
N-FOCUS Major Release

Medicaid and Long Term Care

April 13, 2025

A Major Release of the N-FOCUS System is being implemented April 13, 2025. This document provides information explaining new functionality, enhancements and problem resolutions made effective with this release.

General Interest and Mainframe Topics: All N-FOCUS users should read this section.

ACCESSNebraska: N-FOCUS workers responsible for case activity received through the Web Based Electronic Application should read this section.

Home and Community Based Services: N-FOCUS workers who work directly with DD or AD/TBI waiver programs and those who work with the related Medicaid cases should read this section.

Note: This section will only appear when there are tips, enhancements or fixes specific to Home and Community Based Services Programs.

Expert System: All N-FOCUS workers with responsibilities for data entry or eligibility determinations in Expert should read this section.

Note: When new functionality is added to N-FOCUS that crosses multiple topics (i.e., General Interest and Mainframe, Alerts, Correspondence, Expert System etc.) the functionality will be described in one primary location. This location will usually be the General Interest and Mainframe section or the Expert System section. Alerts Work Tasks and Correspondence that are part of the new functionality may be documented in both the primary location that describes the entire process in addition to being in the Alerts, Work Tasks and Correspondence sections.

Interfaces, Document Imaging and N-FOCUS Tips sections will be added as appropriate for the release.

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Home and Community Based Services

AD/TBI Electronic Service Authorizations and Claims (Change)

As part of the DHHS Business Plan, the Home and Community Based Services area aims to streamline all case management into one system. N-FOCUS will support this objective within the Provider, Claims and Service Authorization areas by consolidating the Waiver programs into a more seamless single case management process that will include the Aged and Disabled (AD) and Traumatic Brain Injury (TBI) waiver programs. With this release, users will see the following changes:

Service Authorizations

AD and TBI waiver service authorizations will be completed in Therap if the Begin Date of the service authorization is on or after May 1, 2025. These service authorizations will then be transmitted to N-FOCUS in real time. The service authorizations from Therap will not contain rates, units, or tasks. The rate, unit, and task information will be stored in Therap. Service authorizations with a Begin Date prior to May 1, 2025, will continue to be entered and maintained in N-FOCUS as they are now. N-FOCUS will run a conversion program to End Date the current AD and TBI N-FOCUS service authorizations, along with the corresponding unit and rate records, the week of April 14th.

Claims

Non-Employer Visit Verification (EVV) claims with a Date of Service on or after May 1, 2025, will be sent to N-FOCUS via Therap using the same electronic process that is currently used for the CDD, DDAD and FSW waivers. Claims for AD and TBI Non-EVV services that have a Date of Service prior to May 1, 2025, will continue to be processed manually in N-FOCUS as they are now.

Mainframe windows

New informational and error messages will display in some of the Mainframe windows. These validations will inform or prevent users from creating or editing N-FOCUS records where the Begin and/or End Dates are on or after May 1, 2025. This applies to the following windows:

Detail Program Case

Informational message when users go to 'Select Service.' This will remind users that service authorizations beginning May 1, 2025, will be coming from the waiver case management system. This is an informational message only and will not prevent the user from completing the action.

Detail Provider

Detail Provider records with a Program of AD or TBI and a Begin Date on or after May 1, 2025, will notice the Preprint indicator

will default from Paper to N/A upon Save, Save and Close, and Close (if saved). Records for AD or TBI programs with a Begin Date before May 1, 2025, will function as they do now.

Detail Claim Item

Claims submitted to N-FOCUS from the waiver case management system for AD and TBI services with dates of service on or after May 1, 2025, will not allow user edits to the claim. These claims will contain fields that are not enabled to the user and cannot be changed.

Service Authorization Detail/Units and Rates/Detail Service Needs Assessment/Detail Provider/Detail Claim Item

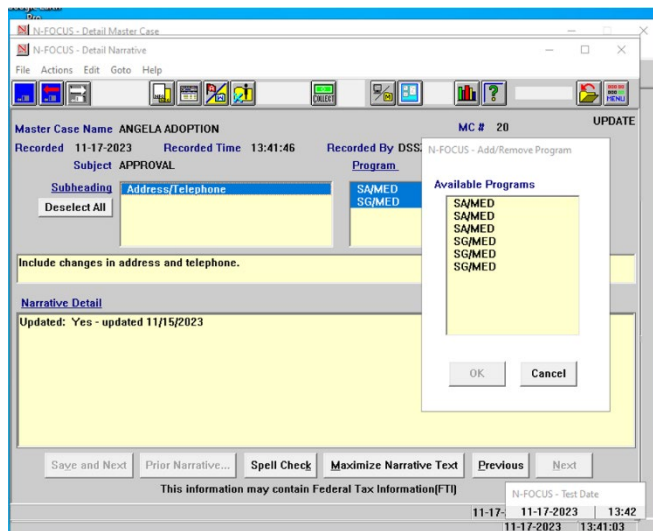
These windows will display an error message if users attempt to create or edit one of these records with the following conditions: the record is in support of the AD or TBI program and the Begin and/or End Dates are on or after May 1, 2025. This error message will prevent the user from saving the record. Records in support of the AD and TBI program where the Begin and End Dates are prior to May 1, 2025, will function as they do now.

Narrative

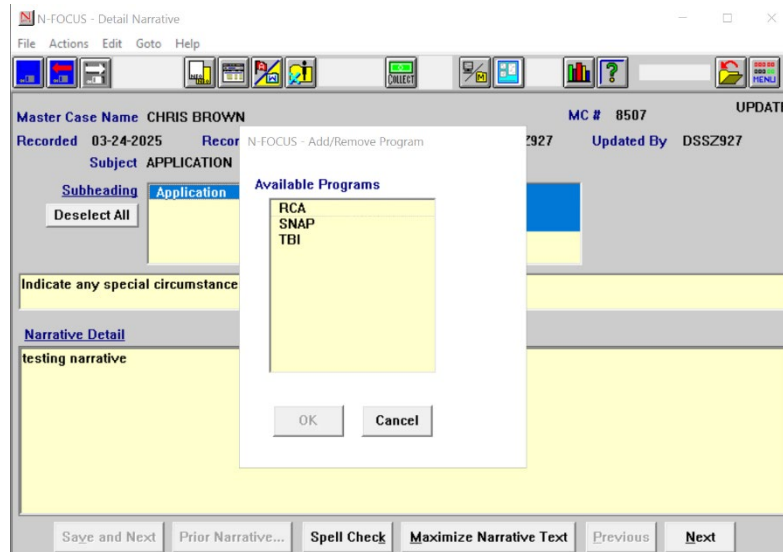
Redundant Display Issue (Fix)

Under certain circumstances, programs in the 'add/remove programs' window would display redundant availability for the same programs. This has been corrected and will no longer display redundant entries.

Before:



After:



[Printing Format \(Change\)](#)

Formatting for printing narratives has been updated from 'tumble' to 'duplex' printing.

[Expert System](#)

[Case Review Not Completed Closure Reasons for Participants \(New\)](#)

The closure reason of 'Case Review Not Completed' is now available at the participant level in addition the program case level. Individuals can be closed for this reason if needed rather than the entire case.

[Expiry Date Related Check-in and Critical Errors \(Fix\)](#)

Critical errors were occurring when workers updated the expiry date to a previous case review date in the Mainframe before checking the case out in Expert. Check-in errors were also occurring when completing a renewal in Expert and changing the expiry back to a previous case review date before checking the case back in. These issues have been resolved.

[MIWD and TMA Premium Income Range Updates \(Change\)](#)

Updates have been made to the income ranges for determining MIWD premiums for household sizes of 7, 14, 18 and 20 and TMA premiums for household sizes of 7, 14, 18 and 20.

[Renewal Budget Purpose \(Fix\)](#)

Previously, the only month that displayed renewal for the budget purpose for an individual was the month after the individual's expiry date. Example: person has an expiry date of 12-31-24 so the budget for benefit month of 1/25 would be the

only month to show renewal as the budget purpose. This was causing issues with processing renewals past that designated month. With this release, the worker will not be limited to the month following the expiry date to process renewals.

Example of the updates are:

Program Case Review Date: 12-31-2024

Person A's Expiry Date: 12-31-2024

Person B's Expiry Date: 12-31-2024

Benefit Month being run:

11-2024 Budget Purpose = Change

12-2024 Budget Purpose = Renewal

01-2025 Budget Purpose = Renewal

02-2025 Budget Purpose = Renewal

03-2025 Budget Purpose = Renewal

04-2025 Budget Purpose = Renewal

05-2025 Budget Purpose = Renewal