




The case line at the bottom of the Participant Case Summary screen must be closed when it is determined no further Division of Senior and Disability Services (DSDS) action on behalf of the potential or current participant is needed and the associated adverse action process has been completed. For example when:

- The level of care is not met at either prescreen or (re)assessment;
- There is no longer a need for services;
- Services were allowed to expire;
- The participant is unable to be located;
- The program requirements are not met, e.g. unable to self-direct, no longer eligible for Money Follows the Person (MFP);
- The participant has withdrawn their request for HCBS;
- Medicaid eligibility no longer covers HCBS; and
- A case has been opened only for the purpose of uploading documents.

The case closing function is **not** automated; therefore, staff must utilize the 'Close Case' icon  in the associated case line on the Participant Case Summary screen to complete the case closing and take the necessary actions on current prior authorizations.

Log In

<https://www.cyberaccessonline.net/CyberAccess/Login.aspx>


Use your assigned User Name and Password.

Review the End User License Agreement and select 'I Accept'.

Search

- Enter the participant's ID (DCN) and birth date or last name in the 'Search for Participant' panel and select 'Search'; or

Select the participant from the 'Site Patients' panel. Participants **only** display in the panel when a user from the same 'practice' and 'site' have searched, from the CyberAccess Home screen, for that participant within the last 90 days.

Note: An additional participant specific search feature is available within the screens of the HCBS Web Tool by selecting the  at the top right of each screen Utilizing this search

navigates the user to the Participant Case Summary screen for the newly selected participant and closes the record for the current participant. Utilizing this search feature is the preferred method to access another participant's record.


MO HealthNet Demographics Screen

This information is populated from the Missouri Medicaid Information System (MMIS) and can only be changed by contacting Family Support Division.

Select 'HCBS' from the dropdown box on the screen menu bar labeled HCBS to navigate to the Participant's record.

Participant Case Summary Screen

Demographics

Updates to the Demographics may be completed as necessary. If updates are made, select 'Save' .


Physician Information

Updates to the Physician information may be completed as necessary.


Eligibility

The Eligibility sections will display information for the current date. Medicaid eligibility in the HCBS Web Tool may not reflect 'real time' information, as updates to the system require an overnight transaction.


Other Information

Other information may be edited. If updates are made, select 'Save' .

Case Items

Select the 'Close Case' icon  in the Case Items section for the case line to be closed.

A pop up box will display.



- Select a Close Date from the calendar function. Date selection cannot be more than 60 days in the past or more than 30 days in the future;
- Select the reason for the case closing from the drop down box; and
- Select 'Save' .

Note: Within the pop up box a message displays 'Ensure all prior authorizations have been ended' as a reminder to close any current Prior Authorizations.


The case will be closed.

The case line now displays the closed date, the user and the reason for the closing.

To close a current posted Prior Authorization – Care Plan

- Select the  to expand the Case Items for the closed case.
- Find the posted Prior Authorization – Care Plan to be closed from the case items list and select the  to navigate to the Prior Authorization (header) screen.



Prior Authorization (Header) Screen

- From the ‘Prior Authorizations’ on the menu at the top of the screen, select ‘End Date the PA’.
- A pop up box will be displayed.
 - Enter the appropriate end date (end dates cannot precede the current calendar date.)
 - Select ‘Save’ .


Note: The save selection automatically submits the prior authorization to the MMIS.

- The pop up box will close. The Prior Authorization will display the new end date.


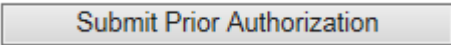
To close a current pending Prior Authorization – Care Plan

- Select the  to expand the Case Items for the closed case.
- Find the pending Prior Authorization – Care Plan from the case items list and select the  to navigate to the Prior Authorization (header) screen.

Prior Authorization (Header) Screen

- From the menu at the top of the screen select ‘Go to Prior Authorization Line Item Detail’.
- Select the  for each line of service.

Prior Authorization Line Item Detail

- Change the status to ‘Denied.’
- Select ‘Save’ .
- After all lines of service have been denied, navigate to the Prior Authorization (Header) screen and select .
- The Prior Authorization – Care Plan will display the status of denied.

Note: Case Notes shall thoroughly document all participant related actions/contacts/Adverse Action process necessary to close the participant’s HCBS case. Any attachments related to the closing shall be uploaded in the Attachments section of the Case Activity screen.