

<b>Topic:</b>	DD Eligibility and Enrollment (DDEE/0337) Worker Guide
<b>Date Issued/Updated:</b>	10/10/2019

**Overview**

**Description:** Accurate completion and submission of data into eXPRS is required for Medicaid authorized services and payments. This Worker Guide provides guidance for Case Management Entities (CME), such as CDDP and Brokerage staff who may be completing eligibility and/or enrollment into funded services through the DDEE (0337) in eXPRS.

**Purpose/Rationale:** This guide explains the funded service enrollment process following Eligibility Determination, Medicaid Enrollment, ONA/LOC and ISP completion. This guide is applicable to CME staff who may be entering eligibility or enrollment data into eXPRS on the DDEE (0337). Certain data on the DDEE (0337) is no longer needed due to business changes. This worker guide clarifies what is still required and no longer needs to be submitted to TAU via DDEE (0337).

**Applicability:** This worker guide applies to staff with required eXPRS user roles, who complete eXPRS enrollment data entry to begin paid services. Required user roles are: CDDP Eligibility Enrollment Processor; CDDP Eligibility Enrollment Preparer; and Brokerage Eligibility Enrollment Processor. DDEE (0337) roles may be assigned to staff as identified by the CME. The Eligibility Specialist, Eligibility Specialist Processor roles are specific to eligibility data entry and not DDEE (0337) service entry.

**Procedure(s) that apply:**

**A DDEE (0337) IS required for the following circumstances:**

1. Before an initial authorization (CPA or POC) to initially start a paid service that includes:
  - K-Plan Service (refer to expenditure guidelines), Waivered Service (refer to expenditure guidelines);
  - Family Support or other General Fund Service (For individuals who are not waiver eligible but services have been approved by ODDS as General Fund); and
  - State Plan Personal Care only.

**Note:** At least one service must be requested before submitting a DDEE (0337).

2. For General Fund Requests:
  - If an individual loses Medicaid, and the CME sends a NOPA, a DDEE is needed in order to code GF for the 1st day of no Medicaid through the NOPA end date; and
  - After a NOPA effective date, if paid services continue.
3. Change of service settings such as to or from foster care, residential, or in-home.
4. Name changes which require that there is attached/submitted legal documentation for name change such as a copy of a birth certificate or legal Oregon ID. A court document may be used to provide supplemental verification of the name change.
5. Data corrections such as corrections to enrollment start or termination dates, deletions, etc.
6. Create or merge a prime number. For instance, the request for a prime number if the individual has never had a Medicaid service and does not have a prime number, or a prime number merge if an individual has two prime numbers.
7. DD Eligibility data corrections or deletions under View Client, such as date changes or incorrect eligibility information.
8. When an individual completely exits paid services (i.e. moves out of state or is deceased).

**Note:** If SE258 is selected as the enrollment plan service, for children's foster care, certain types of changes to a child's foster care case must be reported to the Children's Foster Care Unit, Federal Resource/SSI Unit, and Children's Medical Eligibility Unit (CMEU). For the new reporting process for children's foster care, please refer to the ODDS Child Foster Care Update Reporting Form, DHS 2755.; and transmittal (number).

**Authorizations in eXPRS can be processed without the DDEE (0337), meaning a DDEE (0337) is NOT required for:**

1. CME Transfers with no change in service setting. This includes transfers such as foster home-to-foster home, from one in-home address to a new in-home address, etc.
2. Address Changes. Remember, notification is required for children's foster care.
3. Adding or removing services for an individual already in a waiver or K-plan (for instance changing from waiver to K-plan or additions such as adding transportation to a plan for individuals already in foster care).
4. When an individual is absent from the service setting because they transfer to:
  - a. Hospital;
  - b. Jail;

- c. Nursing Facility; and
  - d. in circumstances where payment to the provider would be suspended or shut off (such as when whereabouts are unknown or there are extended family visits/vacations).
5. When entering eligibility data into eXPRS.
  6. For entry into non-waivered case management only (brokerage or CDDP).

### **CME Responsibilities**

CMEs must still monitor Service Deliveries (SDs) and/or claims to ensure that no billing occurs while the individual is in a facility paid for with other federal/state funds. See the [Service Monitoring Guidelines](#) and the [Case Management Contact Requirements Technical Guide](#) for further direction.

### **DD Eligibility Enrollment page in eXPRS**

Refer to the “How To” DDEE (0337) guides: (Links to the “How To” guides will be provided in the Final Draft of this worker’s guide).

The CDDP Eligibility Enrollment Processor, CDDP Eligibility Enrollment Preparer or Brokerage Eligibility Enrollment Processor (roles may be assigned to staff as identified by the CME) enter information on the DDEE (0337) page of eXPRS:

- **Client Information:** Demographic information is pre-populated when the Prime Number is clicked on. When creating a DDEE (0337) for an individual with no Prime #, the CME will need to enter the required fields. Although not required, for new Prime # requests, it is recommended that a Social Security Number be obtained to mitigate duplication.
- **Enrollment Plan Service:** The earliest date of enrollment for paid services is the start date of the ISP. The enrollment date cannot be the date of the case management's face-to-face LOC evaluation and signature unless the individual also has Medicaid and there is an authorized ISP in place. If DHS does not approve the LOC for any reason, you must submit a funding request.
  - Services should not be provided until the above steps have been completed.
  - If all the above steps are not completed but services were provided in error, refer to the [ODDS Exceptions](#) webpage to request an exception.
- **Additional Information:** This is the comments section of the form. Users have 500 characters to leave any notes they’d like to communicate with the state DD TAU staff. Please, do not be shy about using this section. The more information you share, the easier and quicker your form will be processed.

- **SC/PA:** Select the appropriate Service Coordinator or Personal Agent listed in the dropdown. If the SC or PA is not listed in the drop-down, the CME must submit an eXPRS User Enrollment Form. CDDPs use the [Local Authority/CDDP User Enrollment Form](#). Brokerages use the [DD Brokerage User Enrollment Form](#).

**Note:** Attachments can be added at the top of the DDEE (0337). Example: Name Change, NOPA, ODDS Funding Approval document, etc.

**CDDP View:**

### DD Eligibility Enrollment

**TAU Status:** Draft

**\* Community Developmental Disability Program:** Marion - 2429

**Attach File:**  No file selected.

**▼ Client Information**

<b>Client Prime:</b> AA111A1A	<b>SSN:</b> <input type="text"/>	<b>*DOB:</b> 4/16/1999
<b>*Last Name:</b> Bone	<b>*First Name:</b> Wish	
<b>Birth Name/Alias:</b> <input type="text"/>	<b>*Ethnicity:</b> Non-Hispanic	
<b>*Gender:</b> Female	<b>*Race:</b> White	

**\* Enrollment Plan Service**

\*\*\* The earliest date of enrollment for paid services is the start date of the ISP. The enrollment date cannot be the date of the case management's face-to-face LOC evaluation and signature unless the individual also has Medicaid and there is an authorized ISP in place. If DHS does not approve the LOC for any reason, you must submit a funding request.

Plan	Start Date	End Date
▼	<input type="text"/>	<input type="text"/>

**▼ Additional Information to Assist the State With Processing (126/500)**

**SC/PA:**

## Brokerage View:

### DD Eligibility Enrollment

**TAU Status:** Draft

**\*Brokerage:** NW Community Connection dba INW

**Attach File:**  No file selected.

#### ▼ Client Information

<b>Client Prime:</b> BB111B1B	<b>SSN:</b> <input type="text"/>	<b>*DOB:</b> 7/12/1957
<b>*Last Name:</b> Green	<b>*First Name:</b> Ever	
<b>Birth Name/Alias:</b> <input type="text"/>	<b>*Ethnicity:</b> Hispanic	
<b>*Gender:</b> Male	<b>*Race:</b> White	

#### \* Enrollment Plan Service

\*\*\* The earliest date of enrollment for paid services is the start date of the ISP. The enrollment date cannot be the date of the case management's face-to-face LOC evaluation and signature unless the individual also has Medicaid and there is an authorized ISP in place. If DHS does not approve the LOC for any reason, you must submit a funding request.

Plan	Start Date	End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="button" value="Add"/>		

#### ▼ Additional Information to Assist the State With Processing (0/500)

**SC/PA:** CME Staff name - Case Management Provider

### CDDP: How to complete a DDEE (0337) for an Admin Exam:

1. Select Admin Exam Coding Request in the drop down under Enrollment Plan Service
2. Enter the date of service in the start date under Enrollment Plan Service
3. In the notes section enter the address, city, state, zip code and phone number
4. If the individual is a minor enter a parent's full name, date of birth and, if provided, a Social Security Number in the notes section.
5. Enter the Eligibility Specialist's Name

6. Click Submit

### DD Eligibility Enrollment

**TAU Status:** Draft

**\* Community Developmental Disability Program:** Marion - 2429

**Attach File:**  No file selected.



#### ▼ Client Information

<b>Client Prime:</b> AA111A1A	<b>SSN:</b> <input type="text"/>	<b>*DOB:</b> 4/16/1999
<b>*Last Name:</b> Bone	<b>*First Name:</b> Wish	
<b>Birth Name/Alias:</b> <input type="text"/>	<b>*Ethnicity:</b> Non-Hispanic	
<b>*Gender:</b> Female	<b>*Race:</b> White	

#### \* Enrollment Plan Service

\*\*\* The earliest date of enrollment for paid services is the start date of the ISP. The enrollment date cannot be the date of the case management's face-to-face LOC evaluation and signature unless the individual also has Medicaid and there is an authorized ISP in place. If DHS does not approve the LOC for any reason, you must submit a funding request.

Plan	Start Date	End Date
<input type="text" value="Admin Exam Coding Request"/>	<input type="text" value="10/15/2019"/>	<input type="text"/>

#### ▼ Additional Information to Assist the State With Processing (126/500)

123 Happy St, Salem, OR 97301; 503-111-2222  
Parent: 1st Name, Last Name, 6/10/1980; 111-22-3333  
Eligibility Specialist's Name

**SC/PA:**

#### Form(s) and guides that apply:

[eXPRS User Guides](#)

Child Foster Care Update: [DHS 2755](#)

County transfer guide

[Service Monitoring Guidelines](#)

[ODDS General Fund Request Guide](#)

[Expenditure Guidelines](#)

[Admin Exam Guide](#)

#### Contact(s):

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