

Instructions to Boards for Tracking Katrina Evacuees in MACSIS

Overview:

ODJFS will be enrolling evacuees with both their mailing address and their former address from one of the affected states (Louisiana, Mississippi, and Alabama). For MACSIS purposes, we will enroll clients with their mailing address in the main **MEMBR** screen, and put their former out of state address in the alternate address screen accessible from **MEMBR** by pressing **F6-N** for Alternate Member Address. (Note: This screen has not been used in the past, so we have designated access to it for any staff who currently has access to **MEMBR**.)

It is important that the client's mailing address appear in **MEMBR** since this is the field we receive from ODJFS on the nightly update tape. We need for this address to match that on the ODJFS tape and not be overwritten during updates. It also is very important to keep in a safe place, the client's out of state address due to differences across states in the level of Medicaid FFP reimbursement. This is why we have opened this new **MEMBA** keyword for the out of state address since it will not be overwritten by the nightly update.

If by chance the client's mailing address is not the actual local residence, the local street address can be stored in the second screen accessed via **F6-Z** for **View/Maint Additional Member Fields** then **F8** to access the second screen. Again, this screen is not affected by the nightly update so the information here will not be altered electronically.

One other change involves the use of the **Sales Rep** field in the eligibility screen that is currently used to denote county of residence or out of state status. Because it is important to track services received by evacuees, instead of the usual **OUTSTATE**, boards should enter **KA** plus the postal code for the client's home state (**AL** for Alabama, **LA** for Louisiana, and **MS** for Mississippi). So the 4 character valid codes will be **KAAL**, **KALA** and **KAMS**. Using this field for evacuees will easily allow analysis of services since the Sales Rep field is on the claims extract so no awkward merges with member information will be needed.

NOTE: The nightly update process will validate the Sales Rep field. If you enter any other combinations than those listed above (i.e., KAMI) it will be replaced with KATR. You should check your member extracts for KATR in the Sales Rep field and make the necessary corrections.

The last piece of information needed from the evacuees is their **FEMA** number if available. This is a number assigned by the federal government to track benefits received by victims. It could be used to recover non-Medicaid money Ohio spends and is thus important to obtain if possible. This number will be entered into the **Alternate Member Addresses F6-N** (keyword **MEMBA***) screen in the **KATRINA FEMA NUM** field along with the out of state address.

* **MEMBA** is a keyword. This keyword can be accessed via the main menu or from the **MEMBR** screen. When accessed from the **MEMBR** screen, the name of the screen in the top left will not say **MEMBA** but will say **MEMBR**. This is the exact same screen you would get if you entered it via the keyword (just like **AFFIL**).

New Member Enrollment/UCI Request forms and **MACSIS Residency Verification** forms will be used to enroll these clients. When completing the **New Member Enrollment** form, the client's Ohio address should be entered on the enrollment form in the **Address 1, City, State,** and **Zip Code** fields. A check mark should be placed in the **Out of State** box. In the **Other 3** field enter "**KATR**". The client's FEMA number (if known) should be entered directly above the fields titled **Other 1, Other 2** and **Other 3**. The **Residency Verification** form should be completed entering the client's last known address (prior to coming to Ohio) in the **Street Address for Residency Determination Purposes** for an adult and in the **If Parent, Address of Parent** field for a minor.

Step-by Step Instructions for Entering Katrina Evacuees into MACSIS:

Begin the enrollment process as usual, obtaining the UCI automatically for new members.

MEMBR Screen

Complete all fields on the **MEMBR** screen as you would for any client you are enrolling in MACSIS.

Enter the client's Ohio mailing address into Addr1, Addr2, City, State and Zip fields.

In the **Sales Rep** field enter **KAAL** (Alabama), **KAMS** (Mississippi) or **KALA** (Louisiana).

Save the record. (You can only access the **F6-N Alternate Member Addresses (keyword MEMBA)** screen or the **F6-Z View/Maintain Additional Member Fields** screen in edit mode - after the record has been saved.)

```

MEMBR                               Members
-----Member Identification-----
*Sub ID : 3217475                    *Person No : 00                      Sub : 00
-----General Information-----
Last Nm: EVACUEE                      First : KATRINA                      MI : A
DOB   : 01/01/1950  Gndr: F    Rel : 0  RACE  : W                      Sal :
Addr 1 : P.O. BOX 123                  ETHNIC: E                      LTyp:
Addr 2 :                               DOBSRC: 01011950                Lang:
City   : COLUMBUS                      St : OH  Hom Ph:                      Mar :M
Zip    : 54321                          County:Z  Country:                Bus Ph:                      COB  N
-----Other Identification ID's-----
MedCare:                               Medcaid: 123456789099              SocSec  : 123456789
Emp     :                               MedRec  : KE1526                    Security :
-----Latest Coverage-----
Start  : 09/01/2005                    Term   : / /                      Elig Sts :E  SeqNo:001
Group  : FRAN                          Plan   : DFMC252                    Riders   :
      FRANKLIN ADAMH                    LOB=MCD                             Panel    :25B
PCP ID :                               Prov2  : 000000002126              IPA
      CATH SOC-FRAN                      Hire Dt  : / /
MCareSt:                               MiscSt : 03      DEF3:25            Term Rsn :
Salary  :                               0.00  OvrAmt  0.00              OvrTyp  :  OStep : 0
USERDEF: 123456789099                  USERDEF: / /                      Privacy: N  Sales Rep: KALA
-----
F1=Help, F2=Delete, F3=Overview scrn, F4=Notes, F6=SpecFuncs, F7=Ltrs
Save, save->aAffiliation, Abandon? (S,F,A) - F7=Ltrs : S

```

F6-Z - View/Maintain Additional Member Fields Screen

If the client's Ohio mailing address is not the actual local residence, the actual local street address can be stored in the **View/Maintain Additional Member Fields** which can be accessed from the member screen by pressing **F6** and then selecting **Z**.

1. To enter information on this screen you must go back into the Member record and enter a **Z** in the first character of the **County** field and press <enter>.
2. Hit the **F6** key and then choose **Z**. The **View/Maintain Additional Member Fields** screen will appear.
3. Hit **F8** to access the second screen. The **Subscriber ID** and **Person** number are automatically populated.
4. In the **Responsible Party Information** section enter **KAT (RESPPERSONTYPE)** in the **Type** field.
5. Skip the **Last Name** and **First Name** fields.
6. Enter the client's local street address in the **Address 1, Address 2, City, State** and **Zip** fields.
7. Enter through the remaining fields or hit <end> and enter **Y** to save the record.

```
MEMBR                               Member Maintenance                               Screen 2 of 2
-----
Identification-----
*Subscriber ID : 3217475                *Person : 00
                               EVACUEE, KATRINA
-----
Responsible Party Information-----
Type      : KAT
Last Name :
First Name:
Address 1 : 123 MAIN STREET
Address 2 :
City      : COLUMBUS                    State: OH  Zip: 43215
Country  : Phone:                      Fax:
Email    :
-----
F1=Help, F8=Previous Screen
-----
OK? (Y/N): Y
```

F6-N – Alternate Member Addresses (keyword MEMBA)

The client's former address is to be entered into the **MEMBA – Alternate Member Addresses** screen. This will be the address on the **Residency Verification** form.

1. To enter information on this screen you must go back into the Member record and hit **F6-N**. This will bring up the **Alternate Member Addresses** screen. The **Member ID**, **Person** number and **client's name** are automatically populated.
2. In the **Address Type** field, enter the letter **A** for Alternate Address.
3. Enter the **Effective Date** (this should be the same date you use as the **Start Date** on the **MEMBR** screen in the **Latest Coverage** section).
4. Enter the client's out of state information into the **Address 1**, **Address 2**, **City**, **State** and **Zip** fields.
5. Enter the FEMA number into the field labeled **KATRINA FEMA NUM**.
6. **DO NOT** put a security code on this screen. It may need to be viewed by other boards if the client relocates within the state.

```

MEMBR                               Members
-----
*Member ID       : 3217475          00  KATRINA EVACUEE
*Address Type    : A                *Effective Date : 09/01/2005
Termination Date : / /
-Address Information-----
First Name       : KATRINA           Initial :      Salutation :
Last Name        : EVACUEE
Address 1        : 525 BOURBON STREET
Address 2        :
City             : NEW ORLEANS
State            : LA
Zip Code         : 55555
County Code      :
Country Code     :
Home Phone       :
Business Phone   :
Fax              :
Other Phone      :
KATRINA FEMA NUM : 123456789
Security         :
-F1=Help, F2=Delete, F3=Overview, F4=Notes-----
UPDATE? (Y/N):█

```