



Bulletin

NUMBER

#15-21-06

DATE

July 30, 2015

OF INTEREST TO

County Directors

Social Services Supervisors
and Staff

County Collection Workers

County Fiscal Supervisors

Financial Workers

ACTION/DUE DATE

Please use the new MMIS
obligation types beginning
July 1, 2015.

EXPIRATION DATE

July 30, 2017

Entering Recovery Obligations in MMIS

TOPIC

Updated obligation types and use of obligation types.

PURPOSE

Update local agencies about the obligation types to use
when entering recovery obligations in MMIS.

CONTACT

Health Care Eligibility Operations (HCEO) and local
agencies should submit policy questions to HealthQuest.

Direct financial operations questions to the Financial
Operations Division at 651-431-3771.

Direct estate recovery questions to the Special Recovery
Unit at 651-431-3204.

SIGNED

Nathan Moracco

TERMINOLOGY NOTICE

The terminology used to describe people we serve has
changed over time. The Minnesota Department of Human
Services (DHS) supports the use of "People First" language.

I. Introduction

This bulletin discusses estate recovery and overpayment efforts. Specifically, this bulletin explains changes to the obligation types local agencies (counties, multicounty groups, and tribes) use when entering obligations and recoveries in MMIS. These changes will ensure that local agencies appropriately identify entries by their recovery purpose and that all monies recovered are routed correctly.

This bulletin also explains the process for entering obligations and recoveries in MMIS. Local agencies must remain up to date on the process for entering obligations and recoveries to ensure they receive the correct incentive share of each recovery.

MMIS (Medicaid Management Information System): MMIS is the system local agencies use to enter any obligation or recovery related to Minnesota Health Care Programs (MHCPs).

Rates of participation: Starting in federal fiscal year 2015, the local agency participation rates for Medicaid recoveries will remain stable with some variations. Local agencies should refer to their health care program invoices to calculate the current participation rates.

Timely reporting: Local agencies must report all recoveries in the month after collection. See the annual DHS Updates County Fiscal Reports, References, Contacts, Deadlines, and Procedures bulletin.

A local agency should set up an obligation as soon as the agency is aware of it, even if the agency has not yet received a payment on the obligation.

Security clearance: Before local agency staff members can enter obligations and recoveries in MMIS, they must first have the correct MMIS security clearance. To arrange for this, work with your local agency's security liaison.

For purposes of this bulletin, we have assumed that each staff member entering obligations and recoveries has received training in MMIS and knows how to navigate its subsystems.

Note: In this bulletin, "you" refers to a local agency staff member.

II. Changes to Obligation Types, Effective July 1, 2015

We removed several obligation types from each obligation group. The table below shows the obligation groups and types as they exist beginning July 1, 2015.

Obligation Groups and Types	
Group: Estate Collections	
Obligation or Recovery	Obligation Type and Description
<p>A recovery from an estate that:</p> <ul style="list-style-type: none"> • is valued under \$50,000, • includes no real estate, and • does not require a court action to administer. <p>The financial worker or local agency collection worker determines that an estate meets these criteria after reviewing the monthly local agency probate opening list.</p>	EA: Estate Affidavit
<p>A recovery from an estate that:</p> <ul style="list-style-type: none"> • is valued over \$50,000 or includes real estate and • requires a court action to administer. <p>The financial worker or local agency collection worker determines that an estate meets these criteria after reviewing the monthly local agency probate opening list.</p>	EP: Estate Probate
Group: Recipient Ineligibility	
Obligation or Recovery	Obligation Type and Description
<p>A recovery of the overpayment described in the following situation:</p> <ul style="list-style-type: none"> • A client files a timely appeal and requests continued benefits pending the appeal's outcome. • The client loses the appeal. • Any benefits paid during the time in which the client was not entitled to benefits (as determined by the appeal results) are an appeal overpayment. 	IA: Ineligibility Appeal
<p>An obligation resulting from the successful court action described in the following situation:</p> <ul style="list-style-type: none"> • A financial worker determines a recipient is ineligible and refers the case to the local agency fraud unit or the local agency attorney, who then establishes a court action. • The court action is successful in securing a repayment schedule, and the financial worker sets up an obligation in MMIS. 	IC: Ineligibility Court Ordered
<p>An obligation resulting from an overpayment the financial worker has calculated.</p>	IV: Ineligibility Voluntary
Group: Nonrecipient Contribution	
Obligation or Recovery	Obligation Type and Description
<p>An obligation resulting from a court action against the community spouse described in the following situation: A financial worker approves eligibility for a recipient (long-term-care spouse) after the community spouse has refused to make available to the long-term-care spouse assets that are in excess of the community spouse asset allowance.</p>	NS: Nonrecipient Spousal
<p>An obligation resulting from a court action against a person who received transferred assets as described in the following situation: A court action is taken against a person who received transferred assets from a recipient who was granted a waiver of the asset transfer penalty because of hardship.</p>	NT: Nonrecipient Transfer of Assets

A. Estate Collections Group

We removed the obligation types EG and EV from the estate collections group. All estate recovery action now falls into two obligation types:

1. EA – Estate Affidavit

Use this obligation type to enter all recoveries the county makes that take place outside of a formal or informal probate process. These may include the recovery of non-probated assets using an affidavit of collection or other means that provides notice of an MA claim to the decedent's estate or the decedent's spouse's estate.

2. EP – Estate Probate

Use this obligation type to enter all recoveries the county makes in situations in which an estate has been formally or informally administered and is overseen by a judge, registrar, or other designated person.

We removed the following obligation types:

1. EG – Estate General

We removed this obligation type because all recoveries the county makes should be either Estate Affidavit recoveries or Estate Probate recoveries.

2. EV – Estate Voluntary

We removed this obligation type because counties and the state are prohibited from accepting voluntary payments from a recipient or the recipient's spouse during the recipient's lifetime. Therefore, there is no need for this obligation type.

If you try to enter EG or EV as an obligation type, the following message will appear:

The obligation type you selected was removed July 1, 2015. Please refer to your instruction manual for further guidance. If you are trying to correct an error using this obligation type, contact the MMIS Help Desk.

B. Nonrecipient Contribution Group

We removed the obligation type NN from the nonrecipient contribution group. Use the following two obligations types for this group:

1. NS – Nonrecipient Spouse

Use this obligation type for an obligation resulting from a court action against the community spouse described in the following situation: The financial worker approves eligibility for a recipient (long-term-care spouse) after the community spouse has refused to make available to the long-term-care spouse assets that are in excess of the community spouse asset allowance.

2. NT – Nonrecipient Transfer of Assets

Use this obligation type for an obligation resulting from a court action against a person who received transferred assets from a recipient who was granted a waiver of the asset transfer penalty because of hardship. Use this type for return of money from the person who received the transferred assets.

We removed the following obligation type:

NN – Nonrecipient Non-TEFRA

If you try to enter NN as an obligation type, the following message will appear:

The obligation type you selected was removed July 1, 2015. Please refer to your instruction manual for further guidance. If you are trying to correct an error using this obligation type, contact the MMIS Help Desk.

C. Recipient Contribution Group

We removed both of the obligation types (RE and RW) that made up the recipient contribution group.

1. RE: We removed this type because recipients cannot reduce excess assets by paying back MA expended on their behalf.
2. RW: We removed this type because the IV type should be used when a recipient windfall obligation is retroactively increased.

If you try to enter RE or RW as an obligation type, the following message will appear:

The obligation type you selected was removed July 1, 2015. Please refer to your instruction manual for further guidance. If you are trying to correct an error using this obligation type, contact the MMIS Help Desk.

D. Obligations That Have Payment Plans and Were Set Up with a Removed Obligation Type

If your agency has an existing obligation that 1) is being paid off through a payment plan and 2) was set up with an obligation type that was removed from MMIS as of July 1, 2015, you no longer may enter payments using the obligation that was set up with the previously existing obligation type.

You will need to do the following:

1. Set up the obligation with a new valid obligation type.
2. Transfer the balance owed from the original obligation to the obligation with the new valid obligation type.
3. Going forward, enter all payments on the obligation that has the new valid obligation type.

Note: If 1) your agency has set up and been collecting on an obligation with an obligation type that has been removed and 2) this existing obligation does not fit any of the currently valid obligation types, your agency should cease collection from the recipient and notify the recipient that your agency has ceased collection.

III. Overview of Codes and Process for Entering Obligations and Recoveries in MMIS

This section gives an overview of the codes and process for entering an obligation or recovery in MMIS.

A. Action Codes

You can use the following three action codes for an obligation or recovery:

- A (add): To add a new obligation or recovery for a new recipient or new obligation type
- C (change): To add another entry or correct an entry on an **existing** obligation
- I (inquire): To find an obligation or recovery that was entered previously

Note: MMIS does not allow you to delete an existing obligation.

B. Obligation Types

Determine the obligation type you will be entering before entering an obligation or recovery. Valid obligation types as of July 1, 2015, are as follows:

- EA: Estate Affidavit
- EP: Estate Probate
- IA: Ineligibility Appeal
- IC: Ineligibility Court Ordered
- IV: Ineligibility Voluntary
- NS: Nonrecipient Spousal
- NT: Nonrecipient Transfer of Assets

C. Obligation Status

Obligation status is not relevant for recoveries. For a closed or open obligation, you can enter information such as dates and the amount of the recovery on the OACT screen.

D. Billing Process, Reports, and Entry Deadlines

All obligation and recovery entries that are saved (by pressing F3) result in pending claims that MMIS processes every two weeks. MMIS assigns a 17-digit claim number to the transaction in overnight processing. An MMIS user can use that number to find the obligation or recovery in claims inquiry in MMIS the day after entering the obligation or recovery. If a worker enters an obligation or recovery before the last biweekly processing in any month, the obligation or recovery item will be included in that month's Health Care Programs Invoice. The summary R0117 and detail R0234 invoices are available on Document Direct.

The following picture shows the Total page of a sample R0117 Health Care Programs Invoice for recovery claims entered and processed from May 1 through May 31, 2015.

Note: All recoveries related to state-funded MinnesotaCare, non-MA eligible, funding code 404 MinnesotaCare County Recovery, are included in the GAMC (General Assistance Medical Care) totals, lines 13 through 16, since state-funded MinnesotaCare and GAMC share the same rates of participation.

ROUTE: MW0117 FPP
 PROC: PWMW5M15
 REPT: PWMW5150-R0117
 FICHE:

MINNESOTA DEPARTMENT OF HUMAN SERVICES
 MEDICAID MANAGEMENT INFORMATION SYSTEM (MMI)

HEALTH CARE PROGRAMS INVOICE
 FOR THE PERIOD OF 05/01/2015 THRU 05/31/201

FINANCIAL RESPONSIBILITY OF : MINNESOTA FAMILY PLANNING

CUSTOMER CODE: INVALID CODE		TOTAL	COUNTY INCENTIVE
		(1)	(2)
		-----	-----
COUNTY	1. MA ESTATE COLLECTIONS	.00	.00
RECOVERIES	2. MA RECIPIENT INELIGIBILITY	.00	.00
	3. MA RECIPIENT CONTRIBUTIONS	.00	.00
	4. MA NON-RECIPIENT CONTRIB.	.00	.00
	5. MA MEDICAL SUPPORT CSES	.00	.00
	6. MA MEDICAL SUPPORT PRISM	.00	.00
	MA TOTAL FUND CODE 001	.00 ***	.00 **
	7. MA/MNCARE ESTATE COLLECTIONS	.00	.00
	8. MA/MNCARE RECIPIENT INELIG.	.00	.00
	9. MN/MNCARE RECIPIENT CONTRIB.	.00	.00
	10. MA/MNCARE NON-RECIP CONTRIB.	.00	.00
	11. MA/MNCARE MED SUPPORT CSES	.00	.00
	12. MA/MNCARE MED SUPPORT PRISM	.00	.00
	MA/MNCRE TOTAL FUND CODE 401	.00 ***	.00 **
	13. MCRE/GAMC/NONRES ESTATE COLLECT.	.00	.00
	14. MCRE/GAMC/NONRES RECIP INELIG.	.00	.00
	15. MCRE/GAMC/NONRES RECIP CONTRIB.	.00	.00
	16. MCRE/GAMC/NONRES NON-RCIP CONTRIB	.00	.00
	MCRE/GAMC/NRES TOT FC 404+101+801	.00 ***	.00 **
	17. AC ESTATE COLLECTIONS	.00	.00
	18. AC RECIPIENT INELIGIBILITY	.00	.00
	19. AC RECIPIENT CONTRIBUTIONS	.00	.00
	20. AC NON-RECIPIENT CONTRIBUTIONS	.00	.00
	AC TOTAL FUND CODE 201 & 203	.00 ***	.00 **
	21. AC CLIENT PREMIUMS FC 250	.00	.00
	22. RX DRUG PLAN PREMIUMS FC 850	.00	.00
	23. MA AX ESTATE COLLECTIONS	.00	.00
	24. MA AX RECIPIENT INELIGIBILITY	.00	.00
	25. MA AX RECIPIENT CONTRIBUTIONS	.00	.00
	26. MA AX NON-RECIPIENT CONTRIB.	.00	.00
	MA AX TOTAL FUND CODE 204	.00 ***	.00 **
	27. NMED CHIP ESTATE COLLECTIONS	.00	.00
	28. NMED CHIP RECIPIENT INELIGIBILITY	.00	.00
	29. NMED CHIP RECIPIENT CONTRIBUTIONS	.00	.00
	30. NMED CHIP NON-RECIPIENT CONTRIB.	.00	.00
	NMED CHIP TOTAL FUND CODE 804	.00 ***	.00 **
	31. TOTAL RECOVERIES/COLLECTIONS	.00 ***	.00 **

2. Enter your mainframe ID and password. Press Enter.

```
SYSTEM: MN0PT7 WELCOME TO CICS
          TO EXIT, CLEAR SCREEN AND ENTER "LOGOFF"
TERMINAL: UF36
          NODE: A52TUF36

          DAY: TUESDAY

SYSTEM DATE: AUGUST 29, 2006
SYSTEM TIME: 04:24 PM

LOGONID: ==>
PASSWORD: ==>

IEW PASSWORD: ==>
enter twice) ==>
```

3. In the upper-left corner of the screen, enter the system ID: MW00. Be sure to enter the digits "00" and not the letters "OO." Press Enter.
4. On the MMIS main menu screen, select the recipient subsystem (**RECIPIENT FILE APPLICATION**) by entering an "X" to the left of that choice. Press Enter.

Note: The applications you see listed on the main menu screen depend on your level of access to MMIS information and may not match those shown in the following screen shot.

```
10/10/06 9:57:57 MMIS MAIN MENU - MAIN PROD DT00
          *** MEDICAID MANAGEMENT INFORMATION SYSTEM ***
SEL                                             SEL
CLAIMS PROCESSING APPLICATIONS:
  INQUIRY
REFERENCE FILE APPLICATIONS:
  PROC, DRUG, DIAG, DRG, UPC
  RATES
  TEXT
  SYSTEM PARAMETERS/LIST PARAMETERS
OTHER APPLICATIONS:
  PROVIDER FILE APPLICATION
  X RECIPIENT FILE APPLICATION
  TPL BILLING APPLICATION
  FINANCIAL CONTROL
  TPL RESOURCE FILE APPLICATION
  PAYMENT OPTION PLAN
  MANAGED CARE
```

5. On the RKEY screen, enter "I" to inquire and the recipient ID, name, and SSN or other ID. If you cannot find the recipient in MMIS, then use your dummy Patient Master Index (PMI) number for MA or state-only programs. The values for these dummy numbers are in the recipient file. Inquire using the name ZZZZ-MA or ZZZZ-GA followed by your local agency name.

In the upper-left corner of the RKEY screen, enter "RELG" and press Enter to navigate to the RELG screen.

```
NEXT:      05/18/09 15:07:15 MMIS RECIP KEY PANEL-RKEY      PWM101
ACTION CODE: I (A=ADD/C=CHANGE/I=INQUIRY/R=MCRE REDET/T=MCRE TRANSFER)
----- RECIPIENT KEY PANEL -----
RECIPIENT ID: 01739555
          SSN:                MEDICARE ID:
RECIP LAST NAME:                FIRST:                INIT:
DOB(MM/DD/YYYY):                - ALSO ENTER NAME
-----
CASE NUMBER:                CLIENT OPTION NBR:                CASE TYPE:
```

6. The following screen shot of an example RELG screen shows three eligibility spans to choose from. Use the eligibility span begin date that aligns with the program and service period related to the obligation or recovery.

```
NEXT: RIDS 10/22/13 09:51:10 MMIS ELIGIBIL
01739555                05/07/1900 *
DOE                JANE                J *
*****
- - - - - E L I G I B I L
01 PRG: MA MEDICAID    ELIG TY: DX DISABLED/N
  ELIG BEGIN: 01/01/12    ELIG END: 99/99/99 C
STATUS DATE: 12/29/11    DATE ADDED: 12/29/11

02 PRG: QM QMB        ELIG TY: DQ DISABLED/Q
  ELIG BEGIN: 01/01/12    ELIG END: 99/99/99 C
STATUS DATE: 12/29/11    DATE ADDED: 12/29/11

03 PRG: MA MEDICAID    ELIG TY: DP MA FOR EMP
  ELIG BEGIN: 07/01/09    ELIG END: 12/31/11 C
STATUS DATE: 12/21/11    DATE ADDED: 06/12/09
```

- 7. Press F6 until you are back at the main menu. Select **FINANCIAL CONTROL** by entering an "X" to the left of that choice. Then press Enter.

```
05/18/09 15:33:52  MMIS MAIN MENU - MAIN  PROD  DT00
  □  ***  MEDICAID MANAGEMENT INFORMATION SYSTEM  ***
SEL                                     SEL
CLAIMS PROCESSING APPLICATIONS:
  INQUIRY
OTHER APPLICATIONS:
  PROVIDER FILE APPLICATION
  RECIPIENT FILE APPLICATION
X  FINANCIAL CONTROL
```

- 8. On the OKEY screen, use action code A (used to add a new recovery for a new recipient or new obligation type). Select your obligation type. Then press Enter to go to the next screen.

Screen shot of OKEY screen:

```
NEXT:      07/10/15 11:53:42 MMIS  FC KEY PANEL  -OKEY                PWMWA30
          ACTION CODE (A=ADD, C=CHANGE, D=DELETE, I=INQUIRE): a
          FINANCIAL CONTROL OBLIGATIONS
OBLIGATION ID:      OBLIGATION TYPE: ea  CHECK NUMBER:
NPI ID:             NPI NAME:
RECIPIENT ID:      RECIPIENT NAME:
CASE ID:           ACT START DATE:

          FINANCIAL CONTROL PROVIDERS
SELECT CODE:
NPI ID:           NPI NAME:

          FINANCIAL CONTROL DEPOSITED CHECK BATCH ENTRY
DEPOSIT NUMBER:    ENTRY DATE:

          FINANCIAL CONTROL DEPOSITED CHECK BATCH INQUIRY
DEPOSIT NUMBER:    ENTRY DATE:
*****
* OBLG - OBLIG DETAIL      OPRV - PROVIDER DETAIL      OBAT - CHECK ENTRY      *
* OBIN - BATCH INQUIRY                                         *
*****
ENTER---PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10---PF11--PF12
PAGE           S/EXT           N/EXT           OOPS           HELP
```

9. On the next screen, the OBLG screen, enter the following two required items:

- recipient ID (eight digits)
- begin date

Enter the end date if you know what it should be. If you do not enter an end date, the system fills in a default end date of 99/99/99.

Enter the total amount of the obligation owed in the obligation maximum (MAX) line when the debt is established, not just when a payment is made. Local agencies are billed only for the amounts collected, not for obligations owed but not collected.

Entering notes is optional.

When you are finished entering information, press Enter to go to the OACT screen.

Screen shot of OBLG screen:

```
NEXT: OACT 07/10/15 11:14:59 MMIS OBLIG DETAIL -OBLG PWGMS75 07/10/15 PWMWA32
OBLIG ID:      828882032      OBLIG TYPE:    EA EST AFF
STATUS:        O OPEN        STATUS DT:     07/10/15
BEG DATE:      END DT:      99/99/99      REIN CUTOFF:
RECIPIENT ID:      NAME: ZZZZ-MA-M      HENNEPIN
NPI ID: A000027200      NAME: HENNEPIN COUNTY HUMAN SERVICES DEPT
CHECK RESTRICTION(Y/N):      TYPE: CNTY/RESER
FREQ PERIOD:    NO FREQ      FREQ AMOUNT:      BILL IND(Y/N): N
OBLIGATION MAX:$      15,000.00      CHECK NUMBER:
ACTIVITY TOTAL:$      0.00      DEPOSIT CODE:
OUTSTANDING:$      15,000.00      USER: CO COUNTY
----- NOTES -----
-----
ENTER---PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12
PAGE           S/EXT NAVIG           N/EXT           OOPS
```

10. On the OACT screen, do the following:

- Enter an activity begin date and an activity end date.
- Enter the amount paid or the amount of the obligation or recovery.
- Enter a note, such as a note of the receipt voucher number, number of the check received, and date of receipt.

Screen shot of OACT screen:

```
NEXT: OBLG 08/29/06 17:32:01 MMIS OBLIG ACTIVITY -OACT
OBLIGATION: 947086228      TYPE: REC EXCESS      STATUS: OPEN
  BEG DATE: 01/01/99      END DATE: 99/99/99      OUTSTD:$
BEG/  DETAIL  BILLED  DATE  PREMIUM  AMT PD/ ADJ OBLI
END DT  AMOUNT  ADDED  AMOUNT  ADJUST IND
05/17/99 OTHER          08/29/99          500.00
06/09/99
```

31 characters of text allowed with each activity line entry

Verify your work and press F3 to save it.

If you need to exit and cancel all entries, press F6.

B. Updating, Changing, or Adding Additional Entries to an Existing Obligation

You may need to update, change, or add additional entries to an existing obligation. Examples of reasons you would need to do this include the following:

- A responsible relative must pay a set amount each month to repay an amount due.
- An estate is paid out in periodic dividends.
- A refund (negative entry) is needed to pay additional burial charges or lawyer expenses.

Use action code C (change) to update, change, or add additional entries to an existing obligation, as described in these steps:

1. Log in to MMIS. Select **FINANCIAL CONTROL** by entering an "X" to the left of that choice. At the OKEY screen, enter action code "C" and the obligation number.

If you do not know the obligation number: Enter action code "I" (inquire) and the obligation type or national provider identifier (NPI) name (your local agency name). Press Enter and review the results on the OSEL screen. Find the obligation and write down the nine-digit obligation number. If you cannot find the obligation, then the previous entry adding the obligation may not have been saved (by pressing F3).

2. Press Enter twice, until the OACT screen appears. On the OACT screen, enter a new line with a begin date within the eligibility span entered on the OBLG screen.
 - Enter the amount collected.
 - Optional: Enter a 31-character note. Recommendation: Enter voucher, date collected, and remitter name.
 - Enter additional lines if necessary.
 - Press F3 to save your work and exit the OACT screen. Or Press F6 to cancel all entries and exit the OACT screen.

Negative adjustments: Entries of refunds or decreasing adjustments must meet these three requirements:

- The beginning and end dates must be equal to those of a previous entry on the OACT screen for the obligation.
- The negative amount cannot exceed the positive amount in the corresponding entry previously made on the OACT screen.
- The negative entry must be in parentheses ().

Example showing three entries followed by a refund of the third entry:

Begin Date	Amount
03/01/09	20.00
04/01/09	20.00
05/01/09	50.00
05/01/09	(50.00)

Be sure to save any entries you made by pressing F3.

C. Finding an Existing Obligation Using Action Code I

To find an existing obligation, follow these steps:

1. Log in to MMIS. Select **FINANCIAL CONTROL** by entering an "X" to the left of that choice. At the OKEY screen, enter action code "I" and the obligation type or NPI name (your county name).
2. Review the results on the OSEL screen. To page forward, press F8. To page back, press F7.
3. Enter an "X" to left of the obligation that matches your criteria. Press Enter.
4. Review the results. To page forward to the OACT screen, press Enter again.
5. To exit inquiry at any point, press F6.

D. Generating Summary Reports

To view a summary of all obligation entries that are being processed and that are fully processed, follow these steps:

1. Log in to MMIS. Under **CLAIMS PROCESSING**, select **INQUIRY** by entering an "X" to the left of that choice. Press Enter.
2. Enter the following information, as shown in the screen shot below, except use your county's NPI number and the warrant dates that fit your needs.

Select **ALL CLAIMS** by entering an "X" to the left of that choice.

For category of service, enter "139" (collections).

For claim type, enter "L" (history only).

For claim status, enter one of the following:

- "N" (to see claims that have been paid)
- "P" (denied) (to see claims that have not been paid)
- "I" (to see claims that are being processed)

Press Enter.

If you leave the category of service, claim type, and claim status blank, all claims appear, in descending warrant date order.

Screen shot of Cinq screen:

```
NEXT:                                MMIS CLM INQ KEY PNL-CINQ                                PWMWC90

X ALL CLAIMS                          SUSPENDED CLAIMS
  TO BE PAID/TO BE DENIED CLAIMS      CLAIMS HISTORY
  VOID/CREDIT REQUEST HISTORY

A. TRANSACTION CONTROL NUMBER:
B. NPI: a000002700    PAY-TO/SUBMIT:    TREAT/CONTRACT:
C. RECIPIENT ID:
D. MHCP PROVIDER:    PAY-TO/SUBMIT:    TREAT/CONTRACT:
E. ICN:

      NPI:                MHCP PROV:                RECIPIENT ID:
      DATE OF SERV:      PROCEDURE CODE:
      WARRANT DATE: 050115 053115      MODIFIER:
      REIMB AMOUNT:      REVENUE CODE:
CATEGORY OF SERV: 139      CLAIM TYPE: 1    STATUS: n
EXCEPTION CODE:          MN SERV GROUP:
PRESCRIPTION #:          PPHP CONTRACT ID:
PAYMENT TYPE: A C=CONTRACT E-ENCOUNTER F-FEE FOR SERVICE A=ALL (DFLT)
                                D=DETAIL S=SUMRY (DFLT) P=PROC SUMRY
ENTER---PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10---PF11---PF12
PAGE                S/EXT                N/EXT                OOPS
```

Americans with Disabilities Act (ADA) Advisory

This information is available in accessible formats for people with disabilities by calling 651-431-3039 (voice) or toll free at 866-786-3945 or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.