

# **DSS ADMINISTRATIVE LETTER NO. 4-2003**

## **(EPICS)**

**TO:** County Directors of Social Services

**ATTENTION:** Food Stamp Supervisors/Caseworkers

Medicaid Supervisors/Caseworkers

Work First Supervisors/Caseworkers

**DATE:** September 17, 2003

**RE:** Disqualification Detail Screen and DQ Offense Code

Debtor Detail Screen and Address Request Date

### **EFFECTIVE**

**DATE:** September 29, 2003

### **I. GENERAL**

As a result of changes made to the Disqualified Recipient Subsystem incoming and outgoing file layouts by USDA, changes to the Disqualification Detail Screen and County Detail Screen are necessary. Three new fields entitled 'DQ OFFENSE CODE', 'FAX NUM', and 'COMMENTS' are displayed on the Disqualification Detail screen. Two new fields entitled 'COUNTY FAX NUM' and 'COMMENTS' are displayed on the County Detail screen.

Also, USDA allows address requests for TOP every six months; however, some requests were being sent more than every six months. To prevent addresses being sent more than is allowed, a new Address Request Date has been added to the Debtor Detail screen.

Outlined below are instructions for each of these changes.

### **II. DISQUALIFICATION DETAIL SCREEN AND DQ OFFENSE CODE**

A. DQ OFFENSE CODE (Type of Offense Code). This 1 alpha character field is required when the PROGRAM Code is FS. Enter the appropriate DQ OFFENSE CODE for an ADD function. If the field is blank, enter the appropriate DQ OFFENSE CODE for a CHANGE function.

**Note:** No mass change was completed due to the high number of records that would be sent to USDA; therefore, any change made to an existing disqualification and the Program is FS, you must enter the appropriate DQ OFFENSE CODE.

1. If the PROGRAM Code is FS and no entry is made during the ADD function or the field is **blank** for the CHANGE function, the following error message is displayed:

**'MANDATORY FIELD DATA IS MISSING'**

2. If the PROGRAM Code is **not** FS and an entry is made in the DQ OFFENSE CODE field, the following error message is displayed:

**'DQ OFF CODE IS NOT ALLOWED, INVALID PROGRAM'**

3. If an invalid DQ OFFENSE CODE is entered, the following error message is displayed:

**'INVALID DQ OFFENSE CODE'**

4. The valid values for the DQ OFFENSE CODE field are:

#### **DQ OFFENSE CODE DEFINITION**

A Drug Trafficking Conviction Involving  
Less Than \$500

B Any Trafficking Conviction (including  
Drugs) Involving \$500 or More

C Firearms Trafficking Conviction Any  
Amount

D Trafficking, Administrative Finding

E Duplicate Participation

F Application Fraud, Including Non  
Report of Changes

Z Other Intentional Program Violations

B. FAX NUM (County Fax Number). The FAX NUM field is protected, displayed under CONTACT INFORMATION, and is populated with the information from the County Detail Screen.

C. COMMENTS. The COMMENTS field is protected, displayed under CONTACT INFORMATION, and is populated with the information from the County Detail Screen or from out of state disqualifications.

D. Disqualification Detail Screen - The new fields are displayed in bold.

FR15 NC DHHS - ENTERPRISE PROGRAM INTERGITY  
CONTROL SYSTEM 09/5/2003

FRD0150 DISQUALIFICATION DETAIL 09:35:17

SSN . . :111-11-1111 LAST ACTIVITY: ADD 04/26/2000

NAME . :DOE, JANE

ADDRESS : 325 N SALISBURY ST INDIVIDUAL ID:  
111111111 S

DATE OF BIRTH: 03/11/1979 SEX: F

WASHINGTON NC 27889 0000

--- DQ INFORMATION ----- REFERRAL  
INFORMATION -----

DQ STATE. . . . : NC REFERRAL ID . PROGRAM . :

DQ COUNTY . . . : 043 COUNTY CASE#: REF COUNTY:

DQ INVESTIGATOR . \_\_\_\_\_ PGM CASE ID : REF  
INVEST:

DQ COUNTY CASE# . \_\_\_\_\_ ----- CONTACT  
INFORMATION-----

XFER DQ COUNTY. . \_\_\_\_ FIPS CODE . : 0085

DQ NUMBER . . . . \_ + <KEY> OFFICE . . : DSS/DHHS  
STATE OF NC

**DQ OFFENSE CODE. \_+ TITLE . . . : PGM INTEGRITY  
INVEST**

DQ METHOD . . . . \_ + TELEPHONE . : 910 – 893 7500  
EXT:

DQ PERIOD . . . . \_\_\_ + **FAX NUM** : 910 – 893 7510

DQ DECISION DATE. 00/00/0000 <KEY> **COMMENTS :**  
**XXXXXXXXXXXXXXXXXXXXXXXXXX**

DQ START DATE . . 00/00/0000 **XXXXXXXXXXXXXXXXXXXXXXXXXX**

DQ END DATE . . . 00/00/0000 NON NC INFO :

F1=HELP F2=CLEAR F3=EXIT F4=LIST F5=XFER DQ  
COUNTY

F6=ADD F9=UPDATE F10=DELETE F11=KEY CHANGE  
F12=CANCEL

FRDQD0C MUST DISPLAY THE REFERRAL INFO  
BEFORE ATTEMPTING ADD A NEW DQ

### **III. COUNTY DETAIL SCREEN**

Two fields entitled 'COUNTY FAX NUMBER' and 'COMMENTS' fields are displayed on the County Detail Screen. These fields are optional. If entered, the data is also displayed on the Disqualification Detail Screen.

A. COUNTY FAX NUMBER. This is an optional field and allows a three digit area code and a seven digit number.

B. COMMENTS. This is an optional free form text field and allows up to 42 alpha/numeric characters.

C. County Detail Screen Layout – The new fields are displayed in bold.

FR17 NC DHHS - ENTERPRISE PROGRAM INTERGITY  
CONTROL SYSTEM 09/05/2003

FRD0170 COUNTY DETAIL 10:03:21

COUNTY: \_\_\_ + TEAM NUMBER:

COUNTY NAME:

COUNTY ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ NC \_\_\_\_\_ - \_\_\_\_\_

COUNTY TELEPHONE: \_\_\_\_ - \_\_\_\_\_ COUNTY EXT:

\_\_\_\_\_

**COUNTY FAX NUMBER:** \_\_\_\_ - \_\_\_\_\_

**COMMENTS:** xxxxxxxxxxxxxxxxxxxxxxx

xxxxxxxxxxxxxxxxxxxxxxxx

F1=HELP F2=CLEAR F3=EXIT F4=LIST F9=UPDATE  
F12=CANCEL

#### ***IV. DEBTOR DETAIL SCREEN AND ADDRESS REQUEST DATE***

A new field 'ADDRESS REQ' Date has been added to the Debtor Detail Screen. This tracks the 181 days since the address request was submitted to TOP. In addition to this new field, the FED TAX INTERCEPT IND has been renamed to TOP INTERCEPT IND and FED TAX INTERCEPT APPEAL IND has been renamed to TOP INTERCEPT APPEAL IND.

A. The 'ADDRESS REQ' date (MM/DD/CCYY) is displayed on the Debtor Detail Screen and is updated by the system when the TOP INTERCEPT IND is set to an 'A'.

B. The ADDRESS REQ date is protected and is removed when the system changes the TOP INTERCEPT IND from 'A' to 'B'.

C. The ADDRESS REQ date is removed by the system if on the 181<sup>st</sup> day the TOP INTERCEPT IND is 'A'. If all criteria are met, the system must again request an address. 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'.

D. The ADDRESS REQ date is not removed if the TOP INTERCEPT IND is changed by the worker from 'A' to 'H', 'S', 'L', or 'X'.

E. If the ADDRESS REQ date is present and the date is less than 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''**

F. If the ADDRESS REQ date is present and the date is 181 days or 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'**

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'.

G. Debtor Detail Screen – New and changed fields are displayed in bold.

FR35 NC DHHS - ENTERPRISE PROGRAM INTEGRITY  
CONTROL SYSTEM 09/15/2003

FRD0350 DEBTOR DETAIL 09:36:57

REFERRAL ID: \_\_\_\_\_ REFERRAL TYPE: \_\_\_  
REFERRAL STATUS: \_\_\_

NAME: \_\_\_\_\_

IND. ID: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB:  
\_\_\_\_\_ RACE: \_\_\_ SEX: \_\_\_

COUNTY: \_\_\_ PROGRAM: \_\_\_\_\_ CASE ID:  
\_\_\_\_\_ COUNTY CASE #: \_\_\_\_\_

REFERRAL DATE: \_\_\_\_\_ INVESTIGATOR ID:  
\_\_\_\_\_ LOI DATE: \_\_\_\_\_

60 DAY NOTICE: 00/00/0000

DEBTOR INFO:

INDIVIDUAL ID: \_\_\_\_\_ + SSN: \_\_\_\_\_

DOB: \_\_\_\_\_ SEX: \_\_\_ RACE: \_\_\_

PHONE NUMBER: \_\_\_\_\_ EXT: \_\_\_\_\_

NAME: \_\_\_\_\_

---

ADDRESS: \_\_\_\_\_

---

NC DEBT SETOFF: \_\_ + DELETE REASON CODE:  
 \_\_\_\_\_ +

**TOP INTERCEPT IND: \_\_ + TOP INTERCEPT APPEAL  
 IND: \_ +**

**ADDRESS REQ: \_\_\_\_\_ FS APPEAL IND: \_ +**

F1=HELP F3=EXIT F4=LIST F5=REPAY F6=ADD F9=UPD  
 F10=DELETE F11=CLIENT F12=CANCEL

FRDDD0S PERSON PHONE LIST IS EMPTY

G. Mass Update of the ADDRESS REQ Date

1. TOP INTERCEPT IND

For existing claims, no change was made to the TOP INTERCEPT IND code that is currently displayed in the field.

2. ADDRESS REQ Date

For existing claims, if the TOP INTERCEPT IND is 'H', 'S', 'L', or 'X', the ADDRESS REQ Date is not populated.

For existing claims, if the TOP INTERCEPT IND is 'A', the ADDRESS REQ Date is populated with September 29, 2003.

3. A one time report entitled 'CLAIMS UPDATED WITH ADDRESS REQ DATE', report number FRD902 has been created to identify those claims that were updated with the ADDRESS REQ Date. No hardcopy of the report has been created. The report is displayed in NCXPTR under the name:

**DHRFRD FRD902 CLAIMS ADDR REQ DT**

The report displays:

County

Investigator ID Number

Referral ID Number

Program Code

Casehead Name

Casehead Individual ID Number

Debtor Name(s)

Debtor Individual ID Number (s)

Address Req Date

The report is sorted by county, investigator ID number, and in alphabetical order,

If you have any questions, please contact DSS Automation at (919) 733-8938.

Sincerely,

Hank Bowers, Chief

Performance  
Reporting/Automati  
on

HB/BA