

QUEUE MANAGEMENT PROCESS

Please Help Us Help You.

Email Addresses To Be Used To Submit Supporting Documentation. Later in this document we are providing updated information related to the various email addresses that the Family Support Division (FSD) makes available to **partners such as you** to expedite the process of submitting supporting documentation to FSD. The email addresses established by FSD are used to **triage** your applications and/or supporting documents in order to get them **routed** to the appropriate MAGI Processing Center to be worked by the caseworkers who are trained to process the information that you are submitting.

Today we are sharing two additional ways you can help us help you:

First, Use the Following Suggested Subject Lines. It would be helpful if you would assist in our triage efforts by entering the following words on the subject line for those documents that are being submitted by email. It would also be helpful to clearly use the same words on the cover sheet for documents submitted by fax. Clearly noting the issue on the subject line and/or cover page will assist us in dealing with your emails and faxes more efficiently, thus assuring responses to you in a timely manner. Following are suggested subject lines for your use:

- **Add a Person** – You are adding a new person to an existing case.
- **Add a Pregnancy** – You are submitting a form requesting that we add pregnancy coverage to a client who is already a part of an active MEDES case.
- **Application Inquiry** – You simply want to know whether an application has been filed, and, if so, what is the status of the application and what information is required to complete the processing of the application.
- **Authorized Representative Form** – You are submitting an IM-6AR.
- **Pregnancy Application Inquiry** – You simply want to know whether a pregnancy application has been filed, and, if so, what is the status of the application and what information is required to complete the processing of the application.
- **Backdating** – This is to be used when an individual's coverage on MXIX or MMIS does not go back to the correct date of coverage based on the application.
- **Documentation/Verification** – You are submitting documentation to verify income, identity, etc.
- **Emergency Coverage Needed** – This is used only for those cases where care is needed immediately, inpatient stays or prescriptions are needed immediately.

- **EMCIA** – Emergency Medical Care for Ineligible Aliens – request for coverage for ineligible aliens for emergency medical care.
- **High Risk Pregnancy** – Patient has risk factors indicating a high risk pregnancy.
- **Newborn** – requesting coverage for a newborn using the newborn spreadsheet.
- **Overdue Applications** – Family applications pending more than 30days.
- **Overdue Pregnancy Applications** – Pregnancy applications pending more than 15 days.
- **Policy Question** – You are submitting a policy question to be answered by the FSD staff.
- **Please Review** – This will let FSD know that you want us to review the case to see if the determination was correct.
- **Presumptive Eligibility/TEMP Coverage** – Applicant has gaps between PE/TEMP coverage and start date for Medicaid coverage.
- **PQ** – This is to be used when the individual’s regular coverage start date is correct but prior quarter coverage was requested and not reflected on MXIX or MMIS.
- **Show-Me Healthy Babies** – Use to submit an inquiry related to the new Show-Me Healthy Babies (SMHB) program or to submit discharge and newborn information for SMHB cases.

Second, Use the Standardized email template for the body of emails submitted to FSD. To further improve our efforts to serve you and your organization, this standardized email template is provided for your use. We believe it will increase efficiency in correspondence between your organization and our MAGI processing centers.

The ability to quickly spot identifying information allows us to get back with you more quickly with the correct answer. Please double check the spelling of names and the correctness of numbers that you submit so that we don’t spend unnecessary time trying to identify the correct applicant for you. Following is the suggested format for the body of the email:

- **Please notify me by email when you request additional supporting documentation for the case identified below:**

(enter name and email address here)

- **Head of Household first and last name:**

(enter information here)

- **Head of Household DCN, birth date and/or Social Security Number:**

(enter information here)

- **First and last names of other persons related to this inquiry:**

(enter information here)

- **Other person(s) DCN, birth date and/or Social Security Number:**

(enter information here)

- **Concern/request/other pertinent information:**

(enter information here)

Updated Matrix of Email Addresses To Be Used When Submitting Requests for Support and Supporting Documentation. We have established the following processes and email accounts to be used to submit supporting documentation to FSD MAGI processing centers. The email addresses are designed to channel your documentation to the appropriate queue to expedite the processing of applications.

Contact Information	Purpose
<p>Initial IVR call or email: Partners are entitled to an IVR call to a caseworker or in some cases; these queries are submitted via email.</p> <p>Amber Gonzales (573) 751-9007</p> <p>Sabrina Starke (573) 526-6048</p> <p>Or, FSD.MEDESIVR@dss.mo.gov</p>	<p>Initial contact should be made by partners when they encounter a patient and need to know whether that patient has an application on file, and if so, whether further documentation is required to complete the processing of the pending application.</p>
	<p>Once an application is submitted and your supporting documentation has been provided, we would ask that you wait:</p> <ul style="list-style-type: none"> • 15 days before making a subsequent inquiry regarding an MPW application; and, • 30 days before making a subsequent inquiry regarding a family application.

Contact Information	Purpose
FSD.MEDES@dss.mo.gov	<p>To be used to submit requests to the MEDES system for coverage for the following:</p> <ul style="list-style-type: none"> • Newborns; • Discharge information for Show-Me Healthy Babies including newborn information; • Patients with emergency care requirements who need applications promptly processed; • Pregnant women with high risk pregnancies; • Emergency Medical Care for Ineligible Aliens (EMCIA) applications; • New paper applications; and, • Hearing Requests.
	<p>To be used to submit:</p> <ul style="list-style-type: none"> • Requests for Prior Quarter (PQ) and/or Corrected Dates of Coverage; • Paper Applications; • Status inquiries; • Hearing requests.
	<p>To be used to submit lists of applications that are pending longer than:</p> <ul style="list-style-type: none"> • 15 days for MPW applications; and, • 30 days for family applications.
	<p>To be used to submit:</p> <ul style="list-style-type: none"> • Supporting documentation for applications not submitted electronically (Paper Applications) • Changes in Circumstance: <ul style="list-style-type: none"> ○ changes in household composition ○ changes in income ○ address changes • Authorized Representative forms for applications not submitted electronically • Requests for Approval Letters
	<p>To be used by FFM Navigators and Assistors to submit supporting documents for applications submitted electronically through the FFM</p>
	<p>To be used (by community health centers and other qualified entities that are authorized to complete presumptive eligibility applications) to submit:</p> <ul style="list-style-type: none"> • TEMP (presumptive eligibility) applications for pregnant women; • PE (presumptive eligibility) applications for children and adults; and, • Add a Pregnancy forms for pregnant women who are a part of an active MEDES case.

Contact Information	Purpose
FSD.MEESHOSPITALS@dss.mo.gov	To be used by hospitals to submit supporting documentation for MAGI applications submitted electronically through our web portal www.mydss.mo.gov . This process will be discontinued once supporting documents can be uploaded with the MEDES application.
	Authorized Representative forms should be submitted through this email address along with the supporting documentation that is submitted.
	When supporting documents are received via FSD.MEESHOSPITALS@dss.mo.gov the staff person opening the email will send a notice to the caseworker who has taken the electronic application from the queue telling that caseworker that the supporting documentation related to the electronic application has been received and filed in the Virtual File Room.
FSD.MEESCLINICS@dss.mo.gov	To be used by community health centers and clinics to submit supporting documentation for MAGI applications submitted electronically through our web portal www.mydss.mo.gov . This process will be discontinued once supporting documents can be uploaded with the MEDES application.
FSD.MEESLPHA@dss.mo.gov	To be used by local public health agencies to submit: <ul style="list-style-type: none"> • TEMP (presumptive eligibility) applications for pregnant women; • TEMP for Show-Me Healthy Babies; and, • Add a Pregnancy forms for pregnant women who are a part of an active MEDES case.
FSD.MEESUSERS@dss.mo.gov	To be used by partners to submit their concerns and complaints to the user assistance team.
	To be used by partners to submit policy and process questions to the MEDES User Assistance Team. (In other words this email address may be used to send FSD information and queries that in the past you may have sent to dwight.fine@dss.mo.gov .)
	MEDES users may direct concerns about inconsistent application of MAGI rules to FSD.MEESUSERS@dss.mo.gov . Dwight Fine and Carla Webb will monitor such complaints. Carla will determine cause and develop corrective actions if appropriate. Such reports will become a part of our CQI process.
	This email address may also be used by physicians' offices, Navigators, and other independent assistors to seek information related to the status of an application or information required to complete the processing of an application or the transfer of applications between the FFM and the Medicaid program.

Asking Us to Communicate With You Via Email. If you are an Authorized Representative and want FSD to communicate with you via email, add the following to the body of an email when submitting supporting documentation: “Please send all IM31A requests for supporting documentation via email to: (insert email address here.)”

All MAGI processing centers will be instructed to watch for this instruction and to note the email address in the application.

MEDES PLEDGE: If we didn’t do it right the first time, we will fix it.

Just send an email to FSD.MEDESUSERS@dss.mo.gov telling us that in your opinion we did not achieve the correct result when processing the case. This will become a part of our CQI process. One of the processing center managers will evaluate the case and determine whether a correction is warranted. Carla will use the results of these evaluations to discuss consistency with processing center staff.

Using Encryption.

The simple and secure way to use this access to our processing centers is to use the state’s encryption service and email your documents to the appropriate email address listed above. There are directions on the DSS web site about how to send us an encrypted email using the state’s service. The link is <http://dss.mo.gov/encrypt.htm>. You will need to follow the third set of instructions on the page.