Children’s Medical Services Network (CMS Net)

Eligibility Client

Revised 10/24/2025

AMENDMENTS

Amendment	Description	Date
1.0	Galyna: Created for Release 093	2022-03-30
1.1	Brenda: Revisions, entire document.	2022-04-06
1.2	Molly: Updated screenshot of Modules for Client (Release 098: Referral)	2023-02-16
2.0	Molly: Updated manual per Release 101. STRY0114501: Add [Case Note Description] and [Other Description] fields to all modules on CMS2020.	2024-05-23
2.1	Brenda: Updated Correspondence section for R108.	2025-10-22

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LIST OF FIGURES

1 DEFINITIONS, ABBREVIATIONS, & ACRONYMS

The following terms, abbreviations, and acronyms may be used in this document:

Acronym	Definition
A.K.A.	Also Known As (Alias)
CCS	California Children’s Services
CIN	Client Identification Number
CMS	Children’s Medical Services
CMS Net	CMS Case Management System
CMS Net Web	CMS Case Management System: Web Application
DHCS	Department of Health Care Services
DOB	Date of Birth
DX	Diagnosis
eSAR	Electronic Service Authorization Request
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment
GHPP	Genetically Handicapped Persons Program
HCP or HP	Health Care Plan
HF	Healthy Families
ICD	Int’l Classification of Diseases (Diagnosis/Procedure Code)
ISCD	Integrated Systems of Care Division
IE	Internet Explorer (Microsoft web browser)
Inappropriate Letter	A letter sent to the Provider/Managed Care Plan/HF informing them the referral is incomplete, inaccurate or needs more clarification.
JPG	Joint Photographic Experts Group
MCP	Managed Care Plan
Medical Home	Client’s designated primary care physician and/or the physician who provides a medical home.
MEDS	Medi-Cal Eligibility Data System
MOPI	MEDS Online POS Inquiry
MTP	Medical Therapy Program
MTU	Medical Therapy Unit
NICU	Neonatal Intensive Care Unit
PEDI	Provider Electronic Data Interchange
PMF	Provider Master File (Medi-Cal Provider list)
NPI	National Provider Identifier
PDF	Portable Document Format
PSSN	Pseudo Social Security Number
Requestor	Any referral source other than a provider listed in the PMF (Non–PMF provider)
SAR	Service Authorization Request
SCC	Special Care Center
SCG	Service Code Groupings
SSN	Social Security Number

Eligibility Client

Acronym	Definition
TIF, TIFF	Tagged Image File Format
TP	Trading Partner
TX	Treatment
WCM	Whole Child Model

2 OVERVIEW

This manual will help you successfully navigate the Eligibility Client module in CMS Net.

This manual will provide instructions to allow users to do the following: view client eligibility, activate case, deny case, close case, close MTU, and perform aid code change.

3 NAVIGATING TO ELIGIBILITY CLIENT

To navigate to the “Eligibility – Client”, you must first select a client.

Once you select a client, you will be taken to the “Client Details - Modules for Client” page.

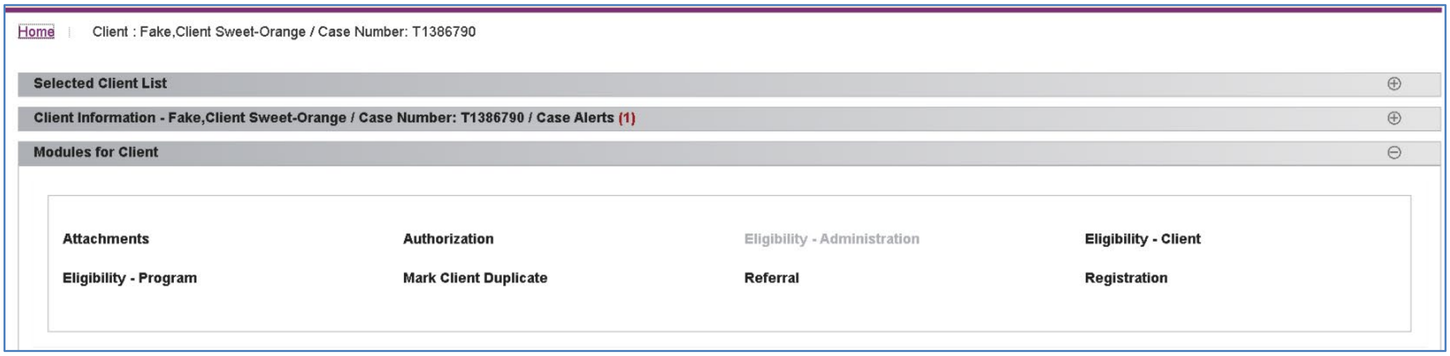


Figure 3-1 Client Details – Modules for Eligibility Client

Click “Eligibility – Client” under Modules for Client and the system will navigate you to the “Eligibility Client” page.

4 ELIGIBILITY CLIENT SCREEN

The “Eligibility Client” page consists of the following sections:

- Eligibility Client Quick links
- Client Information
- Program Eligibility
- Client Eligibility
- Aid Code Change
- Denial Information
- Closure Information
- MTP Closure Information
- Client Eligibility History
- Other Information
- Correspondence
- Case Note
- Case Notes History

Below screen shot displays the entire page with all the accordions collapsed to give you a better view of the page.

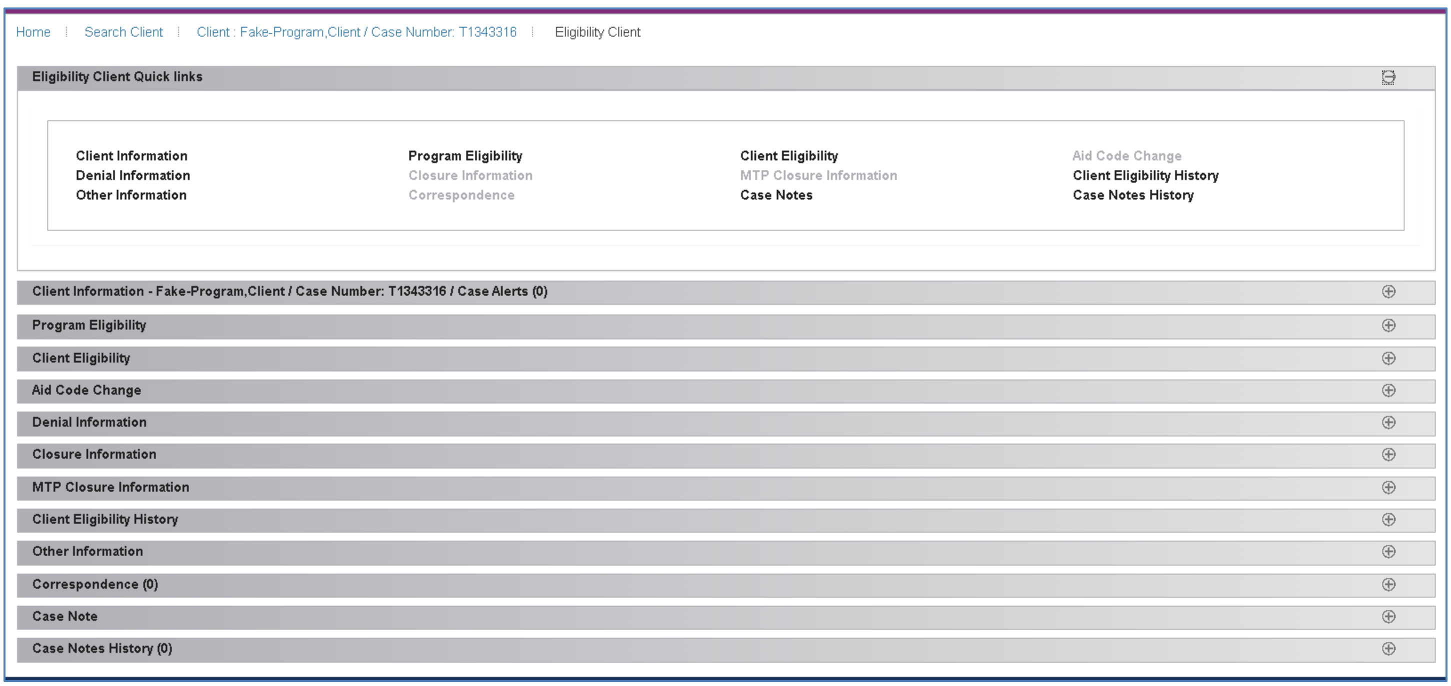


Figure 4-1 Eligibility Client Sections

5 ELIGIBILITY CLIENT ACCORDIONS - ENABLED AND DISABLED

The below table explains how the section and fields will display based on case status / registration status.

Case Status/ Registration Status	Aid Code Change	Closure Information	Denial Information	MTP Closure Information
Pending/ Reopen Pending	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	**CCS Client** Fields are enabled and Section is expanded only when MTP Case is open or pending status **GHPP Client** Fields are disabled and Section is collapsed
Denied	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed
Active	**CCS Client** Fields are enabled and Section is expanded **GHPP Client** Fields are disabled and Section is collapsed	Fields are enabled and Section is expanded	Fields are disabled and Section is collapsed	**CCS Client** Fields are enabled and Section is expanded only when MTP Case is open or pending status **GHPP Client** Fields are disabled and Section is collapsed
Closed	Fields are disabled and Section is collapsed	Fields are enabled and Section is expanded	Fields are disabled and Section is collapsed	**CCS Client** Fields are enabled and Section is expanded only when MTP Case is open or pending status **GHPP Client** Fields are disabled and Section is collapsed

Eligibility Client

Case Status/ Registration Status	Aid Code Change	Closure Information	Denial Information	MTP Closure Information
Not Open	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed	Fields are disabled and Section is collapsed

6 ELIGIBILITY CLIENT QUICK LINKS

Quick links are at the top of Eligibility Client. Greyed out / not clickable links are disabled sections. Clicking on one of the enabled links will expand the section and navigate you to the section.

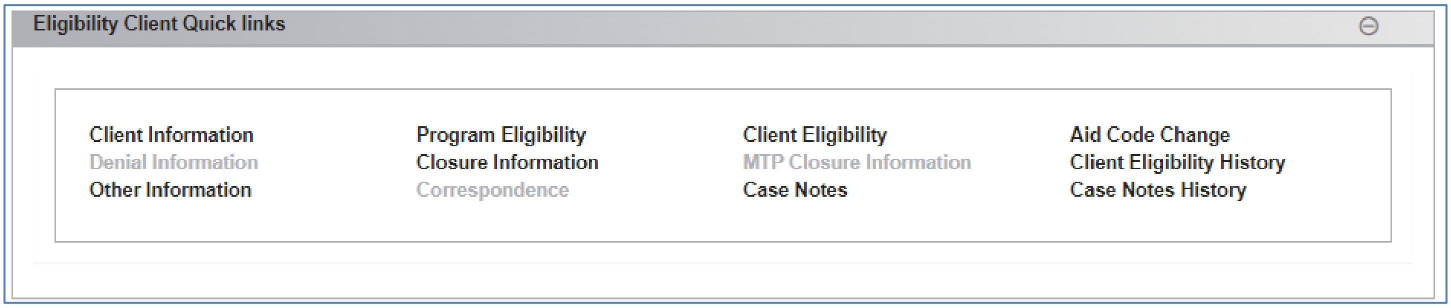
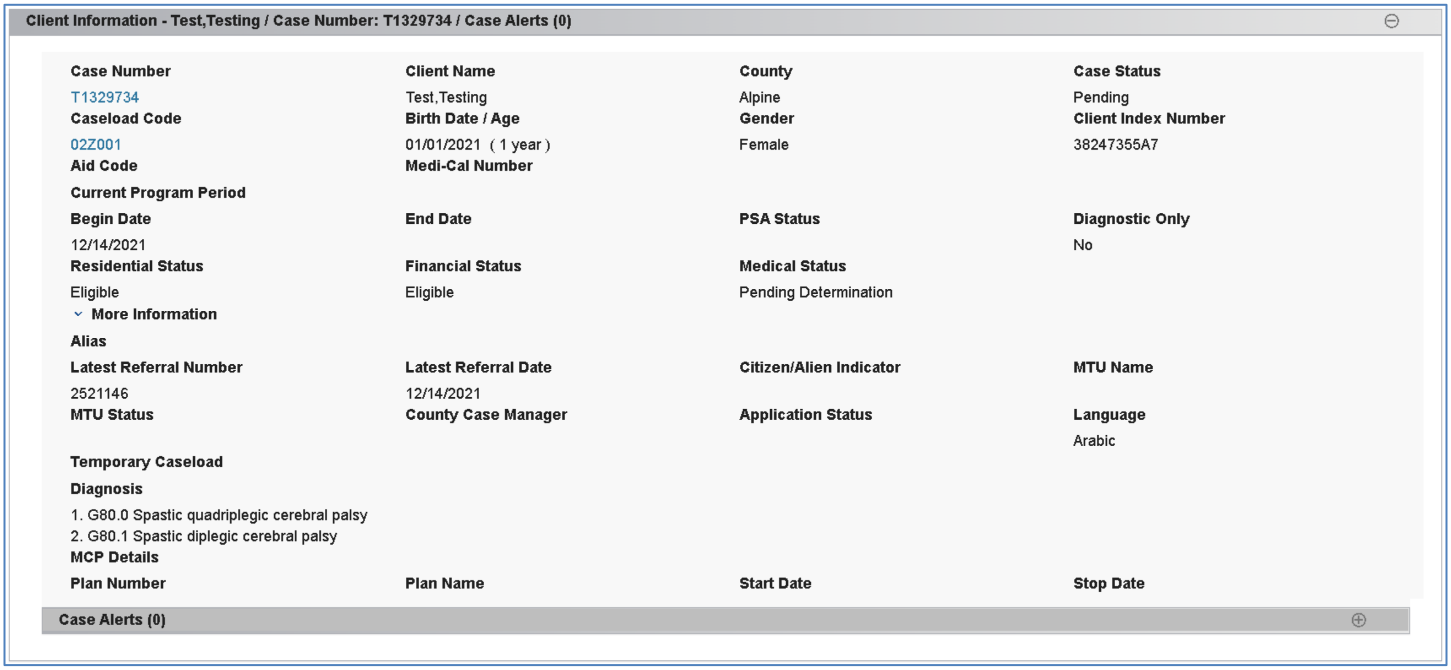


Figure 6-1 Eligibility Client Quick Links

7 CLIENT INFORMATION

Client Information header for the selected client.

Case Alerts are also in this section. View the Case Alerts Manual for information on how to use Case Alerts.



Client Information - Test,Testing / Case Number: T1329734 / Case Alerts (0)

Case Number	Client Name	County	Case Status
T1329734	Test,Testing	Alpine	Pending
Caseload Code	**Birth Date / Age**	**Gender**	**Client Index Number**
02Z001	01/01/2021 (1 year)	Female	38247355A7
Aid Code	**Medi-Cal Number**		

Current Program Period

Begin Date	End Date	PSA Status	Diagnostic Only
12/14/2021			No
Residential Status	**Financial Status**	**Medical Status**	
Eligible	Eligible	Pending Determination	

More Information

Alias

Latest Referral Number	Latest Referral Date	Citizen/Alien Indicator	MTU Name
2521146	12/14/2021		
MTU Status	**County Case Manager**	**Application Status**	**Language**
			Arabic

Temporary Caseload

Diagnosis

1. G80.0 Spastic quadriplegic cerebral palsy
2. G80.1 Spastic diplegic cerebral palsy

MCP Details

Plan Number	Plan Name	Start Date	Stop Date

Case Alerts (0)

Figure 7-1 Client Information

The Case Number hyperlink will download the client's face sheet.

The Caseload Code hyperlink will open an overlay of the users assigned to the client's caseload.

8 PROGRAM ELIGIBILITY

In this section, you will learn how to view the Program Eligibility information on the client you selected.

By default, the Program Eligibility section is collapsed, with the option for a user to expand it.

Click on the “+” icon to view the Program Eligibility information.

The Program Eligibility displays all program periods for selected client as display only in reverse chronological order.

Program Eligibility

Program Begin Date	Program End Date	Status	County Of Eligibility
04/14/2021	04/13/2022	Current	San Diego
04/14/2020	04/13/2021	Past	San Diego
04/14/2019	04/13/2020	Past	San Diego

Figure 8-1 Program Eligibility Section

The Program Eligibility accordion has the following columns:

- Program Begin Date
  - Displays the program period begin date of each program period listed on the table.
- Program End Date
  - Displays the program period end date of each program period listed on the table.
- Status
  - Displays the status of the program period listed on the table.
  - Program Eligibility Statuses are: Pending, Current, and Past.
- County of Eligibility
  - Displays the county the program period belongs to.

9 CLIENT ELIGIBILITY

In this section, you will first learn about the Client Eligibility (when and why you can or cannot activate) and then you will learn how to activate a case.

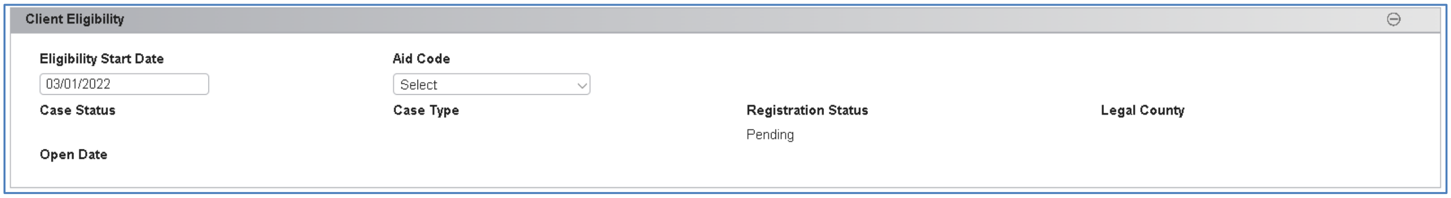


Figure 9-1 Client Eligibility Section

9.1 Client Eligibility Overview

- When a case is in Pending or Reopen Pending status, if residential status, financial status and medical status is not set to Eligible, the case may not be activated (set to Active status).
    - o If case is not eligible to be activated, when you land on the Eligibility Client page, a blue “Information Message” banner appears at the top of the page providing you with the information on why you are not permitted to activate the case.
      Example of possible message:
        - Activate action is not permitted. This case is not medically/financially/residentially eligible and may not be activated”
        - Activate action is not permitted. This case is not medically eligible and may not be activated.
- When Registration Status is Pending or Reopen Pending, the following fields remains blank until the case is activated or denied: Case Status, Case Type, Open Date, and Legal County.

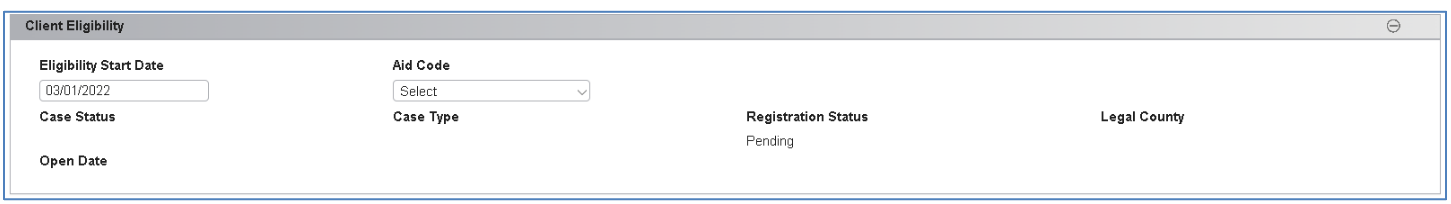


Figure 9-2 Client Eligibility Overview

1. Eligibility Start Date
    - This is the start date of the aid code.
    - When registration status is Pending or Reopen Pending, the Eligibility Start Date field automatically populates the most recent Program Begin Date by default with ability for user to edit.
    - Future date is not allowed.

- Start Date cannot prior or equal to a previous closure or denial date.
- If the eligibility start date is modified by user, as long as the new start date does not overlap with any other client eligibility dates, the corresponding program begin date will update to match the new start date upon saving the screen successfully.
- For CCS cases only: if a case is being set to Active status on a date that falls on or after the client’s 21st birth date, system displays a system message: Start Date is after the Client's 21st Birthday. Do you want to continue?

2. Aid Code
   Select the aid code for the client.
   CCS Aid Code values:
   - 9K CCS
   - 9M MTP Only
   - 9N M/C Only
   - 9R CCS Over fin elig
   - 9U CCs Elig not complete

   GHPP Aid Code value:
   - 9J GHPP

   Note: For GHPP cases, only 9J GHPP will be available for selection and therefore, system defaults the aid cod to 9J.

3. Case Status
   - This display only field shows current eligibility case status
   - Values: Active, Closed, Denied, or Blank (when no entry)

4. Case Type
   - This display only field shows current case type
   - Values: New, Reopen, or Blank (when no entry)

5. Registration Status
   - Displays the client’s current registration status of the client.
   - Values: Active, Closed, Denied, Not Open, Pending, Reopen Pending.

6. Legal County
   - Displays the client’s current Legal County

7. Open Date
   - Displays the date the case was activated.
   - Open Date Changes When:
     - Case is made Active in another county

- o Case is Denied (date is blank for denied period)
- o Made Active and is not part of a continuous eligibility period (Only first Active Period in each continuous segment changes the open date. All other eligibility Periods will share the same open date).

9.2 How to Activate Case

This section show you how to activate a case and provide information on each field.

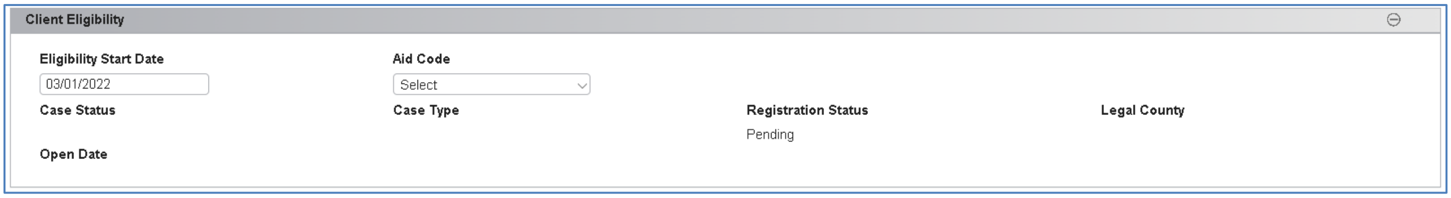


Figure 9-3 Client Eligibility (How to Activate Case)

In order to activate the case, the following fields are required:

- Eligibility Start Date
- Aid Code

9.2.1 CCS Steps to Activate Case

1. Eligibility Start Date: System defaults the Eligibility Start Date with ability to edit. Modify or keep the defaulted date.
2. Aid Code: Select the aid code.
    - 9K CCS
    - 9M MTP Only
    - 9N M/C Only
    - 9R CCS Over fin elig
    - 9U CCs Elig not complete

3. Case Note: Optional, enter case note.
4. Click on “Save” button to save page or use shortcut key to save: Alt+S

9.2.2 GHPP Steps to Activate Case

1. Eligibility Start Date: System defaults the Eligibility Start Date with ability to edit. Modify or keep the defaulted date.
2. Aid Code: System defaults to 9J aid code.

   Important notes:
    - Case is not really activated until the user successfully saves the page.

Eligibility Client

- User may view the “Registration Status” as seen on the screen shot below to view the actual registration status of the case.

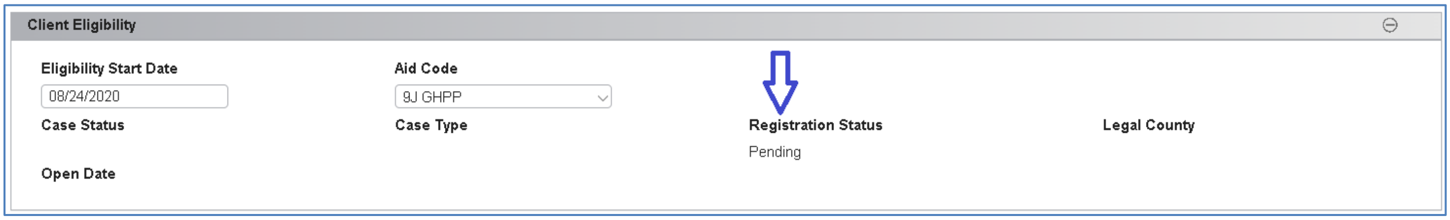


Figure 9-4 Client Eligibility (GHPP Steps to Activate Case)

3. Case Note: Conditionally required to activate the case if user did not make any changes on the page.
    - System displays blue information message stating: No changes to save.

Figure 9-5 Information Message

- For example: System defaults Eligibility Start Date and aid code. In this scenario, if you have no other changes, a case note is required in order for the system to know you are intending to activate the case.

4. Click on “Save” button to save page or use shortcut key to save: Alt+S

10 AID CODE CHANGE

The Aid Code Change accordion is enabled when case status is **Active** and the section is used to perform an aid code change for CCS client.

The Aid Code Change accordion is expanded by default when the case is active.

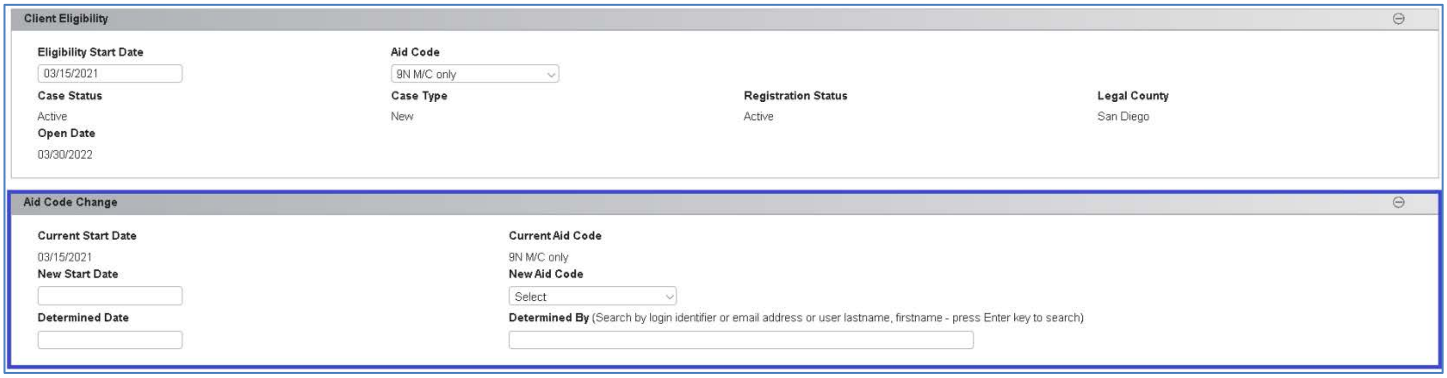


Figure 10-1 Aid Code Change Section

Before you learn how to perform an aid code change. You first should understand the sections.

- **Client Eligibility Section:** displays the current eligibility start date and its aid code.

- **Aid Code Change Section:** This section is where you will be entering the new aid code and the new start date of the aid code. **Don't complete this section if you are not intending to do an aid code change.**

When you perform an aid code change, your intention is to change the "Client Eligibility" information by assigning a new aid code and providing the start date of that new aid code.

Aid Code Change section has the following fields:

- Current Start Date
- Current Aid Code
- New Start Date
- New Aid Code
- Determined Date
- Determined By

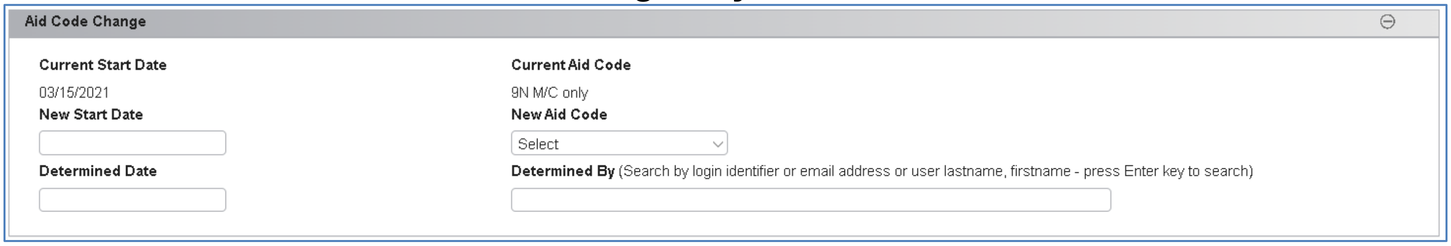


Figure 10-2 Aid Code Change Section Fields

1. Current Start Date
   - Display only, displays the current start date.
2. Current Aid Code
   - Display only, displays the current aid code.
3. New Start Date
   - Required if doing aid code change.
   - Enter the new start date for the new aid code.
   - New Start Date cannot be in the future.
   - New Start Date must be after the “Current Start Date”.

4. New Aid Code
   - Required if doing aid code change.
   - Enter the new aid code.
   - Drop down values:
     - 9K CCS
     - 9M MTP Only
     - 9N M/C Only
     - 9R CCS Over fin elig
     - 9U CCs Elig not complete
     - FYI: the system filters the “Current Aid Code” from the drop down values.

5. Determined Date
   - Required if doing aid code change.
   - Date aid code change was determined.
   - Enter the date determined.
   - Future date is not allowed.

6. Determined By
   - Required if doing aid code change.
   - The person that determined an aid code change was needed.
   - Enter the determined by user.

Eligibility Client

- Search by login identifier or email address or user last name, first name - press Enter key to search)

When the aid code change is completed successfully, the Client Eligibility section will be updated with the new aid code and the aid code start date.

11 DENIAL INFORMATION

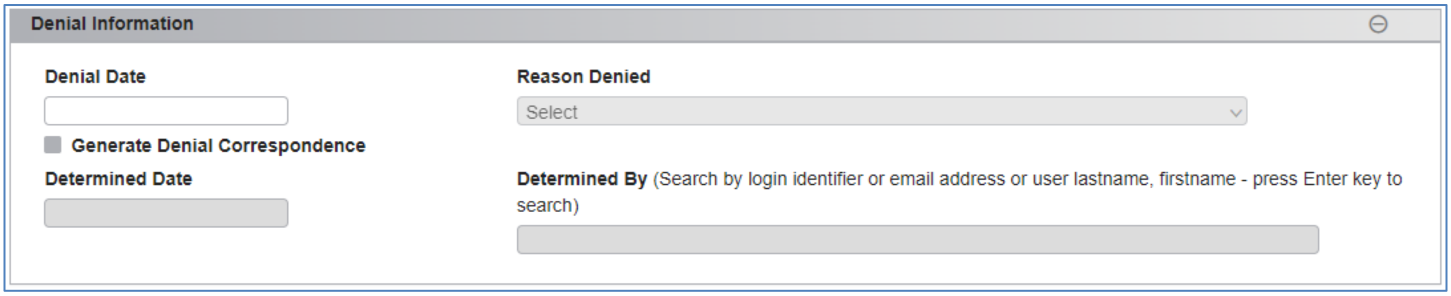


Figure 11-1 Denial Information

11.1 Denial Information Overview

- Case can only be denied if registration status is: Pending or Reopen Pending.
- Denial information accordion is enabled/expandable when registration status is in the following status: Denied, Pending or Reopen Pending.
- Denials may or may not be linked to a program period. Meaning, user may deny the case without a program period.
- If a corresponding program eligibility period exists when denying the case, the denial is linked to the program eligibility period and will be truncated to one day, which equals the denial date.
- Denials may overlap and can occur on the same day, whether or not they are linked to a program period.
- Overlapping denials may occur within a single county, or when entered by different counties.

11.2 Denial Information & How to Deny Case

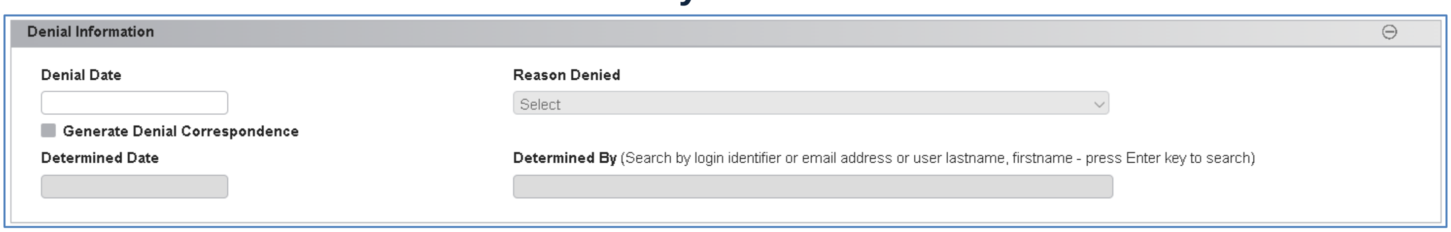


Figure 11-2 How to Deny Case

To deny the case, the following fields are required:

- Denial Date
- Reason Denied
- Determined Date
- Determined By

Below section will explain each fields from the Denial Information section.

1. Denial Date
   - Enter the date denied or select using the date picker.
   - Future date not allowed.

2. Reason Denied
   - Enabled after the Denial Date is entered.
   - Select the reason denied from the drop down list.
   - CCS Denial Reasons
     - App Not Received
     - Client enrolled in a commercial Health Maintenance Organization (HMO)
     - Client/Family declines services
     - Client is over 21 years of age
     - Client no longer a resident of the county
     - Death of patient
     - Failure to complete Medi-Cal application process
     - Failure to pay fee(s)
     - Hospital not approved
     - Income exceeds $40K
     - Income exceeds $40K – out-of-pocket expense does not exceed 20% of AGI
     - Insufficient documentation
     - Medically ineligible
     - Medically ineligible for orthodontic services
     - MTP paperwork incomplete
     - MTP therapy services only
     - No response from last known address
     - Not a program benefit
     - Not CCS eligible – referred to Denti-Cal
     - Other (non-standard citation)
     - Parent/Guardian Military – not CA
     - Program eligibility process incomplete
     - Provider not an approved Medi-Cal or Denti-Cal provider
     - Provider not CCS paneled
     - Requested services is not to treat the client’s CCS eligible medical condition
     - Service prior to request
   - GHPP Denial Reasons
     - Client enrolled in a commercial Health Maintenance Organization (HMO)
     - Client/Family declines services
     - Convalescent placement
     - Death of patient

- Failure to complete Medi-Cal application process
- Failure to pay fee(s)
- Financially eligible for CCS (child)
- Insufficient documentation
- Medically ineligible
- Medical – Non compliance
- No application submitted
- No current medical reports have been received
- No enroll fee agreement follow-up – Non compliance
- No response from last known address
- Not a program benefit
- Other (non-standard citation)
- Parent/Guardian Military – not CA
- Program eligibility process incomplete
- Provider not an approved Medi-Cal or Denti-Cal provider
- Residential eligibility criteria not met
- Service prior to request
- SNF placement

3. Generate Denial Correspondence
   - Check box
   - Disable until the Reason Denied is selected.
     - When the [Reason Denied] selected does allow correspondence, the check box shall be enabled and auto checked by default, with ability for user to uncheck when necessary.
     - When the [Reason Denied] selected does not generate a correspondence, the checkbox shall remained disabled.

4. Determined Date
   - Enter the date determined or select using the date picker.
   - Future date is not allowed.
   - Enabled after the Denial Date is entered.

5. Determined By
   - Enter the determined by user.
   - Search by login identifier or email address or user last name, first name - press Enter key to search)
   - Enabled after the Denial Date is entered.

12 CLOSURE INFORMATION

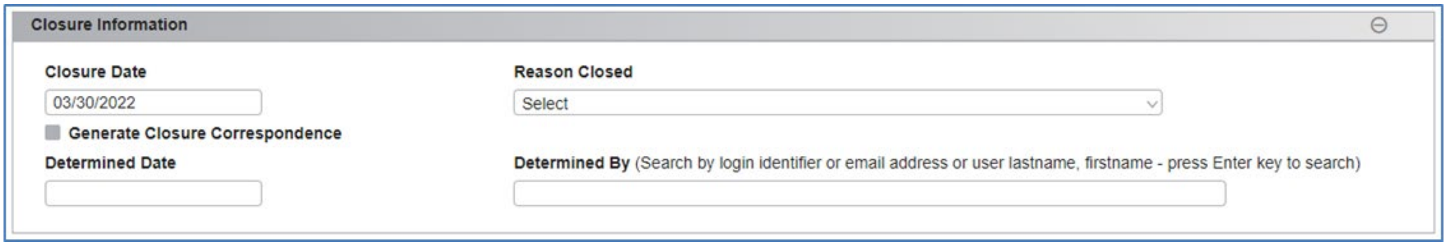


Figure 12-1 Closure Information

12.1 Overview

- Only an active case can be closed.
- A case may only be closed within the dates of the current program eligibility period. If there is no current program period, the user may close in the most recent past program period. Otherwise, if user attempts to close in a pending or past period, the date is not selectable.
- If there is a pending program eligibility period, the pending period will be deleted when a closure is entered for the current period.
- If the closure date is before the Program End Date, the program eligibility period is truncated/shortened and will be equal the “Closure Date”, unless an aid code change is being performed.
- Note: When a user needs to close case with a date that falls in the past period. If a current and pending period exist, user must contact his/her “CMS Net County System Administrator-Plus” or CMS Net Help Desk to remove the current and pending period.

12.2 Closure Information & How to Close Case

To close the case, the following fields are required: Closure Date, Reason Closed, Determined Date, and Determined By.

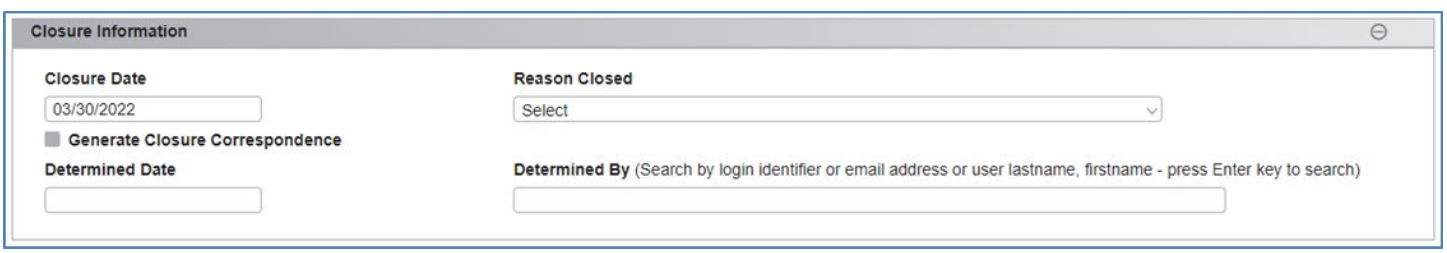


Figure 12-2 Closure Information Section and Fields

1. Closure Date
   - Enter the date closed or select using the date picker.
   - Closure date must be after the most recent client eligibility Start Date.

2. Reason Closed
   - Enabled once Closure Date is entered.
   - Select the reason closed from the drop down list.
   - CCS Closure Reasons
     - Client enrolled in a commercial Health Maintenance Organization (HMO)
     - Client/Family declines services
     - Client is over 21 years of age
     - Client no longer a resident of the county
     - Death of patient
     - Failure to complete Medi-Cal application process
     - Failure to pay fee(s)
     - Income exceeds $40K
     - Income exceeds $40K – out-of-pocket expense does not exceed 20% of AGI
     - Insufficient documentation
     - Medically ineligible
     - Medically ineligible for orthodontic services
     - MTP paperwork incomplete
     - Negotiated transfer to another county
     - No current services requested
     - No response from last known address
     - Not CCS eligible – referred to Denti-Cal
     - Other (non-standard citation)
     - Parent/Guardian Military – not CA
     - Program eligibility process incomplete
     - Treatment services are complete
   - GHP Closure Reasons
     - Client/Family declines services
     - Convalescent placement
     - Death of patient
     - Failure to complete Medi-Cal application process
     - Failure to pay fee(s)
     - Financially eligible for CCS (child)
     - Insufficient documentation
     - Medically ineligible
     - Medical – Non compliance
     - No application submitted
     - No current medical reports have been received
     - No current services requested
     - No enroll fee agreement follow-up – Non compliance
     - No response from last known address
     - Other (non-standard citation)

   - Parent/Guardian Military – not CA
   - Program eligibility process incomplete
   - Residential eligibility criteria not met
   - SNF placement
- FYI: When doing a “Future Closure”, the reason “Negotiated transfer to another county” is filtered from the drop down values based on the “closure date” entered.

3. Generate Closure Correspondence
   - Check box
   - Disabled until the Reason Closed is selected.
     - When the [Reason Closed] selected does allow correspondence, the check box shall be enabled and auto checked by default, with ability for user to uncheck when necessary.
     - When the [Reason Closed] selected does not generate a correspondence, the checkbox shall remain disabled.

4. Determined Date
   - Enter the date determined or select using the date picker.
   - Future date is not allowed.
   - Enabled once Closure Date is entered.

5. Determined By
   - Enter the determined by user.
   - Search by login identifier or email address or user last name, first name - press Enter key to search)
   - Enabled once Closure Date is entered.

13 MTP CLOSURE INFORMATION

This section is enabled and expanded when the client has MTP status as Open or Pending.

Therefore, when MTP status as Open or Pending, the MTP Closure Information section is required to be completed in order for user to Close or Deny case.

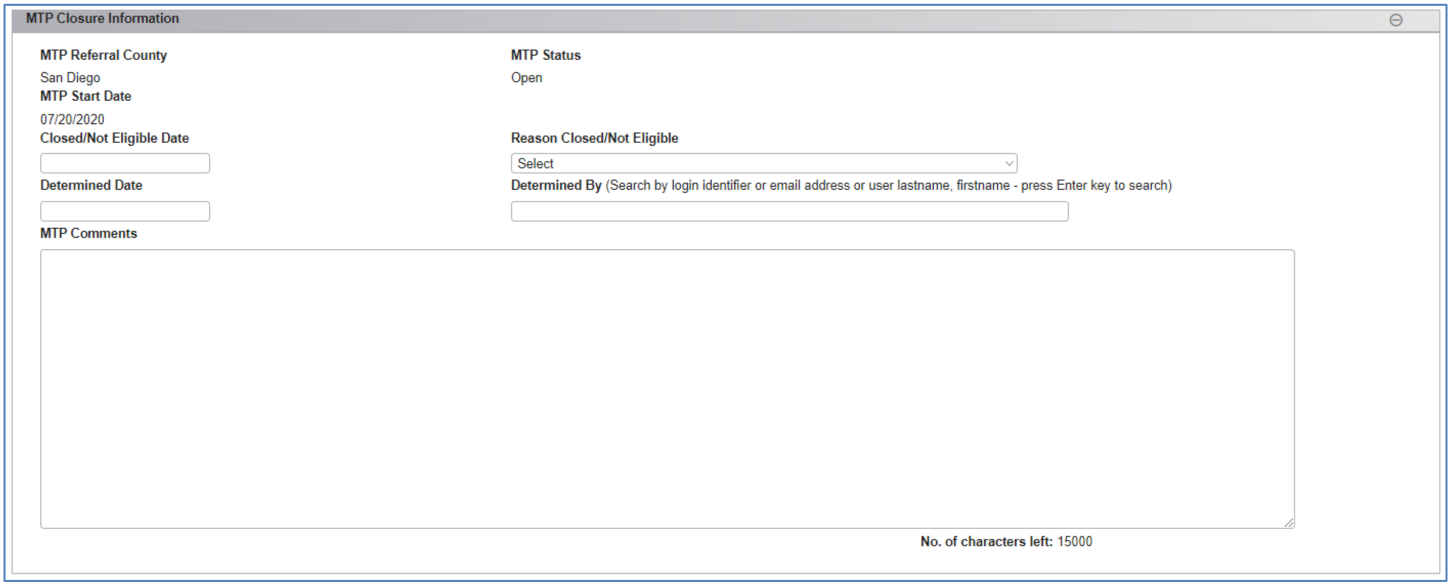


Figure 13-1 MTP Closure Information

- When MTP status is "Open", after MTP Closure Information is completed, upon successful save, the MTP status is set to "Closed".
- When MTP status is "Pending", after MTP Closure Information is completed, upon successful save, the MTP status is set to "Ineligible".

1. MTP Referral County
   - Displays the county of the current MTP referral from the MTP Case status screen.
2. MTP Status
   - Displays the MTP status from the MTP Case status screen.
3. MTP Start Date
   - Displays the MTP start date from the MTP Case status screen.
4. Closed/Not Eligible Date
   - Enter the MTP closure date.
   - Required if MTP status is pending or open.
   - Disabled if courtesy case.
5. Reason Closed/Not Eligible
   - Enter Closed or Not Eligible date.
   - Required if MTP status is pending or open.

- Disabled if courtesy case.

6. Determined Date
    - Enter determined date.
    - Required if MTP status is pending or open.
    - Disabled if courtesy case.
7. Determined By
    - Enter determined by person.
    - Search by login identifier or email address or user last name, first name - press Enter key to search)
    - Required if MTP status is pending or open.
    - Disabled if courtesy case.
8. MTP Comments
    - Optional
    - Enter MTP comments.
    - Maximum characters is 15,000.
    - Disabled if courtesy case.

14 CLIENT ELIGIBILITY HISTORY

Client Eligibility History displays the historical client eligibility history as display only.

Client Eligibility History

County	Case Status	Client Elig Status	Start Date	Closure/Denial Date	Reason Closed/Denied

Figure 14-1 Client Eligibility History

Entries are listed in reverse chronological order.

Client Eligibility History section has the following table columns: County, Case Status, Client Elig Status, Start Date, Closure/Denial Date, and Reason Closed/Denied.

Client Eligibility History

County	Case Status	Client Elig Status	Start Date	Closure/Denial Date	Reason Closed/Denied
San Diego(37)	Closed	9N M/C only	01/13/2009	01/12/2016	Failure to complete Medi-Cal application process
San Diego(37)	Closed	9N M/C only	01/13/2006	01/12/2009	Aid code changed

Figure 14-2 Client Eligibility History Columns

All information is display only. Each row on the table represents a historical client eligibility period.

1. County
   - Displays the county with county code in parenthesis.
2. Case Status
   - Displays the case status.
3. Client Eligibility Status
   - Displays the aid code.
4. Start Date
   - Displays the start date.
5. Closure/Denial Date
   - Displays the closure or denial date.
6. Reason Closed/Denied
   - Displays the closure or denial reason.

15 OTHER INFORMATION

Figure 15-1 Other Information

This section contains the following fields:

- Last Update By
    - Name of user who last updated the page.
- Last Update Date
    - Date the page was last updated.

16 CORRESPONDENCE

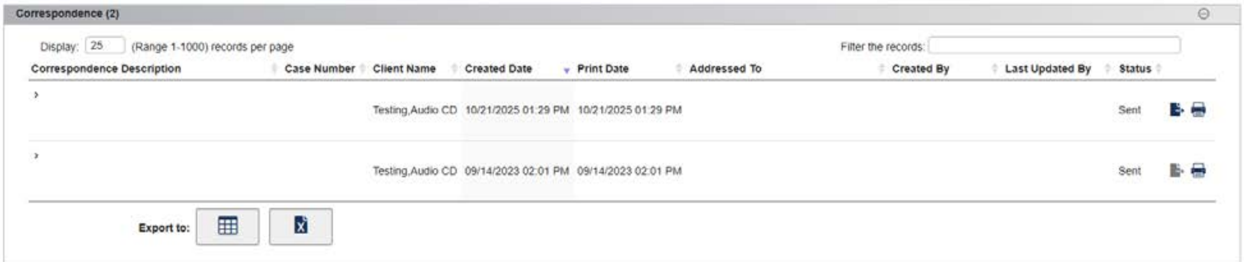


Figure 16-1 Correspondence Section

- Caret: Clicking on the caret icon will expand the Correspondence Details.
- Case Number: Case number of client.
- Created Date: Date letter was generated.
- Correspondence Description: Correspondence Template Number, Letter Name, and unique Letter ID. Clicking on the Hyperlink will navigate the user to the Correspondence Maintenance Page.
  - Hyperlink is Disabled if Correspondence status is Sent, Cancelled, Reissued, Deleted, Waiting for Approval, or if the user does not have the privilege to edit the Correspondence.
- Print Date: Date letter was printed/sent
- Addressed to: Primary addressee of letter
- Created By: User who generated the letter.
- Last Updated By: User who last updated the letter.
- Status: Status of letter (Incomplete, Ready to Send, Waiting for Approval, Sent, Cancelled, Deleted)
- Create First Level Appeal Letter for this NOA Icon: Clicking on the icon will navigate user to the Correspondence Maintenance page to create a first level appeal letter for the NOA.
- Print Icon: Disabled if Correspondence Status is Incomplete, Waiting For Approval or Deleted, else enabled. Clicking on the icon will download a PDF of the letter for the user to view.

16.1 Printing Correspondence

If a letter is generated, the system displays the success message.

Figure 16-2 Success Message

- [Action Name] updated/created successfully.: [Action Name] will be replaced with whatever action on the screen was updated/created.
- Correspondence(s) have been created successfully.: Display only.
- Correspondence description link: Will either download letter or navigate user to maintenance page based on letter status. Appears if correspondence has been created.
    - If letter is in "Sent" status, clicking on the Correspondence description link downloads a PDF of the letter for the user to view.
    - If letter is "Incomplete" or "Ready to Send" status, clicking on the Correspondence description link navigates to Correspondence maintenance page.

Batch Correspondence FYI: In addition, for letters to display in “Batch Correspondence” for counties that participate in auto batch printing (Los Angeles & Orange County for example), letter(s) will not be placed in the batch unless user puts the letter to “ready to send” or “sent” status.

17 CASE NOTE

Case Note is optional. A case note will only be created if user enters a comment into the Case Note comment box.

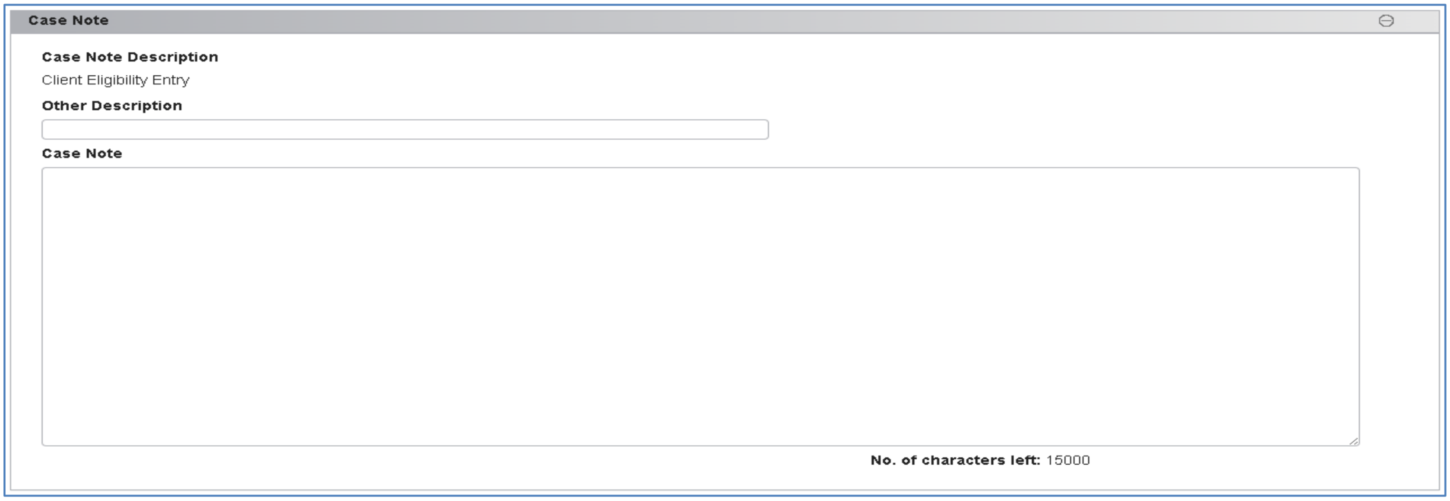


Figure 17-1 Case Note

17.1 Adding Case Note

Case Note is a text entry field where a user can save up to 15000 alphanumeric characters to a client's case. System performs a character countdown as user types in comment.

One Case Note per user, per day, may be generated for a client.

- User Text: Entry from Case Note comment box turns into "User Text" on Case Notes History.
- System Text: System generates auto system text for the action user takes. See case note history for all examples.

Case Note Description:

- Defaults description to "Client Eligibility Entry"
- The subject code is set as a hidden field and the value is set to "Elig-ClientEntry".

Other Description:

- Free Text field and optional.
- When new text is entered into field, upon saving, the new text replaces the existing case note subject description text on case note modules (legacy) and for CMS2020 Case Notes History, it displays underneath the default subject code in the subject column.
- Maximum characters allowed = 60 characters.

Case Note Text

- This is an optional field.
- The maximum characters length is 15,000.
- Case note is created when user enters case note comments in the Case Note textbox.

17.2 Updating Case Note

If a case note already exists by the user (same day, same client) and user enters a new comment into the Case Note comment box, the existing Case Note is overwritten with the updated User Text. System text is also updated accordingly. Otherwise, a new Case Note is created.

User may not update “historical” case notes.

18 CASE NOTES HISTORY

This Case Notes History section contains a list of historical case notes associated with Eligibility Client. As mentioned from Case Note section, if user updates case notes on same day, the system will update the user text and the system text accordingly.

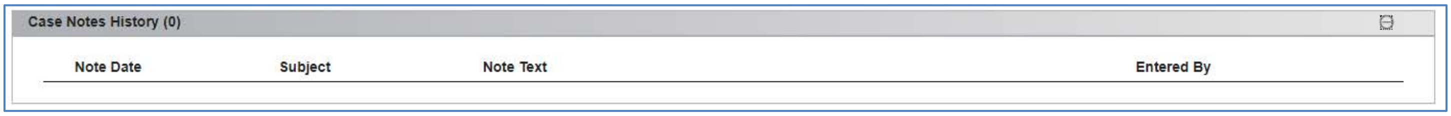


Figure 18-1 Case Note History

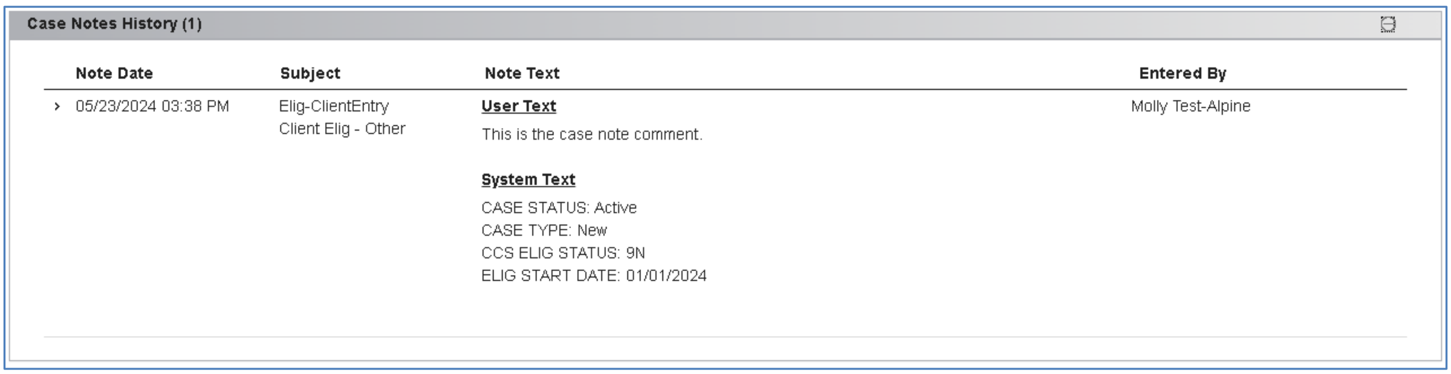


Figure 18-2 Case Notes History with Note

The list has the following fields:

- Note Date
    - This is a timestamp with (MM/DD/YYYY HH:MM AM/PM) format.
- Subject
    - Line 1: Case note subject code
    - Line 2: Other Description (if entered from Case Note – Other Description field)
- Note Text
    - Displays user text and system text.
- Entered By
    - User’s name that entered case note.

18.1 Case Note Examples

User Text: entry from Case Note comment box turns into “User Text” on Case Notes History.

System Text: system generates auto system text for the action user takes.

- When user activates case or perform aid code change, system text consist of the following:
    - CASE STATUS

- CASE TYPE
- CCS ELIG STATUS / GHPP ELIG STATUS
- ELIG START DATE

- When user deny case, system text consist of the following:
  - CASE STATUS
  - CASE TYPE
  - DATE DENIED
  - REASON DENIED
  - DETERMINED BY
  - DETERMINED ON

- When user closes case, system text consist the following:
  - CASE STATUS
  - CASE TYPE
  - CCS ELIG STATUS / GHPP ELIG STATUS
  - ELIG START DATE
  - DATE CLOSED
  - REASON CLOSED
  - DETERMINED BY
  - DETERMINED ON