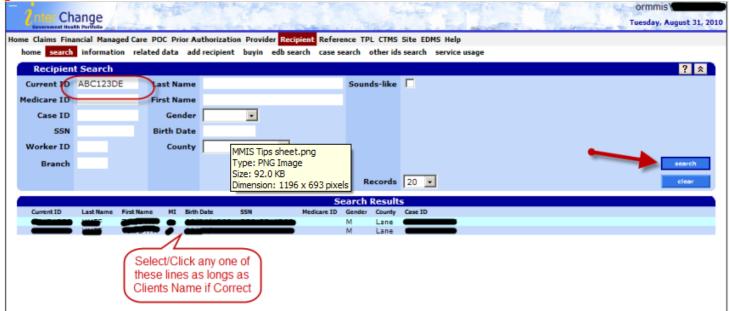
<u>Tips for Viewing Client Eligibility in MMIS and Confirming that the</u> <u>Correct Benefit Plan and Case Descriptors Match UCMS</u>

Please note: If you <u>F9 TWICE</u> in UCMS (i.e. after you integrate from ACCESS, open the case in DHR and click or press F9 on the UCMS screen) this will send your update action over to MMIS in "real time"; otherwise, you would need to check the following day to see that your action carried over to MMIS in order to view the client's updated eligibility.

After logging in to MMIS you will see the tool bar shown below. Click on 'Recipient' and then click 'Search'.

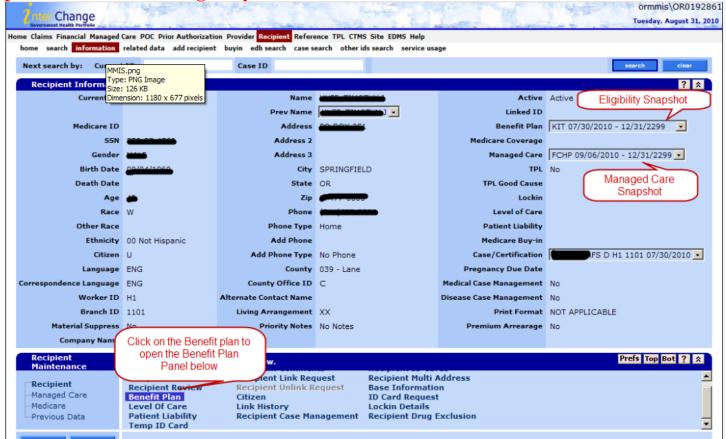
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Home Claims Financial Managed Care POC Prior Authorization Pr	ovider Recipient Reference TPL CTMS Site EDMS Help
	Search Search
Warning: This system is for authorized users only, and may be	monito Information t comply with Oregon Department of Human
Services Privacy and security policies. Security Incidents and o	concern Related Data DHS Incident Response Team (503) 945_6812.
Last Successful Logon: 8/31/2010 1:12:45 PM	Add Recipient
	BuyIn
	EDB Search
	Case Search
	Other IDs Search
	Service Usage Search

You will then see the 'Recipient Search' panel. You can search by Prime#, Case# and by SSN. Please note that searching by Prime# is the most efficient search criteria. Enter the prime number in the 'Current ID' field and hit 'Search'.



In the 'Search Results' panel, click any of line if it's the correct client. Then the screen below will display. Even though the 'Benefit Plan' eligibility dates and 'Managed Care' information is displayed at the far right, it is best to proceed to the next step by scrolling

down and clicking on 'Benefit Plan' in the 'Recipient Maintenance' panel to get the full picture of the client's eligibility.



Once you click on 'Benefit Plan' in the 'Recipient Maintenance' panel, you will notice a dropdown box in the 'Status' field below. Select 'Active Only' then click 'Search' on the right as shown below. This will allow you to see only the active lines. Please note that you can sort/filter by 'Effective Dates', 'Benefit Plan', etc.

Base Infor	Select Acti	ive only									Top Nav ?	A ¥ X
Benefit Plan Top Nav ? A										A 🛠 🗙		
Status	Active Only 💌	Benefit Plan						•				
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SMHS State	Medicaid Mental H	Health Services	Active	Default	1 DEFAULT	07/30/2010	12/31/2299					
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CRN Contra	ct Nursing		History	Default	1 DEFAULT	07/30/2010	12/31/2299					
INELG Ineli	gible Recipient		History	Default	1 DEFAULT	03/01/2000	12/31/2299					
BMH OHP P	lus		Active	Default	1 DEFAULT	08/10/1999	02/29/2000					
Select row above to update -or- click Add button below.												

ect row above to update -or- click Add button below.

Click on the 'Benefit Plan' that is most recent or for the time frame you are inquiring about. Once you have clicked on the selected 'Benefit Plan', the 'Aid Category' panel will display. Then click on the 'Aid Category' line to view 'Case Descriptors' and other information.

Benefit Pla	in									Top Nav 🖞	? A ☆ X
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Benefit Plan				Status	Stop Reason	Financial Payer	Effective Date V	End Date		BMM, BMD, SMB, QMB etc for the	
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Benefit Packages and Their Respective Case Descriptors

The following are examples of what you would look for in regards to what Benefit Package is associated with certain Case Descriptors.

**** Please Note: These are not definitive, but rather a guide to follow:
Benefit Package – BMD – OHP with Limited Drug will have:
Case Descriptors of either: SBI, SMB, or SMF

Benefit Package – *BMM* – *QMB* + *OHP w/Limited Drug* will have: **Case Descriptor** of: *QMM*

Benefit Package – *MED* – *Qualified Medicare Beneficiary* will have: **Case Descriptor** of: *QMB*

KIT – OHP Standard will have: Case Descriptor of: AMO

Benefit Package – *BMH* – *OHP Plus* will have: **Case Descriptors** of: *AMO*, *CMO*, *C21*, *PCR*, etc.