

DEPARTMENT OF CHILDREN,
YOUTH, AND FAMILIES

MFSRC 2024 – MAXIS Claims

Scott Wotzka | Claims Specialist | Economic Assistance and Employment Supports Division
9/10/2024

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Topics

- Contact Info
- TOP repayment agreement process
- Coding the RA in MAXIS
- MAXIS bills
- CCOL/CADR
- Backing out a transaction VS adjustment
- How to do a backout
- MAXIS navigation tips

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DHS TOP/Claims Staff

- TOP Staff
SIR group e-mail : MAXIS-TOP@ctv.dhs.state.mn.us
- Joann Parten – TOP
Phone Number: 651-539-7824
SIR email: Joann.Parten@state.mn.us
- Scott Wotzka – MAXIS Claims/TOP
Phone Number: 651-431-3955
SIR email: Scott.Wotzka@state.mn.us

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TOP Client Numbers and Client Email

- TOP Phone Numbers for Clients:
Metro 651-431-3967 or
1-800-662-2694
- TOP Client Email
dhs.top.qa@state.mn.us
- TOP page on DHS Website
<https://mn.gov/dhs/top>

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TOP Repayment Agreement Process

- Client must be set up a TOP RA with TOP staff
- The RA will be mailed or emailed to the client
- They must sign the RA and send it to the county
- County needs to email DCYF TOP when RA is received
- The first payment due date is on the RA
- County must start billing the client
- TOP will suspend client and monitor payments

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TOP Repayment Agreement

- County must track TOP repayment agreements
- Clients must make monthly payments
- Client payments must be posted to the food portion
- MFIP claims – Must use reason 03 – MFIP options on CRAA
- TOP status will show 08, EXL RSN E in a TOP RA
- DCYF TOP monitors to ensure payments are made and posted to food monthly

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TOP Repayment Agreement

- If a client has a repayment agreement with county:
 - If the RA is within TOP guidelines, we can accept it
 - The client must still contact DCYF TOP
 - We still need to send them a TOP RA to sign and send to you
 - You still need to let us know when you receive it

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TOP RA Guidelines

- 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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Coding the RA in MAXIS

- Must code a TOP or county repayment agreement on person-based CLRA
- Needed for delinquent date determination for TOP
- If you are billing from your own system MAXIS still needs to be coded.

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09/27/19 13:22:16          MAXIS          FMMSGAM1
                        Claim Summary / Maintenance (CLSM)

Claim: 40741_____ From: 02 15 Thru: 08 15 Program: FS   Established: 09 02 15
Status: 2 Active Date: 06 21 17 Rsn: 05 System ac Discovery Date: 09 02 15
                                                Wrkr: X162C60  MANUAL
Claim Case  286796  YANG,ROSANA          Claim Review:  ___ Dt:  ___ ___
GRH Claim Vndr Nbr: _____ GRH Claim Resp:  ___
Claim Type: A Agency Error              _ Original Amt: $ 4162.00
Error Source: 52 Agency Incorrectly Computed + Adjustments: $
Fraud Action:  ___ Dt:  ___ ___ Ref:  ___ - Collections: $ 1719.00
Legal Action:  ___ Dt:  ___ ___ - Balance Due: $ 2443.00
Delinquent Dt: 10 02 15

Sel Name/Vndr  SSN/Vndr  Case ID St Resp Col Let Bill Meth Amount TOP
a  YANG ROSANA  286796  2 01 01  21
  YANG ROSANA 0 333111761  2 01 01 18  03
  3 People 1 Case(s) Demand: Y Recoup: Y Bill: Agency: Tax:
  MORE + AVAIL 01d FS claim Nbr: _____ Seq Nbr:  _

Mode: D Function: CCOL Case Nbr: _____ Month: 09 19 Command: _____
Claim Co: 90 Servicing Office: Name: YANG,ROSANA 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
PRESS <PF3> TO LEAVE SCREEN

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09/27/19 13:48:15          MAXIS          FMMSGAM1
                        Claim Repayment Agreement (CLRA)

Claim: 40741_____ From: 02 15 to 08 15 Program: FS   Established: 09 02 15
Status: 2 Active 06 21 17 Rsn: 05 Type: A Agency Error Err: 52 Agency: Issue

Person SSN: _____ Name: _____ ORIGINATING CASE/PERSON
Case ID: 286796__ Name: YANG,ROSANA ← Case Prog Status: -OTHER
GRH Vndr ID: _____ Name: _____ GRH Claim Resp:
                                                Code Date
Resp: 01 Coll: 01 Demand:  ___ Bill:  ___ Tax:  ___ Collect Agency:  ___ ___ ___
TOP Status : Legal Action:  ___ ___ ___
Certified Mail (Y/N) _ TOP ADDR DT: MCE Referral:  ___
Repayment Agreement Date:  ___ ___ ___ Created: MANUAL
Repayment Method: 21 Recoup % Recoup Begin Period: 10 01 15
Monthly Amount: $ _____
Lump Sum Amount: $ _____
Community Service Hours: _____ Changed: 09 04 19 Wrkr: PWSMw34

Function: CCOL Case Nbr: _____ Month: 09 19 Command: _____
Claim Co: 90 Claim PW: X162C60 Name: YANG,ROSANA User: PWSMw34
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10---PF11---PF12---
HELP EXIT NOTES EDIT OOPS TRBL INFO

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09/27/19 13:50:33          MAXIS          FMMSGAM1
                        Claim Repayment Agreement (CLRA)

Claim: 40741_____ From: 02 15 to 08 15 Program: FS   Established: 09 02 15
Status: 2 Active 06 21 17 Rsn: 05 Type: A Agency Error Err: 52 Agency: Issue

Person SSN: 333111761 Name: YANG ROSANA 0 ← ORIGINATING CASE/PERSON
Case ID: _____ Name: _____ Case Prog Status:
GRH Vndr ID: _____ Name: _____ GRH Claim Resp:
                                                Code Date
Resp: 01 Coll: 01 Demand: 18 Bill:  ___ Tax:  ___ Collect Agency:  ___ ___ ___
TOP Status : 03 Legal Action:  ___ ___ ___
Certified Mail (Y/N) _ TOP ADDR DT: 02 13 18 MCE Referral:  ___
Repayment Agreement Date:  ___ ___ ___ Created:
Repayment Method: Recoup Begin Period:
Monthly Amount: $ _____
Lump Sum Amount: $ _____
Community Service Hours: _____ Changed: 09 04 19 Wrkr: PWSMw34

Function: CCOL Case Nbr: _____ Month: 09 19 Command: _____
Claim Co: 90 Claim PW: X162C60 Name: YANG,ROSANA User: PWSMw34
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10---PF11---PF12---
HELP EXIT NOTES EDIT OOPS TRBL INFO

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09/30/20 16:00:23          MAXIS          FMMMAAM1
                          Claims Person Address (CADR)

Member SSN : 833 01 4191 or PMI Nbr: _____

Name : TUSA,VANITA

Gender : F   Date Of Birth : 05/15/89

TRANSMIT FOR ADDR, PF3 TO EXIT OR PF10 FOR NEXT PERSON

Mode:  Function: CCOL Case Nbr: _____ Month: 09 20 Command: _____
Co: 90 PW: PWSMW34 SW: _____ Upd Date: _____ User: PWSMW34
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
HELP PMI EXIT                                OOPS TRBL INFO

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09/30/20 16:01:14          MAXIS          FMBDGAM7
                          Address (ADDR)
                          1 Of 1

Ref Last First M * Address Eff Date: 09 23 15
* Residence Address FOR TUSA,VANITA
* Street: RESDC-ADDR1
*
* City: ALBERT LEA St: MN
* Zip: 56007__ 3206 Resi Co: 24 Ver: OT
* Homeless (Y/N): N Indian Reservation (Y/N): N
* Living Situation: _____ Name of Reservation: _____
* Mailing Address
* Street: PROD 1516811
*
* City: _____
* St: _____ Zip: _____
* Phone One: (____) _____ Type: ____
* Phone Two: (____) _____ Type: ____
* Phone Three: (____) _____ Type: ____

Mode: D Function: CCOL Case Nbr: _____ Month: 09 20 Command: _____
Sv: 90 PW: PWSMW34 SW: _____ Updated: 09 25 20 User: PWSMW34
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
HELP PMI EXIT CNOTE                          PREV NEXT EDIT OOPS TRBL INFO

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09/30/20 16:02:50          MAXIS          FMMMAAM1
                          Claims Person Address (CADR)

Member SSN : 833 01 4271 or PMI Nbr: _____

Name :

Gender :      Date Of Birth :

Mode:  Function: CCOL Case Nbr: _____ Month: 09 20 Command: _____
Co: 90 PW: PWSMW34 SW: _____ Upd Date: _____ User: PWSMW34
Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12---
HELP PMI EXIT                                OOPS TRBL INFO

```

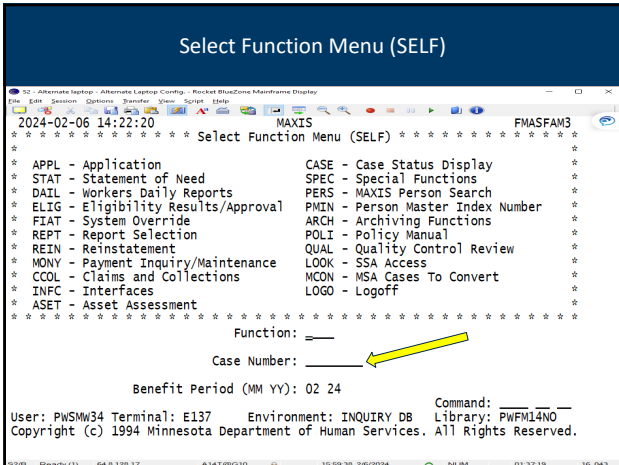
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MAXIS Quirks and Navigational Tips

- Some common messages are:
 - “Read Only” message
 - CCOL/CDEM “no notices” messages
- This can happen in CRAA, CLSM, CDEM, JGMT...
- Return to SELF – remove case number

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Select Function Menu (SELF)



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Who has Questions?

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 DEPARTMENT OF CHILDREN,
YOUTH, AND FAMILIES

Thank You!

Scott Wotzka – Claims/TOP
Phone Number: 651-431-3955
Email: Scott.Wotzka@state.mn.us
