# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #2-2016CLAIMSDECEMBER 1, 201603 - CLAIMSChange #2-2016Ecember 1, 2016

### I. THIS CHAPTER PROVIDES INSTRUCTIONS AND INFORMATION FOR:

- The Claims Menu options;
- The Claims Menu function keys;
- The Claim Detail field descriptions;
- The Claim Detail function keys;
- Displaying and updating a claim;
- Deleting a claim (State Level access only);
- Reactivating a claim
- The Debtor Detail field descriptions;
- The Debtor Detail function keys;
- Adding a debtor to a claim;
- The Debtor Summary field descriptions;
- The Debtor Summary function keys;
- Displaying a list of debtors and view debtor details;
- Deleting a debtor (State Level access only);
- The TOP Process Overview;
- Setting or Updating a TOP Intercept Indicator flag;
- Setting or Updating a TOP Appeal flag;
- The DOR Process Overview;
- The Maintain Client field description;
- The Maintain Client function keys;
- Adding a client;
- Updating a client;
- The Repayment Approach field descriptions for FNS and Non FNS;

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- The Repayment Approach function keys for FNS and Non FNS;
- Adding Repayment Approach information for FNS and Non FNS;
- Updating Repayment Approach data for FNS and Non FNS;
- The EPICS History by Casehead field descriptions;
- The EPICS History by Casehead function keys;
- Viewing a list of referrals by individual ID for Casehead;
- The EPICS History by Debtor field descriptions;
- The EPICS History by Debtor function keys;
- Viewing a list of referrals by individual ID for Debtor;
- Entering field details using F4 key;
- Searching for an individual ID.

### II. CLAIMS MENU

During the investigation of a referral, the investigator may determine that a client owes a substantiated debt. Once the investigation on a referral is complete and proved to warrant a *claim* (an established overpayment subject to collection process), it is necessary for specific information to be recorded in EPICS on the claim before collections is initiated. The claim is then used to track the debtor(s) and all payments made by the debtor(s) to repay the overpayment.

The CLAIMS MENU contains four options from which to choose:

Cla	aims Menu Option	Description		
1.	EPICS History by Case Head	To view the history of referrals for a case head by individual ID		
2.	EPICS History by Debtor	To view the history of referrals for a debtor by individual ID		
3.	Claim Detail	To record required information about the claim in preparation for collections. It contains the following screens: Claim Detail, Debtor Summary, Debtor Detail, and Repayment Approach Summary.		
4. ID	Repayment Approach Referral	To display debtors on Claim List		

### **Claim Menu Function Keys**

Function Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu

### III. CLAIM DETAIL

When you create a new referral in EPICS, the "shell" of a claim is also created for the referral. The initial and required steps for recording claim information (e.g. claim type, Overpayment Payment/Over Issuance (OP/OI) periods, current balance and overpayment amount) are to update the *CLAIM DETAIL* screen.

### A. Claim Detail Field Descriptions

Field	Description	Required	System Generated	Optional
Referral ID	10 digit number generated by the system	X		
Referral Type	Code that identifies the type of referral		X	
Referral Status	2 character code for the status of a referral		Х	
Name	Last name, suffix, first name, and middle initial of the case head payee		X	
Individual ID	Unique ID associated with the case head payee supplied by CNDS		X	
SSN	Case head payee's social security number		X	
DOB	Case head payee's date of birth		X	
Sex	Case head payee's sex		Х	
County	3 digit number from 000-100 representing the issuing county in which the overpayment took place		X	
Program	Code that identifies the benefits program to which the referral applies		X	

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Field	Description	Required	System	Optional
Case ID	Program Case ID associated with referral		X	
County Case #	County case number associated with the referral		X	
Referral Date	Date the referral was received		Х	
Frst Mth Benefit	FNS-Positive Front End Referrals Only- Amount of first full month's benefit	X		
Investigator ID	ID of the investigator assigned to the referral		X	
DA Accept Date	Date case accepted by District Attorney's Office when Claim Type is "P"	X		
ADH Hearing Date	Date after the ADH is held but before the claim is established. Required when "IPV" and substantiation method is "H"	X		
ADH Past Due	Enter "Y" or "N" (Yes or No) when the ADH Hearing Date is entered. Required when "IPV" and substantiation method is "H"	X		
Current Balance	Up to 9 characters; Current amount due on the claim	X		

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Field	Description	Required	System Concrated	Optional
Service code	2 character code; Required when the program is Medicaid goes in CO status, indicating the type of medical services provided during the overpayment period	X		
Claim Type	Up to 3 characters; Code that specifies the type of overpayment claim	Х		
Agency Error Type	1 character; Required if the claim type is AE, indicating if the error is State or County	Х		
Civil Judgement Date	Date indicating if the claim was reduced to a civil judgement, providing an unlimited time in which the county can attempt to seek collection			X
Criminal Judgement Date	Date indicating if the claim was reduced to a criminal judgement, providing an unlimited time in which the county can attempt to seek collection	V		X
OP/OI Begin Date (from)	10 character date (MM/DD/CCYY) of the start date for the overpayment	X		
OP/OI End Date (To)	10 character date (MM/DD/CCYY) of the end date for the overpayment	Х		

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Field	Description	Required	System Generated	Optional
MED PROFILE IND	This 1 character field indicates if a Medicaid Profile is needed.			Х
Overpayment amount	Up to 9 characters; Amount due from the overpayment	Х		
Substantiation Method	1 character code; Required if the claim type is set to IPV, indicating the method by which the claim is substantiated	X		
Compromised Amount	Up to 9 characters; Used when the overpayment amount is different from what was originally entered (FNS Only). This value must be entered from the Payments screen.			X
Delete Reason	1 character code required when a claim is being deleted – State Office Only	Х		
Establishment Date	10 character date in which the claim goes into CO status, by entering the Claim Type as AE, SIE, IHE, or IPV		X	
U/P Creation Date	10 character date in which the claim type was entered as U or P		X	

### B. Claim Detail Function Keys

Кеу	Description
F1	To access EPICS on-line help
F2	To clear the screen
F3	To exit and return to the Main Menu
F4	To display a list
F5	To display debtor information
F9	To update the claim information
F10	To delete a claim (State Level only)
F12	To cancel or return to the previous screen

- 1. To Display and Update a Claim
  - a. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
  - b. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.

FR29NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM07/03/2007FRD0290CLAIM DETAIL08:26:16
REFERRAL ID:+ REFERRAL TYPE: REFERRAL STATUS:
INDIVIDUAL ID: SSN: DOB: SEX:
COUNTY:         PROGRAM:         CASE ID:         COUNTY CASE #:           REFERRAL DATE:         FRST MTH BENEFIT:
ADH HEARING DATE: ADH PAST DUE: CURRENT BALANCE:0.00 SERVICE CODE: + CLAIM TYPE: + AGENCY ERROR TYPE: CIVIL JUDGEMENT DATE: CRIMINAL JUDGEMENT DATE:
OP/OI PERIODS:         FROM         TO         MED PROFILE IND             MED PROFILE IND          MED PROFILE IND              MED PROFILE IND
OVERPAYMENT AMOUNT:        MED PROFILE IND _         OVERPAYMENT AMOUNT:        IPV SUB METHOD: +         COMPROMISE AMOUNT:        DELETE REASON: +         ESTABLISHMENT DATE:       U/P CREATION DATE:       F3=EXIT         F1=HELP       F2=CLEAR       F3=EXIT       F4=LIST
F6=REF NOTEPAD F9=UPDATE F10=DELETE F11=REACTIVATE F12=CANCEL

- **NOTE**: If you do not know the code or value for a field, you can use the F4 function key, which displays a list of codes or values for selection. This field attribute is only available for those fields that contain a + (plus sign) to the right of the field. For additional information about claim codes, see Appendix B.
- c. In the **REFERRAL ID** field, key the referral ID number for the case head payee and press **Enter**. The referral information displays.

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d. For Food and Nutrition Services and Front End Referrals (F) only, in the FRST MTH BENEFIT (First Month Benefit) field, key the amount of the first full month's benefit that the Food and Nutrition Services Unit has been approved. First month benefits apply only to Front End Referrals. The "First Month's Benefit" field on the Claims Detail screen will not allow an amount greater than \$500.00 to be entered. This field is allowed for Front End Referrals (F) only. If the amount entered is greater than \$500.00, the system will display an error message, "FIRST MONTH BENEFIT CANNOT EXCEED \$500".

**NOTE:** Enter the amount when establishing a claim for a front end referral or closing a referral with the closure code "FO". You must enter the first month benefits before closing the referral with the code "FO" if a claim will not be established.

Enter the first month's benefits on the Claim Detail screen and press F9=UPDATE. From the Referral Detail 1 screen, close the referral with the Reason Closed code "FO".

- e. For Food and Nutrition Services only, in the DA ACCEPT DATE (accepted by the district attorney's office) field, enter the date the DA accepted the case when the claim type is changed to "P" (UNDETERMINED PENDING CRIMINAL COURT).
- f. For Food and Nutrition Services only, the ADH HEARING DATE (MM/DD/CCYY) field:
  - 1. Must be keyed if the Claim Type is 'IPV' **and** the Substantiation Method is 'H'. A 'Y' or 'N' must also be entered in the ADH PAST DUE field.
  - 2. May be keyed when the Claim Type is 'AE', 'IHE', 'U', or 'US'.
  - 3. Is not allowed if the Claim Type is 'P', 'S', or 'IPV' with a Substantiation Method other than 'H'.
- g. For *Medicaid only*, in the SERVICE CODE field, key the service code. You may use the equal (=) key and F4 key to obtain the list of codes. From the list of codes, enter an 'S' under the SELECT column by the appropriate code. Press ENTER. The code selected is brought forward to the SERVICE CODE field.

Code	Value
01	Inpatient Hospital (Claim Types S, X)
02	Outpatient Hospital (Claim Types M, W)
03	Dental (Claim Type K)
04	Drugs (Claim Type D)
05	Physician (Claim Types J, L, O, P)
06	Home Health/Hospice/PCS (Claim Type Q)
09	Medicare Part A or Part B Premium
11	Nursing Home/PCS In ACH (Claim Type T)
67	NC Health Choice Premium
71	Medicaid Transportation

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- **NOTE:** SERVICE CODE 67 is **only** allowed for Program Codes MICA, MICJ, MICL, or MICS only. If another program classification is keyed, the following error message displays: 'FRDC0S SERVICE CODE 67 IS NOT ALLOWED FOR THIS PROGRAM CODE'.
- h. In the **CLAIM TYPE** field, key the claim type.

You may use the equal (=) key and F4 key to obtain the list of codes. From the list of codes, enter an 'S' under the SELECT column by the appropriate code. Press ENTER. The code selected is brought forward to the **CLAIM TYPE** field.

Code	Value
AE	Agency Error
IHE	Inadvertent Household Error/Client Error
IPV	Intentional Program Violation/Fraud
Ρ	Undetermined Pending Criminal Court
S	Suspected Claim
SIE	State Issuance Error (Food and Nutrition
	Services Only)
U	Undetermined Pending ADH
US	Unsubstantiated

(1) **Medicaid** – Do not enter Agency Error as a claim type. The system generates an error message if attempted.

#### (2) **Food and Nutrition Services and Workfirst**

If you select **AGENCY ERROR**, it is required that you enter the agency error type in the **AGENCY ERROR TYPE** field.

(a) Food and Nutrition Services – Agency Error Code:

The county can enter C (County) and S (State).

(b) Work First – Agency Error Code

The county can enter C (County).

State Staff can only enter S (State).

County level personnel should contact the DSS office for the S code type to be entered.

**NOTE:** If the Program Type is AFDC or TANF with a Claim Type 'AE' (Agency Error) and Agency Error Type code 'C' (CROP), after pressing the F9 UPDATE function key twice, EPICS automatically reduces the balance to zero and the claim status changes to 'CL' (Closed).

- i. In the **OP/OI PERIODS** fields, enter the OP/OI beginning and ending dates using the 10-character format MM/DD/YYYY.
- **NOTE**: You can enter up to four OP/OI periods.

Program	OP / OI Criteria
AFDC	Beginning and end dates must be before January 1997.
TANF	Due to TANF program funding methods, claims must be divided into 2 periods: January 1997 through September 1997 and October 1997 through the present. If the beginning date period falls within the January 1997 though September 1997 time frame, then the ending date must also fall within that range. This enables EPICS to interface with the accounting systems based on the funding for each.
MICK, MICJ	Beginning and ending dates for NCHC must be on or after 10/1/98.

If you attempt to enter an overpayment period that is not included in these funding boundaries, a message displays when you press **F9** to update. The system guides you to the correct periods within the funding boundaries from one claim and creates a new referral for the other overpayment periods outside the first boundary.

- j. The **MEDICAID PROFILE INDICATOR** is used to request a follow-up Medicaid Recipient Profile 12 months after the TO Date of the OP/OI period. This field is an optional field and may be entered for all Medicaid claims except for those programs listed below. The valid values for this field are 'Y' (Yes), 'N' (No), or 'space'. If a 'Y' is entered, the claim appears on the Medicaid Profile Follow-up Case Management Report 12 months after the TO Date.
  - (1) The program code cannot be AFDC, FNS, TANF, MICJ, MICL, MICS, MQBB, or MQBE. If the indicator of 'Y' is entered with one of these program codes, the following error message is displayed: 'MEDICAID PROFILE INDICATOR NOT ALLOWED, INVALID PRORAM CODE'.
  - (2) The claim type must be IHE or IPV. If the indicator is entered and the claim type is not IHE or IPV, the following error message is displayed: 'MEDICAID PROFILE INDICATOR NOT ALLOWED, INVALID CLAIM TYPE'.
  - (3) A 'Y' is allowed for all OP/OI periods displayed on the claim if the calculated date has not expired and meets the above criteria. For example, the current date is 3/03/03. The TO Date of the OP/OI period is 03/31/02. The calculated date is 3/2003. The claim displays on the Medicaid Profile Follow-up Case Management Report created the last work night in March 2003.

(4)	The ind expired has ex 'THE C	dicator is not allowed if the calculated date has d. If the indicator is keyed and the calculated date pired, the following error message is displayed: DP IS MORE THAN 12 MONTHS IN THE PAST
	ORDE curren 2/28/20 expired	R A MEDICAID PROFILE NOW '. For example, the t date is 3/3/03. The TO Date of the OP/OI period is 002. The calculated date is 2/28/2003 which has d.
(5)	The ind is disp OP/OI 'MEDIO OP/OI	dicator is not allowed when no overpayment period layed on the claim. If the indicator is keyed with no displayed, the following error message is displayed: CAID PROFILE INDICATOR NOT ALLOWED, NO DISPLAYED'.
(6)	The in when t	dicator may be changed from 'Y' or 'N' or vice versa he calculated date has not expired.
	(a)	The OP/OI period is 1/1/2002 – 06/30/2002. The current date is 3/3/03. The calculated date is 06/2003. The change from 'Y' to 'N' is allowed.
	(b)	The OP/OI period is $1/1/2002 - 06/30/2002$ . The current date is $3/3/03$ . The calculated date is $06/2003$ . The change from 'N' to 'Y' is allowed.
(7)	The Mathe OF date is the new 'Y' if a date ha	edicaid Profile Indicator is reset from 'Y' to space if P/OI TO Date is changed. The original calculated recalculated based on the new TO Date keyed. If w calculated date has not expired, you may enter a follow-up profile is needed. If the new calculated as expired, you may not enter a 'Y'.
	(a)	The original TO Date was 5/31/02. The calculated date was 05/2003. A 'Y' had previously been keyed for the indicator. The TO Date is changed to 3/31/02. The indicator is reset to space. The new calculated date is 3/2003. The current date is 3/3/03. A 'Y' may be entered. The calculated date has not expired.
	(b)	The original TO Date was 5/31/02. The calculated date was 05/2003. A 'Y' had previously been keyed for the indicator. The TO Date is changed to 02/28/03. The indicator is reset to space. The new calculated date is 2/2003. The current date is 3/3/03. A 'Y' may not be entered. The calculated date has expired.

k. In the **OVERPAYMENT AMOUNT** field, key the overpayment amount. The CURRENT BALANCE field is updated by EPICS with the amount keyed. (1) If the **OVERPAYMENT AMOUNT** must be changed after the claim was initially established, enter the corrected or revised amount in the **OVERPAYMENT AMOUNT** field.

> Press F9 to update. EPICS populates the **CURRENT BALANCE** field with the increase or decreased amount.

> The appropriate AJCI or AJCD entry is displayed on the payment history screens.

(2) The **OVERPAYMENT AMOUNT** cannot be decreased to zero. If a zero amount is entered the following error message is displayed:

### **OVERPAYMENT AMOUNT MUST BE GREATER THAN** \$0.00'

(3) If payments or adjustments have been posted and the difference between the existing CURRENT BALANCE and the initial overpayment is greater than the decrease to the overpayment amount, EPICS does not allow the change to the OVERPAYMENT AMOUNT field. The following error message is displayed:

#### **OVERPAYMT AMT LESS THAN COLLECTIONS. PAYMT CORRECTIONS MAY BE NECESSARY.**

(a) If the correct Overpayment Amount has been overcollected, reverse out the total amount of all payments that were collected in error by completing a payment correction.

### NOTE: EPICS DOES NOT ALLOW PAYMENT CORRECTIONS FOR AFDC CLAIMS OUTSIDE THE CURRENT MONTH.

- (b) Payments collected via NC Debt Setoff (DOR) and the Treasury Offset Program (TOP) cannot be reversed nor refunded by county staff.
  - 1) If an AFDC/Work First claim has been overcollected through DOR, contact the Economic and Family Services staff at

919-527-6300 before taking further action.

- If a Food and Nutrition Services claim has been over-collected through either DOR or TOP, contact the Food and Nutrition Services & Energy Programs staff at 919-527-6300 before taking further action.
- If a Medicaid claim has been overcollected via DOR, contact DMA Program Integrity Staff at 919-814-0000.

- (c) Once the over-collected payments have been reversed out, enter the correct **OVERPAYMENT AMOUNT**.
- (d) Re-key the payments that were reversed and refund any over-collections. Any resulting over-collection is reflected on the FRD104 Refund Report.

**EXAMPLE:** On 10/01/2015, a claim was showing an overpayment amount of \$400.00 and a current balance of \$200.00. A cash payment of \$200.00 had been posted in EPICS on 09/2015. The correct amount of the overpayment/overissuance is \$150.00. This is a decrease of \$250.00. Since the decrease to the overpayment amount is more than the difference between the existing overpayment amount and the existing current balance, once the F9 key is pressed the following error message is displayed:

### **OVERPAYMT AMT LESS THAN COLLECTIONS. PAYMT CORRECTIONS MAY BE NECESSARY.**

Reverse out the entire \$200.00 payment by completing a payment correction.

Key the correct amount of \$150.00 in the **OVERPAYMENT AMOUNT** field. This corrects the **CURRENT BALANCE** to \$150.00.

Re-key the payment of \$200.00 that was reversed out. This results in the claim being paid in full. The claim was over-collected and a refund of \$50.00 must be issued to the debtor.

- **NOTE**: The overpayment field can never be less than the current balance field. If this occurs, you must adjust the overpayment field prior to adjusting the current balance field.
- I. If the **CLAIM TYPE** is IPV, the **SUBSTANTIATION METHOD** is required. You may use the equal (=) key and F4 key to obtain the list of codes. From the list of codes, enter an 'S' under the SELECT column by the appropriate code. Press ENTER. The code selected is brought forward to the **SUBSTANTIATION METHOD** field.

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Code	Value
А	Court of Appeals
С	DQ Consent Agreement
D	District Court Action
Н	Administrative Disqualification Hearing (ADH)
S	Superior Court Action
W	Waiver of ADH

- m. If applicable, enter data in the optional fields.
- n. Press the **F9** function key.

When establishing a FS claim, the DATE OF DISCOVERY must be entered on the REFERRAL DETAIL 1 SCREEN.

If the DATE OF DISCOVERY field on the REFERRAL DETAIL 1 SCREEN is blank and the PROGRAM TYPE IS FS (Food and Nutrition Services), EPICS will display the message "DATE OF DISCOVERY REQUIRED ON REFERRAL DETAIL 1 SCREEN".

If the DATE OF DISCOVERY field is blank and the message "DATE OF DISCOVERY, REQUIRED ON REFERRAL DETAIL 1 SCREEN is displayed, you must return to the REFERRAL DETAIL 1 SCREEN AND ENTER A VALID DATE OF DISCOVERY.

**NOTE:** Validation is initiated against the benefit distribution/eligibility on the EIS Check History, EIS

Individual database and the FSIS Issuance System based on the program code. If the overpayment periods can not be validated against these systems for reasons other than OP / OI criteria described, EPICS prompts you to press F9 again to override these edits or press Enter to modify the OP / OI dates, as necessary. If the dates are correct and you choose to override the dates, you **must have the proper supporting documentation.** The **ESTABLISHMENT DATE** field is system generated with today's date if the claim type entered is AE, SIE, IHE, or IPV. Once the information is validated, the referral status is updated to CO (collections).

#### Exception:

If the Claim Type is US or S it maintains the status of the referral status AND the Establishment date is not populated. If the Claim Type is U or P, it maintains the status of the referral and the U/P Creation date is populated; the Establishment Date is not populated at this time. Once the Claim Type is updated to IHE, IPV, AE, or SIE the status will change to "CO" and the

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			Est	tablishment date will be	populated.	
	0.	The <b>C</b> amou	CURRE	NT BALANCE field is p red in the OVERPAYM	oopulated by EPICS with the ENT AMOUNT field.	е
		(1)	A clai incorr 2004, previo neede	m balance may require rect entry was made to , or when an invalid clai bus adjustments. When ed, fax a request on co	an adjustment when an the balance prior to Januar im cannot be deleted due to n such adjustments are unty letterhead to the	y 1, ว
		appro	priate S	State DMA or DSS staff	f.	
			For N Integr	ledicaid claims, fax req rity staff at 919-814-003	uests to DMA Program 36.	
			For F FNSE	ood and Nutrition Servi P Program Integrity sta	ices claims, fax requests to aff at 919-334-1265.	
			For A Econ	FDC and Work First cla omic and Family Servic	aims, fax requests to the ses section at 919-334-1265	5.
			Incluc	de on the fax request:		
			a. b. c. d. e. f.	Casehead Name Referral ID Debtor Individual ID Reason for Adjustme Correct Balance Amo Signature of Supervis	ent ount sor	
		(2)	lf an <i>i</i> becau debto adjus	AFDC or Work First cla use the debtor cannot b or is deceased, the bala ted to zero.	im cannot be collected be located or because the ince of the claim must be	
			(a)	Do not terminate the a written request on Economic and Family	AFDC/Work First claim. Se county letterhead to the y Services section at:	ənd
				820 S. Boylan Ave. 2420 Mail Service Ce Raleigh, NC 27699-2	enter 2420	
			(b)	Include on the reque	st:	
				Casehead Name Referral ID Program Case ID Overpayment Period Current Claim Baland Reason For Claim W	ce /rite Off	

(c) These requests are sent to the State Controller's Office or the Attorney General's office for approval

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			to write off the claims. Upon approval, State DSS staff adjusts the claim balance to zero to close the claim.
	(3)	lf a M the de balan	ledicaid claim cannot be collected due to the death of ebtor and no collection from the estate is possible, the ce of the claim must be adjusted to zero.
		(a)	Do not terminate the Medicaid claim. Document the date of death and the reason the claim cannot be collected in the ALLEGATIONS field of the Referral Detail 2 screen.
		(b)	Send or fax a request on county letterhead to DMA Program Integrity staff to close the claim.
			Fax number: 919-814-0036 Mailing Address: DMA/Quality Assurance-18 MSC# 2501 Raleigh, NC 27699-2501
		(c)	Include on the request:
			Casehead Name Referral ID Program Case ID Reason Claim Uncollectible
		(d)	Upon approval of the request, State DMA PI staff adjusts the claim balance to zero to close the claim.
	(4)	lf a Fo due to	ood and Nutrition Services claim cannot be collected of the death of the only debtor, terminate the claim.
p.	To sa key.	ve and	update the <b>CLAIM DETAIL</b> , press the F9 function
ΝΟΤ	E: If the mes PRE only is er	e progra sage, ' SSS <e the Me ntered.</e 	am type is SAAC, SAAQ, SADC, or SADQ, a warning IS THIS SA MEDICAID? PRESS F9 TO UPDATE, NTER> TO REKEY', will be displayed to ensure that edicaid portion of the Special Assistance overpayment
q.	To ex The M	it and re IAIN MI	eturn to the <b>MAIN MENU,</b> press the <b>F3</b> function key. ENU displays.
	or		
	To co functi	ontinue on key	with debtor detail information, press the <b>F5</b> . The DEBTOR DETAIL screen displays.

2. To Delete a Claim (State Level access only)

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	A claim exists t an inva only ca	n is never completely deleted from EPICS. However, a function to disassociate the claim to the referral, performing a <i>soft delete</i> . If alid claim is entered in error, employees with <b>State Level access</b> an perform a soft delete.
	Prior t payme back t Lastly the cla	to soft deleting a claim, you should enter adjustments for ents received on the claim in order for the funds to be returned to the debtor(s); similar to the procedures for making a refund. all debtors assigned to the claim must be soft deleted from aim.
	NOTE	: Payments against AFDC claims can not be adjusted.
	After ye databa to the o	ou perform the soft delete for a claim, it can be retrieved from the ase only for specific reporting functions. A deletion date is assigned claim, but does not display on the screen.
	County a claim	y level personnel should contact the DSS/DMA office for deletion of n.
	a.	From the <b>MAIN MENU</b> , key the number 3 in the <b>ENTER OPTION</b> field and press Enter. The CLAIMS MENU displays.
	b.	From the <b>CLAIMS MENU</b> , key the number 3 in the <b>ENTER</b> <b>OPTION</b> field and press <b>Enter</b> . The CLAIM DETAIL screen displays.
	C.	In the <b>REFERRAL ID</b> field, key the referral ID and press <b>Enter</b> . The claim information displays.
	d.	Press the <b>F10</b> function key.
	e.	In the <b>DELETE REASON CODE</b> field, key the reason code that explains why the claim is being deleted.
	f.	To delete the claim, press the <b>F10</b> function key again. The claim deletes and a deletion date is assigned to the claim, but does not display on the screen.
	g.	To exit and return to the <b>MAIN MENU</b> , press the <b>F3</b> function key. The MAIN MENU displays.
3.	To Rea	activate a Claim
	Claims	s that are in TE (Terminated) Status may be reactivated.
	NOTE:	The Claim Type must be IHE (Inadvertent Household Error/Client Error) or IPV (Intentional Program Violation/Fraud).
	a.	From the <b>MAIN MENU</b> , key the number 3, Claims Menu, in the <b>ENTER OPTION</b> field. The CLAIMS MENU displays.

b. From the **CLAIMS MENU**, key the number 3, Claim Detail, in the **ENTER OPTION**, field. The **CLAIM DETAIL** screen displays.

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С.	Key the <b>REFERRAL ID</b> number and terminated referral displays.	I press <b>ENTER</b> . The		
d.	Press the F11 key. The referral is re information as at the time of termina fields are unprotected and you may	edisplayed with the same tion; however, the following update.		
	Claim Type Agency Error Type OP/OI Periods Overpayment Amount Substantiation Method			
e.	Press the F9 UPDATE key. The cla status is changed from TE to CO (C	im is reactivated and the ollection).		
f.	To exit and return to the <b>MAIN MEN</b> The MAIN MENU displays	<b>U</b> , press the F3 function key.		

### IV. DEBTOR DETAIL

All adults (debtors) in the case are equally and financially responsible for any/all claims. Consequently, it is required that the investigator records debtor details in EPICS for each claim.

If the courts have determined that an overpayment is to be divided among more than one debtor, they must have separate referrals. In that case, they would not be listed as debtors on each other's referral. They would be debtors on their separate referrals only.

Field	Description	Required	System Generated	Optional
Referral ID	10 digit number generated by the system upon creation of a referral		Х	
Referral Type	1 character code that identifies the type of referral		Х	
Referral Status	2 character code for the status of a referral		Х	
Name	First name, middle initial, last name, and suffix of the case head payee		Х	
Ind. ID	Unique ID associated with the case head payee supplied by CNDS		Х	
SSN	Case head payee's social security		Х	

### A. Debtor Detail Screen Field Descriptions

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	number		
DOB	Case head payee's date of birth	Х	
Sex	Case head payee's	Х	
	sex		

Field	Description	Required	System Generated	Optional
County	3 digit number with the values from 000-100, representing the issuing county in which the overpayment took place		X	
Program	Code that identifies the benefits program to which the referral applies		X	
Case ID	Program Case ID associated with referral		Х	
County Case #	County case number associated with the referral		Х	
Referral Date	Date the referral was received		X	
Investigator ID	ID number of the investigator assigned to the referral		Х	
LOI Date	Date the Letter of Overissuance is sent to the debtor		Х	
60 DAY NOTICE	This is the date the 60 Day Notice is sent for the DOR process.		X	
POST HEARING NOTICE	This is the date the investigator enters once the Post Hearing Demand Notice has been sent.		X	
Debtor Individual ID	Unique ID associated with the Debtor provided by CNDS	X		
Debtor SSN	Debtor's social security number		Х	
Debtor DOB	Debtor's date of birth		X	

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	02/		
Debtor Sex	Debtor's sex	Х	
Debtor Race	Debtor's race may be up to 5 race codes	Х	

Field	Description	Required	System Generated	Optional
Ethnicity	Debtor's Ethnicity		Х	
Language	Debtor's Language Preference		Х	
Debtor Phone	Debtor's phone		Х	
Number	number			
Debtor Ext.	Debtor's phone extension		X	
Debtor Name	Debtor's full name (first name, middle initial, last name, and suffix)		X	
Debtor Address	Debtor's address		X	
NC Debt Setoff	Code used to set individual up for NC Tax Intercept			X
Delete Reason Code	Code indicating the reason for deleting the debtor			X
TOP Intercept Ind.	Code used to set individual up for Federal Tax Intercept			X
TOP Intercept Appeal Ind	Set by the county when a debtor request an appeal that suspends tax intercept until the outcome of the hearing			X
Address Req.	Date Address request sent to TOP		X	
FS Appeal Ind	Set by the county to block an individual from being selected for FNS Recoupment on this particular referral			X

### B. Debtor Detail Function Keys

Function Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu
F4	To display a list
F5	To display the Repayment Approach History FNS screen
F6	To add a debtor (save)
F9	To update debtor detail information
F10	To delete a debtor (State Level Only)
F11	To display the Maintain Client screen
F12	To cancel or return to the previous screen

### C. To Add A Debtor TO A Claim

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the **F5** function key.

FR35NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM07/03/2007FRD0350DEBTOR DETAIL12:38:40
REFERRAL ID: REFERRAL TYPE: _ REFERRAL STATUS: NAME:
IND. ID: SSN: DOB: 00/00/0000 SEX: _ COUNTY: PROGRAM: CASE ID: 000000000 COUNTY CASE #: REFERRAL DATE: 00/00/0000 INVESTIGATOR ID: LOI DATE: 00/00/0000
60 DAY NOTICE: 00/00/0000 DEBTOR INFO: POST HEARING NOTICE: 00/00/0000 INDIVIDUAL ID: 000000000 _ + SSN: SEX: _
DOB: RACE: ETHNICITY: LANGUAGE: PHONE NUMBER: EXT:
NAME:
NC DEBT SETOFF:+ DELETE REASON CODE: + TOP INTERCEPT IND:+ TOP INTERCEPT APPEAL IND:+ ADDRESS REQ: 00/00/0000 FS APPEAL IND:+ F1=HELP F3=EXIT F4=LIST F5=REPAY F6=ADD F9=UPD F10=DELETE F11=CLIENT F12=CANCEL FRDDD0S ACTION COMPLETED SUCCESSFULLY

**NOTE**: If no debtors have been previously added to the claim, the DEBTOR DETAIL screen displays.

If one or more debtors have been previously added to the claim, a list of debtors display on the **DEBTOR SUMMARY** screen. Press the **F9** function key from the Debtor Summary screen.

5. In the **INDIVIDUAL ID** field (under Debtor Info), key the individual ID of the person being added as a debtor and press **Enter**. The individual's demographic information displays.

If you do not know the debtor's ID, press the equal sign (=) and F4 key. The Name Search screen displays. You may search in one of four ways which is outlined on the screen. Press ENTER. The Name List screen displays.

FR78 NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM FRD0750 Name Search	08/24/2004 09:17:59
Last Name:          First Name:            Sex Code:         _ Date Of Birth:            SSN :          Individual ID:	
To search, use either :- 1. Last Name, First Name, Sex Code and Date of Birth only or, 2. SSN only or, 3. Individual ID only or, 4. Case ID only	
F3=EXIT F4=CLEAR F12=CANCEL	
FR78 NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM FRD0770 NAME LIST Results for:	08/24/2004 09:21:33
Sel SSN Last Name First Name MI DOB Sex Indiv ID EIS Cnty FSIS Cnty Program Case ID Race Ethnicity Language	
F1=HELP F3=EXIT F7=PREV F8=NEXT F11=CLIENT F12=CANCEL	

If the individual is displayed, enter an 'S' by the name under the Sel column. Press Enter. The Debtor Detail screen is displayed with individual ID and

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demographic data for the ID selected. Press the F6 key to add the debtor. If the individual is not displayed and an individual ID number must be assigned, press the F11 key. The Maintain Client screen displays.

FR04 NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM 08/24/2004 FRD0350 MAINTAIN CLIENT 09:28:38
INDIVIDUAL ID: 000000000 _
NAME:
MAIL ADDRESS: LAST UPDATE: LAST RACF ID: COUNTY CODE:+
DOR INTERCEPT ADDRESS: LAST UPDATE: LAST RACF ID: COUNTY CODE:+
PHONE NUMBER: EXT: TYPE: HOME_
F1=HELP F2=CLEAR F3=EXIT F6=ADD F9=UPDATE F12=CANCEL

From the Maintain Client screen, enter the Name, SSN (if no ssn enter zeroes), Sex, Race (you may enter up to 5 codes), Ethnicity, Language, Address, and County Code. Phone Number is optional. Press the F6 key.

The Maintain Client screen is redisplayed with the individual ID number assigned and the message:

CCIPN65D Person and Address Created Successfully

Press the F12 key. The Name List screen is redisplayed with the individual. Enter the 'S' by the individual under the Sel column and press ENTER. The Debtor Detail screen is displayed with the individual ID selected along with the debtor's demographic information. Press the F6 key to add the debtor.

- 6. To add the individual as a debtor, press the **F6** function key.
- 7. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

or

To add another debtor, press the **F12** function key. The DEBTOR SUMMARY screen displays. Press the **F9** function key. The DEBTOR

DETAIL screen displays. Repeat steps 5-6.

### D. Changes To A Debtor

There are few fields that can be updated on the Debtor Detail Screen. The debtor information is brought forward and is protected. Depending on the program, determines what fields are unprotected.

1. All Programs Except FNS

The NC DEBT SETOFF field is the only field unprotected. This field is updated with a 'Y' by the system if the debtor has been selected for DOR. Exempt codes may be entered if the debtor should not be part of the DOR selection. For further instructions, please see the DOR process section.

- 2. FNS Program
  - a. POST HEARING NOTICE

The investigator stops the TOP Intercept Process by updating the TOP Intercept Indicator when the debtor has requested a hearing. When the hearing has been held and the decision is in favor of the county and the Post Hearing Demand Notice has been sent, the investigator enters the date the notice was sent to the debtor. EPICS tracks this date and restarts the TOP process.

- (1) This field is only allowed when the program is FNS.
- (2) The date must be in MM/DD/CCYY format.
- (3) The date may be prior to or equal to the current date. If the date entered is greater than the current date, the following error message is displayed:

### 'DATE BE MUST LESS THAN OR EQUAL TO THE CURRENT DATE'

- (4) This date is used by EPICS to recalculate the 180 days before it sends the debtor to TOP to be certified. Day one of the 180 day calculation is the day after the Post Hearing Notice date. If the TOP Intercept Indicator for the debtor is either A or B at the time the Post Hearing Notice date is keyed, the system does not send the debtor back through the A or B stage.
- b. The NC DEBT SETOFF field, TOP INTERCEPT IND field, and the FS APPEAL IND field are all unprotected. For further instructions see the DOR process section, the TOP process section, and food stamp appeal section.

### E. To Delete a Debtor (STATE LEVEL ACCESS ONLY)

If a debtor is added to a claim in error or is invalid, you can *soft delete* the debtor. However, a soft deletion delete does not actually remove the debtor from the claim, only disassociates the debtor(s) with the claim (in order to retain integrity of the database and to provide an audit history). Likewise, if you need to delete a claim, you must soft delete the debtor(s) first.

If the specified debtor has already made payments on the claim, you should adjust/correct the payments and make certain the funds are returned to the debtor, as necessary. The adjustment/correction must also be processed through the accounting systems. Upon completion of the adjustment/correction, you can proceed with soft deleting the debtor in EPICS.

County level personnel should contact the DSS/DMA office for deletion of a debtor.

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the **F5** function key. The DEBTOR SUMMARY screen displays with a list of debtor(s).
- 5. In the **List** column, key **a** s to the left of the debtor and press **Enter**. The Debtor Detail screen displays.
- 6. Press the **F10** function key.
- 7. In the **DELETE REASON CODE** field, key the reason code that explains why the debtor is being deleted.
- 8. To delete the debtor, press the **F10** function key again. A date of the deletion will be assigned to the debtor, but will not display on the screen.
- 9. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

or

To return to the **DEBTOR SUMMARY** screen, press the **F12** function key.

### F. Display List Of Debtors And View Debtor Details

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the **F5** function key. The DEBTOR SUMMARY screen displays with a list of debtors.

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FR37 FRD0370	NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM DEBTOR SUMMARY	06/29/2004 11:51:44
REFERRAL ID: NAME:	+ REFERRAL TYPE: _ REFERRAL STATUS:	MORE:
INDIVIDUAL ID: COUNTY: PRI REFERRAL DATE: _	SSN: DOB: RACE: SEX: OGRAM: CASE ID: COUNTY CASE #: INVESTIGATOR ID:	
LIST OF DEBTORS	:	
SSN INE	D. ID NAME	
F1=HELP F3=EXIT	F4=LIST F7=PREV F8=NEXT F9=DEBTOR DETAIL F12=CANCEL	

- **NOTE:** If there are numerous debtors for this claim, press the **F8** function key to view the next screen of debtors. To go back to the previous screen of debtors, press the **F7** function key.
- 5. In the **List** column, key an s to the left of the debtor and press the **F9** function key or **Enter** to display the debtor's information. The DEBTOR DETAIL screen displays.
- 6. View the details.
- 7. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

### V. DEBTOR SUMMARY

You can view a list of debtors associated with a specific referral from the *Debtor Summary* screen.

### A. Debtor Summary Screen Field Descriptions

Field	Description	Required	System Generated	Optional
Referral ID	10 digit number generated by the system upon creation of a referral		Х	
Referral Type	1 character code that identifies the type of referral		Х	
Referral Status	2 character code for the status of a referral		Х	

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Field	Description	Required	System Generated	Optional
Name	First name, middle initial, last name, and suffix of the case head payee		Х	
Ind. ID	Unique ID associated with the case head payee supplied by CNDS		X	
SSN	Case head payee's social security number		X	
DOB	Case head payee's date of birth		Х	
Sex	Case head payee's sex		X	
County	3 digit number with the value from 000- 100, representing the issuing county in which the overpayment took place		X	
Program	Code that identifies the benefits program to which the referral applies		Х	
Case ID	Program Case ID associated with referral		Х	
County Case #	County case number associated with the referral		Х	
Referral Date	Date the referral was received		Х	
Investigator ID	ID number of the investigator assigned to the referral		X	
List of Debtors: SSN	Debtor's social security number		X	
List of Debtors: Ind. ID	Unique ID associated with the Debtor, supplied by CNDS		Х	
List of Debtors: Name	Debtor's full name (first name, middle initial, last name, and suffix)		X	

### B. Debtor Summary Function Keys

Function Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu
F4	To display a list
F7	To display the previous screen (page up)
F8	To display the next screen (page down)
F9	To display the Debtor Detail screen
F12	To cancel or return to the previous screen

### VI. TOP PROCESS (FOOD AND NUTRITION SERVICES ONLY)

- A. EPICS does not submit a debtor to TOP when a county approved repayment agreement is signed, dated, and the debtor is not delinquent.
  - 1. The Repayment Approach FNS screen must display 'Y' (Yes) in the REPAYMENT AGREEMENT field and a date on the DATE SIGNED field.
  - 2. The PAYMENT METHOD field on the Repayment Approach FNS screen must be 'C' (Cash) or 'FSC' (Food Stamp Cash).
  - 3. Payments posted to the Repayment Approach History FNS screen are compared to the Repayment Agreement and the most recent payment is within the allotted frequency.
  - **NOTE:** Payments on Work First and Medicaid claims do not affect the repayment agreement of Food and Nutrition Services claims.
- B. EPICS does submit a debtor to TOP when a county approved repayment agreement is not signed, dated, and the debtor is delinquent.
  - **NOTE:** The Repayment Approach screen must display 'N' (No) in the REPAYMENT AGREEMENT field.
- C. EPICS creates the Letter of Overissuance to the debtor(s) for any Food and Nutrition Services claim(s) that has been substantiated and deemed that there is a balance owed back to the State. If the debtor makes payments as agreed upon or settles the account, no further action is taken. If the debtor does not make any payments or settles the account, the TOP process begins.
- D. EPICS creates a file to show all Food and Nutrition Services accounts that are eligible for intercept and submits them to TOP.
  - **NOTE**: If the county wishes to initially block an individual from being selected for intercept, they can set the TOP Intercept Ind field on the Debtor Detail screen to H, L, S, (the X & F can only by entered by State Staff). Once this code has been removed, the debtor can be submitted for intercept if they meet the remaining requirements.

### E. Eligibility Requirements

Must be a debtor on a claim.

TOP Intercept Ind field on the Debtor Detail screen is not currently set to H, L, S, X, or F. Referral Status must be in CO (Collections) or TE (Terminated)

Claim Type must be IPV, IHE, or AE

Claim debtor's total for a claim must be a minimum of \$25.00

Debtor must be 60 days delinquent – Delinquency is defined as making a 10% or \$25.00 (whichever is greater) cash payment of the total TOP eligible claim balances within the last 60 days.

Debtor must not have a recoupment in the past 60 days

Claim can be greater than 10 years old (beginning from the date the Letter of Overissuance was issued) unless there is a Civil/Criminal Judgement date

- F. Debtor's TOP Intercept Indicator field is set to an A and the ADDRESS REQ date is updated indicating the Pre-Offset Address Request was submitted. This is done by a nightly update job. At this point the certification process has begun. TOP receives the file and processes for Tax Refund job.
  - 1. The ADDRESS REQ date field is updated with the date the TOP INTERCEPT IND is set to 'A'. This tracks the 181 days since the address request was submitted to TOP.
  - 2. The ADDRESS REQ date is protected and is removed when the system changes the TOP INTERCEPT IND from 'A' to 'B'.
  - 3. The date is removed if on the 181<sup>st</sup> day the TOP INTERCEPT IND is still 'A'. If all criteria are met, the system again requests an address. Once the address is requested from TOP, the ADDRESS REQ data is again populated and the TOP INTERCEPT IND is set from 'space' to 'A'.
  - 4. The ADDRESS REQ date remains if the worker changes the TOP INTERCEPT IND from 'A' to 'H', 'S', 'L', or 'X'.
  - 5. If the ADDRESS REQ date is present and the date is less that 181 days from the date the TOP INTERCEPT IND was set to 'A', and the TOP INTERCEPT IND is currently 'H', 'S', 'L', or 'X', you may only change the indicator back to 'A' or the following error message is displayed:

### 'TOP INTERCEPT IND MUST BE 'A'

6. If the ADDRESS REQ date is present and the date is 181 days for greater from the date the TOP INTERCEPT IND was set to 'A", and the TOP INTERCEPT IND is currently 'H', 'S', 'L', or 'X', you may only change the indicator to 'space'. If an 'A' is entered, the following error message is displayed:

### 'TOP INTERCEPT IND 'A' NOT ALLOWED'

7. If the criteria are met, the system must request an address again. Once the address is requested from TOP, the ADDRESS REQ date is again populated and the TOP INTERCEPT IND is set from 'space' to 'A'.

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- G. TOP returns the results to EPICS.
- H. EPICS sends a 60-Day Notice letter to the debtor(s). Debtor's TOP Intercept Indicator field is set to a B indicating the 60-Day Process has begun. This is done by a nightly update job. At this point H, L, S, or X **cannot** be entered by the county to block the intercept.
  - **NOTE**: The county may enter an E code to stop the certification process from continuing. If the debtor fails to make payments as agreed, the code should be set back to a B code to continue with the certification process. In this situation, the debtor will not receive another 60-day notice.
- I. Debtor can request an appeal by entering the code R or waive the appeal by entering the code W. This value is entered in the TOP Intercept Appeal Ind field on the Debtor Detail screen.
- J. If the debtor waives the right to appeal or does not respond to the 60-Day Notice, the debtor's TOP Intercept Indicator field is set to a C indicating the claim is eligible for certification, providing the other eligibility requirements still apply. This is done by a batch job.
- K. If the debtor requests an appeal, certification processing is held until a decision has been made. It is very important that the county changes the code R once the appeal is ruled in favor of the county or the debtor and enters the correct code of Y or N. If the appeal is ruled in favor of the county, the debtor's Federal Tax Intercept Indicator field is set to a C indicating the claim is eligible for certification. This is done by a batch job.
- L. Once the claim has been "certified" it remains on TOP files and can only be changed to an I or P value. An I value inactivates the claim on TOP files only the claim is still active in EPICS unless closed or terminated. If necessary, the claim can be reactivated from this value.
- M. A 'P' value permanently closes the offset request due to paid up balance or closed on TOP's files. If this value is entered, the claim can NEVER be reactivated with TOP. This value can only be entered by State level users.
- N. After a debtor has reached Stage C Certification, Code D can be used to block a debtor from being intercepted if he has satisfied the 10% or \$25.00 rule of all TOP eligible claims or if he has been recouped. Once the debtor no longer meets the 10% or \$25.00 rule or recoupment status, the D automatically is reset to C by the system and the certification process continues.
- O. SET OR UPDATE AN INTERCEPT INDICATOR FLAG

If a client should not be submitted for Federal Tax Intercept, due to a hearing or litigation status, the county can set a flag to block the initial processing of the intercept.

1. From the **MAIN MENU**, key the number 3 in the **Enter Option** field and press **Enter**. The CLAIMS MENU displays.

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- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the F5 function The DEBTOR SUMMARY screen displays with a list of debtors.
  - **NOTE**: If there are numerous debtors for this claim, press the F8 function key to view the next screen of debtors. To go back to the previous screen of debtors, press the F7 function key.
- 5. In the **List** column, key a s to the left of the debtor and press the **F9** function key or **Enter** to display the debtor's information. The DEBTOR DETAIL screen displays.
- 6. In the **TOP INTERCEPT IND** field, key the code that describes why the debtor should not be submitted for the initial processing of intercept.
- 7. To save and update the screen, press the **F9** function key.
- 8. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.
- P. SET OR UPDATE AN APPEAL FLAG

When a client requests an appeal within the 60-day period, you must set the appeal flag. Likewise, when the appeal status has changed, you must update the appeal field.

- 1. From the **MAIN MENU**, key the number 3 in the **Enter Option** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the F5 function The DEBTOR SUMMARY screen displays with a list of debtors.
  - **NOTE:** If there are numerous debtors for this claim, press the F8 function key to view the next screen of debtors. To go back to the previous screen of debtors, press the F7 function key.
- 5. In the **List** column, key a 'S' to the left of the debtor and press the **F9** function key or **Enter** to display the debtor's information. The DEBTOR DETAIL screen displays.
- 6. In the **TOP INTERCEPT APPEAL IND** field, key the code for the type of appeal the debtor is requesting or the updated status of the appeal.
- 7. To save and update the screen, press the **F9** function key.

8. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

### VII. DOR Process (FOOD AND NUTRITION SERVICES, MEDICAID, AND WORK FIRST)

- A. EPICS creates a file with the latest current balances that are eligible for intercept and submits them to DOR.
  - NOTE: If the NC Debt Setoff Indicator is space or 'Y' and the county wishes to initially block an individual from being selected for intercept, they can set the NC Debt Setoff field on the Debtor Detail screen to H, L, or S (the X & F code can only be entered by State Staff). Once this code has been removed, the debtor can be submitted for intercept if they meet the remaining requirements.
- B. Eligibility Requirements

Must be a debtor on a claim.

NC Debt SETOFF Ind field on the Debtor Detail screen is not currently set to H, L, S, or F.

Referral Status must be in CO (Collections) or TE (Terminated and FNS only) Claim Type must be IPV or IHE

Claim Debtor must be delinquent

For FNS only – Delinquency is defined as making a 10% or Cash Payment amount totals \$25.00 (whichever is greater) of the total DOR eligible claim balances within the last 60 days.

Debtor must not have a recoupment in the past 60 days (TANF and FNS) Claim Debtor's current balance for same program type must total a minimum for \$50.00

- C. Claim Debtor's NC Debt Setoff flag on the Debtor Detail screen is set to "Y" indicating that the individual was selected for setoff. This process is done automatically by a batch job.
- D. DOR receives the file and processes the Tax Refund job.
- E. DOR returns the results to EPICS by individual's SSN and the program(s) eligible for intercept.
- F. DHHS reconciles the funds and processes the eventual posting of payments.
  - **NOTE:** At this point, the debtor's money has been intercepted and is placed in a "holding place" until the process is complete. Any exemption codes entered will not stop the money from being taken, but will generate a refund once the process is complete.
- G. EPICS sends out a 30-day notice to the debtor. The debtor's NC Debt Setoff flag on the Debtor Detail screen is set to "D" indicating that the individual is in the 30-Day period process.
- H. All names that are in the 30-Day process appear on the NC Debt Setoff Pending Intercept (under Collections Menu).
  - **NOTE**: These names will remain on this list until the appeal complete, payment has been posted, or refund has been issued.

- I. The debtor now can waive the right to appeal or request an appeal.
  - 1. If the debtor waives the right to appeal, the payment is processed immediately.
  - 2. If the debtor requests an appeal, the county must set a flag to 'R', 'Y', or 'N' indicating the request. Once the county sets this flag, the payment process is on hold until a decision has been made. It is very important that the county remove this flag once the appeal is denied or ruled in favor of the debtor.
    - **NOTE:** If the debtor should not have been intercepted and is due a full refund (and a hearing is not warrant), the county can enter a code of 'D' or 'Y' to issue the refund (including interest and collection fees). This lets the system know to automatically issue a refund. For more specific details, please see procedures in the collections section.
  - 3. If the debtor does not waive the right to appeal or request an appeal, payment is processed 35 days after the 30-Day Notice date.

### VIII. MAINTAIN CLIENT

For a debtor that is not associated with a benefit case, EPICS provides a feature, *MAINTAIN CLIENT* that allows you to define a debtor to a claim who is not defined in CNDS. Likewise, you have the capability to maintain the demographic information for the debtor in EPICS. The client demographic information is transferred and stored in CNDS. You may access Maintain Client via Debtor Detail screen or Name List screen.

Once updated in CNDS, EPICS is not permitted to update their demographics. Such updates would have to be done through NCFAST; however, you may update the debtor's address and phone number. You may access Maintain Client via Debtor detail screen or name list screen.

You cannot delete maintain client information. Only authorized personnel who have deletion rights may do so. Therefore, ensure accurate information is entered.

Field	Description	Required	System Generated	Optional
Individual ID	Unique ID assigned by EPICS for the new individual. This information is transferred and stored in CNDS		Х	
Name	Individual's name	Х		
SSN	Individual's social security number, even if zeroes	Х		
DOB	Individual's date of birth	Х		

### A. Maintain Client Field Descriptions

# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #1-2008CLAIMSMARCH 1, 2008

Field	Description	Required	System Generated	Optional
Sex	Individual's sex	Х		
Race	Individual's race may be up to 5 codes	Х		
Ethnicity	Debtor's Ethnicity	Х		
Language	Debtor's Language Preference	X		
Address	Individual's address	Х		
Туре	Code indicating the individual's address type		X	
County Code	3 digit number with the values from 000-100, indicating which county the individual resides	X		
Phone Number	Individual's phone number			Х
Ext.	Individual's phone extension			Х
Туре	Code indicating the individual's phone type		X	

### B. Maintain Client Function Keys

Key	Description
F1	To access EPICS on-line help
F2	To clear the screen
F3	To exit and return to the Main Menu
F6	To add the maintain client information (save)
F9	To update the maintain client information
F12	To cancel or return to the previous screen

### C. Add New Client As A Debtor

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the **F5** function key. The DEBTOR SUMMARY screen displays.
- 5. Press the **F9** function key. The DEBTOR DETAIL screen displays.
- 6. In the **INDIVIDUAL ID** field, key = and press **F4**. The NAME SEARCH screen displays.

### ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #1-2008CLAIMSCLAIMSMARCH 1, 2008

- **NOTE**: Initially, it is required for you to search for the individual via NAME SEARCH
- 7. Enter the client information and press **Enter**.
  - **NOTE:** The **NAME LIST** screen displays with a list of names matching the criteria entered. If you locate the individual in the NAME LIST, select the name and refer to procedures on adding an individual as a debtor.
- 8. Press the **F11** function key. The **MAINTAIN CLIENT** screen displays.

FR04 NC DHHS - ENTERPRISE PROGRAM INTEGRITY FRD0350 MAINTAIN CLIENT	CONTROL SYSTEM 08/24/2004 09:28:38
INDIVIDUAL ID: 000000000 _	
NAME:	
MAIL ADDRESS: LAST UPDATE: LAST RACF ID: COUNTY CODE	: +
DOR INTERCEPT ADDRESS: LAST UPDATE: LAST RACF ID: COUNTY CODE	·+
PHONE NUMBER: EXT: TYPE: HOME_	
F1=HELP F2=CLEAR F3=EXIT F6=ADD F9=UPDATE F1	2=CANCEL

- 9. In the NAME field, enter the individual's full name.
- 10. In the **SSN** field, enter the individual's social security number. If no SSN, enter zeroes.
- 11. In the **DOB**, **SEX**, **RACE** (up to 5 codes), **Ethnicity**, and **Language** fields, key the individual's appropriate information.
- 12. In the **ADDRESS** field, key the individual's address.
  - **NOTE**: If the address is unknown, enter the following for the client's address:
  - EPICS as the street name

#### Unknown, NC 11111- as the City, State, and Zip Code

13. In the **COUNTY CODE** field, key the individual's county number.

# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #1-2008CLAIMSCLAIMSMARCH 1, 2008

- 14. In the **PHONE NUMBER** field, key the individual's phone number, if known.
- 15. Press the **F6** function key. EPICS assigns the new individual ID to the debtor and the number is subsequently stored in CNDS.
- 16. Press the F12 function key. The NAME LIST screen displays.
- 17. In the S column, select the individual from the list and press Enter. The DEBTOR DETAIL screen displays.
- 18. To add the individual as a debtor, press the F6 function key.
- 19. To exit and return to the MAIN MENU, press the F3 function key. The MAIN MENU displays.

### D. Update/Maintain Client Information

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIM DETAIL screen displays.
- 3. In the **REFERRAL ID** field, key the referral ID and press **Enter**. The claim information displays.
- 4. Press the **F5** function key. The DEBTOR SUMMARY screen displays.
- 5. Key an S in the selection field to the left of the debtor (that you need to update) and press the **F9** function key or **Enter**. The DEBTOR DETAIL screen displays.
- 6. Press the **F11** function key. The MAINTAIN CLIENT screen displays.
- 7. Update the **ADDRESS** or **PHONE NUMBER** fields.
- 8. To save the update, press the **F9** function key.
- 9. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

### or

To return to the **DEBTOR DETAIL** screen, press the **F12** function key.

### IX. REPAYMENT APPROACH

Each debtor is responsible for repayment of the debt. It is the responsibility of the investigator to attempt and negotiate a repayment agreement with the debtor. It is required that the repayment agreement information (e.g. amount of each payment, frequency, first payment due and payment method) be recorded in EPICS via the *Repayment Approach Referral ID* screen. EPICS utilizes this information to identify those debtors who are delinquent.

If a debtor becomes delinquent (e.g. neglects to pay a scheduled payment) he/she is subject to tax intercept, unless the recoupment is made against his/her existing benefits. However, if the debtor realized he/she missed the payment and repaid the payment in the next scheduled installment, he/she is removed from the delinquency list and is not subject to tax intercept.

For Food and Nutrition Services and Work First, if a claim results in a criminal court hearing and the client is receiving benefits, recoupment cannot be automatically established unless the judge issues the court order for recoupment. This date should be entered in the Criminal Judgement Date field on the Claim Detail Screen. The investigator **must** set the Payment Method to "R" for EPICS to process the recoupment. If the Claim Type (located on the Debtor Detail screen) is set to IPV and the Substantiation Method is equal to S, A, or D, the investigator **must** set the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the Payment Method to "R" for EPICS to process the recoupment.

If the investigator is unsuccessful in obtaining a signed agreement with the debtor, the investigator can pursue involuntary means of obtaining the funds from the debtor. However, it is required to document the involuntary means in EPICS, as well, via the REPAYMENT APPROACH REFERRAL ID screen.

EPICS allows multiple debtors to be attached to a claim. A repayment approach agreement is **required for each Non FNS** debtor attached to a claim. For FNS claims, this agreement is not required.

Field	Description	Required	System Generated	Optional
Referral ID	10 digit number generated by the system upon creation of a referral		X	
Referral Type	1 character code that identifies the type of referral		Х	
Referral Status	Current status the referral is in		Х	

### A. Repayment Approach Field Descriptions For Non FNS

# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #1-2017CLAIMSAPRIL 1, 2017

Field	Description	Require d	System Generated	Optional
Program	Code that identifies the benefits program to which the referral applies		X	
Case ID	Program Case ID associated with referral		X	
County Case #	County case number associated with the referral		X	
Referral Date	Date the referral was received		Х	
Investigator ID	ID of the investigator assigned to the referral		X	
Overpayment Begin Date	10 character date (MM/DD/YYYY) of the start date for the fraud	Х		
Overpayment End Date	10 character date (MM/DD/YYYY) of the end date for the fraud	Х		
Initial Balance Due	Up to 9 character amount of the overpayment		X	
Date Entered	10 character date the repayment agreement is entered in EPICS		X	
Payment Amount	Up to 9 characters; debtor's monthly payment	X		
Frequency	1 character code representing how often the debtor is expected to make payments		X	
# of Payments	Up to 3 characters; represents the total number of payments required by the debtor to pay off the balance of the claim Defaults to 36 months for FNS claims	X		

	Up to 4 characters; method by which the debtor will use to make a payment	Х	
Date Signed	10 character date (MM/DD/YYYY) required when the repayment agreement was signed (Defaults to current date)	Х	

### B. Repayment Approach Function Keys for Non FNS

Function Key	Description
F2	To clear the screen and the repayment agreement information
F3	To exit and return to the Main Menu
F4	To display a list
F5	To display all debtors in the claim
F9	To add/update a repayment agreement information
F10	To display the new repayment agreement History Screen
F11	To calculate the number of Payments
F12	To cancel or return to the previous screen

### C. Enter Repayment Approach Information For A Non FNS Debtor

You can access the **REPAYMENT APPROACH** screen from the **CLAIMS MENU** or the **DEBTOR DETAIL** screen.

1. If you are entering from the **CLAIMS MENU**, key 4 in the Enter Option field and **key** the Referral ID in the Repayment Approach Referral ID field. **Press ENTER.** 

NOTE: If you do not key the Referral ID in the Repayment Approach Referral ID field, the system displays error message at the bottom of the screen: "REFERRAL ID MUST BE ENTERED FOR THIS OPTION

# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #2-2016CLAIMSDECEMBER 1, 2016

FR05	NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM 03/07/2016	
FRDMC	CLAIMS MENU 12:41:11	
	<ol> <li>EPICS History by Case Head</li> <li>EPICS History by Debtor</li> <li>Claim Detail</li> <li>Repayment Approach Referral ID:</li> </ol>	
	Enter Option: _	
F1	I=HELP F3=EXIT	

#### or

### If you are entering from the DEBTOR DETAIL screen, press F5.

FR35NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM07/03/2007FRD0350DEBTOR DETAIL12:38:40
REFERRAL ID: REFERRAL TYPE: _ REFERRAL STATUS: NAME:
IND. ID: SSN: DOB: 00/00/0000 SEX: _
COUNTY: PROGRAM: CASE ID: 000000000 COUNTY CASE #:
REFERRAL DATE: 00/00/0000 INVESTIGATOR ID: LOI DATE: 00/00/0000 60 DAY NOTICE: 00/00/0000
DEBTOR INFO: POST HEARING NOTICE: 00/00/0000
INDIVIDUAL ID: 00000000 _ + SSN: SEX: _
DOB: RACE: ETHNICITY: LANGUAGE:
PHONE NUMBER: EXT:
NAME:
ADDRESS:
NC DEBT SETOFF: _ + DELETE REASON CODE: +
TOP INTERCEPT IND: _ + TOP INTERCEPT APPEAL IND: _ +
ADDRESS REQ: 00/00/0000 FS APPEAL IND: _ +
F1=HELP F3=EXIT F4=LIST F5=REPAY F6=ADD F9=UPD F10=DELETE F11=CLIENT F12=CANCEL
FRDDD0S ACTION COMPLETED SUCCESSFULLY

The REPAYMENT APPROACH screen displays.

### ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #2-2016CLAIMSDECEMBER 1, 2016

FR31 FRD0310	NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM REPAYMENT APPROACH			A 08/24/2004 11:22:31
REFERRAL ID: DEBTOR NAME:	REFER	RAL TYPE: _ REF	ERRAL STATUS:	
COUNTY: F	OGRAM: PROGRAM: E:	CASE ID: INVESTIGATOR	COUNTY CASE #:	
OVERPA	YMENT BEGIN DA	TE OVERPAYM	IENT END DATE	
INITIAL BALANCI DATE ENTERED:	E DUE: 0.00 08/24/2004			
PAYMENT AMOL PAYMENT METH REPAYMENT AG	INT: 0.00 OD: + REEMENT?: _	_ FREQUENCY: 1ST PAYMENT DU DATE SIGNED: _	_ + NUMBER OF PAYMENTS: _ IE DATE:	_
F1=HELP F2=CL	EAR F3=EXIT F4=	LIST F9=UPDATE	F10=CALC F12=CANCEL	

- 2. In the **REFERRAL ID** field, key the referral ID number of the individual that you need to add a repayment agreement. Press enter.
  - NOTE: If the Referral ID is not entered, the error message displays at the bottom of the screen: REFERRAL ID OR PERSON INFO MUST BE ENTERED
- 3. In **the INDIVIDUAL ID** field, key the ID of the debtor that you need to add a repayment agreement. Press enter.
  - **NOTE:** If you do not enter an IND ID, the error message displays at the bottom of the screen: **HIGHLIGHTED FIELDS MUST BE ENTERED.**
- 4. In the **PAYMENT AMOUNT** field, key the actual amount the debtor pays each time a payment is made.
- 5. In the **FREQUENCY** field, the system **automatically defaults** to MONTHLY. You cannot edit this field.
- 6. In the **PAYMENT METHOD** field, key a method by which the debtor pays.
  - **NOTE**: If you do not know the payment method code, key the equal sign (=) and press F4. A list of codes displays. Enter S beside the selected code. Press **ENTER**.
- 7. In the 1st **PAYMENT DUE DATE** field, key the date the debtor's first payment is due.
  - NOTE: If the date is less than current date, the system displays error message at the bottom of the screen: "REPAYMENT DUE DATE CANNOT BE LESS THAN THE CURRENT DATE"

8. In the **DATE SIGNED** field, key the date the debtor actually signed the repayment agreement.

### NOTE: If the date is a future date, the system displays error message at the bottom of the screen: CANNOT BE A FUTURE DATE

9. To update the repayment agreement information, Press F9.

**NOTE**: The NUMBER OF PAYMENTS is automatically calculated and system generated.

10. To exit and return to the MAIN MENU, press the F3. The MAIN MENU displays.

### D. Update Repayment Approach Information for Non FNS

1. If you are entering from the CLAIMS MENU, key 4 in the Enter Option field and the Referral ID in the Repayment Approach Referral ID field. **Press ENTER**.

### or

If you are entering from the **DEBTOR DETAIL** screen, press **F5.** The REPAYMENT APPROACH screen displays with the debtor's current repayment agreement.

**NOTE**: If you do not know the code or value for a field, **press F4.** A list of codes or values displays. Enter s to select. Press enter.

This field attribute is available only for fields that contains a + (plus sign) to the right of the field.

### See APPENDIX B FOR LISTING OF CLAIMS CODES.

- 2. In the **INDIVIDUAL ID** field, key the debtor ID. Press **Enter**. The repayment approach agreement information displays.
- 3. Key changes needed
- 4. To save the updates, press **F9.**
- 5. To exit and return to the **MAIN MENU**, Press F3. The MAIN MENU displays.

### E. Repayment Approach Field Descriptions for FNS

Field	Description	Required	System Generated	Optional
Referral ID	10 digit number generated by the system upon creation of a referral		X	
Referral Type	1 character code that identifies the type of referral		X	
Referral Status	Current status the referral is in		X	
Program	Code that identifies the benefits program to which the referral applies		X	
Case ID	Program Case ID associated with referral		X	
County Case #	County case number associated with the referral		X	
Referral Date	Date the referral was received		X	
Investigator ID	ID of the investigator assigned to the referral		Х	
Overpayment Begin Date	10 character date (MM/DD/YYYY) of the start date for the fraud	Х		
Fed Tax Int Ind	Federal Tax intercept indicator		X	
NC Tax Int Ind	NC Tax intercept indicator	X		
Overpayment End Date	10 character date (MM/DD/YYYY) of the end date for the fraud	Х		
Initial Balance Due	Up to 9 character amount of the overpayment		X	
New Agreement Balance	Up to 9 characters amount of the balance minus any payments		X	

# ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #2-2016CLAIMSDECEMBER 1, 2016

Field	Description	Required	System Generated	Optional
Date Entered	10 character date the repayment agreement is entered in EPICS		Х	
Payment Amount	Up to 9 characters; debtor's monthly payment	X		
Frequency	1 character code representing how often the debtor is expected to make payments		X	
# of Payments	Up to 3 characters; represents the total number of payments required by the debtor to pay off the balance of the claim Defaults to 36 months for FNS claims		X	
Payment Method	Up to 4 characters; method by which the debtor will use to make a payment	X		
Due Date	10 character date (mm/dd/yyyy) required when the repayment agreement was signed (Defaults to current date)	Х		
Date Signed	10 character date (MM/DD/YYYY) required when the repayment agreement was signed (Defaults to current date)	X		
Voided Date	10 character date (MM/DD/YYYY) required when the repayment agreement is VOIDED	X		

### F. Repayment Approach Function Keys for FNS

Function Key	Description
F2	To clear the screen and the repayment agreement information
F3	To exit and return to the Main Menu
F4	To display a list
F5	To display all debtors in the claim
F9	To add/update a repayment agreement information
F10	To display the new repayment agreement History Screen
F11	To calculate the number of Payments
F12	To cancel or return to the previous screen

### G. Enter Repayment Approach Information for FNS Debtor(s)

1. You can access the **REPAYMENT APPROACH** screen from the **CLAIMS MENU** or the **DEBTOR DETAIL** screen.

FR05 NC CONTROL S 03/07	DHHS - ENTERPRISE PROGRAM INTEGRITY YSTEM 7/2016	
FRDMCC 12:41:11	CLAIMS MENU	
	<ol> <li>EPICS History by Case Head</li> <li>EPICS History by Debtor</li> <li>Claim Detail</li> <li>Repayment Approach Referral ID:</li> </ol>	
Enter Option:	-	
F1=HELP F3=EXIT		

a. If you are entering from the CLAIMS MENU, key the number 4 in the ENTER OPTION field and **key** the Referral ID in the Repayment Approach Referral ID field. **Press ENTER**.

> NOTE: If you do not key the Referral ID in the Repayment Approach Referral ID field, the system displays error message at the bottom of the screen: "REFERRAL ID MUST BE ENTERED FOR THIS OPTION

ENTERPRISE PF	ROGRAM INTEGRITY CONTROL	SYSTEM (EPICS)
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b. If the Referral ID in the Repayment Approach Referral ID field is a FNS claim type, the DEBTORS ON CLAIM LIST FNS screen displays.

FR92 0	NC DHHS - 3/07/2016	ENTERPRISE PROGRAM INTEGRITY CONTRO	DL	SYSTEM
FRDRFC REFERRA NAME:	L ID: 0000	DEBTORS ON CLAIM LIST FNS 00000	13:13:48	\$
ID: XXXXX NAME:	XXXXX L TI	N: XXXXXXXXX DOB: 00/00/00		
ID: F3=EXIT	TIN:	DOB: 00/00/00		
DEBTORS	S ON CLAIM	I, PRESS ENTER TO CONTINUE		

c. Press ENTER again. The REPAYMENT APPROACH FNS screen displays.

FR31 NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM 03/24/2016 FRDRAC REPAYMENT APPROACH FNS 09:56:47
REFERRAL ID: 0000654321 CASE ID: 123456789 COUNTY CASE #: 000000_ REFERRAL TYPE: R REF STATUS: CO COUNTY: 000 PROGRAM: FS REFERRAL DATE: 11/04/2015 INVESTIGATOR:
OVERPAYMENT BEGIN DATE OVERPAYMENT END DATE 03/01/2015 02/29/2016
Repayment Agreement Info FED TAX INT IND: _ NC TAX INT IND: _ INITIAL BALANCE: 636.00 DATE ENTERED: 03/24/2016
PAYMENT AMOUNT: 26.00 # OF PAYMENTS: 25 PAYMENT METHOD: + DUE DATE: 00/00/0000 VOIDED DATE: FREQUENCY: MONTHLY
DATE SIGNED: 00/00/0000 (not valid until signed date entered) F2=CLEAR F3=EXIT F4=LIST F5=DEBTORS F9=UPDATE F10=HISTORY F11=CALC F12=CANCEL NO AGREEMENT EXIST VALUES LISTED ARE PAYMENT GUIDELINES ESTABLISHED BY POLICY

NOTE: If there is no existing payment agreement, the system displays error message at the bottom of the screen: NO AGREEMENT EXIST VALUES LISTED ARE PAYMENT GUIDELINES ESTABLISHED BY POLICY.

If a payment agreement exists, the system displays error message at the bottom of the screen: FRDRAC AGREEMENT EXIST, PRESS F2 TO CLEAR AND ESTABLISH NEW AGREEMENT

- d. In the PAYMENT AMOUNT field, key the monthly payment amount. The amount must be greater than zero (0.00). If this field is left blank and you press F9 to update, the system displays error message at the bottom of the screen: "FRDRAC PAYMENT AMOUNT CANNOT BE ZERO OR SPACES".
- e. In the PAYMENT METHOD field, key the method of payment. If this field is left blank and you press F9 to update, the system displays error message at the bottom of the screen: "FRDRAC PAYMENT METHOD CANNOT BE SPACES".

NOTE: If you do not know the payment method code, key the equal sign (=). Press F4. The list of payment codes displays. Enter S on the line of the chosen code. Press ENTER.

- f. In the DUE DATE field, key the date the payment is due. This date cannot be more than two future months and cannot be prior to the date keyed.
- g. In the DATE SIGNED field, key the date the agreement was signed. This date cannot be before the DUE DATE or after the DATE KEYED. If this field is left blank and you press F9 to update, the system displays error message at the bottom of the screen: "FRDRAC SIGNED DATE MUST BE ENTERED FOR NON RECOUPMENT TYPE AGREEMENTS".
- h. Press F9 to save and update the repayment agreement. Based on the payment amount keyed, the system automatically calculates the number of monthly payments.

NOTE: You can also press F11 to calculate the number of months before you press F9 to update/save. The maximum number of payments allowed to repay a FNS claim is 36 months.

If a payment agreement extension is needed beyond the 36 months due to hardship, fax a request on county letterhead to the State FNSEP Program Integrity staff at 919-334-1265.

i. To exit and return to the MAIN MENU, press the F3 function key. The MAIN MENU displays.

**NOTE: The system** allows multiple debtors to be attached to a claim. However, there can only be one repayment agreement keyed on the Repayment Approach FNS screen if the program type is (FS) Food and Nutrition Services.

If there are multiple signed repayment agreements for a FNS claim, the lowest repayment agreement amount should be keyed on the Repayment Approach FNS screen for that claim. For example: There are two debtors on a claim. The first debtor's

### ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM (EPICS)Change #2-2016CLAIMSDECEMBER 1, 2016

repayment agreement amount is \$20.00 per month. The second debtor's repayment agreement amount is \$25.00 per month. Thus, \$20.00 is the amount that should be keyed in the PAYMENT AMOUNT field.

2. If you are entering from the DEBTOR DETAIL screen, press the function key. The REPAYMENT APPROACH **FNS** screen displays. The

debtor's current repayment agreement field automatically populates.

a. In the REFERRAL ID field, key the referral number associated to the claim. Press ENTER.

**NOTE**: If you do not know the code or value for a field, press F4. A list of codes or values displays. Key S to select the code/value. Press Enter. This field attribute is available only for fields that contains a + (plus sign) to the right of the field.

See Appendix B for listing of valid CLAIM CODES.

- b. In the PAYMENT AMOUNT field, key the amount the debtor pays each time a payment is made.
- c. In the PAYMENT METHOD field, key a method by which the debtor pays.
- d. In the DUE DATE field, key the date the debtor's first payment is due. This date cannot exceed two months.
- e. In the DATE SIGNED field, key the date the debtor actually signed the repayment agreement.
- f. Press F9 to save and update the repayment agreement. Based on the payment amount, the system automatically calculates the monthly NUMBER OF PAYMENTS.

NOTE: Press F11 if you want to calculate the number of payments before you press F9 to update/save the payment agreement.

g. To exit and return to the MAIN MENU, **press F3**. The MAIN MENU displays.

### H. Update Repayment Approach Information for FNS

1. If you are entering from the **CLAIMS MENU**, key 4 in the **ENTER OPTION** field and key the Referral ID in the Repayment Approach ID field. Press **Enter**.

To clear the repayment information, Press F2. The payment amount and number of months are automatically populated. The minimum payment amount is \$25.00. The number of months defaults to 36 months.

#### or

If you are entering from the **DEBTOR DETAIL** screen, **press F5**. The REPAYMENT APPROACH screen displays. The debtor's current repayment agreement automatically populates.

- 2. In the REFERRAL ID field, key the Referral ID. **Press** ENTER.
  - **NOTE**: If you do not know the code or value for a field, press F4. A list of codes or values displays. Key S to select a valid code/value. This field attribute is available only for those fields that contains a + (plus sign) to the right of the field.

See Appendix B for listing of valid CLAIM CODES.

- 3. The repayment approach agreement information displays.
- 4. Press F2 to clear the repayment information.
  - a. If the agreement has been voided, the method of payment field is voided. The system displays error message at the bottom of the screen: "FRDRAC NO UPDATE ACTION ALLOWED ON CLAIMS IN 'CL' OR 'TE' STATUS"
  - b. If the repayment agreement is not voided, a new repayment amount is calculated and displays based on a 36 month repayment period and the total balance amount for the claim. The minimum payment amount automatically calculates \$25.00.
  - c. If there is a "C" in the FED TAX INT IND field (certified for TOP); and if an attempt is made to enter, update or change the repayment agreement amount, the system displays error message at the bottom of the screen: "FRDRAC Claim has been CERTIFIED in TOP - NO more agreements allowed."
- 5. Key changes as needed. If no changes keyed, the system displays error message at the bottom of the screen: "FRDRAC NO CHANGES HAVE BEEN MADE TO THE RECORD, NO UPDATE PERFORMED".
- 6. To save the updates, **press F9.**
- 7. To exit and return to the **MAIN MENU**, press **F**3. The MAIN MENU displays.
  - a. The FED TAX INT IND and NC TAX INT IND fields are either populated with the tax intercept code or blank.
  - b. The INITIAL BALANCE **automatically populates** with the current balance of the claim entered and cannot be changed.

- c. The FREQUENCY field defaults to MONTHLY and cannot be changed.
- **d.** The # MONTH field defaults to 36 months and cannot be changed. This field can be changed to months greater than 36 by **State FNSEP**

Program Integrity staff after receiving a fax request on county letterhead for change due to hardship.

- e. The VOIDED DATE field is **automatically** populated and cannot be changed. This field **displays** the date a claim is voided; **displays in the repayment agreement field and displays the method** of payment as void on the history screen.
- f. If the claim has been voided, the system displays error message at the bottom of the screen: "FRDRAC RECORD HAS BEEN VOIDED, YOU MUST CLEAR SCREEN TO ADD A NEW AGREEMENT."
- g. The DATE ENTERED field defaults to the current date and cannot be changed.
- 8. **Press F12 to cancel** and display previous screens.
- 9. To exit and return to the **MAIN MENU press F3.** The MAIN MENU displays.

If one debtor defaults on the signed agreement, all debtors on the claim may be subject to tax intercept. The system automatically sends the combined FNS debt to TOP instead of on each individual debtor. Once a repayment agreement is VOIDED or the debt is certified for TOP, a new repayment agreement cannot be entered into EPICS.

### I. Repayment Approach History FNS Fields and Descriptions

Field	Description	Required	System Generated	Optional
Referral Id	10 digit number generated by the system upon creation of a referral	X	X	
Date Entered	10 character date (MM/DD/YYYY) the repayment information is entered	Х	Х	
End Date	10 character date (MM/DD/YYYY) agreement will end.	Х	Х	
Amount	Monthly amount to be paid	Х	Х	

Field	Description	Required	System Generated	Optional
Num Pay	Total number of months calculated to pay the claim in full.	Х	Х	
Repay Mthd	Method by which monthly payment is made.	X	Х	
Repay Date	10 character date (MM/DD/YYYY) when the payment was made	Х	Х	
Sign Date	10 character date (MM/DD/YYYY) when the debtor signed the agreement	X	X	

The REPAYMENT APPROACH HISTORY FNS screen displays current or past signed repayment agreements. This screen is 'READ ONLY' and is updated automatically when a repayment agreement is created or modified.

To display the REPAYMENT APPROACH HISTORY FNS screen, press F10. The screen displays.

FR95 NC DHHS -	ENTERPRISE	PROGRAM	I IN TE G	RITYCOM	ITROL SYSTEM	03/07/2016
FRDSHC R	EPAYMENT AF	PPROACH	HISTOR	YFNS	15: 59:48	
REFERRAL ID: 0000	)394863					
			NUM	REPAY		
DATE ENTERED	END DATE	AMOUNT	REPAY	MTHD	REPAY DATE	SIGN DATE
02-03-2016 20:02:56	02-03-2016	50.00	300	VOID	12-01-2015	00-00-0000
01-04-2016 00:00:01	02-03-2016	50.00	300	С	12-01-2015	00-00-0000
08-21-2013 00:00:03	02-01-2016	25.00	300	С	12-01-2015	00-00-0000
08-21-2013 00:00:02	02-01-2016	25.00	300	С	12-01-2015	00-00-0000

### X. EPICS HISTORY BY CASE HEAD

The *EPICS HISTORY by Case Head* feature provides you with a means of viewing all referrals associated with a specific individual ID for a particular Case Head. Utilizing this feature enables you to quickly access and verify an individual's list of referrals.

This screen is Read-Only.

### A. EPICS History By Case Head Field Descriptions

Field	Description	Required	System Generated	Optional
Individual ID	Unique ID associated to the case head payee of the referral	Х		
Name	Last name, suffix, first name, and middle initial of the case head payee		X	

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Field	Description	Required	System Generated	Optional
SSN	Case head payee's social security number		X	
DOB	Case head payee's date of birth		X	
Sex	Case head payee's sex		X	
S	The selection field for viewing the details for a specified referral			X
Referral ID	10 digit number generated by the system upon creation of a referral		X	
ST	The current status of the referral		Х	
Date	Date the referral was received		X	
Prog	Benefit program that the individual is currently receiving benefits		X	
OP Amount	Actual amount of overpayment against the claim		X	
Op Period from	Actual beginning date of the overpayment		X	
Op Period To	Actual ending date of the overpayment		X	
Balance	Current balance of the claim		X	
CAT	Code indicating the claim type		X	

### B. EPICS History By Case Head Function Keys

Function Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu
F4	To display a list
F7	To display the previous screen (Page Down)
F8	To display the next screen (Page Up)
F12	To cancel or return to the previous screen

### C. View List Of Referrals For A Case Head By Individual ID

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 1 in the **ENTER OPTION** field and press **Enter**. The EPICS HISTORY by Case Head screen displays.

FR33 FRD0330	NC DHHS - ENTERPRISE PROGRAM INTEG EPICS HISTORY BY CASE HEAD	RITY CONTROL SYSTEM	08/24/2004 11:24:53
			More:
INDIVIDUAL ID			
NAME:			
SSN: [	DOB: SEX: _		
REFERRAL S ID ST DA <sup>-</sup> -	OP OP PERIOD TE PROG AMOUNT FROM TO BA	LANCE CAT	
_			
_			
-			
-			
-			
-			
F1=HELP F3=EXI	F4=LIST F7=PREV F8=NEXT F12=CANCE	L	

- 3. In the Individual ID field, key the ID and press Enter. The referral information displays.
- 4. View the list of information.
  - **NOTE**: You may need to view multiple screens of referral history. To view the next screen of referral history, press the **F8** function key. Press the **F7** function key to display the previous screen of referral history.
- 5. Key an **S** in the selection field to the left of the Referral ID to view the Claim Detail screen of a particular referral. Press the F12 function key to return back to the EPICS History by Debtor screen.
- 6. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

### XI. EPICS HISTORY BY DEBTOR

The *EPICS HISTORY by Debtor* feature provides you with a means of viewing all referrals associated with a specific individual ID for a particular Debtor. Utilizing this feature enables you to quickly access and verify an individual's list of referrals.

This screen is Read-Only.

### A. EPICS History By Debtor Field Descriptions

Field	Description	Required	System Generated	Optional
Individual ID	Unique ID associated to the debtor of the referral	Х		
Name	Last name, suffix, first name, and middle initial of the debtor		X	
SSN	Debtor's social security number		X	
DOB	Debtor's date of birth		Х	
Sex	Debtor's sex		Х	
S	The selection field for viewing the details for a specified referral			Х
Referral ID	10 digit number generated by the system upon creation of a referral		X	
ST	The current status of the referral		Х	
Date	Date the referral was received		Х	
Prog	Benefit program that the individual is currently receiving benefits		X	
OP Amount	Actual amount of overpayment against the claim		X	
Op Period from	Actual beginning date of the overpayment		X	
Op Period To	Actual ending date of the overpayment		X	
Balance	Current balance of the claim		Х	
CAT	Code indicating the claim type		X	

### B. History By Debtor Function Keys

Function Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu
F4	To display a list
F7	To display the previous screen (Page Down)
F8	To display the next screen (Page Up)
F12	To cancel or return to the previous screen

### C. View List Of Referrals For A Debtor By Individual ID

- 1. From the **MAIN MENU**, key the number 3 in the **ENTER OPTION** field and press **Enter**. The CLAIMS MENU displays.
- 2. From the **CLAIMS MENU**, key the number 2 in the **ENTER OPTION** field and press **Enter**. The EPICS HISTORY by Debtor screen displays.

FR33 FRD0330	NC DHHS - ENTERPRISE PROGRAM INTEGRITY CONTROL SYSTEM EPICS HISTORY BY DEBTOR	08/24/2004 11:27:10
INDIVIDUAL ID	+	More:
NAME:		
SSN:	DOB: SEX:	
REFERRAL S ID ST DA	OP OP PERIOD TE PROG AMOUNT FROM TO BALANCE CAT	
-		
-		
-		
-		
-		
_		
_		
_		
-		
F1=HELP F3=EXI	IT F4=LIST F7=PREV F8=NEXT F12=CANCEL	

- 3. In the **INDIVIDUAL ID** field, key the ID and press **Enter**. The referral information displays.
- 4. View the list of information.
  - **NOTE**: You may need to view multiple screens of referral history. To view the next screen of referral history, press the **F8** function key. Press the **F7** function key to display the previous screen of referral history.
- 5. Key an **S** in the selection field to the left of the Referral ID to view the Claim Detail screen of a particular referral. Press the F12 function key to return back to the EPICS History by Debtor screen.
- 6. To exit and return to the **MAIN MENU**, press the **F3** function key. The MAIN MENU displays.

### XII. UTILIZING F4

If you do not know the code or value for a field, you can use the F4 function key, which will display a list of codes or values for selection. This field attribute is only available for those fields that contain a + (plus sign) to the right of the field.

### To Enter Field Details Using F4

- A. In the field that contains a + (plus sign) to the right of the field, key = (equal sign) and press the **F4** function key. The specific code list screen displays.
- B. To select a code or value, tab to the appropriate code/value in the **S** column and key s.
- C. Press **Enter**. The previous screen displays with the field populated with the selected code or value.
- D. Continue entering or updating the screen details.

#### XIII. NAME SEARCH

If you do not know the Individual ID of a person, you may use the Name Search feature

The Name Search feature is available on **any** screen where the Individual ID field has a plus sign to the right of it. Using this feature allows you to search for an individual when you only have a Social Security Number, Case ID, or Name, Sex, and DOB of a person.

Key	Description
F1	To access EPICS on-line help
F3	To exit and return to the Main Menu
F4	To clear the search criteria fields
F11	To display the Maintain Client screen
F12	To return to the previous screen

#### A. Name Search Function Key Descriptions

#### B. Search An Individual ID Using The Name Search Function

- 1. In the **INDIVIDUAL ID** field, key = and press **F4**. The NAME SEARCH screen displays.
- 2. Select a search method and key the appropriate information in the field(s).
- 3. To initiate the search, press **Enter**. The Name List screen displays with all records that match your search criteria.
- 4. In the **Sel** column, key an S in the field next to the appropriate individual and press **Enter**. The previous screen displays with the data from the search.
- 5. Continue entering or updating the screen details.