Training Unit for Services and Supports

OREGON DEPARTMENT OF
Human Services
Aging and People with Disabilities

Oregon Project Independence Medicaid MMIS System Guide

October 3, 2025

Version 2

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Plan of Care (POC): In-Home Care Agencies (IHCA)

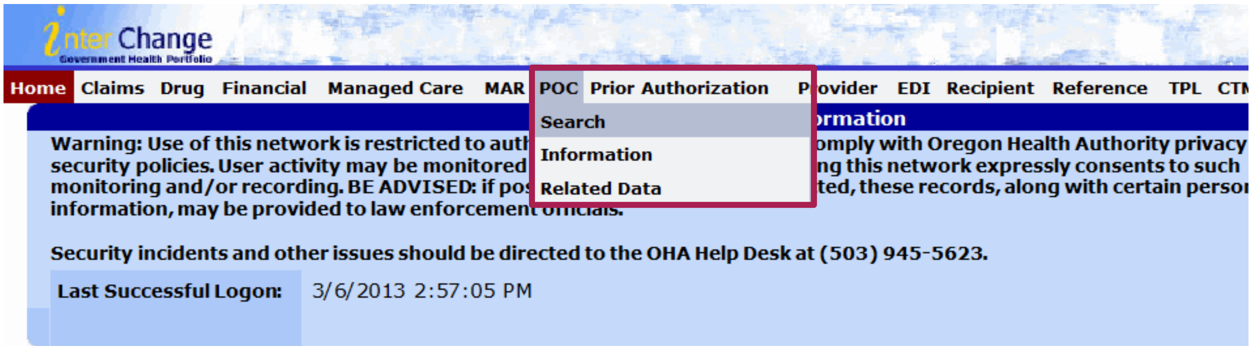
Prior Authorizations (PA):

Emergency Response System (ERS)

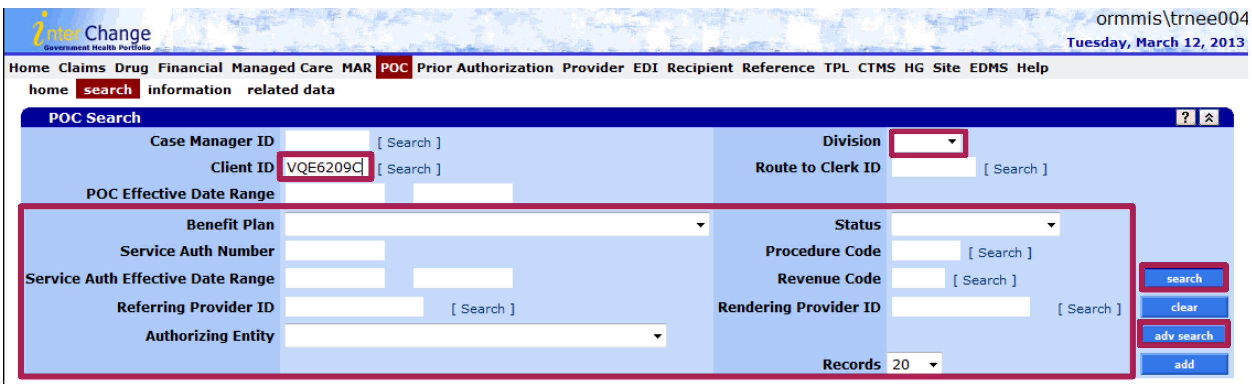
Long-Term Care Community Nursing (LTCCN)

Service Case Managers (SCM) must verify approval dates in MMIS when a benefit plan is approved. An OPI-M MMIS referral to Central Office (CO) may be required each time OA approves a benefit plan. Select APD-IM-24-089 to view the latest transmittal on verifying active OPI-M plans in MMIS and making referrals to CO.

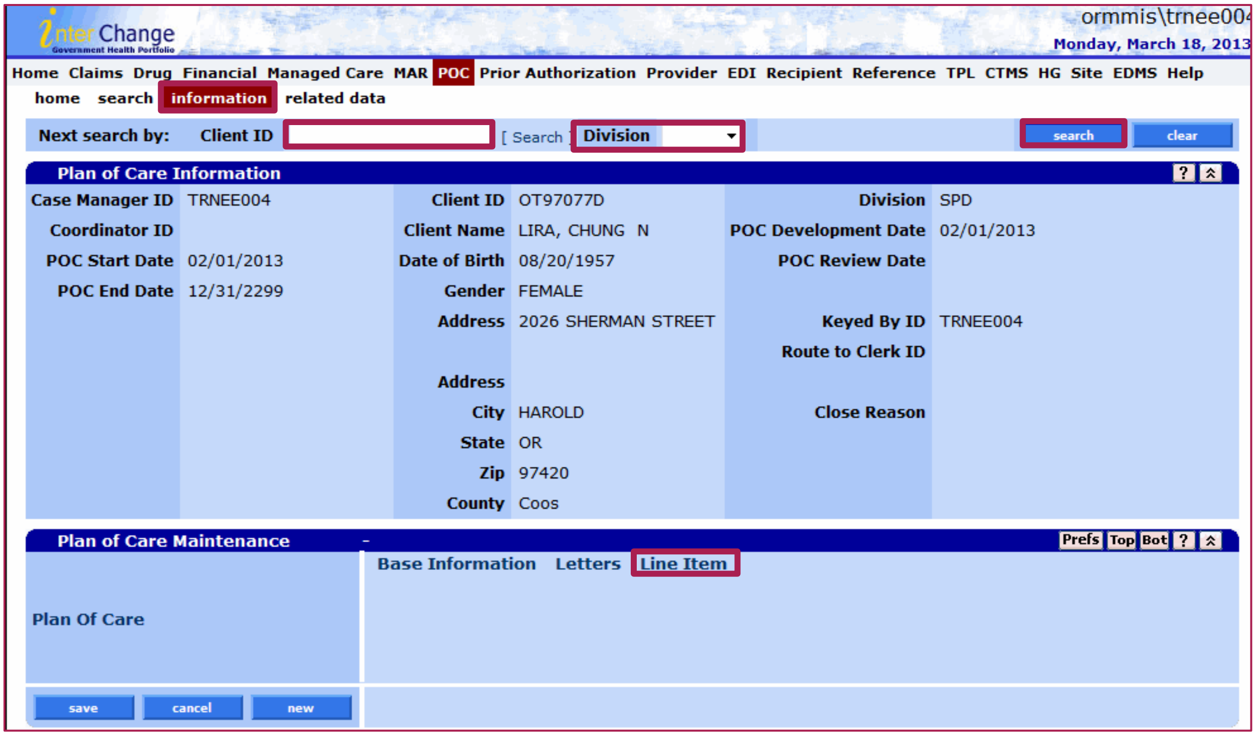
Find Existing



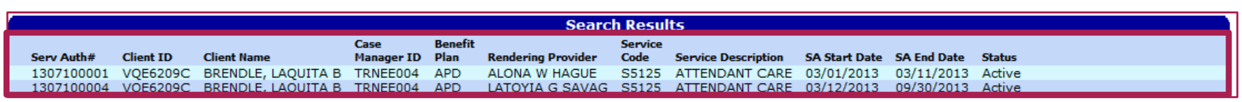
- Select "POC" from the MMIS home screen menu. Select "Search" in the POC submenu.



- Enter search criteria, like a consumer's prime number/Client ID, in the "POC Search" panel fields.
- Select "SPD" in the Division dropdown.
- Select "search" button.
- MMIS searches the system and auto-fills the Search Results panel.



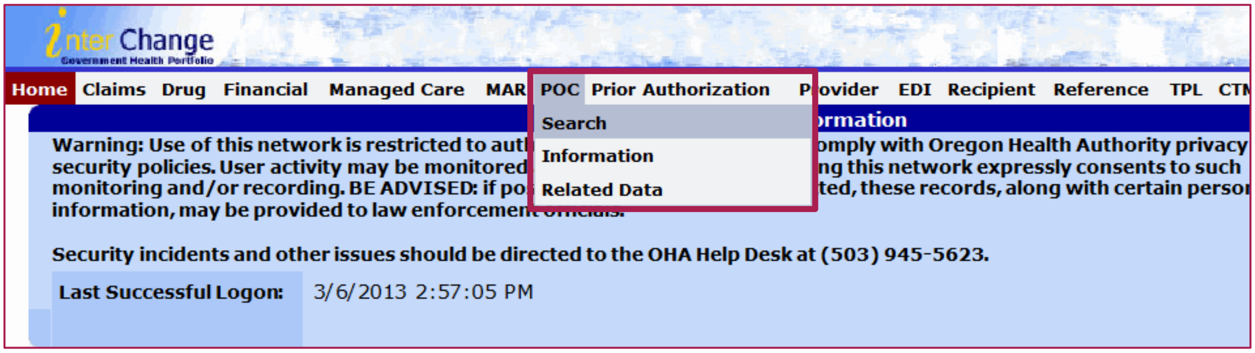
- Alternatively, select “POC” from the MMIS home screen menu, then choose “information” from the submenu.
- Enter the consumer’s Prime number in the Client ID field.
- Select “SPD” from the “Division” dropdown in the “Next search by:” bar.
- Select the “search” button.
- Select "Line Item" from the “Plan of Care Maintenance” panel.



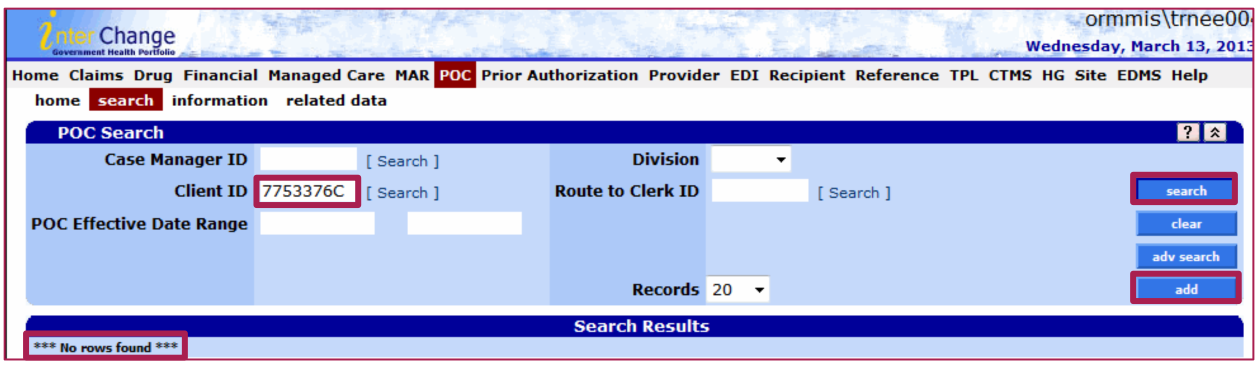
- Select the desired line-item in the “Search Results” panel.
- Use the service Auth #, SA End Date, and other columns to identify the correct line-item.
- If Search Results display ***No rows found*** go to Create. to build a new POC.

Create

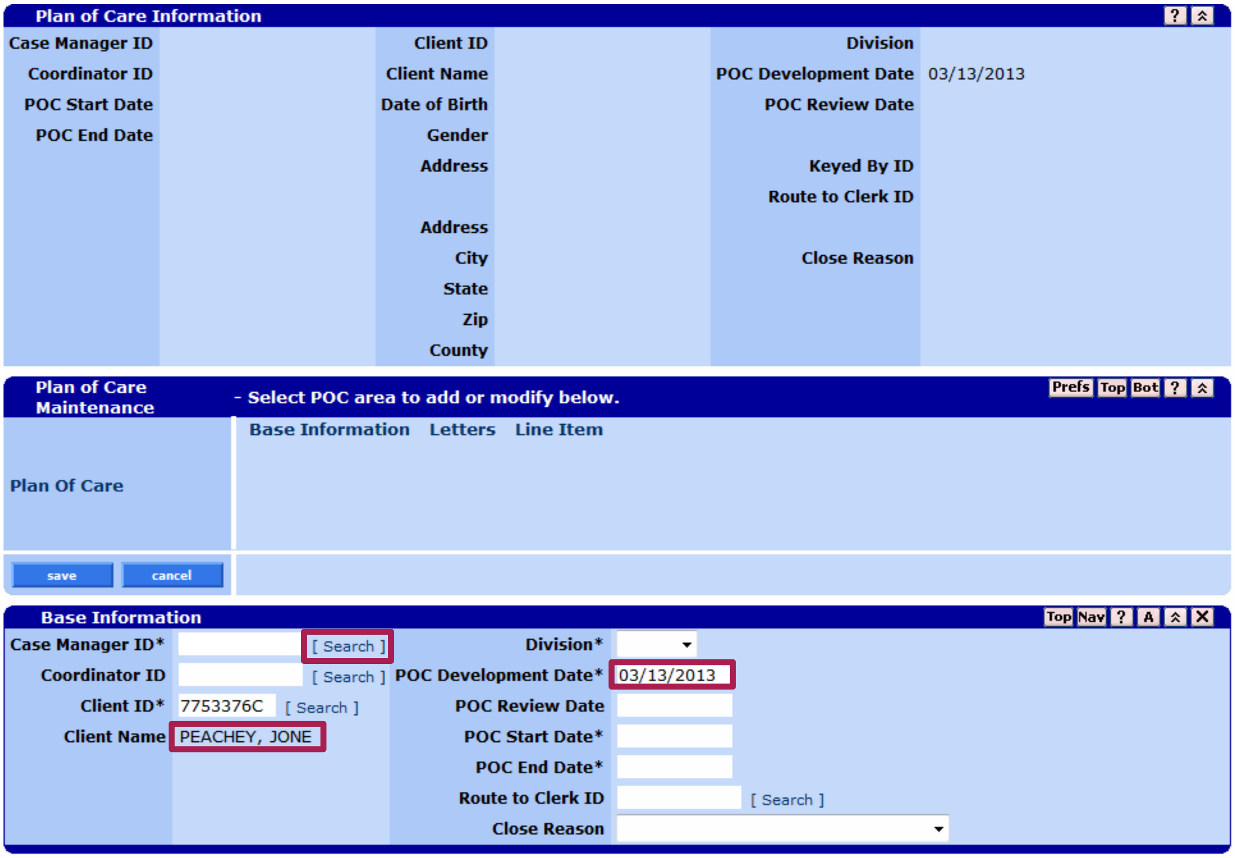
*****Only required if no POC exists (excluding behavioral health plans).*****



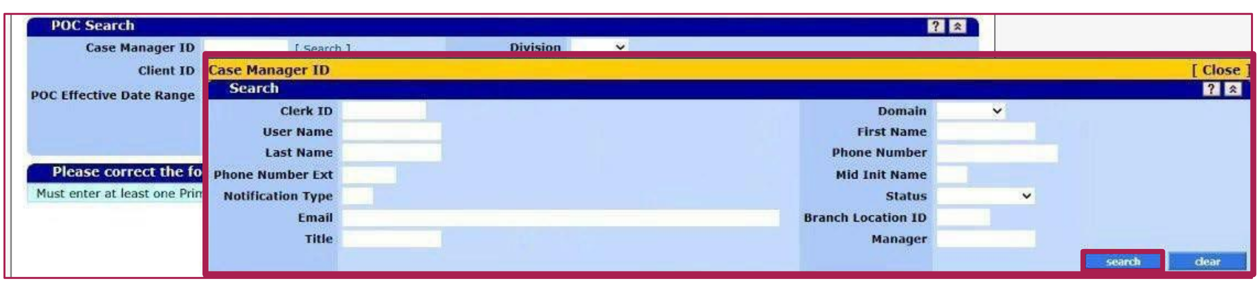
- Select "POC" from the MMIS home screen menu.
- Select "Search" in the POC submenu to check for existing POCs.



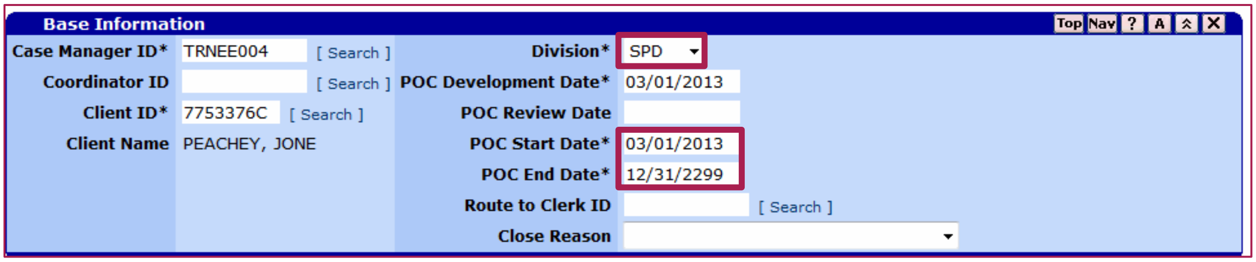
- Enter the consumer’s Prime number in the Client ID field of the POC Search panel.
- Select “search” button.
- The “Plan of Care Information”, “Plan of Care Maintenance” and “Base information” panels appear.
- If no matching ID exists, *****No rows found***** appears in the Search Results panel.
- Select the add” button.
- Go to Find Existing if line-items populate under “Search Results”.



- Scroll down to the “Base Information” panel.
- MMIS auto-fills the current date in the “POC Development Date” field and the client’s name in the “Client Name” field.
- Enter your Case Manager ID into the “Case Manager ID” field.
- Select “[Search]” next to the “Case manager ID” field if you don't know your ID. This opens the Case Manager ID search screen.



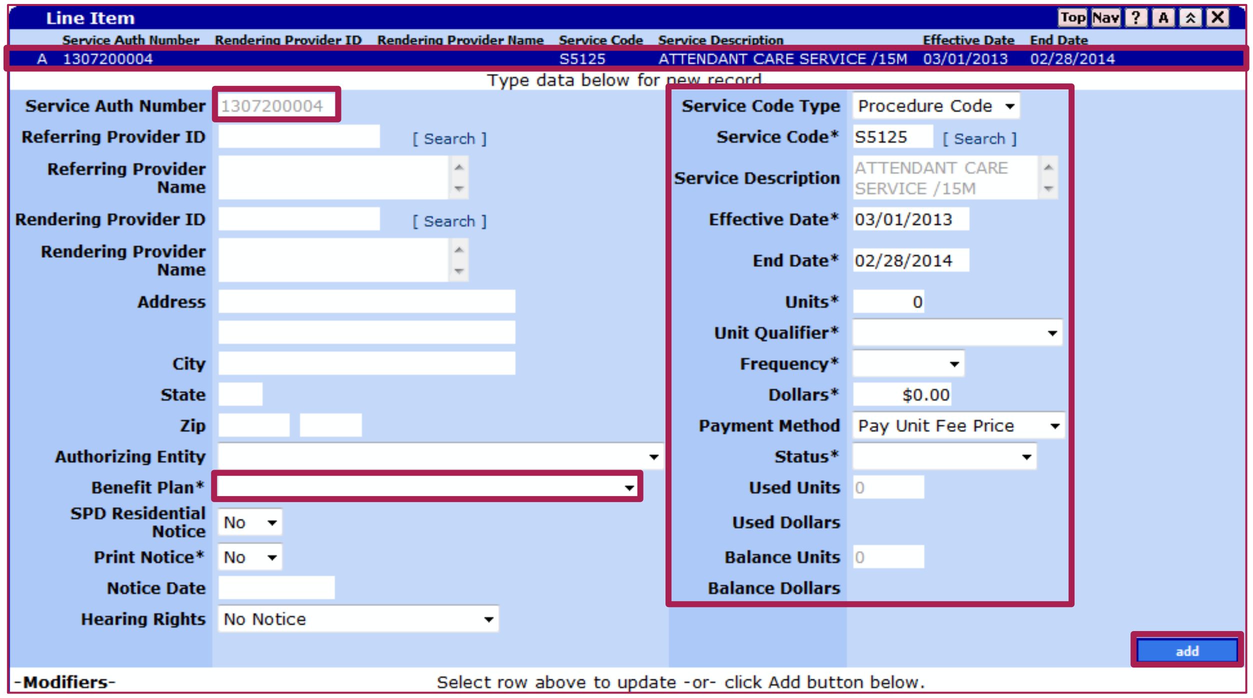
- Enter your information in the “Case Manager ID Search” panel field.
- Select the “search” button then select your information from the results.



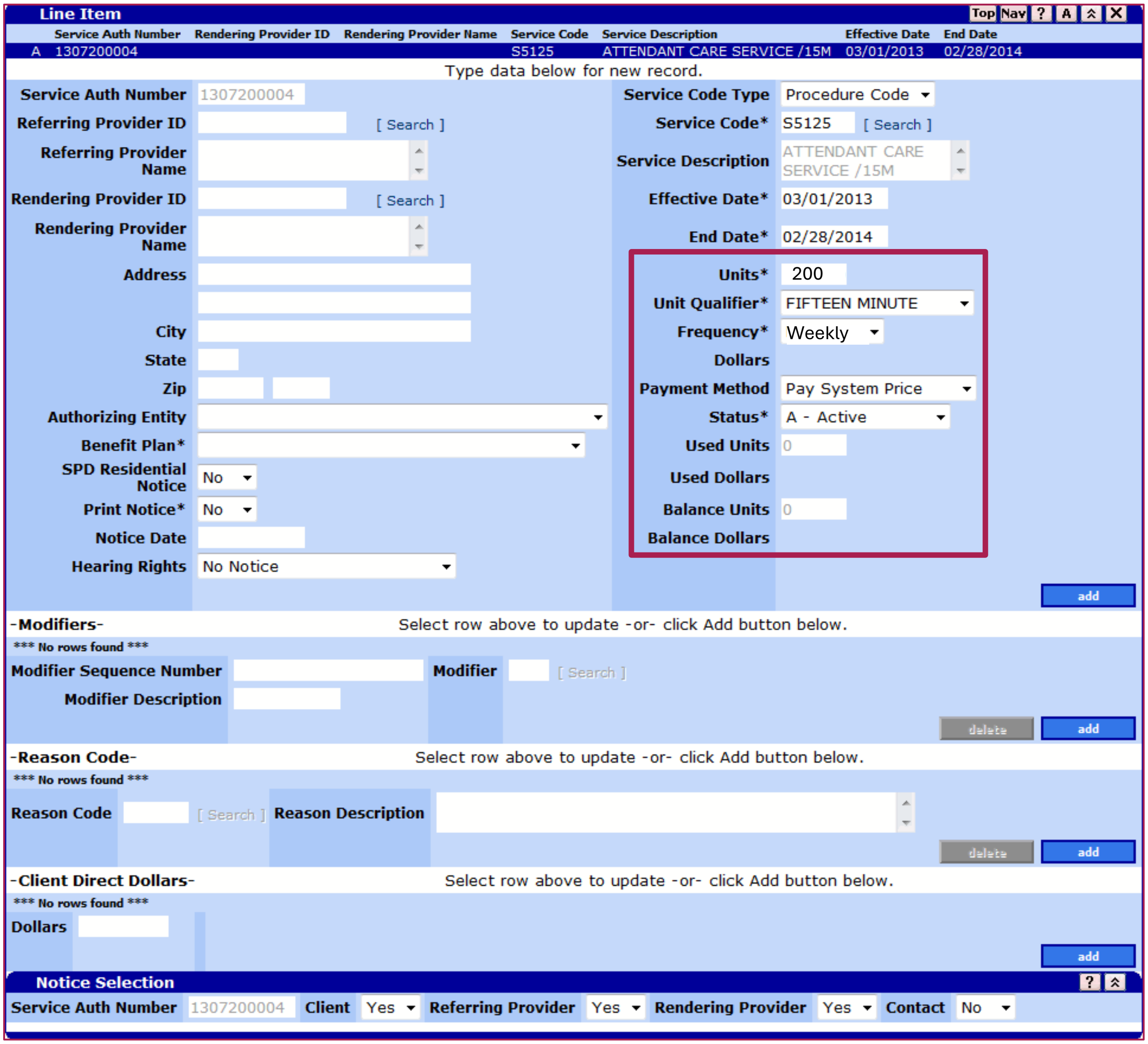
- Return to the “Base Information” panel.
- Select “SPD” in the “Division” dropdown.
- Enter the date on or before the consumer's first IHCA start date in the “POC Start Date” field.
- Enter **12/31/2299** in the “POC End Date” field (this date never changes).
- Scroll to the “Line Item” panel to add a line-item to the POC.

Base Panel Quick Reference Input Guide

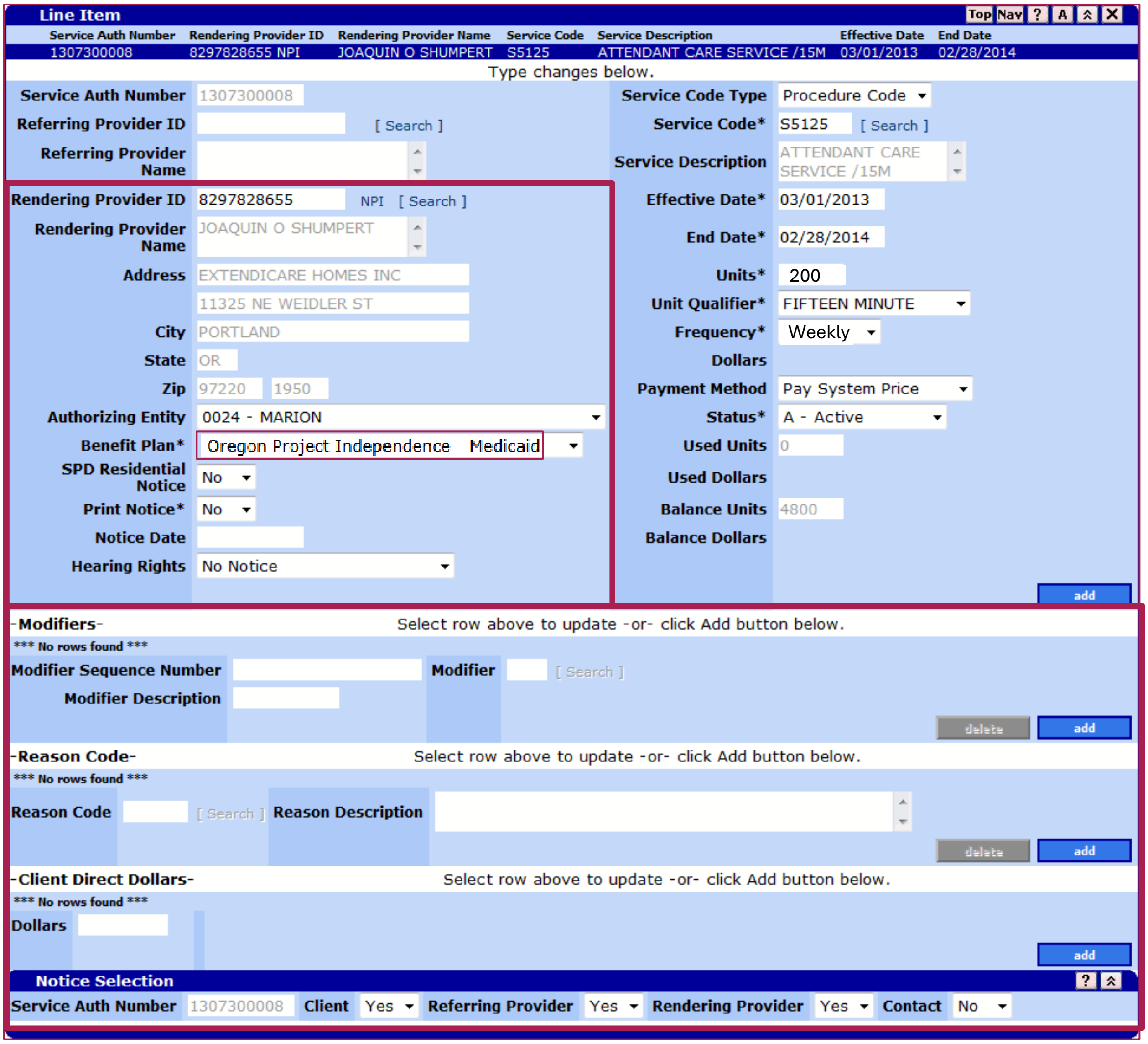
MMIS Category Field/Dropdown	Base Panel Input
Division	Select “SPD”
POC Development Date	MMIS auto fills to current Date
POC Start Date	Enter the date on or before the consumer’s first IHCA start date
POC End Date	12/31/2299



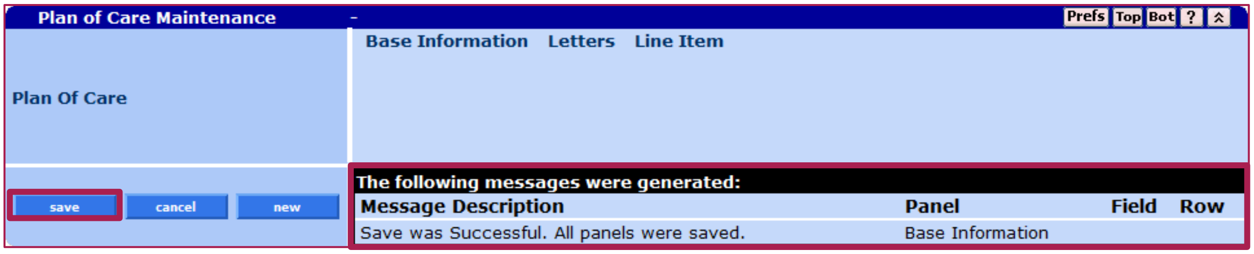
- Select the "add" button at the bottom of the panel.
- A line-item and Service Auth Number appear.
- The Line Item panel fields are enabled.
- **<u>Enter information right to left in the Line Item panel fields.</u>**
- **<u>Avoid pressing <Enter> as it inserts another line item.</u>**
- Keep "Procedure Code" as the default in the "Service Code Type" dropdown.
- Enter T1019 (ADL) S5125 (IADL) or A0090 (Mileage) in the "Service Code" field.
- Add a separate line item for each service code.
- The "Service Description" field updates automatically after entering the service code.
- Enter the effective Date (start of care) and the End Date (one year from start of care) in the "Effective Date" & "End Date" fields.
- The "Benefit Plan" dropdown, on the left side , auto-populates with options.
- Go to [Troubleshooting](#) if the "Benefit Plan" dropdown does not auto-populate.
- Continue updating down the right side of the "Line Item" panel.



- Multiply the number of hours/miles per pay period by 2 and enter the total into the “Units” field (e.g., 100 hours x 2 units = 200 units).
- Select “Fifteen Minute” from the “Unit Qualifier” dropdown.
- Select “Weekly” in the “Frequency” field dropdown.
- Select “Pay System Price” in the “Payment Method” dropdown.
- Choose “A-Active” in the “Status” dropdown.
- “Used Units” and “Balance Units” fields update automatically as claims are processed.
- “Dollars Used”, “Dollars” and “Balance Dollars” fields are disabled.

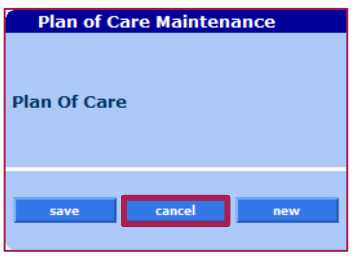


- Enter the IHCA's provider number in the "Rendering Provider ID" field or select "[Search]" to find the provider.
- The "Rendering Provider ID" and "Address" fields auto-populate after selecting the provider.
- Choose your branch on the "Authorizing Entity" dropdown.
- Select "Oregon Project Independence - Medicaid" in the "Benefit Plan" dropdown.
- Do not adjust defaults for "SPD Residential Notice", "Print Notice", "Hearing Right" or any other sections in the "Line Item" or "Notice Selection" panel.



- Scroll up to the “Plan of Care Maintenance” panel and select “save” button.
- The IHCA POC is now set up.

If you create a line-item by mistake:



- Select the “cancel” button in the “Plan of Care Maintenance” panel.
- All unsaved line-items will be canceled.
- Re-enter the POC information, starting with the Base Information panel.

POC Quick Reference Input Guide

Complete input panel fields right to left. ***Tab*** or select through panel fields. Avoid **<Enter>** or saving until all line-items for all procedure codes are complete. Do not change any MMIS category field/dropdowns not listed in the table.

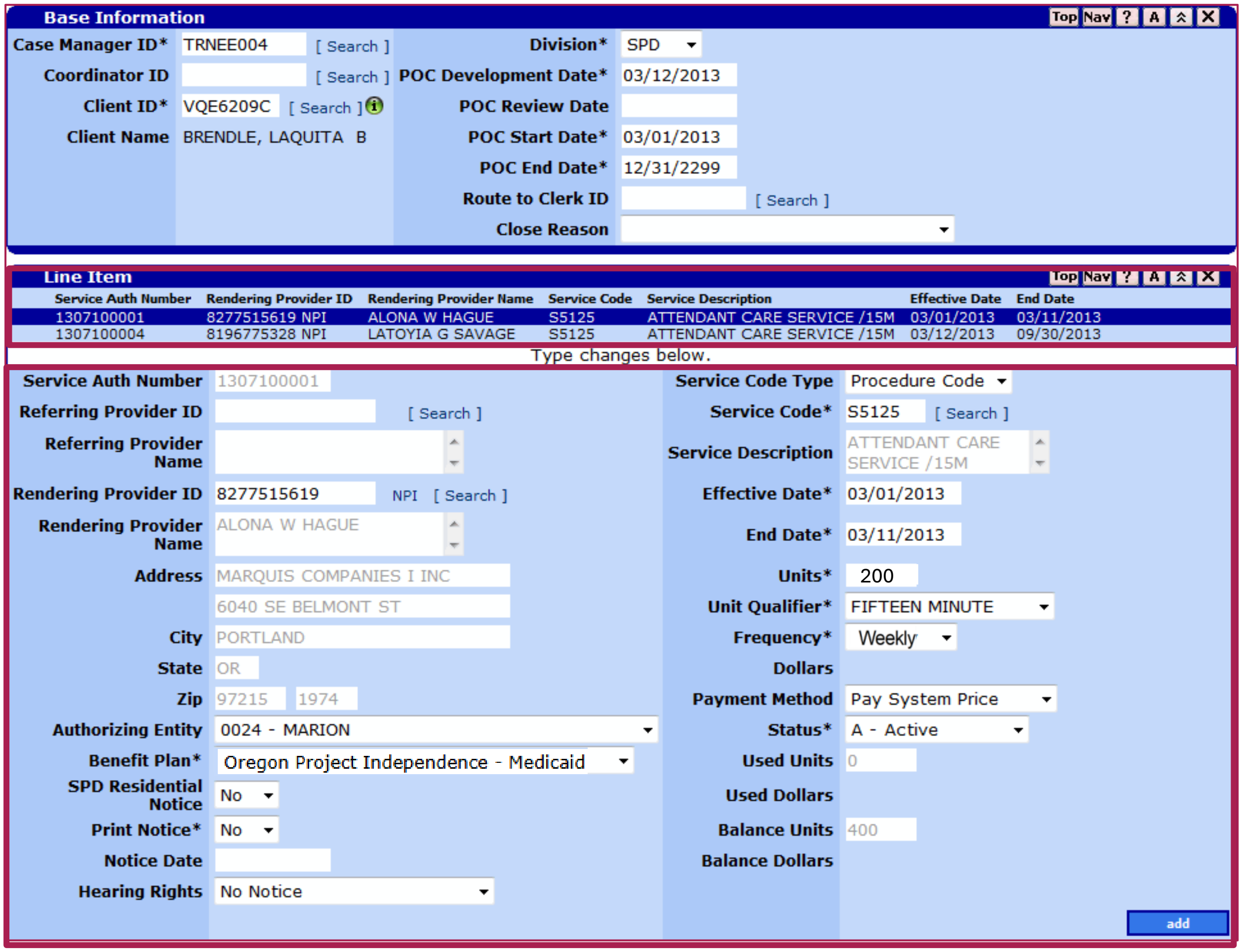
MMIS Category Field/Dropdown	IHCA Panel Input
Service Type Code	Select “Procedure code”

MMIS Category Field/Dropdown	IHCA Panel Input
Service Codes	T1019 (ADL) S5125 (IADL) A0090 (Mileage)
Service Description	Auto-generates with service code entry.
Effective Date	Enter date care starts.
End Date	Enter one year from start of care.
Units	Multiply the number of hours/miles per pay period by 2, enter the total.
Unit Qualifier	Select "Fifteen Minute"
Frequency	Select "Weekly"
Payment Method	Select "Pay System Price"
Status	Select "A-Active"
Service Authorization Number	MMIS creates and autofills this number with a new line item.

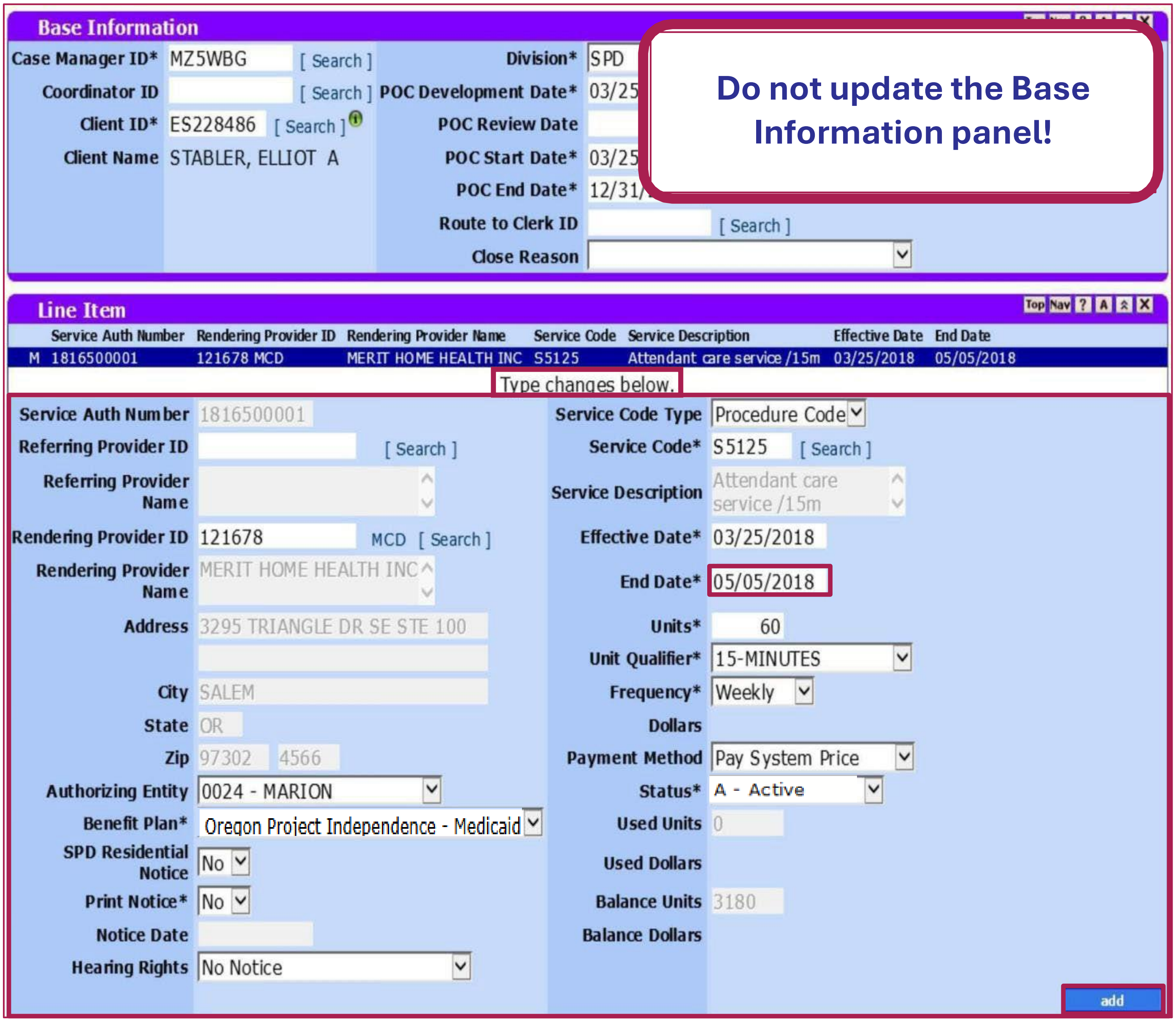
MMIS Category Field/Dropdown	IHCA Panel Input
Rendering Provider ID	Enter the agency's provider number or select [Search] to find provider.
Address	Auto-populates when rendering provider ID is entered.
Authorizing Entity	Select your branch from the dropdown menu.
Benefit Plan	Select "Oregon Project Independence - Medicaid".

Updating

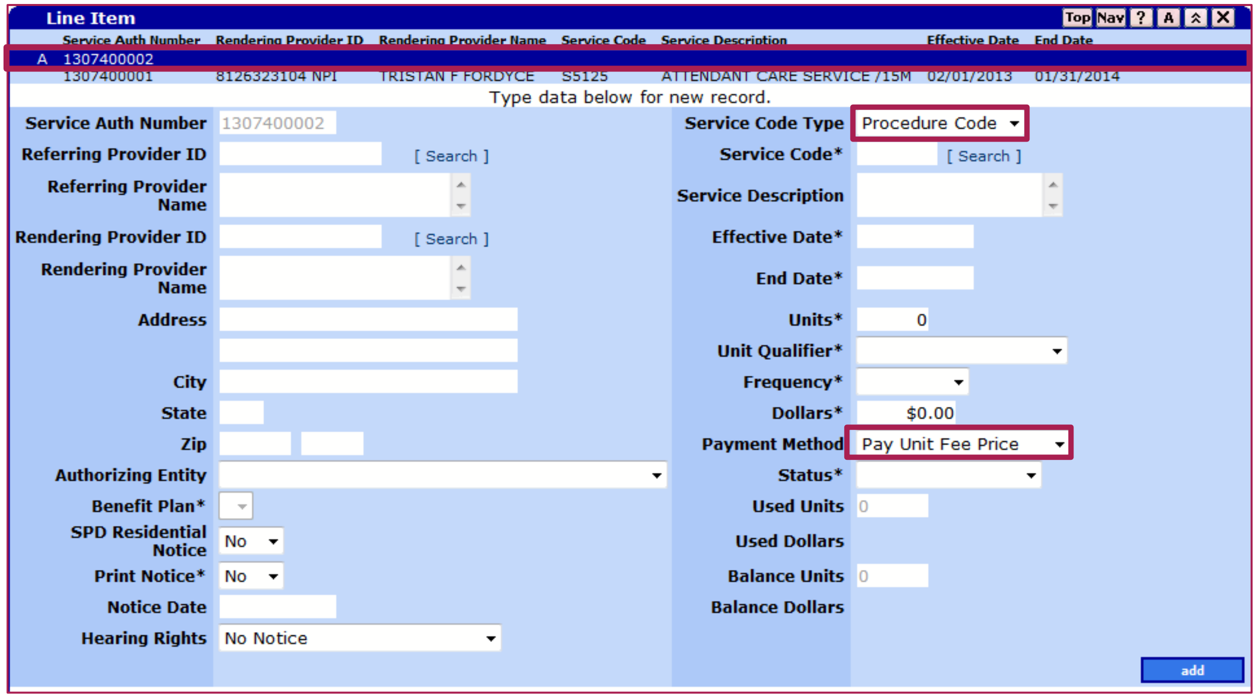
Go to [Find Existing](#) for help finding and choosing a POC.



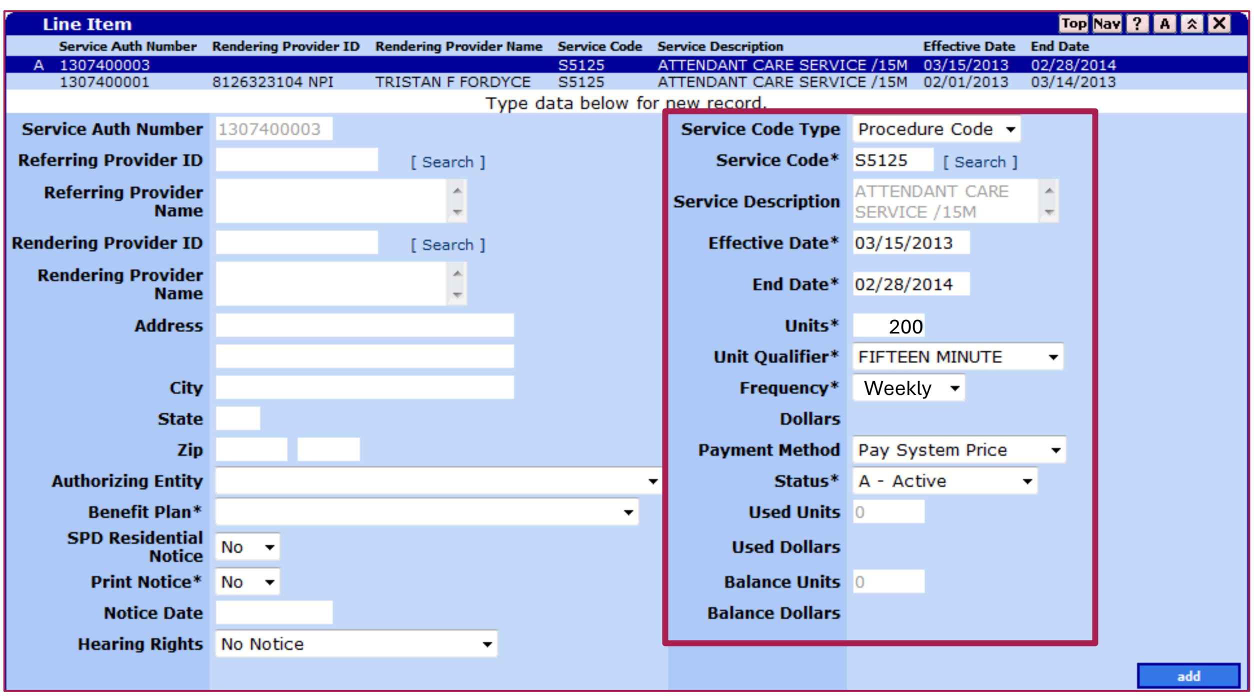
- Select a line from the “Line Item” panel.
- The panel expands, showing the line-item details.
- If there is only one line-item, the “Line Item” panel will automatically show line-item details.
- The current line-item must be ended before a new one is created.



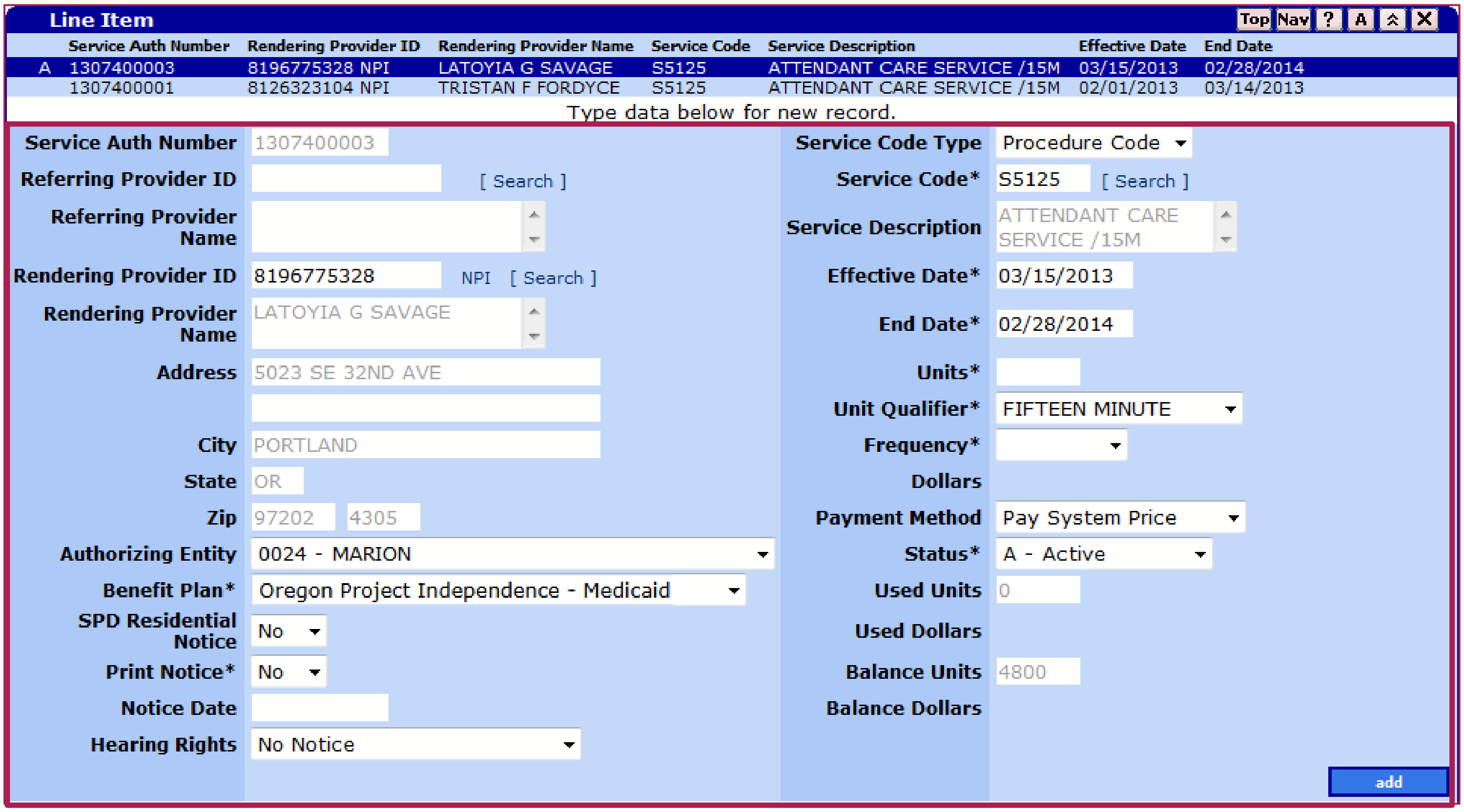
- Update the "End Date" field under "Type changes below".
- Enter the last date at a current service level or the last date the current agency is providing services in the "End Date" field.
- The "End Date" field dates must be within the initial "POC Start Date" field dates and 12/31/2299 in the "Base Information" panel.
- Select "add" button to start a new line-item.
- A new line-item, new "Service Auth Number" and blank "Line Item" panel appears.



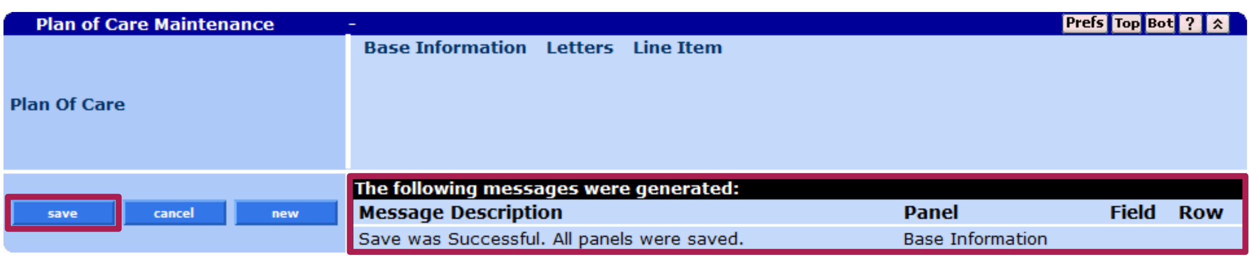
- “Type data below for new record.” Displays above the “Line Item” panel fields.
- MMIS auto-fills “Procedure Code” in the “Service Code Type” dropdown.
- “Payment Method” may auto-fill incorrectly. Select "Pay System Price".



- Update each field to reflect the IHCA changes (see next page for details).



- Enter all IHCA line-item information from right to left using the **Tab** key avoid **<Enter>**.



- Scroll up and select “save “button in the “Plan of Care Maintenance” panel.

Scenario Guidance

Change in Service Hours

- Create a new POC to match any service plan.
- Enter the updated units (new hours per pay period multiplied by 2) in “Units” field.
- If the hours remain the same, the “Units” field remains unchanged.

Change in Agency

- End the original agency’s line item (enter last care date in the “End Date” field).
- Enter new agency's start date in the “Effective Date” field.
- Enter the original end date (1 year out from original start date) in the “End Date” field.
- Select “A-Active” from the “Status” drop-down.
- Enter the Rendering Provider ID by selecting “[Search]” or manually entering the provider’s ID.

Mid-Pay Period Changes

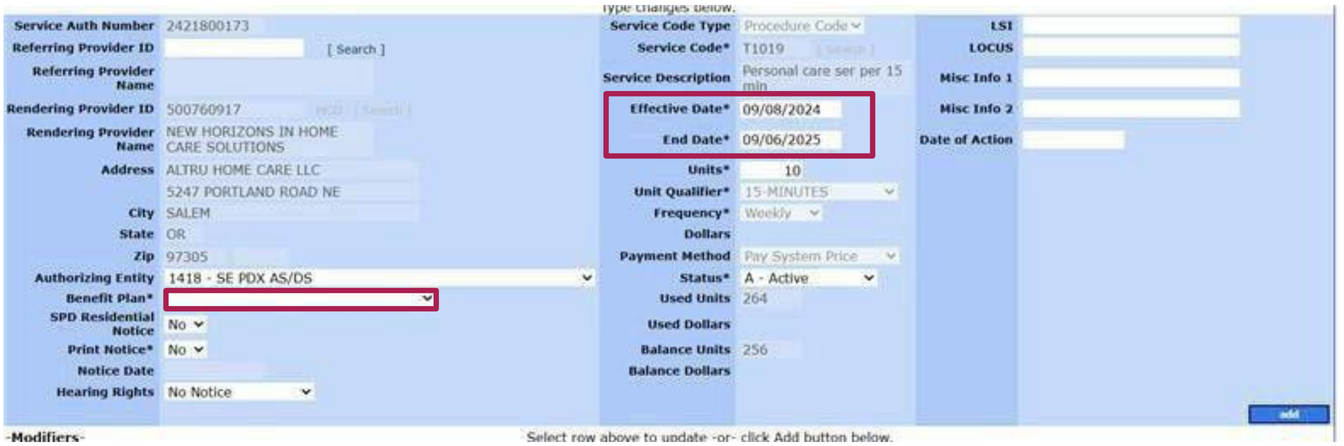
- If care and eligibility allow, end the current line-item on Saturday so the new line-item starts on Sunday.
- Add another line item for the remaining POC period with remaining pay period units.
- Determine units for 7 days or less by multiplying hours per pay period by 4.
- Go to Updating for help updating line-items.

Adjustment Considerations:

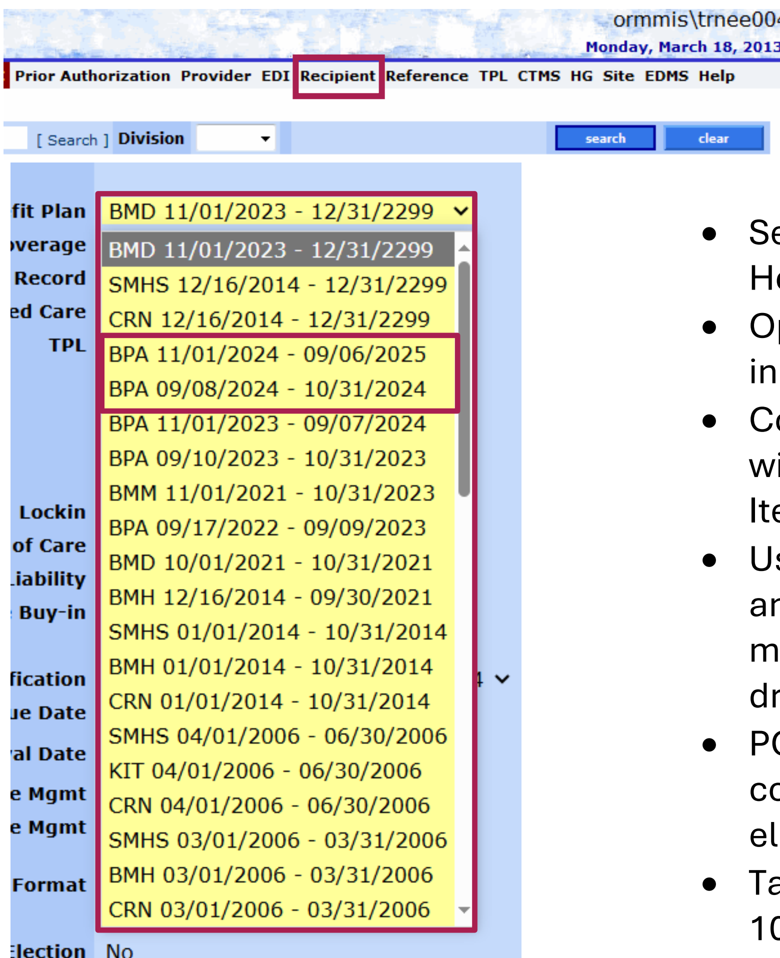
- Adjusting units within a week often requires working with the agency to determine used hours, subtracting these from available hours and converting to units.
- Determine mileage by using pay period miles divided in half (divided by 2).
- Mileage should not be prorated.

Troubleshooting

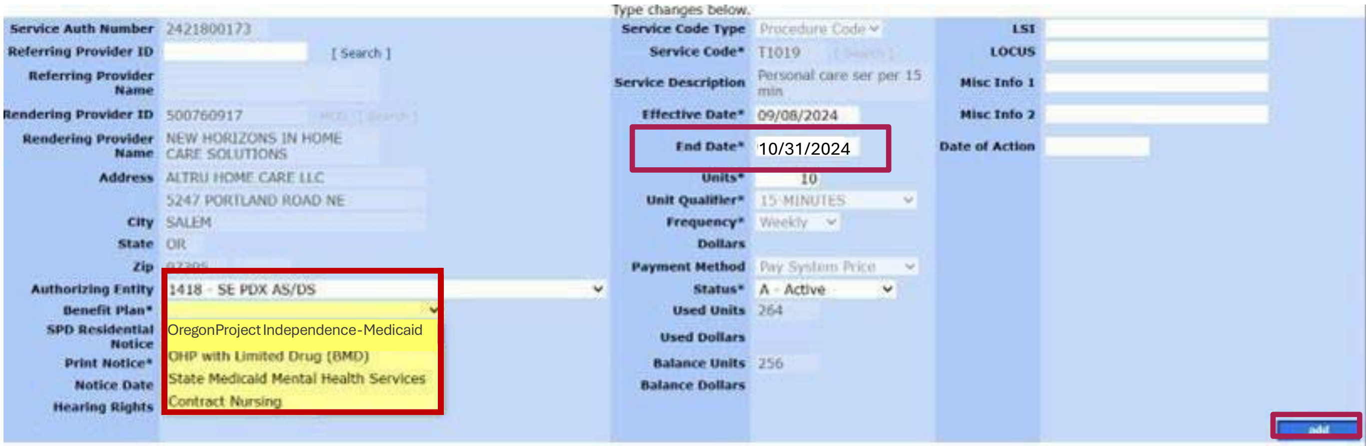
SCMs are responsible to troubleshoot provider payment issues. Select OPI-M Policy to email them for support. Remain in contact with the provider/agency throughout the troubleshooting process.



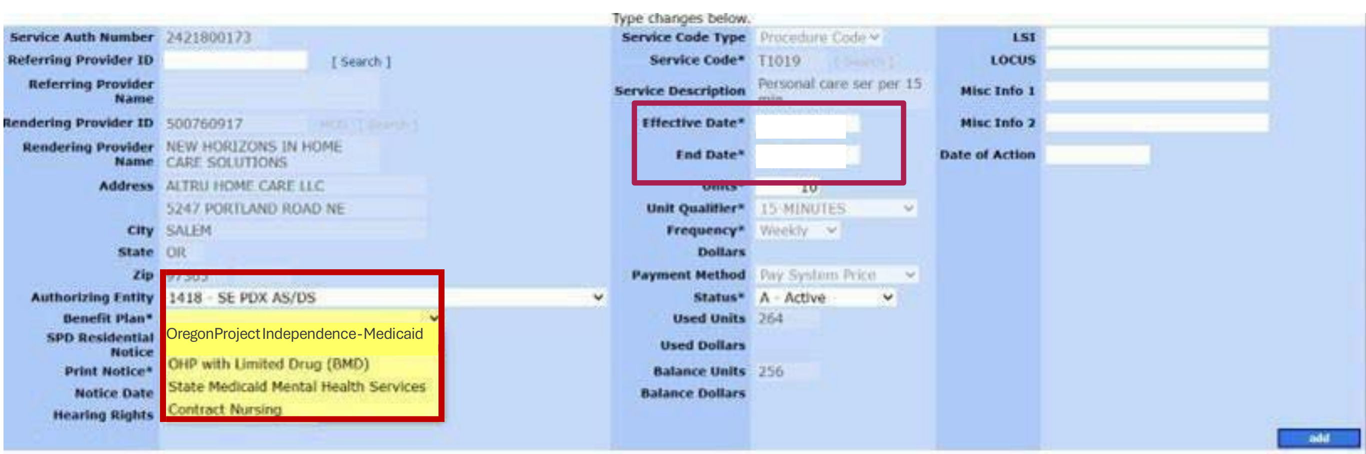
A benefit plan may not auto-populate after updating the "Line Item" panel. This happens due to an effective date issue.



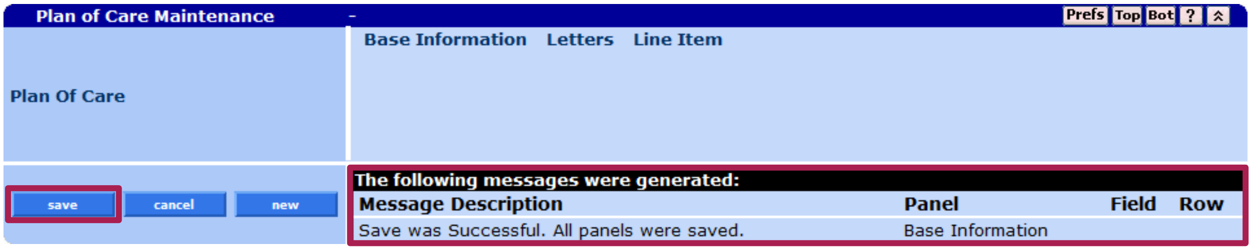
- Select "Recipient" from the MMIS Home screen menu.
- Open the "Benefit Plan" dropdown in the "Recipient" panel.
- Compare the dates in the dropdown with the dates in the updated "Line Item" panel.
- Using an effective date of 09/08/24 and end date 09/06/25 doesn't match the dates of service on this dropdown list.
- POC dates must match the corresponding service and medical eligibility dates.
- Take down BPA dates 09/08/24-10/31/24 & 11/01/2024-09/06/2025.
- Return to the updated "POC Line Item" panel



- Update the “Effective Date” and “End Date” fields to match the first service authorization dates taken from the “Benefit Plan” dropdown in the “Recipient” panel.
- When the “Effective Date” and “End Date” fields match service authorization, the “Benefit Plan” field auto-populates.
- Select, "Oregon Project Independence - Medicaid" from the “Benefit Plan” dropdown in the “Line Item” panel.
- Select "add" button to create a new line-item authorization for each service code between 09/08/24 and 09/06/25.



- Enter the second authorization dates in the “Effective Date” and “End Date” fields.
- Select, "Oregon Project Independence - Medicaid" from the dropdown.



- Scroll up to select the “save” button in the “Plan of Care Maintenance” panel.

Problem:

- When saving a POC, a message appears on the “Maintenance” panel listing fields that need to be completed on the “Line Item” panel.

Solution:

- Select "cancel" on the “Maintenance” panel to remove both the original and extra line items.
- Re-enter the POC.
- While you can withdraw the extra line-item, it's more complicated and time-consuming than canceling and starting over.

Problem:

- When saving a POC this message appears: "Line-item effective date must be later than or equal to POC start date. Start date excludes a service line-item."

Solution:

- Effective dates and end dates in the “Line Item” panel must fall between the POC start and end dates on the “Base Information” panel.
- If the line-item effective date is before the POC start date, change the POC start date to match.

Problem:

- When saving a POC you may see a paid claim error. This error can be either an effective or end date error.
- This error typically happens when you’re ending a line item and trying to start a new one, matching that line-item.

Solution:

- The IHCA needs to void claims to correct the issue.

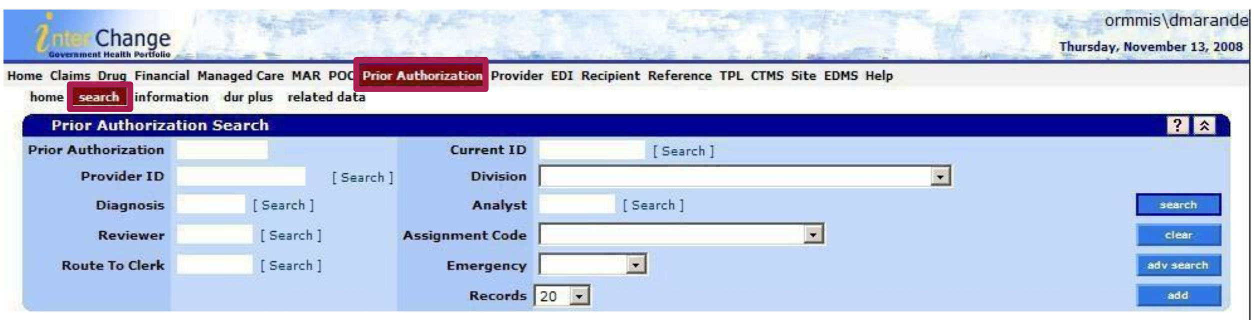
IHCA Billing Solutions:

- **Effective Date Errors:** IHCA will void any claims that have the start date of the line-item as a date of service.
- **End Date Errors:** IHCA will void any claims billed after the end date. Once the IHCA voids the needed claims, adjust the line-item.

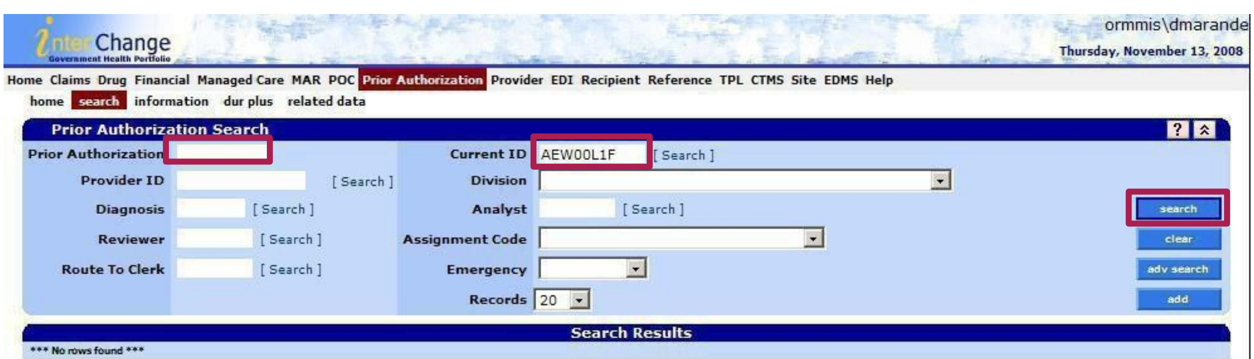
Never:

- Never ask an IHCA to void a claim on a Friday. It does not give them enough time to re-bill.
- Never ask an IHCA to void a claim more than a year old. Staff this with the IHCA policy analyst. Select IHCA policy to send an email.

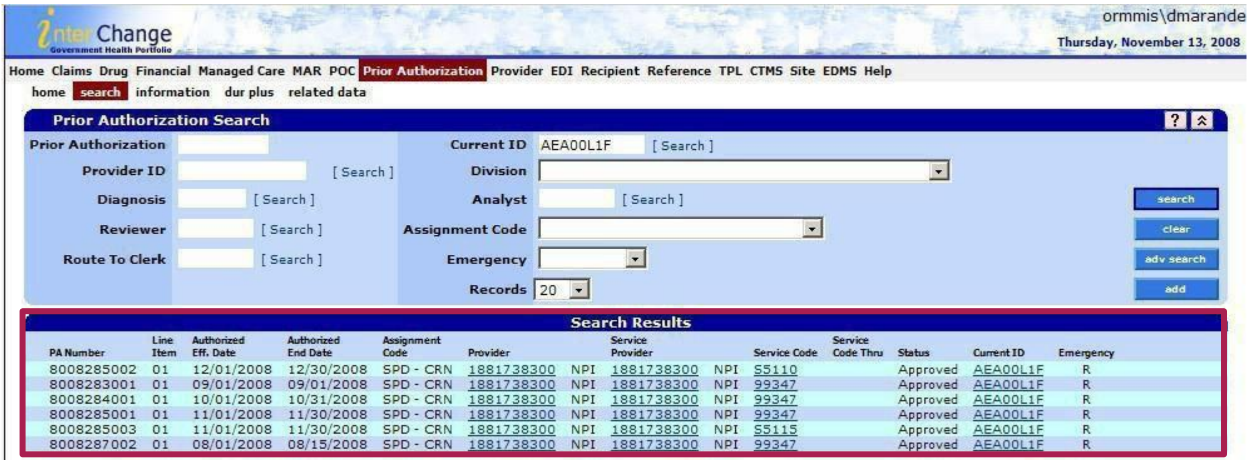
Find Existing



- Select "Prior Authorizations" from the MMIS home screen menu.
- Select "search" from the "Prior Authorization" submenu.



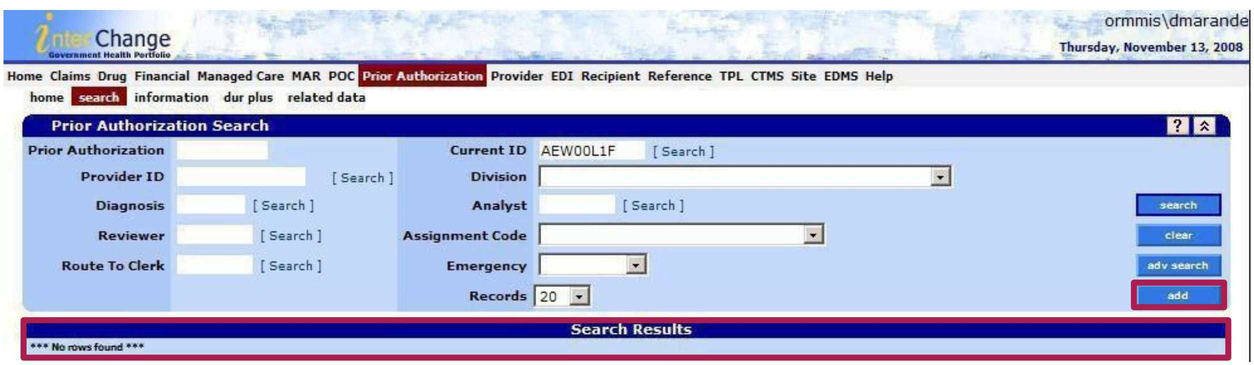
- Type the consumer's Prime number into the "Current ID" field or the prior authorization number in the "Prior Authorization" field of the "Prior Authorization" Search panel.
- Select "search" button.



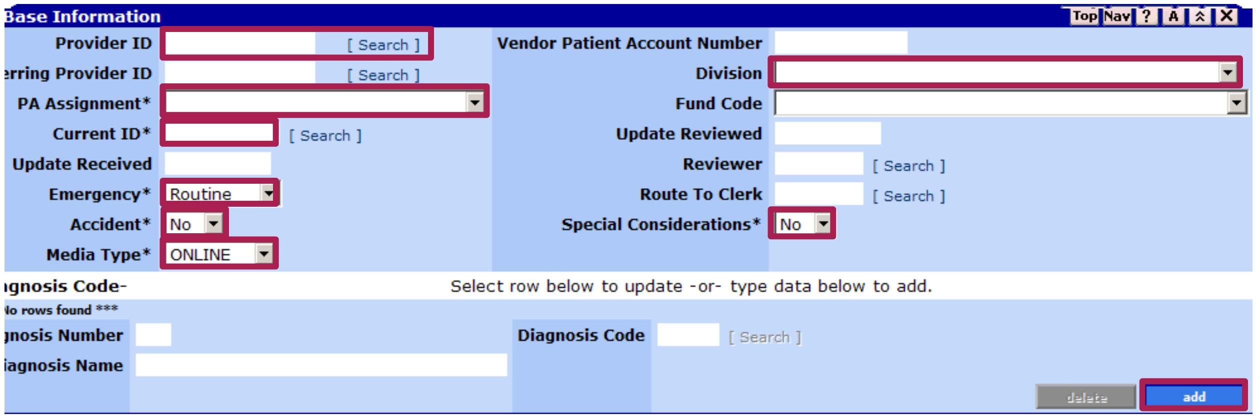
- Select the line-item (authorization) you want to view from the “Search Results” panel.
-

Create

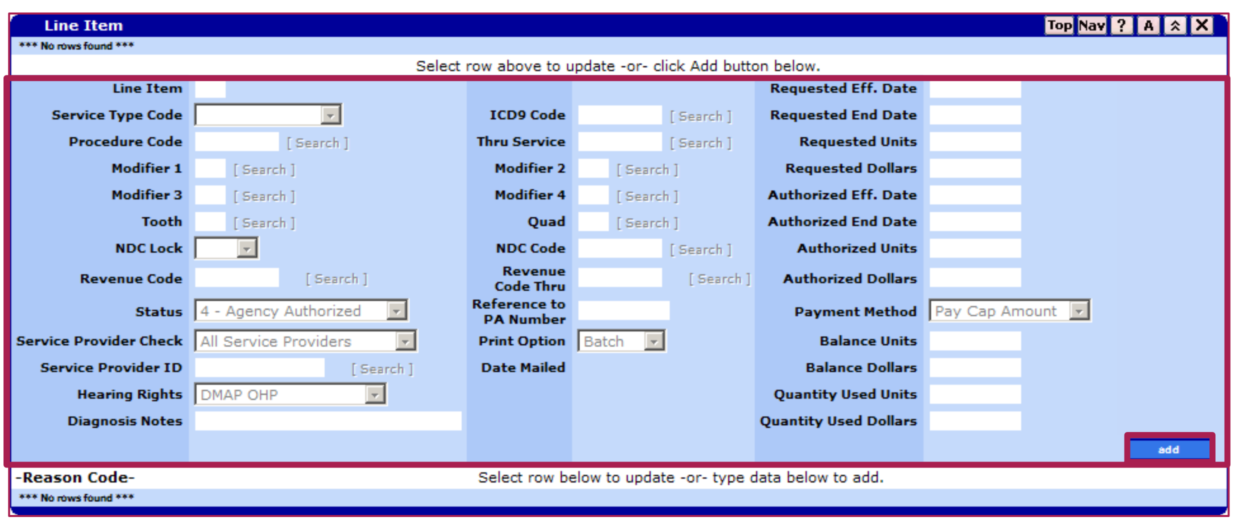
- Select Find Existing for help searching for prior authorizations.



- Select “add” button in “Prior Authorization Search” panel to create a new prior authorization for ERS or LTCCN/CRN if ***No rows found*** appears in the Search Results panel.
- Select Updating if rows appear in the “Search Results” panel.
- “Prior Authorization Information”, “Prior Authorization Maintenance”, “Base Information”, “Line Item” and “Notice Selection” panels display.
- Locate the “Base Information” panel.



- Select "[Search]" next to the "Provider ID" field or enter the 6-digit provider number.
- **Tab** through "Base Information" fields for ERS or LTCCN.
- Avoid <Enter> to prevent prematurely processing the authorization.
- Select "**Other**" for ERS or "**SPD-CRN**" for LTCCN in "PA Assignment" dropdown.
- Enter the consumer's Prime Number in the "Current ID" field.
- Select "Routine" from the "Emergency" dropdown.
- Select "No" from the "Accident" dropdown.
- Select "Online" in the "Media Type" dropdown.
- Select "**SPD-Lifeline**" (ERS) or "**SPD-Contract RN**" (LTCCN) in the Division dropdown.
- Leave "No" as the default in the Special Considerations dropdown.
- Select "add" button in "Base Information" panel to generate a prior authorization number.
- Scroll down to "Line Item" panel.



- Update Line Item panel fields under "Select row above to update-or-click Add button below" for each procedure code.
- Select "add" button at bottom right of panel to add separate line- items for ERS installation, ERS monthly service, and various LTCCN procedure codes.
- See "PA Quick Reference Input" on the next page for ERS & LTCCN input instructions.

Data Entry Guidelines

- Select "add" button in Line Item panel and enter for each procedure code.
- Avoid <enter> or saving until all line-items for all procedure codes are complete.
- Do not change any MMIS category field/dropdowns not listed in the input instructions.

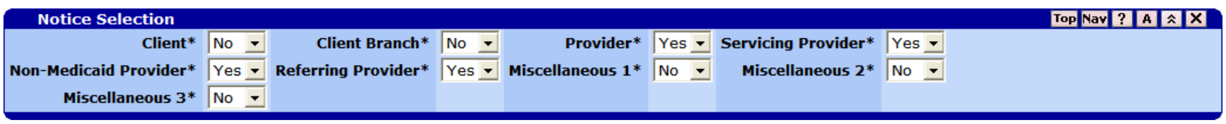
PA Quick Reference Input

MMIS Category Field/Dropdown	ERS Installation Input	ERS Ongoing Input	LTCCN/CRN Input
Service Type Code	Select "procedure code"	Select "procedure code"	Select "procedure code"
Procedure Code	S5160	S5161(Basic) A9279 (Wireless) Fall Detector/ GPS Mobile (A9280) Monthly Medication Reminder (S5185)	Ad a separate line item for each procedure code authorized on the SDS 4102, Prior Authorization for APD Long Term Care Community Nursing form

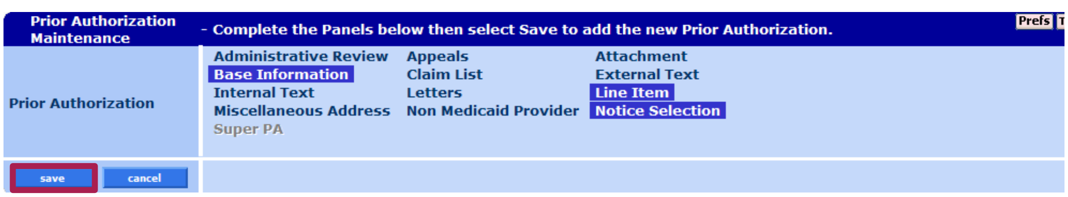
MMIS Category Field/Dropdown	ERS Installation Input	ERS Ongoing Input	LTCCN/CRN Input
Status	Select "approved"	Select "approved"	Select "approved"
Service Provider Check	Select"all service providers"	Select "all service providers"	Select"all service providers"
Service Provider ID	Select [Search] to locate or enter provider number	Select [Search] to locate or enter provider number	Select [Search] to locate or enter Registered Nurse (RN) provider numberaslisted on SDS 4102
Hearing Rights	Keep "no" default	Keep "no" default	Keep "no" default
Print Option	Select "batch"	Select "batch"	Select "batch"
Requested Effective Date (MM/DD/YYYY)	ERS company requested start date	ERS company requested start date	Type dated listed next to "Date received"on SDS 4102
Requested End Date (MM/DD/YYYY)	One month out from effective date	One year out	Enter end date (6 months out)

MMIS Category Field/Dropdown	ERS Installation Input	ERS Ongoing Input	LTCCN/CRN Input
Requested Units	1unit(1 month)	12units (12 months)	Enter each "Estimated Units" for each Procedure Code/Service as listed on SDS4102 (15 minutes = 1 unit)
Requested Dollars	System generated from provider numberand procedure code	System generated from provider number and procedure code	System generated from provider number and procedure code
Authorized Effective Date (MM/DD/YYYY)	On or before start date of service	On or before start date of service	Enter the date listed Next to "Date received on 4102.
Authorized End Date (MM/DD/YYYY)	Enter authorized end date (1 month out)	Enter authorized end date (12 months out)	Enter end date (6 months out)
Authorized Units	Enter 1 unit	Enter 12 units	Enter units authorized by case manager (CM) for each procedure code for each separate line-item

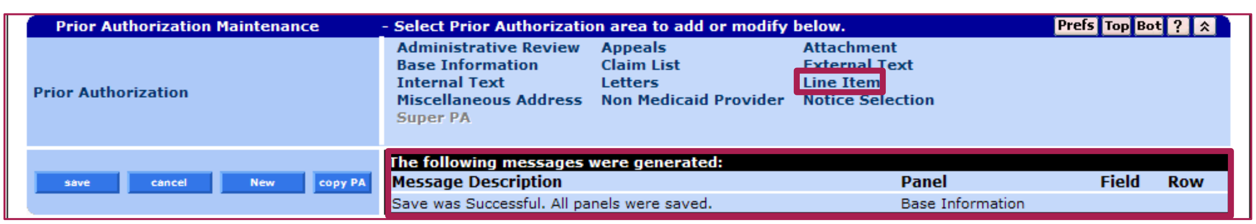
MMIS Category Field/Dropdown	ERS Installation Input	ERS Ongoing Input	LTCCN/CRN Input
Authorized Dollars	System generated from provider number and procedure code	System generated from provider number and procedure code	System generated from provider number and procedure code
Payment Method	Select “Pay System Price”	Select “Pay System Price”	Select “Pay System Price”



- Leave all default settings in the “Notice Selection” panel.



- Select “save” button to save all line-items.
- “Save was Successful. All panels were saved.” Message will appear.

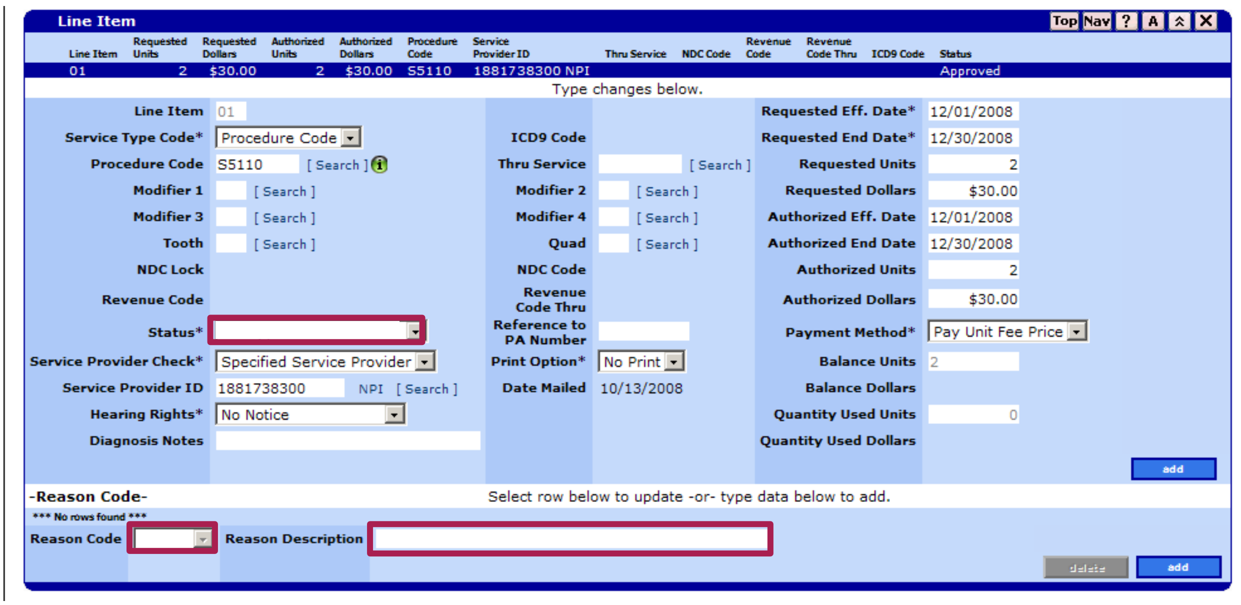


- Select “Line Item” from the “Prior Authorization Maintenance” panel to view each line-item if the save fails.

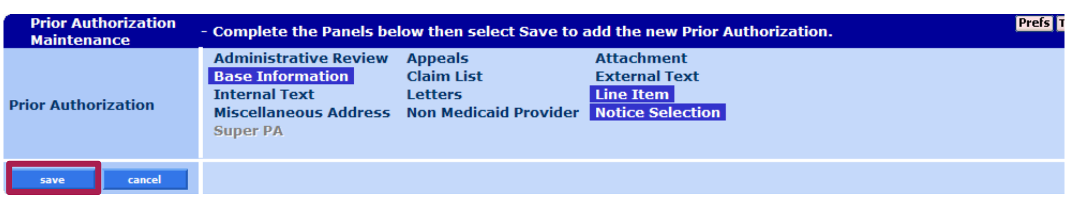
- Select each line-item to review the "Line Item" panel to check for input errors.

Withdraw

- Withdraw a prior authorization if the action is taken the same day as it's entered/saved.
- Bring up the prior authorization you need to withdraw.
- Select Find Existing if you need help finding an existing prior authorization.



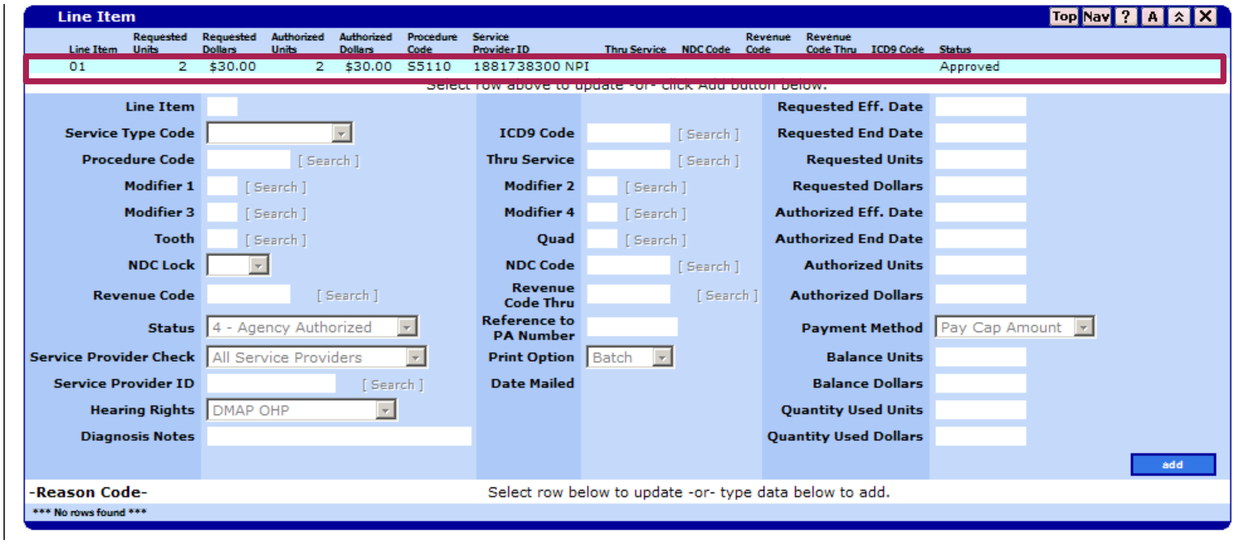
- Select "withdrawn" from the "Status" drop-down.
- Select a reason code from the "Reason Code" dropdown.
- Enter the withdrawal reason in the "Reason Description" field.



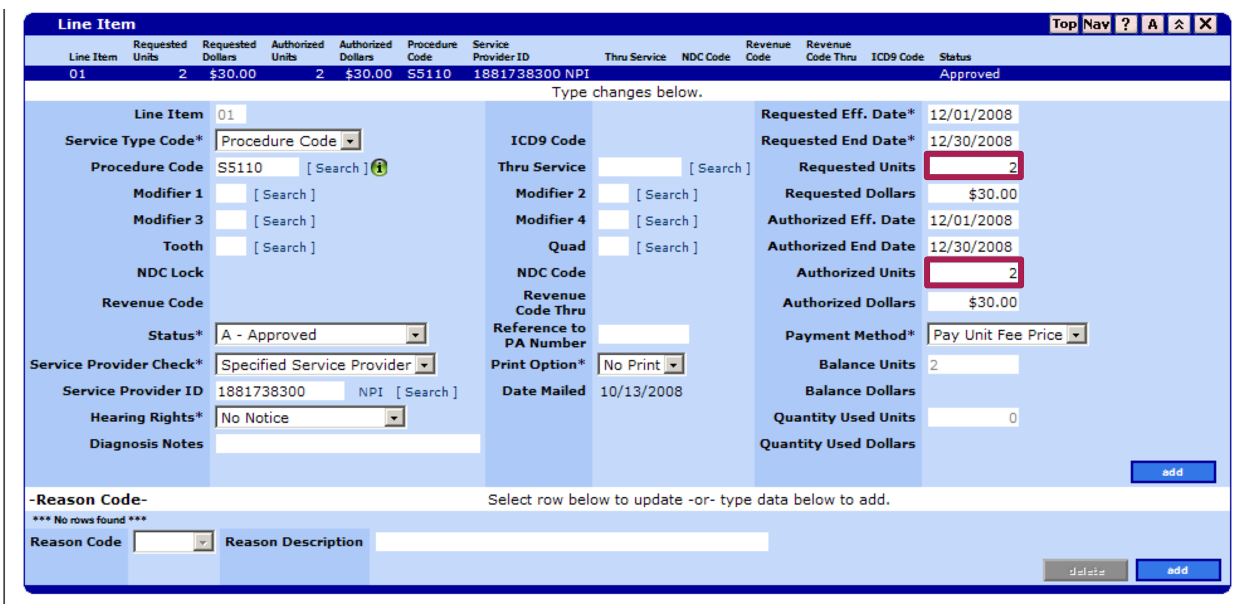
- Scroll up and select "save" button from the Prior Authorization Maintenance panel.

Updating

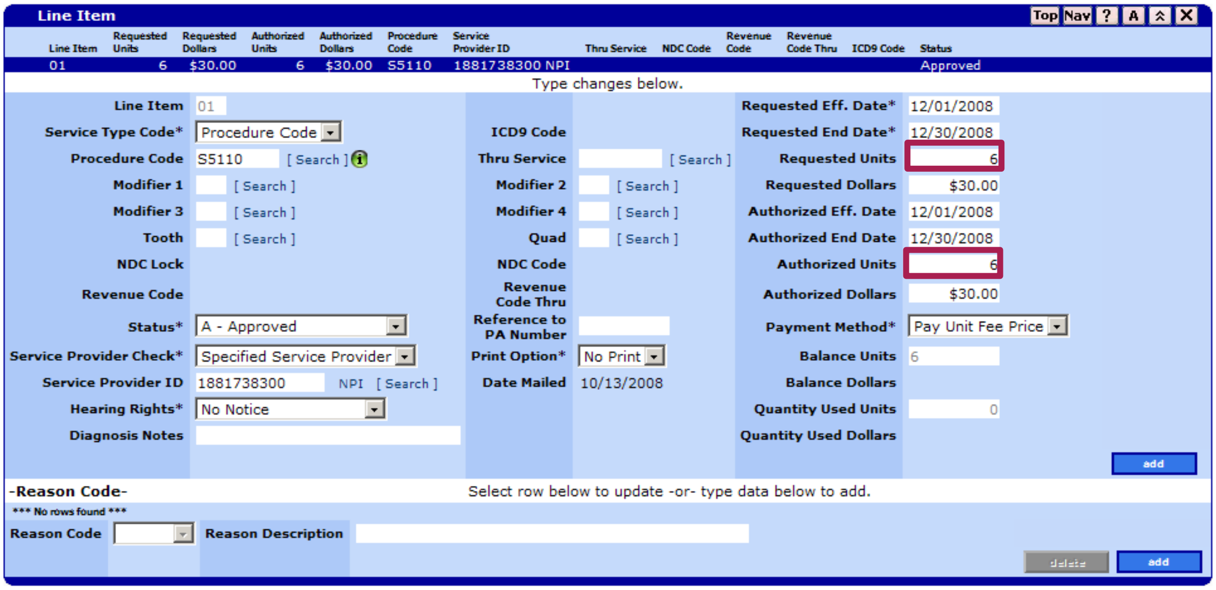
- Select [Find Existing](#) to search for a prior authorization and select the line item you want to update.



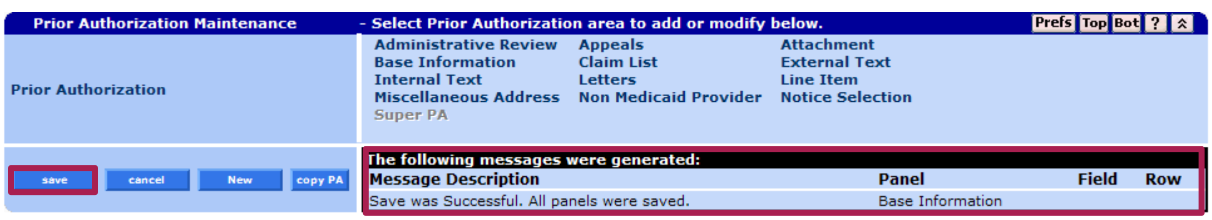
- In the "Line Item" panel, select the lightly shaded row above "Select row above to update".
- The row will darken, and the previous entries will auto-populate in the category fields.
- Example: An SDS 4102 (LTCCN PA form) reflects an increase in "Estimated Units" from 2-6.



- Within the “Line Item” panel, update prior authorization changes under “Type changes below”.



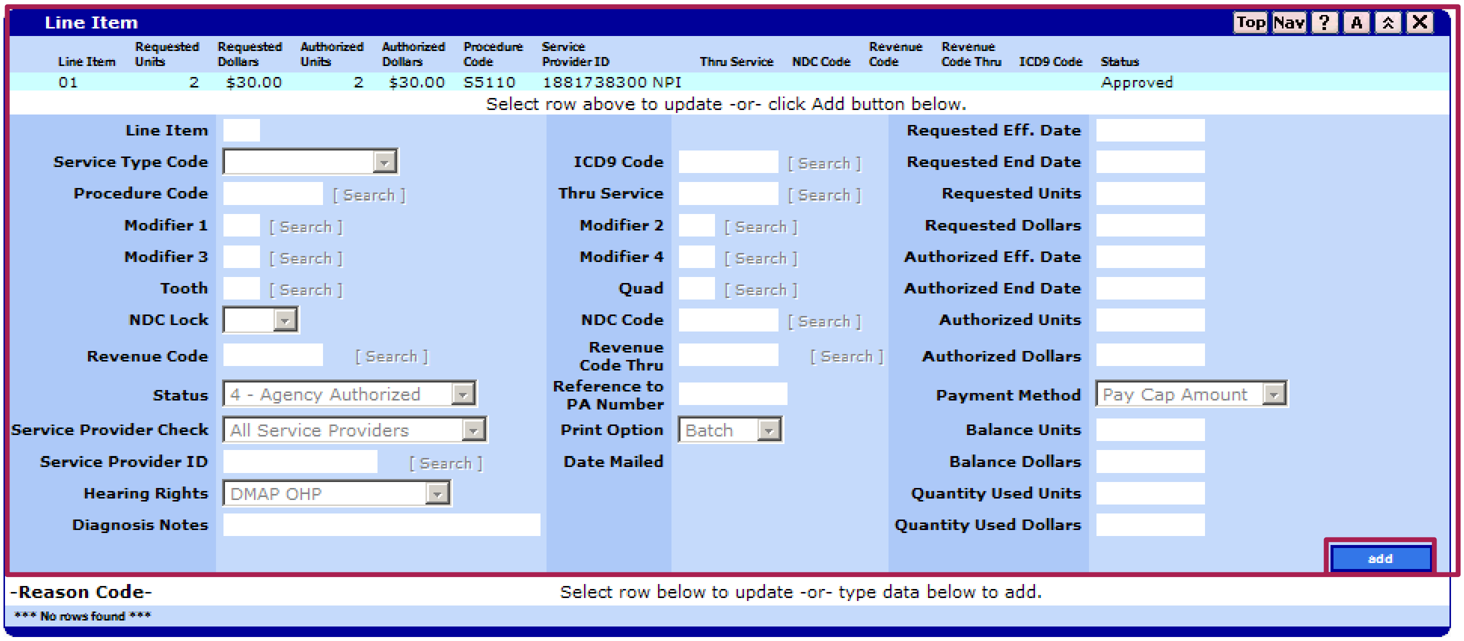
- Update the “Requested Units” and the “Authorized Units” fields to reflect the change from 2-6 units.
- In this example, all other fields are unchanged.



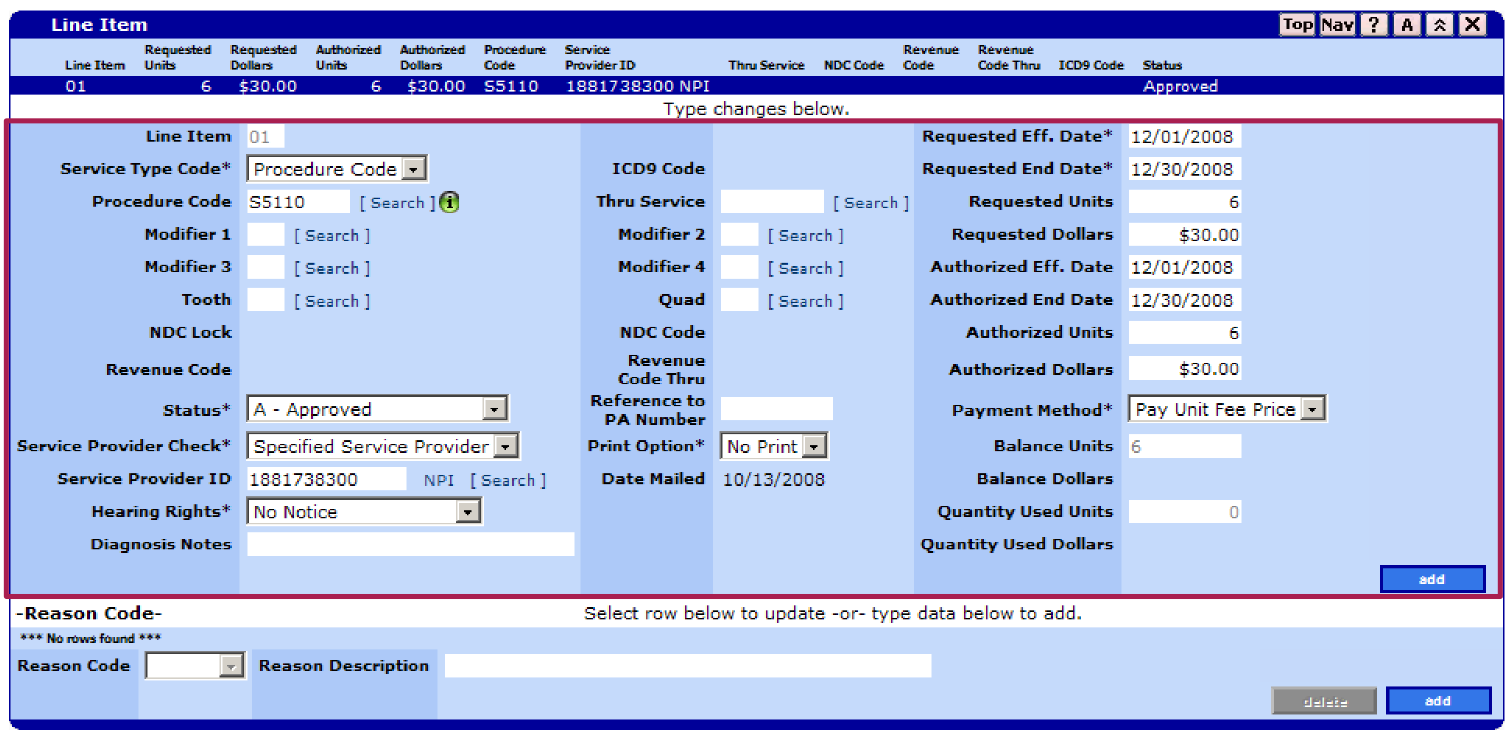
- Scroll up to the “Prior Authorization Maintenance” panel and select the “save” button.
- MMIS displays: “Save was successful. All panels were saved.”

Provider Change/Renewal Update

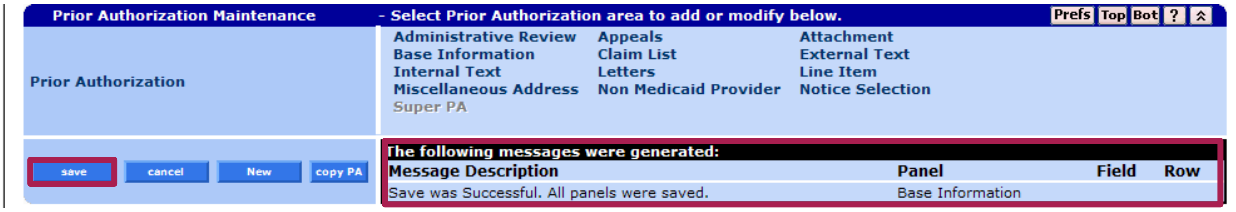
- Create a new Service Authorization number for provider changes or service renewals to ensure correct billing.
- Select the line-item to update and locate the “Line Item” panel.



- Select “add” button within “Line Item” panel.

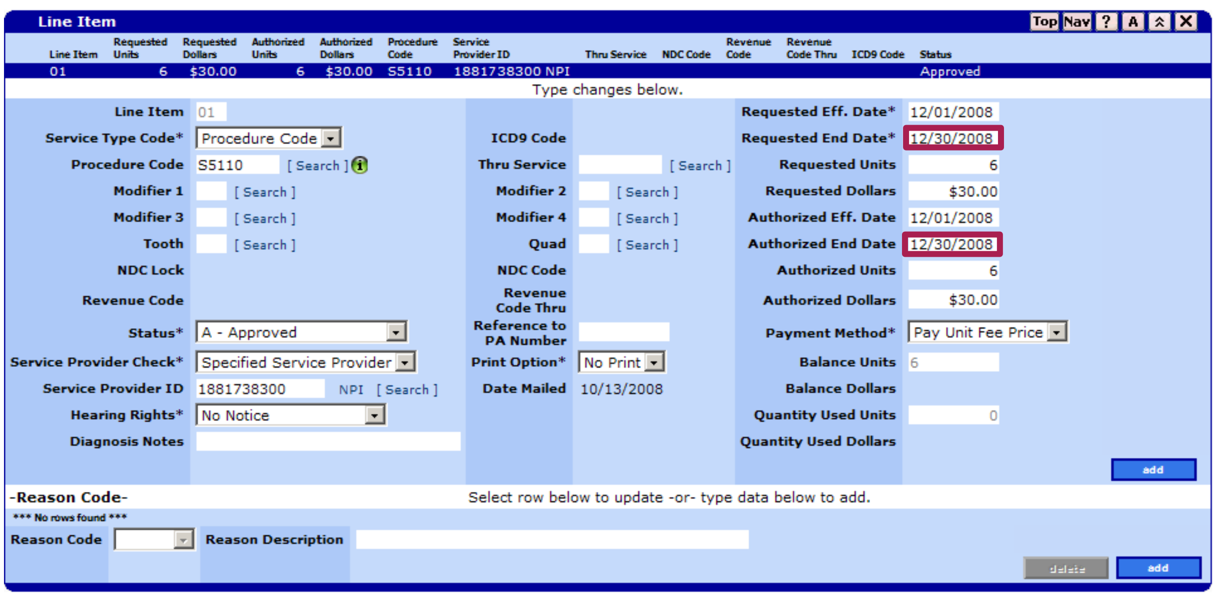


- Select Updating for help updating Line-item category fields based on the specific changes for each service (ERS/LTCCN/CRN).

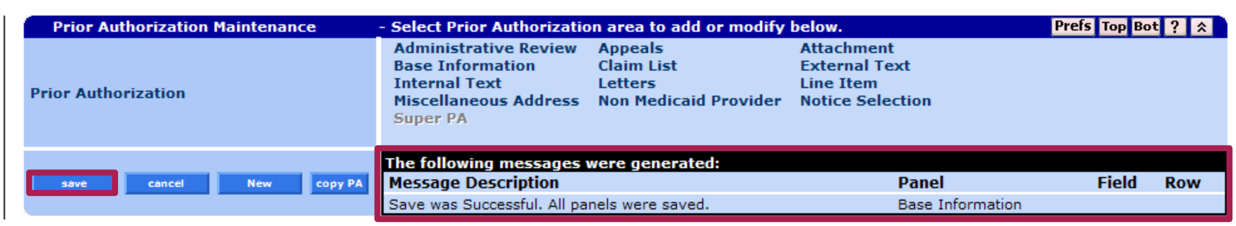


- Scroll uptothe Prior Authorization Maintenance panel and select the “save” button.
- MMIS displays: “Save was successful. All panels were saved.”

Ending



- Enter the closure date inthe “Requested End Date” and “Authorized End Date” fields.



- Select “save” button in the Prior Authorization Maintenance panel.

Resources

- MMIS Manuals & Common Error Support
- MMIS Essentials Training Series
- APD-IM-24-089