CEP Payment Troubleshooting Guide

Common reasons why an authorization may not occur:

New Authorization:

- The provider number is not active for any part of the authorization period.
- There is a benefit mismatch between the ONE system and Oregon ACCESS (OA). For example, the ONE system has a MAGI medical TOA, however the approved benefit in OA states it is APD (OSIPM benefit).
- The provider is restricted and may not be permitted to work for the consumer.
- The authorization is exceeding the maximum number of hours allowed for the consumer.
    - End or modify ONGO authorizations for other HCWs as needed.
    - Confirm hour authorization is correct.
    - Verify if an exception has expired.

ONGO Expired (and a new authorization can't be completed):

- The consumer's benefit has ended in OA, which is usually due to a need for a new assessment.
    - It is important to ensure that assessments are completed timely with a new benefit authorized before the end of the payment pay period (assuming the consumer is still eligible). If this is not possible, an admin extension is needed (along with an exception extension, if appropriate), however this needs to occur before the end of the pay period.
    - Apart from the EWE program or modified service plan approvals, the consumer's benefit in OA will match the authorization in the mainframe (MF) screen SELG.

    • If the benefit has not ended in OA, a new voucher and ONGO authorization is needed.

ONGO authorized, however the voucher is suspended (per MF screen SVCH):

- The provider number has been inactivated or is terminated (this may not be an admin error).

CEP Payment Troubleshooting Guide

- There is a benefit mismatch between the ONE system and OA. For example, the ONE system has a MAGI medical TOA, however the approved benefit in OA states it is APD (OSIPM benefit). This commonly happens when a service TOA needs to be changed in the middle of a pay period.
- A payment rate change has occurred in the middle of a pay period.
- The consumer has failed to make a pay-in.
- If the consumer fails to make the pay-in by the end of the month, a voucher will need to be prorated and issued through the end of the month only.

Special Considerations for Service TOAs (LTCSERV, MSERV, NMAGISERV):

- Service TOAs need to have ongoing benefits approved in OA (which is sent to SELG) for this TOA to stay in place. If a benefit is not reauthorized timely, the service TOA will end.
    - When eligibility in ONE is run (due to a reported change, renewal, or mass update) it will evaluate service TOAs as follows:
        - On or before the 15th: ONE will check the SELG record (which is generated by an approved benefit in OA) for the current month and the following month. If there is no SELG record for any part of that time, the service TOA will end.
        - After the 15th: ONE will check for the SELG record (which is generated by an approved benefit in OA) for the current month, next month, and the month after that. If there is no SELG record for any part of that time, the service TOA will end.
    - ONE has a daily batch process that looks to see if an SELG record in ONE has an end date that day. If so, the system will conduct a new eligibility determination.
    - If an LTCSERV TOA has ended and needs to be renewed, approve a new OA benefit for the SELG record, followed by running eligibility in the ONE system.

CEP Payment Troubleshooting Guide

- **Common error codes and suspense reasons (which may display when attempting to issue a voucher or it is suspended per SVCH)**
- ****It is strongly recommended to review the SVCH screen a few days prior to the start of an upcoming pay period to resolve any issues**

Code	Suspense Reason Displayed	Issue and How to Resolve
JH017	This provider no longer valid?	The providers credentials are no longer valid. PRV8,Provider# will show the providers record or the provider panel in OA may be viewed. Vouchers cannot be issued to the provider until they have valid credentials.
A84	No SVC CAT FOUND FOR SERV	This typically means that there is no approved service benefit in OA.
008	RECIPIENT NOT ON FILE	This usually means there was a change in the medical TOA, for example the individual went from MAGI to OSIPM. Confirm the date of the change, then authorize a new service benefit in OA to match the date, then split the voucher. For example: The individual started receiving SSI on March 1. Previously, the individual was receiving MAGI medical benefits (ADLT), however was converted in ONE to SSIR (OSIPM medical). The steps taken are: - End KPS In-home on 02/28/2021 - Start APD In-home on 03/01/2021 - Split the voucher so that the first one ends on 2/28/21 and the next one starts on 03/01/21.

CEP Payment Troubleshooting Guide

006	PROVIDER INELIGIBLE ON DATE	The provider's credentials expired during the service authorization period. PRV8,Provider# will show the providers record or the provider panel in OA may be viewed. Vouchers cannot be issued to the provider until they have valid credentials.
A89	PERC/SVCCAT/PROC/CASE DESC	This message may display if the benefit has changed in the middle of the pay period. Check if the approved benefit in OA still correct.
A64	AUTH DENIED, CLIENT INELIG	The consumer has not made their pay-in. If the consumer pays by the end of the month, the system will issue the voucher. If the consumer does not pay by the end of the month, a pro-rated voucher is needed through the end of the current month.
A87	PROC/CLI ASMT INVALID W/EL	Procedure code/client assessment invalid with eligibility record. As an example, a consumer who transitions for regular in-home services to SPPC will have a change in coding from APD to BPA. This change must be reflected in both the medical case and the voucher.
503	Suspected duplicate voucher	The system has located a voucher for the same HCW/Consumer combination for the same period. Determine if the voucher that was already issued is correct or if it needs to be voided and reissued with a different number of hours.
A92	BREAK IN ELGR STATUS	The eligibility for services has ended for the consumer. If the benefit is correctly ended, ONGO needs to be ended.

CEP Payment Troubleshooting Guide

P238	Restricted Prov. may not	The provider is restricted to only work for a specific consumer. The prime number of the consumer on the voucher attempting to be issued does not match the prime number of the consumer(s) the provider can work for.
P331	PDC/CPR no longer valid f	The provider had previously been receiving an hourly differential for maintaining a PDC/CPR certification. That certification expired during this pay period and must be updated for differential to be reflected on the voucher. If the credential is not being updated vouchers must be prorated for the time prior to the expiration and then after. For example, if the credential expired 12/31/2019 for the pay period that ended 01/04/2020, there would need to be two vouchers created, the first for 12/22/2019 – 12/31/2019 and the second for 01/01/2020 –01/04/2020.
A04	Hours/Wages/Mileage is inv	The service code used on the voucher does is not valid for the medical program that is currently coded. For example, the consumer changed from OPI to APD. When this occurs, the current ONGO should be ended and a new ONGO created.