent or for the time frame in question.
- The Aid Category panel will display below the Benefit plan panel.
- Click on the appropriate *Aid Category* [7] line to view specific <u>Effective Dates and End Dates</u> [8]. Case <u>Descriptors</u> [9], PERC codes [10], Case Number [11], in addition to other case information.

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### COMMON MMIS BENEFIT PACKAGES, CASE DESCRIPTORS, & PERC CODES

The following are examples of how some of the most common Benefit Packages and associated Case Descriptors appear in MMIS. This is not an exhaustive list, nor should it be used in determining eligibility.

### ОНА

- 1. Benefit Package **BMH** = OHP Plus
  - o Case Descriptors: AMO, CMO (CM1), C21, PCR, PWO, etc.
  - o Program: P2
  - o PERC: Varies based on client age, household composition, and income

### APD/SSD

- 1. Benefit Package **BMD** = OHP with Limited Drug
  - o Case Descriptors: SBI, SMB, CBI, or SMF
  - o Program: A1 or D4 Only
  - o PERC: A1 or D4
- 2. Benefit Package **BMM** = QMB + OHP w/Limited Drug
  - o Case Descriptor: QMM
  - o Program: A1 or D4
  - o PERC: A1 or D4
- 3. Benefit Package BMH = OHP Plus
  - Case Descriptors: none of the case descriptors in #1 or #2 above
  - o **Program:** A1 or D4
  - o PERC: A1 or D4

### BUY-IN ONLY (NOT A1 OR D4)

- 1. Benefit Package **MED** = (Qualified Medicare Beneficiary)
  - o **Case Descriptor**: QMB
  - o Program: P2 Only
  - o PERC: QB
- 2. Benefit Package **SMB or SMF** = (QMB Premiums Only)
  - Case Descriptor: SMB or SMF
  - o Program: P2 Only
  - o PERC:
    - SMB=SL
    - SMF=QI

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