



## Job Aid: Streamlined Application to Case & Key Differences Checklist Job Aid

### Overview:

Caseworkers should follow this checklist when processing and submitting Medical Assistance Streamlined applications. For a list of the key changes between the Streamlined application and the Traditional Medical Assistance application, refer to the *Key Differences between the Streamlined and Traditional Application to Case Process* table on page 6 of this document.

### NOTE:

- Budgeting is concentrated around MAGI, so different evidence is collected. Family and Children's MAGI product puts multiple individuals on the same product versus individuals having their own products.
- Streamlined applications can derive from three sources: FFM, ePASS, or entry by caseworker.
- Evidence brokering can map evidence between the Person page, Applications and Integrated Cases. Refer to the *Managing Incoming Evidence (P7)* job aid.
- Streamlined applications that are denied will be automatically transferred back to the FFM.
- **This process outlines how to key a new Streamlined application for a household without an existing MAGI Integrated Case. If an Integrated Case already exists and PDC is active, please refer to the following job aids: *P7 Adding a New Household Member Who is Applying to an Existing Integrated Case (COC)*, *P7 Non-Applicant Household Member on Integrated Case Decides to Apply (COC)* or *Adding a Newborn Recipient to an Existing Integrated Case*.**

LOG INTO NC FAST		
Login	Use your NCID and password to login to NC FAST	<input type="checkbox"/>
Caseworker Application Process		
Search and Register Person	<p>Perform the following four searches when searching for a person:</p> <ul style="list-style-type: none"><li>• First name, Last name, Gender</li><li>• First name, Last name, Gender, DOB</li><li>• Social Security Number</li><li>• Partial Name Search, Gender</li></ul> <p><del>Enter Social Security Number, First Name, Last Name, and Gender to search for a Person. If Person is not found, register the person. More details will be gathered during the Application and Find Match processes.</del></p> <ul style="list-style-type: none"><li>• Go to <b>Clients and Outcomes</b> tab,</li></ul>	<input type="checkbox"/>



	<ul style="list-style-type: none"><li>Click the <b>Registration</b> shortcut,</li><li>Click the <b>Person</b> hyperlink to access the Register Person pop-up.</li></ul> <p><b>NOTE:</b> Please register each household member upfront and enter a Social Security number on each person page under the evidence tab, then check the box to mark primary. <del>Workers should complete the person search before registering the person in NC FAST.</del></p>	
<b>Start Application</b>	<p>In order to complete the application.</p> <ul style="list-style-type: none"><li>Go to the <b>head of household's</b> Person page,</li><li>Click the <b>Applications</b> tab,</li><li>Click the <b>New MAGI appl...</b> hyperlink to start the Streamlined Application.</li><li>Enter the <b>Applicant Details</b></li><li>Enter <b>Household Information</b></li><li>Enter <b>Household Income</b></li><li>Enter <b>Additional Household Information Summary</b></li><li>Review answers in the <b>Summary Finish</b> section</li><li>Review <b>Additional documentation and Verification summary section</b></li></ul>	<input type="checkbox"/>
<b>Submit Streamlined Application</b>	<p><b>Check the boxes, then</b> Before submitting the Streamlined application, workers should review the terms of the application with the client.</p>	<input type="checkbox"/>
<b>Additional Intake Process for all Applications</b>		
<b>Find Match</b>	<p>Ensure all clients on the Application are fully registered as Persons in NC FAST. Perform the manual Find Match process for any applicants not matched during the automated process.</p> <ul style="list-style-type: none"><li>Workers should navigate to the Insurance Affordability Application then click the <b>Clients</b> tab.</li><li>On the Clients page click the <b>List Actions Menu</b> next to the client's name, then select <b>Find Match</b> from the drop-down menu to complete the manual Match process for any household member that has the word "No" under the heading "registered"</li></ul> <p><b>Note:</b> You can also click on the tab "<b>Find Client</b>" to complete the manual Match process for any household member that has the word "No" under the heading "registered"</p>	



	<p><b>Note:</b> In order to view a Streamlined application on the Applications tab, the applicant must be registered. Once registered, the Streamlined application will display on the person's Applications tab.</p> <p><b>Note:</b> For additional information on matching a client, please refer to the <i>Match Client</i> job aid.</p> <p><b>Note:</b> If a Person Merge is required, please refer to the job aid: <i>Completing Person Merge</i>.</p>	
<b>Review and Update Evidence</b>	<p>Resolve issues with evidence, edit existing evidence, or add new evidence on the Insurance Affordability Application.</p> <p><b>Application Evidence: Add New Evidence</b></p> <ul style="list-style-type: none"><li>Go to the application <b>Evidence</b> tab</li><li>Click the <b>Page Actions Menu</b> and select <b>New Evidence tab</b> from the drop-down menu.</li></ul> <p><b>Note:</b> When evaluating for Emergency benefits, complete Emergency evidence. Ensure that an Approval Date (application date) is entered.</p> <p><b>Note:</b> If additional information from the applicant is needed to process the application, workers should generate the DMA 5097 Request for Information.</p> <p><b>Note:</b> Updates made to Birth and Death Details and Gender should be updated on both the Person page and the Streamlined application.</p> <p><b>Note from DMA:</b> Managed Care evidence should be added prior to authorization. When no Managed Care evidence is present a temporary exemption code of 9900006 is automatically selected for the case.</p>	<input type="checkbox"/>
<b>ELIGIBILITY</b> <b>(For an Application)</b>		
<b>Request Online Data</b>	<p>Gather the online data for the evidence entered.</p> <p><b>Note:</b> Online Data can only be pulled once per day.</p> <p>Click the <b>Online Data tab</b>, click the <b>Request Online</b> hyperlink then toggle down and click on the <b>List Actions Menu</b> to verify each household member</p>	<input type="checkbox"/>



<b>Verify Evidence</b>	<p>Ensure all necessary verifications have been added to the client's Application and Person page.</p> <p><b>Application Verifications:</b></p> <ul style="list-style-type: none"><li>• Go to the Application home page,</li><li>• Click the <b>Evidence</b> tab (Evidence Dashboard)</li><li>• Click the <b>Verifications</b> folder</li><li>• Click the <b>List Actions Menu</b> next to each the item to verify</li><li>• Select <b>Add Item Add proof</b> from the drop-down menu</li></ul>	<input type="checkbox"/>
<b>Check Eligibility</b>	<p>Check eligibility to determine the eligible benefits for the client or to see if the client is ineligible for benefits.</p> <ul style="list-style-type: none"><li>• Go to the Application home page</li><li>• Click the <b>Tab Actions Menu</b> then select <b>Check Eligibility</b></li><li>• The Check Eligibility pop-up appears, click <b>Yes</b></li></ul>	<input type="checkbox"/>
<b>Authorize or Deny—No Integrated Case Exists for the Household</b>	<p>If all applicants are eligible, authorize the case.</p> <ul style="list-style-type: none"><li>• Go to the Application home page</li><li>• Click the <b>Tab Actions Menu</b> then select <b>Authorize</b> from the drop-down menu</li><li>• The Authorize Program pop-up appears, click <b>Save</b></li></ul> <p>If all applicants are ineligible, Deny the application from the <b>Programs</b> tab.</p> <ul style="list-style-type: none"><li>• Click the <b>Programs</b> tab.</li><li>• Click the applicable <b>List Actions Menu</b> then select <b>Deny</b>.</li><li>• The Deny pop-up appears. Click the <b>Denial Reason</b> dropdown then select the correct option.</li><li>• Enter Comments pertaining to the Denial Reason selected then click <b>Save</b>.</li></ul> <p><b>Note:</b> If the Denial Reason is related to eligibility, the account will be transferred to the FFM. If the application is being denied because the applicant failed to do something (e.g. failed to provide paperwork) no account transfer will occur.</p> <p><b>Note:</b> The following Denial Reasons will trigger the transfer:</p> <ul style="list-style-type: none"><li>• Did not have a medical emergency</li><li>• Did not meet age requirements</li></ul>	



	<ul style="list-style-type: none"><li>• Did not qualify for Family Planning Services</li><li>• Failed income</li><li>• Individual has insurance/Medicare</li><li>• Individual living in non-medical institution</li><li>• No children under 18 in household</li><li>• Not a primary caregiver of a child due to joint custody</li><li>• You are ineligible for all medical products and declined eligibility for FPW</li><li>• Client ineligible</li><li>• Did not meet citizen requirements</li><li>• Did not meet residency requirements</li><li>• Eligible, NCHC program not funded (not for day 1)</li></ul> <p>If some individuals in the Household are eligible and some are not, authorize the application case then deny the ineligible individual(s).</p> <ul style="list-style-type: none"><li>• On the Insurance Affordability Application Case page, click the <b>Check Eligibility</b> hyperlink.</li><li>• The Check Eligibility pop-up appears. Click <b>Yes</b>.</li><li>• Click the <b>toggle</b> to review eligibility details.</li><li>• To authorize the application, click the <b>Tab Actions Menu</b> then select <b>Authorize</b>.</li><li>• The Authorize Program pop-up appears. Enter in applicable Comments then click <b>Save</b>.</li><li>• Navigate to the Insurance Affordability Integrated Case.</li><li>• Click the <b>Evidence</b> tab to deny the ineligible individual(s) in the household.</li><li>• Click the applicable Application Details <b>List Actions Menu</b> then select <b>Edit</b>.</li><li>• Select <b>Denied</b> for the End Reason and the applicable Denial Reason then click <b>Save</b>.</li><li>• <b>Apply Changes</b> to the Insurance Affordability Integrated Case.</li><li>• Click the applicable Application Details evidence, <b>toggle</b> for the denied individual to view updated details.</li><li>• The Application Details show the Application Program Status is denied.</li></ul>	
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<b>Activate Online</b>	<p>When the eligible case is authorized, the Product Delivery Case is automatically activated online (unless there is an item that may block activation, such as an Outstanding Verification or an NCHC Enrollment Fee). Users should navigate to the applicable Streamlined Medicaid Product Delivery Case to review the case determination.</p> <p><b>Note:</b> When the Insurance Affordability Application case is authorized, the application case status will be 'Closed.' The Insurance Affordability Integrated Case is created and the status is 'Open.' The Product Delivery Case is created and the status is 'Active.'</p>	<input type="checkbox"/>
<b>OUTCOME</b> Benefits Denied Or Program Activated & Benefits Issued		

**NOTE:** If a Traditional application must be submitted, please refer to the *Application to Case Job Aid* for more information on submitting the Traditional application.



## Overview:

This table lists the key changes between the Streamlined and Traditional Medical Assistance Application to Case Process.

	Traditional	Streamlined
<b>Submitting Application</b>	Clients either submit an application on ePASS or via Caseworker (by entering the DSS, phone, or mail). The application status is 'Submitted.'	Clients can submit an application on the Federally Facilitated Marketplace (FFM), ePASS, or via Caseworker (by entering the DSS, phone, or mail). The application status is 'Open.'
<b>Matching Clients</b>	Perform the manual <b>Find</b> Match process for any applicants not matched during the automated process.	Workers should search for each client listed on the application. If the client is not registered in NC FAST, complete the registration from the Register Person link in the Shortcuts Panel. If the system finds a match, (for example if SSN keyed in the IEG matches registered person SSN OR if first name/last name/DOB matches that of a registered person) it will automatically match the prospect with the registered person.
<b>Manage Evidence</b>	Resolve issues with evidence, edit existing evidence, or add new evidence.	Workers may need to resolve issues with evidence, edit existing evidence, or add new evidence. <b>Note:</b> New evidence types have been added to the Streamlined application.
<b>Check Eligibility</b>	Workers navigate to the Eligibility Checks page and click on the <b>Check Eligibility</b> button.	Workers can check eligibility from the Tab Actions Menu or the Eligibility Checks tab. To view the eligibility result, workers should navigate to the Eligibility Checks tab on the IAA.



<b>Apply Changes</b>	Workers click <b>Apply Changes</b> from the Page Actions Menu on the Evidence Dashboard.	Workers do not Apply Changes on an IAA, but can verify changes in the Evidence tab. Simply <b>Authorizing</b> the application applies the changes.
<b>Review Eligibility Result</b>	Once the program has been authorized or denied, the application status is 'Disposed.'	Once the program has been authorized or denied, the application status is 'Closed.'