Overview

The Health Care and Economic Security Staff Development Center (SDC) has developed training for the June 2018 CBMS Build for Eligibility Sites. This document and other training materials were developed with assistance and feedback from IPT, OIT, CDHS, and HCPF Program Areas. The build will be implemented into CBMS and PEAK on June 10, 2018.

For additional information regarding the build, reference TrainColorado.com>Courses>CBMS Build Training>June 2018.

Some projects may have a reference to the location of training materials related to the project.

This document is organized based on the training modality for the projects. Any projects trained during the live webinar will be listed first, followed by projects trained via Video Recording, Web Based and lastly Build Guide only.

Projects where release notes are determined sufficient, will be listed in the Release Notes table at the end of this document.

For questions related to this training document, please contact the Staff Development Center at SOC_StaffDevelopment@state.co.us.

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Webinar Training

Project 11206 - CBMS MA Updates to IEVS & Reasonable Compatibility

Project Description

This project will make several updates to how CDLE income records are used for Reasonable Compatibility checks for Medical Assistance (MA) categories.

This project will also implement the Reasonable Compatibility check for Non-MAGI categories of MA.

The benefits of this project will be to further align system functionality with HCPF policy requirements, to ensure that CDLE records are being considered appropriately for both MAGI and Non-MAGI categories of MA, and to ease the burden on county staff when reviewing CDLE records for Reasonable Compatibility for MA purposes.

Marketplace programs will not read this interface, per current functionality.

Why the Change was Requested

Reasonable Compatibility is a method of verification used for Medical Assistance Program that compares a customer’s self-attested income against income provided by an electric data sources.

If the CDLE Budget’s net income is greater than the income standard amount of the individual aid code, then it will be considered for reasonable compatibility check. Exceptions: Non-MAGI members who have an active or pending income trust record will be excluded from IEVS Reasonable Compatibility check.

IEVS income will be requested for all members on a Medical Assistance case to determine eligibility for other Monthly Budget Unit (MBU) members.

Exceptions:

Categories that do not consider income limits, such as Former Foster Care

Old Age Pension (OAP) Medical categories that are determined based on AF OAP financial eligibility.

IEVS wages may be requested for someone on an income exempt category if their income is used for the MBU of another household member. Reasonable Compatibility logic will be modified to check each individual in the MBU separately

All countable earned, unearned, and self-employment income (total countable income) will be used when conducting the Reasonable Compatibility check. Non-MAGI categories that consider earned income will begin assessing for Reasonable Compatibility. IEVS income will be used for eligibility if the member fails to respond to the IEVS Reasonable Compatibility letter

Individual could become eligible in another category or fail MA entirely.

Individuals who are currently receiving Continuous Eligibility or are on a Guaranteed Program can be terminated from MA if this IEVS hit is the first IEVS hit after the initial application.

If it is not the first IEVS hit, individuals who are on Continuous Eligibility or Guaranteed Programs will not be terminated for excess income based on usage of IEVS records.
Individuals must reapply for Medical Assistance if they were previously terminated due to the use of an IEVS income record. Will accept self-attestation with new application.

Reasonable Compatibility process will occur again if income is not compatible.

CBMS and PEAK will have a way to add an individual to an existing open case if they were previously terminated because of IEVS income. Several modifications will be made to CBMS pages.

**Project Summary**

**CBMS**

*Case Individual Page*

The MA Individual Application is a new section added to the Case Individual page. If the member is discontinued it is, because they are over income (same as today). Users will see the Informational NOA. I will show you the new language on the Information NOA in a few slides.

The MA Application Information section is used when a case is still opened and the member who was terminated is reapplying for medical assistance. When the member reapplied, the date entered will be the first of the following month.

For Example: if the member was terminated April 30th (the member received notices early April and the member reapplies within the month of April while their case is still open)

The Effective Beg Date will be May 1st. The MA Buy-in Begin date, and CHP+ Begin Date has been removed to this section.
Display on Individual Countable Income Eligibility Results

The Source field is renamed to Source/Employer Name in the Detail section. This is going to help you by providing the employers name.
**CBMS Reasonable Compatibility Page**

Additional Information is still found on the Case Wrap Up page, but this button at the bottom is to help simplify the process when completing all the required data entry steps for Reasonable Compatibility. The Addition Information button will link you the Case Wrap up Page.
Case Wrap Up - Additional Information

Case Wrap up - bottom addition Information screen is where the date must be entered! If the date is not entered, Reasonable Compatibility has not been completed satisfied.

Display Medical Eligibility Result Page

The Display Medical Eligibility Results Page will show you how the IEVS records were used, and if the income was reasonably compatible. This page will show you which income was counted.
PEAK

PEAK will update both the Reasonable Compatibility and the Additional Information Page after the member provides answers the questions.

PEAK will allow member(s) to reapply for Medical Assistance it they have been discontinued due to excess income.

When a member has been discontinued due to IEVS, the new Benefits Page will display “Reapply for Health First Colorado”.

Member will receive a warning message when the user selects “I no longer work at a the job listed”. The member will be asked to provide an end date.
**Client Correspondence**

The language now adds language for the people in your household instead of language addressing an individual (you or your health benefits).

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**Interfaces**

The interfaces will run for all members on the case whose income is a part of the household.

The Interface will complete the data entry for the income received for each quarter regardless if the income is same.

When there are old records and the interface is no longer showing income for that record, the interface will end date that income record.
**Non-MAGI**

Self-attested Income = $1,010 monthly
Below QMB Income Standard ($1,025)

**IVES Report:**
$3,405 quarterly ($3,405/3 = $1,132)

Above QMB Income Standard ($1,025)
Below SLMB Income Standard ($1,226)

<table>
<thead>
<tr>
<th>Individual</th>
<th>Individual MBU’s WAGE Budget’s net income</th>
<th>Individual MBU’s CDLE Budget’s net income</th>
<th>IEVS amount over or under income standard?</th>
<th>Difference in FPL%</th>
<th>Under to 10% threshold?</th>
<th>Reasonably Compatible?</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAP recipient</td>
<td>$1,010 100%</td>
<td>$1,132 110%</td>
<td>Over</td>
<td>11%</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

**Results**
- Client is not reasonably compatible
- Given an ROP
- IEVS discrepancy letter sent
- Stays in QMB during ROP

No reasonable explanation provided?
- Client rolls into SLMB (with 10 day noticing)

---

**MAGI**

IVES Report: 07/07/2017

- Dad = $1,500 monthly
- Mom = $1,000 monthly
- Total Countable income = $2,500

Total Countable Income: $2,100
* Eligible for Medical Assistance *

Mom & Dad = MAGI Adult (133%; $2,726.60)
Children = MAGI Children (142%; $2,911.00)

<table>
<thead>
<tr>
<th>Individual</th>
<th>Individual MBU’s WAGE Budget’s net income</th>
<th>Individual MBU’s CDLE Budget’s net income</th>
<th>IEVS amount over or under income standard?</th>
<th>Difference in FPL%</th>
<th>Under to 10% threshold?</th>
<th>Reasonably Compatible?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mom</td>
<td>$2,100 102%</td>
<td>$2,500 121%</td>
<td>Under</td>
<td>19%</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Dad</td>
<td>$2,100 102%</td>
<td>$2,500 121%</td>
<td>Under</td>
<td>19%</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Child 1</td>
<td>$2,100 102%</td>
<td>$2,500 121%</td>
<td>Under</td>
<td>19%</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Child 2</td>
<td>$2,100 102%</td>
<td>$2,500 121%</td>
<td>Under</td>
<td>19%</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Results**
- CBMS use IEVS reported income (determine reasonable compatibility)
- Compare Mom & Dad’s income to the income standard and FPL% for each individual
- Based on aid code and MBU’s size
- In this scenario the household self-reported amount and the total income using the IEVS reported amount are under the income standard for each member
- Income is Reasonably Compatible even though the threshold is greater than 10%
- No ROPs created
Training Modality

Training for this project will be delivered during the build webinar. The webinar will be recorded and available on TrainColorado.com within 3 working days of the webinar.
Project 11149 - MA Magi Updates to the Monthly Budget Unit (MBU)

Logic

Project Description
This project will make modifications to how the system determines the Monthly Budget Unit (MBU) in MAGI households for tax dependents and tax filers. This project will not change Marketplace eligibility. These changes were identified through audits.

Why the Change was Requested
This project was developed because of audit findings of incorrect MBU calculations.

Project Summary
There are four main changes that will be taking place:

- Tax dependents who are applying for MAGI on their own will need to include the tax filer, the tax filer’s spouse and any additional tax dependents on their case even if they are not in the home, are temporarily out of the home or not a Colorado resident
- Tax filers who applying for MAGI will be required to include any tax dependents who are living in their home or who are not in their home, temporarily out of the home or who are not a Colorado resident
- Tax dependents who add their tax filer to the case to be included in the MBU will receive a tax filer information packet
- Tax dependents who pass away and are included in the tax filer’s MBU will remain part of the MBU until the 1st of the next year

There are two exceptions that will be taken into consideration with this project. If the customer declares they are a tax dependent but are homeless or a victim of domestic violence they will not be required to add tax filer to the case and the tax information packet will not be generated.

If a tax dependent of a tax filer (head of household) passes away at any time during the year, that individual will remain as part of the MBU until January 1 of the following year.

Training Modality
Training for this project will be delivered during the build webinar. The webinar will be recorded and available on TrainColorado.com within 3 working days of the webinar.
Project 11668 - MA Updates to Psych < 21 Psych ≥ 65 and Incarceration
Updates Colorado Benefits Management System (CBMS).

Project Description
This project is making updates to the logic for Psych < 21, OAP Med Psych ≥ 65, and Incarceration to properly align with policy guidelines.

Updates are needed to the living arrangement and housing situation logic, along with several preventative measures, to ensure that individuals are being placed into the appropriate category of Medical Assistance.

Why the Change was Requested
This project addresses the need to update the logic for Psych <21, Psych ≥ 65, and incarceration with limited benefits, to properly align with policy guidelines.

Project Summary
CBMS is being updated to ensure individuals that fall under the Psych <21, Psych ≥ 65 aid codes, and individuals who are incarcerated are being placed into the appropriate benefit category.

Multiple enhancements will be occurring to the Individual Attributes page in CBMS.

For example, under the Living Arrangement and Housing Situation fields; values will be added, removed or disabled.

These measures have been put into place to ensure individuals are not data entered into an incorrect aid code or benefit category.

Medical Assistance (MA) Modifications
Psych < 21, and OAP-A Med > 65 Psych categories for Ft. Logan and Pueblo under both Colorado Mental Health Institutions and Involuntary Treatment Act in CMHI as well as Psychiatric Facility are the only values that will be considered for the Psych categories.

If a customer fails to meet all criteria for one of the Psych aid codes, they will be denied or terminated from MA due to their living arrangement.

In addition, Psych categories will no longer be considered for those Customers that are incarcerated (ex: city/county jail).
**Living Arrangements for Incarceration**

Values under Living Arrangements that should be considered incarcerated (and are the only categories that allow limited benefits while incarcerated) are shown below.

Please see Project 9837 training for the list.

- Division of Youth Corrections/Services
- City/County Jail
- State/Federal Prison
- Wilderness Camp under Gov. Control
- Work Release

Individuals with these living arrangements should only be considered within the benefit categories that allow limited benefits while incarcerated.

**Living Arrangements**

Eligibility rules will be modified for Inter Care Facility and Nursing Facility and will no longer be considered living arrangement values for Psych < 21 and OAP-A MED ≥ 65.

On the Individual Attributes page in CBMS, under the Living Arrangement field dropdown the Division of Youth Corrections/Services and Psychiatric Facility values are being added.

**Division of Youth Corrections/Services and Psychiatric Facility**

For both Adult Financial and Colorado Works these new values are considered valid living arrangements. However, with Food and Expedited Food when either the head of household or a member who is not the head of household is determined to be in either Division of Youth Corrections and/or Services or Psychiatric Facility, they will be considered in an invalid living arrangement.

Any individual with an invalid living arrangement designation will not be eligible for food assistance and a denial NOA will go out. This will also cause the participation status in both cases to be set to Ineligible.

**Children Under 10**

On the Individual attributes page in CBMS, and under “Where does this Person live” in PEAK, the following values will not be selectable for a child under 10:

- Division of Youth Corrections/Services
- City/County Jail
- State/Federal Prison
- Wilderness Camp under Gov. Control
- Work Release
**PEAK Change**

In PEAK (AFB, RMC/RRR), the following new values will be added to the dropdown for the question *Where does this person live?* on the Residence Information Pages.

These new values must map to and from CBMS to the associated value in the **Living Arrangement** field on the **Individual Attributes** Page. Currently CMHi values are missing in PEAK. They will be added outside of this project.

**Invalid Housing Situations**

The value **Psychiatric Facility** will be added to the Living Arrangement field on the Individual Attributes page in CBMS and eligibility will be pulled from this field.

CBMS Users will no longer be able to select the **Work Release** value from the **Housing Situation** dropdown on the **Individual Attributes** page in CBMS.

Records that currently contain this value will not be affected.

The value will continue to display, unless a User changes it to a different value. This value under the **Housing Situation** field is not used by eligibility for any HLPG.

The duplicate value of Work Release will be removed from the Housing Situation Field.

**Long-Term Care Value Update**

On the Individual Attributes page in CBMS, in the Living Arrangements dropdown, the value of **Long Term Care** is listed twice.

Only one Long Term Care value will be able to be selected after this Build and the duplicate value will be removed.

**Training Modality**

Training for this project will be delivered during the build webinar. The webinar will be recorded and available on TrainColorado.com within 3 working days of the webinar.
Project 11819 - CBMS HCBS CWA Sunset

Project Description
The current Home and Community Based Services Children with Autism (HCBS CWA) Waiver will terminate as of June 30, 2018. New enrollments will not occur after January 2, 2018. To comply with this transition, ending new Children with Autism (HCBS CWA) Waiver enrollments effective January 2, 2018 will be organized outside of this project by the Long-Term Care Case Managers (CCB).

This project will deactivate the Children with Autism (HCBS CWA) aid code effective June 30, 2018. The individuals in this category will transition to a higher eligible aid code or MAGI Child with continuous eligibility effective July 1, 2018 through the remainder of their certification.

Members who are transitioned to MAGI Child with continuous eligibility may continue to be eligible in a Medical Assistance category following their redetermination. If the individual is not eligible for another Medical Assistance category, they will be terminated from Medical Assistance at that time.

Why the Change was Requested
This project addresses the termination of the Home and Community Based Services Children with Autism (HCBS CWA) Waiver effective June 30, 2018.

Project Summary
The current Home and Community Based Services Children with Autism (HCBS CWA) Waiver will terminate as of June 30, 2018. All children on the Children with Autism waiver will need to continue to meet waiver requirements up until the waiver sunsets such as age, income, etc.

New enrollments were not accepted after January 2, 2018 for this Waiver.

After January 2, 2018, for any ongoing CWA case, an updated LOC may still be entered into CBMS or at RRR, the member can continue to be eligible for HCBS CWA through June 30, 2018.

If an application is received prior to June 30, 2018, additional action is required by the CBMS User. End-users will need to submit a Help Desk Ticket (HDT) to request a record of CWA in HCBS be added to the LOC page with specific dates.

Children remaining on HCBS CWA on June 30 will be redetermined and either move to another Medicaid program or be put in MAGI Child with Continuous Eligibility (CE) until their next RRR. Upon the next RRR, they will be redetermined to see if they qualify for another Medicaid program or will be terminated off Medicaid.
CBMS Mass Update

CBMS Mass Update is scheduled to run on June 10, 2018. The Mass Update will identify all cases with an individual in HCBS CWA and re-determine their eligibility status and benefit category. They will automatically roll to another program unless they have a new waiver for another program.

Transitioning from the HCBS CWA Waiver

Current Continuous Eligibility(CE) rules will evaluate the individual for all other higher benefit categories before passing the individual into MAGI Child Continuous Eligibility(CE).

For Cases that transition to MAGI Child CE and are at redetermination, an update will occur. The individual will either remain on MAGI Child with no continuous eligibility, move to another benefit category (i.e. a different waiver or higher program) or terminate services at the end of the redetermination month.

Long-Term Care Level of Care Page

Effective July 1, 2018 in CBMS, CWA age 0-5 & CWA in HCBS will be removed and will no longer allow End Users to select these values for the ‘Level of Care Type’ drop-down field on the Long-Term Care Level of Care page. However, these values will continue to be displayed on cases that were previously created on this Page, but will no longer be selectable.

Med Spans

When EDBC is run on a case it will no longer allow a member/applicant to pass for HCBS CWA. When this project goes into effect all Med Spans associated to a case being transitioned from HCBS CWA will have the HCBS CWA span ended effective June 30, 2018. The new Med span effective July 1, 2018 will reflect the new eligible benefit category the individual has been transitioned to. If the individual is transitioned to MAGI Child with CE (through the end of their current certification period) the Continuous Eligibility indicator will be set to Yes.

After the implementation of this project there will be no Med Spans created and sent to the InterChange (billing system) for HCBS CWA with an effective begin date of 7/01/2018 or later.

Notice of Action (NOA)

Although a “Failed to meet level of care” termination NOA will not be generated when the Member moves from HCBS CWA to another category, they will receive an approval NOA in the new category. However, if the Member terminates Medical Assistance completely a corresponding termination NOA will be sent.

Post Implementation

If an application is dated prior to 6/30/2018 and received and or processed at the eligibility site after 6/30/2018 additional action is needed to process the application. The End-User will need to submit a Help Desk Ticket (HDT) to request a record of ‘CWA in HCBS’ be added to the Level of Care (LOC) page with specific eligibility dates.
**Scenarios**

A one-time mass update will occur on all active MA cases where at least one individual is actively receiving the HCBS CWA Waiver. These cases will have EDBC run on them during implementation, 06/10/2018.

*Scenario 1*

An MA application dated 12/04/2017 is processed on 02/01/2018. The application has one individual needing Long Term Care. The applicant is approved by a Case Management Agency for the waiver type of ‘CWA in HCBS’ as of 12/06/2017 and is approved for MA HCBS CWA on 12/06/2017. Additionally, the individual submits all required case verifications.

<table>
<thead>
<tr>
<th>December eligibility</th>
<th>Individual is eligible for HCBS CWA, the approval NOA is generated, listing benefit category, Health First Colorado (Colorado Medicaid) and Long-Term Services and Supports.</th>
</tr>
</thead>
<tbody>
<tr>
<td>January eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>February eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>March eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>Med Span</td>
<td>Begin Date 12/06/2017 Primary Category HCBS CWA</td>
</tr>
</tbody>
</table>

On June 10th, EDBC runs the case based on the mass update scheduled for this project.

<table>
<thead>
<tr>
<th>June eligibility</th>
<th>Individual remains eligible in HCBS CWA</th>
</tr>
</thead>
<tbody>
<tr>
<td>July eligibility</td>
<td>The individual is terminated from HCBS CWA, the termination NOA, ‘failed to meet level of care’ will not be generated with an end date of 6/30/2018 because the individual is eligible for MAGI Child (CE).</td>
</tr>
</tbody>
</table>
| Med Span             | **Second Record:**

  - Begin Date 07/01/2018
  - Primary Category: MAGI Child
  - CE Indicator = Yes

| First Record:        | Begin Date 12/06/2 017

  - End Date 06/30/2018
  - Primary Category HCBS CWA CE Indicator = No
### Scenario 2

An MA application dated 12/04/2017 is processed on 02/01/2018. The application has one individual needing Long Term Care. The applicant is approved by a Case Management Agency for the waiver type of ‘CWA in HCBS’ as of 12/05/2017 and is approved for MA HCBS CWA on 12/05/2017. Additionally, the individual submits all required case verification.

<table>
<thead>
<tr>
<th>December eligibility</th>
<th>Individual is eligible for HCBS CWA, approval NOA is triggered.</th>
</tr>
</thead>
<tbody>
<tr>
<td>January eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>February eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>March eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>Med Span</td>
<td>Begin Date 12/05/2017 Primary Category HCBS CWA</td>
</tr>
</tbody>
</table>

On June 10th, EDBC runs the case based on the mass update scheduled.

<table>
<thead>
<tr>
<th>June eligibility</th>
<th>Individual remains eligible in HCBS CWA</th>
</tr>
</thead>
<tbody>
<tr>
<td>July eligibility</td>
<td>The individual is terminated from HCBS CWA, a ‘failed to meet level of care’ will <strong>not be</strong> generated with an end date of 06/30/2018 because the individual is eligible for MAGI Child (CE).</td>
</tr>
<tr>
<td>Med Span</td>
<td>Second Record:</td>
</tr>
<tr>
<td></td>
<td>- Begin Date <strong>07/01/2018</strong></td>
</tr>
<tr>
<td></td>
<td>- Primary Category: <strong>MAGI Child</strong></td>
</tr>
<tr>
<td></td>
<td>- CE Indicator = <strong>Yes</strong></td>
</tr>
<tr>
<td></td>
<td>First Record:</td>
</tr>
<tr>
<td></td>
<td>- Begin Date 12/05/2017</td>
</tr>
<tr>
<td></td>
<td>- End Date 06/30/2018</td>
</tr>
<tr>
<td></td>
<td>- Primary Category HCBS CWA CE Indicator = <strong>No</strong></td>
</tr>
</tbody>
</table>

On June 24th, the end-user adds a Long-Term Care Level of Care record for CHCBS in HCBS with a Start Date 07/01/2018.

<table>
<thead>
<tr>
<th>July eligibility</th>
<th>The approval notice, is generated with their new begin date of 07/01/2018 displaying the Benefit Category description of, Health First Colorado (Colorado Medicaid) and Long-Term Services and Supports.</th>
</tr>
</thead>
<tbody>
<tr>
<td>August eligibility</td>
<td>Individual remains eligible in CHCBS</td>
</tr>
<tr>
<td>Med Span</td>
<td><strong>Second Record:</strong></td>
</tr>
<tr>
<td></td>
<td>- Begin Date <strong>07/01/2018</strong></td>
</tr>
<tr>
<td></td>
<td>- Primary Category: <strong>HCBS CHCBS</strong></td>
</tr>
<tr>
<td></td>
<td>- CE Indicator = <strong>No</strong></td>
</tr>
<tr>
<td></td>
<td><strong>First Record:</strong></td>
</tr>
<tr>
<td></td>
<td>- Begin Date 12/05/2017</td>
</tr>
<tr>
<td></td>
<td>- End Date <strong>06/30/2018</strong></td>
</tr>
<tr>
<td></td>
<td>- Primary Category HCBS CWA CE Indicator = <strong>No</strong></td>
</tr>
</tbody>
</table>
The following example illustrates what will be required for applications processed after the implementation of the project.

**Scenario 3**

An MA application dated 12/04/2017 is processed on 07/02/2018. The application has one individual needing Long Term Care and the applicant is approved by a local CCB agency for the waiver type of ‘CWA in HCBS’ as of 12/06/2017 and is approved for MA HCBS CWA on 12/06/2017. Additionally, the individual submits all required case verification.

<table>
<thead>
<tr>
<th>Required Action</th>
<th>End-user is to submit an HDT to request a record of ‘CWA in HCBS’ is to the Level of Care page with specified dates.</th>
</tr>
</thead>
</table>

On 07/02/2018, a data fix is completed to add the Level of Care record of ‘CWA in HCBS’ to the Long-Term Care Level of Care page with the Start Date of 12/06/2017, End Date of 06/30/2018. EDBC is then ran on the case.

<table>
<thead>
<tr>
<th>December eligibility</th>
<th>Individual is eligible for HCBS CWA, approval NOA is generated with their new begin date of 12/06/2017 listing benefit category, displaying the Benefit Category description of, Health First Colorado (Colorado Medicaid) and Long-Term Services and Supports.</th>
</tr>
</thead>
<tbody>
<tr>
<td>January eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>February eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>March eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>April eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>May eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>June eligibility</td>
<td>Individual remains eligible in HCBS CWA</td>
</tr>
<tr>
<td>July eligibility</td>
<td>The individual is terminated from HCBS CWA, termination NOA ‘failed to meet level of care’ will <strong>not be</strong> generated with an end date of 06/30/2018 because individual is eligible for MAGI Child (CE).</td>
</tr>
</tbody>
</table>

**Med Span**

<table>
<thead>
<tr>
<th>Second Record:</th>
<th>First Record:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Begin Date 07/01/2018</td>
<td>• Begin Date 12/06/2017</td>
</tr>
<tr>
<td>• Primary Category: MAGI Child</td>
<td>• End Date 06/30/2018</td>
</tr>
<tr>
<td>• CE Indicator = Yes</td>
<td>• Primary Category HCBS CWA CE Indicator = <strong>No</strong></td>
</tr>
</tbody>
</table>

**Training Modality**

Training for this project will be delivered during the build webinar. The webinar will be recorded and available on TrainColorado.com within 3 working days of the webinar.
Project 11756 - CBMS Correct Dates in EBD Notices

**Project Description**

This project will make updates to wording and dates in specific notices for Colorado Works and Adult Financial programs. This project will specifically modify the calculation used to calculate the Benefit End Dates for Adult Financial and Colorado Works. This project will also modify some existing and create new Sanction notices to provide clear notices to the customer and reduce Appeals.

**Why the Change was Requested**

The project will make updates to notices being sent to Adult Financial (AF), Colorado Works (CW) and Food Assistance (FA) customers. Some of these changes are follow ups to the September 2017 Client Correspondence project that HCPF implemented.

**Project Summary**

This build will update wording and dates on specific notices mailed to customers for Adult Financial, Colorado Works and Food Assistance. This includes modifying the benefit end dates for Adult Financial and Colorado Works Notice of Actions (NOA). Lastly, this project will also modify existing sanction notices to provide clearer information to customers, thus reducing customer confusion and appeals.

*Modification for Adult Financial (AF) and Colorado Works (CW)*

The newly added “benefit end date” will be determined when EDBC is ran and will no longer populate a date that is in the past. If EDBC is run and the failure is authorized on or before batch cutoff, the end date will be the last day of the current month. If EDBC is run and the termination is authorized after batch cutoff, the end date will be the last day of the future month. However, there are two exceptions users must be aware of, for both programs:

- The first is when a case is rescinded and re-ran using the same information. An example of this may include a discontinued AF case is rescinded and re-ran without any data being changed on the case. When the EDBC is re-run on the case the result will remain the same.

- The second is during RRR. If a new certification period is not established, the RRR certification end date will be the benefit end date.

Please note, there will be no changes to how eligibility is determined or how limited reporting requirements function for CW. This update is only changing the end date information that will be displayed on the NOAs.
**AF Scenarios**

**AF Scenario 1**

Customer has an ongoing Adult Financial case. On 6/15, our customer reports and verifies new unearned income that causes the case to be over income effective 12/31.

| Result | Because the change was process on 6/15, prior to batch cutoff, the NOA will display an end date of 6/30. A discrepancy will be created for January through June and the worker will determine if a claim should be established. |

**AF Scenario 2**

Customer has an ongoing Adult Financial case. On 6/23, the customer reports and verifies new unearned income that causes the case to be over income effective 12/31. The change is processed on 6/23, after batch cutoff.

| Result | Because EDBC is ran after batch cutoff, the benefit end date will display as 7/31. A discrepancy will be created for January through July and the worker will need to determine if a claim should be established. |

**CW Scenarios**

**CW Scenario 1**

Customer has an ongoing Colorado Works case. On 7/10, the customer reports and verifies new income that causes the case to fail effective 5/31.

| Result | Because the change was process on 7/10, prior to batch cutoff, the NOA will display a NOA end date of 7/31. A discrepancy will be created for the months of June and July and the worker will determine if a claim should be established |

**CW Scenario 2**

Customer has an ongoing Colorado Works case. On 5/27, our customer reports and verifies new income that causes the case to fail effective 5/31.

| Result | Because the change was processed on 5/27, after batch cutoff, the NOA will display an end date of 6/30. A discrepancy will be created for the month of May and June and the worker will determine if a claim should be established. |
Food Assistance (FA)

For Food Assistance, the language included in the third paragraph of the Employment First (EF) sanction notice, FS0707, will be updated.

The age included on the Notice of Action (NOA) will be modified from “18 and 50” to now reflect “18 and 49”.

The NOA will read as follows:

- The following individual will be sanctioned from receiving Food Assistance benefits because the Food Assistance Office has determined that *Customer A* is between 18 and 49 and there are no dependents under age 18 in the Food Assistance household.

Additionally, the text concerning appeals will also be updated on both EF notices, FS0707 and FS0710. New language will be modified within the Able-Bodied Adult without Dependents Exceptions (ABAWDs) section.

The age information included on the NOA will be modified from “less than 18 years old or over 60” to now reflect “less than 18 years old or over 49 years old”.

The NOA will read as follows:

- ABAWDs can exceed the 3-month benefit time limit without meeting the work requirement if they are less than 18 years old or over 49 years old or meet an exception due to one of the following.

Additional CW Changes

CW also has some additional changes. First, CW will now send out approval NOAs at RRR. Second, language on the denial NOA for active CW cases adding a new household member has been corrected. Lastly, the sanction and closure NOAs have been combined.

**CW Early RRR Scenario**

Let’s walk through an example of how an early CW RRR will be processed, following this build.

<table>
<thead>
<tr>
<th>Our customer has an ongoing CW case.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The RRR is due 6/30 for July benefits, however, the customer returned the packet early.</td>
</tr>
<tr>
<td>The completed and signed RRR was received and process on 5/15.</td>
</tr>
<tr>
<td>The new certification month of July is not available for review when EDBC is ran.</td>
</tr>
<tr>
<td>With this build a new Mass Update (MU) trigger will be created so that the case will auto run the day after batch cutoff.</td>
</tr>
<tr>
<td>On 5/22, the day after batch cutoff, the case will run so that eligibility for July benefits can be determined and a NOA mailed to the customer.</td>
</tr>
</tbody>
</table>
CW Individual Denial Scenario
Prior to this build, notices had incorrect terminology and created confusion.

Our customer, has an active CW case and has submitted a CW-3L requesting that someone be added to the case

The new individual is added to the case with a start month of June, when EDBC is ran, the new individual is determined ineligible.

The customer will fail and a denial notice will be triggered.

The NOA will read as follows: Colorado Works benefits have been denied for the following individual(s).

Colorado Works (CW)
Sanction and closure notices have been combined. This also includes a new NOA when benefits are increasing after a sanction has been served.
Please note, with this build, there are not changes to the way sanctions are created, rolled, served or cured.

CW Sanction NOA Examples
The CW Sanction NOA has enhanced language, combining the sanction and closure NOA.

<table>
<thead>
<tr>
<th>Sanction number</th>
<th>NOA Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>First level sanction NOA:</td>
<td>Your Cash Assistance benefits are changing because Customer A has a first (1st) level sanction. Your benefits will be reduced by 25% for one (1) month. Starting Month Year your household will get $100.</td>
</tr>
<tr>
<td>Second level sanction NOA:</td>
<td>Your Cash Assistance benefits are changing because Customer A has a second (2nd) level sanction. Your benefits will be reduced by 50% for one (1) month. Starting Month Year your household will get $50.</td>
</tr>
<tr>
<td>Third level sanction NOA:</td>
<td>As of Month Year, your household doesn’t qualify for Colorado Works because Customer A has a third (3rd) level sanction. Your household can’t receive benefits for 3 month(s), from Month Year to Month Year.</td>
</tr>
</tbody>
</table>

CW Sanction NOA Scenario 1
When more than one customer is sanctioned on an active CW case, the individual sanction levels are added together to get a combined sanction level

In this example, our customers Paul and Robert Smith both have a first level sanction.

The cumulative sanction is calculated by adding the 25% for each customer, for a total of 50% with a benefit reduction for 1 month.

Sanction NOA text: Your Colorado Works benefits are changing because Customer A has a first (1) level sanction. Customer B has a first (1) level sanction. Your Colorado Works benefits will be reduced by 50% for 1 month. Starting Month Year, your household will get $50.
CW Sanction NOA Scenario 2

Here is an example of when our customers Paul and Robert now both have a 2nd level sanction.

The cumulative sanction is now 50% plus 50% totaling 100% with a benefit reduction for 1 month.

Sanction NOA text:

As of Month Year, your household doesn’t qualify for Colorado Works because Customer A has a 2nd level sanction. Customer B has a 2nd level sanction. Your Colorado Works benefits will reduce by 100% for 1 month(s), from Month Year to Month Year.

CW Sanction NOA Scenario 3

Lastly, here is an example where our customer Paul has a 1st level sanction and Robert has a 3rd level sanction.

For this example, the cumulative sanction for the household is 100% for 3 months.

Sanction NOA text:

Your Colorado Works benefits will end on Month Year, because Customer A has a third (3) level sanction. Your household can’t receive benefits for three (3) months, from Month Year to Month Year.

Training Modality

Training for this project will be delivered during the build webinar. The webinar will be recorded and available on TrainColorado.com within 3 working days of the webinar.
Video-Recorded

Project 11804 - EBD Updates to AF/CW Interview Requirements Pages

Project Description
This project will make necessary updates to the CDHS Interview pages for Adult Financial and Colorado Works. It will assist workers with quickly determining when the last interview was to prevent multiple interviews.

Why the Change Was Requested
This build addresses enhancements to the CDHS Interviews page for Adult Financial (AF) and Colorado Works (CW). The changes will allow users the ability to quickly determine when the last interview was completed for any CDHS program. Thus, saving time for both workers and customers alike.

Project Summary
Adult Financial (AF) Tab
With this build, the Client Missed AF Interview checkbox will be removed. A new field titled Most Recent CDHS Interview Date will be added in its place. This date will auto populate. The date information will be pulled automatically from the Interview Date field. CBMS will utilize the date from any of the three CDHS tabs: Food Assistance, Adult Financial or Colorado Works.

<table>
<thead>
<tr>
<th>Old Field:</th>
<th>New Field:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Missed AF Interview</td>
<td>Most Recent CDHS Interview Type</td>
</tr>
</tbody>
</table>

However, this is not true when a customer has not completed an interview and the worker has selected the Missed radio button while answering the AF Interview Required question - the Interview Date will not auto populate, it will remain blank.

If the AF Interview Required is marked as Missed, the Interview Date will become a mandatory field.

In addition, the Missed Interview Date field will be removed. In its place, a new field titled Most Recent CDHS Interview Type will be added and will populate with Face To Face or Phone Interview. These fields will auto populate based on the radio button selected while answering the Interview Type question on any of the three CDHS tabs.

<table>
<thead>
<tr>
<th>Old Field:</th>
<th>New Field:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missed Interview Date</td>
<td>Most Recent CDHS Interview Type</td>
</tr>
</tbody>
</table>

Lastly, the Good Cause field will be renamed to Reason for Phone Interview. Each of the drop-down options will now include the phrase Good Cause as prefix. Additionally, a option of Not Required-F2F completed in last 3 years has been added.

<table>
<thead>
<tr>
<th>Old Field:</th>
<th>New Field:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Cause</td>
<td>Reason for Phone Interview</td>
</tr>
</tbody>
</table>
Current CDHS Interviews - AF Tab

Updated CDHS Interviews - AF Tab
Colorado Works (CW) Tab

With this build, the **Client Missed CW Interview** checkbox will be removed. A new field titled **Most Recent CDHS Interview Date** will be added in its place.

<table>
<thead>
<tr>
<th>Old Field:</th>
<th>New Field:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Missed CW Interview</td>
<td>Most Recent CDHS Interview Date</td>
</tr>
</tbody>
</table>

This date will now auto populate. The date information will be pulled from the **Interview Date** field. CBMS will utilize the date from any of the three CDHS tabs: Food Assistance, Adult Financial or Colorado Works when populating this field.

However, this is not true when a customer has not completed an interview and the worker has selected the **Missed** radio button while answering the **CW Interview Required** question - the Interview Date will not auto populate, it will remain blank.

In addition, the **Missed Interview Date** field will be removed. In its place, a new field titled **Most Recent CDHS Interview Type** will be added and will populate with Face To Face or Phone Interview.

<table>
<thead>
<tr>
<th>Old Field:</th>
<th>New Field:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missed Interview Date</td>
<td>Most Recent CDHS Interview Type</td>
</tr>
</tbody>
</table>

These fields will auto populate based on the radio button selected while answering the **Interview Type** question on any of the three CDHS tabs.

**Current CDHS Interviews - CW Tab**
Updated CDHS Interviews - CW Tab

Training Modality

Training for this project will be delivered through a video. This video will be available through COLearn.com.
Web Based Training

Project 11991 - CBMS Dashboard Phase II

Project Description

A High-Level Business Request (HLBR) was submitted for a County Dashboard project to be implemented April 2018. Some of the requirements initially submitted will now be implemented in June 2018. This additional HLBR is being submitted in order to move these portions of the project to June 2018.

Why the Change was Requested

During April 2018, the CBMS County Dashboard was introduced to CBMS users to provide them with a tool to access COGNOS reports that will allow them to manage workloads in a timely and effective manner. This was previously determined based on county feedback and suggesting stating that counties would benefit from a work-management tool.

Project Summary

The CBMS County Dashboard will be undergoing an expansion to include additional functionality for users. Access to the CBMS County Dashboard will be for users who security profiles who are supervisors, administrators or managers.

This project will be creating eight new dashboard tabs that will provide useful information for managing workloads for multiple High-Level Program Groups (HLPGs). The eight new dashboard tabs are:

- Exceptions
- LTC
- Claims
- AF
- CW
- County Work Programs
- Enhanced Funding (EF)
- Discrepancies

The Exceptions Tab

When a user reviews this tab, they will see the exceptions that exist on cases that are assigned to users in their unit. Information on this tab will be able to be sorted by User, Type of Exception, Pending Suspend Reason. As far as specific exceptions, users will be able to view the following two exception types:

- Case Eligibility Status in Pending Mode
- Sup Auth
**The LTC Tab**

When a user reviews this tab, they will see data related to LTC cases assigned to users in their unit. Information on this tab will be for Active cases only and will display which cases have a Level of Care (LOC) certification or Disability Determination Diary Date due in the next 60 days. Much like other tabs, information on this tab can be sorted by user, and case number.

**The County Claims Tab**

When a user reviews this tab, they will see claim data related to the cases assigned to the users in their unit. Information visible on this tab will include:

- Total amount of claims (For the unit, and per user)
- Dollar amount of claims
- Claims by HLPG
- Originating County
- Originating User

**The AF Tab**

When a user reviews this tab, they will see data related to the Adult Financial HLPG cases assigned to the users in their unit. Information in this tab will be broken into two sections:

Med-9

- Cases that have a Med-9 that is due in the next 60 days
- Cases with the AF Re-Exam Date due in the next 60 days. (This will match the Med-9 data)

SSI Status

- Will report the SSI Status for AF cases for the last 30 days. This will show the status of Terminated or Denied.

**The CW Tab**

When a user reviews this tab, they will see Colorado Works cases that are approaching their 60th month of eligibility in the next 60 days. This information will be displayed per user in the unit and by case assigned to each user in the unit.

**The County Work Programs Tab - WFD Information**

When a user reviews this tab, they will be able to review the number of cases referred to Workforce Development (WFD) or Employment First (EF). This information will be available by User in the unit and by cases assigned to the users in the unit.
The County Work Programs Tab - WPR Information

When a workforce user reviews this tab, they will see information related to the Work Participation Rate (WPR) for cases assigned to their unit. This will be sampled information for the prior three months for cases assigned to their unit. Information in this tab will be displayed by:

- Total Hours participated
- Total Hours Needed
- Total number of cases meeting WPR
- WPR Worker
- Cases

The Enhanced Funding Tab

When a user reviews this tab, they will see information related to Employment First cases. This tab will identify information related to Enhanced Funding. A monthly comparative graph will display cases approved for Enhanced Funding information by EF user and by case.

The Discrepancies Tab:

When a user reviews this tab, they will be able to view benefit discrepancies for AF and CW cases that have not been researched. This tab will reflect the number of discrepancies in a unit, user, case that are unresearched. This tab will also reflect the number of claims that are not completed. This tab will reflect the status of the discrepancy and/or claim, the amount of the discrepancy and/or claim, the originating county of the claim, the originating user of the claim, and have information filtered by HLPG.

Training Modality

This Project Guide includes all the information about the change. This project will not be delivered live during the build webinar.
Build Guide Only

Project 11801 - CBMS FA Noticing Updates

Project Description
This project will include wording updates to certain Food Assistance notices to ensure that the notice is clear to the reader.
This project will also include logic changes to ensure that notices are correctly generated for households who no longer have any eligible household members.

Why the Change was Requested
This project is being implemented to ensure that when a customer receive Food Assistance notices that information is presented clearly to the reader.
Additional CBMS logic changes are being implemented to secure notices are generating correctly for households.

Project Summary
This project will be making multiple updates to different notices that are generated and sent to Food Assistance (FA) households.
The intent of these updates is to ensure that information is presented in a clear manner for FA customers.

Logic Update to Case Level Denial/Termination Notices
CBMS logic will be updated to allow EDBC to trigger and send a new case-level denial or termination notice for either Expedited Food Assistance or regular FA cases when any of the following circumstances occur to the last eligible household member:

- An IPV Disqualification is imposed.
- The last eligible household member is marked as out of the home.
- The last eligible household member is marked as ancillary member.

When any of the three circumstances occur to the last eligible household member on a case, the household will receive a Notice of Action (NOA) notifying them that their Food Assistance case no longer has any eligible members.

This is a new denial notice being implemented in CBMS. The logic behind this update will be connected to the status of the last eligible household member of a case.

To be considered eligible (or active), that individual was eligible for benefits in the payment month the notice is triggered, or was eligible for benefits for the month prior to the current payment month of the current EDBC run.
Example

| An ongoing FA case consists of two active customers. |
| The household is certified from December 2017 to May 2018. |

| One of the customer is disqualified as of 01/01/2018 due to an IPV Disqualification. |
| An IPV Disqualification Notice will be sent to the customer. |

| During February 2018, the remaining household member now becomes an ancillary member on this case. |

| CBMS will trigger a case-level denial NOA and the reason for denial will be the “Food Assistance case no longer has any eligible member(s).” |

Example of the case-level denial:

- Your application has been denied for all members in your household
  - As of {benefitEndDate}, your household does not qualify for this benefit because there are no eligible members in your home.

    More about your Food Assistance benefits
    - If your household has applied for SSI or Colorado Works benefits and you are approved for one of these programs, you may be eligible to receive Food Assistance. Contact your county worker to find out more about how you may qualify for Food Assistance.

Logic Update to Benefit Change NOAs

EDBC logic has been updated for ongoing cases when there is a change in benefit amount (increase or decrease) after either the Periodic Report or RRR due date.

In these instances, EDBC will not trigger or send a benefit change NOA when the case is running in ongoing mode and either the RRR or PR have not been started.

The household will be notified of the change to their benefit amount when either the RRR or PR packet is started and processed.
**RRR Example**

| An ongoing FA case has their RRR due 02/28/2018. (The new certification period starts in March 2018.) |
| The household reports a change in income that causes a benefit increase for March 2018. |
| EDBC will not trigger a change NOA for March 2018 until the RRR packet is started and processed. |

**PR Example**

| An ongoing FA case has their PR due 02/28/2018. (The 13th month starts in March 2018.) |
| The household reports a change in income that causes a benefit decrease for March 2018. |
| EDBC will not trigger a change NOA for March 2018 until the PR packet is started and processed. |

**New FA Repayment Agreement Notice**

The Food Assistance program must have a Repayment Agreement notice that is only used for FA claims. This notice cannot contain information associated with Adult Financial or Colorado Works. Once this project is implemented in CBMS, when a Repayment Agreement is triggered for FA overpayments the new Repayment Agreement will be sent when the FA case is online authorized.

Other Repayment Agreement notices will no longer be triggered for Food Assistance.
Example of the new FA Repayment Agreement Notice:

STATE OF COLORADO

Repayment Agreement

Program: Food Assistance
Who Was Overpaid: CLIENT NAME
Error Type: Admin Error

04/23/2018

To repay the overissuance on your Food Assistance benefit, you have the option of one of the following agreements below:

- Benefit Reduction Agreement
- Cash Repayment Agreement

BENEFIT REDUCTION AGREEMENT

You may pay the amount you owe by having us reduce your current monthly Food Assistance benefits by signing and dating below, and returning this form to your county office.

☐ I will make monthly Benefit Reduction payments.

We will reduce your benefits according to the following Benefit Reduction Guidelines and apply the reductions to the Food Assistance claim: 0000000000

Benefit Reduction Guidelines:

- If the overissuance was caused by an Inadvertent Client Error or Administrative Error, the benefit reduction will be the greater of 10% of the benefit or $10.00.

If you want us to reduce your monthly benefits by an amount greater than the guidelines above, enter how much you would like taken out of your monthly benefits here: $_______ (total monthly payment)

The amount we take out of your monthly benefits may change without notice to you if your monthly benefit amount changes.

If you choose this benefit reduction agreement and this form is received by the due date indicated on the Notice of Overpayment, the reduction to your monthly benefit will begin the second month following the due date.
CASH REPAYMENT AGREEMENT

You may repay the entire amount you owe or you can pay a portion of the amount and pay the rest in monthly installments, or you may also begin repayment with monthly installments.

Please select the cash repayment option you wish to use, sign your name, date the bottom of this form, and return this form to your county office:

☐ I will pay the entire balance all at once.

☐ I will pay $______ now and the rest in monthly payments of $__________ on or before the _____ day of each month.

☐ I will make monthly payments in the amount of $______ on or before the _____ day of each month.

Please send monthly payment and make checks/money orders payable to: ([Variable] insert the County office information in BOLD)

If you have any benefits remaining in your EBT (Electronic Benefit Transfer) account that you do not need, you may use them instead of, or along with cash to make a partial payment or to make monthly payments.

Your Rights:

• You may inspect and copy our records related to your debt and request a review of our determination that you owe this debt.
• You may also contact your county office later to change this agreement if your financial circumstances change.

If you fail to make payments on the amount owed and the debt is delinquent (late), the county will pursue other collection methods that may include but are not limited to:

• State or Federal Income Tax Refund
• PTC Rent Rebate
• Social Security income (including SSA, SSDI, Railroad benefit, etc.)
• Federal Retirement or Salary

Client’s Signature _______________________________ Date __________

Client’s Telephone Number _________________________

For County Use Only:
County Representative Name/Signature ______________________ Date __________
Notice Updates

When an Approval for Expedited Food Assistance or Overpayment notice is sent, information on the notices will be displayed in a bulleted list.

For Expedited FA approval notices, the More about your Food Assistance benefits section has been reorganized to display the bulleted information in a new order. The first bullet will ensure the customer is aware their continuing benefits may be contingent on postponed verification for their regular FA benefits.

Example of the revised Expedited FA Approval notice:

<table>
<thead>
<tr>
<th>More about your Food Assistance benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Your application has been approved, but we need more proof to see if you can keep getting benefits after [variable date]. You will get a separate notice letting you know the proof we need and when it will be due. If we don’t get the proof we asked for, your benefits will stop as of the date listed above. If we do get the proof we need, you may see a change in the amount of benefits you will get based on what the proof tells us.</td>
</tr>
<tr>
<td>• You will get your Food Assistance benefits on a Colorado EBT card. If you don’t already have an EBT Card, you can get one by going to the nearest office of ADAMS DEPARTMENT OF HUMAN SERVICES. If you are unable to go to the office, call them at (720) 523-2800 to find out how to request a card through the mail.</td>
</tr>
<tr>
<td>• If you applied after the 15th of the month, you will get 2 months’ worth of benefits on your card at the same time. The first month is a partial month based on the date you applied, and the second month is the full amount of benefits you qualify for.</td>
</tr>
<tr>
<td>• If you are approved for other public assistance after you are approved for Food Assistance, your Food Assistance benefits may be reduced without further notice.</td>
</tr>
<tr>
<td>• You may qualify for free nutrition education classes. To learn more, call SNAP-Education at 1-844-393-SNAP (1-844-393-7627).</td>
</tr>
</tbody>
</table>

The FA Overpayment notice will now display claim information in a list format.

For clarity purposes, the FA Overpayment notice is not the initial notice a household is sent that informs them of their overpayment in benefits.

This notice is generated and sent to liable individuals that are receiving benefits to notify them that we are going to initiate a recoupment. When populated, the Overpayment notice will separate multiple liable individuals by a comma and/or using the word “and”.

Verbiage updates to the FA Overpayment Notice will now ensure that the term Food Assistance is used throughout the notice.

Additionally, logic has been entered to ensure that the address used for the Office of Administrative Courts is dynamic and will change if the office address changes.
Examples of the revised FA Overpayment notice:

STATE OF COLORADO

A member of your Food Assistance case had a previous overpayment of benefits while participating in another case. The Food Assistance Program holds all adult members jointly and severally liable for the repayment of over issued benefits. The details of overpayment are below:

- Liable Individual(s): [variable name], [variable name] and [variable name]
- Claim Number: [variable]
- Claim Amount: [variable]
- Time Period of overpayment: [variable]
- Type of Error: [variable]
- Benefit withholding guidelines: [variable based on error type]

This benefit reduction to your monthly benefit will occur with the first issuance that occurs 10 days from the date of this notice.

10 CCR 2506-1, 4.801

Important Note:
If you do not access the benefits on your EBT Card for 365 days, they will no longer be in your account. To see if you are eligible to have these benefits restored, contact your county worker.

Notice to Food Assistance Clients:
Failure to report and/or verify any household expense that could result in a deduction for the Food Assistance Program, such as: Rent, Utilities, Mortgage, Taxes, Insurance, Day Care, or Medical Costs is seen as a statement by your household that you do not want to receive a deduction for that expense.

When you receive Food Assistance benefits, you are required to report changes in your households’ circumstances within 10 days after you become aware of the change. These reporting requirements do not pertain to your household if you have been certified as a Simplified Reporting household. You should have received a written notice explaining your reporting requirements. If you have not received a notice, please contact your worker. You may report changes in your households’ circumstances to your local Food Assistance office by phone, in person, in writing, by fax, and/or other electronic device. If you fail to report information correctly and timely, your household may owe us...
Training Modality

This Project Guide includes all the information about the change. This project will not be delivered live during the build webinar.
Project 11879 - Prompt User to Update Shelter Expense When Address is Changed

**Project Description**

Currently in CBMS, you can change an address, and the shelter expense will remain from the previous address. This project will create a prompt to the user through a pop-up message to verify shelter expense or will automatically set Shelter Expense to Unverified Source to request shelter expense.

**Why the Change was Requested**

When an address change is being made in CBMS or being reported in PEAK, the customer’s updated shelter costs were not being captured. This resulted in incorrect benefit allocations and payment errors being cited in quality assurance audits.

**Project Summary**

With this project, when a user changes the head of household home address and the case is in RRR/PR mode the Shelter Expense page will be added to the queue.

In addition, a new pop up message will be shown when a user changes the head of household home address when the case is not in RRR/PR mode.

**CBMS Updates**

Pop up message. On click of “OK” user will be redirected to the shelter expenses page.

![Message from webpage](image)

**Peak Updates**

When a customer reports and address change in PEAK, a warning message will display on the page “You have had a change in your home address; please update your shelter expenses” and will be redirected to the housing/utility bill summary page.

**Training Modality**

CBMS Build Guide only (This Project Guide includes all the information about the change. This project will not be delivered live during the build webinar.)
Project 11901 - CBMS View Most Recent VCL After it has been Cleared

Project Description

Users will now can view a deleted VCL in the Verification Checklist Summary section to see previously requested verifications.

Why the Change was Requested

The VCL now clears when a case is closed for missing verification. However, when the late verification is received it is hard to determine exactly what was requested unless the VCL is pulled from print history.

This makes it difficult and time consuming for the user to determine if all verification was received to allow the case to be rescinded or allow for the user to easily inform the customer what is missing from the previous request.

Project Summary

This project will now allow users to easily navigate to and view the deleted VCL once the program has been discontinued for failure to provide requested verification without having to pull the document from the print queue.

Users will be able to view the outstanding items that are necessary in the VCL Summary and Display Eligibility Summary pages.

The Deleted button will be enabled on these two pages.

CBMS Updates

With this build users will be able to select the deleted button on the Verification Checklist and Display Eligibility Summary pages in CBMS and view the most recent verification checklist.
Verification Checklist

Existing Page

Updated Page

Display Eligibility Summary

Existing Page

Updated Page

Training Modality

This Project Guide includes all the information about the change. This project will not be delivered live during the build webinar.
Project 11923 - CBMS Updates to DOR Noticing

Project Description
This project will update the Department of Revenue Notices that are sent out annually and update the Benefit Recovery page in CBMS.

Why the Change was Requested
This project is being implemented based on feedback from numerous counties and state workers reporting that calls are being routed incorrectly when customers are contacting an agency to follow up on claim notices they have received.

Project Summary
Enhancements will be made in CBMS to ensure that the Originating County is displayed on both System-Generated and Non-System Determined Claims (NSDC) for Adult Financial, Colorado Works, and Food Assistance.

The purpose of this system enhancement is to ensure that the name and address of the Originating County that created the claim is listed on the Notice of Intent to Offset Intercept.

A data fix will be made on the Create/Revise Non-System Determined claim page to ensure that when a NSDC is created for AF, CW, or FA that the Originating County is populated on all Benefit Recovery pages in CBMS that contain the field labeled Originating County.

This will ensure that no other Benefit Recovery pages have the Originating County field left blank. This data fix will be made for all claims regardless of the status of the claim (such as Active, Closed, Open, Terminated.)

When a system-generated claim is created, CBMS will now ensure to populate the Originating County field on all Benefit Recovery pages.

For system-generated claims that have the Originating County code missing, or blank, a data fix will be implemented to populate this missing information.

For existing claims that were introduced during the CBMS implementation in 2004, the code that identifies the Originating County will be populated by the county code associated with the user ID that created the claim.

Finally, the Annual List of Cases Interfaced to DOR report will be modified to allow for an output option from the 2002 version of Excel to the 2007 version of Excel.

This will allow for the report to display over 65,000 rows of data. Excel 2007 allows for up to 1 million rows of data to be displayed on one sheet before data extracts to another sheet. Since the report is triggered annually during August, this will allow for potentially high volume of data to be viewed from one Excel sheet.

Training Modality
This Project Guide includes all the information about the change. This project will not be delivered live during the build webinar.
Project 11836 MA Add Eligibility Content to CBMS and PEAK

Project Description
A new law was passed that requires Medical Assistance to start providing information about the income, resources (where applicable), and household composition used to make each Health First Colorado and CHP+ eligibility determination for an individual or family that results in a Notice of Action being mailed.

In addition, changes are needed in PEAK Report My Changes (RMC) that will allow members to report if they are no longer a Colorado Resident.

This functionality has been in the PEAK online application all along, but was never added to PEAK RMC until now.

Why the Change was Requested
A law passed that required financial information be available to members. Members also need to be able to report residency changes.

Project Summary

PEAK Changes

The Household & Financial Information for Health First Colorado and Child Health Plus (CHP+) will display details about the financial information and household composition used to make a Medical Assistance eligibility determination that is included on a Notice of Action (NOA).

The member will be able to select the NOA that they want to view more information about.

This information will appear for all Medical Assistance NOAs, regardless if the case is a medical only or combo.

The information will be provided for all types of MA NOAs:

- Approval
- Denial
- Termination
- Change
- No change

Members will have the ability to access any NOA they receive.
**Communications Mail Center Page**

The member can click on the **Notice Name** to view the NOA.

The Mail Center includes a **Details** link for each NOA in the PEAK Mail Center.

Members can enter a date range to search for a specific NOA.
Household & Financial Information for Health First Colorado and Child Health Plus (CHP+)

In Step 1, the member has the option to choose which individual within the NOA they want to view details.

Step 2 allows the member to select the month of eligibility determination.

The member can select the program name in Step 3.

The financial information displayed on the page provides the member with amounts used for eligibility determinations.

All fields are selectable and have hover text.

Source value for all income will be displayed when the member selects an income type.

Here is the Other Income detail showing either the value **Electronic Database** (interface) or **You Reported**.
**Liquid Assets**

The assets tab on the page will show types of assets or resources used to determine eligibility.

The member can click the **Learn More** link to see the details of each type.
The member can print the new page by clicking the print button in the upper right corner.

The member can select an individual or print the information for all individuals included on the NOA.
Report My Changes - Colorado Residency

Colorado Residency was added to the PEAK Report My Changes (RMC) page> Individual tab. If the member selects Colorado Residency, a list of questions will appear for the member to answer.
The questions the member is asked in PEAK RMC are the same questions that currently appear in the PEAK application (Apply for Benefits/AFB) if someone reports they are not a Colorado Resident.

With this project, the same questions are being added to PEAK RMC and will be mapped to CBMS.
CBMS Updates

For the purposes of providing an explanation and/or answering questions, CBMS users will be able to view the details that are presented to members in PEAK by accessing the new Search NOA for Eligibility Details page in CBMS.

Search NOA for Eligibility Details Page

The Search NOA for Eligibility Details page is read only and accessed in Eligibility>Wrap Up. Depending on the NOA that is selected certain income, resources, and budget information will be displayed.

This page will include the same information that the member will see in PEAK.
CBMS users can click the **Details** button on the page to view information about the row selected in the Search Results.
NOA Details

This page shows the information used to determine eligibility and provided to the Member in the PEAK Mail Center.

- Earned Income
- Net Self Employment Income
- Other Income
- Income Counted
- Annualized Income
- Asset Details
- Assets Counted
- Period of Ineligibility
- Amount of Assets Given Away

The page also displays a Pregnancy Indicator Yes/No for each member listed.

Non-Financial Eligibility Determination section displays message for the member to explain if income or assets were not used to determine eligibility.

The income and asset sections display the Source types, You Reported and Electronic Database.

Users have the option to print a member-friendly version of the information via the Print PDF button.
## Release Notes Only Projects

Project Subject Matter Experts have determined Release Notes are sufficient for the following projects:

Information about these projects can be found on the Portal under the CBMS tab.

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<th>Project Name</th>
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<td>MA COGNOS Reports Update Summary Data</td>
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<tr>
<td>11750</td>
<td>CBMS PEAK- Technical Support Center Integration</td>
</tr>
<tr>
<td>11836</td>
<td>MA Add Eligibility Content to CBMS and PEAK</td>
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<tr>
<td>11876</td>
<td>CBMS Confidential Case Message</td>
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<td>11896</td>
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<td>12006</td>
<td>CBMS ESC Dashboards for CBMS and PEAK - HD Metrics, Budget, EDBC, Training and Security</td>
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<td>CBMS OIT Security Controls - FTI Code Separation for Mule and Corticon</td>
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<td>12065</td>
<td>MA Notice of Action (NOA) Trigger Updates</td>
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<tr>
<td>11149</td>
<td>MA MAGI Updates to Monthly Budget Unit (MBU) Logic</td>
</tr>
</tbody>
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