



## MFSRC 2017 - DHS MAXIS Claims Updates

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- Introductions/Contact Numbers
- TOP Client Number and Procedures
- Claim Notes
- Claim Responsibility
- Billing in MAXIS
- Non-Collectible Claims
- Reports
- Collections Stats

- TOP Staff

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# TOP Client Numbers and Procedures

- TOP Phone Numbers for Clients:

Metro 651-431-3967 or

1-800-662-2694

- TOP Suspensions
- TOP Repayment Agreements
- RSDI Clients
- Missed Payments

# TOP Repayment Agreements

- Under \$500 – Within 12 months
- \$500 - \$1000 – Within 24 months
- Over \$1000 – Within 36 months
- Only one chance to set up a TOP RA

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MAXIS

FMMCGAM1

Claim Summary / Maintenance (CLSM)

Claim: 36761\_\_\_\_ From: 09 09 Thru: 05 10 Program: MF Established: 12 07 10
Status: 2 Active Date: 12 17 14 Rsn: 01 Initial S Discovery Date: 10 07 10
Wrkr: PWSMW34 MANUAL

Claim Case 210900 SMITH,WILLIAM H

Claim Review: \_\_ Dt: \_\_ \_\_ \_\_

Claim Type: F Fraud \_ Original Amt: \$ \_13895.00
Error Source: 02 Household Provided Incorrect + Adjustments: \$
Fraud Action: 04 Dt: 11 08 10 Ref: \_\_\_\_\_ - Collections: \$ 479.00
Legal Action: \_\_ Dt: \_\_ \_\_ \_\_ \_ Balance Due: \$ 13416.00

Table with columns: Sel, Name, Person, Case ID, St, Resp, Col, Let, Bill, Meth, Amount, TOP. Row 1: SMITH,WILLIAM H, 210900, 2, 01, 01, 21. Row 2: SMITH WILLIAM H, 500401234, 2, 01, 01, 01. Includes Demand, Recoup, Bill, Agency, Tax, Old FS Claim Nbr, Seq Nbr.

Mode: D Function: CCOL Case Nbr: \_\_\_\_\_ Month: 01 15 Command: \_\_\_\_\_

Claim Co: 90 Servicing Office: \_\_\_\_\_ Name: \_\_\_\_\_ User: PWSMW34

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
HELP EXIT NOTES BAL DEMND PREV NEXT EDIT OOPS TRBL INFO

- A claim note should be entered any time an action is taken on a claim
- Not needed for most payment postings
- Can be copied and pasted from CASE/NOTE

# Claim Responsibility

- Snap claims – All adults in HH over 18 are responsible
- MFIP claims – Only caregivers and minor caregivers are responsible
- Entering claims – Only first member defaults to responsible on CLRA
- Manually code others responsible
- Can send notices to all responsible people



- Start billing process on the person based CLRA
- Bills are printed and sent around the 22<sup>nd</sup> of each month
- 4 bills with no payment posted stops billing process
- Billing with multiple claims
- Make sure CCOL/CADR is updated for each person billed



09/25/14 15:01:41

MAXIS

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# Claim Repayment Agreement (CLRA)

Claim: 36650\_\_\_\_ From: 07 14 to 09 14 Program: FS Established: 09 25 14  
Status: 2 Active 09 25 14 Rsn: 01 Type: H Household Err: 01 HH No Info

Person SSN: 500401234 Name: SMITH WILLIAM H  
Case ID: \_\_\_\_\_ Name:

ORIGINATING CASE/PERSON  
Case Prog Status:

		Code	Date
Resp: 01	Coll: 01	Demand: 01	Bill: _____
		TOP Status :	Collect Agency: _____
			Legal Action: _____
			MCE Referral: _____
Certified Mail (Y/N)	Y		
Repayment Agreement Date:	____ _	Created:	
Repayment Method:	____	Recoup Begin Period:	
Monthly Amount:	\$ _____		
Lump Sum Amount:	\$ _____		
Community Service Hours:	_____	Changed: 09 25 14	Wrkr: PWSMW34



Function: COL Case Nbr: \_\_\_\_\_ Month: 07 14 Command: \_\_\_\_\_  
Claim Co: 90 Claim PW: PWSMW34 Name: SMITH, WILLIAM H User: PWSMW34

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---  
HELP EXIT NOTES EDIT OOPS TRBL INFO

MAXIS

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```

01 Start Billing Process
10 Billing Active Payment Recvd
11 First Bill No Payment
12 Second Bill No Payment
13 Third Bill No Payment
19 Max Billing Notice Sent

Code: __ More:+

```

Claim Repayment Agreement (CLRA)

m: 07 14 to 09 14 Program: FS Established: 09 25 14  
14 Rsn: 01 Type: H Household Err: 01 HH No Info

Name: SMITH WILLIAM H ORIGINATING CASE/PERSON  
Name: Case Prog Status:

and: 01 Bill: PF1 Collect Agency:                      
TOP Status : Legal Action:                      
MCE Referral:     

e:                Created:  
d:      Recoup Begin Period:  
t: \$             
t: \$             
s:            Changed: 09 25 14 Wrkr: PWSMW34

Function: CCOL Case Nbr:            Month: 12 14 Command:                 
Claim Co: 90 Claim PW: PWSMW34 Name: SMITH, WILLIAM H User: PWSMW34  
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---  
HELP EXIT NOTES EDIT OOPS TRBL INFO



MAXIS

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21 Do Not Send  
for Good Cause  
  
Code: \_\_ More: -

Claim Repayment Agreement (CLRA)

m: 07 14 to 09 14 Program: FS Established: 09 25 14  
14 Rsn: 01 Type: H Household Err: 01 HH No Info

Name: SMITH WILLIAM H ORIGINATING CASE/PERSON  
Name: Case Prog Status:

and: 01 Bill: \_\_ Tax: \_\_ Collect Agency: \_\_ Code Date  
TOP Status : Legal Action: \_\_ \_\_ \_\_ \_\_  
MCE Referral: \_\_

e: Created:  
d: Recoup Begin Period:  
t: \$  
t: \$  
s: Changed: 09 25 14 Wrkr: PWSMW34

Function: CCOL Case Nbr: \_\_\_\_\_ Month: 12 14 Command: \_\_\_\_\_  
Claim Co: 90 Claim PW: PWSMW34 Name: SMITH, WILLIAM H User: PWSMW34  
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---  
HELP EXIT NOTES EDIT OOPS TRBL INFO

# Non-Collectible Claims

- Only applies to cash overpayments.
- SNAP and MFIP food portion are always collectible.
- MFIP cash overpayment gets entered as non-collectible.
- Separate collectible MFIP food portion claim gets entered.
- Cannot modify non-collectible claim. Submit PF11.
- All claims get entered into MAXIS
- Use claim type N for non-collectible agency error claims, A for collectible agency error claims

- You can request to get printed reports through the SIR.

- See handout



Questions?



Thank you!

## Calendar Years 2013 thru 2017(thru September 26, 2017)

	2013	2014	2015	2016	2017 (9/26)
<b><u>Amount of Claims Established</u></b>					
SNAP (Includes MFIP Federal Food Portion)	\$7,853,752	\$7,782,498	\$8,648,754	\$6,892,974	\$4,672,078
MFIP Cash	\$2,406,608	\$2,192,281	\$2,696,682	\$1,994,056	\$1,460,666
All Other MAXIS Programs*	\$2,412,118	\$2,191,090	\$2,588,601	\$2,090,834	\$1,429,332
<b>Total</b>	<b>\$12,672,478</b>	<b>\$12,165,869</b>	<b>\$13,934,037</b>	<b>\$10,977,863</b>	<b>\$7,562,076</b>
<b><u>Fraud Claims Established</u></b>					
Fraud Claims Established	\$941,482	\$705,805	\$1,428,679	\$970,847	\$735,482
<b><u>Dollar Amount Collected</u></b>					
SNAP (Includes MFIP Federal Food Portion)	\$5,747,475	\$5,914,894	\$6,384,037	\$6,636,033	\$5,023,594
MFIP Cash	\$1,941,061	\$1,887,917	\$1,930,786	\$2,178,424	\$1,731,035
All Other MAXIS Programs*	\$1,118,275	\$1,059,809	\$1,078,498	\$967,771	\$742,344
<b>Total</b>	<b>\$8,806,811</b>	<b>\$8,862,621</b>	<b>\$9,393,320</b>	<b>\$9,782,227</b>	<b>\$7,496,973</b>
** TOP Recoveries	\$2,089,078	\$2,293,833	\$2,499,058	\$2,562,523	\$2,014,759

\* Other MAXIS programs include DWP, GA, MSA, RCA, WB, State MFIP, State SNAP

\*\* State staff administered TOP recoveries are also reflected  
In SNAP - MFIP Federal Food amounts.

Non Collectible Agency Error Claims Established By Programs ( from 1/1/2017 to 12/31/2017)

Program	Type	Total Amount	Fed Cash	State Cash	Fed Food	State Food
DWP	Non-Collect Agency Error	\$236.00	\$230.00	\$6.00		
GA	Non-Collect Agency Error	\$342.29				
MF	Non-Collect Agency Error	\$55,901.00	\$31,866.00	\$14,853.00	\$4,814.00	\$58.00
MSA	Non-Collect Agency Error	\$412.52				
RCA	Non-Collect Agency Error	\$187.00				
<b>Total</b>		<b>\$56,842.81</b>				

Non Collectible Agency Error Claims Established By Programs ( from 1/1/2016 to 12/31/2016)

Program	Type	Total Amount	Fed Cash	State Cash	Fed Food	State Food
GA	Non-Collect Agency Error	\$1,354.29				
MF	Non-Collect Agency Error	\$19,396.00	\$13,735.00	\$4,556.00		
MS	Non-Collect Agency Error	\$48.50		\$4,249.00		
<b>Total</b>		<b>\$20,798.79</b>				

State Issuance By Programs ( from 1/1/16 thru 12/31/16)

<b>Program</b>	<b>Amount</b>
Diversorary Work Program	\$11,196,916.14
Food Stamp	\$451,904,269.60
General Assistance	\$43,969,586.26
Minnesota Families Investment Program	\$295,091,738.48
Minnesota Supplemental Aid	\$37,996,348.57
Refugee Cash Assistance	\$1,228,454.04
Total	\$841,387,313.09

State Issuance By Programs ( from 1/1/16 thru 12/31/16)

<b>Program</b>	<b>Amount</b>
Diversorary Work Program	\$7,148,847.12
Food Stamp	\$330,600,925.89
General Assistance	\$32,282,457.18
Minnesota Families Investment Program	\$210,544,967.31
Minnesota Supplemental Aid	\$28,187,268.13
Refugee Cash Assistance	\$843,181.80
Total	\$609,607,647.43