SPD Oregon ACCESS Inquiry Training Guide

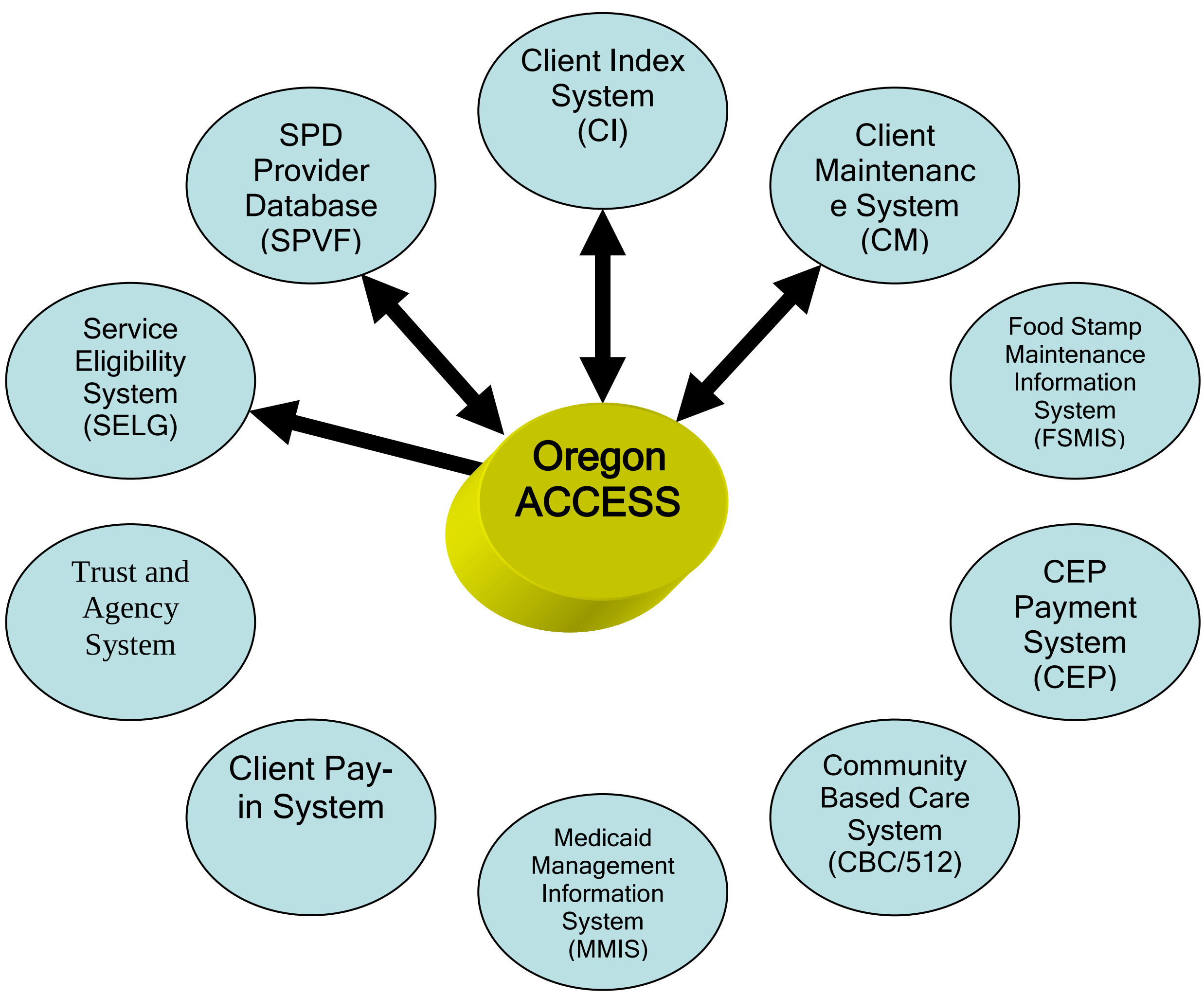
January 2014

Introduction

What is Oregon ACCESS?

ACCESS is an acronym for - Automated Computer Capture and Storage System. The Oregon ACCESS project was started in mid 1995, with the goal of creating a computer system that would automate the application and intake processes.

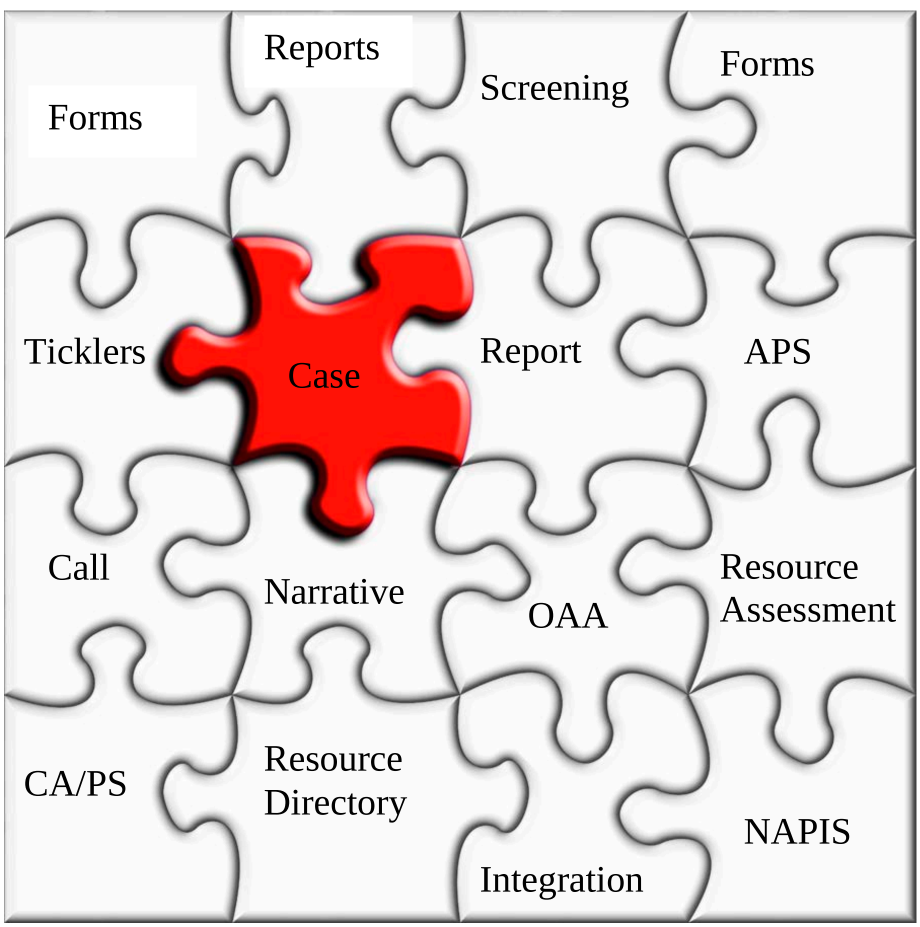
Oregon ACCESS is one of many computer systems that APD staff will encounter. It is connected to some, but not all, of the other systems that we might use in our daily work.



What does Oregon ACCESS do?

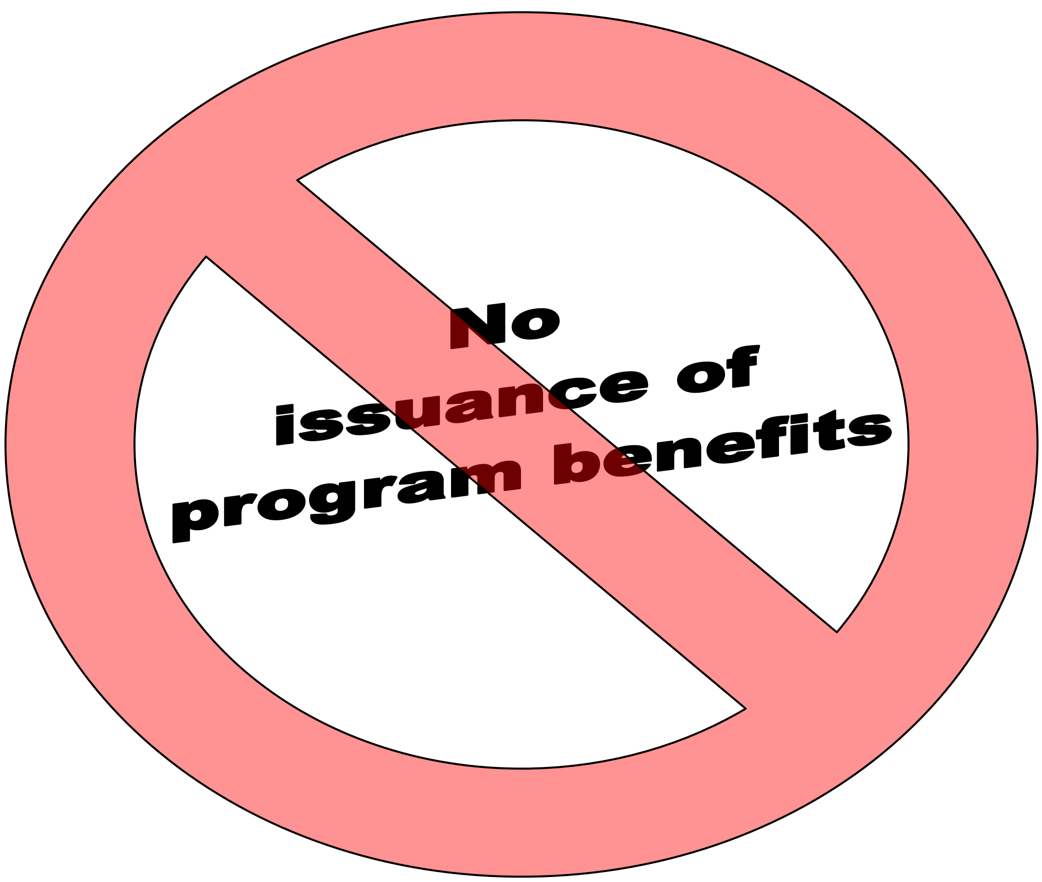
Oregon ACCESS is a data storage tool (database) with a variety of case management support tools. Since its implementation, Oregon ACCESS has evolved into a large-scale multifaceted case management system. It is made up of many components.

Case Modules
Screening Module
Resource Assessment Module
Adult Protective Services Module
Older Americans Act/ NAPIS Modules
Forms Generation
Report Generation
Narrative



What does Oregon ACCESS NOT do?

- Oregon ACCESS does not make eligibility determinations
- Oregon ACCESS does not issue medical, cash, or food benefits
- Oregon ACCESS does not issue home care worker vouchers
- Oregon ACCESS does not create Community Based Care (512) authorizations
- Oregon ACCESS does not create Nursing Facility authorizations
- Oregon ACCESS does not communicate with the MMIS



How do I use Oregon ACCESS?

Expectation of Use

It is the expectation of DHS that Oregon ACCESS is used to capture APD client information. It is also the expectation that integration between Oregon ACCESS and the mainframe occurs on all cases. Integration is available between Oregon ACCESS and the following systems: Client Index (CI), Client Maintenance (CMS), and Service Eligibility (SELG).

Design

The system has been designed to accommodate many working styles. It may be used in the office on desktop computer, or during field visits using laptop computers. Since ACCESS does not force a set pattern of data entry, the system is quite user friendly. It is easily accessible and simple to use.

Standard Process Overview

- The process usually begins by searching for a person or persons in the system.
- If no person is found in the system, you will create one.
- Once in the database, you may begin entering data about the person. Oregon ACCESS allows the user to create a case, call, screening, or resource assessments for the person. The user may enter demographic, financial, medical and other information necessary to complete the sections.
- Once the information is entered, the system will allow you to generate forms, referral documents, reports and ticklers. It will also allow you to pass some information about the client to the DHS/OHA/APD mainframe systems.

The end goal is to save you time!

Login, Main Menu, Navigation Options

Log In and Main Menu

<u>Oregon ACCESS “Training” vs. “Production”</u>

If the machine is connected to the State server, there will be two separate Oregon ACCESS icons on the desktop.

The “Production” icon looks like:

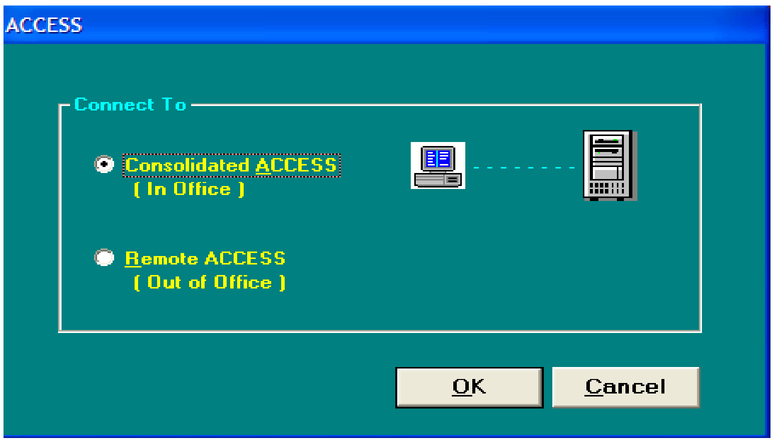
The “Training” icon looks like:

If connected to the State server, the ACCESS Training area is available to use. To login to the ACCESS Training area, double click on the ACCESS Training icon. A login box will open. The User ID will default to hstrng4.

The Training password is: ____________________________________.

Oregon ACCESS Remote and Consolidated Login

There are two types of computers used by DHS/OHA/AAA staff. One is a standard desktop computer and the other is a laptop machine. Standard desktop computers are used only in the office. Laptop machines are used in the office and in the field. When logging into the system machine, you may see two types of login to choose from, Remote and Consolidated.



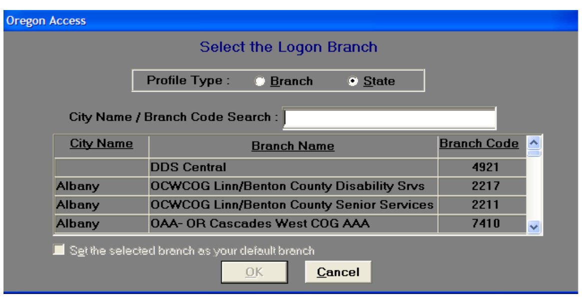
- Remote ACCESS (Out of the Office): This option should be selected when using the laptop. Users will not have the ability to enter consolidated ACCESS when in this mode. Only those cases the worker has downloaded to the laptop will appear when connected in this mode. This option should also be used when the user is in the office and wishes to check out data.
- Consolidated ACCESS (In the Office): This option should be selected when a worker is in the office and the laptop is docked. ACCESS will run normally. When this option is selected, users will be able to view and use all consolidated ACCESS data.

If the computer is a desktop computer or is not set up for a laptop use or Remote access, these options will not be available, and upon clicking the Oregon ACCESS icon, the login box will pop up.

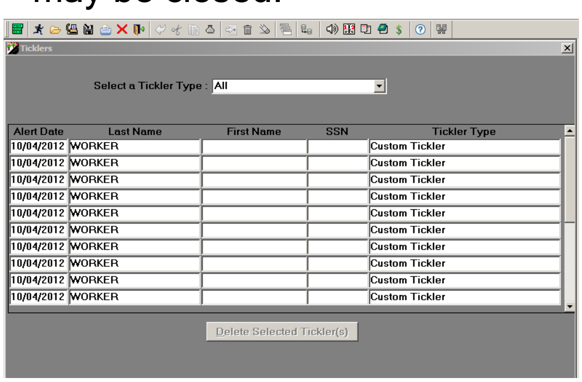
Log In

The Oregon ACCESS login window allows for entry of the User ID and Password. It also provides login options that the user may customize.

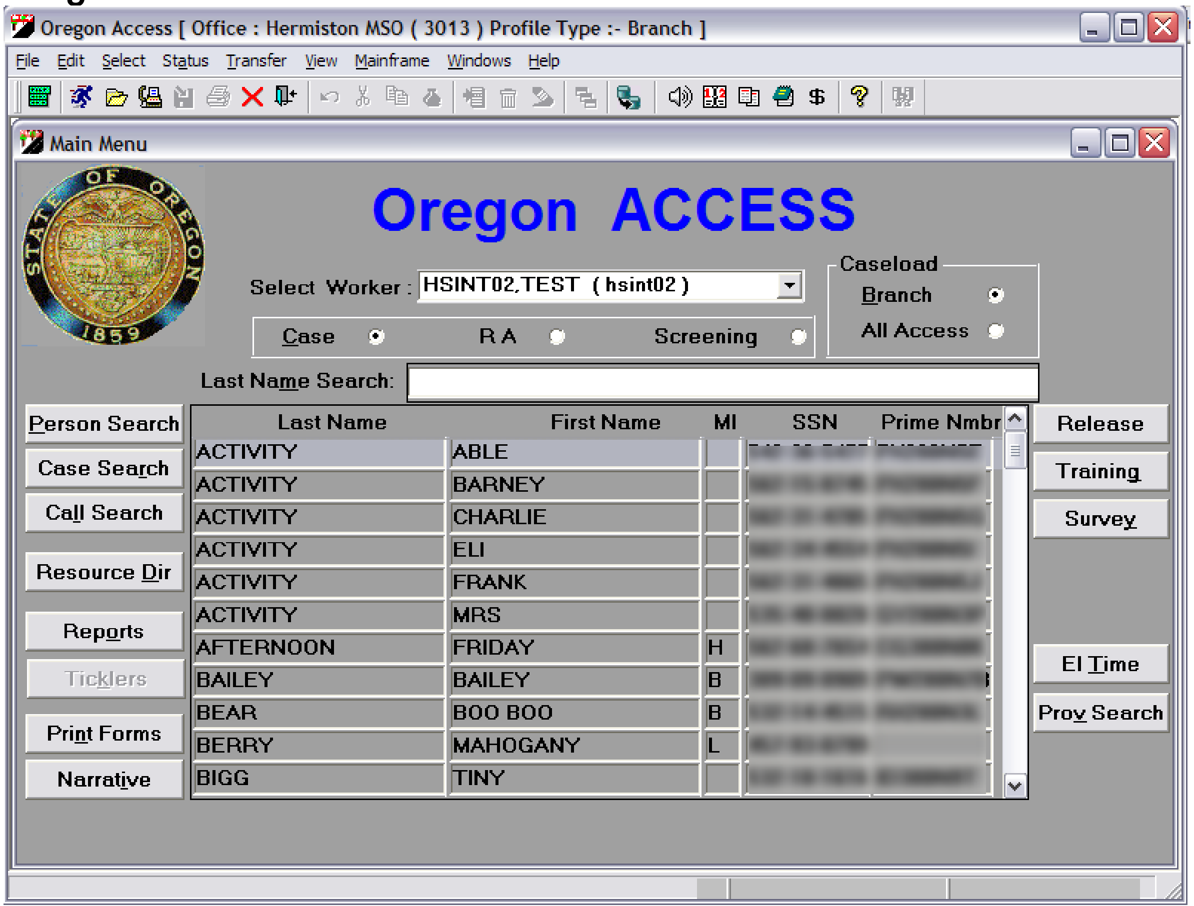
- User ID: This is always your RACF ID.
- Password: This needs to be the same as your RACF Password.
- Logon Branches: Some Oregon ACCESS users have rights to update all or parts of Oregon ACCESS records in multiple branches. Users who have access to multiple branches may check this box to be presented with a branch selection pop up box from which they may select the branch into which they will log in. Select the branch by either typing the branch number or the branch city in the search box. Once the branch is highlighted, click OK.



- Ticklers: If this box is checked, ACCESS will automatically open the Ticklers list. The Ticklers may be viewed from here, or the list may be closed.



Oregon ACCESS Main Menu



The Main Menu is the first screen displayed when logged into ACCESS. This menu will allow the user to access many different areas within ACCESS. The Main Menu consists of the following:

1. Toolbar
2. View Criteria
3. Case List and Search
4. Buttons
5. Ticker

1 – Toolbar

There are two toolbars available on each screen.

- The File Menu: This toolbar allows the user to select different options and access different areas from dropdown lists.
- The Icon Bar: This toolbar allows the user to select different options and access different areas by clicking on a specific icon.

2 – View Criteria

This section allows the user to set the view of the case list.

- Select Worker: This is a drop-down field that will default to the person who has logged in, and will display the caseload, if any, that has been assigned to that worker. (From the "Worker Assigned" on the overview tab in the benefit section for the case).
- View: These radio buttons allow the user to choose to display the Case list, Resource Assessment list or Screening list that is assigned to the worker shown in the Select Worker field. Click on the appropriate radio button located below the worker name.
- Caseload: These radio buttons are used to view the cases assigned to the selected worker. Options are:
    - Branch: Displays all of the cases assigned to the selected worker in the branch that has been logged into.
    - All Access: Displays all of the cases assigned to the selected worker in the ACCESS database.

The system will default to Branch Access.

3 – Case List and Search

This section allows the user to enter a name to search for in the case list, or to scroll down the case list to find a name. Also allows the user to open a case directly from the case list.

- Last Name Search: A text field to enter the last name of the individual being searched for. This field is a Hot Key field. For example: type the letter "B" and the system will take the user to the first last name that starts with "B", type "BA" and the system will take the user to the first last name that starts with "BA".
- Case List: If any cases are assigned to the selected worker, the cases will show in this area. Use the scroll bar on the right hand

side to scroll through the names, or use the Last Name Search filed for faster searches.

  - Last Name: The last name of the Primary Applicant on the Case.
  - First Name: The first name of the Primary Applicant.
  - MI: The middle initial of the Primary Applicant.
  - SSN: The Social Security Number of the Primary Applicant.
  - Prime Nmbr: The prime number that has been assigned to the Primary Applicant.

4 - Buttons

There are several buttons on the Main Menu that have different functions. Some of these functions are Case Specific and some are Non-Case Specific and some could be both. Case Specific functions are linked to specific cases. This means that the user must either be in the case, or if accessing from the Main Menu, have a case in the case list area selected (highlighted) before using this function. Non-Case specific functions are not linked to cases they are general functions. This means that the function can be accessed whether or not a case is open or selected.

- Person Search: Non-Case Specific - The Person Search button will open the Person Search screen, and allow searches to be conducted for a specific person.
- Case Search: Non-Case Specific - The Case Search button will open the Case Search screen and will allow searches to be conducted for a case by the Primary Applicant.
- Call Search: Case Specific and Non-Case Specific - The Call Search will open the Call Search Module, where a search may be conducted or a new call may be created. This function is Branch specific.
- Resource Directory: Non-Case Specific - The Resource Directory button will open a search screen. It is the local area's responsibility to keep the Resource Directory current. The resource directory is only as good as the local area upkeep.
- Reports: Non-Case Specific - The Reports button will open the Reports screen. From this screen a report type may be chosen and the parameters entered to generate a user specific report.

- Ticklers: Case Specific and Non-Case Specific - The Ticklers button, when enabled, will open the general Ticklers screen and display a list of all active ticklers Personal (non-case specific), Custom (case specific) or system generated (case specific).
- Print Forms: Case Specific - The Print Forms button is a case specific button. A person from the case list must be highlighted in order to use this function. The forms list will pull data specific to the person selected.
- Narrative: Case Specific - The Narrative button is also case specific. A person from the case list must be highlighted in order to use this function. Clicking this button will open the Narrative screen for that person.
- Release: DISABLED – Non-Case Specific - The Release button used to show a report of any upcoming release of Oregon ACCESS and details of changes.
- Training: DISABLED – Non-Case Specific - The Training button used to show a report of all upcoming Oregon ACCESS Training available.
- Survey: DISABLED – Non-Case Specific – The Survey button used to pop up a survey but it's no longer used and may pop up a message "This User has already taken the Survey" which you can ignore.
- EI Time: DISABLED
- Prov Search: Non-Case Specific – The Prov Search button opens the provider search window and allows the user to search the provider database. This included both medical providers and those licensed by the State of Oregon. This is the only valid option of buttons located on the right side of the Main Menu screen.

Tool Bars

There are three different tool bars that are available in ACCESS, the File Menu and the Icon Bar. Depending on where the user is within ACCESS different options will be available.

The tool bar looks different on the Main Menu than it does in Remote or when the user is in a case.

Main Menu view:

Remote view:

Case view:

Note – In the Case view, not all icons may be visible.

File Menu:

The File Menu is a set of drop down menus that allows the user to navigate the ACCESS case or execute specific functions or tasks. Not all drop downs may be available. They may be grayed out or may not even appear. This is based on the users RACF security.

File

This menu includes basic functions such as save and print, as well as a list of the last ten cases, screenings or resource assessments the user has accessed.

- Save: Case Specific – Saves changes to the database. The changes on the current data screen of the active application will be updated to the database.
- Print: Case Specific – Opens the Print Forms screen and allows the user to print forms for the selected individual.
- Print History: Case Specific – Allows the user to enter search criteria to see what forms have been printed...
- Print Setup: Non-Case Specific – Allows the user to set the way the forms are to print.
- Close: Non-Case Specific – Closes the currently active application.
- Exit: Exits the Oregon ACCESS system.
- List: This area shows a list of the last ten applications (AP), screenings (SC) or resource assessments (RA) that were opened with the RACF ID being used will be displayed.

Edit

This menu includes basic functions such as undo, cut, copy and paste.

- Undo: This will undo the most recent change.
- Cut: This will cut selected text from where it currently is and copy it to the clipboard.
- Copy: This will copy selected text to clipboard.
- Paste: This will paste the contents of clipboard into the selected field.
- Insert: This will bring up a new record to be inserted into the database under a specific tab, such as a second income source.
- Delete: This will delete currently selected record. There will be confirmation for deletion of the record.

- Clear: This option resets the record to its original values as retrieved or last saved.

Select

This drop-down includes access to the search screens, and the Housekeeping sub-menu. This drop-down also includes access to Archive data and the user to switch branches.

- Person: This option will bring up the Person Search screen.
- Case: This option will bring up the Case Search screen.
- Call Search: This option will bring up the Call Search screen.
- Resource Directory: This option will bring up the Resource Directory screen.
- Housekeeping: This option will bring up the Housekeeping sub-menu.
- Link: This option will open a Mainframe connection but usually pops up with an error message.
- Ticklers: This option will open the Ticklers screen.
- OAA Batch: This will bring up the OAA Batch screen.
- Print NAPIS Forms: This will bring up the NAPIS registration form to be filled out. This is an OAA function.
- Client Billing: This will bring up the OAA client billing module where information may be entered and reports generated.
- Reports: This option will open the Reports screen.
- Screening Sessions: To view the last ten screenings the user entered.
- Home Delivered Meals: This will bring up the Home Delivered Meals screen (used by OAA staff).
- Switch Branch: This allows the user to switch the branch from the branch they are currently in to another branch. If the user does not have “rights” in the branch to be switched to, the user will only be able to view information. No updates may be made.
- Online Survey: This will bring up the ACCESS survey, when one is available. This button will only be enabled when applicable and will be disabled after the survey has been completed.
- Main Menu: Will take the user to the Main Menu screen.
- ACCESS Archive Data: This will bring up the Archive module tool bar primarily used for Resource Assessments. From here the user may do either a Person search or an Application search.

Sub-Menus

Housekeeping Sub-Menu

This drop-down includes features such as maintaining the password and viewing the Person Detail screen.

- Maintain Case/RA: This option will bring up the Persons in the Application Screen where the individual's information may be modified or an individual may be attached to the application or the user may enter the CMS integration screens.
- Person Detail: Will take the user to the Person Detail screen for the case the user is in.
- OMAP Requests: Used by certain staff for the Homecare Worker enrollment process.
- Maintain Provider: This option will bring up the Provider Search Screen.
- Maintain OAA Provider:
- Maintain Password: This option will bring up the Maintain Password screen. The Mainframe password and the ACCESS password must match. A screen will be displayed asking for the old password, and the new password. When finished click OK. Passwords must be at least six characters in length and should contain at least one number.
- Maintain Security Profile: This option will bring up the Maintain Security Profile screens. This is used primarily by management and/or Central Office staff.
- Maintain OAA Sites: This will take the user to a database of OAA Sites attached to the appropriate provider. From here the user can update as needed.
- Reassign Caseload: This option will bring up the Reassign Caseload screen. This is generally a management function.
- Maintain SSA/AFS Office Address: This option will bring up the Maintain SSA/AFS Office Address screen which is another management function.
- Add A Resource: If the user has administrative rights, they can use this to add or modify a resource in the Resource Directory. The Resource Directory must be open.
- Modify A Resource: If the user has administrative rights, they can use this to add or modify a resource in the Resource Directory. The Resource Directory must be open.

- <u>Maintain VR Worker</u>: Takes the user to the Maintain VR Worker pop up screen.
- <u>Clear Laptops</u>: Clears staff assignments to a laptop and is a management function.
- <u>Show Connection Screen</u>: DISABLED

Tickler Sub-Menu

This drop-down menu allows the user to access the Custom Tickler Module or view the General Tickler List.

Status Menu

This drop-down is used when an application, screening or resource assessment needs to be activated, inactivated or archived.

- Activate: This option will allow the user to activate a Case or screening that is in an inactive status.
- Inactivate: This option will allow the user to Inactivate a Case or Screening that is no longer being used.
- Archive: This option will allow the user to Archive a RA when it has been completed and verified.

Transfer Menu

This drop-down allows the user to view the recent transfer in cases, or transfer a case to a different branch.

- Transfer Out: This option allows the user to transfer a case, screening, or RA to another branch. If transferring to an OAA Branch, choose the OAA radio button to bring up the list of those offices. To transfer out, the user must be on the Person Detail screen or actually in the case for the person to be transferred.
- Recent Transfer In List: This option will show the list of cases, RA's, and screenings that have been transferred into the branch. Before removing a name from this list, it needs to be assigned to a worker, or have the Unassigned Worker checkbox marked in the case overview tab.

View Menu – Case Specific

This drop-down will be enabled only after an application has been selected.

- Adult Protective Services: Will take the user to the Community APS module. This is a rights-driven function for APS staff and management.
- Case: Will take the user to the Case sub-menu.
- RA: Will take the user to the RA sub-menu.
- Narrative: Will take the user directly to the narrative for that case.
- Back Tab: Will take the user to the previous tab.

Sub-Menus

Case Sub-Menu

This drop-down allows the user to view specific sections within the ACCESS case.

- Person Info: This option will bring up the Person tab.
- Financial Info: This option will bring up the Financial tab.
- Medical Info: This option will bring up the Medical tab.
- Service Needs: This option will bring up the Service tab.
- Client Assessment: This option will open the CA/PS module.
- Employment Initiative: This option will take the user to the Employment Initiative tab.
- Food Stamps Info: This option will bring up the Food Stamp tab.
- Case Info: Will take the user to the Case Info sub-menu.
- Benefits: This tab will take the user to the Case Overview tab.

RA Sub-Menu

This drop-down allows the user to view specific sections within the Resource Assessment and is generally rights-driven.

- Person Info: This option will bring up the Person tab window in the Resource Assessment.
- Financial Info: This option will bring up the Financial tab window in the Resource Assessment.

Mainframe Menu

This drop-down allows the user to enter Integration, or to manually update the database.

- CMNEW: This option will take the user to the CMNEW integration screen.
- CMS: This option will take the user to the CMS integration screens.
- Update Database: DISABLED – This used to manually update CA/PS information to the database.

Windows Menu

This drop-down allows the user to choose to have the system remind them of a change before saving, or to view the windows that are currently open.

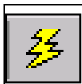
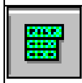
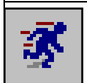
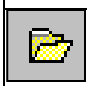
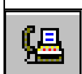
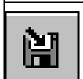
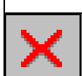
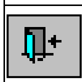
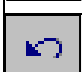
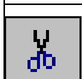
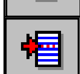
- Prompt on Save: By clicking on this, it will place a check mark next to it and the system will then prompt the user before saving data.
- List: Applications that are currently open will be displayed. The application that the user is currently in will show a check mark by it. Clicking on the Main Menu option will open the main menu.

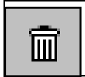
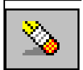
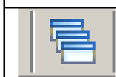
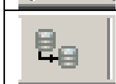
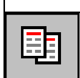
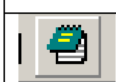
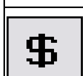
Help Menu

This drop-down will allow the user to enter the ACCESS help screens or access the Help tutorial.

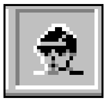
- Contents: This will pop up the Help Table of Contents.
- Search for Help On: This will pop up a Help Topics box where a search may be conducted.
- Help on Topic: This will pop up the Help Topic for the section and tab that the user is currently in.
- About Oregon Access: Presents information regarding the Oregon ACCESS project.

Generic Icon Bar

	Lightning Bolt: Shown only in Remote. Takes the user to the Remote Check Out/In screen.
	Main Menu: This will take the user directly to the main menu.
	Person Search: This option will bring up the Person Search screen.
	Case Search: This option will bring up the Case Search screen.
	Call Search: This option will bring up the Call Search screen.
	Save: ACCESS automatically saves as the user moves from section to section or tab to tab.
	Print: After completing the data entry for a case, the next step will be to print the forms needed. Clicking on this button will open a complete list of forms.
	Close: Clicking on this button will close the current window.
	Exit: Clicking on this button will close the ACCESS application.
	Undo: Will undo last action.
	Cut: Cut currently selected text to the clipboard.
	Copy: Copy currently selected text to the clipboard.
	Paste: Paste information from the clipboard.
	New Record: If a case has more than one type of a resource, income, etc., this button is used to enter the additional records. For instance, if a person has two bank accounts, once the first account is entered, click the new record button to start with a clean page on that tab. The first account will show in the list section at the top of the tab. The tabs that do not utilize the

	New Record function are: Person and all tabs in the Benefits section.
	Delete: Deletes the currently selected record or field data
	Clear: Resets the record to it original values as retrieved or last saved.
	Narrative: Opens the narrative window (disabled in Main Menu).
	Link: DISABLED Used to open a mainframe session.
	Ticklers: Opens the general tickler list. This screen can be opened automatically each time ACCESS is logged into by selecting the Show Ticklers box in the Login window.
	Custom Ticklers: Opens the custom tickler lists.
	Reports: Opens screen for various types of reports.
	Resource Directory: Opens a resource search screen but is generally not maintained or up to date.
	Help: Go to help screens. The help screen will refer to the tab being worked on, as well as being able to search the help database.
	Client Billing: Used only for OAA and OPI cases. Opens the client billing module.
	See Codes: Must be in Provider Search to enable this icon. This allows the user to see the codes associated with the providers.

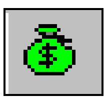
Case Module Tool Bar Sections and Tabs



Client Section of the Case Module

Client: Under this section the client demographic information is stored. When opening a case, ACCESS opens to this section initially, unless otherwise selected. This section contains the following six tabs:

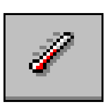
Person, Address, Veteran/Native American, Contacts, Previous Assistance, Education



Financial section of the Case Module

Financial: Under this section is where the financial information is stored. This section contains the following eight tabs:

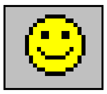
Income/Employment, Resources, Property, Property Transfers, Shelter Costs, Funeral, Life/Burial Insurance, EPD



Medical Section of the Case Module

Medical: Under this section the user will find medical information as well as the detail needed to complete the “Referral to SSI Liaison” for GA and Title XIX clients. This section contains the following five tabs:

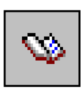
Health Insurance, Medical Services, Medical Cost, Physical, Medical Transportation



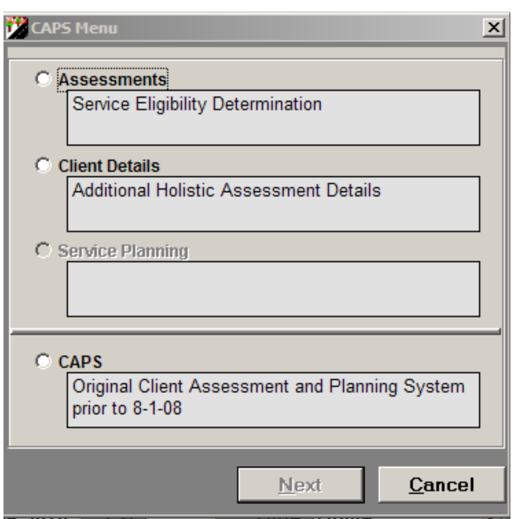
Service Section of the Case Module

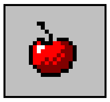
Service: Under this section the user will find service information about waivered services or about OPI needs of the client. This section contains the following seven tabs:

Waiv, Instn, Supply, Other Needs, Referral, OAA Smry, Nutr Risk/ADL, OAA Service/FCSP



CAPS Section of the Case Module

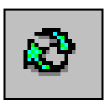




Food Stamps Section of the Case Module

Food Stamps: Under this section, the user will find information that is relevant only to Food Stamp applicants. This section will complete the Food Stamp section of the application. This section contains the following three tabs:

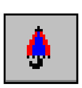
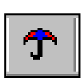
Food Stamp Information, Student Information, Dependent/Child Care Information



Benefits section of the Case Module

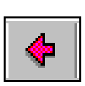
Benefits Summary: Under this section the user will find all of the information on the benefits the client is applying for. This section contains the following five (*overview*) tabs:

Case Overview, Medical Assistance, Food Stamps, Service, General Assistance

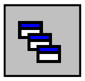
Adult Protective Services Section of the Case Module

Adult Protective Services: Takes the user to the APS screens. When there is an APS, the umbrella will be open. Availability is based upon the user's RACF



Back Button located in the Case Module

Back: This will take the user back to the section they were previously on.

 Narrative Section of the Case Module

Narrative Comments: View, insert or print narrative comments on an open case, resource assessment or screening.

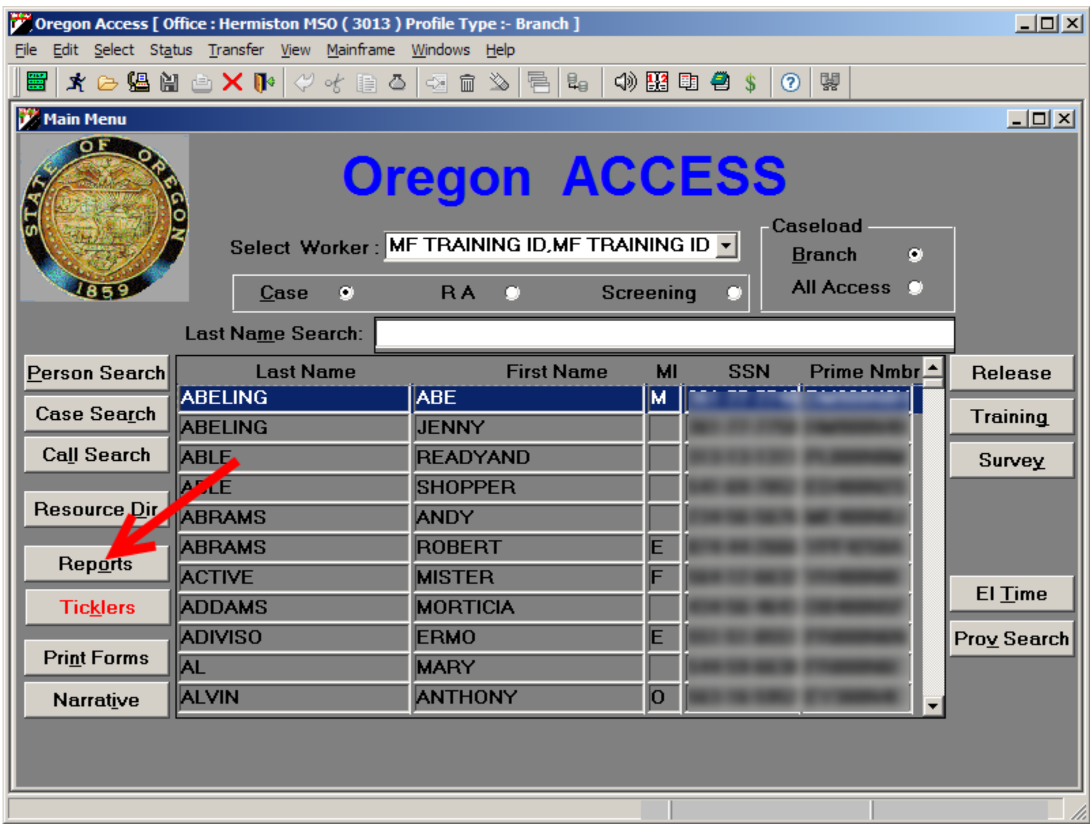
Quick Keys and Shortcuts

Oregon ACCESS provides several navigational shortcuts and quick keys.

"Alt" Functions

Throughout ACCESS, you will see underlined letters. The pressing the "Alt" key along with the underlined letter will navigate you to the function.

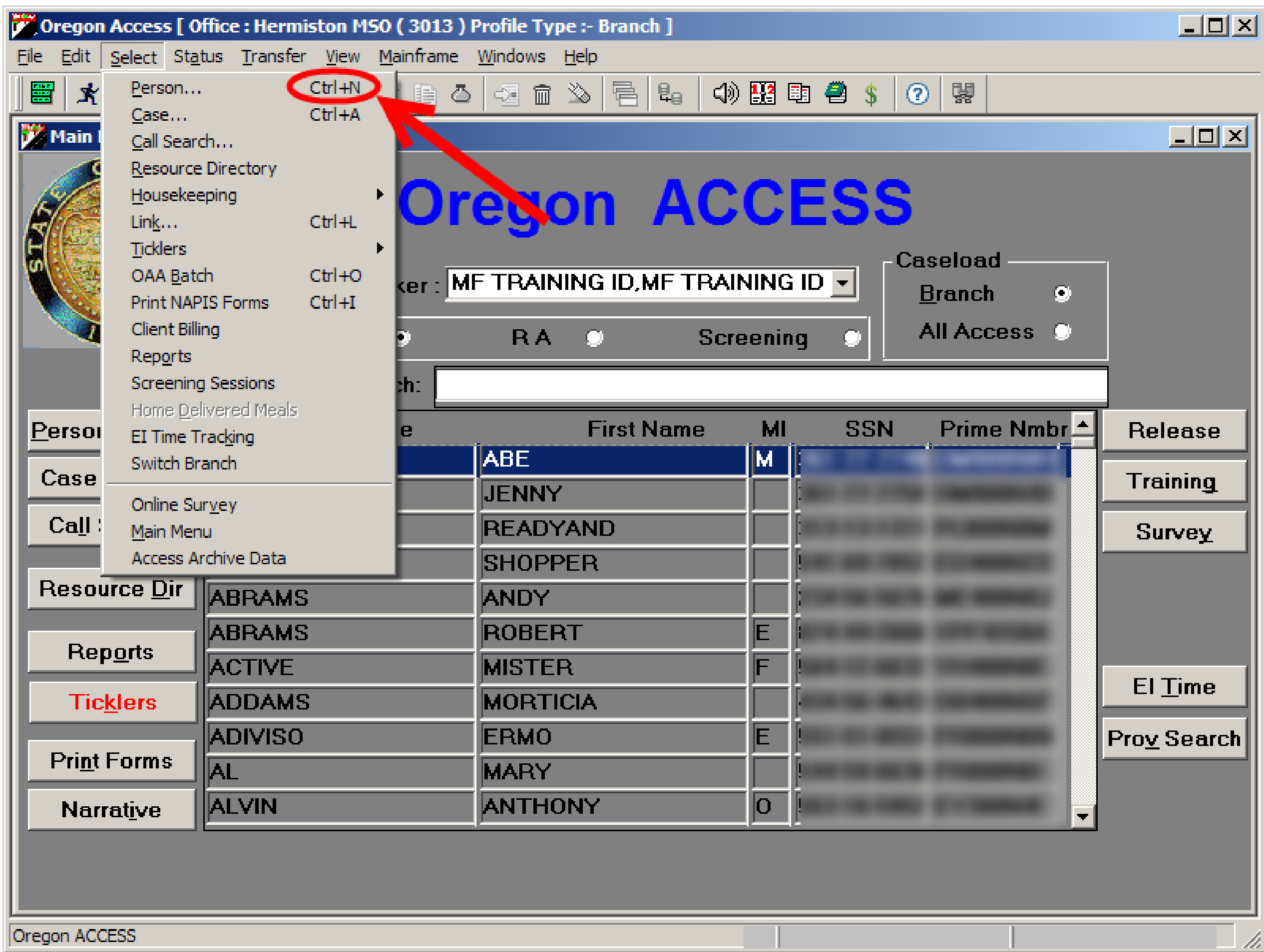
For example, to quickly access the reports window from the Main Menu, you may press "Alt" and "O".



"Ctrl" functions

When viewing the dropdown menus, you will see some items with a "Ctrl+{letter}" option. These are navigational options using the control key.

For example, pressing the "Ctrl" key along with the "N" will navigate to the Person Search window.

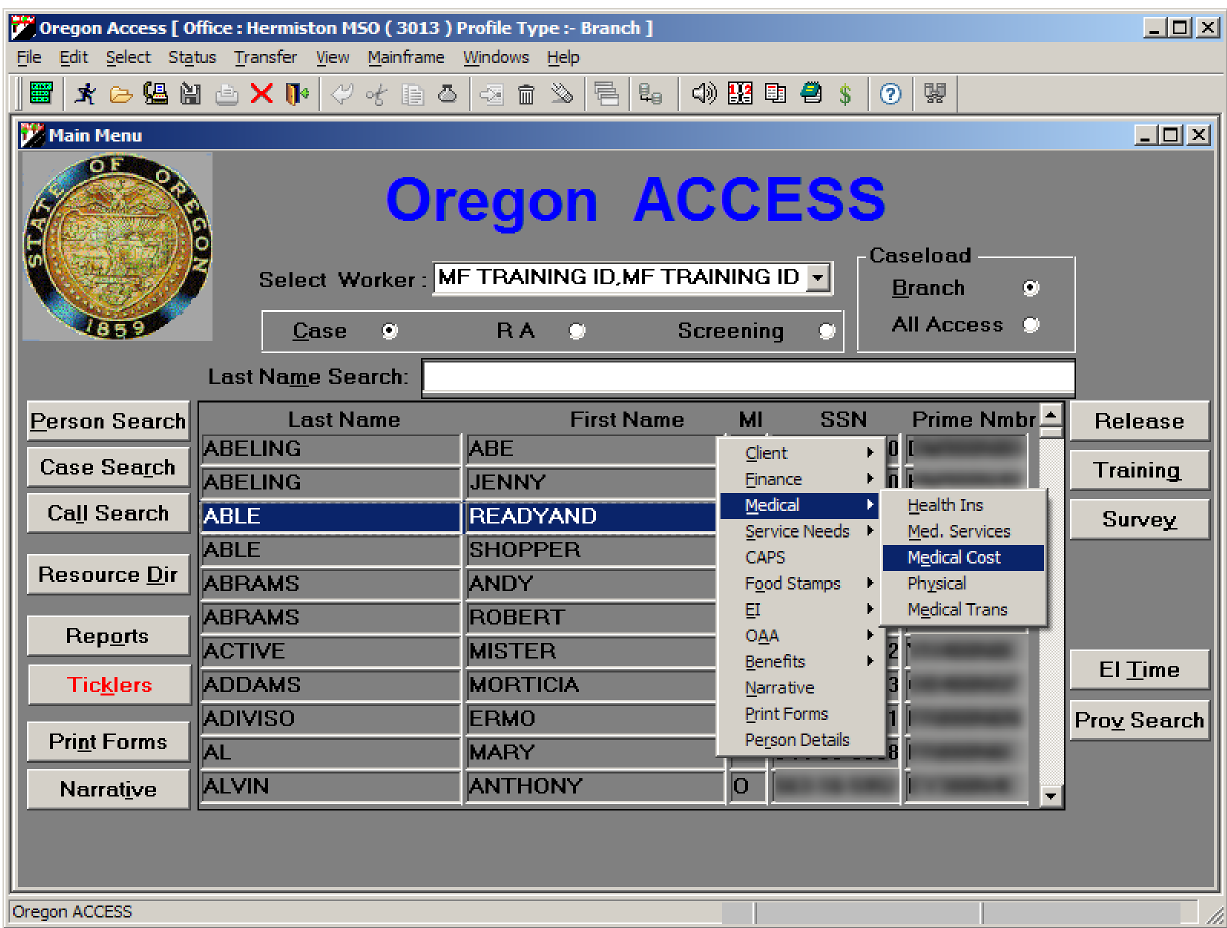


Right click option

Oregon ACCESS also provides navigational options by pressing the right mouse control button. By "right clicking" the user can quickly access a variety of case related functions and screens.

For example, from the main menu, the user may right click on the highlighted record to access portions of the highlighted case record.

In the example below, the right click option allows the user to quickly access the Medical Cost Tab, in the Medical Section, of the case for the client ABLE, READYAND.



Similar right click navigational options are available from within a case and in other parts of Oregon ACCESS.

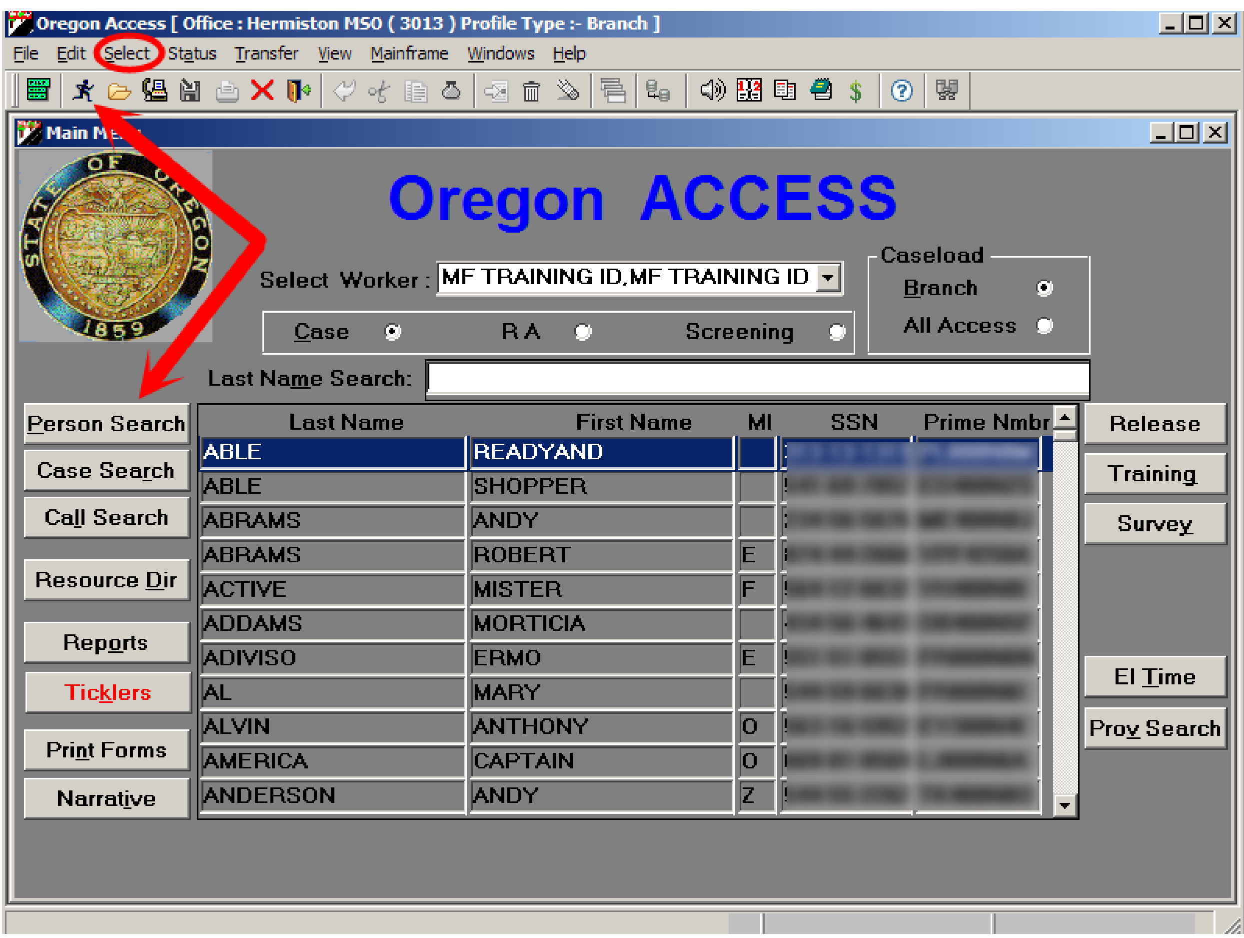
Oregon ACCESS Person & Case Search

How to search for a person in Oregon ACCESS

When you search for a person within Oregon ACCESS, you are actually searching both the mainframe Client Index (CI) database and the Oregon ACCESS database. The Oregon ACCESS search function initiates a search of both databases, searching CI first.

There are four ways to access the Person Search screen:

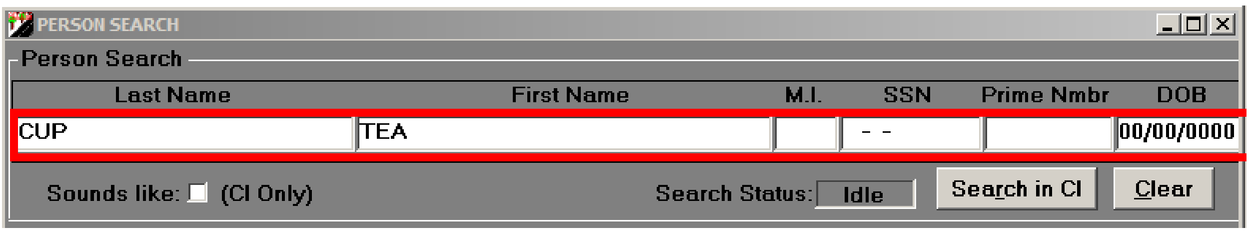
1. The Person Search button on the Main Menu
2. Choosing "Person..." from the Select menu
3. Ctrl N
4. Alt P
5. The Person Search icon on the tool bar 



Completing a Person Search

The person search window allows you to enter search criteria that the system uses to find a person in the data bases. The Oregon ACCESS search function searches the CI database first.

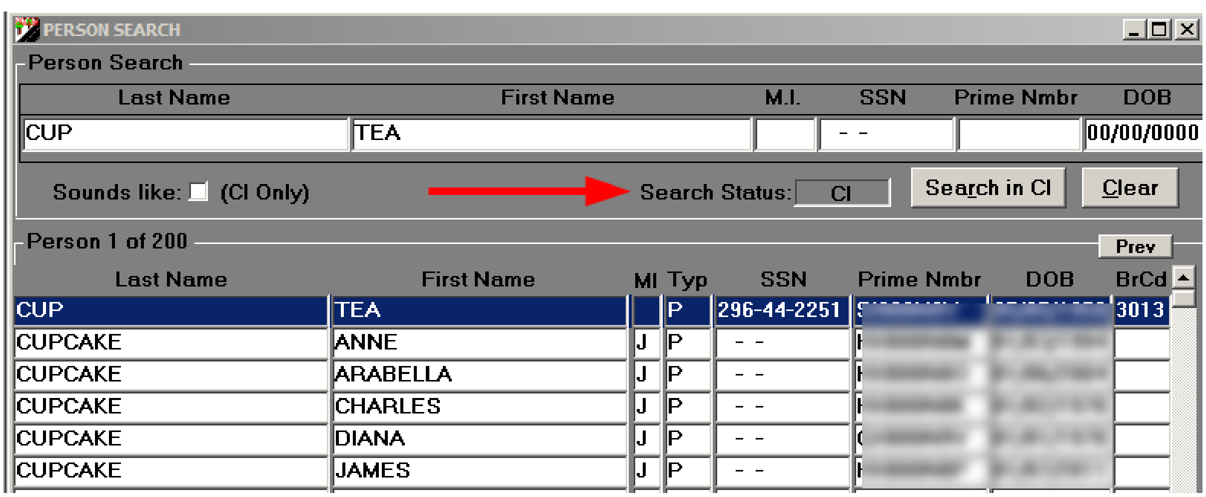
Step #1 – Enter some Search Criteria.



Step #2 – Ask the system to search for your person by pressing 

Step #3 – Review the results of your search

Note that the Search Status field indicates that the person records listed in the results list are from CI. This is because Oregon ACCESS searches the CI database first.



1 – Person Search

This area allows the user to enter search criteria. The preferred search criteria are a SSN or Prime. However, searches may be conducted by name. The available search criteria are:

- Last Name: Text field to enter the last name of the individual being searched for.
- First Name: Text field to enter the first name of the individual being searched for.
- MI: Text field to enter the middle initial of the individual being searched for.
- SSN: Text field to enter the social security number of the individual being searched for.
- Prime Nmbr: Text field to enter the prime number of the individual being searched for.
- DOB: Text field to enter the date of birth of the individual being searched for. Format is MM/DD/YY.

2 – Search Area

When a search is conducted for a person the Person Search function will first search CIS and then, depending on the results of the search, the user may initiate a search of the ACCESS database.

- Sounds like: If this box is checked a soundex search results will be included in the CIS search results.
- Search Status: This is not user selectable. It displays where the search results where found (either CI or OA). The default is "Idle", and will not change until a search is completed.

3 – Persons Found

This section will list any person found in your search. This area includes:

- Last Name: The last name of the individual found in the search.
- First Name: The first name of the individual found in the search.
- MI: The middle initial of the individual found in the search.
- Type: P=Preferred name, A=Alias, L=Legal name.

- SSN: The social security number of the individual found in the search.
- Prime Nmbr: The prime number of the individual found in the search.
- Status: This field shows whether the individual is active or inactive. If inactive, it may be activated from any branch.
- DOB: The date of birth of the individual found in the search. Format is MM/DD/YY.

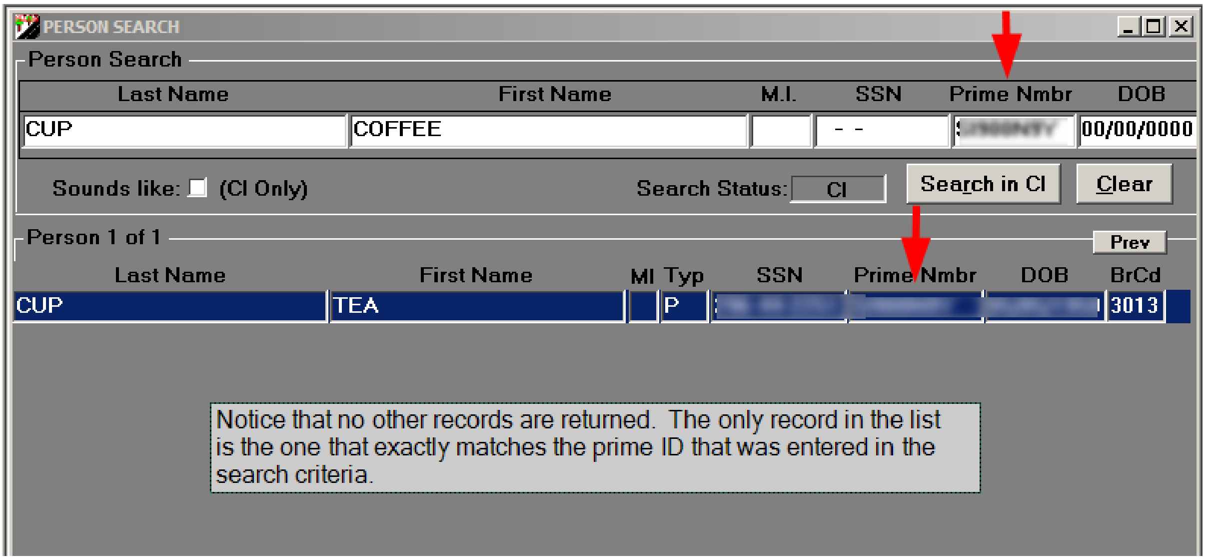
4 – Buttons

The buttons on this screen perform different functions. Some buttons are displayed based on where the search results are from (CI or OA), and displayed buttons are only selectable if certain criteria are met. The buttons are:

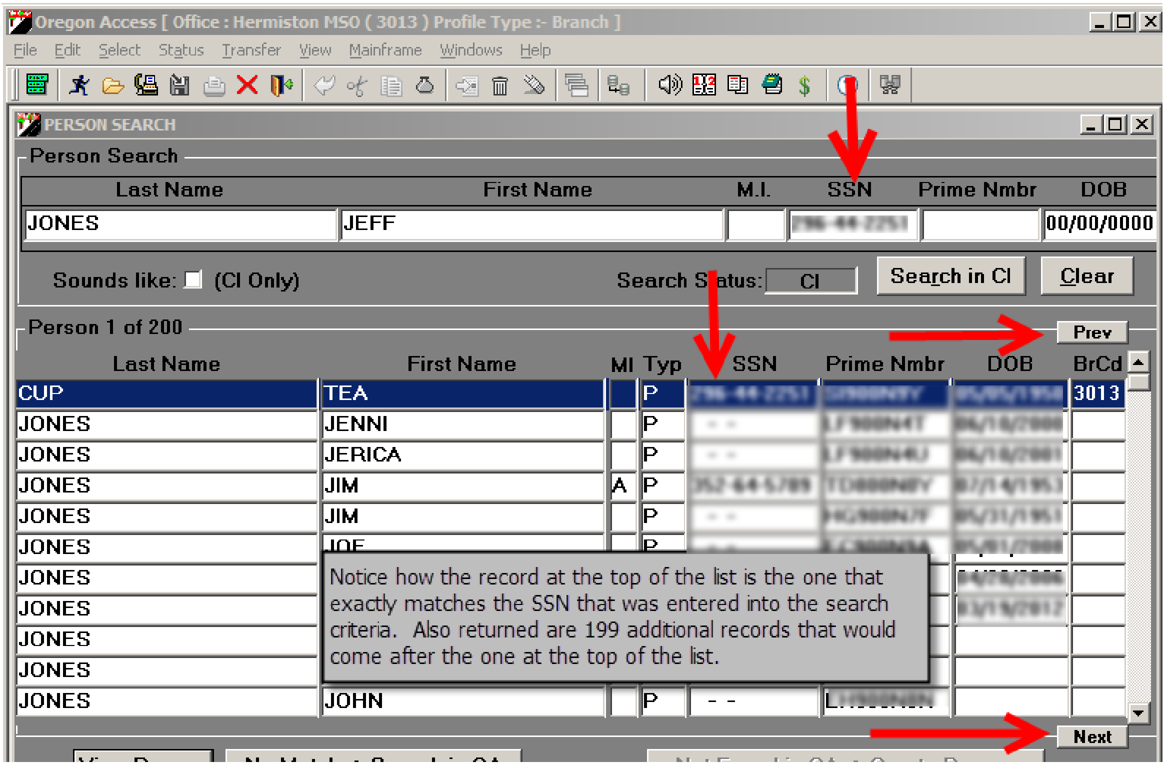
- Clear: Clears the entered search criteria.
- Search in CI: Searches CIS using the criteria that has been entered.
- View Person: Allows the user to view the highlighted individuals Persons Detail screen.
- No Match->Search in OA: Initiates a search of the ACCESS database if there is no match of the entered name in the CIS search results.
- Not Found in OA->Create Person: Allows the user to add an individual to the ACCESS database.
- Download/Reg from CI: Initiates a search of the ACCESS database for the individual selected in CIS.
- No Match->Download: Only displayed after first clicking the **Download/Reg from CI** button after a CIS search has been completed. Allows user to add a new person to the ACCESS database from CIS.
- Add to Existing Case/RA: Allows the user to add the highlighted individual to the existing case or resource assessment. This button is disabled unless the Person Search is initiated via the **Add Person to Case** button on the **Persons and Contacts in the Case for** screen and the person is already in the OA database.
- Prev: Allows user to view the previous 200 CIS records prior to the first record displayed.
- Next: Allows the user to view the next 200 CIS records after the last record displayed.

Some things to note about search criteria and return lists:

Prime Number: If a <u>prime number</u> is entered as part of the search criteria, **and** a matching prime is found in CI, <u>only that record will be returned</u>. Records matching other items in the search criteria will not be returned.



SSN: If <u>SSN</u> is entered as part of the search criteria, and a matching SSN is found in CI, the matching record will be placed at the "top" of the return list. Records closely matching the remaining search criteria are then displayed. The system will return 200 records in all.

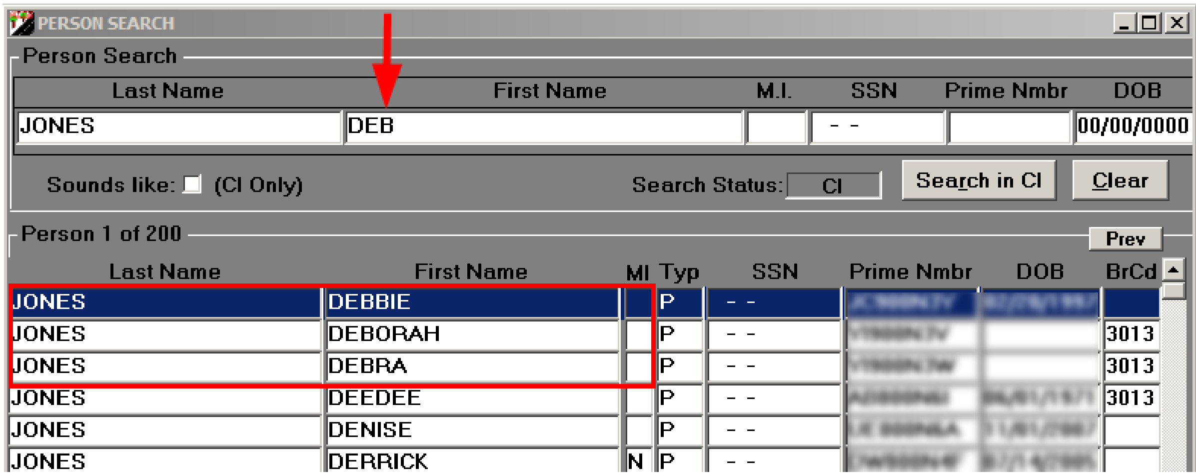


Name: If you entered only a name, the system will use the CI name search logic. Think of CI Name Search as something like a telephone book. It is a long list of alphabetized names. When you enter name into your search criteria and press Search in CI, one of two things will happen:

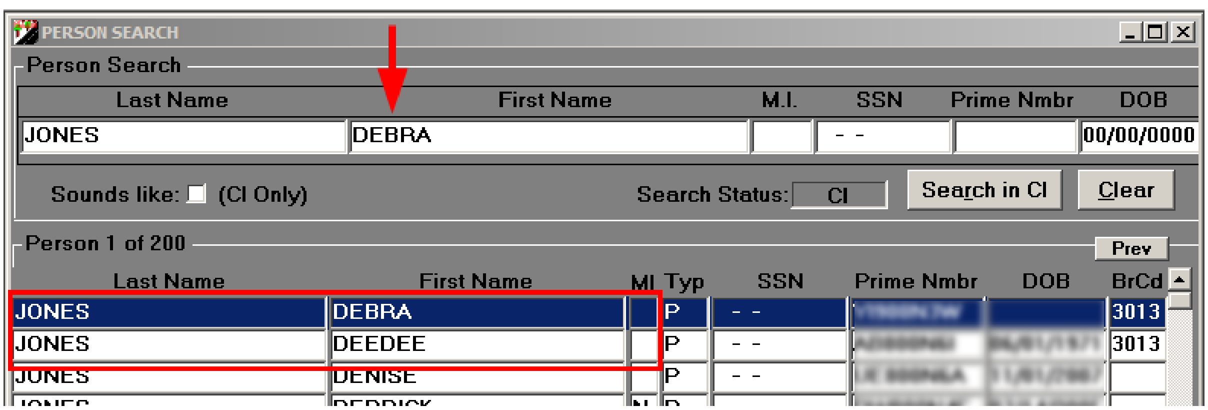
- CI will find a likely match and return that record at the top of the list. It will also display the 199 records that would fall immediately after it. Think of a phone book. The system essentially points to the name in the list that most closely matches your criteria.
- CI will not find a likely match. In this case, it will return the record that would fall immediately after it – think phone book -- at the top of the list. It will also display the 199 records that would fall immediately after that. The system essentially points to the place in the phone book where you would think the record should be.

If the only search criteria you have is Name, apply the "less is more" principle. For example, let's say you are searching for a person whose last name is 'Jones'. You are not confident about the spelling of the first name. It could be: Deborah, Debra, Debbie, Deb, etc… If you enter

'Jones' in the last name field and 'Deb' in the first name field then the system will return all records that have a last name of "Jones" and a first name starting with the letters "Deb".



If you had put "Debra" in the first name field, the system would only return those records with a first name starting with "Debra" and you might miss some records.



Registration Process

- Registration is the process of assigning a prime number and creating a person record on the mainframe. Registration is a Mainframe function and is completed by the Mainframe through ACCESS. The system allows multiple opportunities to register (create a prime number) individuals.

- Some of the opportunities to register an individual include when a new person is added (Create Person), a screening is added, a case is added, or a resource assessment is added. In each of these situations (if the individual has not already been registered) a pop up message appears asking, "Do you want to add this person to CIS?" Select either YES (to register the person) or NO (to continue without registering the person). When registering an individual, a prime number will be created automatically by the system.

    - Do not register a person if you have not verified their information and do not register them without a social security number (unless it is a newborn in the first six months).

- A person cannot be added as PA or APPL for MED benefits on the Case Overview screen until they have been registered.

- Reminder: The Mainframe does not accept special characters in the name field. Things like apostrophes and hyphens can cause difficulties on the mainframe. To prevent this from happening enter names like O'Brien as Obrien. This is how the mainframe will view it and use it for CIS and CMS.

Interpreting Person Search Results

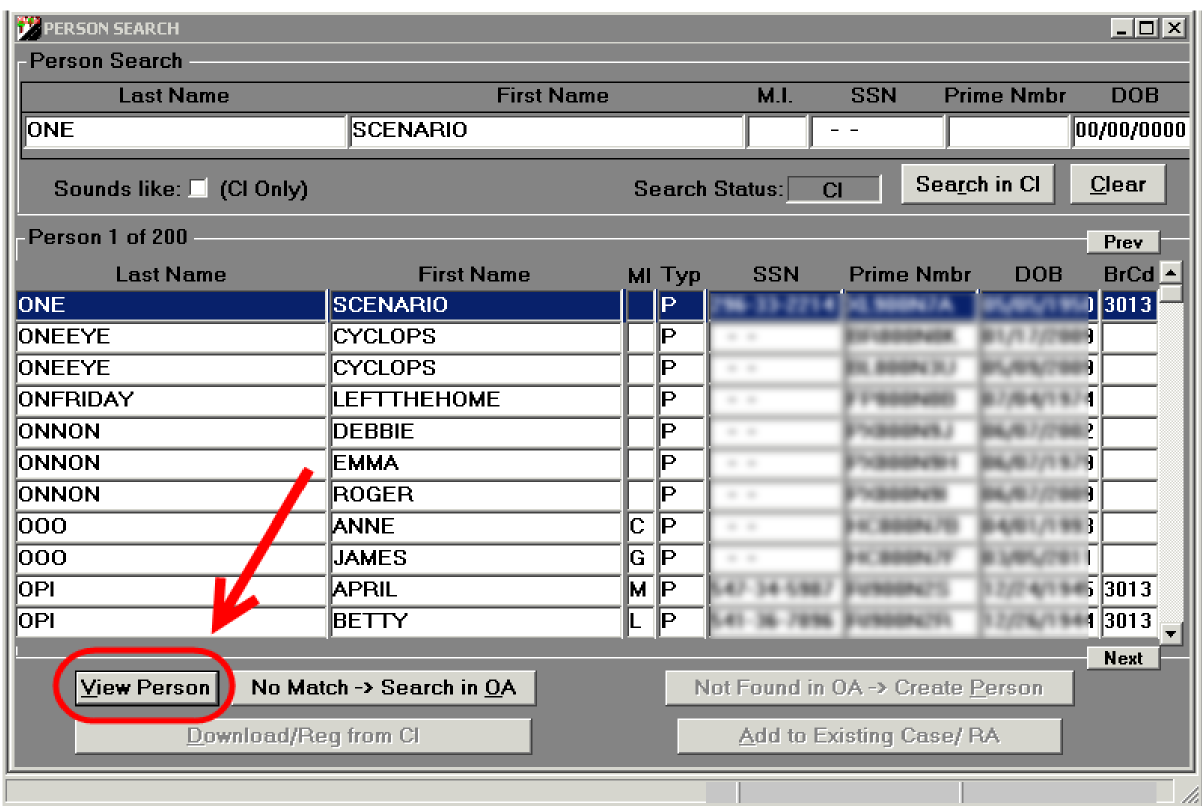
There are five possible scenarios when looking for a person using the Oregon ACCESS Person Search:

1) The person exists in both CI and Oregon ACCESS AND the records are registered (connected).
2) The Person exists in both CI and Oregon ACCESS BUT the records are not registered (connected).
3) The Person exists in CI but does not exist in Oregon ACCESS.
4) The Person exists in Oregon Access but does not exist in CI.
5) The Person does not exist in either CI or Oregon ACCESS.

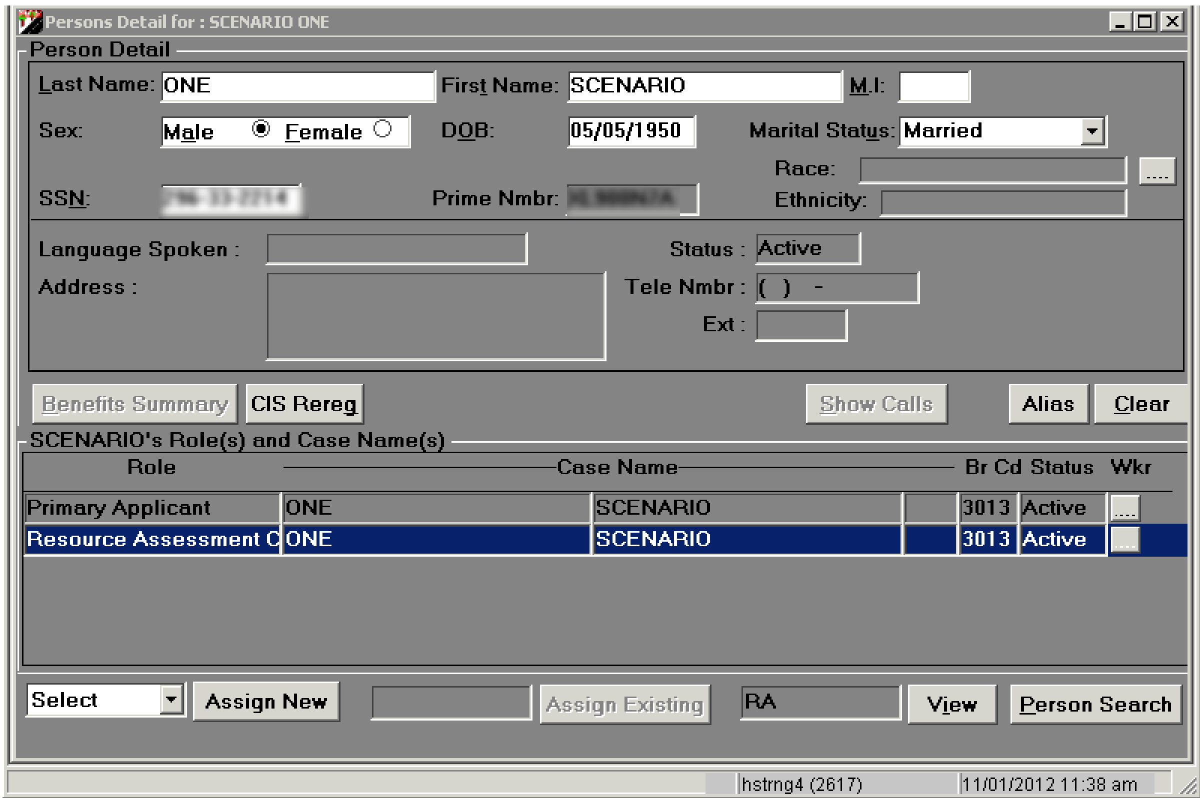
Scenario #1: The person exists in both CI and Oregon ACCESS AND the records are registered (connected).

If the highlighted person in the list is found on CIS **and** there is an associated ACCESS record the 

button will be selectable.

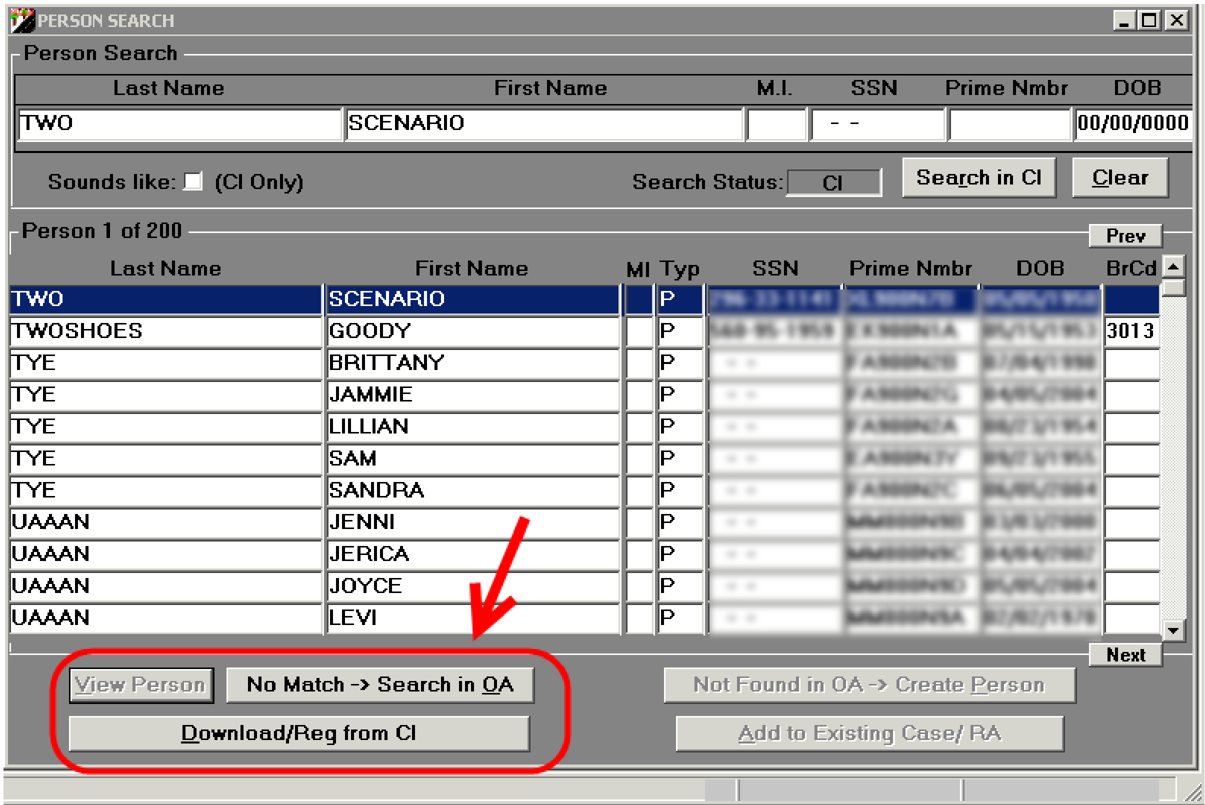


If you double-click the person or click the **View Person** button, the system will bring up the Oregon ACCESS **Person Detail** screen for the person found. From the **Person Detail** screen, you may access different parts of the client's Oregon ACCESS information.



If after viewing the **Person Detail** for the person it is determined that the person is not a match the user can click **Person Search** (from the **Persons Detail** screen) to return to the CI search results.

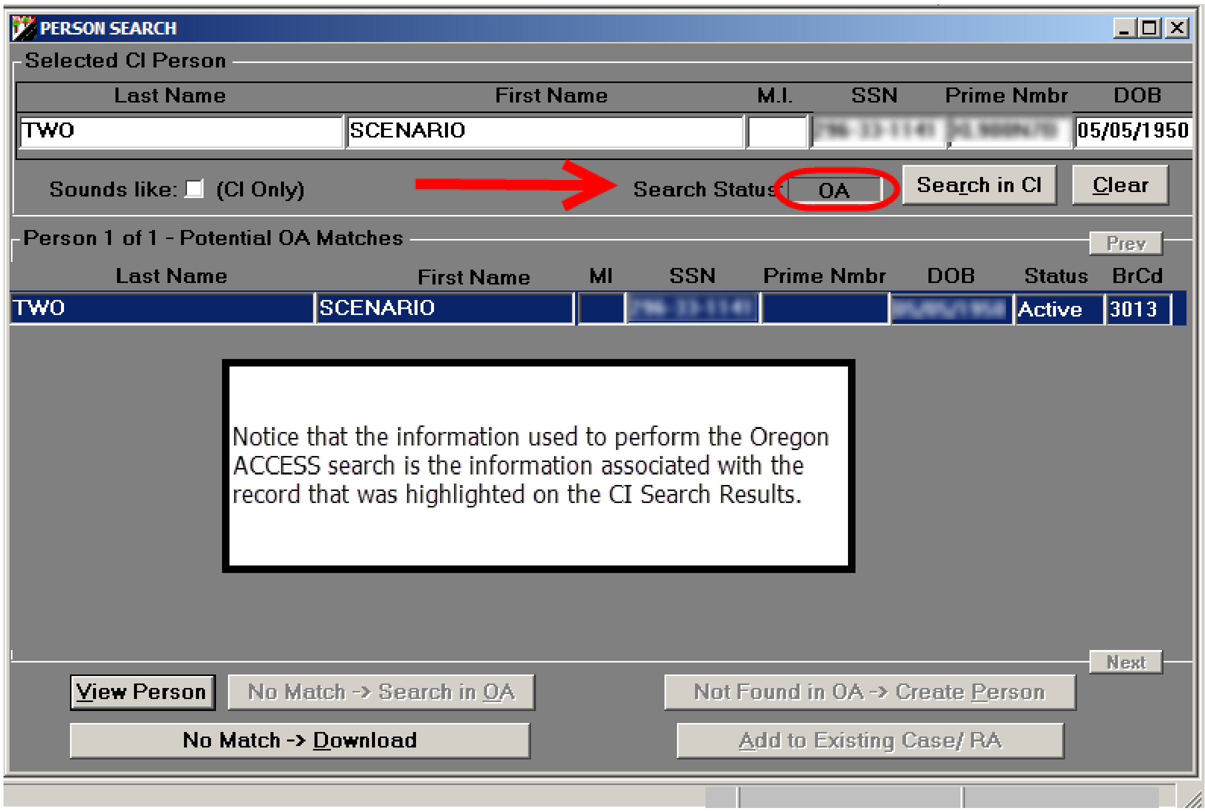
Scenario #2 – The Person exists in both CI and Oregon ACCESS BUT the records are not registered (connected).



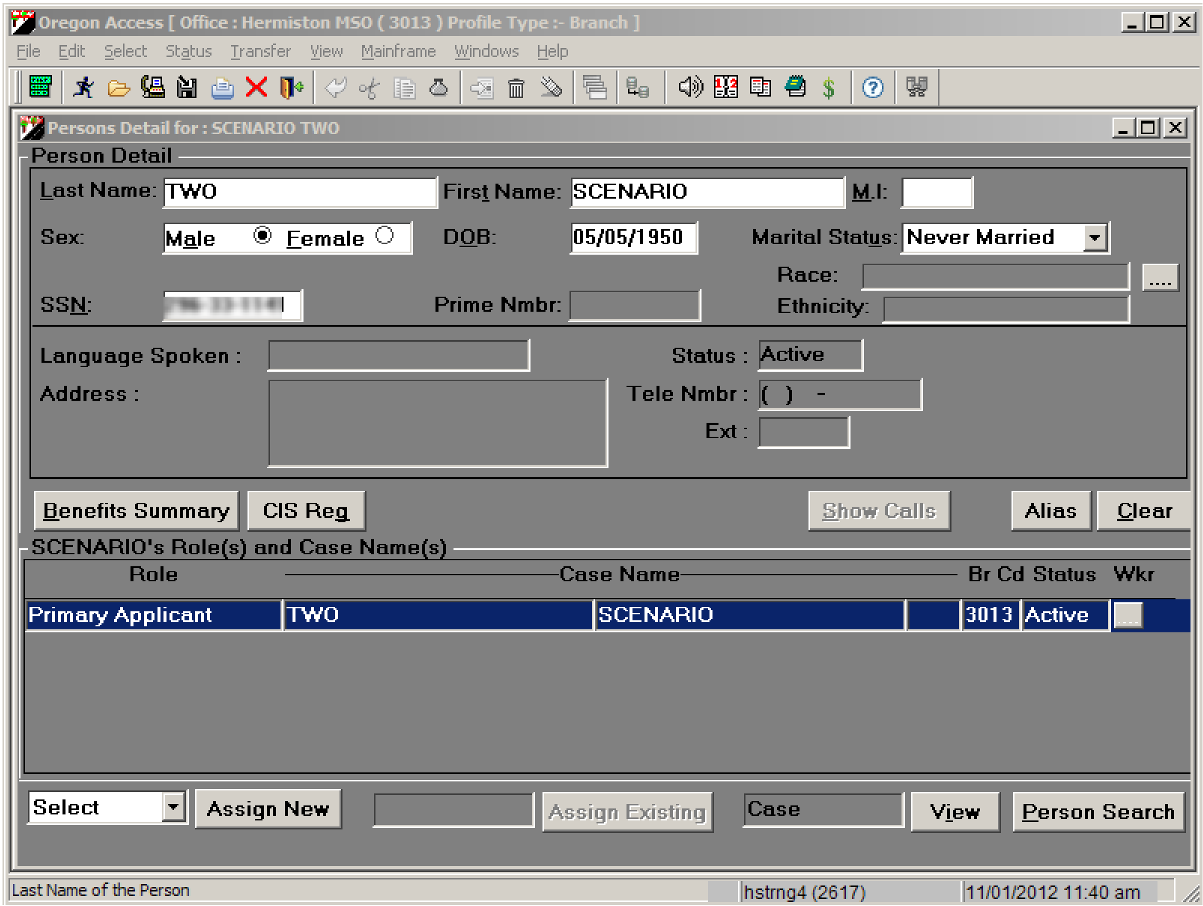
If the highlighted person in the list is found on CIS but there is no registered ACCESS record associated with the CIS record, the View Person button will not be selectable.

The person you are looking for is found among the CI search results. Highlight the person and press the Download/Reg from CI button.

The system will automatically initiate a search of the Oregon ACCESS database **using the details using the information associated with the highlighted record in the CI search results.**

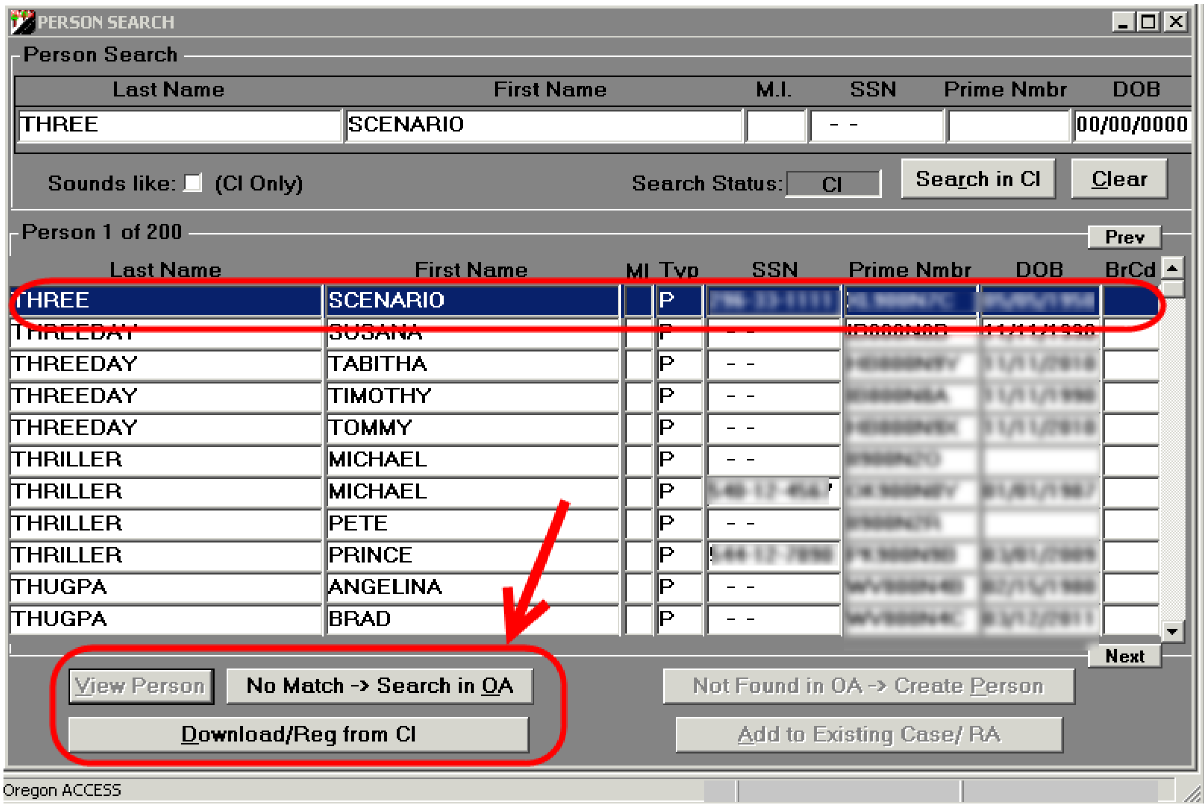


The Person found in Oregon ACCESS appears to be the person for whom we are looking. Click the View Person button to view additional details about this Oregon ACCESS record.



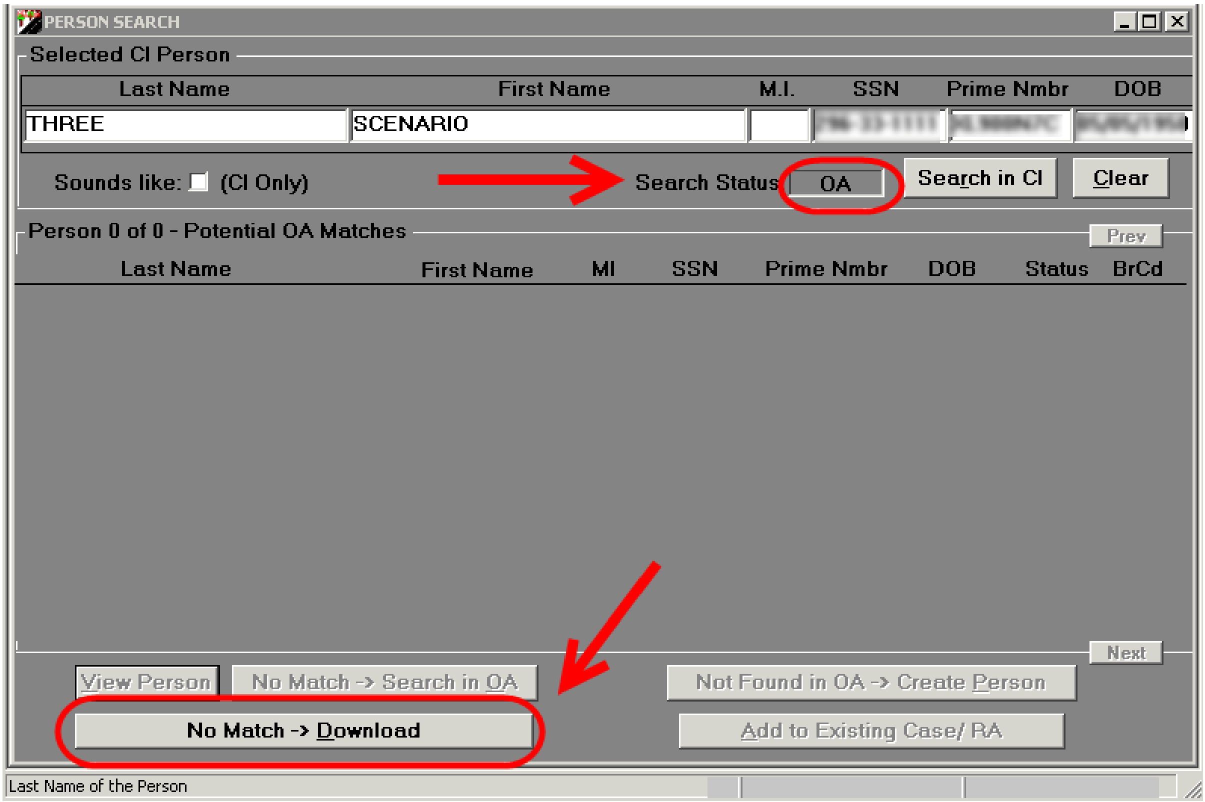
On the Person Details screen, you may click the CIS Reg button to register the person and connect the Oregon ACCESS and CI records.

Scenario #3 – The person exists in CI, but does NOT exist in Oregon ACCESS.

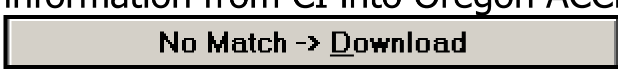


The person you are looking for is found among the CI search results. Highlight the person and press the **Download/Reg from CI** button.

The system will automatically initiate a search of the Oregon ACCESS database **<u>using the information associated with the highlighted record in the CI search results.</u>**

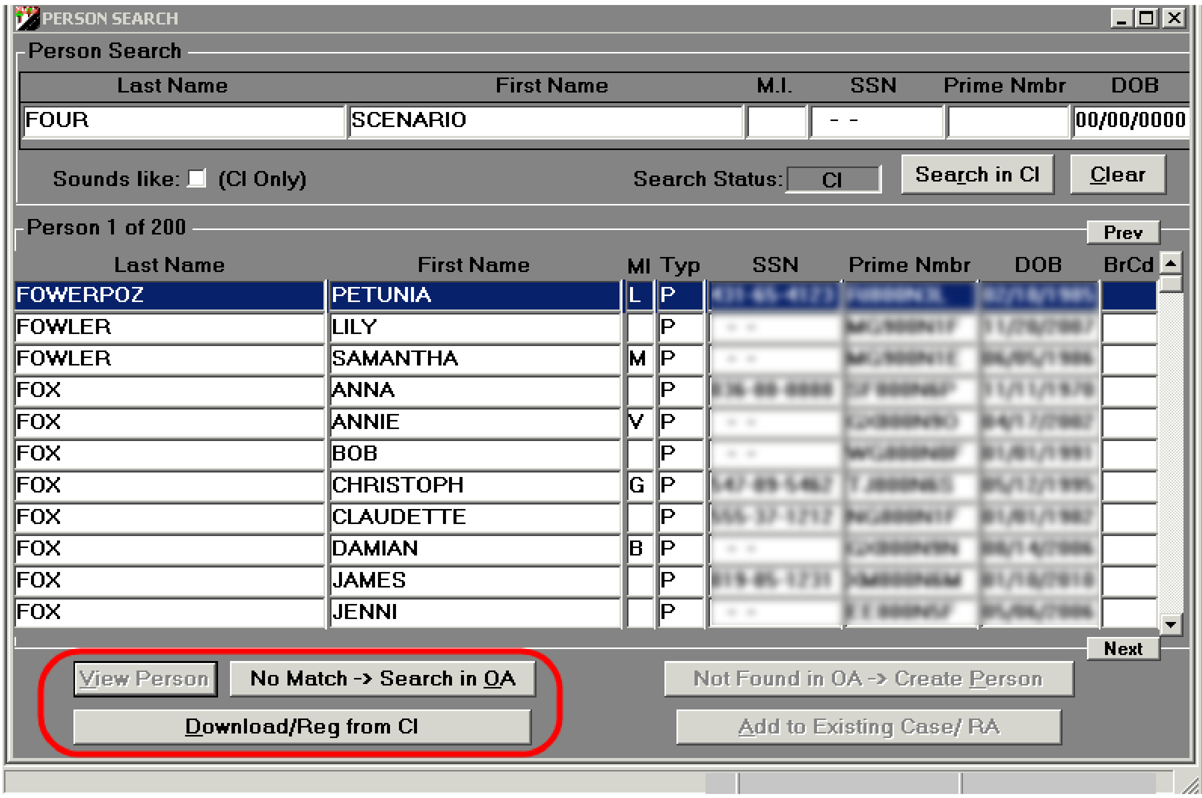


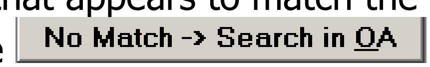
No record is found in Oregon ACCESS. You may now Download the information from CI into Oregon ACCESS by pressing the



button. This will import the CI Person Information into Oregon ACCESS and register the Oregon ACCESS and CI records.

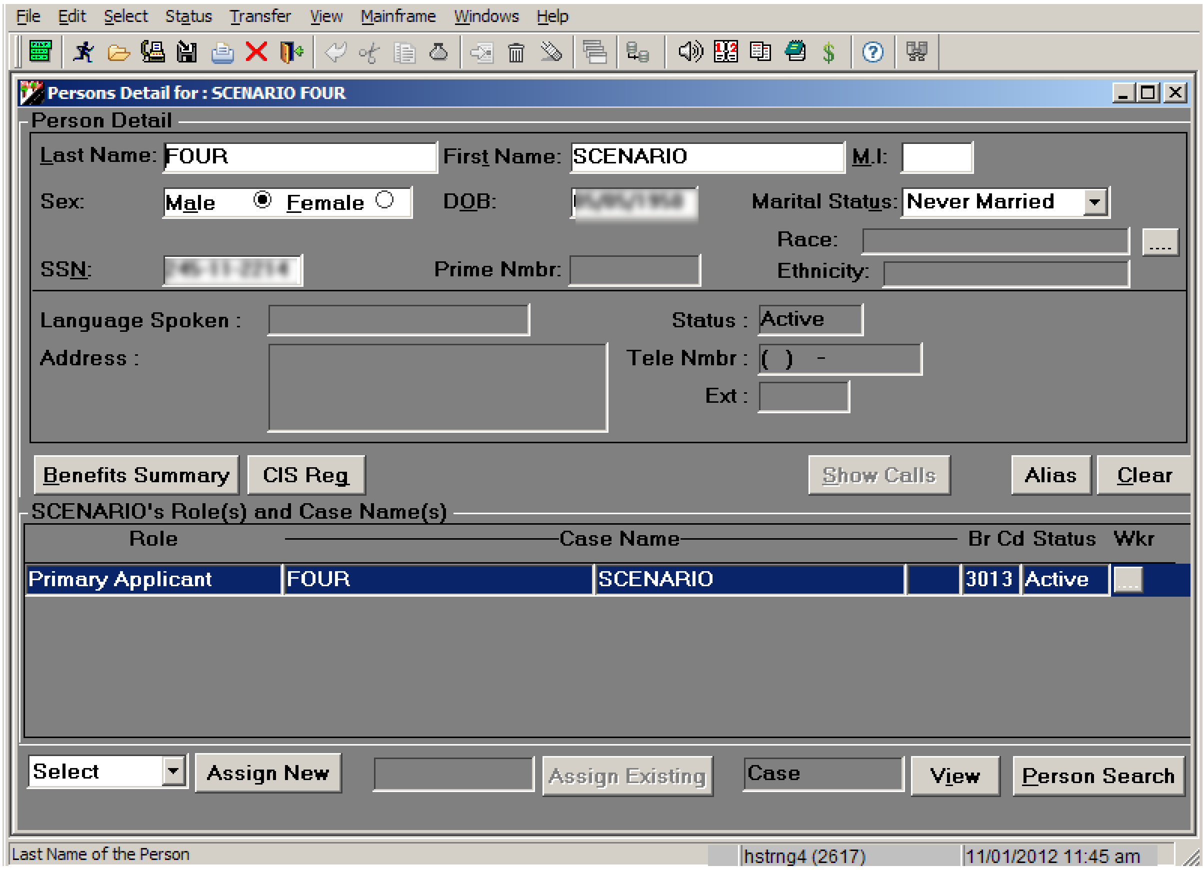
Scenario #4 – The person exists in Oregon ACCESS but does not exist in CI.



There is no person in the CI Search results that appears to match the person for whom you are looking. Press the 

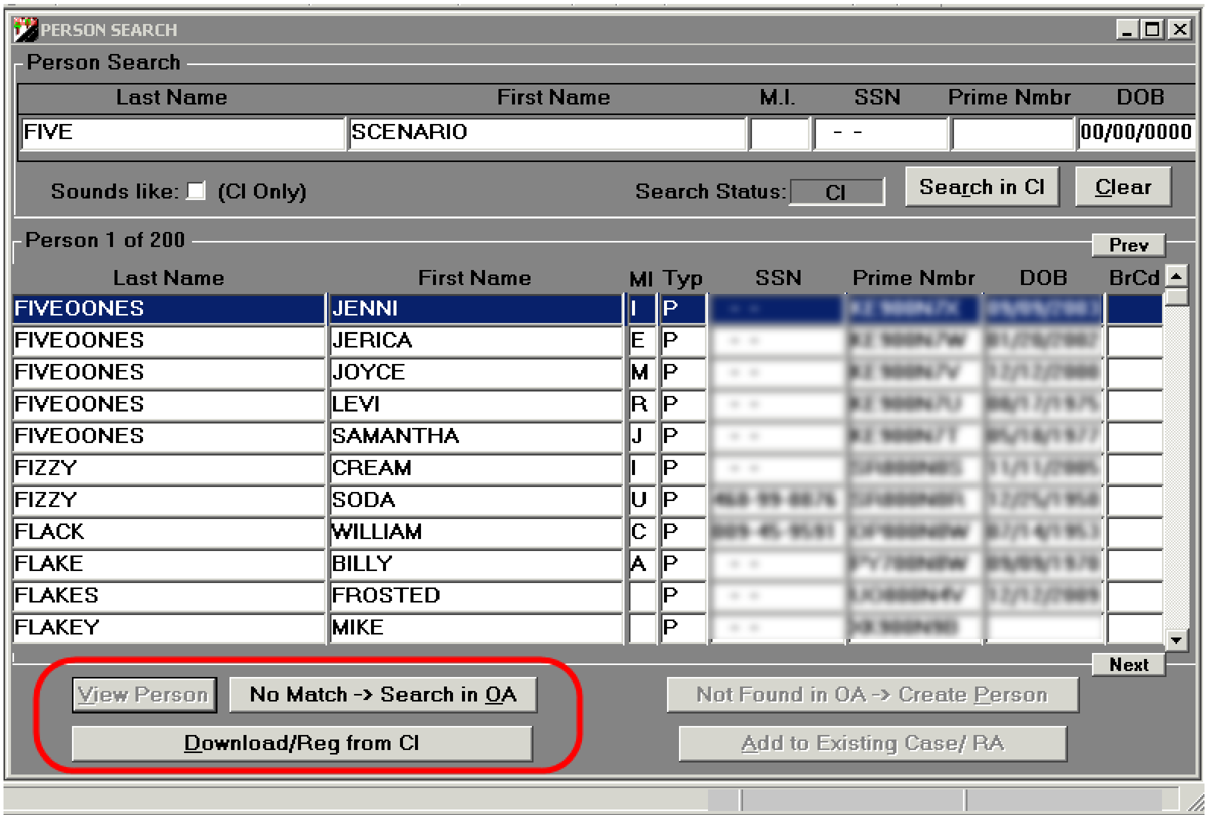
button. This will initiate a search of the Oregon ACCESS database using the data that was entered into the Search Criteria Section.

The person was found in Oregon ACCESS. To view the Person record, press the View Person button.

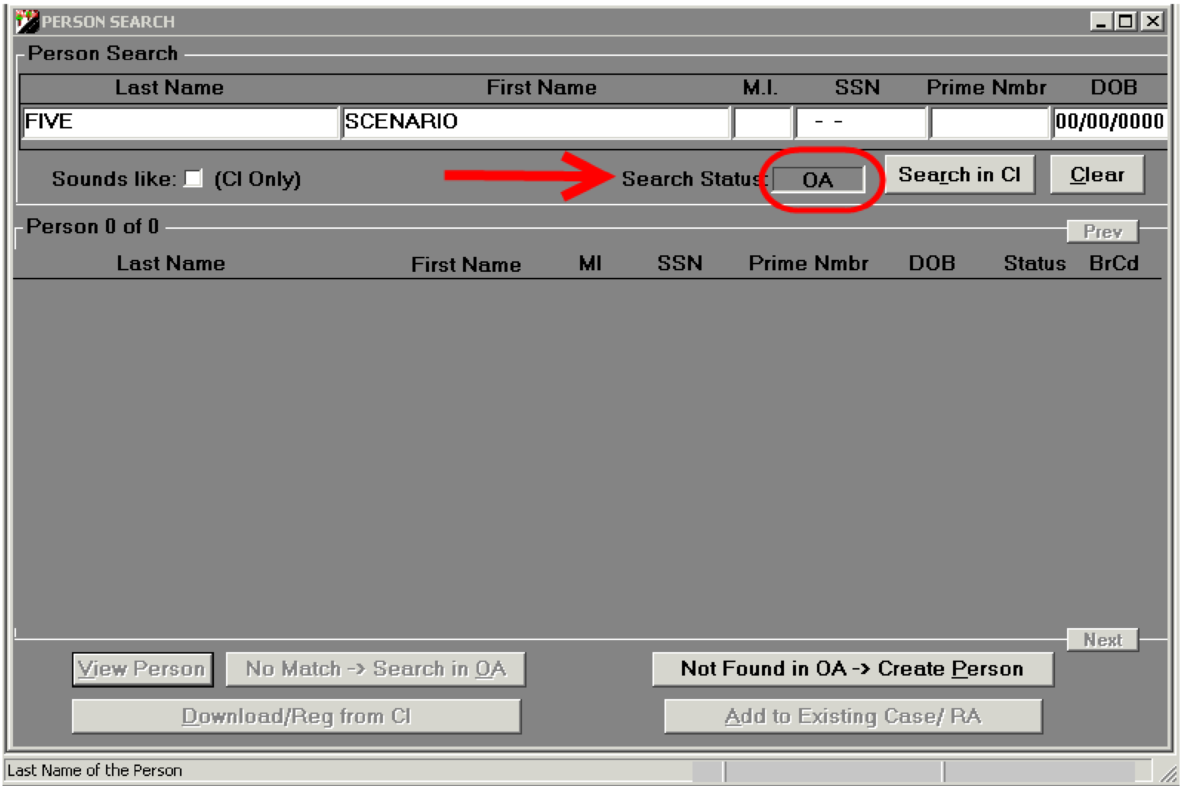


In the Person Details screen, you may register the Oregon ACCESS record to CI by pressing the CIS Reg button. This action will allow the user to add the person to the CI database.

Scenario #5 – The Person does not exist in CI or Oregon ACCESS



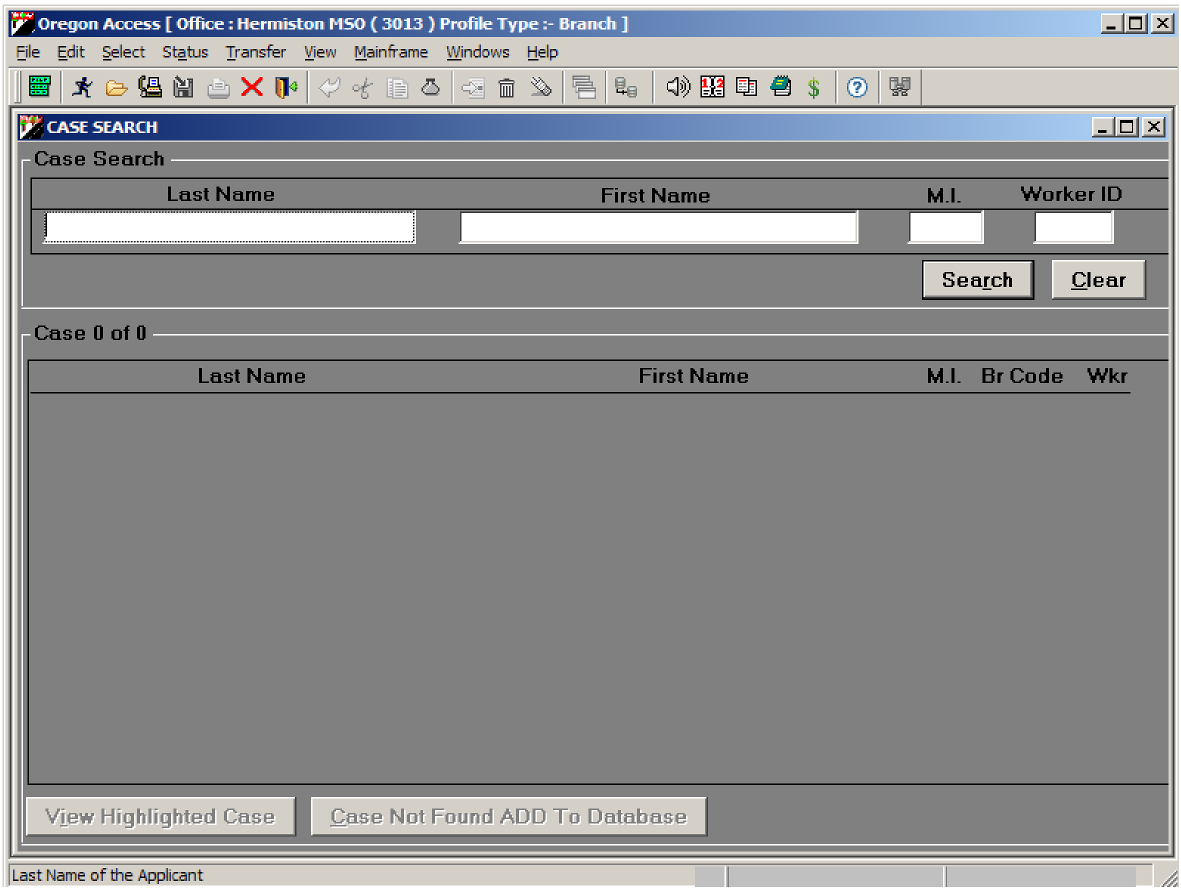
There is no person in the CI Search results that appears to match the person for whom you are looking. Press the No Match -> Search in OA button. This will initiate a search of the Oregon ACCESS database **using the data that was entered into the Search Criteria Section.**



There is no person in the Oregon ACCESS search results that appears to match the person for whom you are looking. Because you have now searched both the CI and Oregon ACCESS data bases, and the person you were looking for was not found in either, it is safe to create a new person record in Oregon ACCESS by pressing the Not Found in OA -> Create Person button.

Case Search

The Case Search process will search for cases in the local branch only. Cases are filed in the database using the name of the Primary Applicant and will return up to 21 records. Each case can have only one Primary Applicant. Use the Case Search screen to locate a specific case by Primary Applicant in the local branch.



There are four ways to access the Case Search screen:

1. Click the Case Search button on the Main Menu.
2. Choose "Case..." from the Select menu.
3. Ctrl + A.
4. Click on the Case Search icon on the tool bar.

Use the Case Search screen to locate an individual Case by following these steps:

1. Enter the search criteria. Usually a last and first name is sufficient.
2. Press Enter or click the Search button to begin the search.
3. The middle of the screen will show a list of Primary Applicants that match the search criteria. The search results will be based on a sounds "like" search (if one letter of the last name is entered, such as "J", the return will include the first 21 cases in the local branch which have a last name beginning with "J"), and a "soundex" search using the last name only. If **Worker ID** is used as a search criteria only cases that assigned to that worker ID will be returned. If no names are shown, try different criteria or do a Person Search.
4. Double click on a case name in the list to view the Persons and Contacts in the Case screen, or select the name with a single click and click the View Highlighted Case button.
5. The Persons and Contacts in the Case screen will show the Primary Applicant name at the top and all other persons "attached" to the case in the bottom area of the screen. From this screen a role and relationship will need to be assigned to the person. From this screen a person may also be detached from the case as needed.

1 – Case Search

This section allows the user to enter search criteria for the Primary Applicant (PA).   If the user conducting the search is the worker assigned to the case, the case will be found in the case list on the Main Menu. To get into the case quickly, double click on the case from the case list. This will open the case for that person.

- Last Name: Text field to enter the last name of the PA being searched for.
- First Name: Text field to enter the first name of the PA being searched for.
- MI: Text field to enter the middle initial of the PA being searched for.
- Worker ID: Text field to enter the worker id (load code) for the PA being searched for.

2 – Cases Found

This section will list any Primary Applicants that match your criteria that are found in your search. This area includes:

- Last Name: The last name of the individual found in the search.
- First Name: The first name of the individual found in the search.
- MI: The middle initial of the individual found in the search.
- Branch Code: This is the branch that the case is in.
- Wkr: Clicking this box will bring up a pop-up window that will show who the worker assigned to the case is.

3 – Buttons

The buttons on this screen perform different functions. The buttons are:

- Search Button: This button will start the search using the criteria that has been entered.
- Clear Button: This button will clear the search criteria from the fields.
- View Highlighted Case: This button will allow the user to view the highlighted individuals "Persons and Contacts in the Case" screen.

Case Not Found Add to Database: This button will open a Person Search screen so that the individual can be added to the database via the Person Search.

Person Detail

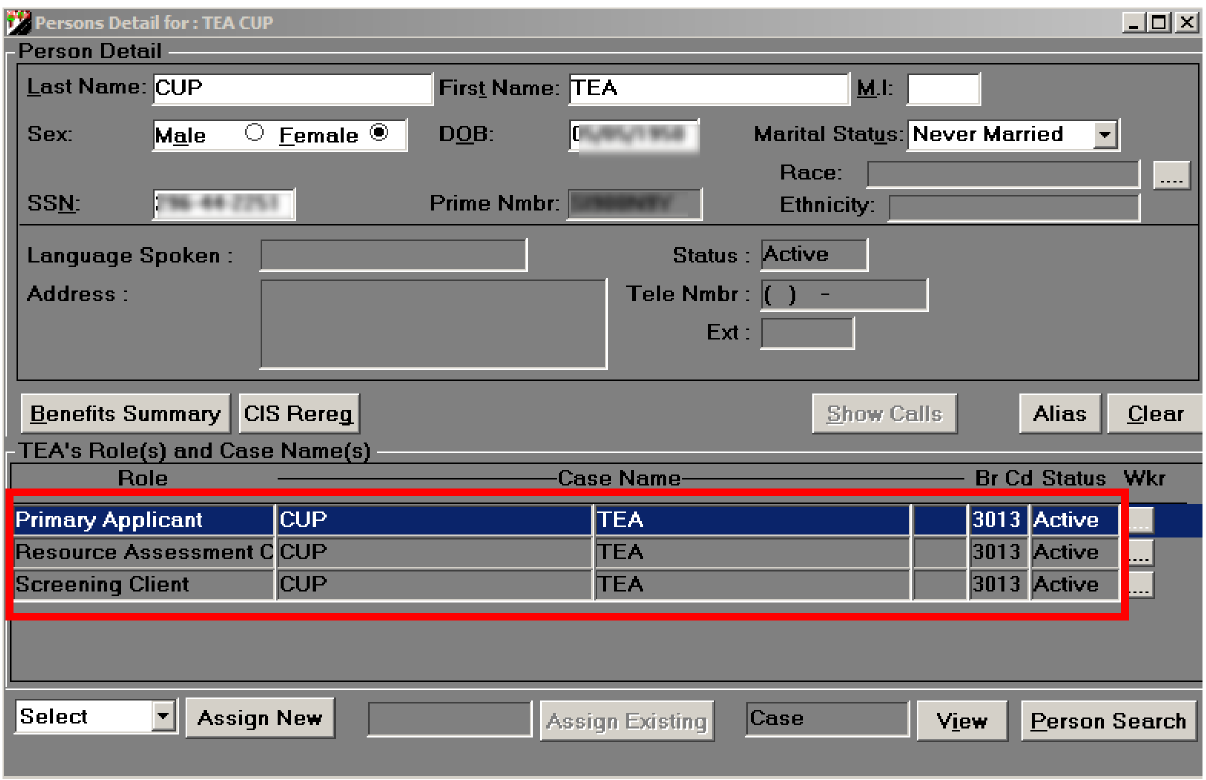
&

Active, Inactive, Archive

Person Detail

This screen allows the user to enter, view and update details for a specific person being added to, or already in the ACCESS database. These fields are editable and may be changed at any time from this screen. Once a change is made, it will be reflected in the case. If the person is registered in the mainframe, and a change is made, during integration a synchronization screen will appear asking the user to synchronize the data.

This screen is broken into three sections:



1 – Person Detail

This section allows the user to view and update information for the individual.

- <u>Last Name, First Name and MI</u>: Text fields used to enter, view, or update the last, first and middle initial of the individual.

- Sex: Radio buttons used to enter, view or update the gender of the individual.
- DOB: Text fields used to enter, view or update the date of birth of the individual.
- Marital Status: Drop down menu used to select view or update the marital status of the individual.
- SSN: Text fields used to enter, view or update the social security number the individual.
- Prime Number: Field that is auto filled and used to view the prime identification number of the individual. If the individual has not been registered to the mainframe, this field will remain blank. This field is not editable.
- Race & Ethnicity: Pop-up menu used to select view or update the race & ethnicity of the individual.
- Language Spoken: This field is auto filled from the information entered into the case on the Person tab in the Client section. This field will be blank if this information has not been entered into the case. This field shows the language that the individual speaks.
- Status: This field is auto filled to show the status of the person.
- Address, Telephone, Ext: These fields are auto filled from the information entered into the case on the Person tab (for telephone number) and the Address tab (for address information) in the Client section. These fields will be blank if this information has not been entered into the case. This field shows the address and telephone number of the individual.

2 - Role(s) and Case Name(s)

This section shows any Case, RA, or Screening the person is attached to. It identifies the individual's role, the branch the individual's case is in, and the case status (active/inactive).

- Role: This field shows whether or not the individual has a case, screening or resource assessment and the individual's role. Rows representing **Resource Assessment** and **Screening** records are easy to identify. In the Role column they display either Resource Assessment or Screening.

To identify **Case** records, you are going to look for an entry in the Role field of either Primary Applicant or Filing Group/Relevant Person. In the example above, we see that Tea Cup is the primary applicant on a case with the case name of Tea Cup.

- Case Name: This field displays the case name. The case name will be the name of the Primary Applicant on the Case.
- Br Cd: This field shows the branch that the case, screening or resource assessment is in.
- Status: This field shows the status. If the status is inactive, the user may activate the module from any branch.
- Wkr: This will open a pop-up window showing the name of the worker assigned to the module.

3 - Buttons

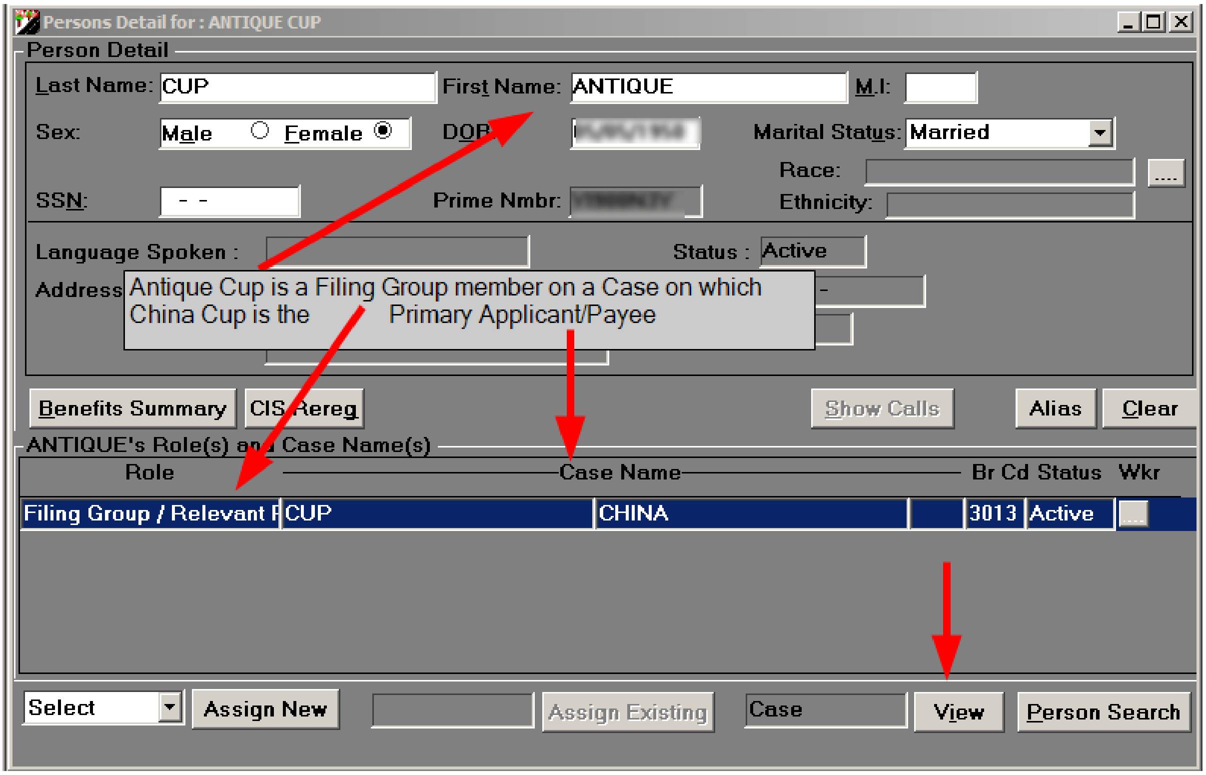
This section will identify the buttons available on the screen and their functions.

- Benefits Summary: Clicking this button will open a pop up window showing a summary of benefits for the individual.
    - This button will not be enabled until the individual has been marked Primary Applicant or applying on the case.
    - The summary includes the Program Code, Medical case number and Food Stamp case number. It also includes the type of benefits applied, the status of the benefit, and the date of the indicated status.
- CIS Reg and CIS Rereg: When adding an individual to the ACCESS database, at the Person Detail screen, there is an option to assign a new Case, Screening or RA.
    - If the individual is added to the database and is not assigned a Case, Screening or RA, and the person is not registered, the next time the person is searched for the option to register that person will be available.
    - Clicking on the CIS Reg button will open a person search screen with the individual's information pre-filled.
    - If no matches are found in CIS a message will appear.
    - Clicking the Add to CIS button will register that individual in the mainframe and assign a prime id number.

- Show Calls: If the individual has calls that are linked to them through the Call Module, the Show Calls button will be enabled.
  - Clicking on the Show Calls button will bring up a pop up window for you to view any calls from the Call Module that are linked to that person.
  - Within this box, clicking the Show Details button will open the Call Module to the Call Info tab for the selected (highlighted) call.
- Alias: Clicking on the Alias button will bring up a pop-up that allows the user to enter any alias names that the individual has gone by. More than one may be entered if necessary.
- Assign New: The Assign New button is used to assign a new Case, Resource Assessment or Screening to the individual from the Person Detail Screen.
  - To assign a new Case, use the drop-down box to select Case by clicking on the word Case. Click the Assign New button and a new Case for the individual will automatically open to the Client section, Person tab.
  - To Assign a new Screening or RA follow the steps above.
- Assign Existing: See Persons and Contacts section.
- View: Clicking on the view button will open either the Case, Screening or RA, depending on what is selected in the Role(s) and Case Name(s) section of the screen.
- Person Search: Clicking Person Search will open the Person Search screen.

Note on Viewing the Person Details Screen

Remember that the person you are looking for may be a filing group member on a case with a different name. Here is an example of what the screen would look like in this circumstance:


Persons Detail for : ANTIQUE CUP
Person Detail
Last Name: CUP
First Name: ANTIQUE
M.I:
Sex: Male Female
DOB
Marital Status: Married
Race:
SSN: - -
Prime Nmbr:
Ethnicity:
Language Spoken :
Status : Active
Address
Antique Cup is a Filing Group member on a Case on which China Cup is the Primary Applicant/Payee
Benefits Summary
CIS Rereg
Show Calls
Alias
Clear
ANTIQUE's Role(s) and Case Name(s)
Role
Case Name
Br Cd Status Wkr
Filing Group / Relevant F
CUP
CHINA
3013
Active
Select
Assign New
Assign Existing
Case
View
Person Search

Active/Inactive/Archive

- ACCESS has the ability to Activate or Inactivate a Case or Screening, or Archive a Resource Assessment. Until inactivation is done ACCESS records are considered active.

- ACCESS can also inactivate a Person Record. A person can only become inactive when all records have been inactivated; in other words, a person may have an inactive application and screening, but if the RA is still active, the person is still considered active.

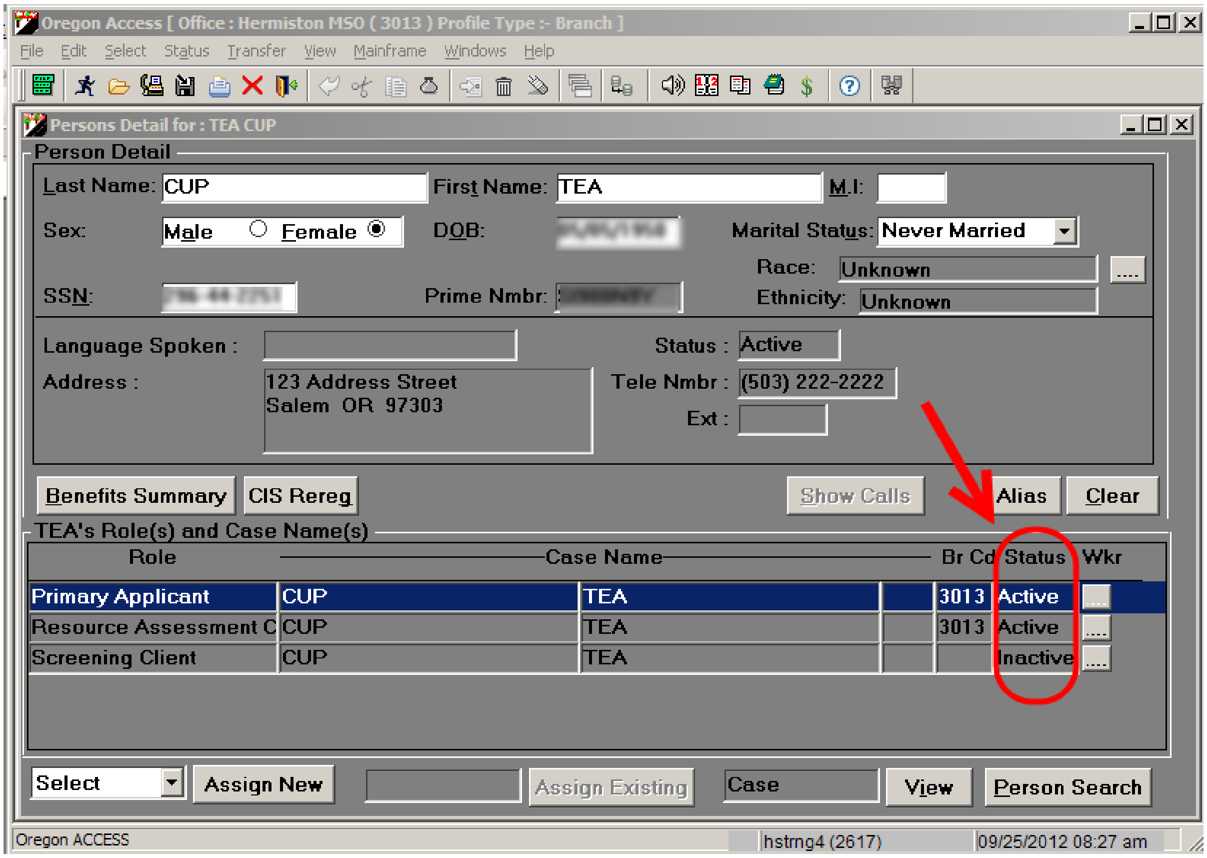
- When a person search is performed against the Oregon ACCESS database, the list returned will indicate whether the person's status is Active or Inactive.

- The Person Detail screen has an area called the Role(s) and Case Name(s). This area will have a column listing the Status. This Status will indicate whether the application, RA, or screening is in an Active or Inactive status.

- Inactivation of records may occur for Applications that are no longer current, but may need to be updated and used again.

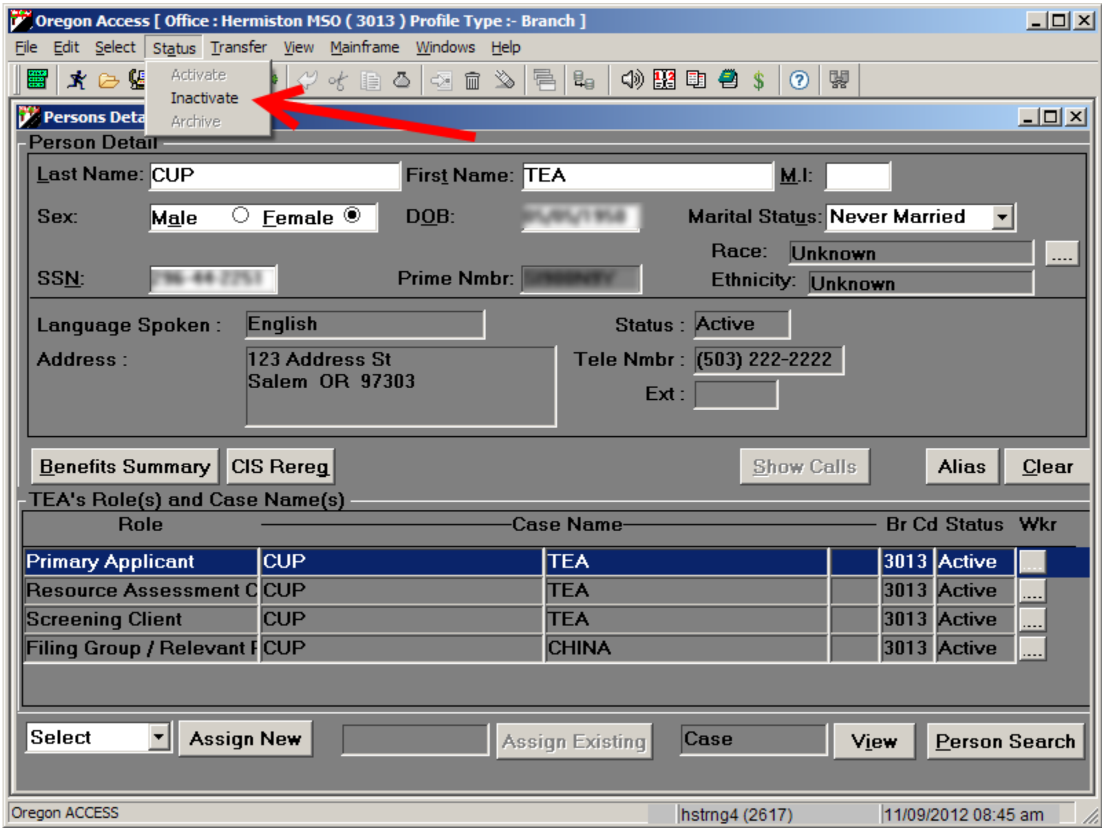
- Inactive records will not show in the local branch during a search, even though they may have been in the local branch prior to being inactivated, but they will still be available through an All ACCESS search.

- Inactive and Archived records will not show on reports.



Inactivating an Active Record:

To Inactivate an Application or Screening, navigate to the Person Detail screen. In the persons Role(s) and Case Name(s) area of the screen, highlight the record to be inactivated. From here, select Status on the title bar and choose Inactivate. The status will then change from Active to Inactive.



To inactivate an Application, all case statuses must be closed, deceased, denied, or withdrawn.

A Resource Assessment cannot be inactivated; it can only be archived when complete and verified.

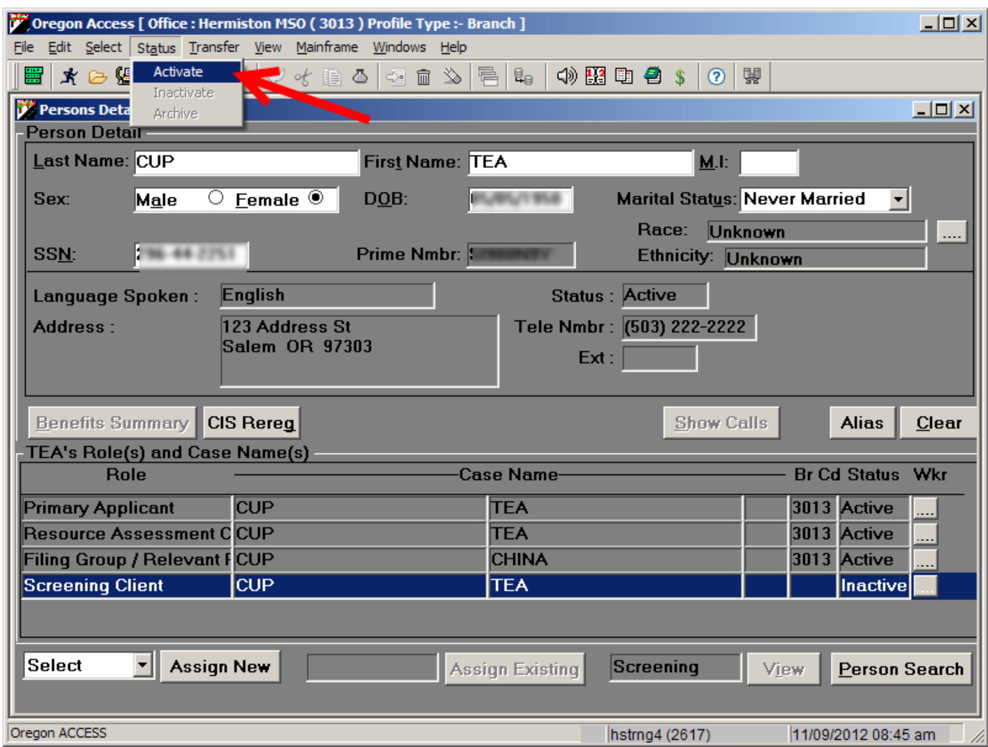
When an Application or Screening has become inactive, it will no longer be available locally. The inactive record becomes available to any office, regardless of which office inactivated it. Any user, statewide, can retrieve it without having to request a transfer. All active records should be transferred as usual.
Certain records will be inactivated automatically, based on pre-defined criteria.

- A case will automatically become inactive 90 days after the status of all benefits received by the person(s) in the application have been marked as closed, deceased, denied or withdrawn, or the case status field, in the benefits section, is left blank.

- A screening will automatically become inactive 90 days after the date of contact or after the last modified date of the screening narrative, whichever is later.

Activating an Inactive Record:

To retrieve an inactive record, conduct an search and navigate to the Person Detail screen for the selected individual. From here, highlight the module to be activated, go to Status on the Menu bar, and choose Activate. This will change the status back to Active and the application or screening may be worked on as usual.

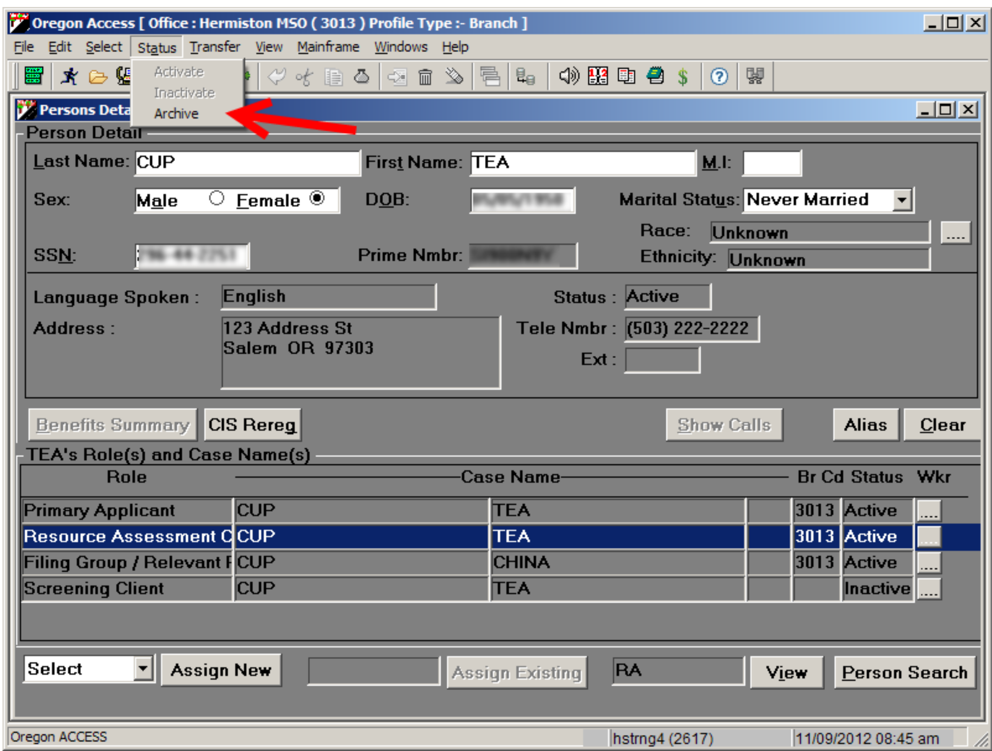


Archive:

Archiving of records will occur for cases that will no longer be used in ACCESS. Archived records will be saved as a "snapshot" of the data at the time of the archiving. Archived records will be read only and information cannot be changed or updated by the worker. However, these records may have forms printed from the archived records.

Resource Assessments are the only module that the worker can manually archive at any time. All other records will be archived when ACCESS automatically archives the data based on pre-defined time frames.

To Archive an RA, navigate to the Person Detail screen and highlight the RA at the bottom of the screen. Select Status on the Menu bar and choose Archive. A second message will appear asking, "You are about to Archive their RA, Do you want to continue?" Choices will be YES or NO.



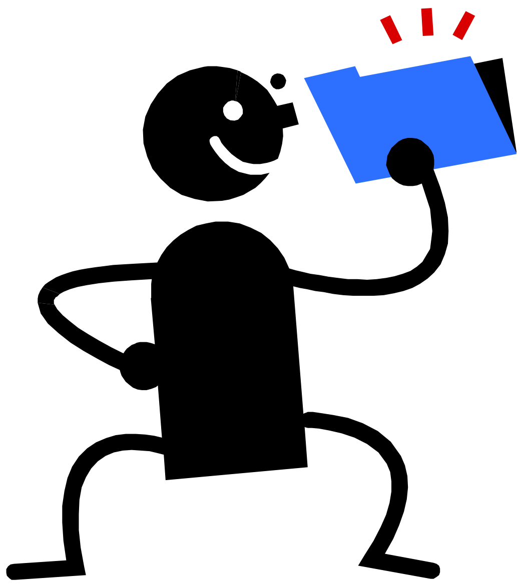
Automatic archiving will happen at the following times:

- Two years from the date of death of a person (unless EAU is still working on the case).
- Three years from the inactivation date of a person.

Inactive or archived person information will not show on reports or ticklers.

ACCESS will run a weekly job to initiate the procedure that automatically archives the qualifying person(s) and their cases.

Oregon ACCESS Case Record



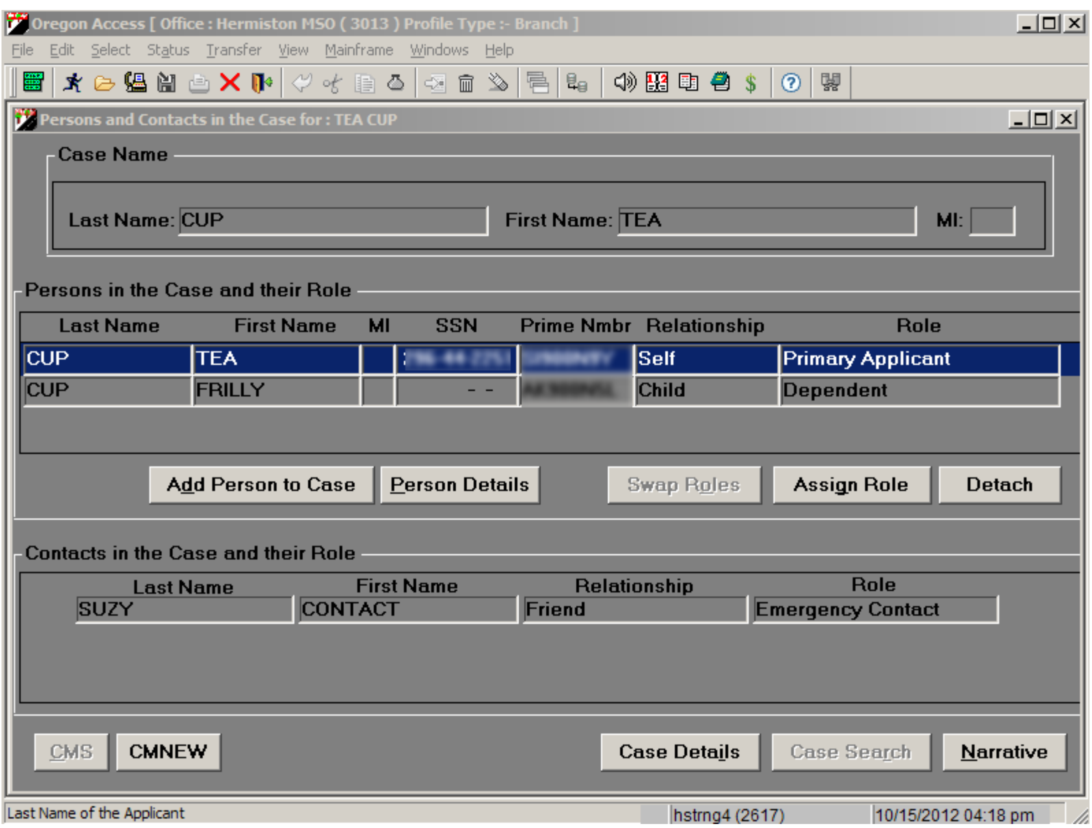
Persons and Contacts Screen
and
Body of Oregon ACCESS
Case

The Oregon ACCESS Case Record

- ✓ Cases contain people who have a particular role.
- ✓ The Primary Applicant is entered first.
- ✓ The case carries the Primary Applicant's name.
- ✓ Filing Group/Relevant Person and Dependent may also be attached if they play a role in the case eligibility determination
- ✓ Additional people who do not play a role in the eligibility determination but are otherwise associated with the case may be added on the contact tab. Their role on the case may be specified there, as well

Persons and Contacts in the Case

The first screen in the Oregon ACCESS case record is the Persons and Contacts screen. It provides information on the people who are on the Case, and they roles that they play. This screen will only open when the individual has had a Case assigned to them, or has been attached to another individual's Case.



1 – Case Name

This section will auto fill the case name. This is the individual who is the Primary Applicant on the case.

2 - Person in the Case and their Role

This section lists all of the individuals attached to the case. This information includes the individuals SSN, Prime number, relationship to the Primary Applicant and Role.

- Last Name: This field shows the last name of the individual.
- First Name: This field shows the first name of the individual.
- MI: This field shows the middle initial of the individual.
- SSN: This field shows the social security number of the individual.
- Prime Nmbr: This field shows the prime number that has been assigned to that individual.
- Relationship: This field shows the relationship of the individual to the Primary Applicant on the case.
- Role: This field shows the role of the individual.

3 – Contacts and their Role

This section shows any contacts that have been added to the case in the Contact's tab.

- Last Name: This field shows the last name of the contact.
- First Name: This field shows the first name of the contact.
- Relationship: This field shows the relationship of the contact to the individuals attached to the case.
- Role: This field shows the contacts role with regards to the individuals attached to the case.

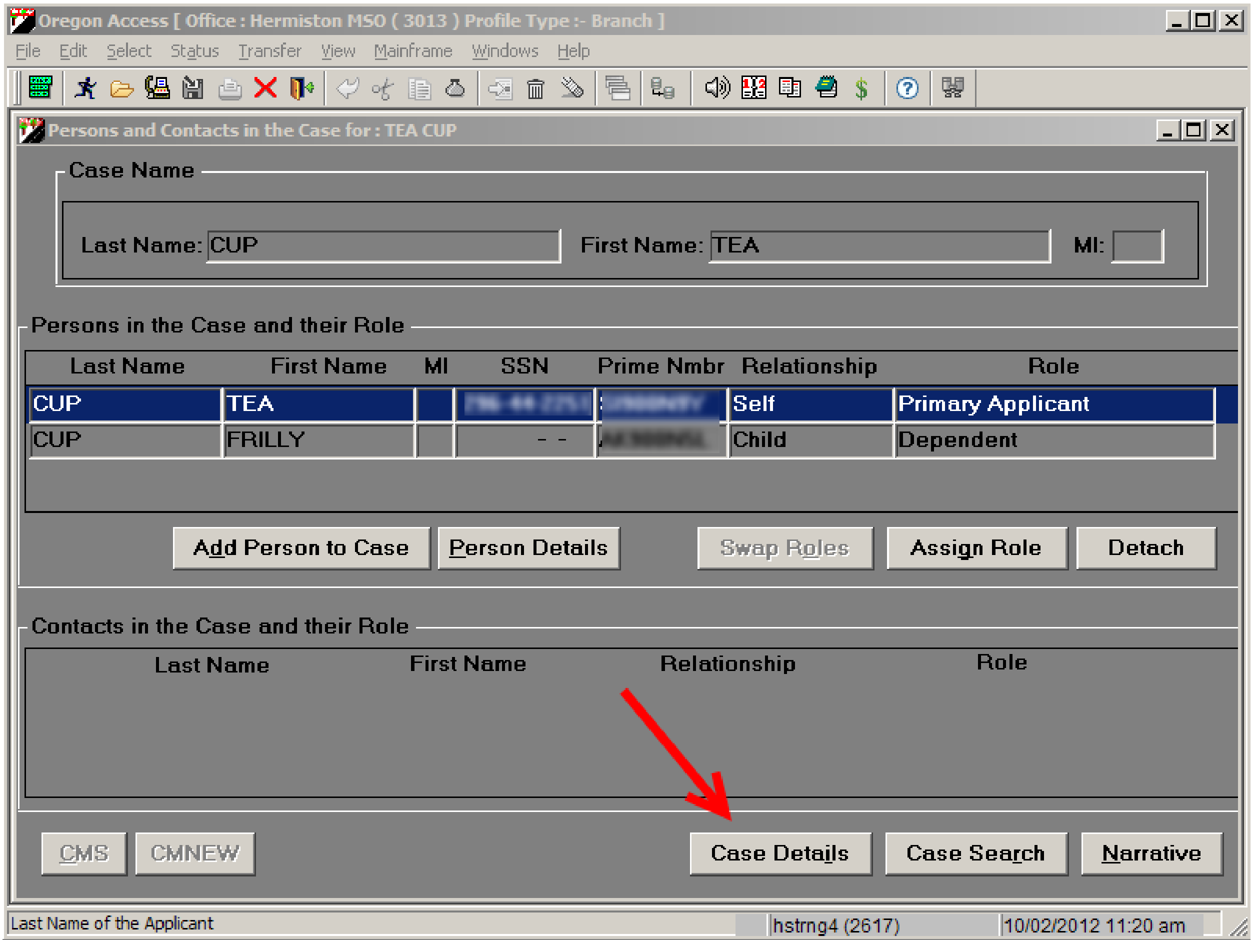
4 -- Contacts in the case and their Role

This section lists any individuals that have been added to the Contacts tab in the Case or RA. If no contacts are entered, this area will be blank.

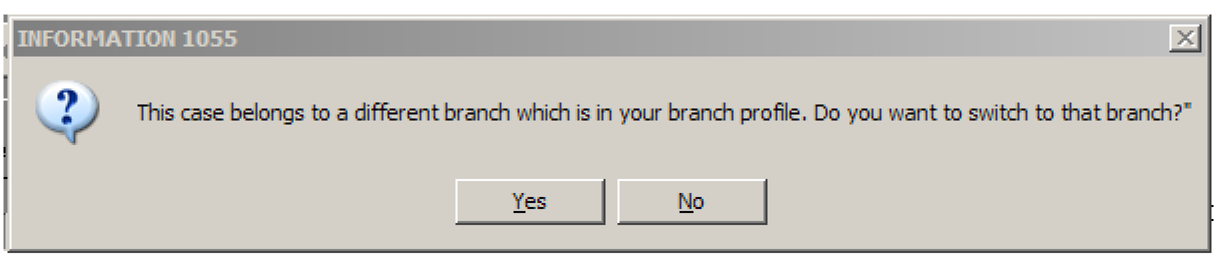
5 - Buttons

- Add Person to Case: Clicking on the Add Person to Case button will open a Person Search window. Conduct a person search for the individual to be added to the case. Once the search is completed there are several options that may be available depending on the results. The options are View Person, Add to Existing Case/RA, No Match -> Search in OA or Download/Reg from CI. Only allowable options will be selectable.
- Person Details: Clicking this button will open the Person Details screen for the individual that is selected or highlighted in the "Persons in the Case and their Roles" section of the screen.
- Assign Role: When creating a new case or attaching an individual to an existing case, that individual must have a role assigned to them.
    - Clicking the Assign Role button will open the Role on Case window. This window lists the Case (the individual who is the Primary Applicant on the case), the Role and the Relation to the Primary Applicant.
- Detach: When an individual needs to be removed from a case, all of the benefits must be closed. Once all of the benefits are closed, clicking the Detach button will remove the individual. Using this does **not** delete the individual or any information associated with them.
- CMS: When the case is ready to be integrated to the mainframe, if the case has already been established in the mainframe, the CMS option will be enabled. Clicking this button will start integration. The CMNEW option will not be available if the case is already established.
- CMNEW: When the case is ready to be integrated to the mainframe, if the case is new, the CMNEW option will be available. Clicking this button will start integration and take the user through the new case setup. The CMS option will not be available if the case is new.
- Case Details: Clicking on Case Details will open the Case to the Person tab in the Client section.
- Case Search: Clicking the Case Search button will open the Case Search window, and allow the user to conduct a search for case in the local branch.
    - Case search will only search the local branch and **will only search for Active cases on which the person entered in the search criteria is the Primary Applicant.**
- Narrative: Clicking the Narrative button will open the narrative for the case.

Click on the Case Details button to get into the body of the Oregon ACCESS case.



If the case that you want to view exists in another branch, you may, depending upon your security rights, be asked if you want to switch to the branch in which the case is located.   Click 'Yes'.

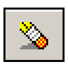


Navigating within the Body of the Oregon ACCESS Case

Once inside the body of the case record, you will notice that the available icons at the top of the page change.

The Oregon ACCESS case is made up of many sections. To navigate from section to section within an Oregon ACCESS case, you will primarily use the highlighted icons.

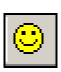
 Deletes the currently selected record or field data

 Clear -- Resets the record to it original values as retrieved or last saved.

 Person – Contains basic information about the **People** on the case

 Financial – Contains **Financial** information about the people on the case

 Medical – Contains information about **Medical** insurance and medical costs for people on the case

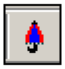
 Service Needs – Contains information about some **Service Needs** and Older Americans Act services. There are portions of this section that are obsolete.

 Client Assessment & Planning – Contains the **CA/PS** assessment and associated data.

 Food Benefits – Contains information on used in determining eligibility for **food benefits** (a.k.a. SNAP)

 This section is obsolete and no longer in use

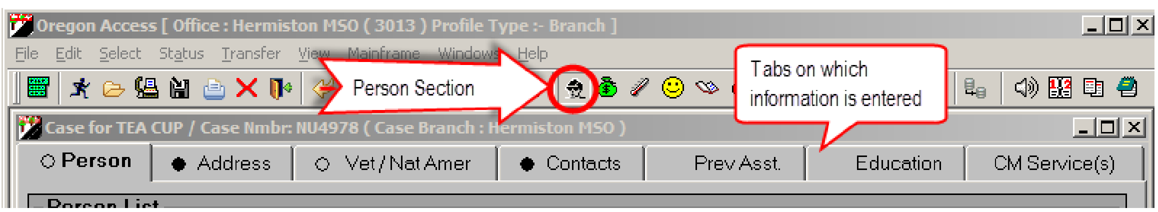
 Benefits – Contains a summary of client **benefits** that have been approved, denied, or are pending eligibility determination.

 Adult Protective Services – Contains information re: **Adult Protective Services** Investigations and complaints.

 Case Narrative – Contains the case **narrative**.

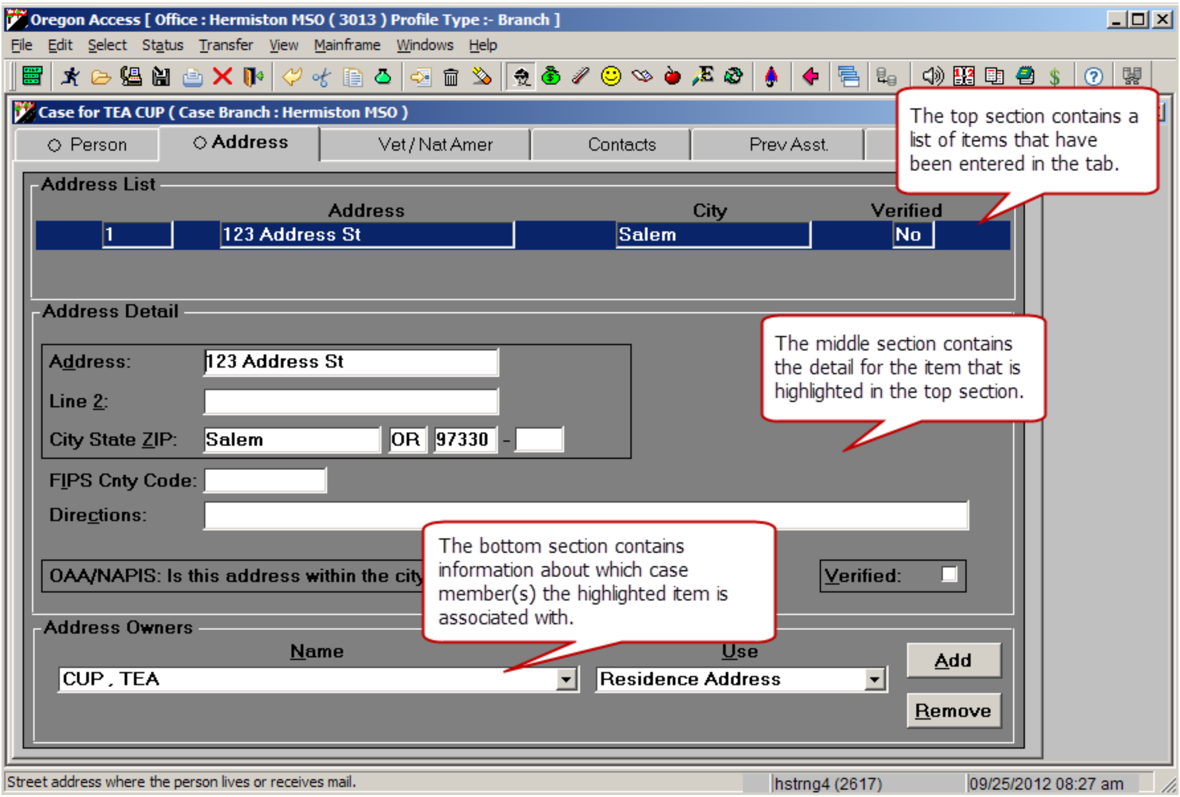
Oregon ACCESS case tab/screen structure

Each of the Sections listed above contains a series of data entry screens called "tabs". Workers enter data on the tabs. Here is an example of the Tabs located in the Person Section of the application.



Tab/Screen Layout

The majority of the tabs in the Oregon ACCESS case contain three sections.



1 - List

The top section of the screen contains a list of all of the entries for the tab. In this instance, there is only one address listed for this case.

2 – Detail

The middle section of the screen displays the details for the item highlighted in the List section.

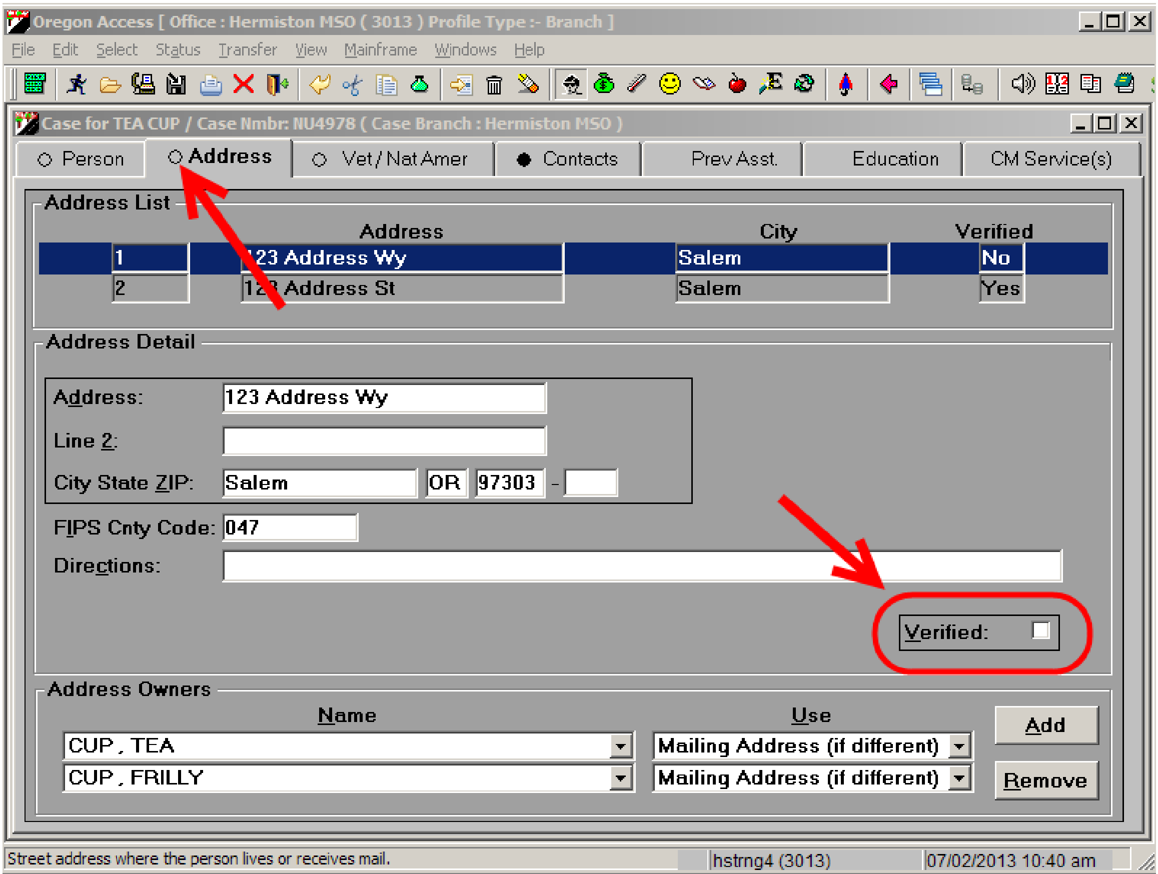
3—Ownership

The bottom section of the screen provides information about which case members are associated to the item listed in the detail section. The Ownership section does not necessarily indicate ownership in a legal sense. It merely indicates that the person listed has some association with the item.

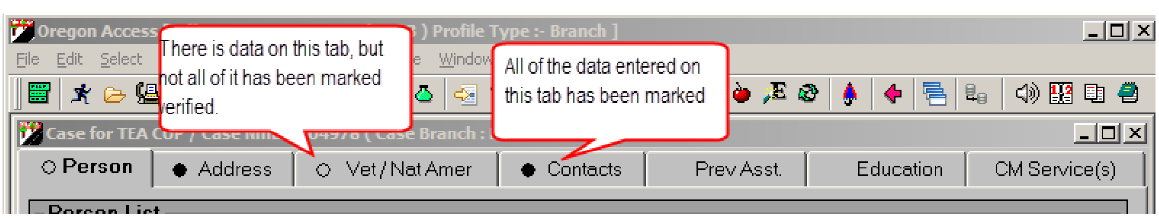
Most tabs in the Oregon ACCESS case share this layout – List, Detail, Ownership. There are some exceptions, but most are self-explanatory.

Verified Check Box

Most screens have a “Verified” check box. This checkbox is used differently in different offices. Some offices use the verified checkbox to indicate that the data entered on the tab has been formally verified. Other offices use the checkbox to indicate that no more data collection is necessary for that area.

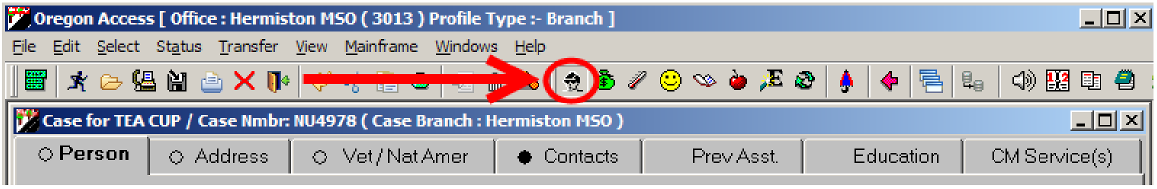


If information has been entered on a tab, there will be a circle to the left of the tab label. An open circle means that information exists on the tab, but it has not all been verified. A dark filled circle indicates that information entered on the tab has been verified.



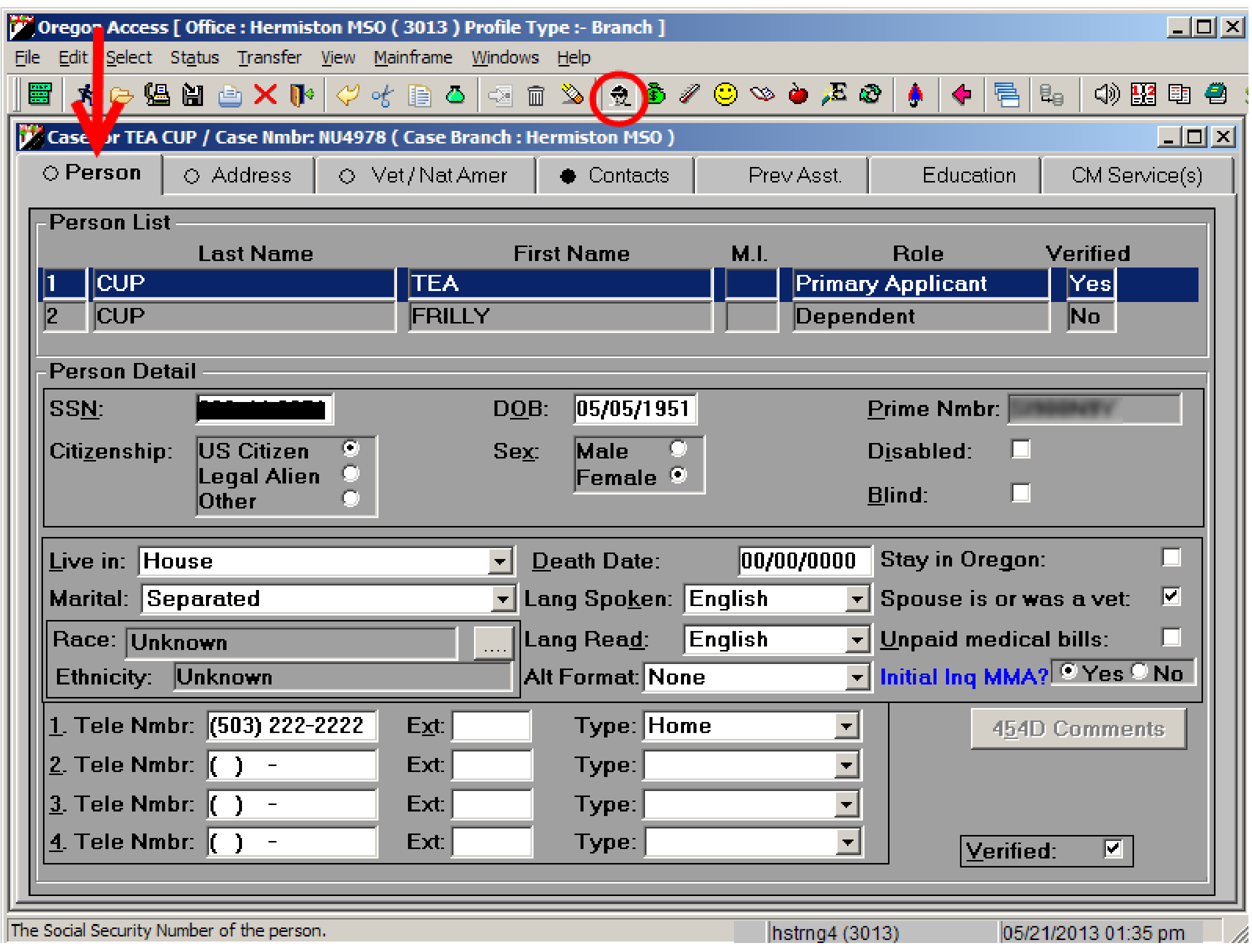
Also note that the verified checkbox is associated with each entry on the tab. <u>The small circle on the tab next to the label will remain open until all entries of the item are marked verified</u>. In the example below, if multiple addresses existed, each address would need to be marked verified in order for the circle on the address tab to display as a filled dark circle.

Tabs in the Person Section of the Oregon ACCESS case



Client demographic data is stored in this section. When opening a case, ACCESS opens to this section initially, unless otherwise selected.

Person Tab



The Person Tab in the Person Section does not follow the standard screen layout.

1 - Person List Fields

List of people associated with the Case on the Persons and Contacts in the case screen (does not include Contacts). When you highlight one of the people in the list, the Detail section of the screen will display the data specific to the highlighted person.

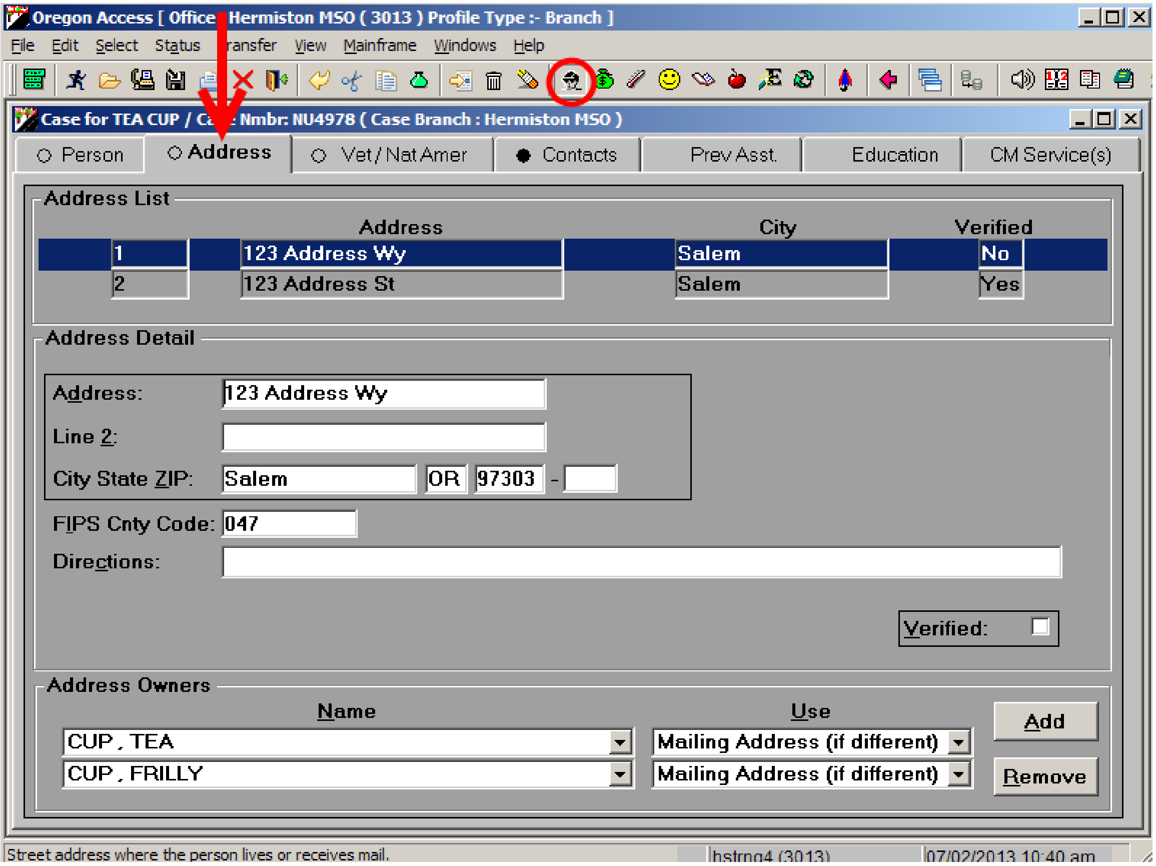
- Last Name: The last name of the person attached to the case.
- First Name: The first name of the person attached to the case.
- MI: The middle initial of the person attached to the case.
- Role: The role of the person in the case.
- Verified: Indicates if all information for this person has been verified or is complete.

2 – Person Detail Fields

- SSN: The social security number of the person selected in the list area.
- DOB: The date of birth of the person selected in the list area.
- Prime Nmbr: The prime number of the person selected in the list area.
- Citizenship: Use the radio buttons to indicate the citizenship status of the selected person.
- Sex: Use the radio button to select the gender of the selected person.
- Disabled: Use the checkbox to indicate whether or not the person is disabled according to SSA.
- Blind: Use the checkbox to indicate whether or not he person is blind.
- Live in: Use the drop down to indicate where the person lives.
- Marital: Use the drop down to indicate the person marital status.
- Race: Use the drop down to indicate the race of the person.
- Lang Spoken: Use the drop down to indicate the language that the person speaks.
- Death Date: When the person passes away, enter the verified date of death.
- Stay in Oregon: Use the checkbox to indicate whether or not the person intends to stay in Oregon.
- Lang Read: Use the drop down to indicate the language that the person reads.
- Alt Format: Use the drop down to indicate what type of alternate format the person needs, if any.

- 454D Comments Button: Once a date of death is entered this button will be enabled. Use to access the 454D to enter comments.
- Spouse is or was a vet: Use this checkbox to indicate whether or not the person has a spouse that is or was a veteran.
- Unpaid Medical Bills: Use the checkbox to indicate whether or not the person has unpaid medical bills.
- Initial Inq MMA: This is a mandatory question. If the client came to the Department because they were inquiring about Medicare Part D Prescription coverage, this should be marked Y. Otherwise, it is marked N
- Tele Nmbr, Ext, Type: The telephone number, extension, and type of phone number.

Address Tab



1 – Address List

- Address: This is the address of the person selected
- City: This is the city listed in the full address for the person.
- Verified: This indicates whether or not the record has been verified or completed.

2 – Address Detail

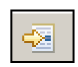
- Address: Enter the address information in these text fields.
- FIPS Cnty Code: This is Federal Information Processing Standard code for each county.
- Directions: This is a limited text field that allows entry of directions or important information about the specific address.

3 – OAA/NAPIS Question

Use the drop down to indicate whether or not the address is within the city limits. Used only for OAA/NAPIS reporting.

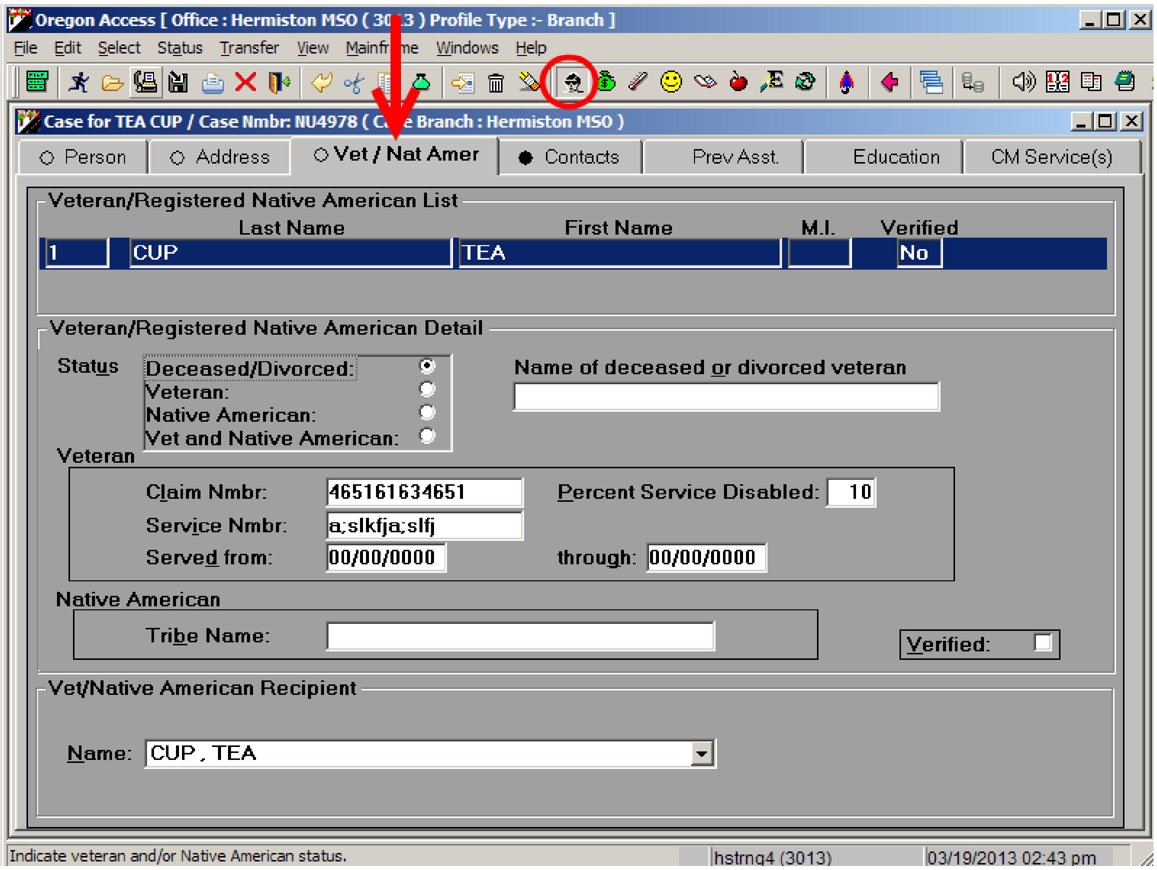
4 – Address Owners

- Name: This is a drop-down that allows the user to enter the name of the owner of the address (owner does not specifically mean that the individual owns the real estate, it simply means that the individual is associated with the address). If there is only one individual on the case, the system will automatically fill in that individual's name.
- Use: Use the dropdown to choose the use of the address. Choices are:
    - Residence
    - Mailing
    - Temporary
- Add: If more than one individual lives at the same address, press the Add button again to get the drop down list of names that can be used to attach a second name to the same address.
- Remove: If an individual moves out of an address, press the Remove button to remove that individual.

To add a second or third address, click the New Record icon  on the tool bar. This will bring up a blank field that allows the user to enter another address.

Veterans/Native American Status Tab

Use this area to enter information regarding an individual's status as a Veteran or Native American, or their deceased or divorced spouse.



1 - Veteran/Registered Native American List

- Last Name: The last name of the person attached to the case.
- First Name: The first name of the person attached to the case.
- MI: The middle initial of the person attached to the case.
- Verified: Indicates if all information for this person has been verified or is complete.

2 - Veteran/Registered Native American Detail

Enter available Veteran or Native American information into provided fields.

- Status: Use the radio buttons to indicate the Veteran or Native American Status for the individual or their deceased or divorced spouse.

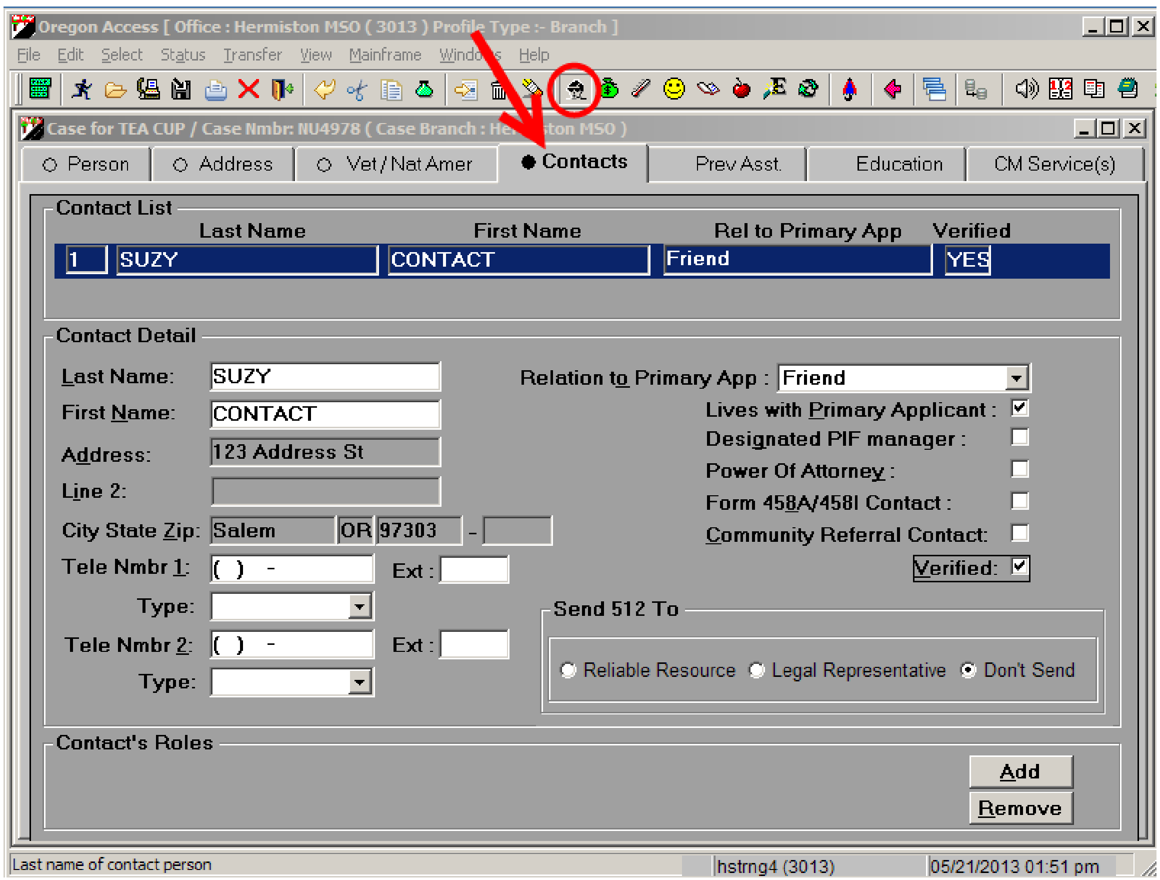
- Deceased/Divorced: Use to indicate that the status is for a spouse. When this radio button is used a text field labeled "Name of Deceased or Divorced Veteran" will be enabled.
    - Veteran: Use to indicate that the individual is a veteran only.
    - Native American: Use to indicate that the individual is a Native American only.
    - Vet and Native American: Use to indicate that the individual is both a veteran and Native American.
- Veteran: Use this area to enter veteran status information.
    - Claim Number: This field is used to enter the claim number for service disability.
    - Service Number: This field is used to enter the individual's service number.
    - Percent Service Disabled: This field is used to indicate the percentage of disability that has been awarded.
    - Served from/Through: These dates field are used to indicate the start
- Native American: Use this area to enter Native American status information.
    - Tribe Name: Enter the Tribe name and registration number if available.

3 - Vet/Native American Recipient

This section is used to indicate who the individual is that is the veteran or Native American. The drop-down is used to view all individuals attached to the case.

Contacts Tab

Use this area to enter the addresses and telephone numbers of contact individuals for the case. People other than the Primary Applicant, Filing Group/Relevant Person, or Dependent will need to be added on this screen. Contact information entered on this tab will not be replicated anywhere else in ACCESS. The contact information entered will pull and print in the correct places on the screens within ACCESS as well as on the applicable forms. It will also transfer with the case.



1 – Contact List

- Last Name: The last name of the person attached to the case.
- First Name: The first name of the person attached to the case.
- Relationship to Primary Applicant: This indicates how the contact is related to the person who holds the case.
- Verified: Indicates if all information for this person has been verified or is complete.

2 – Contact Detail

This section allows the user to enter the specific contact information.

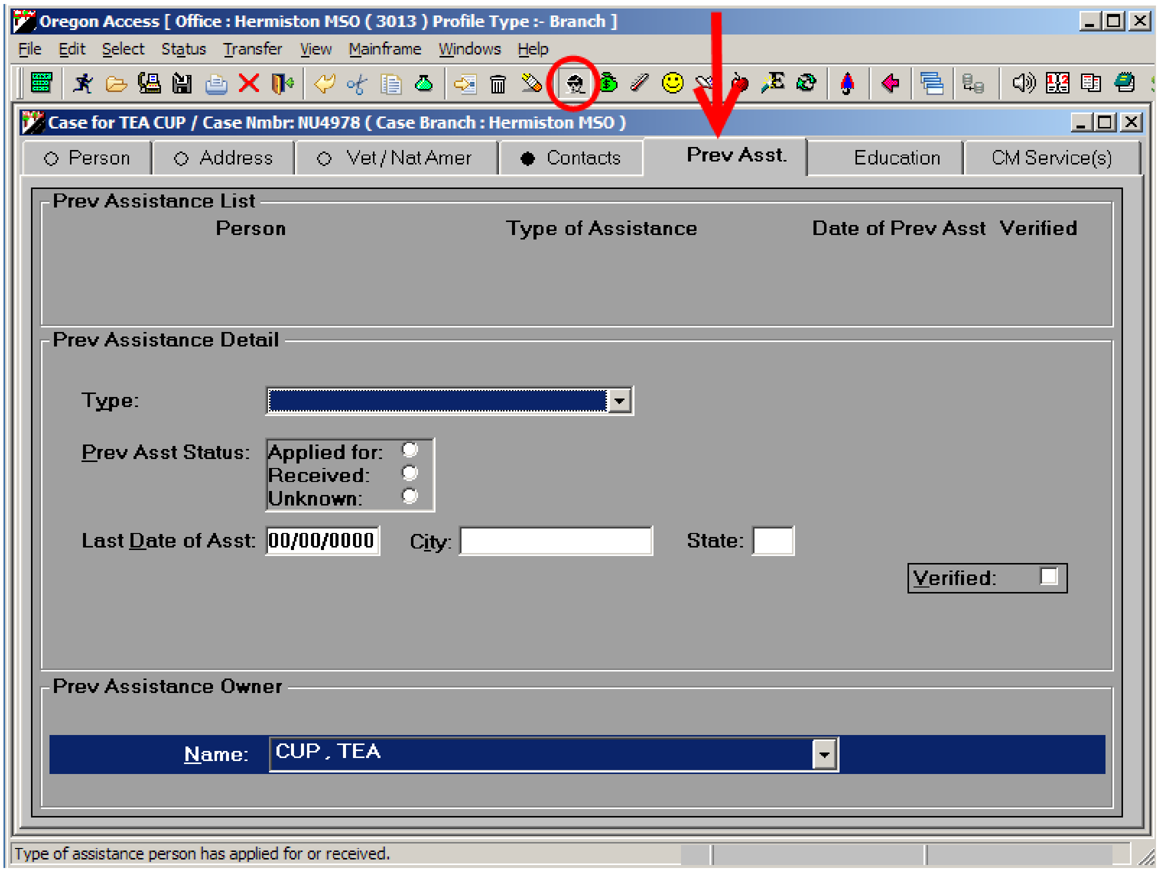
- Last and First Name: These fields are used to enter the name of the contact.
- Address Information: The address fields are used to enter the address for the contact.
- Telephone Information: The telephone fields are used to enter the contacts telephone numbers. More than one number may be entered.
- Relationship to Primary App: This is a drop down field that allows the use to select the relationship that the contact has to the primary applicant of the case.
- Send 512 to: Mark appropriate field if this person is a "Reliable Resource" or "Legal Representative" and they should receive a copy of the 512. This field will default to "Don't Send" unless otherwise marked.
- Lives with Primary Applicant: This checkbox should be used when the contact lives with the Primary Applicant. When this box is marked, the address of the contact will auto fill with the Primary Applicants address as listed in the Address tab.
- Designated PIF Manager: This checkbox should be used when the contact is the individuals PIF manager.
- Power of Attorney: This checkbox should be used when the contact is the legal Power of Attorney for the individual. There should be documentation in the file.
- Form 458A Contact: This checkbox should be used when the contact is the individual responsible for Title XIX Financial Planning.
- Community Referral Contact: This checkbox should be used when the contact is a contact for a community referral.

3 – Contact Roles

This section allows the user to select using the dropdown the specific role of the contact. Use the Add or Remove buttons to add or remove roles as appropriate.

Previous Assistance Tab

Use this area to enter information regarding previous assistance received by the individual.



1 – Prev (Previous) Assistance List

- Person: The name of the person attached to the case.
- Type of Assistance: The type of assistance that the person received.
- Date of Prev Asst: The date that the previous assistance was received.
- Verified: Indicates if all information for this person has been verified or is complete.

2 – Prev (Previous) Assistance Detail

This section allows the user to enter the specific information about any assistance that has been received in the past by the individual.

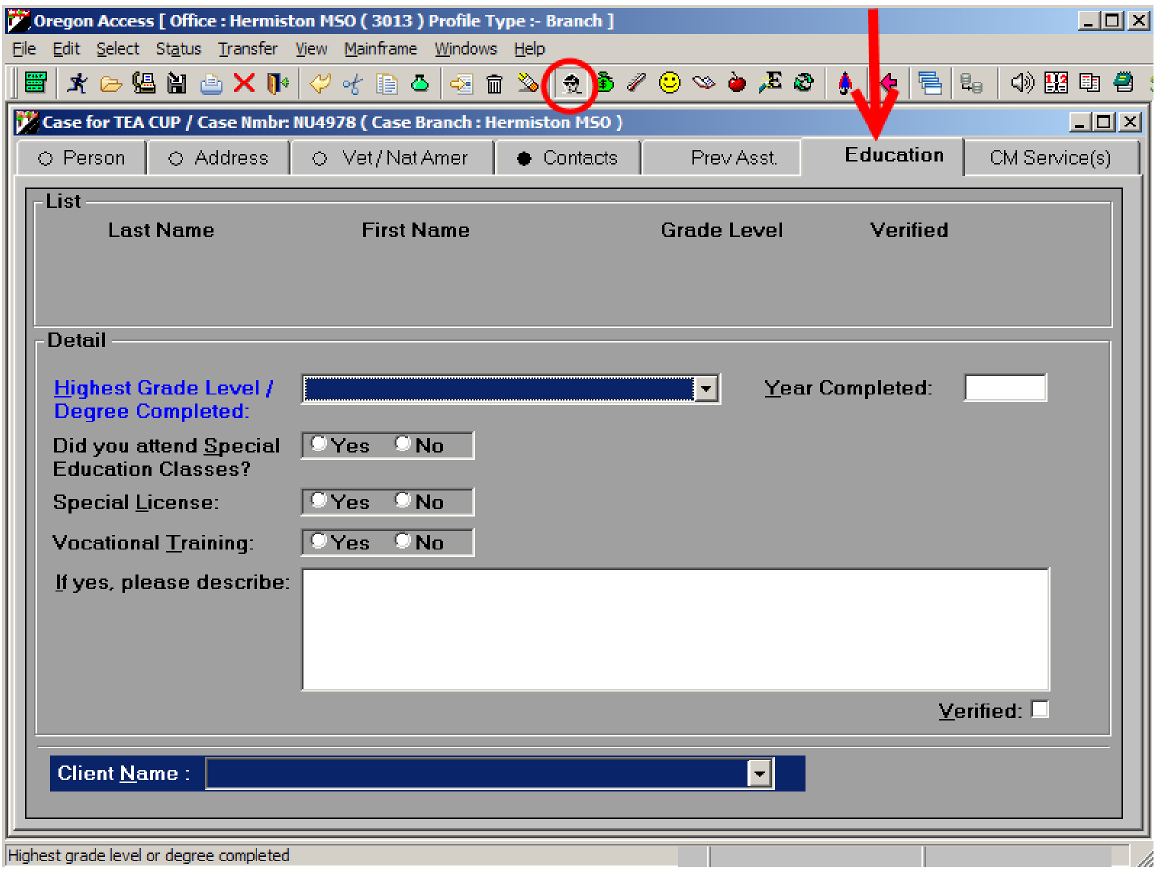
- Type: Use the drop down box to select the type of assistance that the individual has received.
- Prev Asst Status: Use the radio buttons to show the status of the assistance.
- Last Date of Asst: Enter the date the assistance was last received.
- City/State: Enter the City and State where the assistance was received.

3 – Prev (Previous) Assistance Owner

Use this drop down to select the individual who received the assistance. Only individuals attached to the case will show in this drop down.

Education Tab

Use this area to enter information regarding the applicant's education level. The information entered into this tab will print on the SDS 708.



1 – Education List

This area shows all of the information entered into the education tab.

2 – Education Detail

This area shows the specific information about the education received.

- Highest grade level/Degree Completed: Use the drop down to select the grade or degree completed.
- Year: Enter the year that the grade or degree was completed.
- Did you attend Special Education classes? Use the radio buttons to indicate yes or no. Year will only be enabled if "Yes" is indicated.

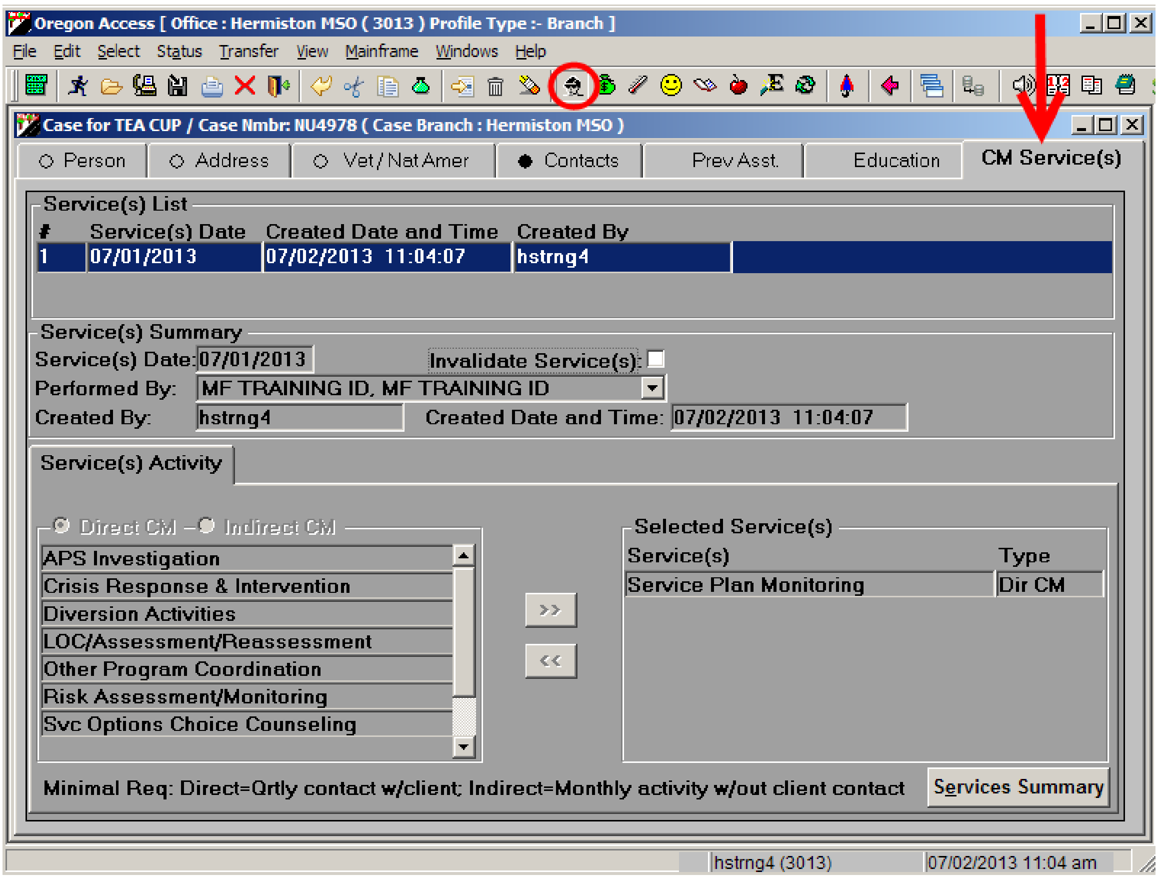
- Special License: Use the radio buttons to indicate if there were any special licenses that the individual has received. Year will only be enabled if "Yes" is indicated.
- Vocational Training: Use the radio buttons to indicate if there has been any vocational training received by the individual. Year will only be enabled if "Yes" is indicated.
- If Yes, please describe: Use this text box to explain any "Yes" answer that was given.

3 – Client Name

Use this drop down to select the client who received the education. Only individuals attached to the case will show in this list.

CM Service(s) Tab

Use this area to enter information regarding the Direct and Indirect case management contacts for purposes of Home and Community Based Care State Plan K services.



1 – Service(s) List

This area shows all of the services entered into the CM Service(s) tab.

- Service(s) Date: The date on which the service was rendered.
- Created Date and Time: This is the date and time on which the service record was created.
- Created By: This is the RACF of the logged in user who created the service record.

2 – Service(s) Summary

This area shows the specific information about the recorded service. This is also where you enter some basic information when adding a service record.

- Service(s) Date: The date on which the service was rendered.
- Invalidate Service(s): When checked, this indicates that the service record is invalid or was entered in error.
- Performed By: This is the Name of the person who performed the CM Service.
- Created By: This is the RACF of the logged in user who created the service record.
- Created Date and Time: This is the date and time on which the service record was created.

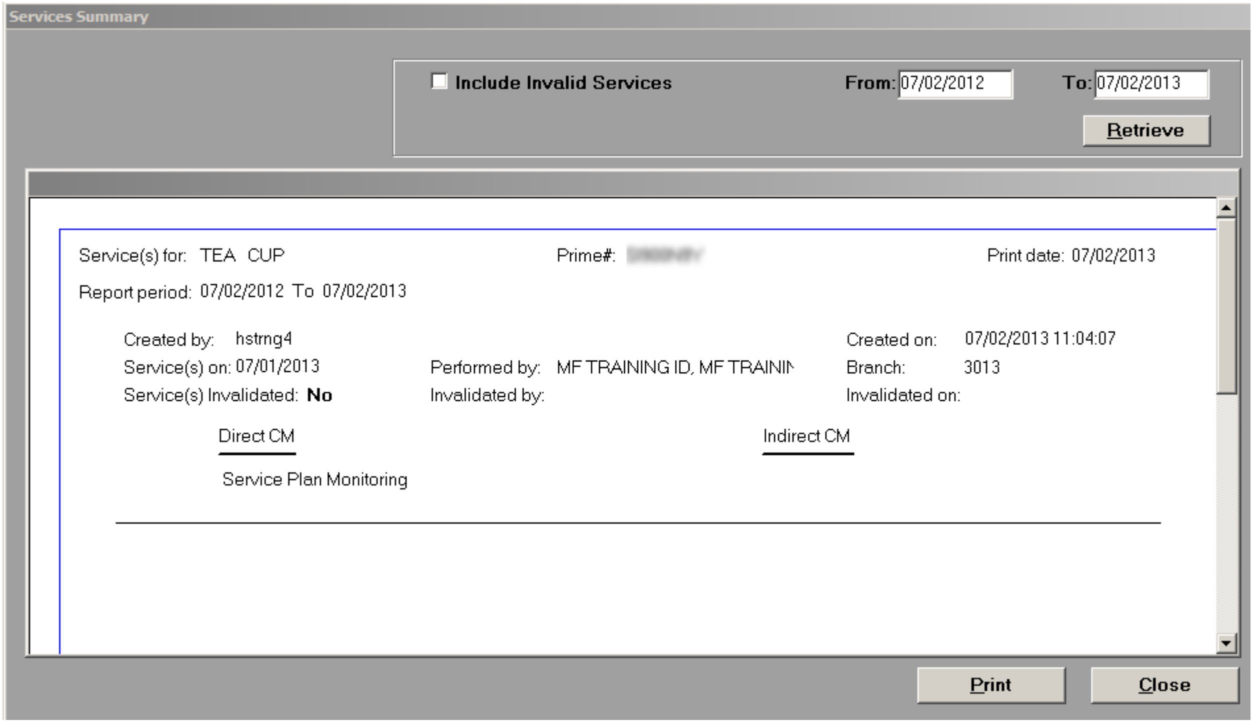
3 – Service(s) Activity

Use this area to select the service that is being rendered.

- Direct CM: When checked, this will display the list of Direct Case Management services.
- Indirect CM: When checked, this will display a list of Indirect Case Management services.
- Service List: This is a multi-select list from which the user may choose all of the services rendered during a particular contact event.
- Selection Arrows: By using these arrows a user may move selected services from the list box to the Selected Services box, and vice versa.
- Selected Service(s): This box displays the services that are selected for a particular contact event. It displays both a description of the service provided and the type (Direct CM, Indirect CM) of service.

4 – Buttons

- Services Summary – This button will retrieve the Services Summary Window (shown below)


Services Summary
Include Invalid Services
From: 07/02/2012
To: 07/02/2013
Retrieve
Service(s) for: TEA CUP
Prime#:
Print date: 07/02/2013
Report period: 07/02/2012 To 07/02/2013
Created by: hstrng4
Created on: 07/02/2013 11:04:07
Service(s) on: 07/01/2013
Performed by: MF TRAINING ID, MF TRAININ
Branch: 3013
Service(s) Invalidated: No
Invalidated by:
Invalidated on:
Direct CM
Indirect CM
Service Plan Monitoring
Print
Close

Tabs in the Financial Section of the Oregon ACCESS case

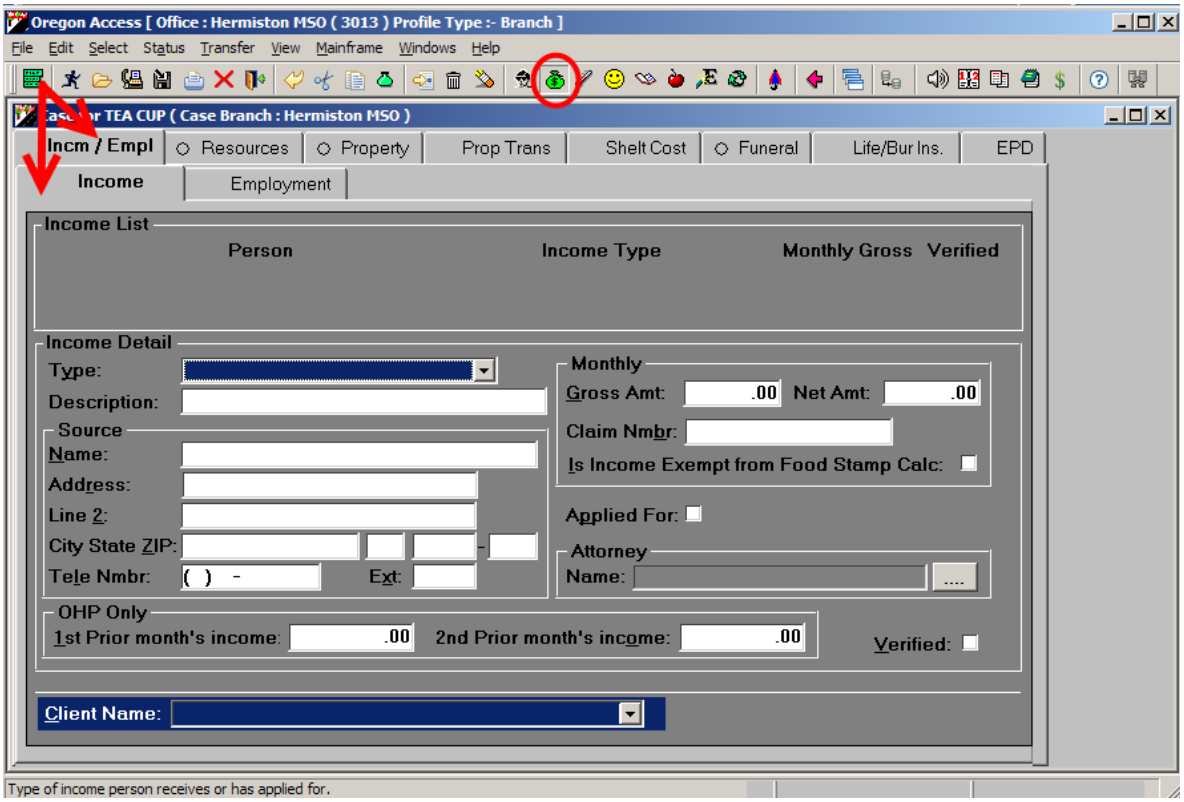
Financial information regarding the people on the case is entered in this section. This section contains information on both unearned and earned income. It also stores information on allowable costs, client burial plans and insurance, and some information specific to the Employed Persons with Disabilities program.

Income/Employment Tab

This tab has two sub tabs, Income and Employment.

Income Sub Tab

This section shows all of the income that has been added to the case. Unearned income is entered directly on this tab. Income information relating to Present Employment, Rental Income or Income from Sale of Property needs to be modified on the appropriate screens, NOT on the Income screen.



1 – Income List

This section shows all of the income that has been added to the case. Income information relating to Present Employment, Rental Income or Income from Sale of Property needs to be modified on the appropriate screens, NOT on the Income screen.

2 – Income Detail

This section shows the detailed information that has been entered for each record in the List area. This area has several sections:

A. Type
B. Source
C. Monthly
D. Attorney
E. OHP Only

A – Type

- Type: Use the drop down list to indicate the type of income that the individual is receiving.

- Description: This is a limited text field to add a description of the income if appropriate.

B – Source
- Name: Enter the name of the individual, company or agency that the individual is receiving income from.
- Address: Enter the complete address of the individual, company or agency that the individual is receiving income from.
- Tele Nbr: Enter the telephone number of the individual, company or agency that the individual is receiving income from.

C – Monthly
- Gross Amt: Enter the gross amount of income received.
- Net Amt: Enter the net amount of income received.
- Claim Nmbr: Enter the number the individual is drawing the claim off of. *The Social Security Claim Number, as well as the applicable letter designation, must be entered here before using integration. In integration when entering the Needs/Resource the Claim Number will be identified as the "Provider/Benefit" number.*
- Is Income Exempt from FS Calc? Use the checkbox to indicate "Yes" or "No".
- Applied For: Use the checkbox to indicate that the individual has applied for, but is not yet receiving the income.
- Versa Button: This area is obsolete; field staff no longer has access to Versa.

D – Attorney
- "...." Button: Clicking this button will open up the Attorney window that allows the use to enter the attorneys name address and telephone number. When annuity, dividends, interest, trusts, inheritance, or other retirement or pension is selected, the information will print on the SDS 647 (Real and Personal Property).

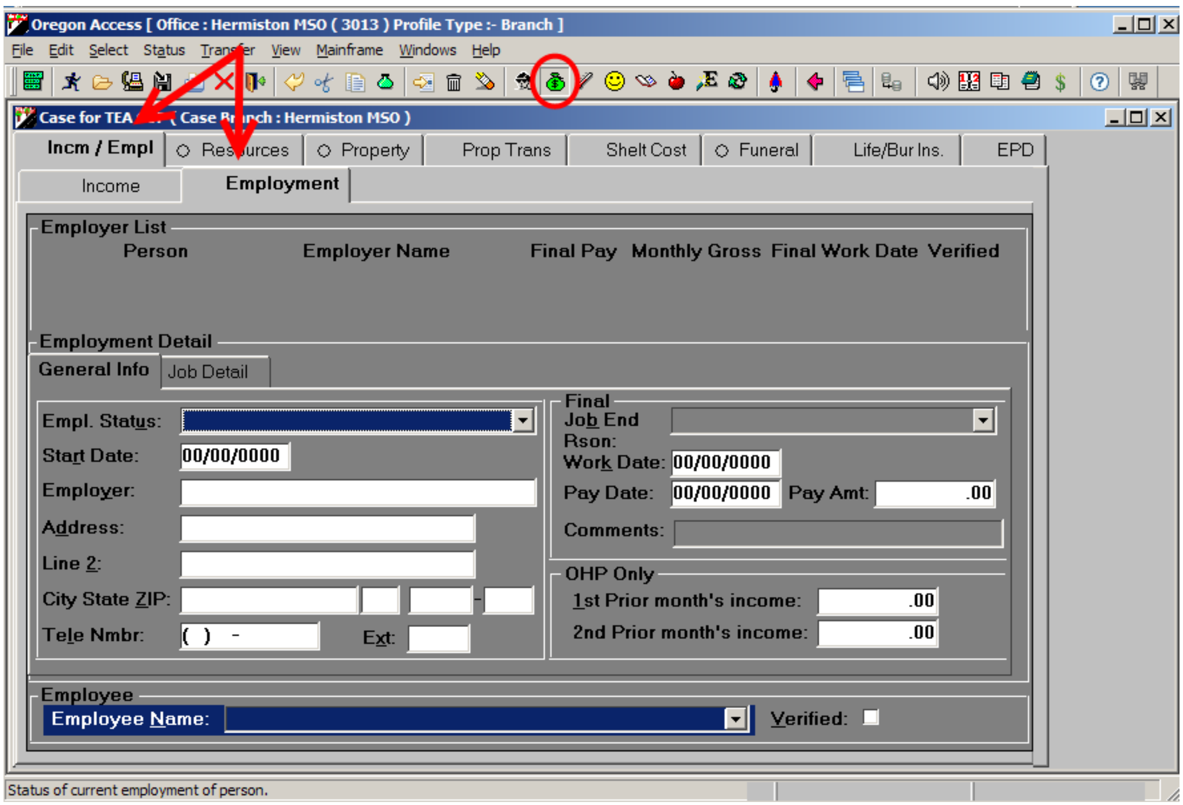
E – OHP Only - This section is obsolete

3 – Client Name

Use the drop down to indicate the individual that is receiving the income. Only individuals attached to the case will be available on this list.

Employment Sub Tab

This area is used to enter information regarding an individual's employment status. The Employment sub tab has two sub tabs of its own: General Info and Job Detail. This information will be reflected on the SDS708. Any employment record that is entered with an Employment Status of "Employed" will be recorded on this screen, but will appear in the Income Tab as "Present Employment" in the list.



1 – Employer List

This section will show a list of all employment records by the individual employed and the employer.

2 – Employment Detail

There are two sub tabs located in this section: General Info and Job Detail.

General Info Sub-Tab

This section allows the user to the Employment Status, and specific information about the job. There are three sub sections:

A. General Info
B. Final
C. OHP Only

A – General Info

- Empl. Status: Use the drop down to indicate the status of in the individuals employment: Employed, Job Loss/Quit, Strike, Volunteer.
- Start Date: Enter the date the employment started.
- Address and Tele: Use these fields to enter the employers address and telephone numbers.

B – Final

This section is only used when the individual is no longer employed with the employer.

- Job End Rson: Use the drop down to indicate the reason the job ended.
- Work Date: Enter the last day worked in this date field.
- Pay Date: Enter the day the last pay was received in this date field.
- Pay Amt: Enter the amount of the last pay received.
- Comments: This is a very limited field used for comments about the ended job (60 characters).

C – OHP Only – This section is obsolete

Job Detail Sub-Tab

This section allows the user to the specific job duties and details. There are four sub sections:

A. Job Detail
B. Pay
C. EI (Obsolete)
D. Change

A – Job Detail

- Industry Type: Use the drop down to indicate the type of industry the individual is employed in.
- Job Type: Use the drop down to indicate the job type.

- Job Title: Use the droop down to indicate the job title the individual has.
- Job Duties: Use the text field to explain the job duties the individual is responsible to perform.

B – Pay

- Pay Type: Use the radio buttons to indicate whether the individual is paid on an hourly basis or is salaried.
- Frequency: Only enabled when the Pay Type of Salaried is used. Use the drop down to indicate how often the individual is paid. The following definitions apply to Frequency:
  - Every 2 Weeks (X 2.15) – Paid every two weeks.
  - Monthly (X 1) – Paid once a month.
  - Twice a Month (X 2) – Paid twice a month.
  - Weekly (X 4.3) – Paid once a week.
- Gross Amt: Only enabled when the Pay Type of Salaried is used. Use this field to indicate the Gross amount of income received each pay period.
- Net Amt: Only enabled when the Pay Type of Salaried is used. Use this field to indicate the Net amount of income received each pay period.
- Hrly/Wage: Only enabled when the Pay Type of Hourly is used. Enter the rate of pay per pay period. This will be either an hourly amount, or a set wage.
- Hrs/Week: Only enabled when the Pay Type of Hourly is used. Enter the number of hours worked per week.
- Is income exempt from FS Calc? Use the checkbox to indicate "Yes" or "No".

C – EI This section is obsolete.

D – Job Change

This section is used when there is a job change and can be used to show the individuals work history. To add details for a new job, select a Job Chg Reason and Date. Save the record and then select the New Detail button. The current detail will be moved to history and the screen will be cleared. Enter the new employment detail information.

Be careful when clearing the screen. If the record has not been saved, the system will clear the data from the Job Detail and General Info sub-tabs.

- Job Chg Rson: Use the drop down to indicate the reason the job changed.
- Job Chg Date: Enter the date that the job changed. When a reason is entered, the date will default to the current date, but may be edited.
- New Detail Button: After clicking on the Save icon, clicking the New Detail button will allow the user to enter any new job details. This is used primarily when there is advancement or change within the same company.
- View Summary: When new details are entered the user may view the old details by clicking the view summary button. This will open up a window to a report that may be printed. All of the job details will print on the SDS 708.

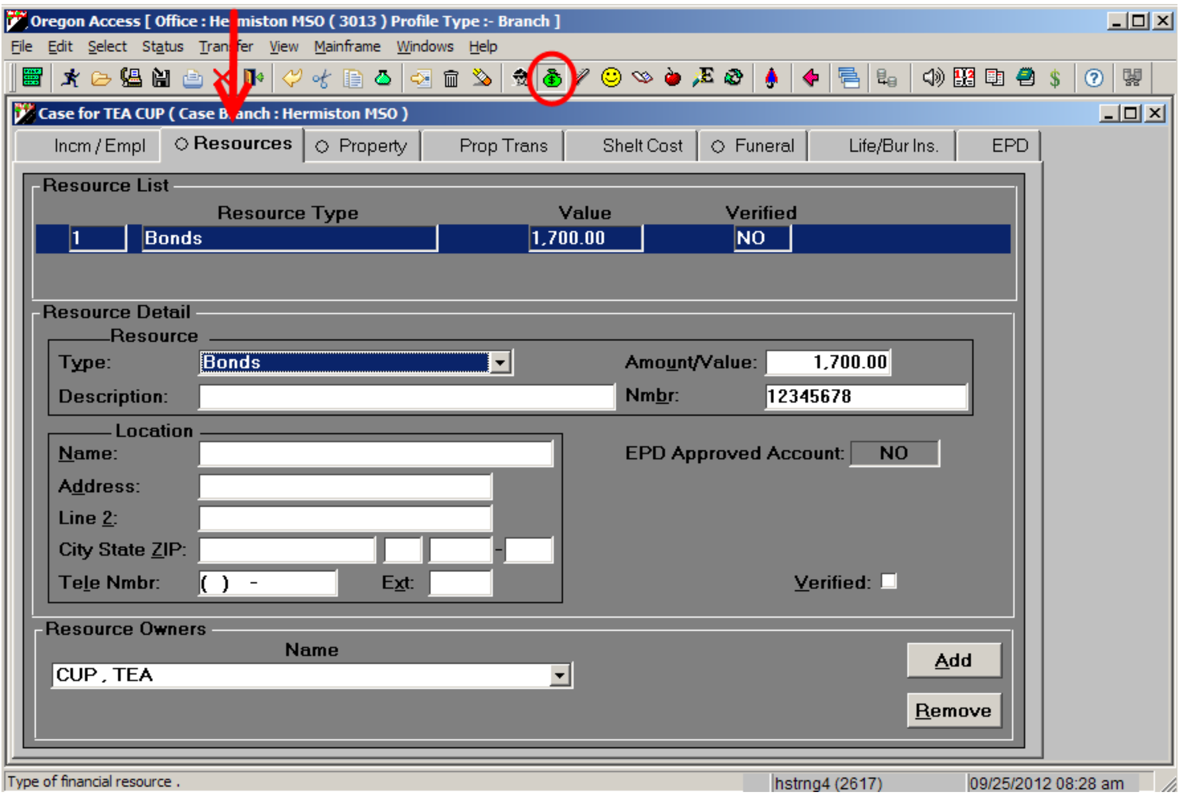
When there is a New Detail added, the job detail that was moved to history will be available to view using the View Summary button. This will only be enabled when there is a record in history.

3 – Employee

Use the drop down to select the individual that is employed.

Resources Tab

Use this area to enter information regarding an individual's resources. (Bank accounts, cash, stocks, etc).



1 – Resource List

This section will show all of the resources that have been entered into the tab.

2 – Resource Detail

This section shows all of the specific information entered about the selected resource.

- Type: Use the drop down to select the type of resource that the individual has.
- Description: use this limited text field to enter a description such as: Joint Account or any other information that would be needed.
- Amount/Value: Use this field to enter the amount or value of the resource.

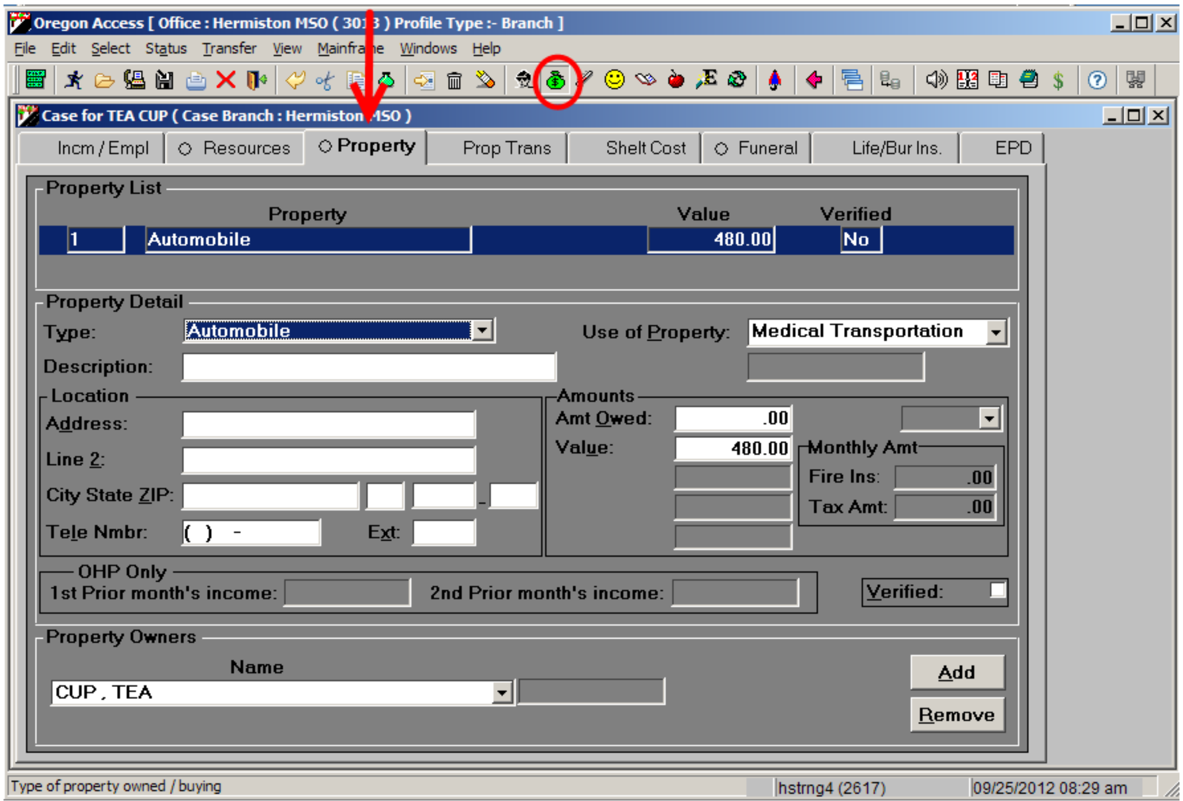
- Nmbr: Use this field to enter any account numbers or reference numbers for the resource.
- Name: Enter the name of the individual, financial institution or company that the resource is held with.
- Address/Tele: Enter the full address and telephone number of the individual, financial institution or company that the resource is held with.
- EPD Approved Account: This box is used to identify if this resource is being used as an EPD Approved Account. This information is entered into the EPD tab. If no approved account has been authorized, the box will show "No". If an account has been approved, the box will show "Yes". This field is not editable from this tab.

3 – Resource Owners

This drop down is used to identify the owner of the resource. Only individuals attached to the case will be shown in this list.

Property Tab

Use this area to enter information regarding an individual's ownership of real and personal property.



1 – Property List

This section shows all of the property that has been entered into the tab.

2 – Property Detail

- Type: Use the drop down to enter the type of property that the individual owns.
- Description: Use the limited text field to enter any description of the property that is relevant
- Use of Property: Use the drop down to enter how the property is used.
- Tax ID Nmbr: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Enter the tax identification number of the property if appropriate.

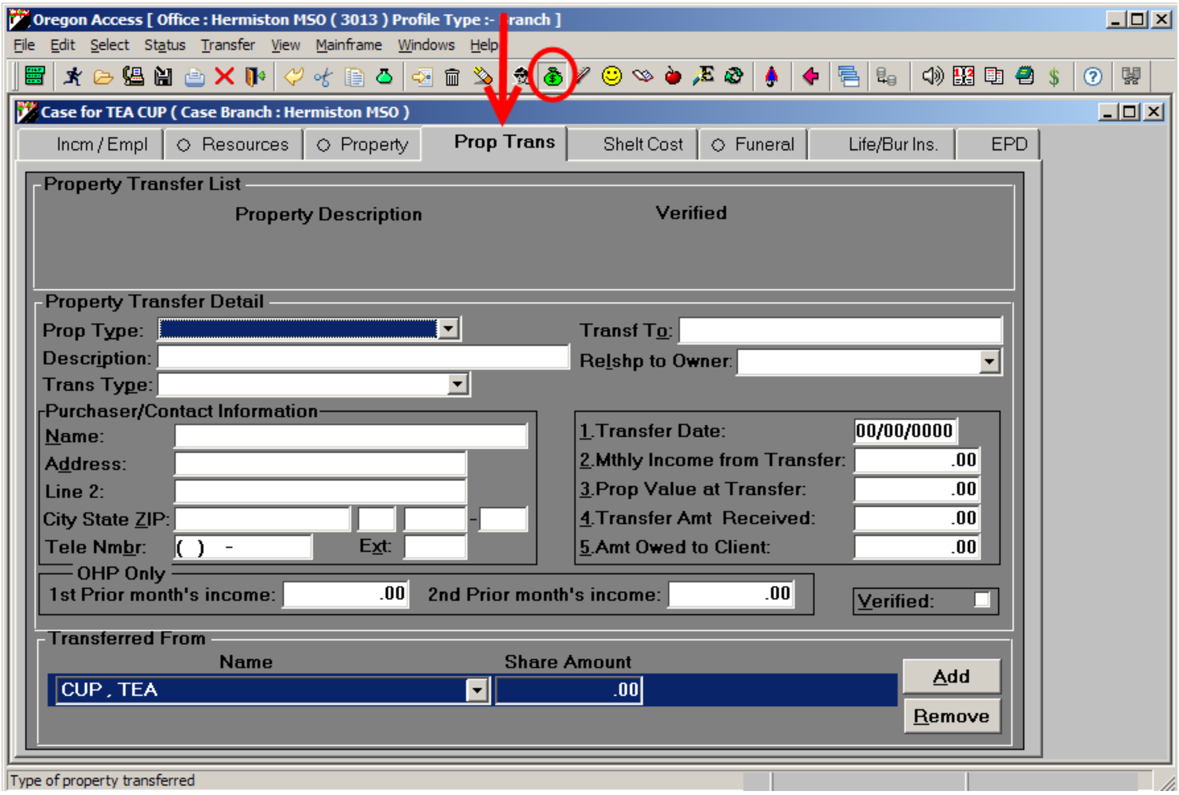
- <u>Address/Tele</u>: Enter the address and telephone number of the property, or where the property is stored.
- <u>Amt Owed</u>: Enter the amount still owed on the property.
- <u>Value</u>: Enter the value of the property.
- <u>Yrly Fire Ins</u>: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Enter the total yearly hazard insurance on the property.
- <u>Yrly Tax Amt</u>: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Enter the total yearly tax amount on the property.
- <u>Mthly Pymt</u>: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Enter the monthly payment that is made on the property.
- <u>Tax Type</u>: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Use the drop down to identify whether the taxes on the property are Current, Delinquent or Deferred.
- <u>Monthly Amount</u>: Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down. Enter the monthly payments made on the property.
- <u>1st Prior Months Income</u>: This field is obsolete.
- <u>2nd Prior Months Income</u>: This field is obsolete.

3 – Property Owners

- Name: Use the drop down to identify who the owner of the property. Only individuals attached to the case will show in this drop down.
- Share Amount: Enter the amount that the individual pays on the property. Only enabled when Income Producing or Primary Residence is chosen from the Use of Property drop down.

Property Transfer Tab

Use this area to enter information regarding an individual's transfer of assets.



1 – Property Transfer List

This area will show all of the property that the individual has transferred to other individuals.

2 – Property Transfer Detail

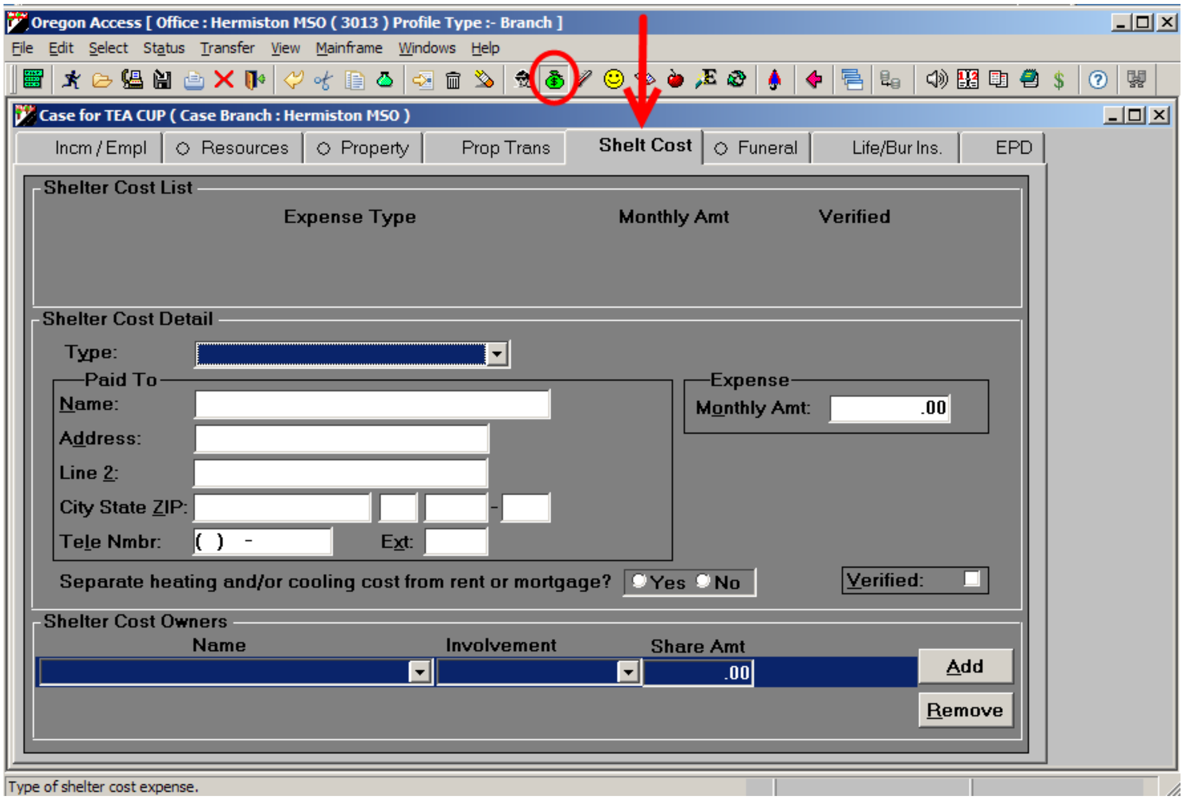
- Prop Type: Use the drop down to enter the type of property that was transferred.
- Description: Use the limited text field to enter a description of the property.
- Trans Type: Use the drop down to identify the type of transfer that was made.
- Transf To: Use the text field to enter the name of the individual that the property was transferred to.
- Relationship to Owner: Use the drop down to identify the relationship of the individual that the property was transferred to, to the individual that transferred the property.
- Purchaser Name: Enter the name of the individual that the property was transferred to.
- Address/Tele: Enter the address of the individual that the property was transferred to.
- Transfer Date: Enter the date that the property was transferred.
- Mthly Income from Transfer: Enter any monthly income that is being received from a property transfer. When an amount is entered here, this amount will auto fill the Share amount of the bottom of the screen.
- Prop Value at Transfer: Enter the value of the property at the time of transfer.
- Transfer Amt Received: Enter the amount of money received at the time of transfer.
- Amt Owed to Client: Enter the amount of money still owed to the individual.
- 1st Prior Months Income: Use this box to enter the income for the appropriate month.
- 2nd Prior Months Income: Use this box to enter the income for the appropriate month.

3 – Transferred From

- Name: Use the drop down to identify who transferred the property. Only individuals attached to the case will show in this drop down.
- Share Amount: This amount will auto fill with any amount entered in the Mthly Income from Transfer field.

Shelter Cost Tab

Use this screen to enter information regarding shelter costs such as rent and utilities.



1 – Shelter Cost List

This section will show all of the shelter costs that have been entered for the individual.

2 – Shelter Cost Detail

- Type: Use the drop down to select the type of shelter cost that the individual is paying.
- Paid To: Enter the name of the individual or company that the shelter cost is being paid to.
- Address/Tele: Enter the address of the individual or company that the shelter cost is being paid to.
- Monthly Amt: Enter the monthly amount of the shelter cost.
- Separate heating and/or cooling costs from rent or mortgage? This field will only be enabled when the Electric or Gas is selected from

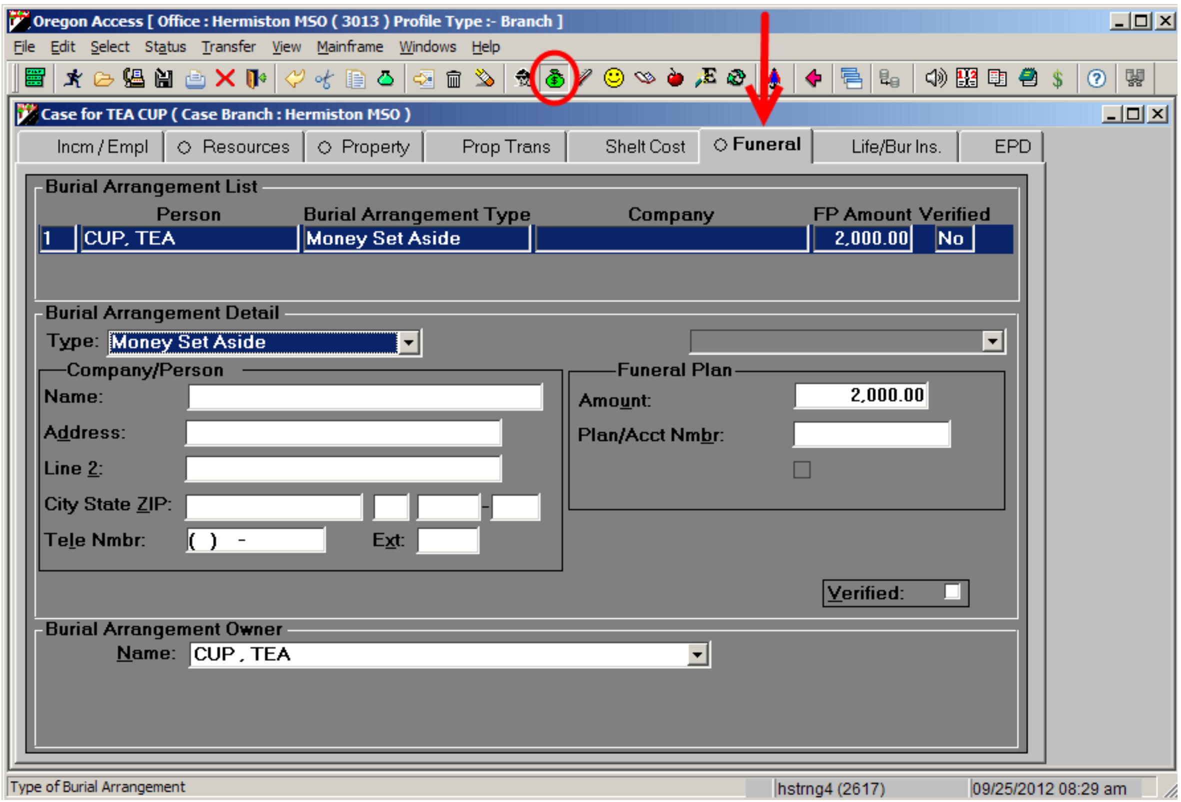
the Type drop down. When FUA or LUA is selected, this will auto fill to "Yes".

3 – Shelter Cost Owners

- Name: Use the drop down to select the individual who is responsible for the shelter cost.
- Involvement: Indicate if the individual is the Primary Payor or Other Payor of the shelter cost.
- Share Amt: This field will auto fill with the amount that the individual is responsible to pay. If there is more than one individual paying the amount, use the add button to add that individual. Only individuals attached to the case will be available in the drop down.

Funeral Tab

Use this area to enter information regarding an individual's funeral arrangements, burial space and will.



1 – Burial Arrangement List

This section shows all of the burial arrangements that have been entered in this tab.

2 – Burial Arrangements Detail

- Type: Use the drop down to select the type of burial arrangement the individual has.
- Name: Enter the name of the company or individual who holds the burial arrangement.
- Address/Tele: Enter the address and telephone number of the company or individual that holds the burial arrangement.
- Will Holder: Only when "Will" is selected as the type of burial arrangement, will this field will be enabled. Enter the name of the individual that is holding the will for the individual.

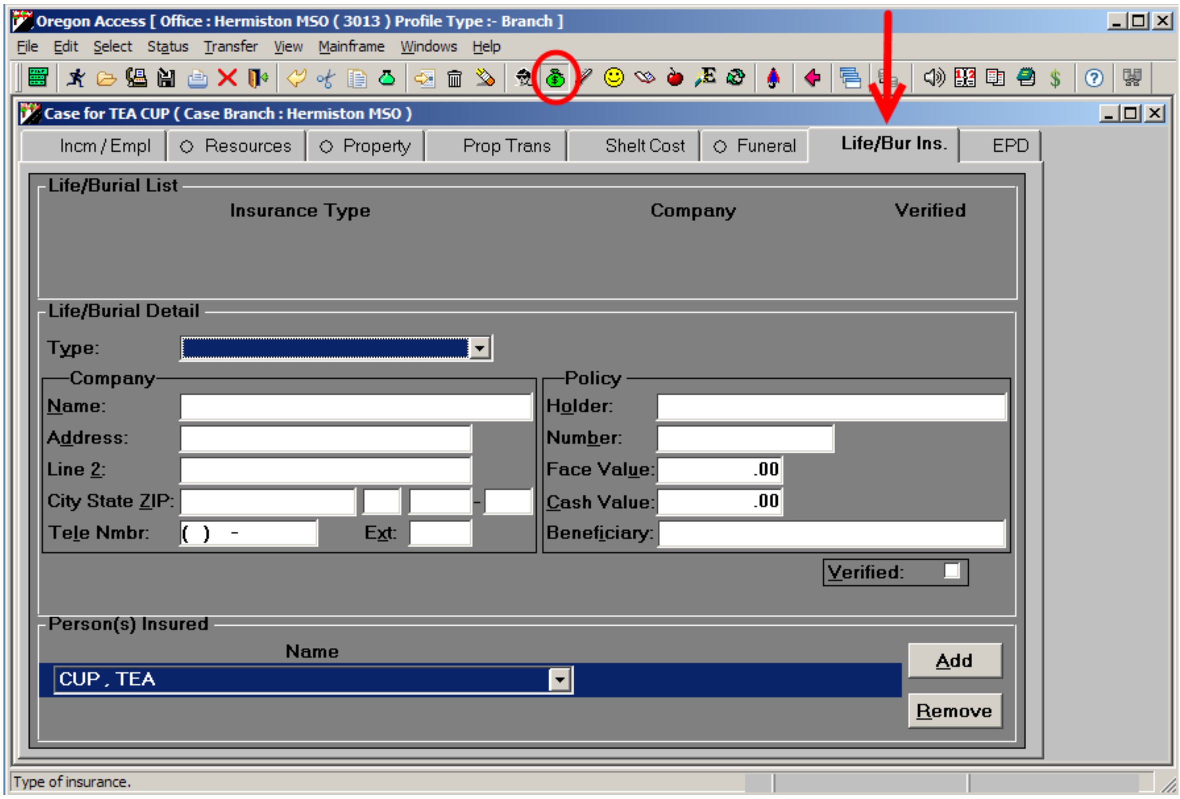
- Funeral Plan Amount: This field will not be enabled when "Will" is selected. Enter the amount of the funeral plan.
- Plan/Acct Nmbr: This field will not be enabled when "Will" is selected. Enter the plan number or account number of the burial arrangement.
- Is Plan Irrevocable? This field will not be enabled when "Will" is selected. Use the checkbox to indicate whether or not the plan is irrevocable.

3 – Burial Arrangement Owner

Use the drop down to indicate the owner of the burial arrangement. Only individual attached to the case will show in the drop down.

Life/Burial Insurance Tab

Use this area to enter information regarding an individual's life or burial insurance.



1 – Burial/Life List

This section shows a list of the burial or life insurance that has been entered into this tab.

2 – Burial/Life Detail

- Type: Use the drop down to select the type of insurance the individual has.
- Name: Enter the name of the company that holds the insurance.
- Address/Tele: Enter the address and telephone number of the company that holds the insurance.
- Holder: Enter the name of the individual who holds the insurance policy.
- Number: Enter the insurance policy number.
- Face Value: Enter the face value of the insurance policy.

- Cash Value: Enter the cash value of the insurance policy.
- Beneficiary: Enter the name of the beneficiary for the insurance policy.

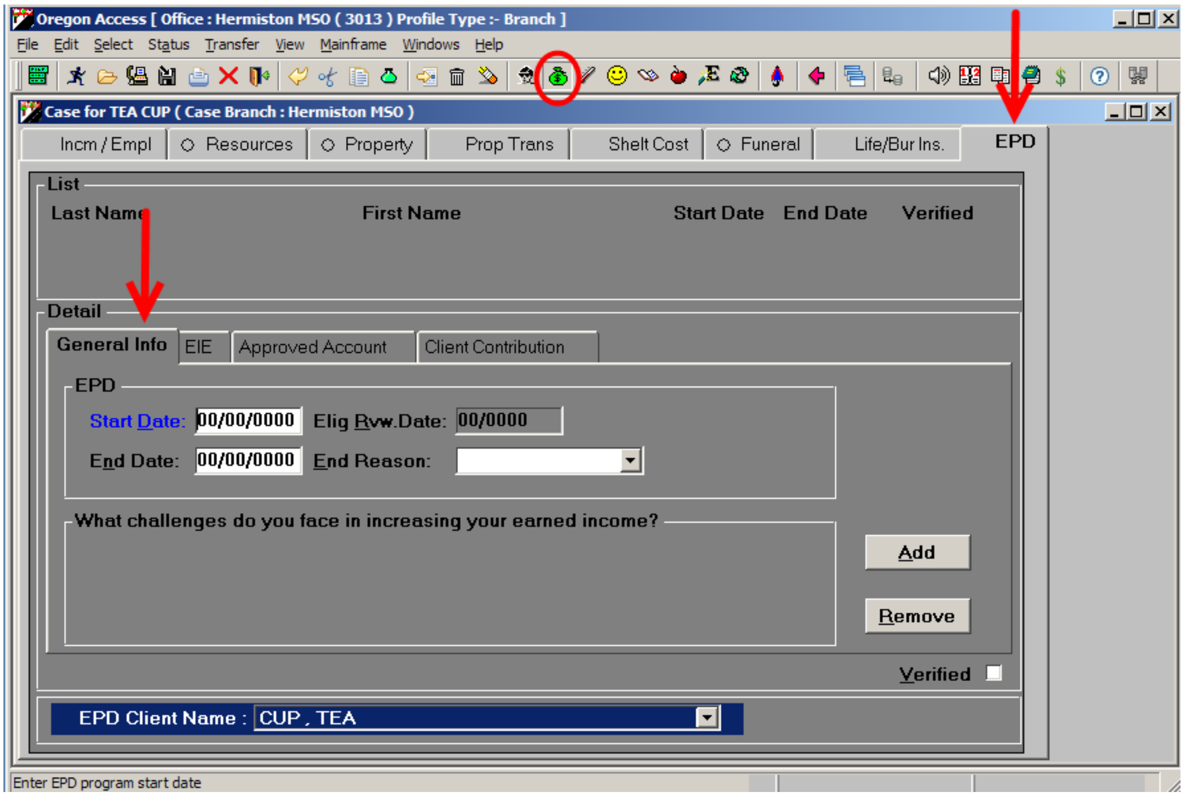
3 – Person(s) Insured

Use the drop down to indicate the individual that is insured. Only individual attached to the case will show in this list.

EPD

This tab consists of 4 subtabs

General Info Subtab



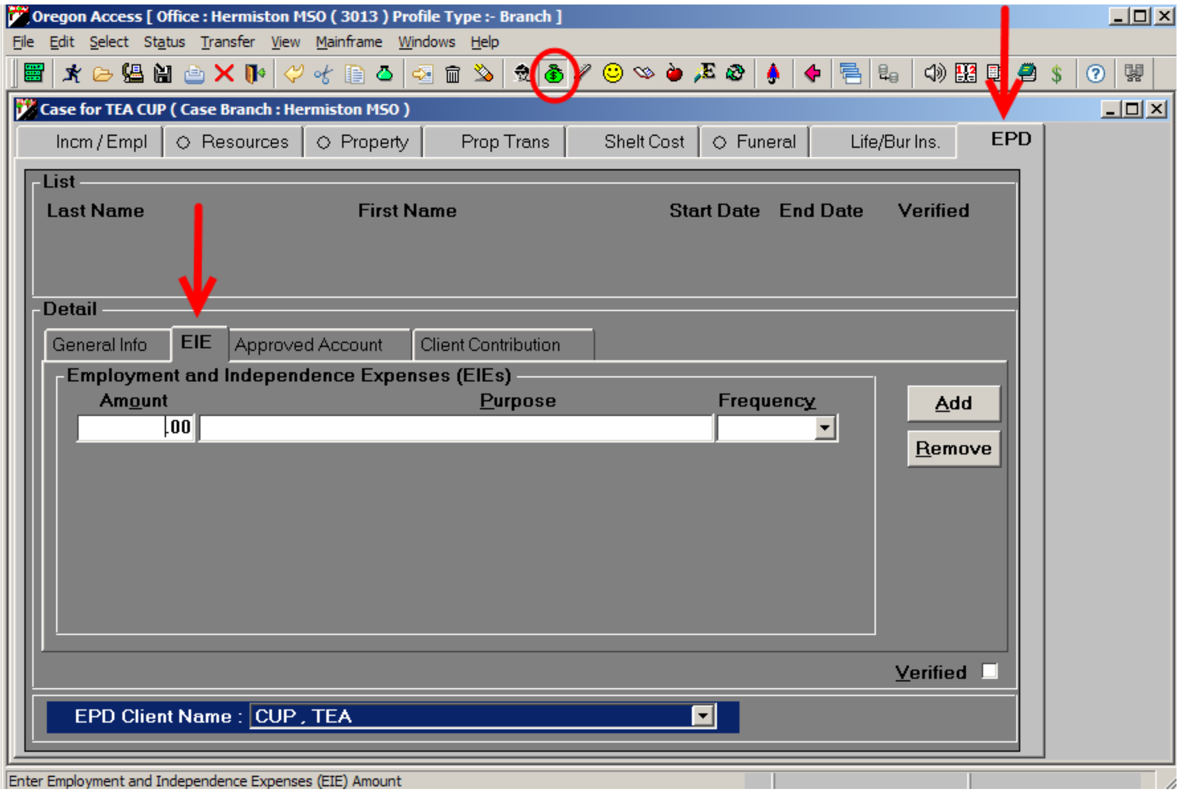
1 – EPD General Info List

This section shows all of the EPD records that have been entered into the case for the individual.

2 – EPD General Info Detail

- Start Date: Enter the date that the EPD eligibility starts.
- Elig Rvw Date: This date will auto fill to a one year review date. This date is not editable.
- End Date: Enter the date that the EPD ends. Only enter a date when the individual is no longer on the EPD program.
- End Reason: Use the drop down to indicate the reason that the EPD program ended.
- What challenges do you face in increasing your earned income? Use the drop down to indicate the challenges that the individual faces with employment and earning income.

EIE (Employment and Independence Expenses)Subtab



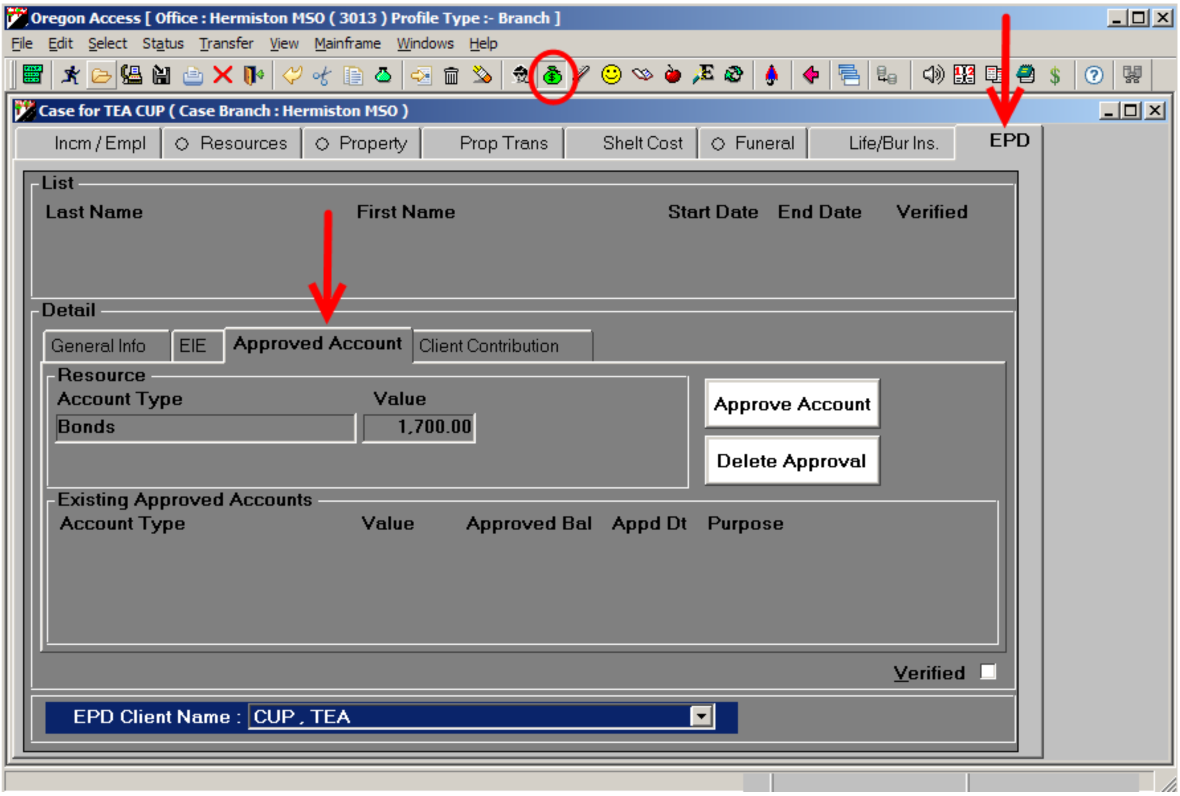
1 – EPD EIE List

This section shows all of the EPD records that have been entered into the case for the individual.

2 – EPD EIE Detail

- Amount: Enter the amount of the expense.
- Purpose: Enter the purpose of the expense.
- Frequency: Use the drop down to indicate the frequency of the expense.
    - Once – The expense was only paid once.
    - Monthly – The expense is paid once every month.
    - Variable – The expense is paid on an irregular or as needed basis.

Approved Account Subtab



1 – EPD Approved Account List

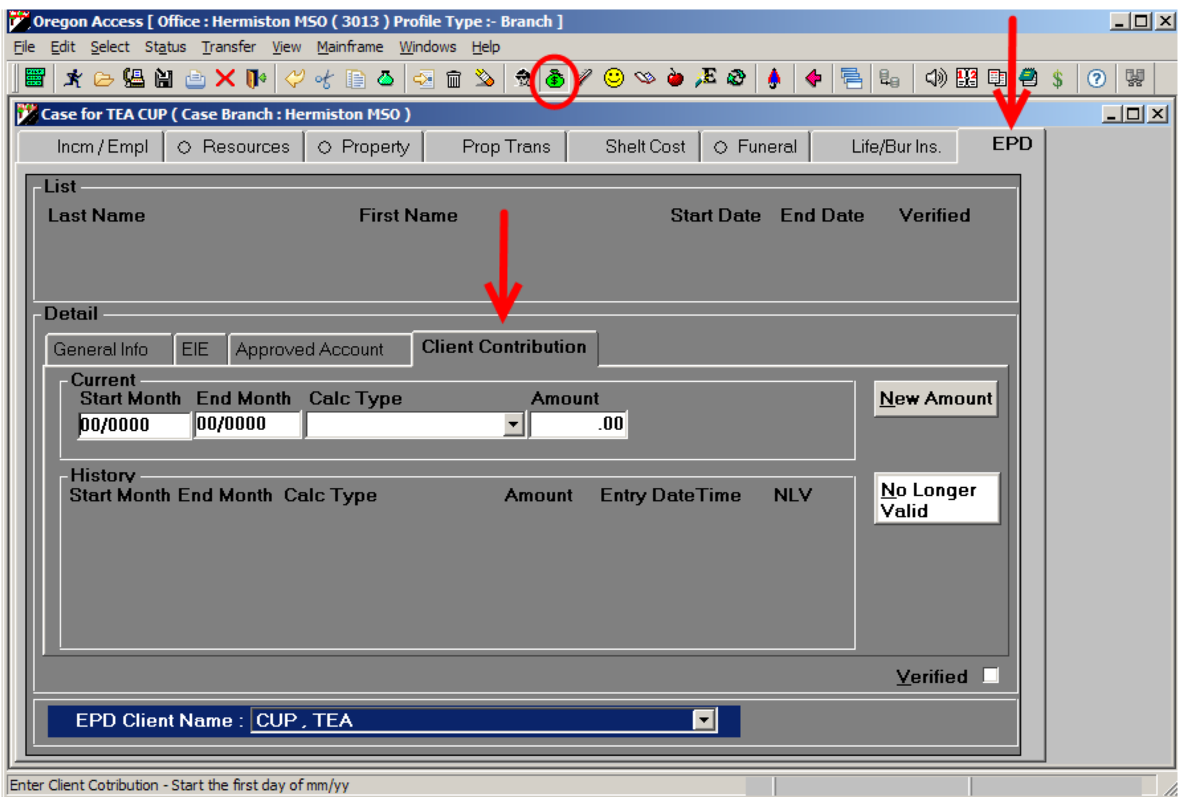
This section shows all of the EPD records that have been entered into the case for the individual.

2 – EPD Approved Account Detail

- Current - Account Type: This field is auto filled with the account information that has been entered into the Resource tab. This field is not editable from this tab.
- Current - Value: This field is auto filled with the account information that has been entered into the Resource tab. This field is not editable from this tab.
- Approve Account Button: Clicking this button will move the account information to the Existing Approved Accounts section, indicating that the account has been approved for the EPD program. This will also flag the account on the Resource tab as an approved account.
- Delete Account Button: Clicking this button will delete the selected approved account from the Existing Approved account section.

- Existing - Account Approved Type: This field is auto filled with the account information that has been entered into the Resource tab. This field is not editable from this tab.
- Existing - Value: This field is auto filled with the account information that has been entered into the Resource tab. This field is not editable from this tab.
- Existing - Approved Bal: Enter the balance that has been approved for the account.
- Existing - Approved Dt: Enter the date that the account was approved.
- Existing - Purpose: Use the limited text field to indicate the purpose of the approved account.

Client Contribution Subtab



1 – EPD Client Contribution List

This section shows all of the EPD records that have been entered into the case for the individual.

2 – EPD Client Contribution Detail

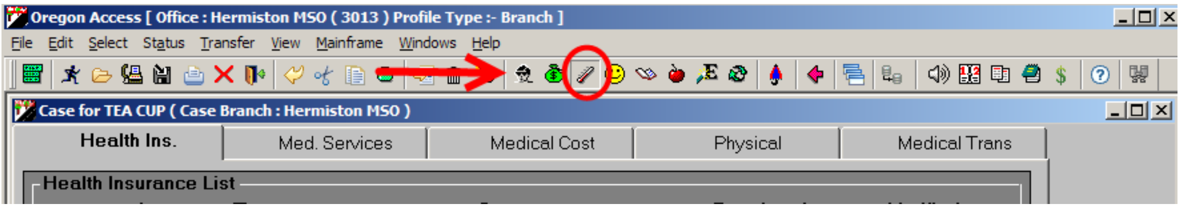
- Current - Start Month: Enter the month that the client contribution will start.
- Current - End Month: Enter the month that the client contribution ends. Only enter when it is no longer valid.
- Current - Calc Type: Use the drop down to indicate the type of contribution calculation that was done.
- Current - Amount: Enter the amount of the client contribution.
- New Amount Button: Clicking this button will move the current client contribution line to the History section.
- History – Start Month: This is auto filled with the start month of the client contribution that has been moved to history.
- End Month: This is auto filled with the end month of the client contribution that has been moved to history.
- Calc Type: This is auto filled with the calculation type used to determine the client contribution that has been moved to history.
- Amount: This is auto filled with the amount that
- Entry Data Time: This is auto filled with the date and time that the entry was made.
- NLV: This checkbox indicates that the corresponding client contribution line is no longer valid.
- No Longer Valid Button: Clicking this button will put a check mark in the NLV box in the History section.

3 – EPD Client Name

Use the drop down to indicate the individual that has been approved for the Employed Persons with Disabilities program.

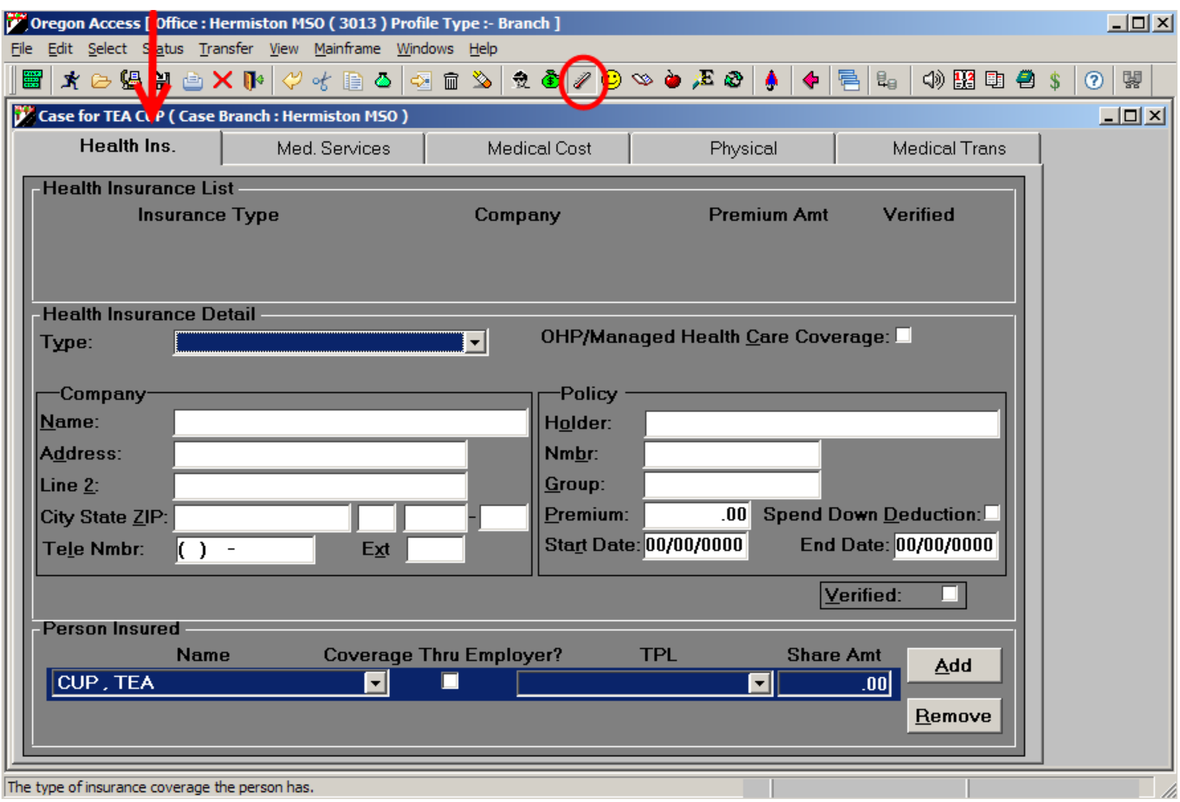
Tabs in the Medical Section of the Oregon ACCESS case

Health Insurance, medical costs, and information needed to complete the "Referral to the SSI Liaison" for Presumptive Title XIX clients is stored in this section.



Health Insurance Tab

Use this area to enter information regarding an individual's health insurance benefits. This Information prints on the SDS 415H and is used by Third Party Recovery (TPR) to determine if other resources are available to pay clients' medical bills. By checking the OHP/Managed Health Care Coverage check box the information will not print on the SDS 415H.



1 – Health Insurance List

This section shows all of the insurance that has been entered into the case for the individual.

2 – Health Insurance Detail

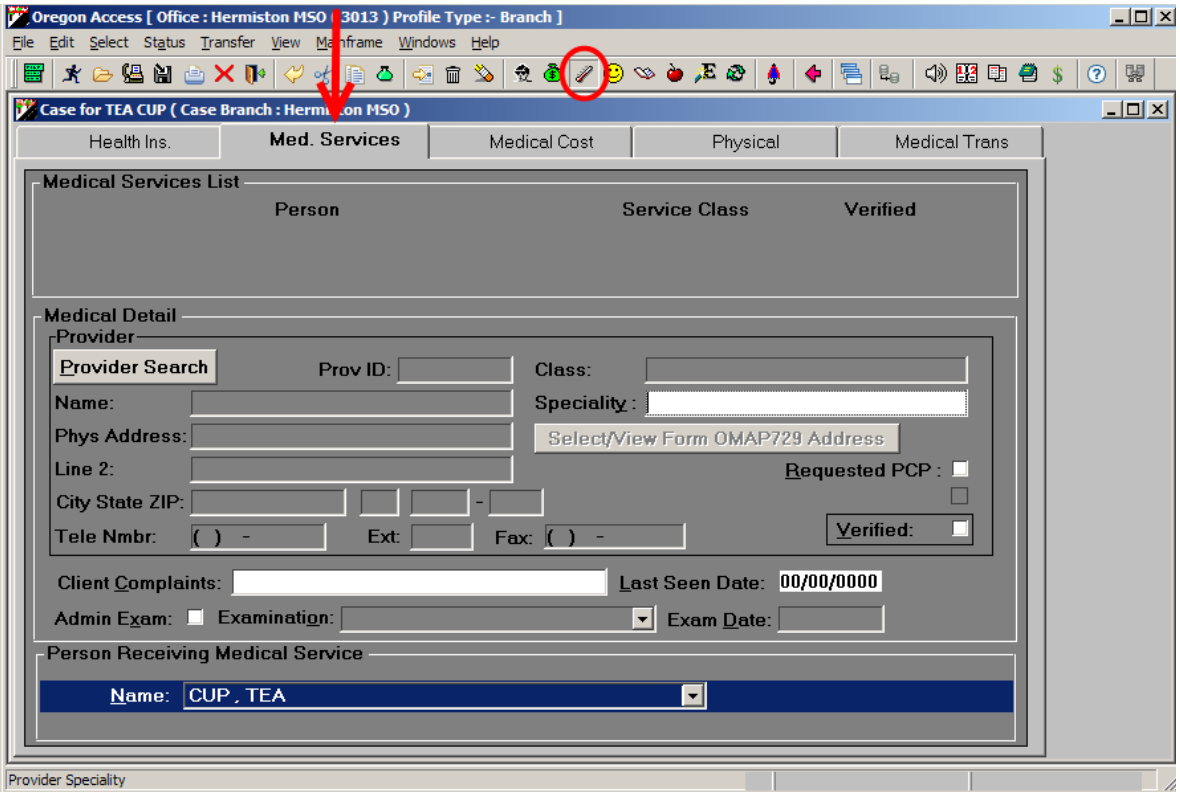
- Type: Use the drop down to indicate the type of health insurance the individual has.
- OHP/Managed Health Care Coverage: Use the checkbox to indicate that the insurance is OHP or Managed Health Care Coverage thru the Department.
- Medicare Part D Enrollment Assistance Offered: This checkbox will be enabled when any Medicare type insurance is selected. Check this box to indicate that Part D enrollment assistance was offered to the individual.
- Name: Enter the name of the agency or company that provides the insurance.
- Address/Tele: Enter the address and telephone number of the agency or company that provides the insurance.
- Holder: Enter the name of the insurance holder.
- Nmbr: Enter the insurance policy number.
- Group: Enter the insurance group number.
- Premium: Enter the amount of the premium the individual is responsible to pay.
- Start Date: Enter the start date of the insurance.
- End Date: Enter the end date of the insurance if it has ended.

3 – Person Insured

- Name: Use the drop down to indicate the individual receiving the insurance. Only individuals attached to the case will show in this list.
- Coverage Thru Employer? Use this checkbox to indicate if there is insurance coverage available through the employer.
- Share Amt: This field auto fills with the amount of the premium the individual is responsible to pay as entered in the Premium field.

Medical Services Tab

Use this section to enter information regarding an individual's medical services such as Provider information, Administrative Exams, Misc. Medical, etc.



1 - Medical Services List

This section shows all of the medical services that have been entered into the tab.

2 – Medical Services Detail

To enter a medical service into the tab, click the new record icon and then click on provider search.

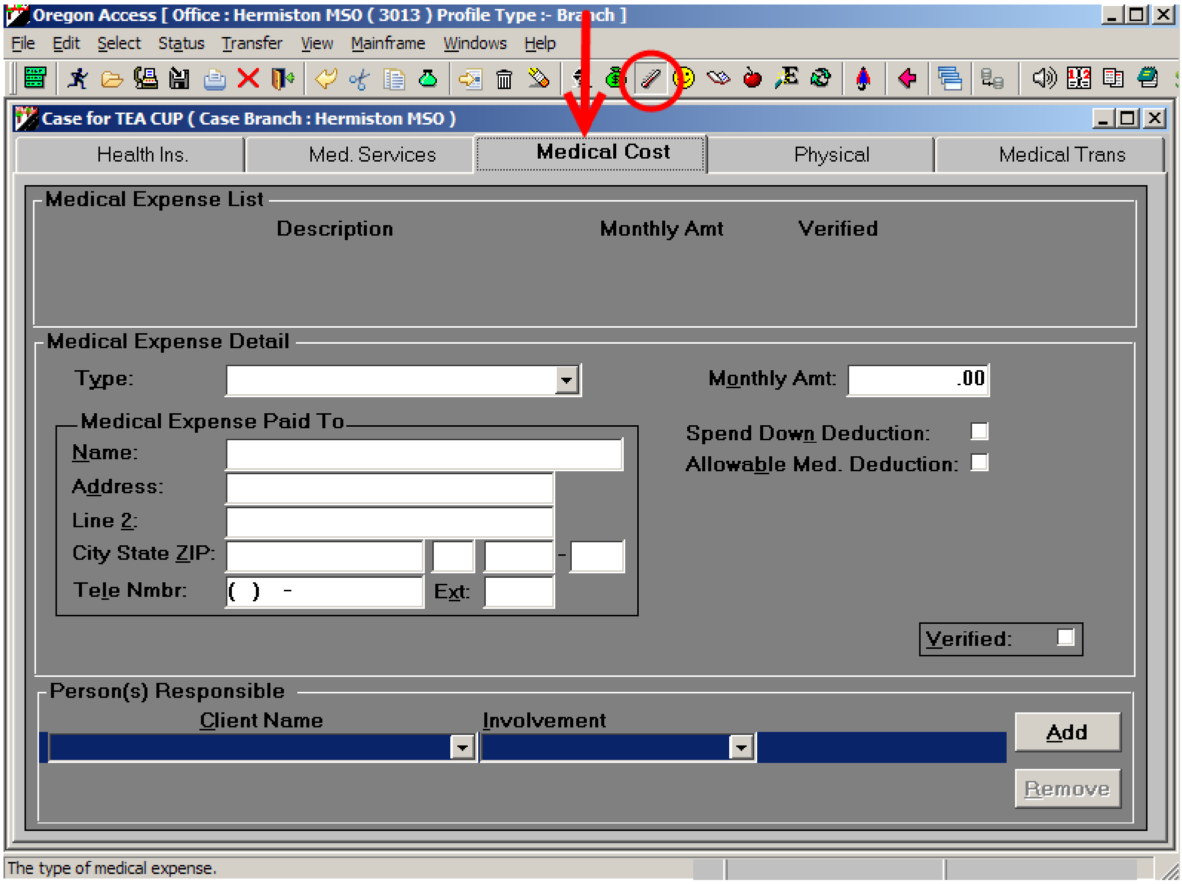
- Provider Search Button: Clicking this button opens the provider search window and allows the user to search for a specific medical provider. (See Provider Search Section).
- Prov ID: This field is auto filled with the selected medical provider's OMAP/MMIS provider number. This field is not editable.

- Class: This field is auto filled with the selected medical provider's class, such as physician, hospital, psychologist etc. This field is not editable.
- Name: This field is auto filled with the selected medical provider's name.
- Specialty: This is a limited text field in which to enter the medical provider's specialty.
- Address/Tele: These fields are auto filled with the selected medical provider's address and telephone number. These fields are not editable.
- Select/View Form 729 Address Button: Clicking this button will allow the user to view the selected medical provider's physical address and the address that the OMAP 729 will be mailed to.
- Requested PCP: Use this checkbox to indicate that the medical provider is the requested primary care physician.
- Current Patient: Use this checkbox to indicate that the individual is a current patient of the medical provider.
- Chief Complaints: This is a limited text field in which to enter the individual medical concerns. This information will print on the OMAP 729.
- Last Seen: Enter the date that the individual was last seen by the provider.
- Admin Exam: Use this checkbox to indicate that there is an administrative exam being done, or medical records being requested.
- Examination: Use the drop down to indicate medical records to be copied or the appropriate exam to be done for the individual.
- Exam Date: Enter the date of the exam if known.

3 – Person Receiving Medical Services
Use the drop down to indicate the individual receiving the medical service.

Medical Cost Tab

Use this area to enter information on allowable medical costs for items such as insurance premiums, deductibles, co-pays, prescription costs, medical bills, etc.



1 – Medical Expense List

This section will show all medical expensed that have been entered into this tab.

2 – Medical Expense Detail

- Type: Use the dropdown to enter the specific type of medical expense the individual has.
- Monthly Amt: Enter the monthly amount that the individual pays for the medical expense.

- Name: Enter the name of the business that the medical expense is paid to.
- Address/Tele: Enter the full address and telephone number of the business that the medical expense is paid to.
- Allowable Med Deduction: Use the checkbox to indicate whether or not the medical expense is an allowable deduction for medical programs or food stamps.

3 – Person(s) Responsible

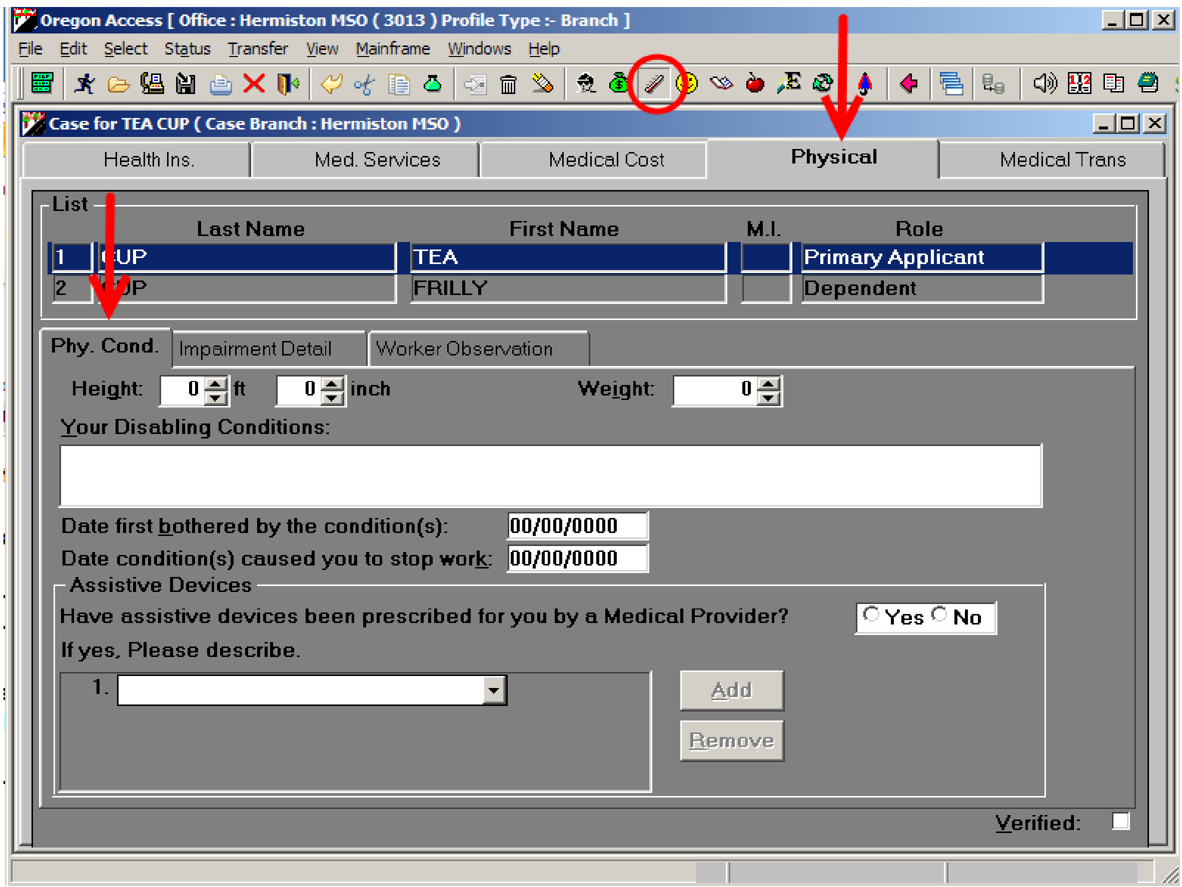
- Client Name: Use the drop down to indicate the individual responsible for the medical expense.
- Involvement: Use the drop down to indicate the individual's involvement in paying the medical expense.

Physical Tab

The information entered on this screen will be used to complete the SDS 708. This tab has three sub tabs.

Physical Condition Sub Tab

Use this sub tab to enter information regarding an individual's physical conditions.



1 – Physical List

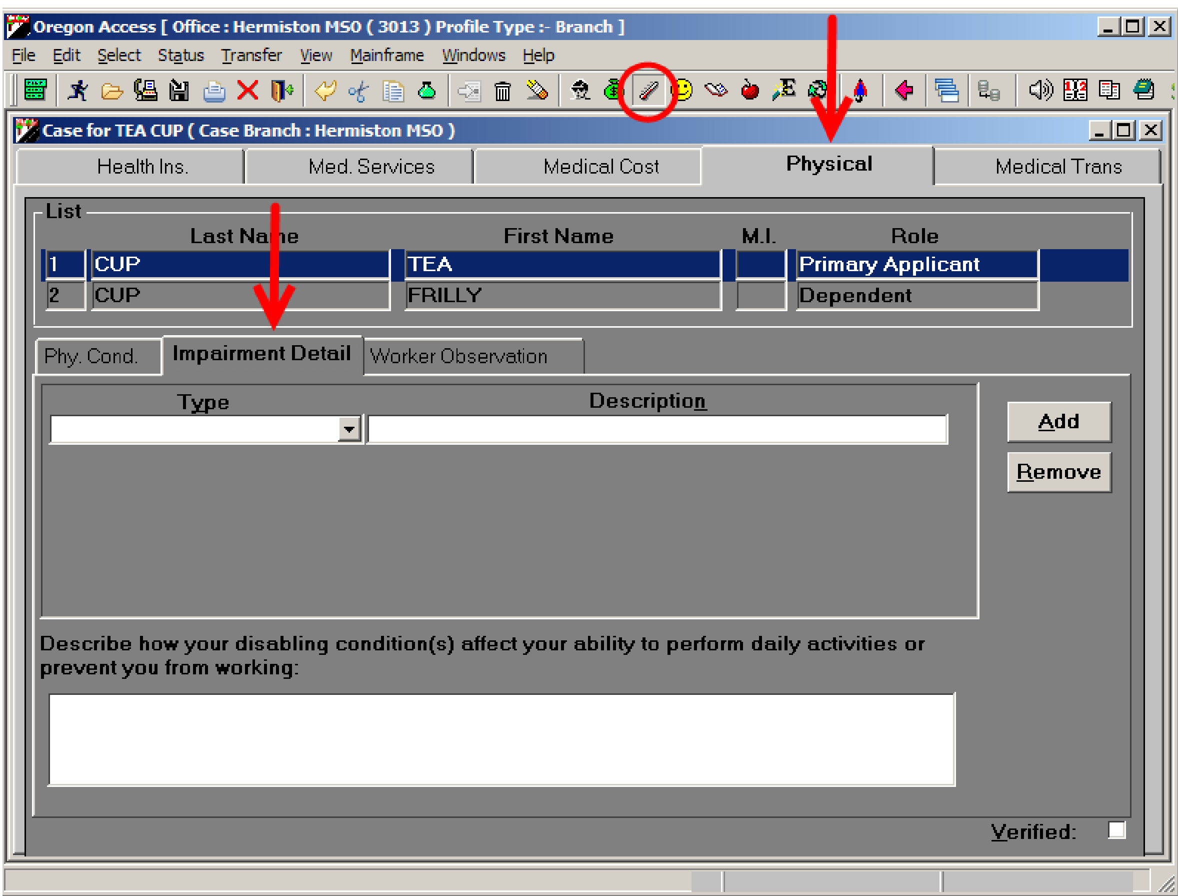
This section will show all of the individuals attached to the case.

2 – Physical Condition Detail

- Height: Enter the individual's height in feet and inches using the up or down arrows.

- Weight: Enter the individual's weight by typing the number in or using the up and down arrows.
- Your Disabling Conditions: Use this text field to enter the individuals disabling conditions.
- Date first bother by the condition(s): Enter the date that the individual was first bothered by their disabling condition.
- Date condition(s) caused you to stop work: Enter the date that the disabling conditions stopped the individual from working.
- Have assistive devices been prescribed to you by a medical provider? Use the radio buttons to indicate "Yes" or "No".
- If Yes, please describe: Use the drop down box to indicate what types of assistive devices have been prescribed.

Impairment Detail Sub Tab



1 – List

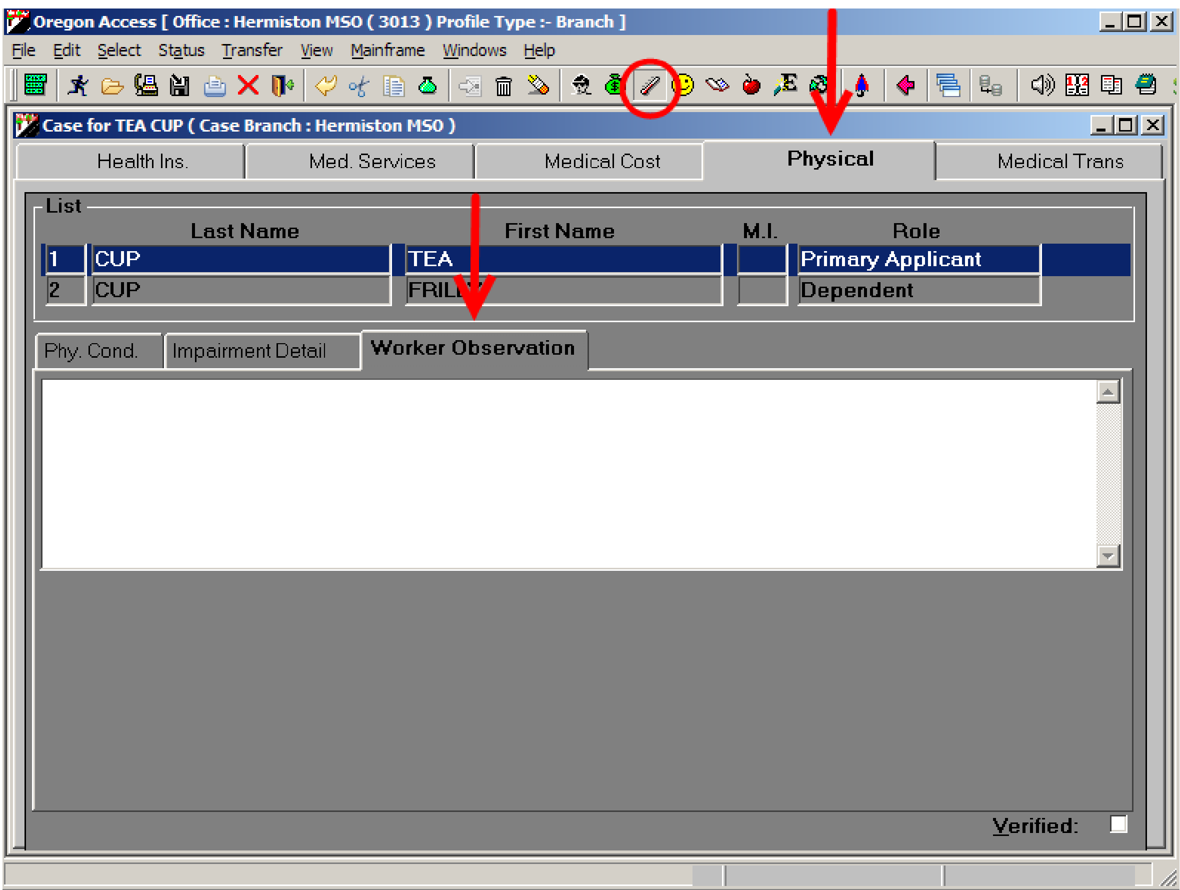
This section will show all of the individuals attached to the case.

2 – Impairment Detail

- Type: Use the drop down to select the type of impairment that the individual has. Only one of each type may be selected.
- Description: Use the text field to enter the specific descriptions of each impairment type.
- Describe how your disabling condition(s) affect your ability to perform daily activities or prevent you from working: Enter the individuals answer in their own words as to how the disabling conditions affect them.

Worker Observation Sub Tab

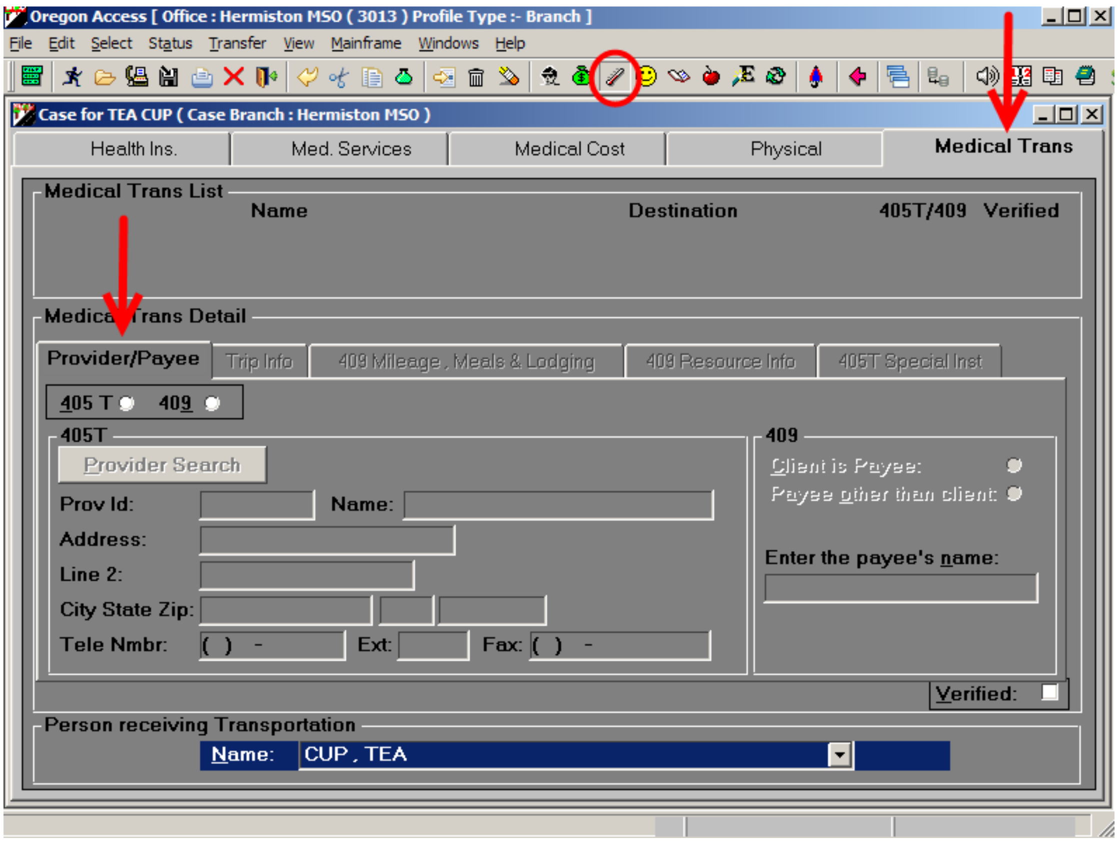
Use this text field to enter any observation with regards to the individual that were noted.



Medical Transportation Tab

This tab was used to enter details about Medical Transportation requests; however, it is no longer used as transportation brokerages now handle medical transportation and reimbursement. This tab consists of three subtabs.

Provider/Payee Sub Tab



1 – Medical Transportation List

This section will show all of the individuals attached to the case.

2 – Provider/Payee Detail

- <u>405T/409 radial button:</u> Use this section to indicate what form to generate. The 405T is used for payments to a transportation provider. The 409 is used for payments made directly to the client or the client's attendant.
- <u>405T Details:</u>
    - <u>Provider Search Button:</u> Initiates a search of the provider database.

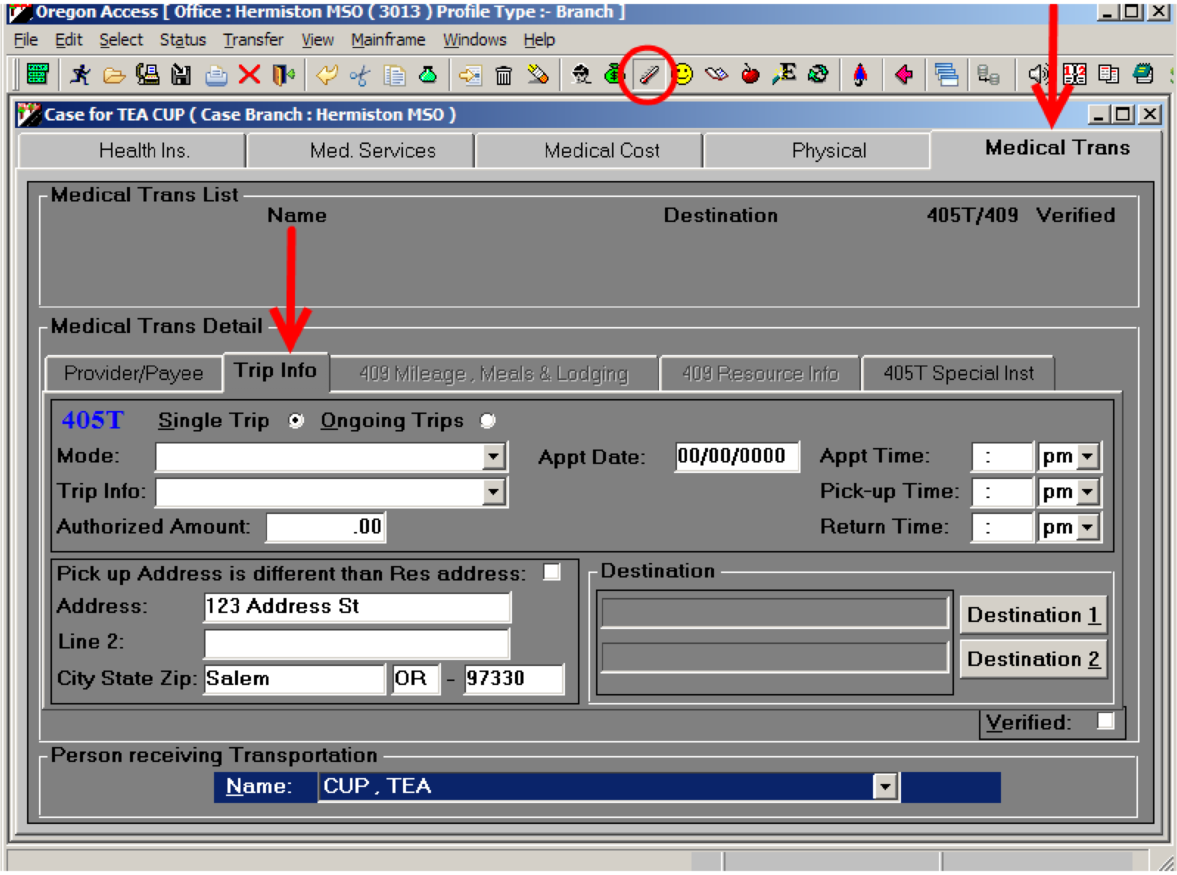
    - Provider Id: The selected transportation provider's provider number.
    - Name: The selected transportation provider's name.
    - Address: The selected transportation provider's Address
    - Line 2: Line 2 of the selected transportation provider's Address
    - City State ZIP: The City, State, and ZIP code of the selected transportation provider.
    - Tele Nmbr: The telephone number of the selected transportation provider.
    - Ext: The telephone extension of the selected transportation provider.
    - Fax: The fax number of the selected transportation provider.
- 409 Details
    - Client is Payee: Check to indicate that the client is the payee on the transportation payment
    - Payee other than client: Check to indicate that the payee for the transportation payment is someone other than the client.
    - Enter the payee's name: If the payee on the transportation payment is someone other than the client, enter the name of the payee here.

3 – Person receiving Transportation

Enter the name of the person on the case for whom the medical transportation is being authorized.

Trip Info Sub Tab

Use this tab to enter details about the trip being authorized.
Note that some fields will not be available for data entry if the 409 form is selected on the Provider/Payee sub tab.



1 – Medical Transportation List

This section will show all of the individuals attached to the case.

2 – Trip Info Detail

- Single Trip: Check to indicate a single trip is being authorized
- Ongoing Trips: Check to indicate that ongoing trips are being authorized.
- Mode: Use this field to indicate the mode of transportation being authorized
- Appt Date: Enter the date of the medical appointment
- Appt Time: Enter the time of the medical appointment
- Trip Info: Use this field to indicate if trip is one way, roundtrip, or other.
- Pick-up Time: Use this field to indicate what time the client is to be picked up for the appointment.
- Authorized Amount: Use this field to record the dollar amount authorized for the trip.
- Return Time: Use this field to indicate the time the client is to be picked up from the appointment.

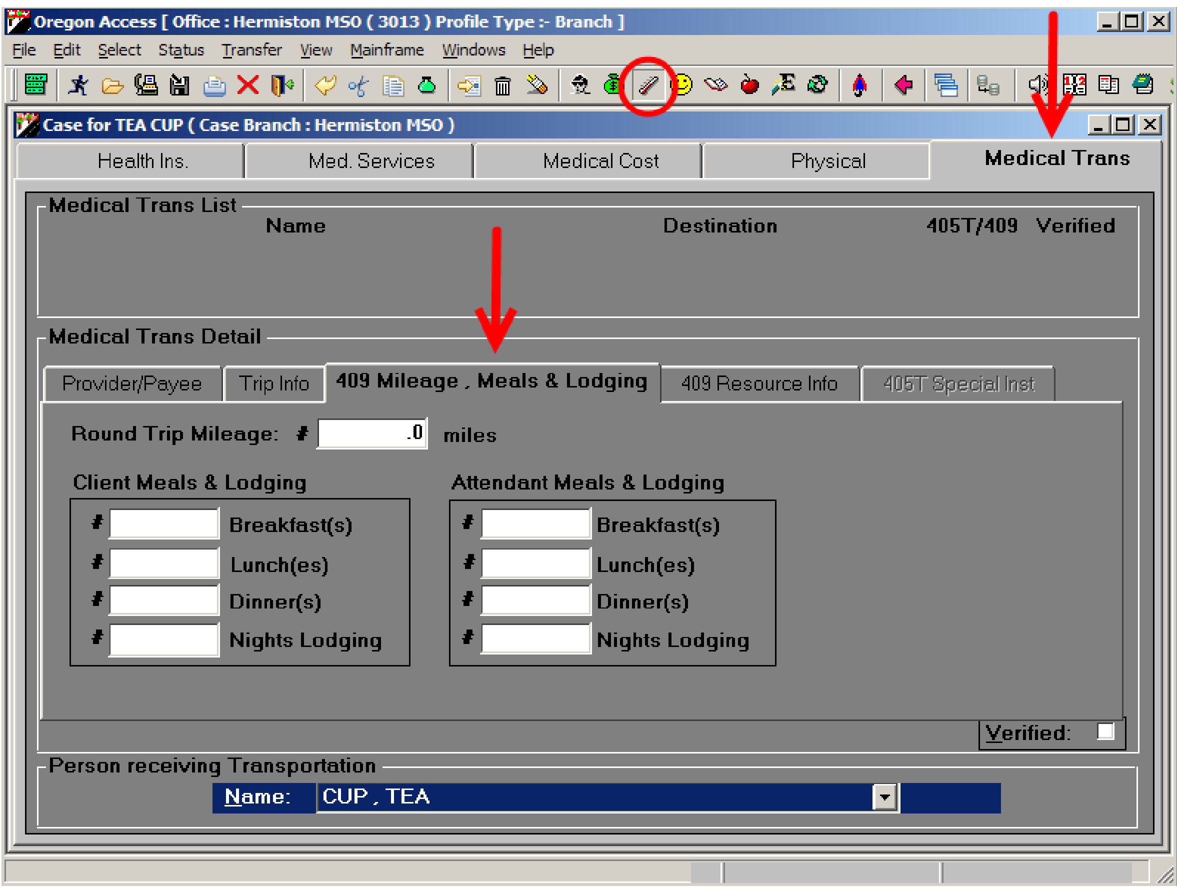
- Address, Line 2, City, State, ZIP: If the pick up address is different from the client address, enter it here.
- Destination: Click the Destination 1 and Destination 2 buttons to enter the trip destination(s).

3 – Person receiving Transportation

Enter the name of the person on the case for whom the medical transportation is being authorized.

409 Mileage, Meals & Lodging Sub Tab

Use this tab to enter the 409 Transportation Authorization details for mileage, meals and lodging.



1 – Medical Transportation List

This section will show all of the individuals attached to the case.

2 – 409 Mileage, Meals & Lodging Detail

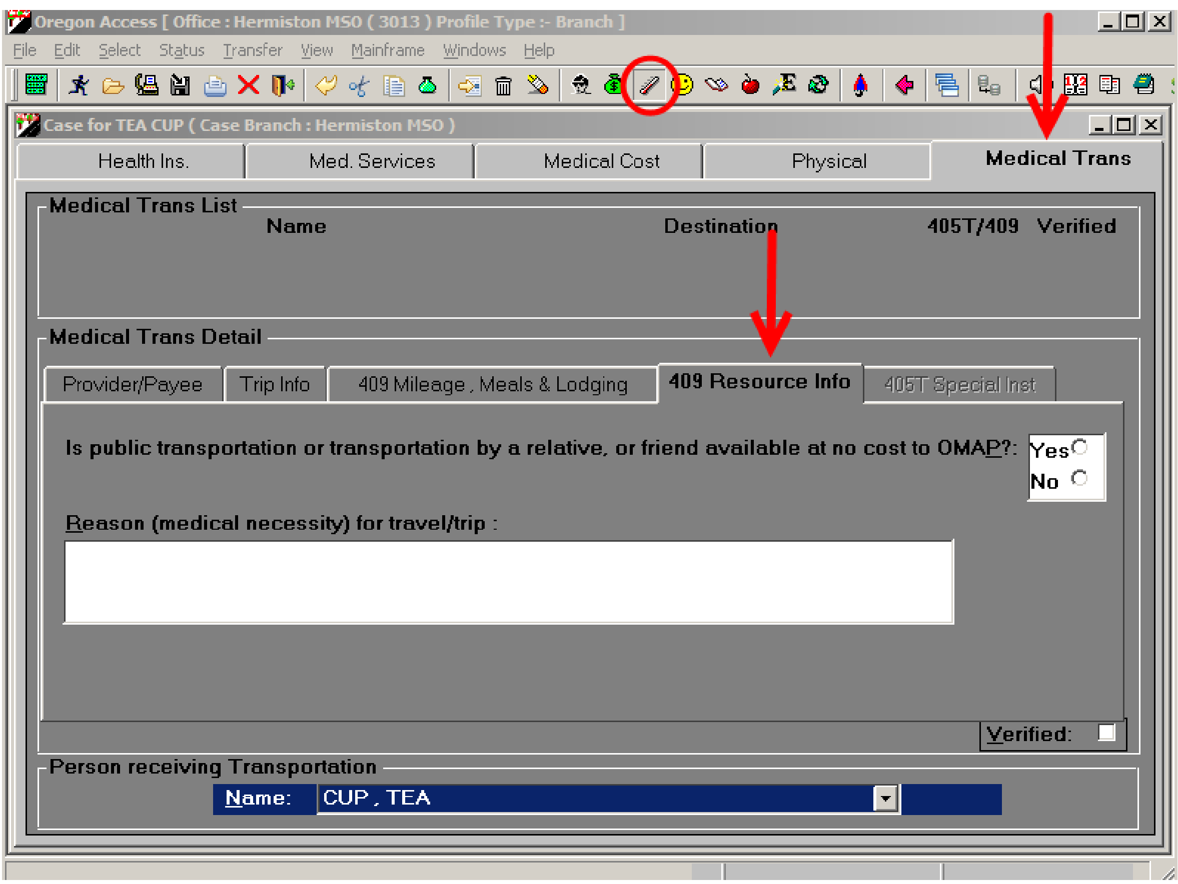
- Round Trip Mileage: Enter the number of mile authorized for the entire trip.
- Client Meals & Lodging: Enter the number of client meals and number of nights lodging authorized for the entire trip.
- Attendant Meals & Lodging: Enter the number of attendant meals and number of nights lodging authorized for the entire trip.

3 – Person receiving Transportation

Enter the name of the person on the case for whom the medical transportation is being authorized.

409 Resource Info Sub Tab

Use this tab to record information on other transportation resources available to the client. It is also used to record the reason for the trip.



1 – Medical Transportation List

This section will show all of the individuals attached to the case.

2 – 409 Resource Info Detail

- Is public transportation or transportation by a relative, or friend available at no cost to OMAP?: Indicate whether other transportation resources are available.
- Reason (medical necessity) for travel/trip: Enter the reason for which the trip is being authorized.

3 – Person receiving Transportation

Enter the name of the person on the case for whom the medical transportation is being authorized.

Tabs in the Service Needs Section of the Oregon ACCESS case

Use this section to record information about some institutional services, medical exceptional needs care coordinator referrals, and Older Americans Act data.

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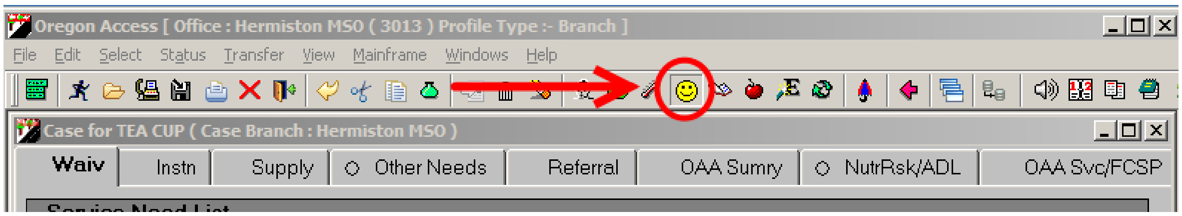
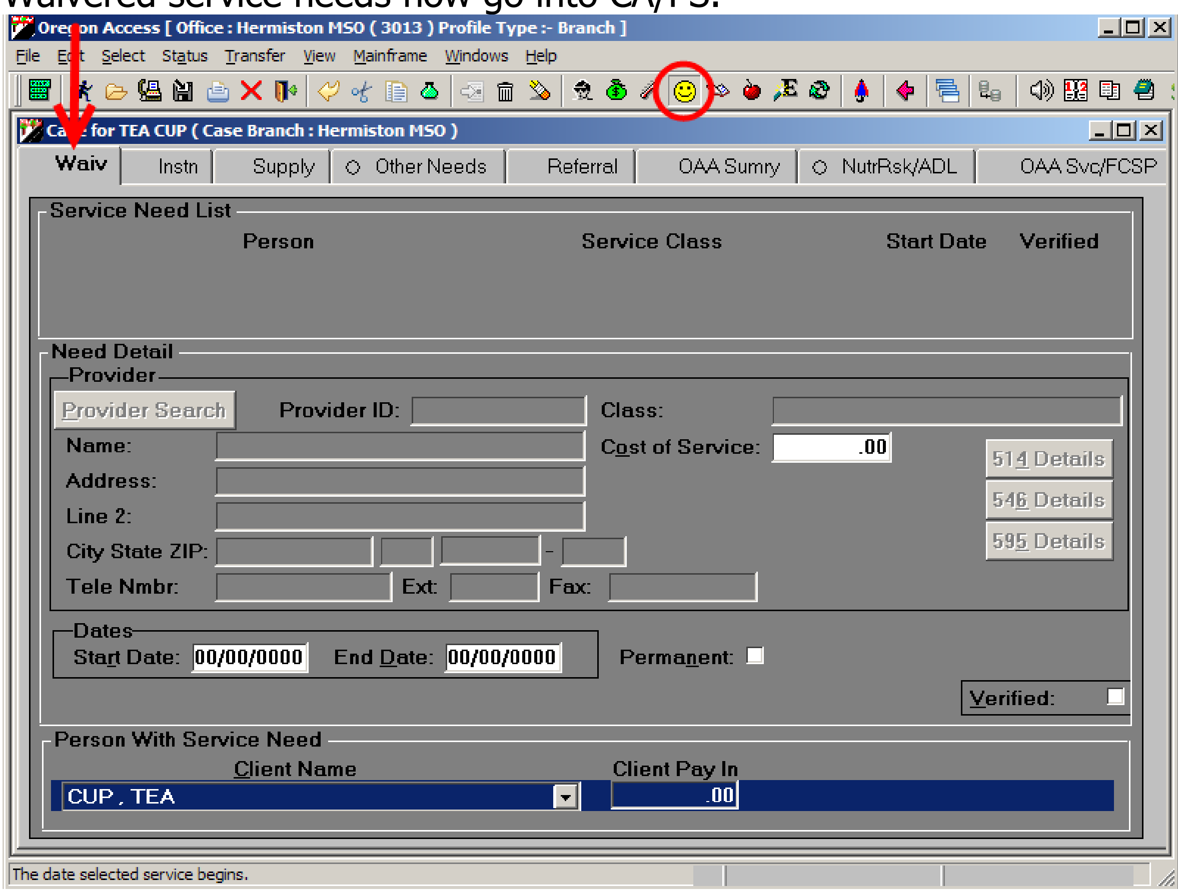


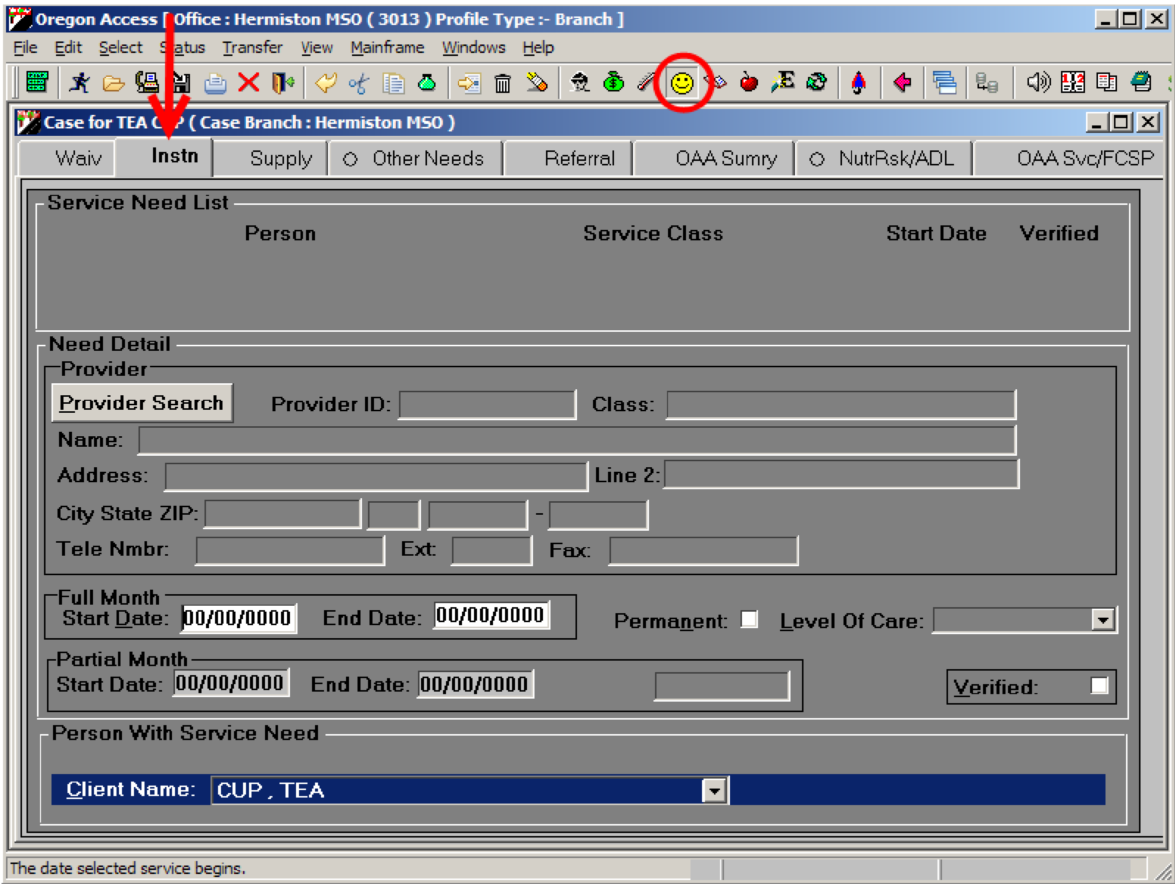
Waiver Tab

This tab is a view only tab and was supposed to be removed years ago. Use this area to view information regarding an individual's service needs. Waivered service needs now go into CA/PS.



Institutional Tab

Use this area to enter institution information that does not require an assessment within CA/PS. For example, institutional care based upon mental health would be entered here.



1 – Institutional Service Need List

This section will show a list of the service needs attached to the case.

2 – Institutional Need Detail

- Provider Search Button: Use this button to search for an institutional provider to add to the case. When the provider is selected, all of the related provider fields will populate from the provider database.
  - Provider ID: Provider ID
  - Class: The provider classification
  - Name: Provider name.
  - Address, Line 2, City, State, ZIP: The provider address.
  - Tele Nmbr, Ext: The provider telephone number and extension.
  - Fax: The provider fax number.

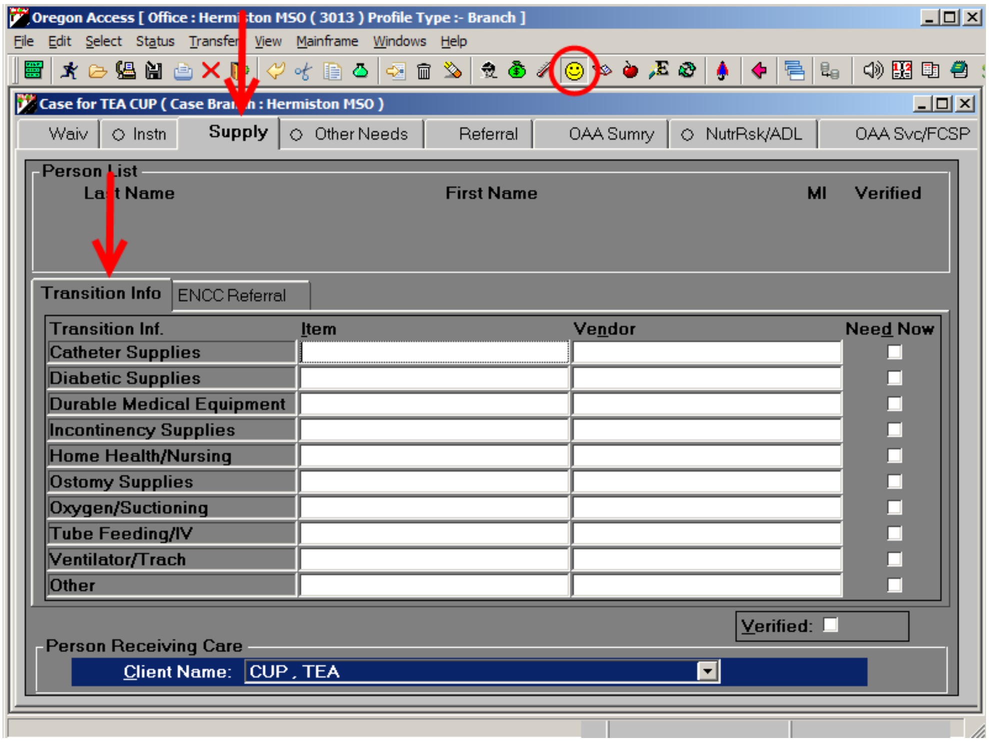
- Full Month: Use this section to enter the dates of full month institutional care.
- Permanent: Use this check box to indicate that the institutional placement is permanent.
- Level of Care: This field is disabled.
- Partial Month: Use this section to enter the dates of partial month placements.

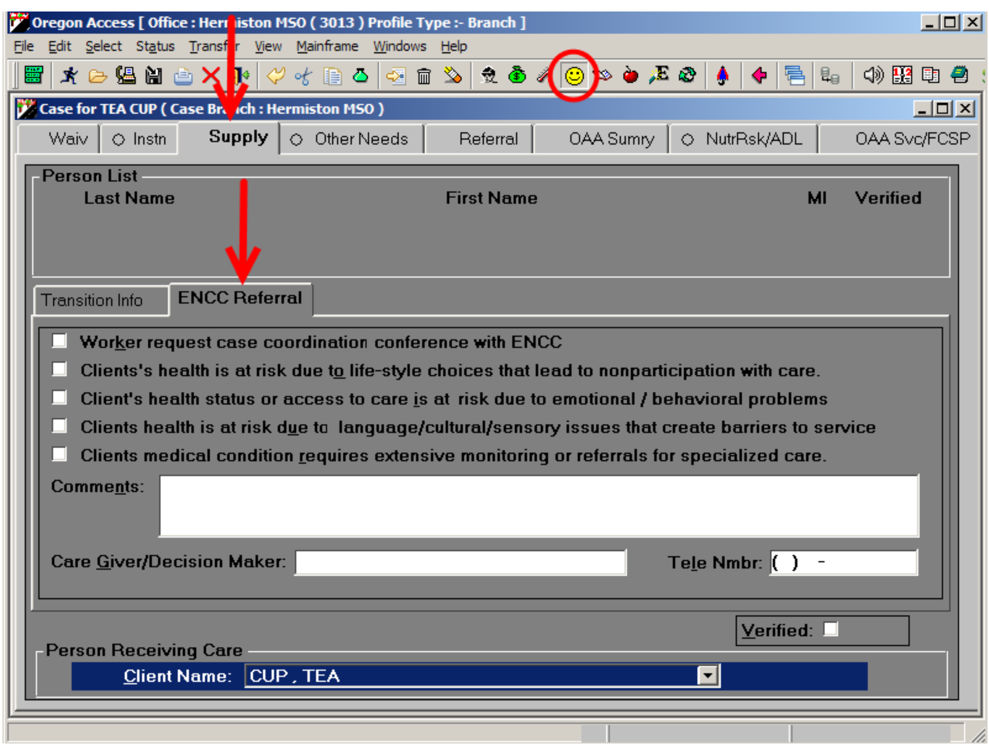
3 – Person with Service need

Enter the name of the person on the case with the service need described in the detail section of the screen.

Supply Tab

Use this area to enter information regarding an individual's supply and continuity of care needs. Information entered on this tab will be used to complete the OHP 7207.





1 – Person List

This section shows all of the individuals that have supply or ENCC information entered into this tab.

2 – Sub tabs

This section is broken into two sub tabs:

A. Transition Info
B. ENCC Referral

A – Transition Info

- Transition Inf: Shows a list of supply categories that the individual may have needs in.
- Item: A text field to enter the specific supply the individual needs in each category.
- Vendor: A text field to enter the vendor of the specific supply.
- Need Now: Use the checkbox to indicate whether or not the individual needs the supply now.

B – ENCC Referral

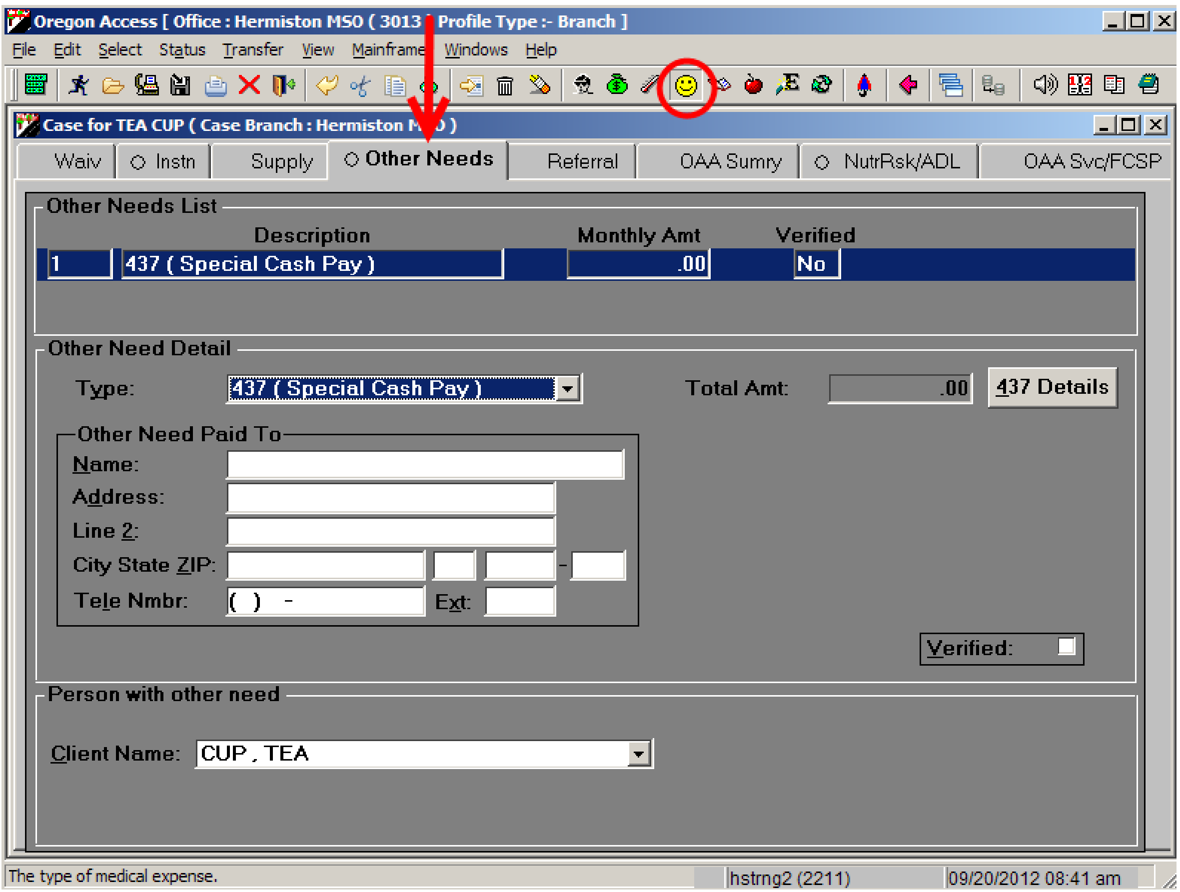
- Question List: Use the checkboxes to answer the questions on this sub tab.
- Comments: Use the text box to enter comments regarding the referral.
- Care Giver/Decision Maker: Enter the name of the care giver or the decision maker in the text box.
- Tele Nmbr: Enter the care giver or decision maker’s telephone number.

3 – Person Receiving Care

Use the drop down box to identify the individual that is receiving the care or referral.

Other Needs Tab

Use this area to enter information regarding an individual's "other" needs. Things that would be considered as allowable deductions may be found in this tab. This is also the area in which 437 Special Cash Pay requests may be entered. 437 entries will generate the 437 form.



1 – Other Needs List

This section shows any needs that the individual has had entered onto this tab.

2 – Other Need Detail

- Type: Use the drop down to identify the type of need the individual has.
- Monthly Amt: Enter the monthly amount of the need.
- 437 Details Button: When Special Cash Pay is selected as a type of need, the 437 button will be enabled. Clicking this button will open a

window where the user may enter details about the 437 being submitted.

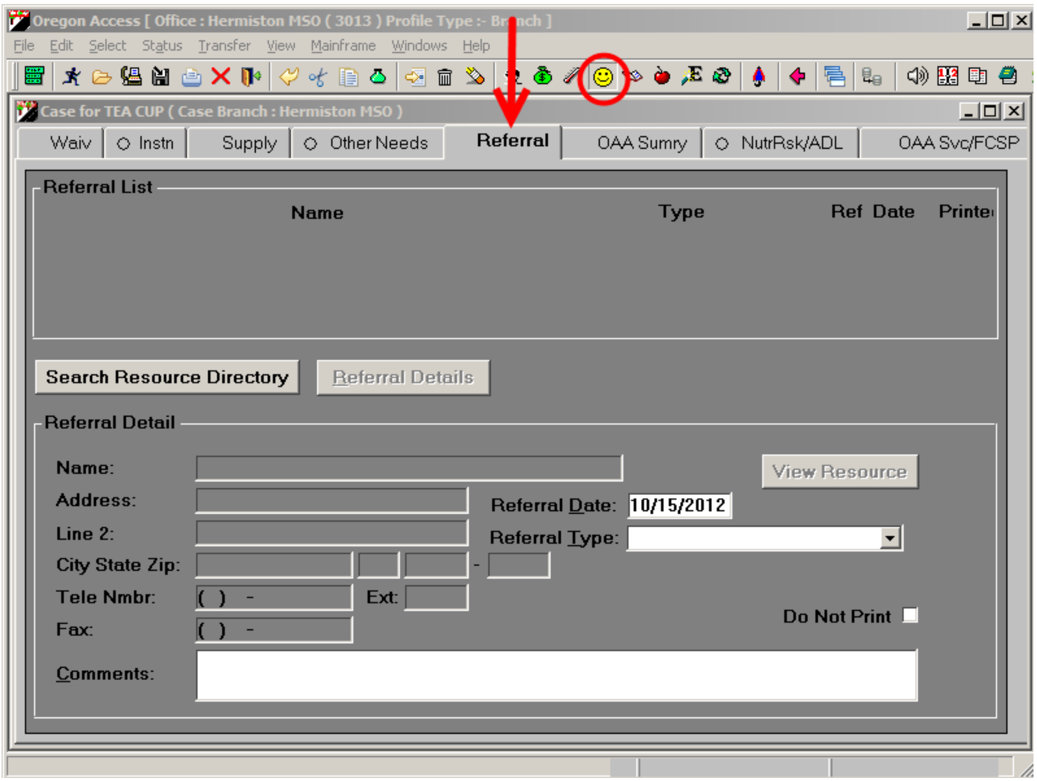
- Other Need Paid to Name: Enter the name of the individual or company that the need is being paid to.
- Address/Tele: Enter the address and telephone number of the individual or company that the need is being paid to.

3 – Person with other need

Use the drop down to identify the individual with the need. Only individuals attached to the case will be available in the list.

Referral Tab

Use this section to view and add referrals for the individual.



1 – Referral List

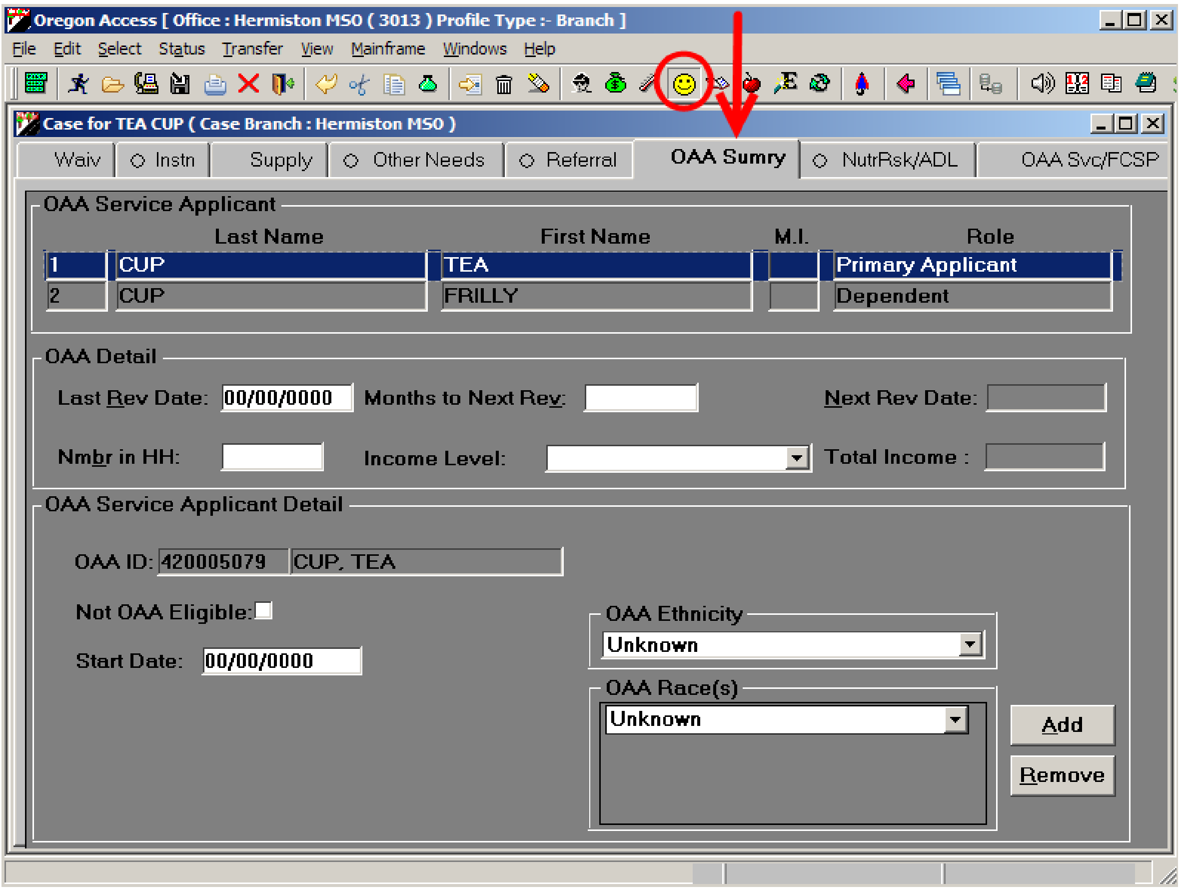
This section shows any needs that the individual has had entered onto this tab.

2 – Other Need Detail

- Search Resource Directory Button: Click on this button to initiate a search of the resource directory. When a resource is selected, the Name, Address, Telephone Number, and Fax will automatically populate.
- Referral Details: Click on this button to see detail information about the referral.
- View Resource: Click on this button to see additional detail information about the resource.
- Referral Date: Enter the date on which the referral is made.
- Referral Type: Enter the type of referral.
- Comments: Use this section to enter additional information about the referral.

OAA Summary

Use this tab to enter OAA service data.



1 – OAA Service Applicant

This section shows a list of the people on the case.

2 – OAA Detail

- <u>Last Rev Date</u>: Enter the date that the last OAA review was done.
- <u>Months to Next Rev</u>: Enter the number of months to the next review
- <u>Next Rev Date</u>: This field is auto filled by the system using the Last Rev Date and Months to Next Rev fields.
- <u>Nmbr in HH</u>: Enter the number of individuals in the household.
- <u>Income Level</u>: This field is auto filled by the system according to the income information entered into the case.

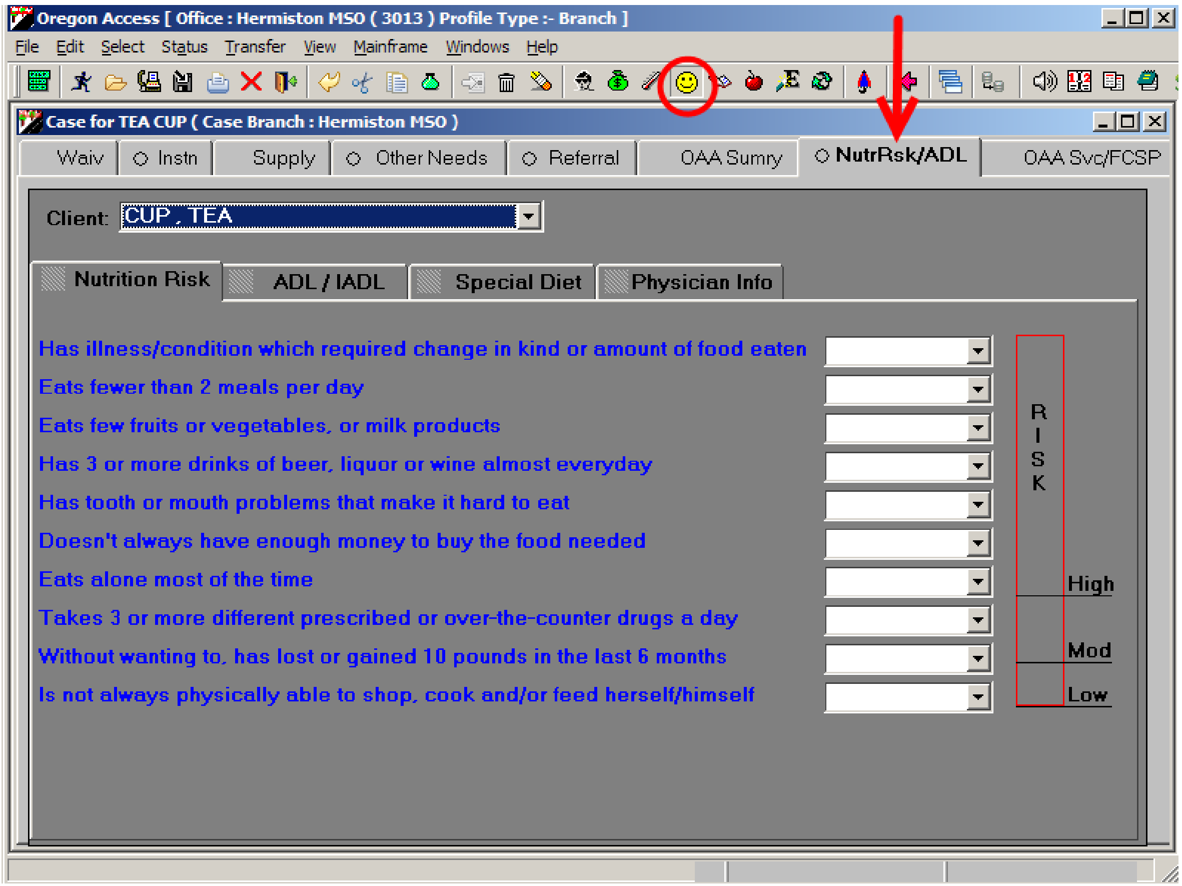
- Total Income: This field is auto filled with the total income entered into the case.
- Client: Use the drop down to select the individual receiving OAA services. Only individuals attached to the case will show in this list.

2 – OAA Service Applicant

- OAA ID: The OAA Id is a system generated number that follows the individual. These fields show the ID number and the individual's name.
- Persons Screen Race: This field is auto filled from the Client section, Person Tab, Race field.
- OAA Ethnicity: Use the drop down field to enter the individual's ethnicity.
- OAA Race(s): Use the drop down field to enter the individual's race. Multiple choices may be made.
- Not OAA Eligible: Use this checkbox to indicate that the individual is not eligible for OAA services.
- Start Date: Enter the date that the OAA services started.

Nutr Risk/ADL Tab

Use this section to record the individuals OAA Nutritional Risk and ADL/IADL needs.



1 - Nutrition Risk

Use the drop downs to have the individual answer the specific questions. Once started, this questionnaire must be completed.

2 – ADL/IADL

Select the radio button for either ADL (Activities of Daily Living) or IADL (Instrumental Activities of Daily Living). Highlight the appropriate ADL/IADL from the list on the left hand side of the screen and click the Add button to move the selections to the right side of the screen. Once in the Selected ADLs/IADLs section, use the drop down to indicate if the individual is Independent, Needs Assistance or is Dependent in each area. To remove a selection, highlight it and click on the Remove button.

3 – Special Diet

Use the drop down to indicate any special diet that the individual may have.

4 – Physician Info

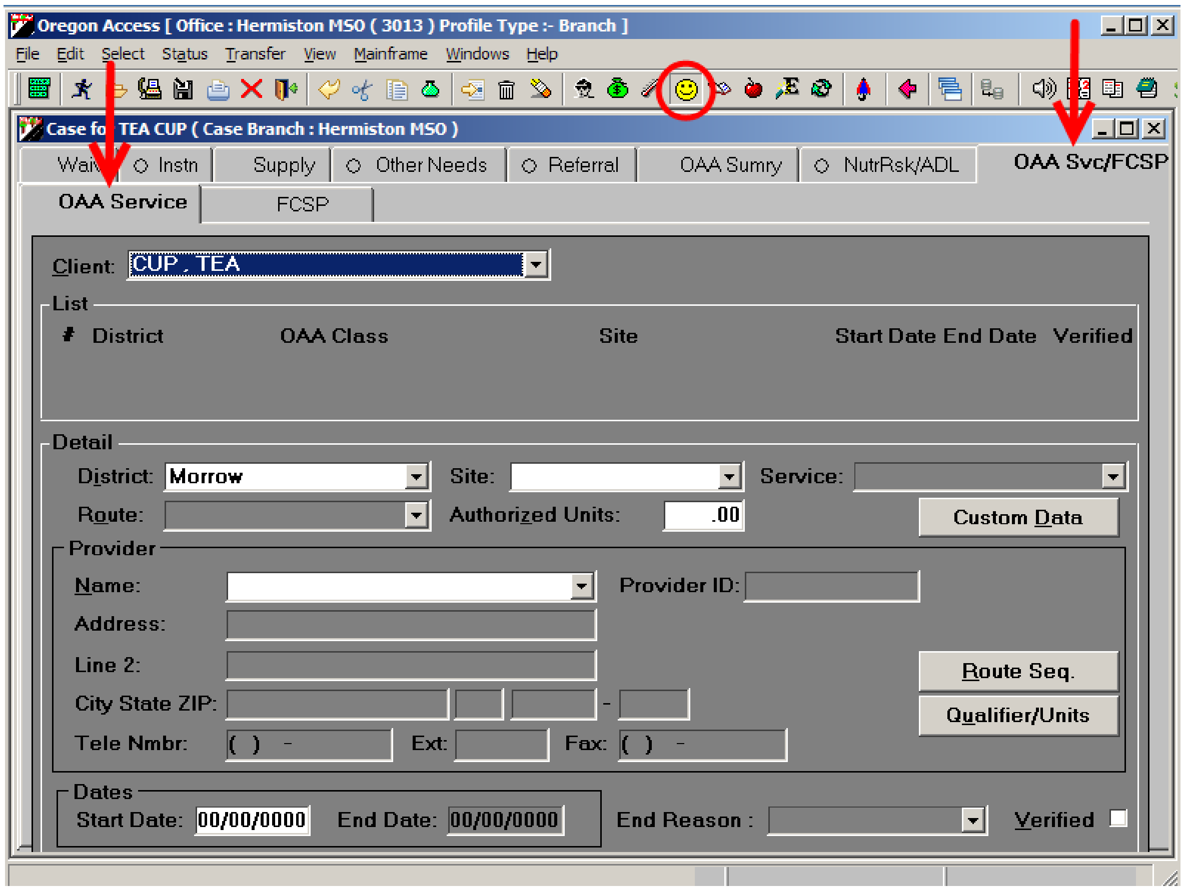
Use the text fields to enter any Physician information and telephone numbers that the individual may have.

OAA Svc/FCSP Tab

This section is used to enter information about OAA Service and the Family Caregiver Support Program (FCSP). This tab has two sub tabs: OAA Service and FCSP

OAA Service

This section allows the user to enter specific OAA services being given to the individual.



1 – List

This section will show all of the services being administered to the individual.

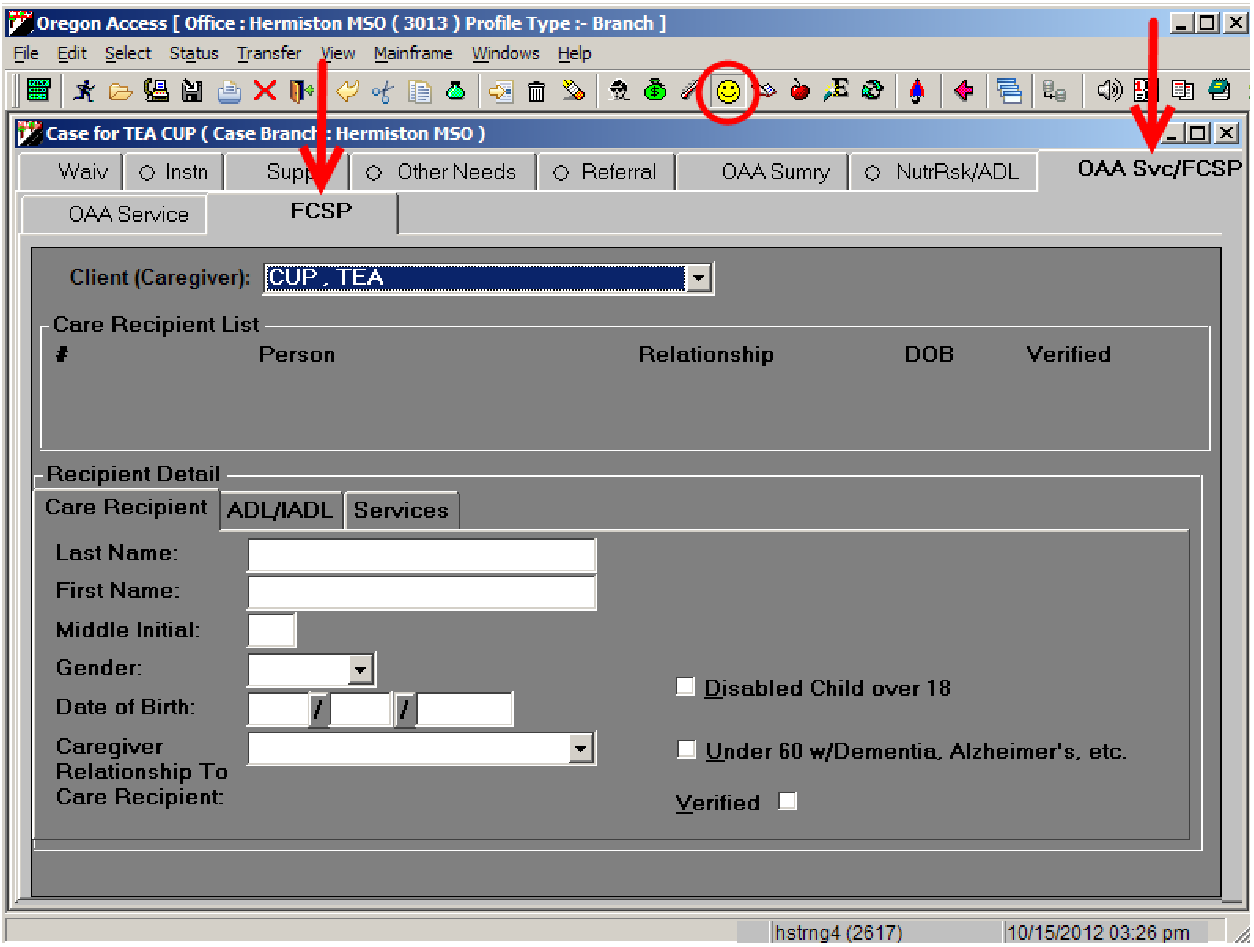
2 – Detail

- <u>District:</u> Use the drop down to select the district of the service.
- <u>Site:</u> Use the drop down to select the service site.

- Service: Use the drop down to select the service.
- Route: Use the drop down to indicate the route of delivery that the individual will be on.
- Authorized Units: Enter the number of authorized units per month for the individual.
- Custom Data Button: Clicking this button will open the custom data window and allow entry of data for the individual.
- Provider Name: Use the drop down to select the provider of the service being given to the individual.
- Provider Address/Tele: These fields are auto filled with the selected providers address and telephone number.
- Provider ID: This field is auto filled with the provider's number if applicable.
- Route Seq Button: Clicking this button will allow the user to indicate the sequence of the route, and when the individual receives delivery.
- Qualifier/Units Button: Clicking this button will open a window that allows the user to enter the units or qualifiers for the individual's service.
- Start Date: Enter the date that the service is starting.
- End Date: Enter the date that the service ended. Do not enter a date if the service has not ended.
- End Reason: If entering an end date, enter he end reason using the drop down to choose the reason.

FCSP (Family Caregiver Support Program)

This screen is used to track services provided to caregivers served under FCSP.



1 – Care Recipient List

This section shows all of the individuals receiving FCSP services that have been added to the tab.

2 – Care Recipient Detail

This section is broken into three sub tabs

A. Care Recipient
B. ADL/IADL
C. Services

A – Care Recipient

This section is used to enter information about the private individual receiving services from the client/caregiver who will be receiving FCSP services.

- <u>Last Name:</u> Enter the last name of the individual the Client/Caregiver is providing services for.
- <u>First Name:</u> Enter the first name of the individual the Client/Caregiver is providing services for.
- <u>Middle Initial:</u> Enter the middle initial of the individual the Client/Caregiver is providing services for.
- <u>Gender:</u> Enter the gender of the individual the Client/Caregiver is providing services for.
- <u>Date of Birth:</u> Enter the date of birth of the individual the Client/Caregiver is providing services for.
- <u>Caregiver Relationship to Care Recipient:</u> Use the drop down to identify how the Client/Caregiver is associated with the care recipient.

B – ADL/IADL

Use this section to identify the ADLs and IADLs the client/caregiver is providing to the private individual.

- <u>Available ADL/IADL</u>: Use the radio button to choose either ADL or IADL and highlight the individual ADL/IADL needs by clicking on them. Click the right arrow key to move them to the Selected list.
- <u>Selected ADL'S/IADL'S</u>: This list contains the selected ADL's/IADL's. Use the drop downs to identify the needs of the private individual the client/caregiver is providing services for.

C – Services

This sub tab is used to select the services that the client/caregiver will be receiving.

- <u>Available Caregiver Service</u>: These services are entered on the OAA Service Tab. This is the service that the client/caregiver will be receiving if selected. Once selected, click the right arrow key to move them to the Selected list.
- <u>Begin Date</u>: This date is entered on the OAA Service Tab for the selected service. This is the date that the client/caregiver will start receiving the service.

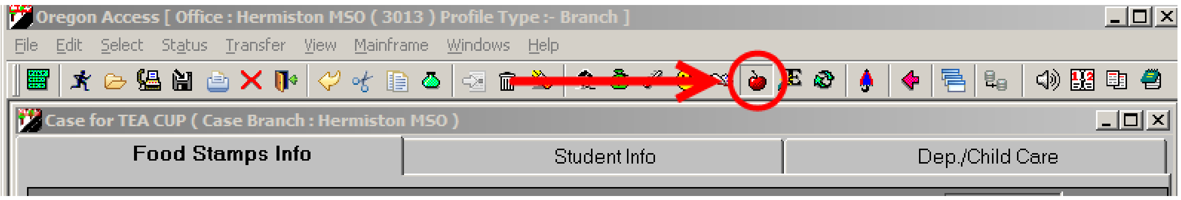
The Client Assessment and Planning Section of Oregon ACCESS

The *Client Assessment and Planning Section* stores information on the client service assessment.

For additional information on the CA/PS section, attend Oregon ACCESS CA/PS training.

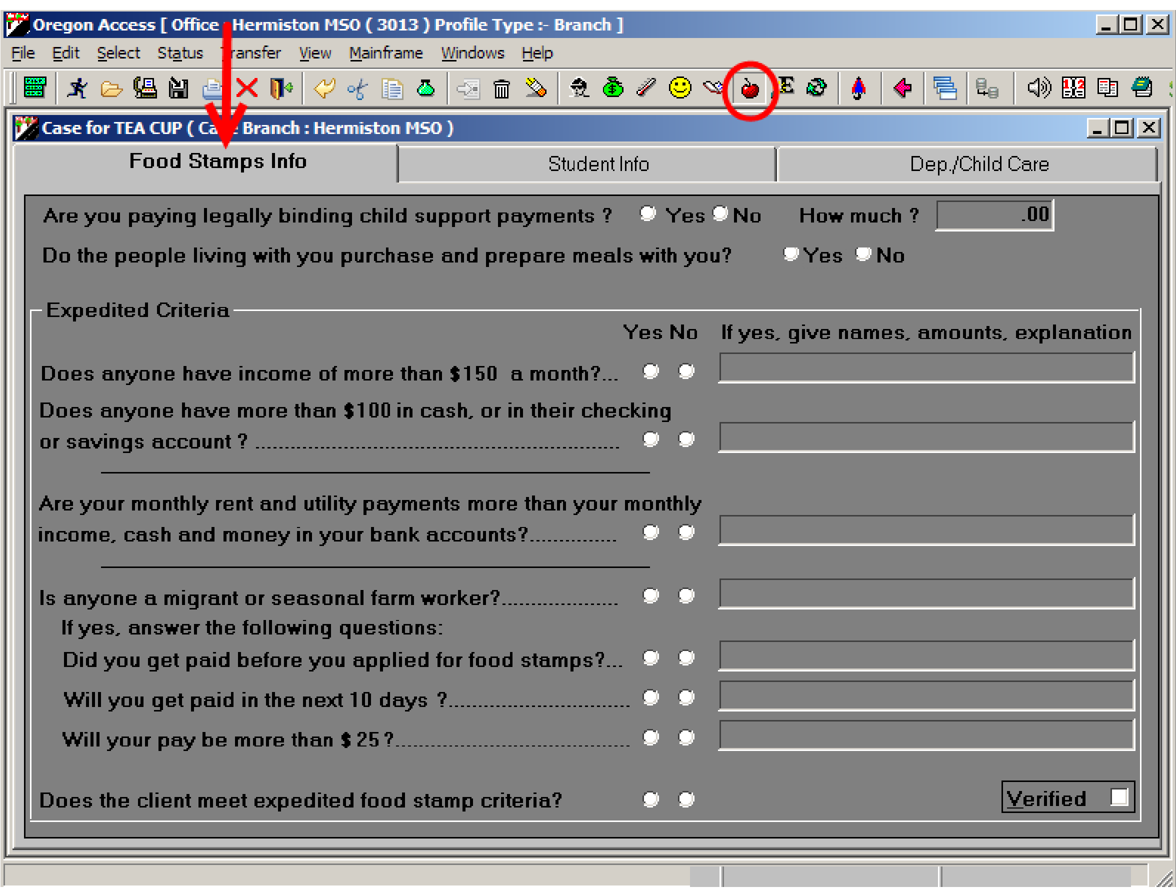
Tabs in the Food Stamps section of the Oregon ACCESS case

Use this section to enter information that is relevant only to the Supplemental Nutrition Assistance Program (SNAP) applicants. This section will complete the SNAP section of the application. It contains tabs used to collect information on SNAP expedited criteria, Student information, and Dependent/Child Care costs.



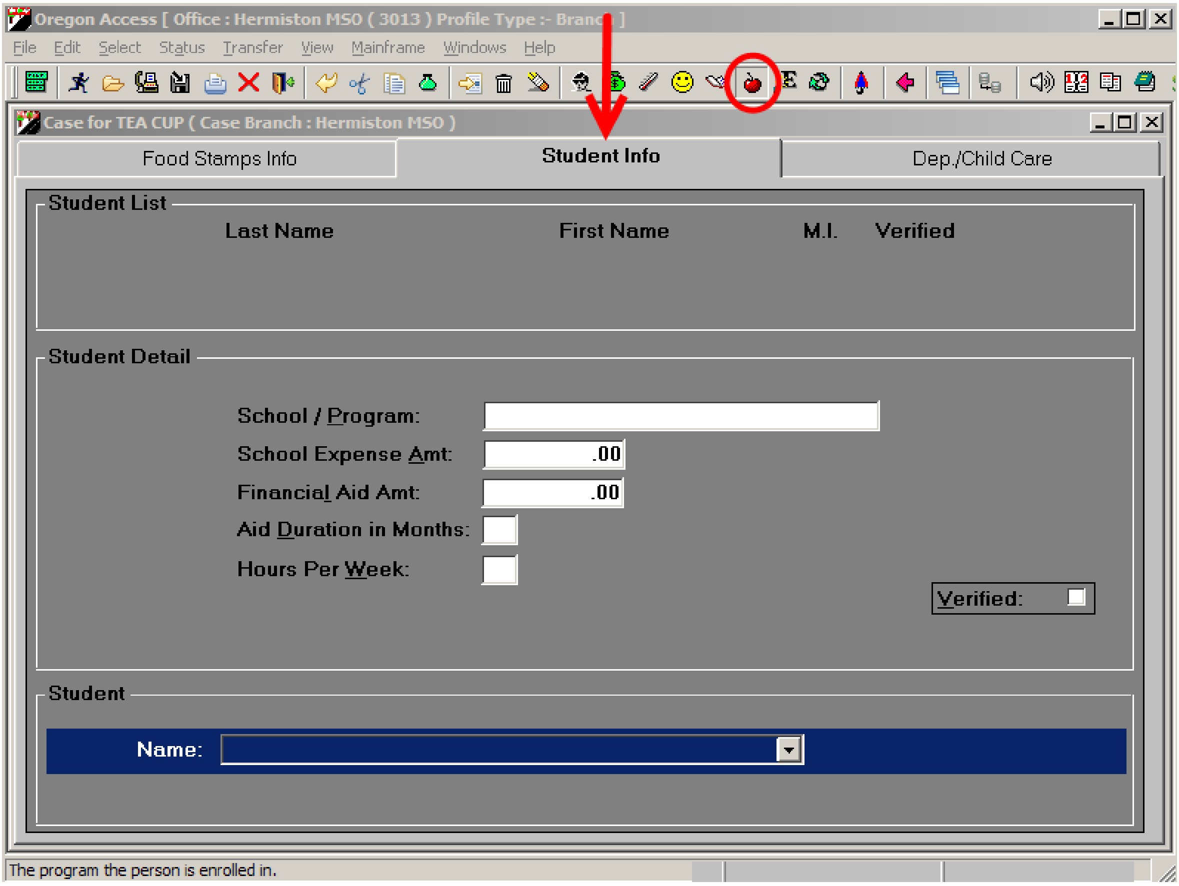
Food Stamp Info Tab

Use this area to enter information regarding an individual's food benefit circumstances. This tab is a questionnaire that will be answered using radio buttons.



Student Info Tab

Use this area to enter information regarding any student information



1 – Student List

This section shows all of the individuals that have been identified as students in the case.

2 – Student Detail

- School/Program: Enter the name of the school or program that the individual is attending.
- School Expense Amt: Enter the amount that the schooling or program will cost.
- Financial Aid Amt: Enter the amount of financial aid that is received if any.
- Aid Duration in Months: Enter the number of months that the financial aid is for.

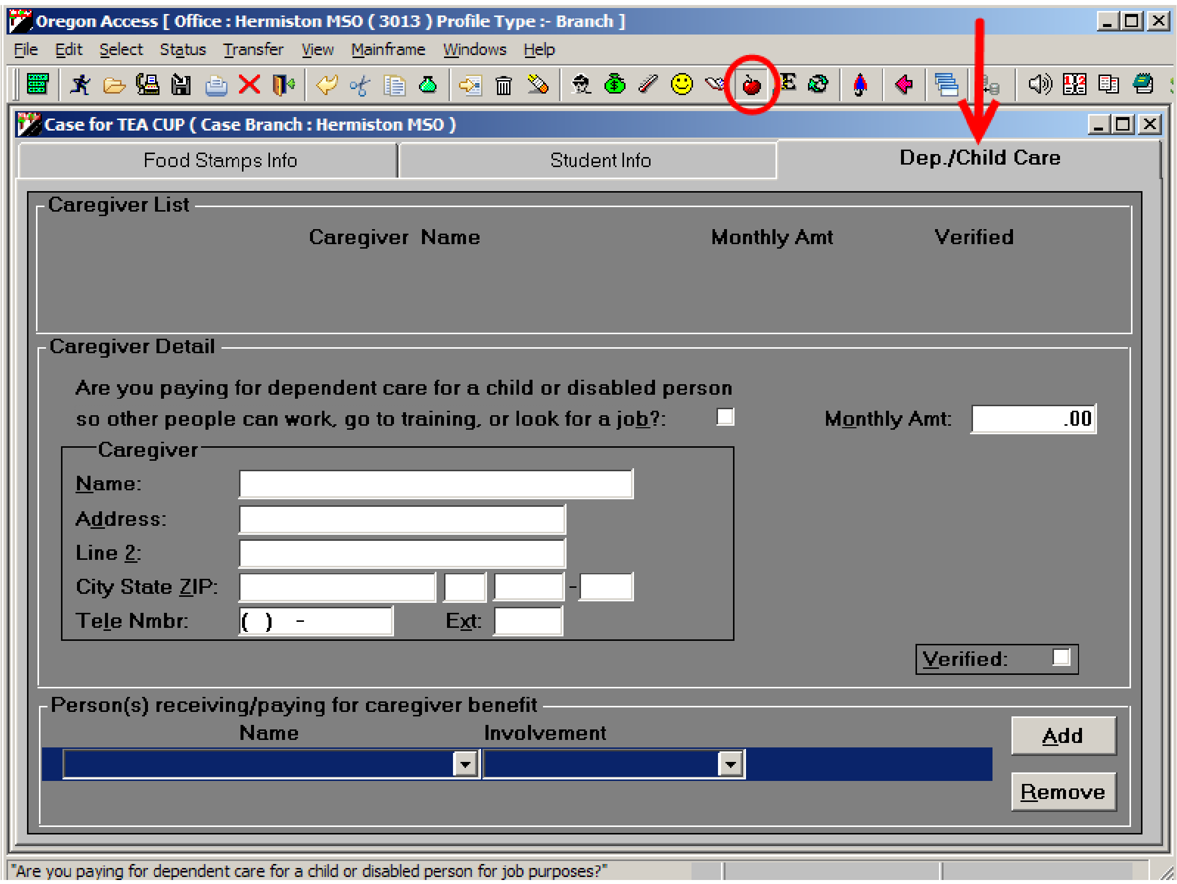
- Hours Per Week: Enter the number of hours of school or program attendance that the individual has each week.

3 – Student

Use the drop down to identify the student.

Dep./Child Care Tab

Use this area to enter information about a caregiver our agency is paying to provide dependent care for a child or disabled individual.



1 – Caregiver List

This section shows all of the caregivers that have been added to this tab.

2 – Caregiver Detail

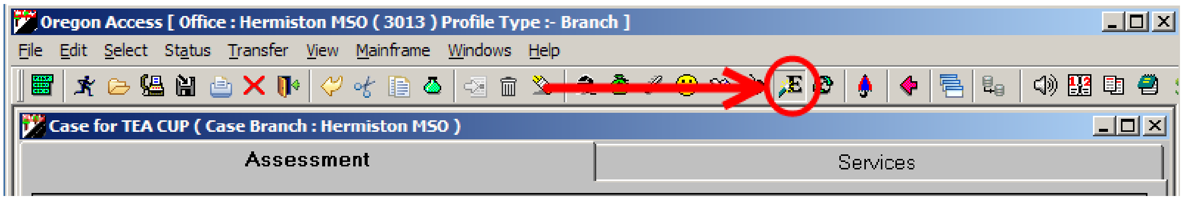
- Are you paying for dependent care for a child or disabled person so other people can work, go to training, or look for a job? Use the radio button to indicate "Yes" or "No".
- Name: Enter the name of the caregiver.
- Address/Tele: Enter the caregivers address and telephone number.
- Monthly Amt: Enter the amount that is being paid to the caregiver monthly.

3 - Person(s) Receiving/Paying for Caregiver Benefit

- Name: Use the drop down to identify the individual that is paying for or that is receiving the care.
- Involvement: Indicate whether the individual is receiving, or is paying for the benefit.

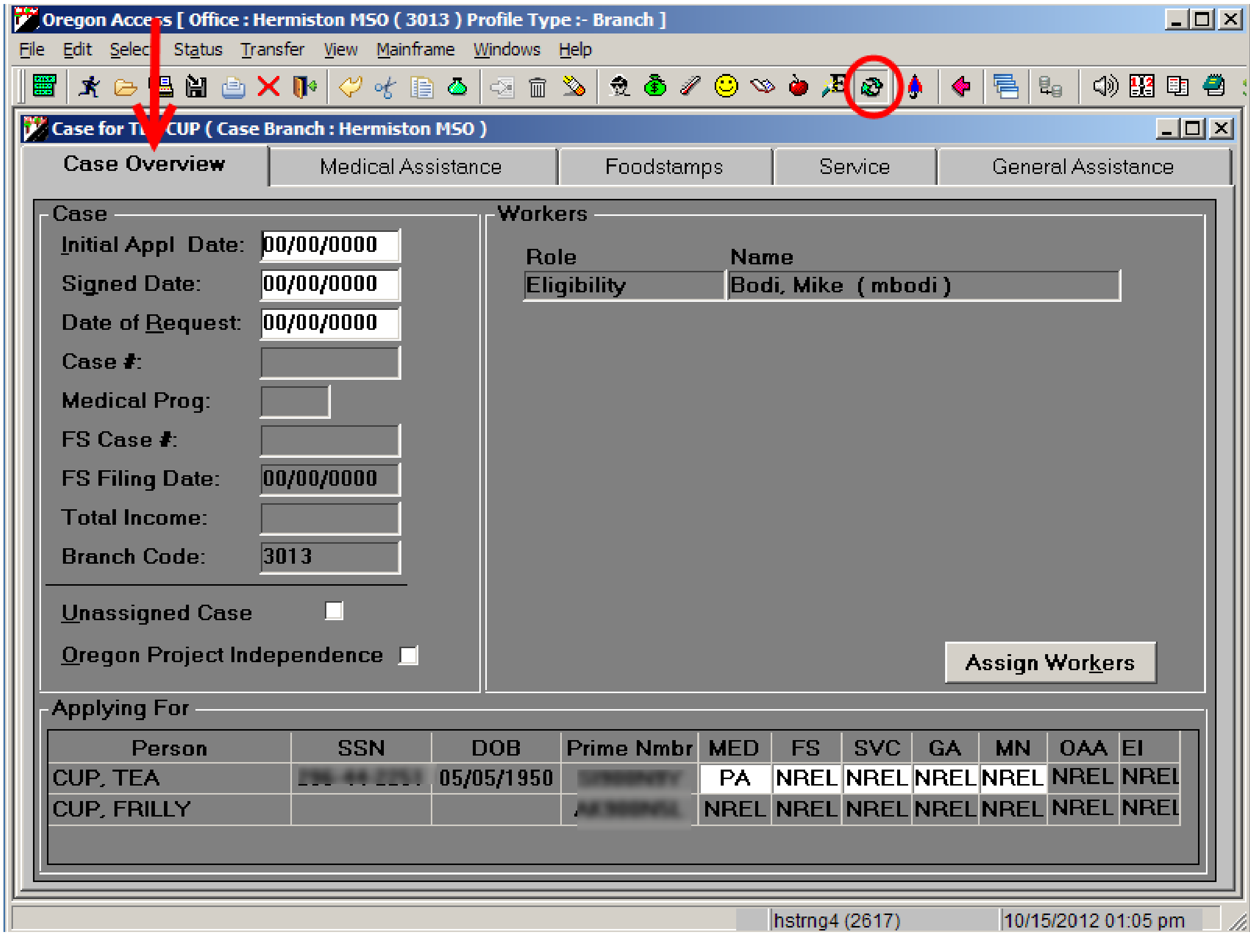
Tabs in the Employment Initiative section of the Oregon ACCESS case

This section is now obsolete.



Case Overview Tab

Use this area to enter information regarding general benefit details for a given case and individuals in the case, and for the connection of each applicant to the benefit.



1 – Case

- Initial Appl Date: Enter the date that the individual initially applied for benefits.
- Signed Date: Enter the date that the individual signed the application.
- Date of Request: Enter the date of the individuals request for benefits.
- Case #: This field will be auto filled by the system when a case number is entered into the Medical Assistance tab.
- Medical Prog: This field will be auto filled by the system when a medical program is entered into the Medical Assistance tab.
- FS Case #: This field will be auto filled by the system when the Food Stamp tab is activated.

- FS Filing Date: This field will auto fill with the Food Stamp Filing Date that is entered into the Food Stamp tab.
- Total Income: This field will auto fill with the total income that has been entered into the ACCESS case.
- Branch Code: This field will auto fill with the branch number that the case is currently assigned to.
- Unassigned Case: *Checking this box is not recommended*. Checking this box, after removing all workers names, will move the case to the Unassigned Worker case load. This will not remove the case from the branch and the case will show on all reports.
- Oregon Project Independence: Use the check box to identify the case as an OPI case. Checking this box will open the OPI Mon Fee and OPI Fee % boxes on the service tab. Checking this box will also replace the Medical Prog with "OA".

2 - Workers

- Role: This field identifies the workers role in the case. This information is auto filled from the information entered when the Assign Workers Button is clicked.
- Name: This field identifies the worker(s) that have been assigned to the case. This information is auto filled from the information entered when the Assign Workers Button is clicked.
- Assign Workers Button: Clicking this button will open the Assign Workers window. From this window, workers and their roles may be chosen.

3 – Applying For

This section allows the user to identify the benefits that the individual is applying for and their role.

- Person: This information will auto fill with the names of any individual attached to the case.
- SSN: This field will auto fill with the social security number of the identified individual that is attached to the case.
- DOB: This field will auto fill with the date of birth of the identified individual that is attached to the case.
- Prime Nmbr: This field will auto fill with the prime identification number of the identified individual that is attached to the case.

- MED: Use the drop down to identify the individual's role in applying for Medical Benefits. Choices are:
  - Primary Applicant: This choice identifies the individual as the primary individual that is applying for the benefit. The case will carry this individual's name.
  - Applying: This choice identifies that the individual is applying for the benefit. This is not used for the primary individual; it is used for any other individual that is attached to the case that is applying for the same benefit.
  - Not Applying, Need Info: This choice indicates that the individual is not applying for the specific benefit; however the individual's relevant information needs to be looked at and counted.
  - Not Relevant, Not Applying: This choice indicates that the individual is not applying for the benefit.
  - Need Group Member Only: This choice indicates that the individual's basic and special needs are used in determining eligibility and benefit level.
- FS: Use the drop down to identify the individual's role in applying for Food Stamp Benefits.
  - Head of Household: This choice identifies the individual as the primary individual that is applying for the benefit. The Food Stamp case will carry this individual's name.
  - Applying: This choice identifies that the individual is applying for the benefit. This is not used for the primary individual; it is used for any other individual that is attached to the case that is applying for the same benefit.
  - Not Applying, Need Info: This choice indicates that the individual is not applying for the specific benefit; however the individual's relevant information needs to be looked at and counted.
  - Not Relevant, Not Applying: This choice indicates that the individual is not applying for the benefit.
- SVC: Use the drop down to identify the individual's role in applying for Service Benefits. Choices are:
  - Primary Applicant: This choice identifies the individual as the primary individual that is applying for the benefit. The case will carry this individual's name.
  - Applying: This choice identifies that the individual is applying for the benefit. This is not used for the primary individual; it is

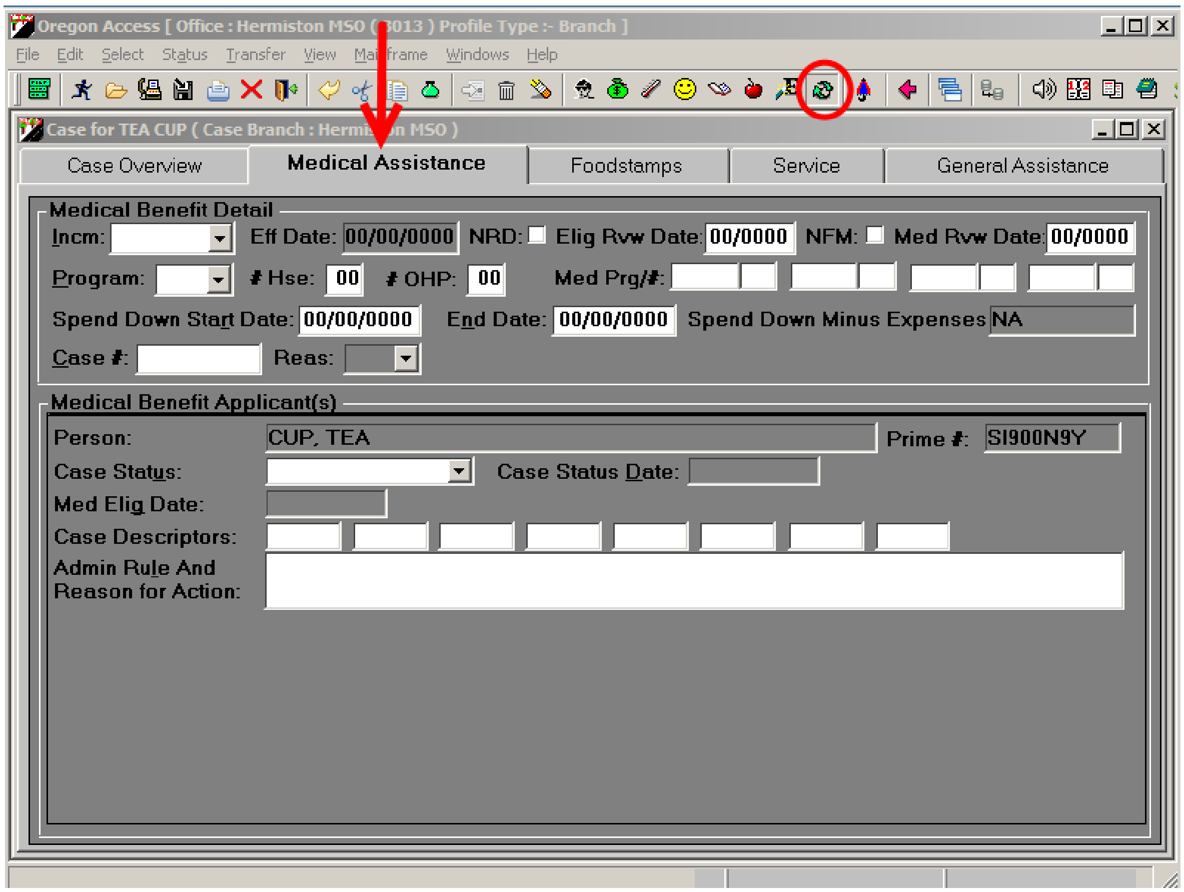
used for any other individual that is attached to the case that is applying for the same benefit.

  - Not Applying, Need Info: This choice indicates that the individual is not applying for the specific benefit; however the individual's relevant information needs to be looked at and counted.
  - Not Relevant, Not Applying: This choice indicates that the individual is not applying for the benefit.

- GA: This choice is obsolete.
- MN: This choice is obsolete.
- OAA: This field identifies whether or not the individual is applying for OAA benefits. This field is not editable and will show either NREL for not applying, or APPL for applying.
- EI: This choice is obsolete.

Medical Assistance Tab

Use this section to enter information regarding the people applying for Medical Assistance and the specific program information such as case descriptors, case status and administrative rules if necessary. Integration is done through this tab.



1 – Medical Benefit Details

- Incm: This is the incoming code use to tell the system what kind of transaction it is.
- Eff Date: The effective date of the transaction. Follow policy regarding effective dates.
- NRD: Use the NRD checkbox for cases for which it has been determined that no redetermination will be needed.
- Elig Rvw Date: If a redetermination is due, the date that case becomes overdue for redetermination is entered here.
- NFM: Use the NFM checkbox for cases for which it has been determined that no further medical review will be needed.

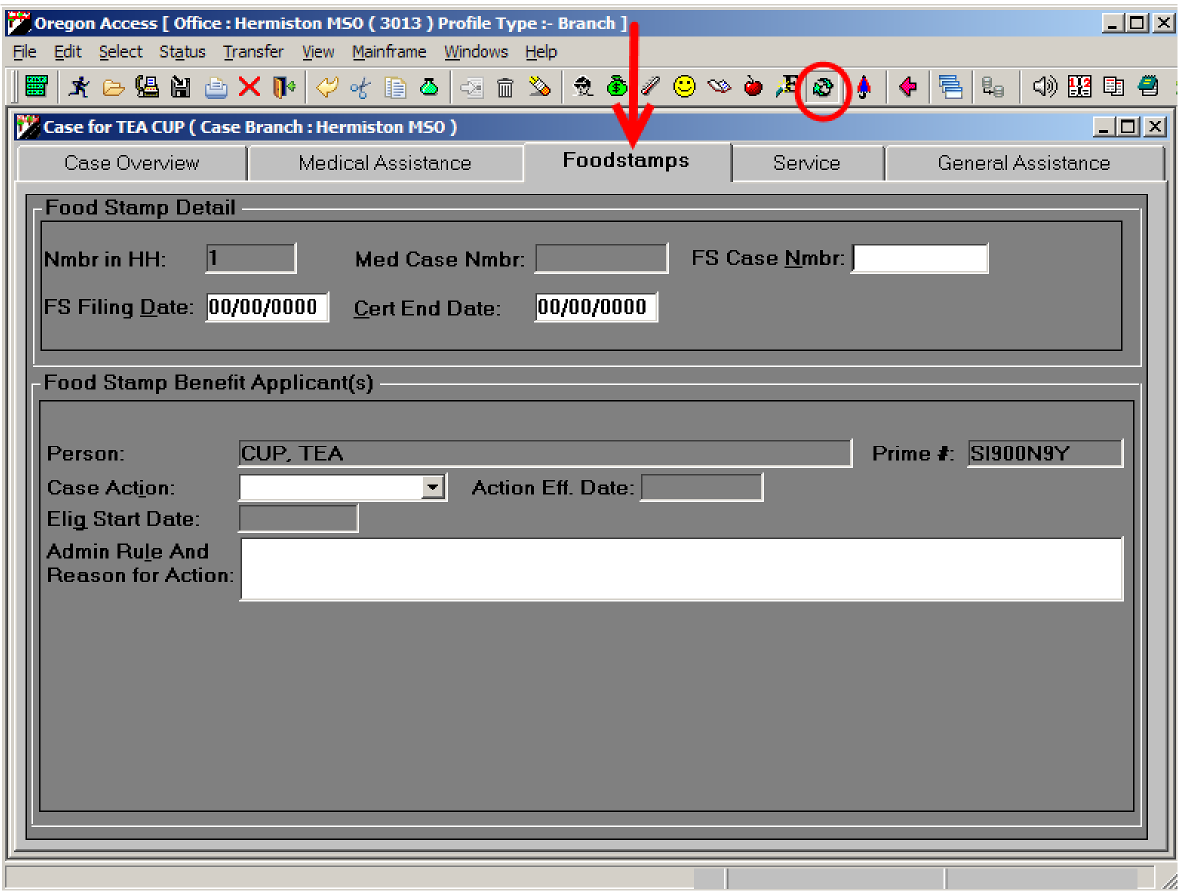
- Med Rev Date: If a medical review is due, the date that the medical review is due is entered here.
- Program: The type of medical program that the client is having eligibility determined for.
- #Hse: The number of people in the household group.
- #OHP: The number of people applying for OHP.
- Med Prg/#: Use this area to enter the codes for the type of medical program, and number of people in the need group for each type of medical program.
- Case#: The case number assigned to the case. This will automatically be filled in when you integrate.
- Reas: This area is a drop down list of reasons that need to be used when an application is closed or denied.

2 – Medical Benefit Applicant(s)

- Person: This field is auto filled with the name of the individual that has been marked as applying or needed on the Medical case.
- Prime: This filed is auto filled with the prime identification number of the individual that has been marked as applying or needed on the Medical case.
- Case Status: Use the drop down to identify what is happening with the case, such as approval, denial, pending the case, reducing the case.
- Case Status Date: Enter the date that the action being taken on the case will be effective. This field will not be available when Approved is selected as a Case Status.
- Med Elig Date: This field will only be available when the Case Status of Approved is chosen. Enter the date that the individual is eligible for medical benefits.
- Case Descriptors: Enter the appropriate case descriptors for the case, one per field.
- Admin Rule and Reason for Action: Use the text box to enter the rule number(s) supporting any negative action being taken on the case.

Food Stamps Tab

Use this area to enter information regarding the individual(s) applying for Food Stamps.



1 – Food Stamp Detail

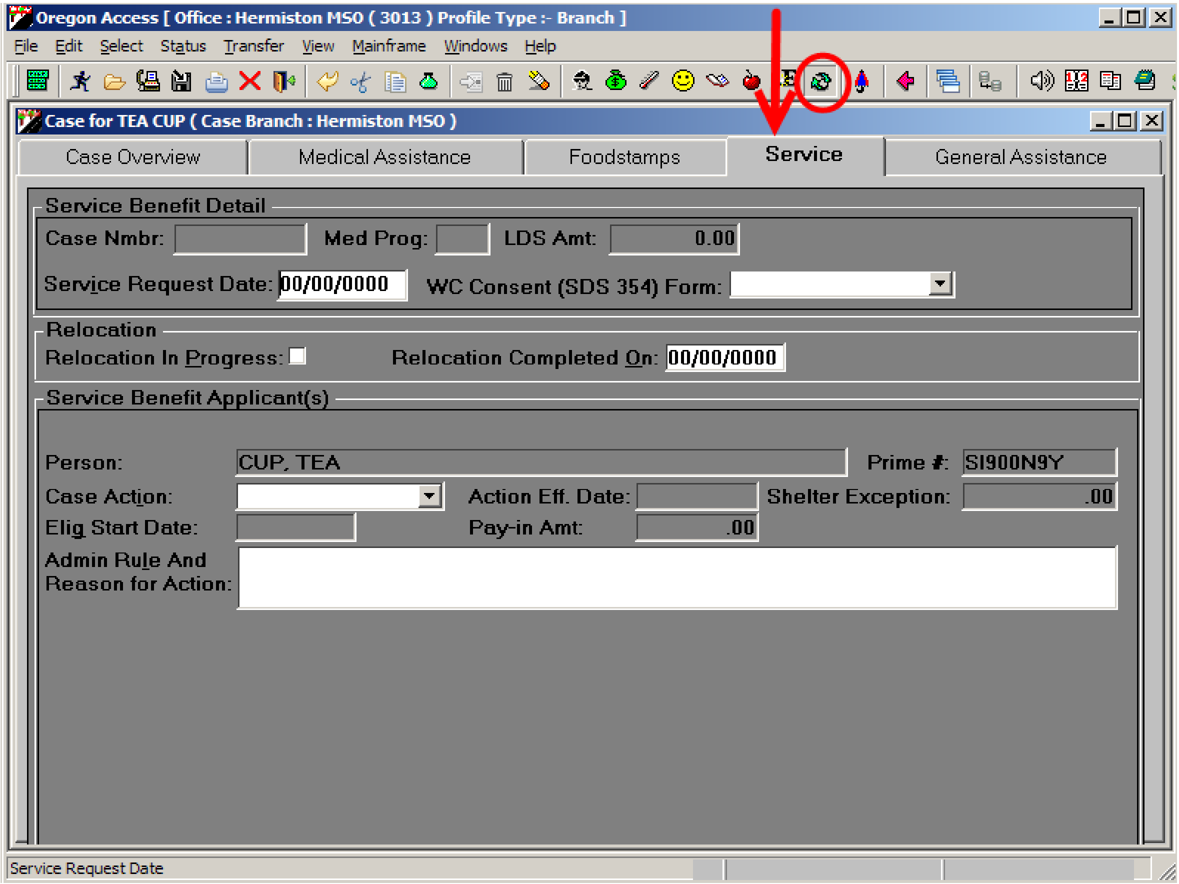
- Nmbr in HH: This field auto fills with the number of individuals that are marked as applying for Food Stamps in the Case Overview tab.
- Med Case Nmbr: This filed auto fills with the medical case number that is entered into the Medical Assistance tab.
- FS Case Nmbr: Enter the Food Stamp case number for the client.
- FS Filing Date: Enter the Food Stamp filing date in this field.
- Cert End Date: Enter the date that the certification ends in this field. Must be the last day in the month chosen.

2 – Food Stamp Benefit Applicant(s)

- Person: This field is auto filled with the name of the individual that has been marked as applying or needed on the Food Stamp case.
- Prime #: This filed is auto filled with the prime identification number of the individual that has been marked as applying or needed on the Food Stamp case.
- Case Action: Use the drop down to identify what is happening with the case, such as approval, denial, pending the case, reducing the case.
- Action Eff. Date: Enter the date that the action being taken on the case will be effective. This field will not be available when Approved is selected as a Case Action.
- Reduced To $: This field will only be enabled when a Case Action of Reduction is taken. Enter the amount that the Food Stamps will be reduced to.
- Elig Start Date: Enter the date that the Food Stamp eligibility starts.
- Admin Rule and Reason for Action: Use the text box to enter the rule number(s) supporting any negative action being taken on the case.

Service Tab

Use this tab to enter any Service related data.



1 –Service Benefit Detail

- Case Nmbr: This field is auto filled by the case number that is entered in the Medical Assistance tab.
- Med Prog: This filed is auto filled by the medical program number that is entered in the Medical Assistance tab.
- LDS Amt: This field is auto filled by the LDS amount entered in the Other Needs tab in the Service Section. An LDS type of need must be entered as well as an amount.
- Service Request Date: Enter the date that the individual requested services.
- WC Consent (SDS354) Form: Use the drop down to indicate whether or not the individual has agreed to have voluntary deductions taken out for the in-home caregiver.

2 – Relocation

This section is used to identify any relocation activities which may be in progress or may have been completed for this individual. This information will be used for the Relocation Report.

- Relocation in Progress: Use the checkbox to indicate whether or not there is relocation currently in progress.
- Relocation Completed On: Enter the date that the relocation is complete

3 – Service Benefits Applicant(s)

- Person: This field will auto fill with the name of the individual(s) that are attached to the case and have been marked as applying for Services in the Case Overview tab.
- Prime #: This field will auto fill with the prime identification number of the individual(s) that are attached to the case and have been marked as applying for Services in the Case Overview tab.
- Case Action: Use the drop down to indicate the action being taken on the case such as approval, denial, withdrawal, reduction.
- Action Eff. Date: Enter the date that the action listed in the Case Action will take place. This option will not be available when the Case Action type of Approved is chosen.
- Shelter Exception: This field is auto filled by the Shelter Exception amount entered in the Other Needs tab in the Service Section. A Shelter Exception type of need must be entered as well as an amount.
- Elig Start Date: Enter the date that the services will start. This option is only available when the Case Action type of Approved is chosen.
- Pay-In Amt: This amount is calculated by the system when there has been a CA/PS done and pushed to current. Information pulls from the Other Needs tab when Client Pay-In is selected as a type.
- Admin Rule and Reason for Action: Use the text box to enter the rule number(s) supporting any negative action being taken on the case.
- OPI Mon Fee: Use this field to enter in the monthly Oregon Project Independence fee that the individual will be responsible to pay.
- OPI Fee %: Use this field to enter the percentage of income the individual will be responsible to pay for the Oregon Project Independence program.

General Assistance Tab

This section is obsolete.

Other Case Related Modules

Adult Protective Services

This section stores information about Adult Protective Services reports.
If there is no data in this section, the umbrella is 'closed'.
If there is data in this section, the umbrella will be 'open'.

The Adult Protective Services module is subject to more stringent security requirements. Most staff will not have access to this section.

Oregon ACCESS Narrative

Narrative

The purpose of narration is to document information and factual observations, eligibility decisions, and actions taken on a case, screening, resource assessment or call. Narratives should be clear in content and as correct as possible. Other workers or offices using the Narrative will need to be able to follow the case.

Each module in Oregon ACCESS – Screening, Case, Resource Assessment, Call – has an associated narrative. The Narrative is not a word processing application. It contains Spell Check, but does not have a grammar check feature. Word Wrap is automatic. Italics, Underline, and Bold features are available for use within the Narrative screen.

Accessing Narratives

There are several ways to access the Narrative for an Oregon ACCESS module.

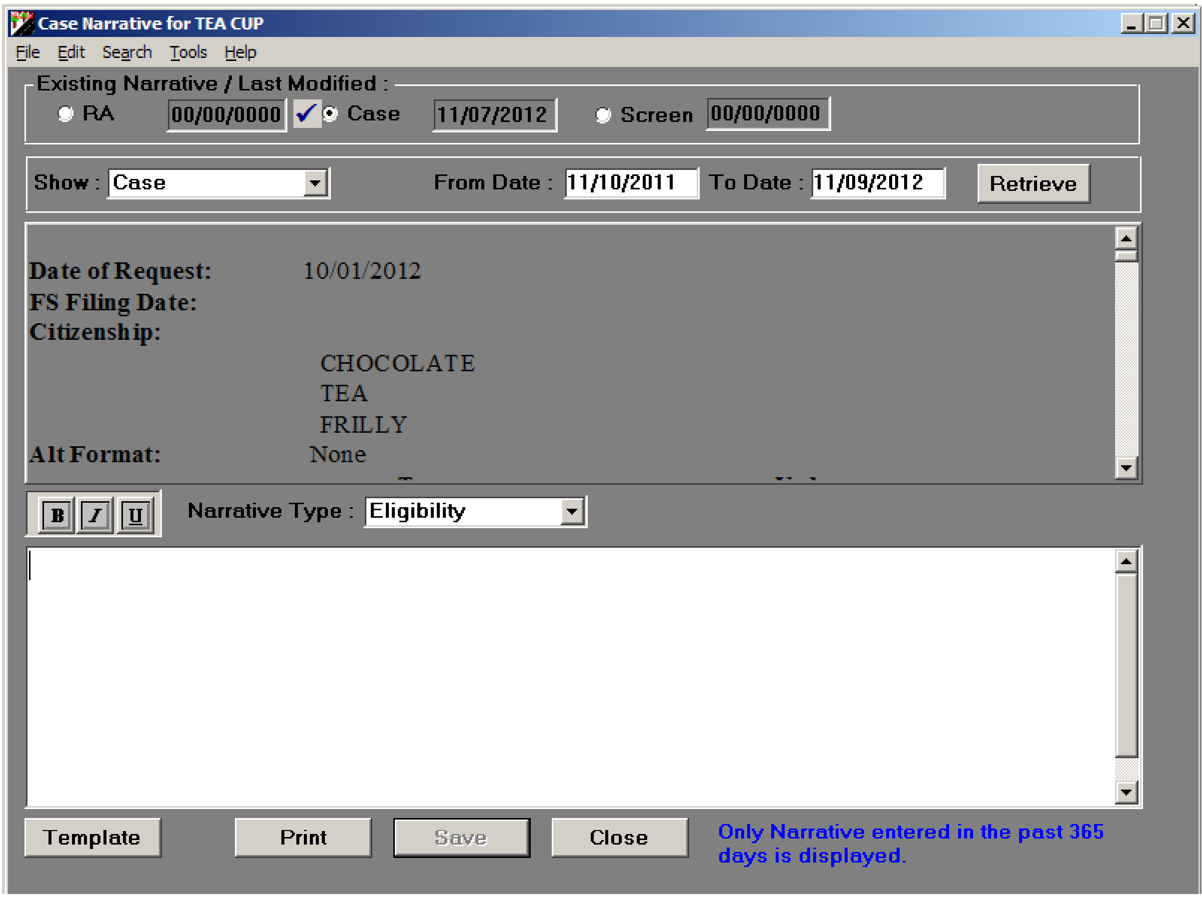
- From the Main Menu on the left hand side there is a Narrative button.

- From your Case List, select the person you wish to see the Narrative for by highlighting that person. Highlight the individual, click on the Narrative button. This will open the Narrative screen.

- From the Persons and Contacts in the Case screen, highlight the person that you wish to view, and click on the Narrative button in the lower right hand corner. This will open the Narrative screen.

- From anywhere in the case record:
  Select View from the Menu and then select Narrative. This will open the Narrative screen for the Primary Applicant on the case.
  Select the Narrative icon on the tool bar. Click on it and it will open the Narrative screen for the Primary Applicant on the case.
  Right click anywhere on the screen and it will pop up a navigation box that will give the option to go anywhere in the case record. Click on Narrative and it will open the Narrative screen for the Primary Applicant on the case.

Narrative Window



1 – Existing Narrative / Last Modified

All ACCESS Narratives may be viewed from within a single case. For example, if the primary applicant has an (active) RA, Screening, or Call Notes all will be at the top of the Narrative screen.

The narrative that has the blue checkmark infront of it is the only one that may be modified.The other narratives will be read only. The user must enter the narritve for the other modules in order to edit or add to them.

To enter information into another module, you must be in that module. If any of these modules have been marked as ‘Inactive’, they will not show in the Narrative list. The date beside the module is the date of the last Narrative entry.

- Screen: This will show the Screening Narrative.
- RA: This will show the Resource Assessment Narrative.
- Case: This will show the Case Narrative.
- Call: This will show the Call Notes from the Call Module.

2 – Dates

- Show: Use the drop down to indicate the type of narratives to show in the history section.
- From Date: Enter the date of the earliest narrative that will be shown.
- To Date: Enter the date of the latest narrative that will be shown.
- Retrieve: Click the Retrieve button to activate the search for the specified dates or types of narratives.

3 – History

This section allows the user to view all of the previous narratives that have been entered previously into the case.

4 – Current

This section allows the user to enter the new narration in the white text field.

- Buttons: Use the Bold, Italic or Underline buttons in the narration if needed.
- Narrative Type: Use the drop down to indicate the type of narrative that is being created.

5 – Buttons

- Template: Clicking the Template button will paste a template into the current narration. Part of the template will pull information from the case; however a majority of the template will need to be filled in by hand.

- Print: Clicking this button will open a print options button. Set the print criteria and click OK to print. Click Cancel to cancel the print and click Printer to set up specific printer criteria.
- Save: Clicking this button will save the progress of the current narration.
- Close: Clicking this button will close the narrative window.

Screening Narratives

- The Screening Narrative does not attach to a case when a case is created from a screening. You will only be able to view it from the case. It will only print on the Initial Contact Sheet.
- A date and time stamp and screeners' log in will be noted at the end of each screening Narrative comment. It will become a permanent part of the screening
- Comments should include information that is pertinent to a possible intake and cannot be captured on the Screening form.
- The Comments will appear at the top of the second page of the Initial Contact Sheet. They can be as short or as long as needed.

Call Module Narrative (Call Notes)

- Area may be used to capture any Narrative relating to this call.
- It is available on all screens within the call module.
- It is specific to the call you are in and once the call is closed it will be saved permanently.
- Call Notes area will be open and available on all screens when a New Call is created. This will allow you to make notes as you work through the call and complete the information.
- When coming back to edit a call, the previous notes will be available to view at the bottom of the screen. The part displayed will be the most recent entry.
- To enter any additional Narrative, you will need to click on the UP arrow to open the screen. Once opened, the arrow will become a DOWN arrow. Click this to close the call notes area.
- The check mark (√) is for the spell check. When information is highlighted and the B is clicked, the highlighted text will be

bolded. The I will put highlighted text in italics, and U will underline highlighted text.

RA Narrative

- The RA Narrative is accessed just like you would a case Narrative, only you will do this through the RA module.

Narrative Facts

- Once you exit the Narrative function the text is saved but you are still able to add text or make changes.
- Once you exit the case entirely, the text is saved and cannot be modified.
- Narrative entries are automatically date, time, branch and worker ID stamped.
- To enter additional text after closing a case, you must begin a new Narrative.
- To exit the Narrative function, click the Close button at the bottom of the screen.
- To print, click the Print button. This will bring up a box for you to choose what you want to print.

Narration Standards

- ✓ Narration will be a chronological record of any contact or action that affects client benefits or situation. (It it's not narrated, it didn't happen).

- ✓ Narration will be done at the time of contact, call or activity – or within at least 3 days. Narration may be a summary of a day's contacts.

- ✓ Narration will be objective, factual and free from personal bias, comments, or emphasis. Quotations are only used for actual client statements, not worker comments. Remember, narration can and may be read by clients and their representatives.

- ✓ Narration will be descriptive, concise and complete so that others can understand the case and worker actions. Each narration entry should address Whom, What, and When. It should also address Where, How, and why when applicable.

- ✓ Narratives should be checked for proper grammar, spelling and punctuation, and should only use agency-acceptable acronyms and abbreviations.

- ✓ Narration will address each eligibility factor, decision made, and action taken. This will be done at application, re-determination and when changes occur.

- ✓ All mathematical calculations must be documented.

- ✓ Narration will not include any information on HIV/AIDS. Information regarding a Protective Services Referral may be included but not the specific details or outcome of the referral. Domestic Violence allegations are only addressed through objective observances and quotes from client.

Narrating Eligibility for Medicaid Services

The purpose of narration is to document information and factual observations, eligibility decisions, and actions taken on a case.

The major content of the assessment is captured in CA/PS, and more specific details are narrated in the CA/PS Comments Sections. A summary covering the basic circumstances of the assessment and the outcome should be in the case narration.

CA/PS Comments:

- Clarify information about the specific need being assessed.
- May apply to more than one screen. Eg. Medications section or Cognition section.
- Are used to enter additional information no found in dropdowns, or to clarify how the assessor came to their decision on a specific ADL.

Fully utilize all areas in CA/PS assessment, including the tabs containing environment, goal and referral information. Medical information is more protected in CA/PS comments rather than in case Narrative, which is a HIPAA consideration.

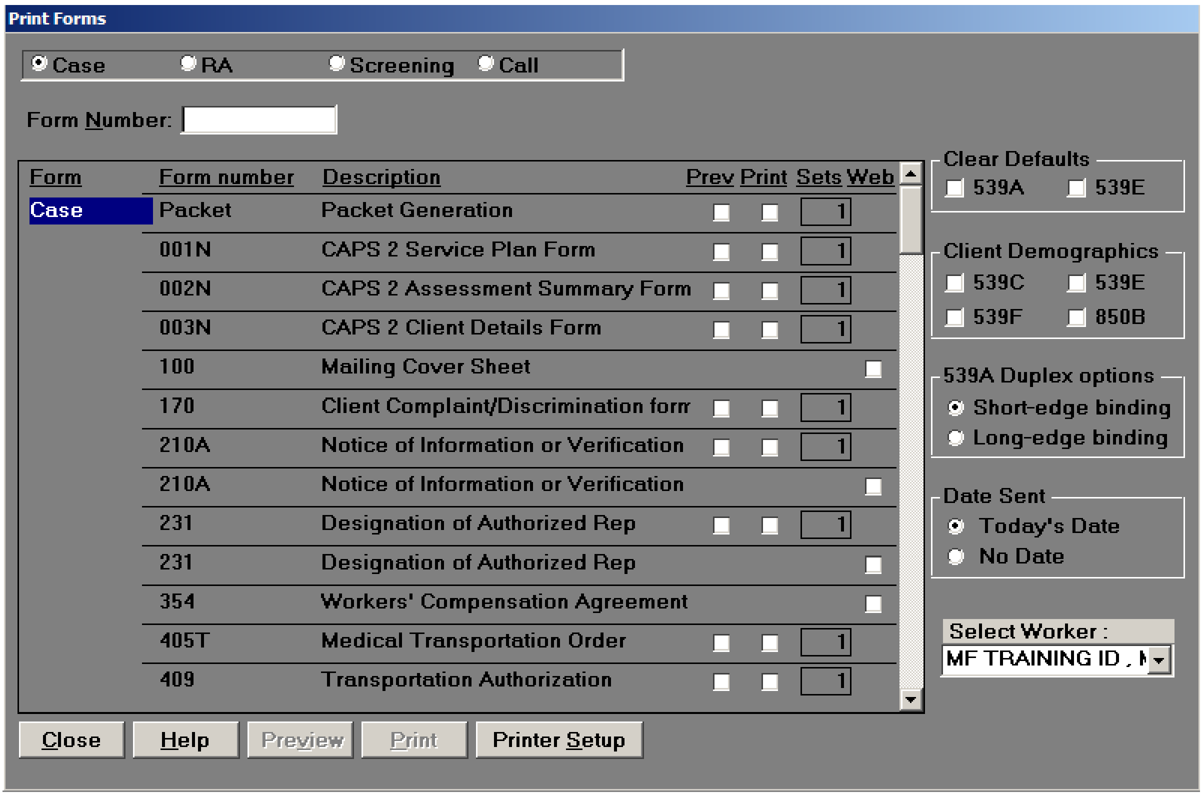
OACCESS Case Narration regarding Assessment:

- Date and location of assessment.
- Who was present or interviewed.
- Collateral contacts and records reviewed.
- Is client receiving appropriate care?
- Has SPL changed? If yes, what is the new level and general statement regarding the change of condition?
- It is not necessary to duplicate in case narration the information noted in CA/PS. Rather, refer the reader to the CA/PS assessment for details.

Printing/ Forms

Printing

Printing is a <u>case specific</u> function. To access the forms printing section, click the Print Icon on the tool bar or choose "Print…" from the File menu. This will bring up the Print Forms screen.



1 – Type

The Type section gives the user the choice between the Case, RA, Screening and Call forms to print. Use the radio buttons to select the type.

- <u>Case</u>: ACCESS will not automatically highlight any forms for you. You will need to determine the appropriate form or packet to Print or Preview.
- <u>RA</u>: ACCESS will highlight the SPD 3401 Resource Assessment form. You would then either Print or Preview this form.
- <u>Screening</u>: ACCESS will highlight the SPD 539B Request For Assistance form. You would then either Print or Preview this form.

- Call: ACCESS will highlight the COMM REF Community Referral Form. You would then either Print or Preview this form.

2 – Forms

- Form Number Field: Enter the form number in this field and the system will bring that form up to the top of the list.
- Form: This column indicates the type of form that is selected (Case, Call, RA, or Screening).
- Form Number: This column indicates the form number.
- Description: This column gives the name of the form.
- Preview: Use the checkbox to indicate that the form is to be previewed. This button must be selected to print web based forms.
- Print: Use the checkbox to indicate that the form is to be printed (not available for Web forms – must use Preview to print Web forms).
- Sets: Enter the number of sets of forms that are to be printed.
- Web: Use the checkbox to print a form from the forms server.
  - Select this option to get most current version of form from the forms server.
  - Currently the only client data to be populated will be in the side bar or top box of selected form.
    - Web forms will not print a set of 2 or more automatically. The user must select the number of forms to be printed (if more than one is required) from the print menu.
    - Duplexing is not automatic. If needed it must be selected from the print menu.
    - Only one Web form may be selected for printing at a time.
    - A Web form and ACCESS form may not be selected for printing at the same time.

3 – Printing Defaults

- Clear Defaults: If this box is checked on any of the forms listed, the forms will print with the default answer(s) of "no" left blank.
- Client Demographics: If this box is checked on any of the forms listed, the forms will print with client demographics only.

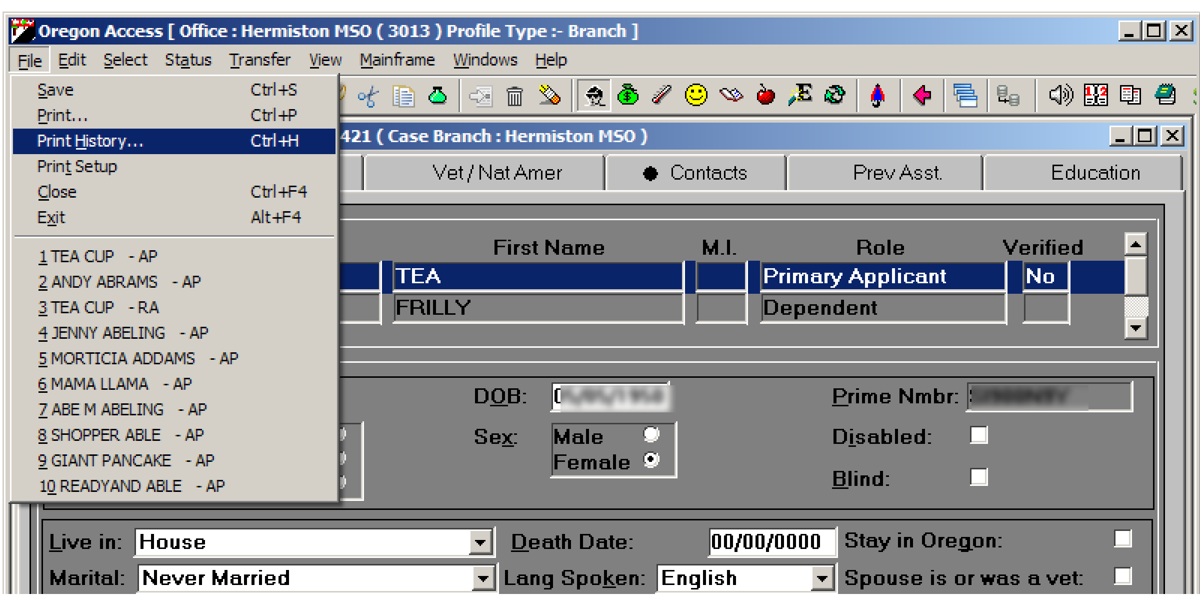
- 539A Duplex options: Short-edge binding means that the form will be printed to fit in a hard file to be bound at the top. Long-edge means it will pint to be bound at the side; like a book.
- Date Sent: Will default to "today's" date. If no date is needed, click the No date radio button.
- Select Worker: Since multiple workers may be assigned to the case, it may be necessary to select the worker's name you want to print on the form. Click the drop down box for options.

4 – Buttons

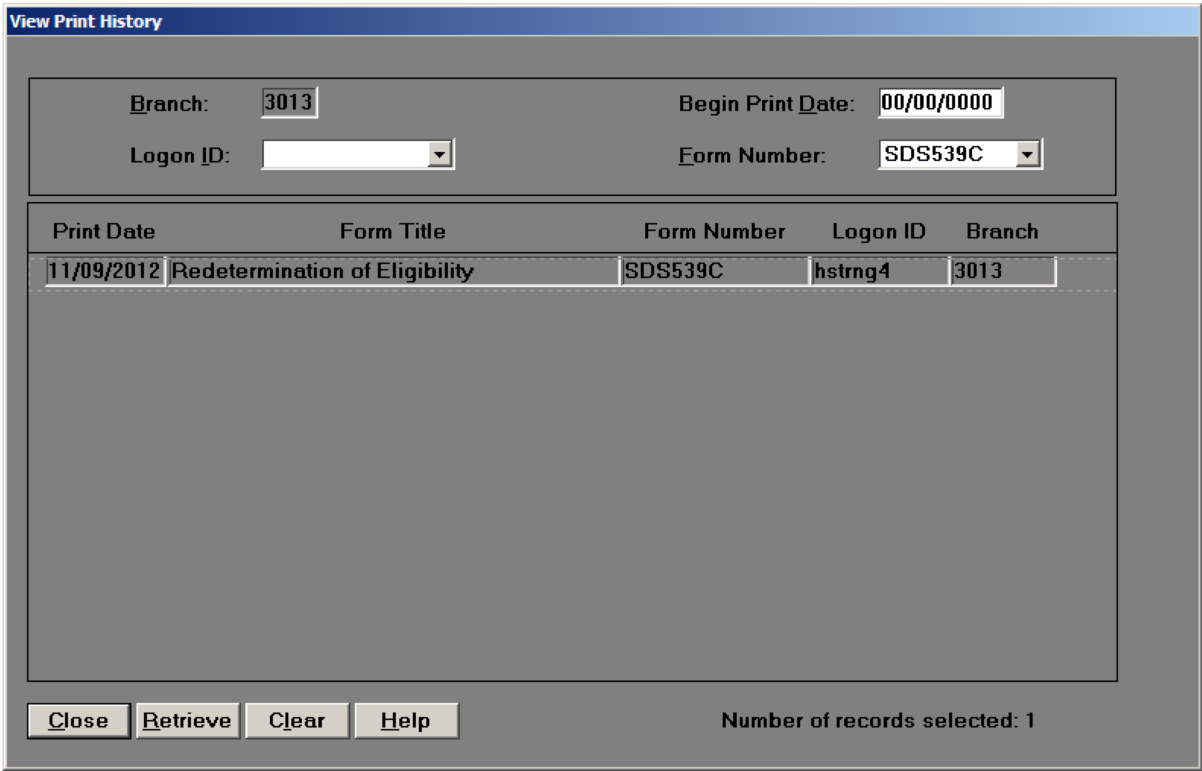
- Close: Clicking this button will close the print screen.
- Help: Clicking this button will open the Print Help window.
- Preview: Clicking this button will open a preview of all forms marked for preview. It is necessary to select Preview to print Web forms.
- Print: Clicking this button will print all forms marked for preview. This does not apply to Web forms.
- Printer Setup: Clicking this button allows the user to set the printer with specific criteria.

Print History

The Print History screen is a little different. It is accessed through the File menu.



This screen is used to view a history of the documents that have been printed for the application you currently have open.



1—Search Criteria

You may enter as much, or as little, search criteria as you choose.

- Branch: Defaults to the branch into which the user is logged in
- Begin Print Date: If you are only interested in forms printed since a particular date, you may enter the first date for which you want the system to retrieve print history records.
- Logon ID: Enter a specific logon ID that you are interested in
- Form Number: Select the form number for which you wish to search.

2 – List

A list of printed forms that match the criteria entered in the search criteria portion of the screen.

- Print Date: The date on which the form was printed
- Form Title: The title of the printed form
- Form Number: The number of the printed form
- Logon ID: The logon ID that requested the printed form
- Branch: The branch from which the form was printed

3 – Buttons

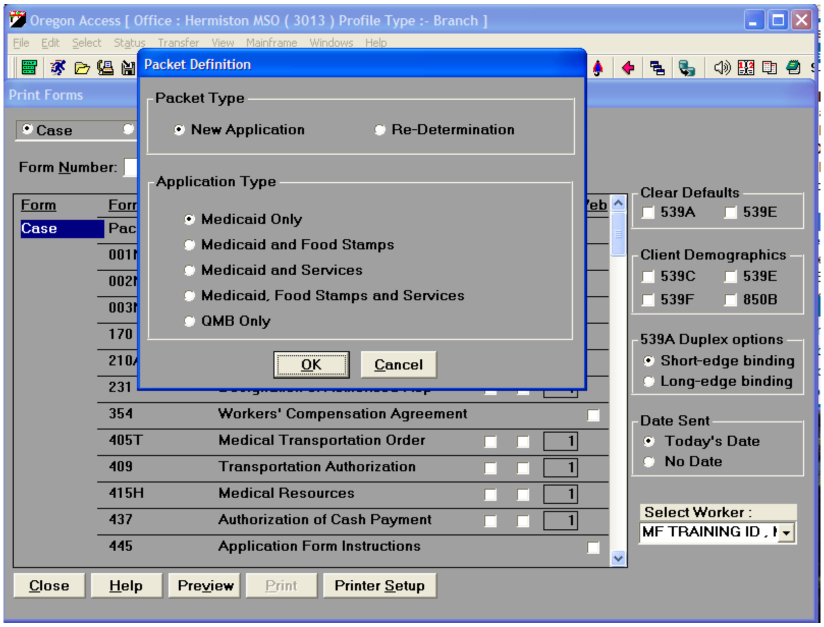
- Close: Closes the Print History window
- Retreive: Initiates a search for print history records matching the search criteria entered
- Clear: Clears the search criteria entered
- Help: Accesses the system help information

Print History, like the Print function, only works for the application you currently have open and on top in Oregon ACCESS.

Packet Generation

Particular sets of forms used for different categories of clients are grouped into packets.   A form will only print if the appropriate information has been entered in the application or if the form is relevant to the application. Some forms will not print if the "Verified" box has been checked.

There are several options when printing different packets of forms. Each is a bit different depending on the forms you are printing. For example on a "Packet" you get to choose what forms will print depending on what the person is applying for. Use the radio buttons on the pop up windows to make your choice.


Oregon Access [Office : Hermiston MSO (3013) Profile Type :- Branch]
File Edit Select Status Transfer View Mainframe Windows Help
Print Forms
Packet Definition
Packet Type
New Application
Re-Determination
Application Type
Medicaid Only
Medicaid and Food Stamps
Medicaid and Services
Medicaid, Food Stamps and Services
QMB Only
OK
Cancel
Case
Form Number:
Form
Case
354 Workers' Compensation Agreement
405T Medical Transportation Order
409 Transportation Authorization
415H Medical Resources
437 Authorization of Cash Payment
445 Application Form Instructions
Clear Defaults
539A
539E
Client Demographics
539C
539E
539F
850B
539A Duplex options
Short-edge binding
Long-edge binding
Date Sent
Today's Date
No Date
Select Worker :
MF TRAINING ID
Close
Help
Preview
Print
Printer Setup

LIST OF INDIVIDUAL FORMS OR PACKETS AVAILABLE:

Case:

Packet	Packet Generation
001N	CAPS 2 Service Plan Form
002N	CAPS 2 Assessment Summary Form
003N	CAPS 2 Client Details Form
170	Client Complaint/Discrimination Form
210A	Notice of Information or Verification
231	Designation of Authorized Rep
354	Workers' Compensation Agreement
405T	Medical Transportation Order
409	Transportation Authorization
415H	Medical Resources
437	Authorization for Cash Payment
445	Application Form Instructions
450N	CAPS 2 Liability Worksheet
454D	Report on Deceased Person
458A	Financial Planning Title XIX
458AN	CAPS 2 Financial Planning Title XIX
458I	Financial Planning Title XIX
460	Pre Admission Screening for MI/MR
462A	Medical Program Information
462S	SPD Medical Program Information
514	Request for Exception
514a	Exception Request Worksheet
538AN	CAPS 2 Referral to SSA
Recert.	539A Recert. Version
539A	Application Form
539C	Redetermination of Eligibility
539E	EPD - Application Form
539F	Food Stamp Filing Form
539H	Notification of Pending Status
539L	Insurance Verification
539R	Rights and Responsibilities
539V	Financial Verification
540 (RU/SP)	Notification of Planned Action
540A	Agreement to Take Action

541	Notification of Approval
542	Designation of Mgmt of Pers. Funds
546N	CAPS 2 In-Home Service Plan
595N	CAPS 2 Home Delivered Meals
598N	CAPS 2 Task List
620	Presumptive Medicaid Disability De
647N	CAPS 2 Real and Personal Property
708	Disability Referral
729	Admin Medical Exam
729A	Psychiatric or Psychological Eval
729D	Medical Record Checklist
729E	Physical Func Capacity Report
729F	Mental Residual Function Capacity
729G	Rating of Impairment Severity
850A	Adjusted Income Calculation Works
850B	Employment and Independence Exp
850C	Request of Approved Account
850E	Client Contribution Agreement
905	Notification of Case Transfer
914	Service Options
1005	Alternate Format Notification
1219HE	Verification of Housing Expense
1238B	List of Medical Expense
2090	Notice of Privacy Practices
2092	Acknowledgement of Receipt
2099	Release of Health Information
3400	Information and Referral for Low Inc
7207	Continuity of Care Referral
7207N	CAPS 2 Continuity of Care Referral
7208MN	CAPS 2 Medicare Advantage Plan Election
9001	Client Discrimination
9016	Refusal to Allow VUD
COMM REFN	CAPS 2 Community Referral
NAPIS	NAPIS Registration Form
NFCSP	NFCSP Form
Pay-In	Pay-In Worksheet
COMM REF	Community Referral
3401	Resource Assessment

539B Request for Assistance

Oregon ACCESS Reports

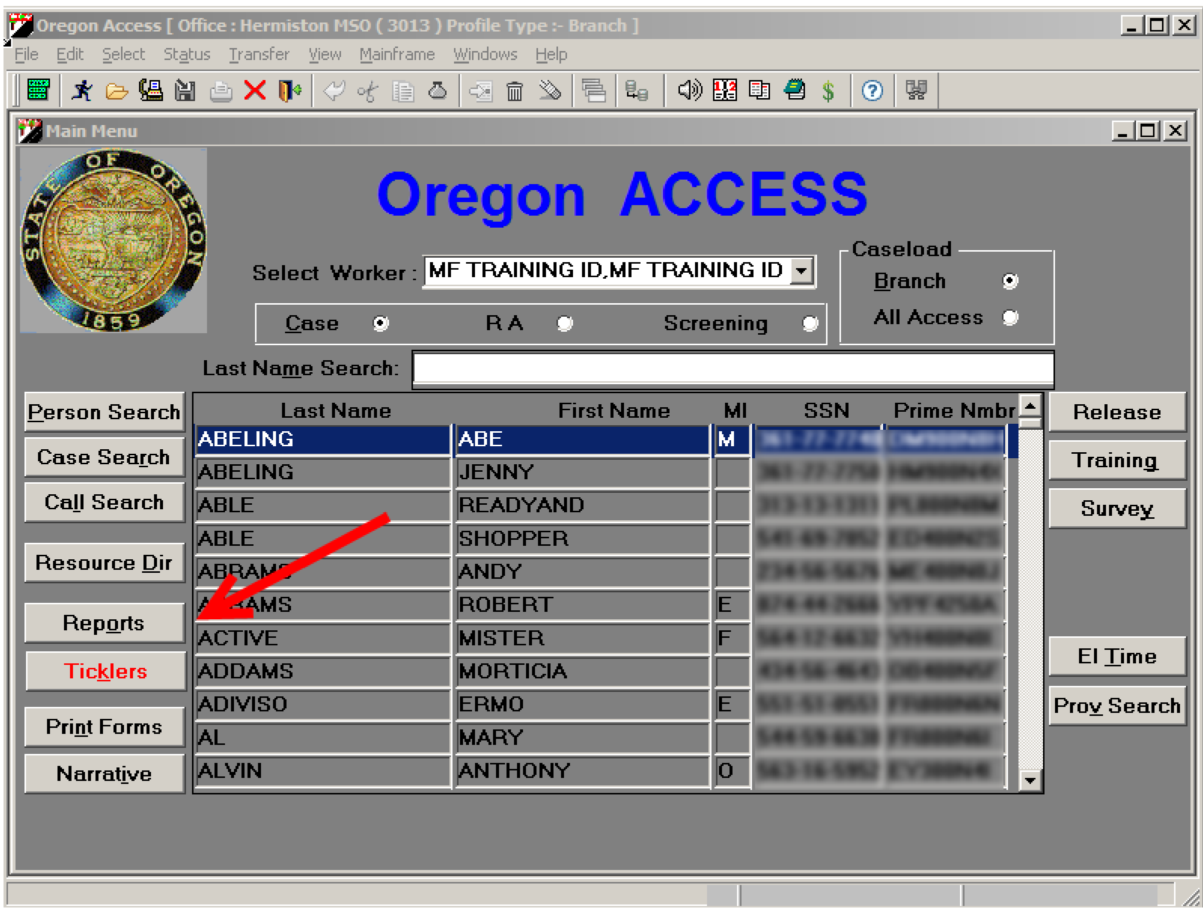
Reports

Data held within Oregon ACCESS is used to generate a variety of reports. There are several ways to access the Reports window.

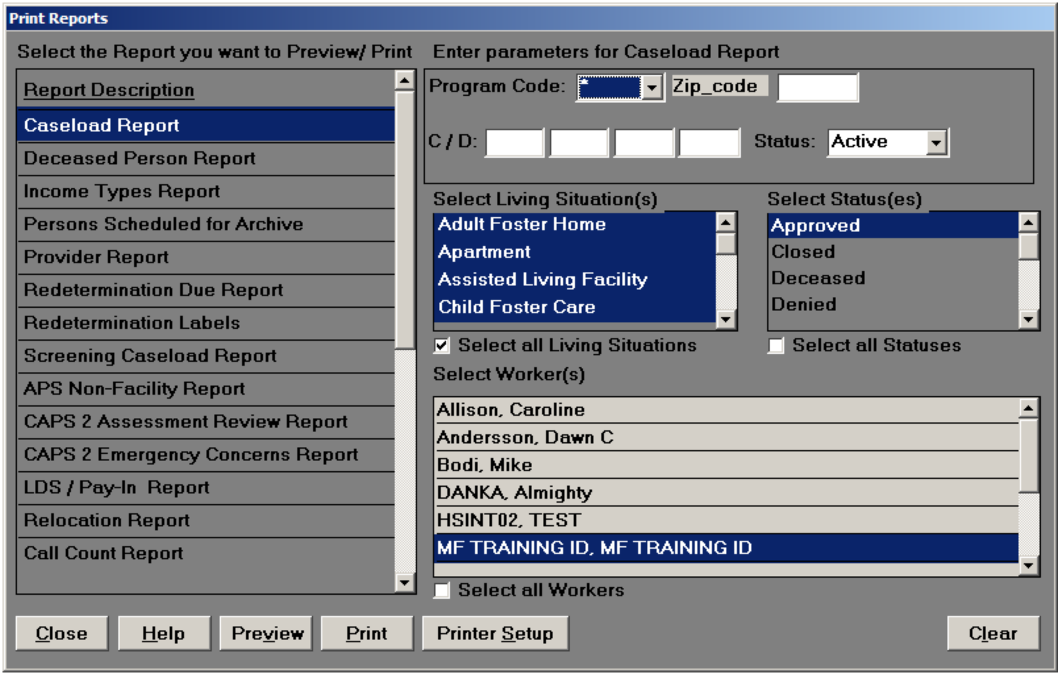
1. Click on the Report button on the tool bar. 

2. Click on the Reports button on the main menu

3. Choose Reports in the select menu



Reports Window



1 – Report Description/List

On the left side of the screen is the list of Reports to choose from.

Under the Report Description, scroll through the list to find the report to be generated. Highlight the report by clicking on it. Each report will have its own unique Parameters that you will need to complete before that report can be previewed or printed.

2 -- Parameters

On the right hand side of the screen, you may enter specific report parameters. These are ways in which you can narrow the results displayed on your report. Each report has its own list of available parameters.

Most Reports generated, depending on the type of report, will default to you (based on your log-on ID) as the Worker. If a different worker is desired select that worker's name, or select multiple workers. For all workers click the Select all Workers check box at the bottom of the screen. If the Unassigned Worker is selected it will produce a report of all cases which have the Unassigned check box, on the Overview tab in the Benefit section of the application, checked.

The Deceased Persons, all EI, all EPD, and all ACS reports that are generated will default to your Branch. These reports will ask for Dates and Status as well.

For OAA Reports, several different Qualifiers must be selected to generate a report. Including Status, Age Range, Nutritional Risk, and Service Dates.

For the APS Non-Facility report and the Persons Scheduled for Archive Report, the Parameters are Dates. APS will also ask for Investigation Status.

Inactive and archived records will not show on reports.

3 – Buttons

- <u>Close</u>: This will close the Reports Window
- <u>Help</u>: This will provide information about the reports, how they are generated, etc…
- <u>Preview</u>: Displays a preview of the selected report using the parameters specified. From the preview window, you will be given the opportunity to print the report.
- <u>Print</u>: Prints the selected report using the parameters specified.
- <u>Printer Setup</u>: Provides printer setup options.
- <u>Clear</u>: Clears the parameters entered by the user and returns to the default parameter settings.

Report Types

- ACS Work Restrictions: Pulls from CA/PS Care Planning section.

- APS Non-Facility Report: The report categories include; Complainant, A/V Characteristics, Living Situation, Alleged Perpetrator, Category, Type of Mistreatment, Conclusion, and Outcome. It generates Subtotals for each Category and a Total of all Protective Services and Elder Abuse complaints statewide. The date range parameters used to generate the report will be displayed at the top of the report. If you have rights to access Central (All ACCESS) data you will have the ability to obtain statewide APS information. If the report desired is for a specific branch, use the Server button to select that branch. When on the Report screen the report will default to the branch selected. If the report desired is for All ACCESS, click the All ACCESS radio button.

- CA/PS Action Report: When CA (Client Assessment) Action Report is selected enter the Date parameters for your report. Both Start and End date fields are mandatory. This report will pull information from Current and/or Pending assessments only. This report is generated from Equipment and/or Referral ticklers indicated by the worker in the Care Plan section of the Client Assessment. For the client to show on the report, an Alert Date, within the date parameters selected, and Who Acts must be entered in the assessment on the applicable screens. The report will include case Name, tickler Type, Description, Who Acts, Timeline, and the Assessment Type. The top of the report will include all report parameters selected as well as the date printed.

- CA/PS Assessment Review Report: When Assessment Review Report is selected enter the parameters for your report. Select report Start and End dates, Zip Code, Living Situation, and case Status. Assessment Status will default to Current. Start and End dates are mandatory fields. The report will list all clients who have an assessment review date within the date parameters selected. This date comes from the Review Date (Revw. Date) field on the Assessment Maintenance screen within the client assessment section of the case. The report will include case Name, Prime Number, Current Living Situation, Medical Case Status, Assessment Review Date, and the Assessment Type. The top of the report will include all report parameters selected as well as the date printed.

- <u>CA/PS Emergency Concerns Report</u>: When CA (Client Assessment) Emergency Concerns Report is selected enter the desired parameters for your report. Assessment Status, Current, Pending, or Both, is mandatory. This report is generated from the Community Alert screen in the Environment section of the Client Assessment. For a client to show on the report, a Community Concern of Emergency Services or Natural Disasters, must be identified. Comments entered in the Comments field on this screen will print on the report. The report will include case Name, Address (resident), Phone Number (home), Area(s) (of concern), Concern(s), and any Community Comments entered. The top of the report will include all report parameters selected as well as the date printed.

- <u>Call Count Report</u>: The Call Count Report will give you the total number of calls within the date parameters selected. The report will include the Reason for Call and the Source (phone, fax, email, etc). If you want a report listing only calls for a particular reason, Energy/Heat for example, then select only that Reason for Call as a report parameter. The report will also include the number of Unduplicated calls for your branch.

- <u>Call Outcome Report</u>: The Call Outcome Report will list the Outcome of all calls within the date parameters selected. For example, how many referrals were made, how many were given Information and how many turned into a screening, etc.

- <u>Caseload Report</u>: When Caseload Report is selected enter the parameters for your report. Select a Program Code (* is for ALL programs), Living situation, case Status, Zip Code and/or any applicable C/D (case descriptors) which will further identify your case load. Program Code, Living Situation, and Case Status are mandatory fields.

- Deceased Person Report: The Deceased Person report has been developed for the Estate Administration Unit. The report will list all clients, for whom a date of death has been entered, within the date parameters selected, based on the date the date of Death was entered into ACCESS. Both Start and End Date are required. The report will include Client Name, SSN, Prime Number, Date of Death, and the Date Reported. The date reported pulls from the date information is entered into ACCESS. The report will default to your branch and will only be available to print information from your branch. EAU may select ALL branches to get a statewide list.

- EPD Branch Report: The Employed Persons with Disabilities (EPD) Report will generate a list of EPD clients, in your branch, who have an EI case. Report parameters include a Report Start Date and a Report End Date. The Report Start and End date fields are mandatory fields. The EPD report will include the following columns: Client Name, SSN, EPD Start and End Dates, Cost Share Start and End Dates, Cost Share Amount, Premium Start and End Dates, Premium Amount, Employment and Independence Expenses (EIE) Amount, # EIE Records, # Approved Accounts, and Balance at Certification. A check box has been added to the EI Assessment tab for EPD. If this box is checked the client's name will show on the list. An EPD tab has been added to the EI Module. This tab has fields for you to enter EPD information that will pull to the EPD Branch Report. Included on this tab are fields for EPD Dates, Cost Share information, Premium information, EIE purpose and frequency, and Account information. Other EPD Reports available are:
    - EPD Work Restrictions Report
    - EPD Empl. & Independence Expenses Report
    - EPD Approved Accounts Report
    - EPD Client Contribution Report

- Follow-Up Call Report: The Follow-Up Call Report will list all calls which are identified as Need Follow Up, within the date parameters selected. This information is found on the Call Info tab in the Call Module. Check the Yes radio button if follow-up is needed. The report will list the Date of the call, Caller Name, Client Name, Reason for Call, whether or not it is Urgent, and the Call ID.

- Income Types Report: When Income Types Report is selected enter the parameters for your report. Select an Income Type. The report will retrieve a list of clients who have that specific type of income. The report generated will default to you (based on your log-on ID) as the worker. If a different worker is desired select that worker's name. If you wish a report for all workers click on the Select all Workers check box at the bottom of the screen.

- LDS/Pay-in/Spend Down Report: When LDS/Pay-in/Spend Down Report is selected enter the parameters for your report. Select a Type. The report will retrieve a list of clients who have an LDS, Pay-in, or have a Spend Down. Choose ALL if you want a complete list of clients who have any of these calculations. If ALL is selected they will be listed by Type (LDS, Pay-in, spend Down. All reports will give the applicable amounts.

- OAA Client List: When OAA Client List is selected enter the parameters needed for your report. The case Status will default to Approved, although a different status may be selected if needed. The All selection will display "all" clients applying for OAA benefits, regardless of status. Month of Birth, Age Range, Nutrition Risk, Address Type and Zip may also be selected to further define the report desired. Additional fields allow for specific Service Dates to be entered: if entered, the Service Start Dates will pull information on OAA services which started between the dates entered; Service Open During will pull the next review date from the OAA Benefits Tab. he District (Dist) Code will default to your district, but a different district may be selected. Select a Site, Service, Qualifier Type (or All Qualifiers), and Provider Name, if desired. The top part of the report will identify the parameters used to print the report. The report will print the client list, in alphabetical order, based on the parameters selected. If the Arrange by Site check box is checked, the list will be printed in alphabetical order, by site. The report will include: Client Id, Name, Address, address Type (mailing/residence), Telephone, Date of Birth, and Language Spoken/Read.

- OAA Client Mailing List: When OAA Client Mailing List is selected enter the parameters needed for your report. The case Status will default to Approved, although a different status may be selected if needed. The All selection will display "all" clients applying for OAA benefits, regardless of status. Month of Birth, Age Range, Nutrition Risk, Address Type and Zip may also be selected to further define the report desired. Additional fields allow for specific Service Dates to be entered: if entered, the Service Start Dates will pull information on OAA services which started between the dates entered; Service Open During will pull information on OAA services which are open during the dates entered; and the Next Review During will pull information on OAA services which have a review date between the dates entered. This list will allow you to print mailing labels. The labels may be sorted by Client ID, Last Name, or Zip Code. Selecting 1 up will print the labels with one list down the page; selecting 2 up will print the list with 2 across and down the page; and selecting 3 up will print the list with 3 across and down the page. The District (Dist) Code will default to your district, but a different district may be selected. Select a Site, Service, Qualifier Type (or All Qualifiers), and Provider Name, if desired. Once you have entered the information for the mailing labels needed, click on either the Preview or Print button at the bottom of the screen. If you click on Print the record will automatically be printed. If you choose Preview it will preview your record. When you preview the record there is a Print button which will allow you to print the record from what is displayed on the screen. The report will print the labels based on the parameters selected. If the Arrange by Site check box is checked, the list will be printed by site. The labels will include Client Name and Mailing Address.

- OAA Monthly Transaction Record: When Monthly Transaction Record is selected enter the parameters for your report. Select a Site, Service, in that order, and a Qualifier Type if desired. The District (Dist) Code will default to your district, but a different district may be selected. For a Route and/or Provider, select the applicable choice from the dropdown lists provided. Report Date is the only mandatory field and requires only the month and year as a date. Checking the Generate Batch check box will allow for the creation of a "Batch" data entry screen. The batch record generated will be confined to the parameters selected for that monthly transaction record. Clicking this box will generate a "Batch" number for that particular record. The Export button at the bottom of this screen will allow you to "export", or download, this record and save it locally. When finished click the Close button at the bottom of the screen. The record will print a list of client names in alphabetical order, and be sorted by Service. If printing for Home Delivered Meals, client address will pull and the list will be according to the "route" order. The asterisk (*) and capital letters following the client's address, indicate there is some special dietary requirement(s) for that client. The legend to indicate what the requirement is will be printed on a separate page following the transaction record. Dietary requirements are entered on the NutrRisk/ADL, Special Diet Tab.

- <u>OAA Service & Billing Report</u>: To Print/Preview this report a Batch must have been generated for the applicable date and parameters. When OAA-Service & Billing Report is selected enter the parameters needed for your report. The Service Date Range will identify the time period for which you want the report. This is a mandatory field. The Report Type will default to Service & Billing Report. The District (Dist) Code will default to your district, but a different district may be selected. Enter Site, Provider Name, and Service, if desired. A specific Qualifier, or All Qualifiers, is mandatory. When this report is retrieved, the Billed Units may be adjusted as needed. To adjust this amount on the report, click on the amount to be adjusted and type in the correct amount. For example, if the Units Billed should be different than the Actual Units, change the Units Billed accordingly. The Total Billed amount will automatically be adjusted by multiplying the new Billed Units times the Unit Rate. The report will also capture the number of eligible and non-eligible Monthly Guest Units. This amount will be added to the total calculation. The top part of the report will identify the parameters used to print the report. The report will print the clients in alphabetical order, by Service, based on the parameters selected. If a particular Service is selected, the clients will be printed in alphabetical order specific to that service. The report will include: Client Id, Name, Service/Qualifier, Authorized (Auth.) Units, Actual (Act.) Units, Billed Units, Unit Rate, and Total

Billed. The Total Unduplicated Client Count will identify clients receiving only one service. For example, if a client is receiving Congregate Meals, Home Delivered Meals, and In-Home Services, he will only be counted once when the report is printed for ALL services. If the Billing Summary radio button, in the Report Type box, is selected the report will "summarize" the Service and the actual amounts billed.

- Person Scheduled for Archive: When the Persons Scheduled for Archive report is selected enter a Start and End date for the period of time you want the report for. The report will generate a list of ALL (statewide) persons scheduled to be archived, based on predefined criteria, (see Active/Inactive/Archive) during the time frame selected. It will be listed by client last name and include social security number, prime number, date inactivated, date of death, the scheduled archive date (if within the date parameters selected), and the module which is to be archived (application, EI, screening).

- Provider Report: When Provider Report is selected it will enable you to generate a report for a given provider that will list all clients associated with that particular provider. Report parameters include Provider Class, Provider Number, and Case Status. A provider class or provider number will be required to print the report. One, multiple, or all case statuses may be selected. The providers listed will be those providers entered on the Service Needs tab. The report will include Provider name, number, and class, as well as their address and phone number. If multiple providers are selected they will be listed in alphabetical order. Client name, case number, and case status will be displayed in alphabetical order, grouped by the provider(s) chosen. If multiple workers are selected the report will be grouped in alphabetical order, by each worker chosen. The report will print with today's date as well as the name of the worker who generates the report.

- Redetermination Due Report: When Redetermination Due Report is selected enter the parameters for your report. Select a Program Code (* is for ALL programs). Select the Start and End Dates you want. To determine the end date, enter the date through which you want to see all reviews which have not been completed. If a start date is not entered the list will include over-due reviews. If the report desired is for a given month only, enter the start and end dates for that month. The report generated will default to you (based on your log-on ID) as the worker. If a different worker is desired select that worker's name. If you wish a report for all workers click on the Select all Workers check box at the bottom of the screen.

- Redetermination Labels: When Redetermination Labels is selected enter the parameters needed for your report. The Program Code will default to all (*), although a different program may be selected, and the Report End Date will default to today's date. The date may be changed as needed. The labels may be printed with three different styles. Selecting 1 up will print the labels with one list down the page; selecting 2 up will print the list with 2 across and down the page; and selecting 3 up will print the list with 3 across and down the page.

- Referral Analysis Report: The Referral Analysis Report will give the number of calls, within the date parameters selected, that have been referred to each resource, along with the resource name. The report will indicate whether the referral was made from an application, call, or screening. If the Combine Selected Workers Data box is checked, the report will print with selected workers data added together. If left unchecked, the report will print for the workers selected, broken down by worker.

- Relocation Report: The Relocation Report will enable you to generate a report of relocations done for a particular worker within the date parameters entered. Report parameters include a Report Start Date and a Report End Date. The Report End date field is mandatory. If no Start Date is entered, the report period (start date) will begin with the earliest "Completed on" date for the selected worker, or in the branch, if All Workers is selected. The report will display Client Name, SSN, Relocation Status and Completed Date (if applicable). Two new fields have been added to the Benefit Overview screen to capture information for this report. A check box exists that is labeled Relocation In Progress and a date field exists labeled

Relocation Completed On. Only one or the other of these fields may be completed. Relocation clients will be listed in alphabetical order with those "in progress" listed first. The report will print per Service Worker selected or for all Service workers with each worker's clients listed in alphabetical order on a different page.

- Screening Caseload Report: The Screening Caseload Report will enable you to generate a report for the screenings a particular worker (screener) has done within the date parameters entered. Report parameters include a Report Start Date and a Report End Date. Both of these fields are mandatory. The report will include the following columns: Screening Client Name, SSN, Screening Date, Worker Assigned (if entered), and the Role of that worker (financial, service, OPI, protective service, etc.) The screening date and screener name will pull from the screening date/screener on the General Info tab in the screening module; worker assigned will pull from the worker name selected from the Select Worker drop-down list on the Financial tab; the type will correlate with the selection made in the Role drop-down list for that worker.

Oregon ACCESS Tips and Tricks

Tips & Tricks

- When a scroll bar appears to the right of an entry field it means there is more information to be displayed.

- A check box selected means Yes. All check boxes default to No.

- A radio button means you need to pick on e of the choices.

- With a drop down box, you can get to the item you want quickly by clicking once in the appropriate field and typing the first letter of the item.

- Up to four applications may be open at one time. These are listed under Windows on the Title bar menu.

- If you right click anywhere in an open case, you will get a menu box that you may choose from. Select where you would like to go in the case and click.

- Buttons and fields can be disabled. If a button is disabled it will have grey text rather than black.

- If a field is disabled, it will have a grey background rather than a white one.

- When a button has a black line around it, you can hit Enter and it will perform the same as if you had clicked on the button.

- Except in CA/PS, a filled circle on a tab means that all information on that tab is complete and has been marked as verified.

- Except in CA/PS, an unfilled circle on the tab means that information has been entered but has not been marked as verified.
- Except in CA/PS, a tab with no circle on it has no information entered in that tab.

- The section that you are in can be identified by the icon that is indented on the tool bar.

- The tab that you are on will be bold.

- Case search will only search your local branch.

- Use Tab or Shift+Tab to move quickly from field to field. Tab will move you to the next field and Shift+Tab will take you back a field.

- Many options are available from the Person Detail screen; activate, inactivate, assign new or view cases, transfer, etc.

- The Back Button will take you back to the last tab in the previous section you were in.

- To access mainframe help screens while in integration use Shift F1. The mainframe help information has been copied into ACCESS.

- If changing the role or detaching a Filing Group/Relevant person you must first remove any benefit by changing their status to Not Relevant or Not Applying in the Benefit Overview section. The details collected on them for this case will be lost.

- Employment income information needs to be entered on the Employment screen. When entered here it will show up as Present Employment in the Income section of the case.

- Income from the sale of property needs to be entered on the Property Transfer screen. This amount will then be displayed on the income screen as Income from Sale of Property.

Hot Keys

The following is a list of keystrokes that may be used to move around ACCESS instead of using the mouse:

ACTION:	KEY STROKE:
Move from field to field on a screen	TAB (forward), OR SHIFT + TAB (backward)
Select a Menu choice	ALT + Underlined Letter
Select a choice from a Menu list	Down arrow, then enter, OR Type the underlined letter
Fill a Check Box	Tab to the box, Press the space bar
Select a Radio Button option	Use the arrow keys to move between choices
Activate a Drop Down list	Tab to the field, Press ALT + down arrow key
Pop-up menu	Shift+F10
To select next tab in a section	Ctrl + T
To select previous tab	Ctrl+Shift+T
Move between tree view and window for	CAPS/APS - F6
To select any item from the tree view	CAPS/APS - Down & Up Arrow
To assign worker to a case	(In Assign worker screen) Spacebar
Close ACCESS	ALT + F4
Select Case	Ctrl + A

Delete Information	Ctrl + D
Close Application	Ctrl + F4
Print History	Ctrl + H
Insert New Record	Ctrl + I
Link	Ctrl + L
Person	Ctrl + N
OAA Batch	Ctrl + O
Print	Ctrl + P
Save	Ctrl + S
Online HELP Contents Page	F1
Online HELP on Topic	Shift + F1