

| Old Code | ACTION ITEM CODE | SHORT DESCRIPTION | LONG DESCRIPTION | WHY WAS THE ACTION ITEM CREATED | WHAT WORKER ACTION IS REQUIRED |
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| 315 | 1 | FS Child With Earnings Turning 18 | {NAME} turns 18 and has earnings. Redetermine FS eligibility and ABAWD Status. | This action item is created on the first Friday of the month in which the child turn 18 for FoodShare when a child in the AG has earned income. | Verify the income and re run eligibility to count the income for FS and determined ABAWD status. |
| 56 | 2 | Initiate Eligibility | Initiate Eligibility | This action item is created for all programs immediately when a change is made that may affect eligibility. The generate summary page is scheduled, then Initiate eligibility. | Initiate eligibility, review the results, make any changes as needed and confirm the results on the confirm eligibility page. |
| 383 | 3 | Medicare Information Updated | {NAME} Medicare updated and no MSP request. Determine elig for MSP. | The SSA data exchange updated information on the Medicare page, there is a health care request, and MSP is not open or requested. | Review the Medicare page and update the MSP request to Y if the member is requesting HC and is also receiving Medicare. Pend for asset information and send manual letter if the member is a new Medicare enrollee. |
| 74 | 4 | Confirm Eligibility if the Results are Correct | Confirm eligibility if the results are correct. | A change was made to the case, eligibility was run, and at least one program can be confirmed. | Review the results and confirm if correct. |
| 75 | 5 | Case Transfer in to New County | Case transfer in to a new County. | The case was transferred to a new county. The case is assigned to the agency transfer coordinator listed on table TCRD. | The transfer coordinator reassigns the case. Select 'Transfer Case' from the Case Summary page to navigate to the Agency Transfer page. Or, use the Caseload Assignment/Search Criteria page to transfer the case. Transfer the case following agency process.. |
| 76 | 6 | Verification Due Date is Approaching | Verification due date is approaching. | This action item is created to assist agencies in managing future workload. The due date for pending verification is approaching. The action item is created on Friday for cases with a verification due date or extended due date in the next 4-10 days. If verification is not received, take negative action based on the program's policy. | When verification is received, update the case and determine eligibility. |
| 77 | 7 | Verification Past Due | Verification is past due. | At least one program is pending for verification information and the verification due date or extended due date is in the past. | If verification is received, update the information and select the applicable verification code. If verification has not been received, for mandatory verification items, select NV for the verification code or QV when verification requested was questionable and run eligibility. Review the eligibility results and confirm all programs on the Confirm Eligibility page. |
| 78 | 8 | Expected Change Due | Expected change is due. | This action is created for all programs when a future expected change was entered on the Expected Change page. This action item displays on the due date the worker entered. | Follow up on the change and take needed action. |
| 406 | 9 | DRUG PENALTY INFO HAS CHANGED | DRUG PENALTY INFO HAS CHANGED | This action item is created when FS Drug Penalty Information has changed. | Review the FS Drug Penalty Information. |
| 110 | 10 | Pregnancy Due Date Passed | Pregnancy due date is in the past. | The pregnancy due date is in the past. The action item is created 1 month after the pregnancy due date. | Attempt to contact the member to confirm the pregnancy end date. If the worker is unable to reach the member update the Pregnancy Verification Due Date verification field to Q? pend MAGP. If verification is not received, update to QV, run eligibility and confirm MAGP closed. |
| 115 | 11 | Good Cause Claimed for non coop with CSA past due | A good cause claim for non coop with the Child Support Agency was requested at least 45 days ago. | This action item is created for all programs when an individual claimed good cause to not cooperate with the Child Support Agency at least 45 days ago. A good cause decision should be made within 45 days of the request. | Select a decision for Good Cause Granted and select an entry for the Good Cause Result field on the Absent Parent page. |
| 471 | 12 | Resolve SSN/Income Discrepancy | Resolve SSN/Income Discrepancy | CARES generates this action item when an SOLQ-I discrepancy for SSN or income verification (not related to Medicare) is set. CARES sends the action item to the W-2 worker if they are not the primary worker on the case. | Review the SOLQ-I action item, confirm the correct SSN or income details. |
| 328 | 14 | Child 6 Months old no SSN | CTS Child 6 month old, no ssn request ssn. | A newborn in an open CTS AG is turning 7 months old in the following month and doesn't have an SSN. | Request the ssn or proof that an ssn has been applied for. Enter an SSN Application Date with a ? In the verification field. Run eligibility to send a VCL. Add text that to notify the member that they may also contact the agency and provide the SSN. |

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| 336 | 15 | BC+/CTS/KBM/FPS Indiv. Turns 19 Run Eligibility | BC+/CTS/KBM/FPOS Individual Turns 19. Initiate eligibility to end health care on this case. | A member who is included in BadgerCare Plus or Katie Beckett Medicaid or CTS or Family Planning Only Services is turning 19 and is no longer eligible on this case. This action item is created between the 22nd and the 28th of the month prior to the birthday month. For KBM, it is created 2 months prior. | Run eligibility, review the results and confirm. |
| 342 | 16 | Unemployment Income Received in Another State | Potential unemployment income received in another state for {NAME}. | The Interstate Unemployment Conflict Benefit match is run against a national database monthly and lists individuals receiving benefits in Wisconsin who do not have Unemployment Income (UI) listed in CWW but may be receiving UI in another state. Action items are created when no UI income is entered in or the amount entered is less than the UI in CWW by \$100. | Redetermine if the income is already known or reported or was it not relevant to the case (example: received prior to applying). If unreported, the worker can access Control D report CD70 for match details, and the form that can be sent to the other state when requesting information of the out of state UI received. |
| 347 | 17 | Child Care Provider on a FoodShare Case | Child Care provider {NAME} in FoodShare AG. Review earned/self-employment income. | The action item is created the first Friday of the month the FS renewal is due when a FS member is a licensed, certified or provisionally certified Child Care Provider Portal. | Determine if self-employment income has been reported. The CCPP system displays authorizations and payments to the provider, but it may not include all self-employment income received by that provider. Follow up with the member to verify income. |
| 428 | 18 | DDB Reversal of Approval Decision | {NAME} was approved by DDB for disability. Decision reversed. | A previous approval for the disability status at application or redetermination has been reversed and DDB is now denying the individual's disability status. The disability status on the Disability page is updated. | Run eligibility, review the results and confirm health care determination. |
| 349 | 19 | Eligibility not Determined at Adverse Action | Eligibility not run at mass change or AA. Run Elig and confirm to determine ongoing benefits. | This action item is created for all programs when a case was not able to be processed at mass change or adverse action because it exceptioned off. These are the cases are on the Control D exception report, C306, or the monthly mass change report, C307. These are cases with overrides, those with person adds/deletes that haven't been confirmed, FS cases closed less than 30 days, and AG's in pend status. Workers must run eligibility and confirm benefits or the cases will continue to exception off and benefits may continue in error. | Run eligibility and confirm after reviewing the eligibility determination. If the case is not run and confirmed before adverse action, the worker must run eligibility with the recurring month(s) date to redetermine correct benefits for any months impacted. For FS cases, issue a supplement, or create an overpayment claim based on the correct eligibility. |
| 369 | 20 | SSA DX Income Updated Discrep Exist | SS DX income updated for {NAME} and discrepancy exists. Review and update income. | This action item is created for all programs. The Social Security data exchange auto-update process adds together the net SS income of all SS income types on the Unearned Income page(s) the Medicare premium amount on the Medicare page, and any SS recoupments. These 3 amounts are also displayed on the SSA Benefit and Medicare Details page. The total is matched against the gross SSA income on the BENDEX file. If that total does not match, there could be a discrepancy (possible garnishments taken SS income for child support, back taxes, etc.). When the amounts do not match, the Unearned Income page is updated with the net amount and the action item is created. | Contact SSA to determine the reason for the discrepancy. Update the case as needed. |
| 373 | 21 | Potential Benefits Received Other State | Potential benefits received in another state for {NAME}. Review case. | This action is created for all programs when an individual person may be or is receiving public assistance benefits in another state. | Determine whether or not duplicate benefits have been issued in another state. The state with the duplicate benefits is listed on the SSA Details page. Enter the primary person's pin the DX Query option to view SSBC Potential Duplicate Benefits in Another State to determine in which state the potential Duplicate issuance occurred. |
| 379 | 22 | SSA DX Reports Railroad Retirement | {NAME} SSA DX RR income no auto update. Verify and update unearned income page. | This action item is created for all programs. The SSA data exchange reports that there is a Railroad retirement benefit for an individual in the AG. No automatic updates occur. | Request verification of RR benefits. Add or update the Unearned Income page and Medicare page as required. |
| 418 | 23 | Case in Renewal/Review Mode More Than 30 Days | Case in Renewal/Review mode more than 30 days. Complete the renewal. | This action item is created for all programs when the case has been in renewal/review mode for more than 30 days. | Complete the renewal/review. |
| 423 | 24 | No Decision Received from DDB | {NAME} DDB No decision from DDB. Review DDB worksheet in ECF and correct. | A 'No Decision' response sent by DDB means that DDB was unable to make a decision on the application or redetermination that was sent. DDB completes a Disability Determination Worksheet with notes explaining why the determination couldn't be made and what information is needed. | Access the ECF and review the notes on the worksheet from DDB. Make corrections as needed and re-send the application or redetermination to the DDB. |

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| 424 | 25 | DDB Approval Decision Received | {NAME} DDB approval decision received. | This action item is created for SSI related Medicaid when approval of a disability application or redetermination was received from DDB. The disability status on the Disability page was updated. | Run eligibility, review the results and confirm health care eligibility. For applications, determine all months of the application period, including any backdate months. |
| 425 | 26 | DDB Denial Decision Received | {NAME} DDB denial decision received. | This action item is created for SSI related Medicaid when an application or redetermination for the disability status was denied by DDB. The disability status on the disability page is updated. | Run eligibility, review the results and confirm health care determination. |
| 426 | 27 | DDB Approval Onset Date Change | {NAME} DDB approval onset date change. Redetermine health care elig as required. | This action item is created for SSI related Medicaid when the disability onset date changed. | Review the information on the Disability page to make sure there is health care eligibility from the new onset date. |
| 427 | 28 | DDB Reversal Approval Received | {NAME} DDB reversal approval received. Redetermine health care eligibility. | A previous denial for the disability status at application or redetermination has been reversed and DDB is now approving the individual's disability status. The disability status on the Disability page was updated. | Redetermine health care eligibility for all appropriate months, including backdated months. |
| 429 | 29 | Review DDB Documents in ECF | {NAME} DDB documents in ECF need review and corrections to send DDB referral. | This action item is created for SSI related Medicaid when DDB cannot make an initial determination or a redetermination until all forms required are in the ECF and scanned correctly. | Check the ECF and scan any missing documents. Refer to the Automated Disability Determination chapter of PH. |
| 466 | 30 | Citizenship/ID No SSA Response Received | Cit/ID resp not recvd from SSA DX for one or more indiv. Verify another way or request verifc. | This action item is created for all programs when the the SSA is unable to verify citizenship/identity. | Try to verify those items with other sources available (ie: birth query, DMV checks, etc.). When unable to verify, for Non MA/BCP programs, must update the citizenship/identity fields to ? or Q? and run eligibility to pend the appropriate programs and generate a verification request for citizenship/ identity. MA/BCP programs will pass and the Notice of Needed Proof is sent. |
| 464 | 31 | Cit/ID Verif not Received From SSA DX | Cit/ID resp not recvd from SSA DX for one or more indiv. Verify another way or request verifc. | The action item is created for all programs when the state did not receive a citizenship/ID DX verification response from SSA within 3 days. | Try to verify those items with other sources available (i.e.: birth query, DMV check, etc.). If the information cannot be verified for Non MA/BCP programs, update the citizenship/identity fields to ? and run eligibility to pend the appropriate programs and generate a verification request for citizenship/identity. |
| 496 | 32 | New CC IPV Info | New CC IPV Info | A Program Integrity worker entered new CC IPV information. | Run and confirm eligibility to allow the CC IPV to end eligibility. |
| 467 | 33 | Cit/ID Exempt for HC Verify Other Programs | Cit/ID requirement exempt for health care, must verify for non health care programs. | This action item is created for non MA/BC+ programs when the person for whom citizenship/identity was requested is exempt from the verification requirements for MA/BC+. The citizenship/identity information is not automatically updated for the non BC+/MA programs. | Run eligibility. |
| 503 | 34 | Indiv on Health Care Turns 65, Redetermine EBD MA. | {NAME} on health care turns 65. Redetermine EBD MA. Process Help 44.3.3. | This action item is created for SSI Medicaid the last Friday of the month for before an individual on the case is turning 65 years old. | If the member that is turning 65 is requesting HC, pend for asset information to test for EBD MA and send manual letter. See PH Social Security (SS) Information for more processing instructions. |
| 507 | 35 | FS IPV Deleted Run Eligibility | Another state deleted FS IPV for {NAME}. Initiate elig. restore benefits as needed. | This action item is created when a FoodShare IPV is entered by another state and then deleted that was previously entered in eDRS. | Workers must re determine FoodShare and restore benefits if appropriate. |
| 510 | 36 | Update FS Clock Status | TB clock not updated, review and update clock. Potential Overpayment. | This action item is created for FoodShare when a 'TB - To Be Determined' status remains on a members FoodShare Clock for a month in the past. This occurs when the system was unable to determine the correct FS Clock status value. | Check the case for individuals whose clocks have the 'TB - To Be Determined' status or 'AF - Active in FSET' status that did not update. If the TB status did not update, review the case to determine what the correct status is then update accordingly and recoup any over-issuance. If the AF status did not update Because the individual did not meet their work requirement for that month, recoup the over-issuance. |
| 512 | 37 | FS Interview Due | FS interview due, run eligibility. | A FoodShare interview is due. | Update the FS Interview Type to N on the Interview Details page, run eligibility and confirm the FS failure. |
| 513 | 38 | FS Interview Past Due | FS interview past due, run eligibility. | The FoodShare interview due date is past due. | Update the FS Interview Type to N on the Interview Details page, run eligibility and confirm the FS failure. |

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| 514 | 39 | National New Hire | {NAME} National New Hire match received. | This action item is created when a FoodShare and Child Care when The National Directory of New Hires (NDNH) has matched employment from another state for an individual receiving FoodShare or Child Care in Wisconsin. | Review the National Directory of New Hires in the Federal Data Matches Section on the Employment Queries page and compare the information to reported employment. Make any changes following the program's policy. |
| 517 | 40 | RC test; Send employment VCL | Reasonable Compatibility test failed at batch. Initiate eligibility to send a VCL. | This action item is created for health care whenever any individual in the case who has not verified income but was reasonably compatible fails the reasonable compatibility test at batch processing. | Run eligibility and send a request for verification for health care. This prevents closing health care for lack of verification before providing the member with the opportunity to verify reported income. |
| 432 | 41 | Check Health Care Elig and Recertify | There is a mismatch of health care eligib for {NAME} between CWW and iC. | This action item is created for all health care Ags. The CARES eligibility end date is beyond the eligibility end date in IC. There may be eligibility missing in iC. | From the Individual Summary page select 'Resend Eligibility Info to MMIS' to update to IC. |
| 522 | 42 | Automated Case Process Follow-up | ACP case requires follow up. Click ACP Status on the Summary page to determine action needed. | Automated Case Process Follow-up. | Click ACP Status on the Summary page to view the follow up and take action needed. |
| 530 | 43 | Admin Renewed Case Summary not Generated. | Administrative renewal process failed to Generate a Case Summary. See help text. | This action item is created for health care and FoodShare. The Case Summary did not generate with the Admin Renewal letter during the Administrative Renewal process. | Send the Case Summary to the household. 1. Navigate to the Generate Summary page to generate and print a case summary 2. Select the R-Worker Generated PPRF signature type and the PS-Print Summary option 3. Print the summary 4. Navigate to the Correspondence History Search Results page 5. Locate the letter titled CMAN-ADMIN RENEWAL-NOPPRF 6. Click the magnifying glass to view the letter and print the letter 7. Mail the PPRF and the letter to the member together 8. Document the actions in the case comments. |
| 533 | 44 | New/Updated FSET Employment | {NAME} Employment was updated in the FSET Tool. See help text. | To notify workers when employment is added or updated within the FSET tool. | Research the individual's case and take action as appropriate. This may include no action, building an employment page, updating information on an employment page, and/or requesting verification. |
| 538 | 45 | Eligibility not Determined at Adverse Action | FS eligibility not run at mass change or AA. Run eligibility and confirm ongoing benefits. | The FS AG in this case didn't go through mass change or adverse action because it exceptioned off. These are cases with individuals entered as 15-OUT OF HOME or person adds/deletes that haven't been confirmed. | Run eligibility and confirm when the FS determination is correct. If eligibility is not and confirmed before adverse action, re run eligibility with the recurring month's date. For FS, issue a supplement or create an overpayment claim based on the correct eligibility for the month. Check to ensure the correct FS certification period has been set. |
| 545 | 46 | Initial AVS Response Received | Initial AVS response received. View Asset Match page for {NAME} and take action. | This action item is created for EBD MA/MSP/LTC AGs to notify workers that information from AVS is available for worker processing. | This action item is created for Review information received from AVS on the AVS Asset Match page. Use this information as appropriate to verify assets using the DE-Data Exchange verification code. Request verification from member for any liquid assets that could not be verified by AVS. This action item is also created 10 days have passed and no asset information has been returned from AVS. |
| 546 | 47 | Additional AVS Response Received | Additional AVS response received. View Asset Match page for {NAME} and take action | This action item is created for EBD MA/MSP/LTC AGs to notify workers that more information from AVS is available for processing. | Process asset information received from AVS. If the case is still pending verification of assets, use AVS information as appropriate to verify assets using the DE-Data Exchange verification code. If the case has been confirmed open, process information from AVS as a change report. Keep in mind that the information returned from AVS is as of the first minute of the first day of the balance month. If the information returned from AVS is more recent than the verified information on file, the AVS data should be considered verification of a change. If the information on file is more recent than the AVS data, workers may disregard the information returned by AVS. |

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| 547 | 48 | AVS Request Failed Incorrect VCL Sent | AVS request failed for {NAME}. Update verification to Q? to send a VCL. | This action item is created for EBD MA/MSP/LTC AGs. Because the AVS process failed, the VCL incorrectly states that member action is not needed. | Request verification of any AVS liquid assets from the applicant or member. Update the verification fields for the asset type and balance from ? to Q? and run eligibility to send a new verification checklist (VCL). |
| 548 | 49 | Date of Death Received Run Eligibility | Date of death received, run eligibility. | This action item is created for health care and CTS when the date of death match received from a data exchange is now verified and there are surviving members of the household. This action item is created when a date of death from Vital Records is verified on receipt, or when a date of death from an SSA Data Exchange has not been refuted after 10 days. | Eligibility must be redetermined for the case. Review the case and make any necessary updates. Depending on the composition of the case and which member is deceased, workers may need to update the tax filing details, expenses, assets, etc. Run eligibility, review the results, and confirm benefits if correct. |
| 553 | 50 | Confidential Companion Case Status | Check if case should be confidential based on a companion case that is confidential. | The action item is created for the IM worker assigned to a non confidential case that includes a person who is also on a case that is made confidential by a different worker if the companion case(s) is open or closed for less than a calendar month. | Review the case to determine if this case should also be made confidential. |
| 562 | 51 | MAGY Individual Turns 26 | MAGY individual turning 26. Initiate eligibility to redetermine health care eligibility. | This action item is created when a MAGY eligible individual is turning 26 within 30 days from the date the action item was created. | What worker action is required? Run eligibility and re-determine the BadgerCare Plus eligibility. |
| 563 | 52 | Mass Case Transfer Sample Ready for Review | Review the mass case transfer sample requested. | The action item is created for the requestor of a Mass Case Transfer to review a sample of cases requested and validate the sample meets the criteria for a transfer. | Review the sample cases selected and take required action for the requested Mass Case Transfer. |
| 564 | 53 | Mass Case Transfer Request Complete | Mass case transfer sample completed. | The action item is created when the Mass Case Transfer is complete. | This is an informational action item to notify the worker the transfer was successful. |
| 565 | 54 | Send Manual NOD | Send Manual Notice, NOD not created. Eligibility confirmed for more than 12 months. | Because eligibility was confirmed for more than 12 different months in one day, a Notice of Decision cannot be sent. This may happen when adjusting FoodShare benefits, determining CTS retroactive benefits, etc. | Review the case and send a manual Notice. Suppress the existing system generated Notice of Decision on the Correspondence Suppression Search Criteria. If this action is not completed, future notices will not be sent. |
| 567 | 55 | Divestment Ending. Run Eligibility | Divestment ending, run eligibility, review and confirm. | This action item is created for institutional Medicaid when eligibility needs to be run in order to open long term care benefits and establish a patient liability. | Run eligibility, review and confirm the results. |
| 570 | 56 | Pregnancy Ended Run Eligibility | Pregnancy ended. Run eligibility. | This action item is created the Friday after AA the month after the pregnancy end date, the month prior to MAGP ending. This action item is only created when there is another non-time limited health care benefit open with a future renewal date. The case must be run online in order for CWW to create a new AG. | Re-run eligibility to determine ongoing benefits. |
| 571 | 57 | BC+ Extension or MAGD Met Deductible Ending | BC+ Extension/MAGD met deductible ending. Run elig to redetermine health care eligibility. | This action item is created BadgerCare Extensions (MAGM, MAGE and MAGD-met deductible) the Friday after adverse action in the month prior to the month the BadgerCare extension ends. This action item is only created when there is another non-time limited health care benefit open with a future renewal date. | Run eligibility to redetermine health care eligibility for the pregnant individual. |
| 576 | 58 | Complete Remaining Deductible Form (MAEF) | Complete Remaining Deductible Form (MAEF) | This action item is created for NS, NP, MAG D, MAG P AGs to prompt the workers to complete the MAEF form. | Click 'Export to PDF on the Remaining Deductible Update Information (MAEF) page to automatically clear the action item. |
| 577 | 59 | Redetermine Deductible Amount | Redetermine deductible amount, date of death verified. | This action item is created for Unmet and Met Deductible AGs -NS, NP, MAG D, MAG P) to prompt the workers to redetermine the deductible amount and eligibility. The action item is created when date of death is verified on a case that has a met deductible and the deductible met date is not the first day of the deductible begin month, or if there is an unmet deductible. | Redetermine the deductible amount. After action is taken, clear the alert. |
| 578 | 60 | RPA No Change FS SMRF Confirm Elig | RPA no change FS SMRF received. Confirm eligibility to update SMRF status to PRO. | This action item is created for FoodShare when the SMRF Robotic Process Automation (RPA) completed a no change SMRF and the worker must confirm FS eligibility. | From the case Summary Page, click next or enter and navigate through the flow to confirm FS. |
| 579 | 61 | RPA FS SMRF Complete. Review VCL | RPA FS SMRF complete. Review VCL. | This action item is created for FoodShare when the SMRF Robotic Process Automation (RPA) is complete but the case was pending for verification prior to RPA processing. | Review the Verification Checklist page and resend VCL if necessary. |

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| 580 | 62 | Child Out of the Home 3 Month Grace Period Ends | Child(ren) in their 3 month grace period ends, parent still in SUS status. See alert help text. | This action item is created for All HC programs, except SeniorCare. The child(ren) are in their third grace period month and their AG should close. The only adult on the case is still in a suspension. | Before taking action, check the tax dependent status of the child(ren). If the child is being claimed as a tax dependent, keep them on the case as an OTX. If not, delete the child(ren) from the case. Redetermining eligibility should build the appropriate childless adult AG for the suspended adult. Clear the action item after updating the child(ren) to OTX or removing the child(ren) from the case. |
| 581 | 63 | Suspended Adult in Home Update Renewal Date | A suspended adult is home prior to 3 month grace period end. Update the child(ren) renewal date. | This action item is created for all HC programs, except SeniorCare to prompt workers to update the AG renewal/review date for the child(ren) on the case since the suspended adult is back home receiving full benefits before the end of the three months grace period. | Extend the child's renewal date to align with the other health care renewal dates. Clear the alert after renewal dates have been updated. |
| 582 | 64 | Mass RFA Transfer Sample Ready for Review | Mass RFA transfer sample ready for review | The sample RFAs for the Mass RFA Transfer request are ready for agency review. | Review the sample list of RFAs. If the sample list does not reflect the desired RFAs to be transferred, edit the selection criteria. If the sample list is satisfactory, click Confirm to schedule the Mass RFA Transfer. |
| 583 | 65 | RFA Transfer Complete | Mass RFA transfer complete | The Mass RFA Transfer request process is complete. | This is an informational alert to notify the agency the transfer request is complete. |
| 585 | 66 | Review Incarceration Information | Review incarceration info on the current demographics page for potential DOC match. | This action item is created for all healthcare program including FPOS and MSP to prompt workers to check the individual's living arrangement based on a potential match found from the DOC data exchange (Department of corrections). | The action item is automatically cleared after the worker clicks the DOC Record Query button on the Current Demographics page . |
| 586 | 67 | INCAR. INFO. UPDATED. RUN ELG. | INCAR. INFO. UPDATED. RUN ELG. | There has been information received that someone on the case has been incarcerated. | Run eligibility for W-2 after the living arrangement of the individual is updated due to a change in incarceration status. |
| 587 | 68 | LTC Changes Collect Spousal Signature | LTC eligibility changed and the spousal signature is required. Request spouse's signature. | This action item is created for health care when Spousal impoverishment rules apply and spousal signature is now required. | Review the case. If appropriate, update the Health Care Spousal Signature field to ? on the Spousal Signature page to request the community spouse signature and pend long term care eligibility. |
| 588 | 69 | LTC Changes Delete Spousal Signature | LTC Eligibility has changed. Review case delete spousal signature page. | This action item is created for health care when spousal impoverishment rules no longer apply and spousal signature is no longer required. | Review the case. If appropriate, update the Health Care Spousal Signature field to ? on the Spousal Signature page to request the community spouse signature and pend long term care eligibility. |
| 589 | 70 | Incarcerated Member Release Date Approaching | Incarcerated member is being released. Update the current demo page to restore full health care. | This action item is created for BCP and SSI-Related Medicaid Programs when a member is currently incarcerated and their reported release date is coming up next month. | Update the member's living arrangement and run eligibility (with dates if needed) to determine the member's eligibility for full benefit MA/BC+ starting the first of the month in which the release will occur. The worker does not need to verify the release date unless questionable. |
| 590 | 71 | FS RPA SMRF Complete Review Results and Confirm | FS RPA SMRF complete. Review results and confirm. | This action item is created for FoodShare when the FS SMRF robotic process successfully processed a no change SMRF and encountered a page other than the VCL page, FS Budget Page or FS Work Registrant/ABAWD VCL page after the ABAWD determination Details Page. | From the case summary select next and continue through the scheduled pages to review the FoodShare Eligibility results and confirm. |
| 600 | 72 | Run Eligibility for Waiver Medicaid | {NAME} is losing Medicaid and is enrolled in LTC outside of CWW. Run eligibility. | The member has LTC enrollment that is tracked outside of CARES and is losing their full benefit Medicaid program/Group A eligibility. | Refer to PH Group A Participants Losing Medicaid Eligibility and Children's Long-Term Support (CLTS) to determine next steps. |
| 601 | 73 | Potential Date of Death Received-Vital Records | A potential DOD was received for {NAME} from Vital Records. More research needed. | A potential date of death (not definitive) was received from Vital Records. | The worker must do more research to determine if the date of death information received from Vital Records is correct for the individual. Use the Data Exchange Query to review the potential match details. If the match is valid, update the date of death and verification code to VQ. Update the case as needed and run eligibility. Review the results and confirm benefits if correct. |

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| 603 | 74 | Potentially eligible for Gap | Potentially eligible for BC+ Gap determination. Review and validate the income on the EAI page. | The action item is created when batch eligibility runs and BC+ fails for the monthly income test. A Gap determination must be completed | The worker is required to navigate to the Expected Annual Income page and review and validate e the annual income information. The action item is cleared when the page is updated and eligibility is re-run. |
| 604 | 75 | Potentially eligible for Gap | Potentially eligible for BC+ Gap determination. Review and validate income on the EAI page. | This action item is created when running eligibility and BC+ fails for the monthly income test. A Gap determination must be completed. | The Expected Annual Income page is scheduled and the worker must review, update (if needed) and validate the annual income information. The action item is systematically cleared when the income on the EAI page is validated and eligibility is re-run. |
| 605 | 76 | Drug Test Date Required | Drug test date is required and not entered. Pend for verification on the drug felon page. | This action item is created for FoodShare when the drug test date is not entered on the Drug Felon page. | Enter the drug test date with a ? in the verification code field and pend for verification. If the drug test date is unknown, enter 12/31/2099. |
| 606 | 77 | Generate and Mail Case Summary | A summary cannot be automatically created. Go to the Generate Summary page to create and mail. | A summary cannot be systematically generated. | Go to the Generate Summary page, select the correct signature type, click view and generate the summary. If the summary can be viewed, click 'Next' to mail the summary. If the summary cannot be viewed, it may be related to a recent person delete or conflicting citizenship/immigration information for an individual(s). When a person is deleted and the Tax Filing Information (TFI) Page is not updated, or if there is a current Access to Employer Medical Coverage page for them, a summary can't be generated. Update the TFI page or end date the Employer Access to Medical Coverage page. Generate and mail the summary. If the summary still cannot be generated, try adding the person back and then deleting the page and the person again. If the individual(s) is a US citizen and the Immigrant/Refugee page has been end dated but not deleted, delete the Immigrant/Refugee page to update the citizen response to Y. If they are not a citizen, delete the immigrant/refugee page, change the citizen response back to N and complete a new Immigrant/Refugee page. If the worker does not correct the case, the required summary will not be sent resulting in QC errors and failure to provide required information to the applicant/member. |
| 609 | 78 | MADR ADDD Not Received | {NAME} MADR ADDD form(s) not received by due date. Update Disability page. | This alert is created for SSI Related Medicaid when a disability redetermination was due and the MADR and/or ADDD forms were sent and not received by the due date. | For the form(s) not returned, update the MADR and/or ADDD to N in the Redetermination Process section, run eligibility and review the results before confirming. |
| 610 | 79 | Contact Household New In-State Address | USPS reports new in state address. Contact member to verify new address. | This action item is created for health care when information from USPS shows that the Primary Person on the case has moved to a new in-state address. | Contact the member to review and update their address information. The forwarding address from USPS is listed in Case Comments. |
| 611 | 80 | Contact Household Moved but no New Address | USPS reports member moved but no forwarding address. Contact Member to review and update address. | This action item is created for health care when information from USPS shows that the Primary Person on the case has moved but there is no forwarding address available. | Contact the member to review and update their address information. |
| 612 | 81 | Contact Household New Out of State Address | USPS reports new out of state address. Contact member to review and update address. | This action item is created for health care when information from USPS shows that the Primary Person on the case has moved to a new out-of-state address. | Contact the member to review and update their address information. The forwarding address from USPS is listed in Case Comments. |
| 613 | 82 | Contact Household New In-State LG/AR Address | USPS reports a new in state address for a LG/AR. Contact LG or member to review and update address | This action item is created for health care when information from USPS shows that the Legal Guardian or Authorized Representative on the case has moved to a new in-state address. | If it's a Legal Guardian (LG), contact the LG to review and update address information for the LG. If it's an Authorized Representative contact the member or the AR to review and update the address information for the AR. The forwarding address from USPS is listed in Case Comments. |

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| 614 | 83 | Contact Household no Forwarding Address | USPS reports LG/AR moved but no forwarding address. Contact member to review and update address. | This action item is for health care when information from USPS shows that the Legal Guardian/Authorized Representative on the case has moved but there is no forwarding address available. | If it's a Legal Guardian (LG), contact the LG to review and update address information for the LG. If it's an Authorized Representative contact the member or the AR to review and update the address information for the AR. The forwarding address from USPS is listed in Case Comments. |
| 615 | 84 | Contact Household New Out of State LG/AR Address | USPS reports out of state address for a LG/AR. Contact LG or member to review and update address | This action item is created for health care when information from USPS shows that the Legal Guardian or Authorized Representative on the case has moved to a new out-of-state address. | If it's a Legal Guardian (LG), contact the LG to review and update address information for the LG. If it's an Authorized Representative contact the member or the AR to review and update the address information for the AR. The forwarding address from USPS is listed in Case Comments. |
| 616 | 85 | Confirm Health Care Elig After AA | Confirm health care eligibility after AA. Search for action item after AA and run eligibility. | A timely health care renewal was processed early (between the 2nd Saturday and Adverse Action in the month prior to the renewal month). | Do not confirm health care eligibility until after Adverse Action to ensure that the current certification period isn't incorrectly shortened or negatively impacted one month early. After adverse action, search for this action item under Worker Tools - Action Item Management Search page select cases that must be run to confirm health care and complete the renewal. |
| 617 | 86 | Child 0-13 Years With no SSN or a Discrepancy. | {NAME} does not have an ssn or there is a discrepancy. Obtain correct SSN. | There is a child on this case with a health care request and there is no ssn or there is an ssn discrepancy and the case was selected for the administrative renewal process. | Follow up with the household to obtain the ssn (if there is none entered or reported) or to resolve an SOLQI discrepancy or send a VCL to request the ssn or resolve the discrepancy. |
| 618 | 87 | Continuous Newborn Over 13 Months | {NAME} is over 13 months and still enrolled in MAGB. Run eligibility. | This action item is created when a child on this case selected for an administrative renewal is over 13 months old and still eligible as a continuously eligible newborn. | The worker must run eligibility to redetermine health care eligibility (that is not MAGB) for the child. This cannot be systematically confirmed. |
| 619 | 88 | Child 18 not Dependent for MAGA or MAGN Caretaker | Only child is 18 and not a dependent. Run elig to redetermine HC for MAGA/MAGN caretaker. | This case was administratively renewed and the only child who makes the caretaker(s) eligible for BadgerCare Plus is not a dependent 18 year old. MAGA or MAGN was certified for 12 months through the batch administrative renewal process but the caretaker is no longer eligible for MAGA or MAGN by policy. | Run eligibility to redetermine health care eligibility for BadgerCare Plus. This may result in MAGS, FPS some other EBD type of Medicaid or the individual no longer eligible. |
| 621 | 89 | Individuals Aging out of Health Care Run eligib | Individuals in (MAGS, MAGC/L, MAGY) are no longer eligibilitybased on age. Run eligibility. | The MAGS/MAGY/MAGC/L benefit was administratively renewed but at least one individual in the benefit is aging out and no longer eligible in it. | Run eligibility, review the results and confirm. |
| 623 | 90 | KBM Redetermination Letter Sent > 30 days Ago | {NAME} KBM Redetermination letter sent more than 30 days ago. | 30 days has passed since the redetermination letter was sent. | Review and update the KBM redetermination information. The action item is cleared when the 'Katie Beckett Medicaid Disability Determination Status' field is changed to 'BY - BCPP Disabled' or 'BN - BCPP Not Disabled'. |
| 624 | 91 | KBM Review Existing Diary Date | {NAME} KBM review existing diary date. | The action item is created to prompt the KBM worker for case to review the existing diary date for the individual. | Review the diary date and update as needed before running eligibility. The action item is cleared after eligibility is run. |
| 625 | 92 | Received NFE from FSIA | {NAME} non functional eligibility has been received from FSIA. | To alert the worker that non-functional eligibility has been received from FSIA. | Review the NFE and update functional eligibility details. The action item is automatically cleared after eligibility is run. |
| 626 | 93 | KBM Functional Elig not Current | {NAME} functional eligibility is not current. | To alert the worker that the functional eligibility information on file is not current. | Complete the functional eligibility in FSIA. Invoke FSIA to automatically populate information in CWW before running and confirming eligibility. The action item is automatically cleared after eligibility is run. |
| 627 | 94 | Process New KBM CWW Request | Process new CWW KBM Request. | A new request was made for KBM on the case. | The action item is cleared after KBM is processed and eligibility is run. |
| 628 | 95 | Close Health Care. KBM now open. | KBM open for an individual receiving health care/FPOS. Run eligibility to close health care/FPOS. | The worker confirmed KBM open AG for a member open for HC or FPOS. | Run and confirm eligibility to close health care or FPOS. |
| 629 | 96 | KBM Individual Preg-Run Elig to RECRT | KBM individual is pregnant. Run eligibility to recertify. | Member open for KBM reports a pregnancy. KBM worker should rerun eligibility and confirm KBM with postpartum period on the KBM case where MAG P is denied due to KBM open. | Run and confirm eligibility to recertify KBM. |

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| 630 | 97 | KBM Disability Redetermination Forms Not Received | {NAME} KBM disability redetermination forms not received. | KBM disability redetermination was due and the needed authorization forms were not received by the diary date. | Update Authorization to disclose to 'No' in the Katie Beckett Medicaid Disability Information section, run eligibility and review the results before confirming. |
| 631 | 98 | Out of State Address Change by SeniorCare | SeniorCare updated an out of state address change. | To inform the IM agency that an out of state address change has been made by the SeniorCare worker. | Review the programs open to determine if temporary absence applies, or they are no longer a Wisconsin resident and take appropriate action. |
| 632 | 99 | Out of State Address Change | The eligibility worker updated an out of state address change. | To inform the SeniorCare worker that an out of state address change has been made by the eligibility worker. | Review the SeniorCare information to determine if temporary absence applies, or they are no longer a Wisconsin resident and take appropriate action. |
| 633 | 100 | Living Arrangement Change by SeniorCare | Living arrangement for {NAME} updated by SeniorCare. Review current demo page. | To inform the IM agency that the living arrangement was updated by the SeniorCare worker. | Review the Current Demographics page and take appropriate action. Alert 056 to initiate eligibility is created. |
| 634 | 101 | Living Arrangement Changed by Eligibility Worker | Living arrangement for {NAME} updated by elig worker. Review current demo page. | To inform the SeniorCare worker that the living arrangement was updated by the eligibility worker. | Review the Current Demographics page and take appropriate action. |
| 635 | 102 | Verify SS Income Type SSRE or SSDI | {NAME} Verify if receiving SSRE or SSDI. Update Benefits received page if SSRE. | This action item is created when the SSA data exchange match reports that the individual is between the ages of 62-65 and has a disability onset date but is currently entered SSRE and there is no disability page entered. No automatic updates occur. | Contact SSA and verify the type of payment the individual is receiving, disability or retirement. Enter or update the Unearned Income/Medicare/Benefits Received pages for the case and clear the action item. |
| 636 | 103 | DX Social Security Payment Deferred | {NAME} Contact SSA to verify deferred payment amount. Enter any countable amount. | A deferred payment status code was received during a BENDEX or SOLQ-I data exchange. Deferred benefit amounts are not automatically updated because there is no indicator from SSA that verifies how much of the benefit is deferred (full or partial). | Contact SSA to verify the amount the individual is receiving and enter the countable income on the case. Update the Medicare and Benefits received pages, if necessary. Social Security information will not update information on this case until the payment type changes to something other than deferred. Stopping the auto updates prevents future auto updates from overriding the worker's entries based on contacting SSA. |
| 637 | 104 | KBM Closed Health Care Open Run Eligibility | Health Care opened for a KBM member. Run eligibility and close KBM. | The eligibility worker confirmed HC open for a member open for KBM. | Run and confirm eligibility to close KBM. |
| 638 | 105 | KBM Individual Turns 18 in Two Months | KBM individual {NAME} turns 18 in two months. | KBM child is turning 18 in 2 months. | No action needed. The action item is automatically cleared in 7 days. |
| 639 | 106 | Records Request Initiated | {NAME} record request initiated. | Records Request Status was changed to 'RECORD REQUEST INITIATED' . | The records release coordinator should review and complete the records request. |
| 640 | 107 | Medical Records Uploaded | {NAME} medical records uploaded. | Records Request Status was changed to 'RECORDS SCANNED IN'. | The disability reviewer on the case should review the records request and take necessary action. |
| 642 | 108 | Record Request Requires Attention | {NAME} record request requires attention. | Records Request Status was changed to 'REQUEST REQUIRES ATTENTION'. | The eligibility specialist for the case should review the records request and take necessary action. |
| 643 | 109 | 40 Days Since the First Request was Sent | {NAME} 40 days since the first request was sent. | 40 calendar days have passed since the Records Request Status was changed to 'FIRST REQUEST FOR RECORDS'. | The records release coordinator should review and take necessary action. |
| 644 | 110 | 10 Days Since the Second Request was Sent | {NAME} 10 days since the second request was sent. | 10 calendar days have passed since the Records Request Status was changed to 'SECOND REQUEST FOR RECORDS'. | The disability reviewer on the case should review the records request and take necessary action. |
| 645 | 111 | Confirm KBM Elig After AA | Confirm KB eligibility after adverse action. | A timely Katie Beckett Medicaid renewal was processed early (between the 2nd Saturday and Adverse Action in the month prior to the renewal month). | Do not confirm Katie Beckett Medicaid eligibility until after Adverse Action to ensure that the current certification period isn't incorrectly shortened or negatively impacted one month early. After adverse action, search for this alert in Caseload Management to select cases that must be run to confirm health care and complete the renewal. |
| 647 | 112 | Run eligibility to split HC AG | Health care AGs could not be split during admin renewal. Run eligibility and confirm. | The action item is created when a health care admin renewal was completed (except MS, NS, NS Deductible, MP, and NP) and AGs were not systematically split during admin renewal process. | The action item alert will be obsolete once all AGs are split. |
| 648 | 113 | Enter HEC Approval | Review HEC letter and update the MAPP Page to Approved with the begin and end dates on the letter. | An individual in an open or pending MAPP AG has been approved for the Health and Employment Counseling (HEC) program for 9 months. | Review the HEC approval notice in Correspondence History (PIN search) and update the MAPP page. Change 'HEC Decision Status' to A-Approved, enter Begin Month and End Month listed in the approval letter into the corresponding fields and click Add. Run eligibility. |

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| 649 | 114 | Enter HEC Denial | HEC denied. Update the MAPP page HEC decision status to "D". Run eligibility and confirm. | An individual in an open or pending MAPP AG has been denied for the Health and Employment Counseling (HEC) program. | Update the MAPP page. Keep the 'Are you requesting to participate in the HEC program?' as Y-Yes and change 'HEC Decision status' to D-Denied. Run eligibility. |
| 650 | 115 | HEC Extension Approved | Review HEC letter update the HEC row with the Extension end date. Run eligibility and confirm. | A MAPP member has been approved for the Health and Employment Counseling (HEC) program 3-month extension. | Review the HEC extension approval notice in ECF and update the MAPP page. Click the pencil icon of the corresponding HEC participation row in the Dynalist, enter the Extension End Month listed on the notice and click Update. Run eligibility. |
| 651 | 116 | Enter HEC End Date | HEC ended because MAPP ended. Update the MAPP page. | A MAPP member's HEC period has ended because they are no longer eligible for MAPP. | Review the HEC enrollment ending notice in Correspondence History (PIN search) and update the MAPP page. Change the 'Are you requesting to participate in the HEC program?' as N-No. Add a new HEC period on the MAPP page with the shortened HEC period (the original HEC period Begin Month and the updated End Month listed on the notice) into the HEC Details section and click Add. Delete the original HEC participation row (9- or 12-month period) from the dynalist. Run eligibility. |
| 398 | 118 | DISENROLL LEARNFARE PARTICIPANT | DISENROLL LEARNFARE PARTICIPANT | This action item is created when the Learnfare enrolled participant is no longer subjected to Learnfare. | Review the Learnfare enrolled child status and disenroll in WWP, if needed |
| 62 | 119 | NO PARTICIPANT PAYMENT, REVIEW PAYMENT | VENDOR RECEIVED FULL PAYMENT, REVIEW PAYMENT | This action item is created for the worker, whenever the W-2 Participant amount becomes zero due to vendor payments. | Review the recent W-2 Payment information |
| 69 | 120 | INACTIVE VENDOR DELETE PAYMENT | INACTIVE VENDOR, REVIEW VENDOR DETAILS | This action item is created for the worker during the W-2 payment issuance process. System is trying to issue a W-2 Vendor payment for this case but the opted vendor is inactive in CARES. | Review the vendor information and make appropriate updates. |
| 477 | 121 | PRISON BEGINS | PRISON BEGINS | There has been information provided that prison began for someone on the case. | Update living arrangement and run eligibility. |
| | 122 | Individual Ineligible for MAPP no Longer Employed | Indiv empl ended and no longer eligible for MAPP. Run eligibility to determine other HC eligibility. | This action item is created when a MAPP individual is no longer employed and has not become reemployed during the month after which the employment, self-employment or In-Kind income ended. The action item is created after adverse action in the month prior to the month in which the earned income is no longer counted. | The worker must redetermine eligibility for other health care (for example a deductible). If this action is not taken, another action item 0227 is created at the next batch run. |
| 100 | 123 | Continuous Newborn Over 13 Months | {NAME} turns 13 months old and must be redetermined for other health care than MAGB. | This action item is created for a MAGB newborn who is turning 1 year old. The action item is created the Friday after adverse action in the month prior to the month the continuous newborn extension ends. The action item is only created when another non-time limited health care benefit open with a future renewal date so that the new health care AG renewal aligns with other health care renewal dates. | Run eligibility for the child turning 1 year old to determine ongoing benefits other than MAGB. A worker must confirm, this cannot be systematically confirmed. |
| 134 | 124 | CWW EMPLOYMENT PAGE CHANGE | CWW Employment Change for {NAME}. | There has been a change to employment. | Review employment page and take appropriate action. |
| 27 | 126 | Affidavit Not Received By FM for W-2 Stop Payment | Affidavit Not Received By FM for W-2 Stop Payment | This action item is created if the Affidavit for Stop payment request for a W-2 check is not received by DCF Bureau of Finance within 15 days from the day of request. | Send the affidavit to the DCF Bureau of Finance. If already sent, follow-up with DCF BOF. |
| 154 | 127 | Affidavit not received for vendor stop payment | Affidavit not received for vendor stop payment request | This action item is created if the Affidavit for Stop payment request for a W-2 vendor check is not received by DCF Bureau of Finance within 15 days from the day of request. | Send the affidavit to the DCF Bureau of Finance. If already sent, follow-up with DCF BOF. |
| 394 | 128 | W-2 AUXILIARY WAITING FOR APPROVAL | W-2 AUXILIARY WAITING FOR APPROVAL | This action item is created for Aux approvers to remind them that W-2 Auxiliary / Replacement check request has been waiting for their approval. | Auxiliary approvers needs to review the replacement check request and make appropriate decision (approve/deny/held/cancel). FEP Worker should follow up with auxiliary approver. |
| 25 | 129 | INITIATE RECOUPMENT | INITIATE RECOUPMENT | This action item is created for the worker when the stop payment request for a W-2 payment is rejected by BOF/Bank. | Initiate W-2 recoupment/overpayment. |
| 26 | 130 | Replacement W-2 check issued for stop payment | Replacement W-2 check issued for stop payment | This action item is created for the worker when the replacement check information is updated on the Stop Payment Request for a W-2 Check/payment. | Inform participant that W-2 replacement check is being issued and will be sent to W-2 agency. |
| 24 | 131 | EFT FAILED. DO AUX/RPLCMET. FIX W-2 EFT | EFT FAILED. DO AUX/RPLCMET. FIX W-2 EFT | This action item is created when the Bureau of Finance team member cancels a W-2 payment due to Failed EFT. | Issue an Aux/replacement check using BICS screen. Update/Fix the issue with W-2 EFT information. |

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| 592 | 132 | JAL In Progress Decision Due | JAL In Progress Decision Due | This alert is sent to JAL Creators to notify them the timeliness deadline for JAL processing of In Progress JALs is near. | Complete the JAL application workflow. Submit the JAL for Approval, Deny, Withdraw or Extend the decision date deadline for the JAL application. |
| 593 | 133 | JAL Pend Approval Decision Due | JAL Pend Approval Decision Due | This alert is sent to JAL Approvers to notify them the timeliness deadline for JAL processing of Pending Approval JALs is near. | Complete the JAL application workflow. Approve, Deny, Withdraw, or Extend the decision date deadline for the JAL application. |
| 594 | 134 | JAL In Progress Decision Due | JAL In Progress Decision Due | This alert is sent to JAL Creators to notify them the timeliness deadline for extended JAL processing of In Progress JALs is near. | Complete the JAL application workflow. Submit the JAL for Approval, Deny, or Withdraw the JAL application. |
| 595 | 135 | JAL Pend Approval Decision Due | JAL Pend Approval Decision Due | This alert is sent to JAL Approvers to notify them the timeliness deadline for extended JAL processing of Pending Approval JALs is near. | Complete the JAL application workflow. Approve, Deny, or Withdraw, the JAL application. |
| 596 | 136 | JAL Submitted For Approval | JAL Submitted For Approval | This alert is sent to JAL Approvers to inform them that a JAL has been submitted for review and approval. | Review JAL Application. Approve, Deny, Withdraw, or Return the JAL application. |
| 597 | 137 | JAL Has Been Denied | JAL Has Been Denied | This alert is sent to JAL Creators. The JAL has been denied and the individual will receive a Denial Letter automatically. | No action required. |
| 598 | 138 | JAL Returned - Action Needed | JAL Returned - Action Needed | This alert is sent to JAL Creators. The JAL Approver has returned a JAL for review. | Review the JAL and Approver comments. Address any issues and resubmit for approval, Deny, or Withdraw the application. |
| 150 | 139 | INITIATE VENDOR RECOUPMENT | INITIATE VENDOR RECOUPMENT | This action item is created for the worker when the W-2 stop payment request for Vendor payment is rejected by BOF/Bank. | Initiate W-2 recoupment/overpayment. |
| 151 | 140 | REPLACEMENT CHECK SENT FOR VENDOR STOP PAYMENT REQ | REPLACEMENT CHECK SENT FOR VENDOR STOP PAYMENT REQUEST | This action item is created for the worker when the replacement check information is updated on the Vendor Stop Payment Request. | Inform participant/Vendor that W-2 vendor replacement check is being issued and will be sent to W-2 agency. |
| 23 | 141 | HELD/CANCELLED AUX REQUEST | AUXILIARY REQUEST ON HELD/CANCELLED, REVIEW AUXILIARY REQUEST | This action item is created for the worker who submitted the Aux/Replacement check request when that request is held/cancelled by the Aux approver. | Follow-up with Aux Approver and take appropriate action, if needed. |
| 525 | 143 | Future W-2 placement FAILED, change PLACEMENT | Future W-2 placement FAILED, change PLACEMENT | This action item is created when the system is unable to convert the future W-2 placement to current. | Review the W-2 placement information and make the appropriate placement change. |
| 550 | 144 | Individual May Not Be Eligible For CMF+ | Individual May Not Be Eligible For CMF+ | This action item is created when the future placement (CMF+) becomes the current placement but the placed Participant may not be eligible for a CMF+ as they didn't meet the CMF+ requirements.CMF+ eligibility requirements are: - Single parent with a child under the age of 6 and works in unsubsidized employment at least 20 hours per week.- Single parent with a child age 6 or older and works in unsubsidized employment at least 30 hours per week.-Two-parent family not receiving federally-funded child care and works in unsubsidized employment at least 35 combined hours per week.-Two-parent family receiving federally-funded child care and works in unsubsidized employment at least 55 combined hours per week. | Review the participant information and change the W-2 Placement to CMF, if appropriate. |
| 551 | 145 | Individual May Be Eligible For CMF+ | Individual May Be Eligible For CMF+ | This action item is created when the future placement (CMF) becomes the current placement but the placed Participant may be eligible for a CMF+ Placement because they met the CMF+ requirements. CMF+ eligibility requirements are: - Single parent with a child under the age of 6 and works in unsubsidized employment at least 20 hours per week.-Single parent with a child age 6 or older and works in unsubsidized employment at least 30 hours per week.-Two-parent family not receiving federally-funded child care and works in unsubsidized employment at least 35 combined hours per week.-Two-parent family receiving federally-funded child care and works in unsubsidized employment at least 55 combined hours per week. | Review the participant information and change the W-2 Placement to CMF+, if appropriate. |
| 403 | 146 | ENTER W-2 PLACEMENT | ENTER W-2 PLACEMENT | This action item is created when the Participant is eligible but has not been placed in a W-2 Placement. | Review the case/participant information and place them in appropriate W-2 Placement. |
| 473 | 147 | CMJ 30 Day Review Due | CMJ 30 Day Review Due | This action item is created when Participant is in CMJ Placement, and the 30-Day review is due. | Review the case and make appropriate changes, if needed. |
| 519 | 148 | W-2 Absent Child due to Return | W-2 Temp Absent Child is due to Return to Household. | Due date for the child's return is approaching | Confirm whether or not child has returned and take appropriate action. |

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| 520 | 149 | Verify School Enrollment for 6y | Verify School Enrollment for 6y | This action has generated because a child has turned 6. | Verify school enrollment for the 6 year old child. |
| 526 | 150 | OPEN 15 WEEKS IN TSP PLACEMENT | OPEN 15 WEEKS IN TSP PLACEMENT | This action item is created when the Participant is in W-2 Placement (TSP) for 15 weeks. | Review the case and make appropriate change, if needed. TSP placements will be auto ended on 17th Week. |
| 527 | 151 | OPEN 5 MONTHS IN TMP/TNP PLACEMENT | OPEN 5 MONTHS IN TMP/TNP PLACEMENT | This action item is created when the Participant is in W-2 Placement (TMP/TNP) for 5 Months. | Review the case and make appropriate change, if needed. TMP & TNP placements will be auto ended on 9th Month. |
| 528 | 152 | OPEN 8 MONTHS IN TMP/TNP PLACEMENT | OPEN 8 MONTHS IN TMP/TNP PLACEMENT | This action item is created when the Participant is in W-2 Placement (TMP/TNP) for 8 Months. | Review the case and make appropriate change, if needed. TMP & TNP placements will be auto ended on 9th Month. |
| 448 | 153 | At Risk Pregnancy DUE DATE IN 3 DAYS | At Risk Pregnancy DUE DATE IN 3 DAYS | This action item is created when Pregnancy Due in 3 Days. | Follow-up with Participant and make appropriate action/changes, if needed. |
| 449 | 154 | At Risk Pregnancy DUE DATE 10 DAYS OVERDUE | At Risk Pregnancy DUE DATE 10 DAYS OVERDUE | This action item is created when Pregnancy overdue by 10 Days. | Follow-up with Participant and make appropriate action/changes, if needed. If no action taken, ARP placement will be ended on the 20th day from Pregnancy Due Date. |
| 584 | 155 | Foodshare and/or Child Care Interview Needed | W-2 initiated a combined W-2, FS and/or CC application and an interview is needed for FS and/or CC. | This action item is created for FoodShare and Child Care. The W-2 worker has started a W-2/JAL combined Foodshare and/or Child Care application. The interview Details page is updated to ? For FoodShare and/or Child Care. | The IM worker must complete the FoodShare and/or Child Care application which includes completing or scheduling the interview, and sending a VCL and issuing expedited FoodShare. Clear the action item from the Action Item panel when action has been taken. |
| 536 | 156 | W-2 REFUSAL, RUN ELIGIBILITY | W-2 REFUSAL, RUN ELIGIBILITY | This action item is created to the worker when the Good Cause Due Date to rectify the W-2 Refusal to Participate is passed. | Run the eligibility to apply the penalty/sanction period. |
| 540 | 157 | PARTICIPATION STATUS CHANGE-CHECK ASSISTANCE GROUP | PARTICIPATION STATUS CHANGE-CHECK ASSISTANCE GROUP | This action item is created when the Eligibility /Participation Status of the participant with the W-2 Refusal to Participate is changed from Eligible Adult to Included Adult. | Review the case and take appropriate action. |
| 602 | 159 | FoodShare Allotment Amount Overridden | The FoodShare allotment amount was overridden. Update the FoodShare Budget Override page. | The worker overrode the allotment amount on AGOE in the mainframe. | Access the FoodShare Budget page to calculate the overridden amount. Update any information in the Net Income Calculation section and click Calculate. Then click Calculate in the Allotment Calculation section. Return to AGOE to approve the overridden amount. |
| 607 | 160 | 210 Day Warning EBT Balance is Greater than \$25 | EBT account has not been accessed in 210 days. Attempt to recover outstanding FS overpayment claim. | This action item is created for the Benefit Recovery Coordinator (table TCRD) when there is an outstanding FoodShare overpayment claim with a balance greater than \$25. If an EBT account is not accessed in 210 days, the action item is created to recover the overpayment before expungement. FS benefits will be expunged if the account is not accessed in 275 days. | Attempt to recover the overpayment prior to expungement. |
| 486 | 161 | CWW SELF EMPL PAGE CHANGE | CWW Self Empl Page Change for {NAME}. | This action item is created when there has been a change to a household member's self employment page. | Review changes and run eligibility. |
| 350 | 162 | UNEMPLOYMENT INCOME BEGINS | UNEMPLOYMENT INCOME BEGIN | This alert is sent to the W-2 worker whenever an individual starts receiving UI through the monthly batch process. | Check DX Unemployment Insurance query and update the unearned income page if necessary. Re determine eligibility. |
| 497 | 164 | New W-2 IPV Info | New W-2 IPV Info | There is new information about a W-2 IPV. | Review and take appropriate action. |
| 498 | 165 | IPV Rectify Period Has Ended | IPV Rectify Period Has Ended | IPV rectify period ended. | Run eligibility |
| 500 | 166 | Person Moved Into Household | Person Moved Into Household | The IM Worker added a person to the case. | Review household composition and take appropriate action if needed. |
| 516 | 167 | W-2 National New Hire | W-2 National New Hire match received for {NAME}. | This action item is created when a W-2 individual on this case was found to have a New Hire match with the national database. | See Process Help National Directory of New Hires (NDNH). |
| 641 | 168 | Medical Records Rejected | {NAME} Record request status changed to no records recvd. Review case and update. | Records Request Status was changed to 'NO RECORDS RECEIVED'. | The Disability Reviewer on the case should review the records request and take necessary action. |
| 489 | 169 | W-2 GEO AREA CHANGED, transfer to new W-2 region | W-2 GEOGRAPHICAL AREA CHANGED and transfer case to new W-2 region | This action item was created because the IM worker updated the case address resulting in a W-2 geographical area change. | Transfer the case to the new W-2 geographical area. Also transfer in WWP. |
| 35 | 170 | Absent Parent Returned to Household see KIDS C8G | An absent parent has returned to the household. See KIDS screen C8G. | KIDS reports an absent parent's living arrangement has changed and possibly moved into the household.Â | Review the case to determine if the absent parent has returned to the household and make any changes required by policy. Change the Refer to 'IV-D?' response to 'N,' if appropriate.Â |

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| 37 | 171 | Change in Good Cause Information see KIDS GC1 | Change in good cause Information see KIDS GC1. | Individual has filled intent with Child Support Agency to claim good cause through the Income Maintenance agency. | Income Maintenance agency should send out good cause forms and document in case comments. If forms are not return Income Maintenance agency does not take further action and Child Support Agency will pursue the referral. |
| 38 | 172 | Change in Custody Information Review Case | There has been a change in child custody, review case | This action item is created for all programs when KIDS has reported a change in child care custody information. | Information only. |
| 39 | 173 | Change in Paternity Information from KIDS | Change in paternity information from KIDS, review case. | This action item is created for all programs when KIDS has reported a change in paternity information. | Check the case for individuals whose clocks have the 'TB - To Be Determined' status or 'AF - Active in FSET' status that did not update. If the TB status did not update, review the case to determine what the correct status is then update accordingly a |
| 92 | 175 | Child Support Non Cooperation | Child Support non cooperation reported. Update the absent parent page. | This action item is created for all programs when an individual on the case is not cooperating with the Child Support Agency. The action item is created for W-2, CC, and CTS for child support noncooperation. The action item is created for Health Care Medical Liability Support noncooperation. | For W-2 or CC, run eligibility to generate the VCL. If the individual has neither cooperated with Child Support nor filed a Good Cause claim by the VCL due date, update the Child Support Information Section of the Absent Parent page and run eligibility to close the impacted assistance program(s). For Health Care, update the Medical Support Liability Information Section and run eligibility. |
| 128 | 176 | CP Address Change see KIDS AAA | KIDS has changed the address for the custodial parent. | This action item is created for all programs when KIDS has updated the address for the custodial parent. | This informational action item is created for all programs. See KIDS AAA screen. Follow up with the case to confirm. |
| 226 | 177 | GOOD CAUSE INTENT DT RECVD | GOOD CAUSE INTENT DT RECV | Good cause intent date has arrived. | Review case and take appropriate action. |
| 227 | 178 | NON-COOPERATION END DT RECVD | NON-COOPERATION END DT RECVD | Child Support Non-Cooperation End Date recieved from KIDS. | Review the Absent Parent page and update the Caretaker relative cooperation information, if needed. |
| 292 | 179 | Change the Referral to IV-D | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that the absent parent should not be referred to CS. The action item does not specify which absent parent should not be referred. | If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select OTH for the Reason for Not Referring field. |
| 293 | 180 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that the absent parent should not be referred to CS because they are deceased. The action item does not specify which absent parent should not be referred. | If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select DEC for the Reason for Not Referring field. |
| 294 | 181 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that an absent parent should no longer be referred because they are now living with the custodial parent. If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. | If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select DEC for the Reason for Not Referring field. |
| 295 | 182 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that the absent parent should not be referred to CS because the child is out of the home. The action item does not specify which absent parent should not be referred. | If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select OUT for the Reason for Not Referring field. |
| 296 | 183 | Change IV-D Referral on the Absent Parent Page | The Child Support Agency is Sending an update for a referral. | This action item is created for the worker when the non-referral reason code received from KIDS. | Review the Absent Parent Information, the Household details and change the 'Refer to IV-D?' response to 'N' with the reason 'CAR Minor Caretake', if appropriate. |
| 297 | 184 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that the absent parent should not be referred to CS because the child is deceased. The action item does not specify which absent parent should not be referred. | If there is more than one absent parent, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select CDC for the Reason for Not Referring field. |
| 298 | 185 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that the child isn't in the AG. An example is FS cases claiming separate households. This action doesn't specific which child. | If there is more than one child, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select NOT for the Reason for Not Referring field. |
| 299 | 186 | Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that there is a child support order in another state. | If there is more than one child, contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select ORD for the Reason for Not Referring field. |

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| 300 | 187 | Change the Change the Referral to Child Support | Contact the Child Support Agency to determine which absent parent referral to update to N. | This action item is created for all programs when KIDS has information that good cause has been granted for non cooperation with child support. | If there is more than one child , contact the Child Support Agency to determine who this action item applies to. On the absent parent page, update the Refer to IV-D? to N and select GCS for the Reason for Not Referring field. |
| 303 | 188 | Absent Parent Information Updated, review update | Absent parent information updated, review information | This action item is created for all programs when the Child Support Agency has updated/corrected child support information. | Informational, no action needed. |
| 304 | 189 | New Absent Parent Info Updated, review update | New absent parent information updated, review information. | This action item is created for all programs when the Child Support Agency has added new absent parent information. | Informational, no action needed. |
| 305 | 190 | New Paternity Information Updated, review update | New paternity indicator was updated on the absent parent page. | This action item is created for all programs when the Child Support Agency has updated paternity information. | Informational, no action needed. |
| 326 | 191 | Non Cooperation Ended Run Eligibility | Child Support non cooperation has ended. Run eligibility | This action item is created for all programs when the Child Support reports the individual is now cooperating with the CSA | Run eligibility. |
| 129 | 192 | Direct Child Support Reported | The Child Support Agency reported direct child support received. | This action item is created for the worker when the Direct Child Support information received from KIDS application. | Review Child Support Income page and update Child Support UI, if required. |
| 130 | 193 | Child Support Collected Exceeds the Grant Amount | Child Support Collected Exceeds the Grant Amount. | This action item is created for the worker when the Child Support collected exceeds the Grant information received from KIDS application. | Review Child Support Income page and update Child Support UI, if required. |
| 165 | 194 | Unassigned Child Support Reported | Unassigned Child Support reported. Review and update the unearned income page. | This action item is created for the worker when the Unassigned Child Support Information received from KIDS. | Review Child Support Income page and update Child Support UI, if required. |
| 400 | 195 | Child Support Increased to over 130% | CS Increase; Income > 130% FPL | This action item is created for FoodShare when child support income increases to over 130% FPL. | Navigate to the Child Support Summary page to review updated income amount from KIDS. Update the unearned income with the new amount, run eligibility, review results and confirm. |
| 490 | 196 | OVERRIDE W-2 GEO AREA, transfer To new W-2 region | OVERRIDE GEOGRAPHICAL AREA CHANGED and transfer case to new W-2 region | The participant has moved and is now in a new W-2 geographical area. | Review the new address and transfer the case to the new W-2 geographical area if needed. Also transfer in WWP if transferred in CWW. |
| 501 | 197 | Tax Dep/Co-filer moved out | Tax Dep/Co-filer moved out | There has been a change in the household where a tax dependent or a co-filer has moved out. | Review household composition and take appropriate action if needed. |
| 549 | 198 | Enter SSN or SSN App Date for | Enter SSN or SSN App Date for {NAME} | The IM worker added a person to the case with neither an SSN nor an SSN application date. | If the individual has an SSN, enter it. If not, enter the date they applied and pend for verification of this date. |
| 552 | 199 | Make Case Confidential | Make Case Confidential | Someone on the case is on another case that is confidential. | Update case to make it confidential. |
| 559 | 200 | CS COOPERATION DUE DATE PASSED | CS Cooperation due date passed, no good cause claimed, update absent parent page and run eligibility | Child support cooperation due date has passed. | Update the Good Cause Approved field on the Absent Parent page and run eligibility. |
| 534 | 202 | Create Disability Page for SSI or SSDI | {NAME} Create a disability page. Now receiving SSI or SSDI review unearned income. | This action item is created for all Programs. The SSDI payment, SSI Payment or SSI letter fields on the Benefits Received page was updated to Y and verified by data exchange, or new SSDI income has been added to the Unearned Income page and there is no Disability page or the first 3 questions on the Disability page are N or Y and not verified for the applicant or member. | Add a new Disability page or update the existing Disability page. Review the Unearned Income pages. If the income is SSI, verify State SSI is entered, if not, add the SSI income. |
| 447 | 203 | Link Aging Unlinked Documents | Unlinked documents are aging, link the documents. | This action item is created when there are unlinked documents that need to be linked. The action item is created for the Document Coordinator. | Link the unlinked documents. Best practice is to search 'all offices' within the county. |
| 535 | 205 | W-2 RFSL TO PART. INDV ADDED | W-2 RFSL TO PART. INDV ADDED | This action item is created for the assigned FEP indicating that an individual with a refusal to participate record for which the current date is less than or equal to the Penalty End Date (or Override End Date) has been added to the case. | Review case and ensure participants penalty is applied correctly. |
| 329 | 206 | Late Premium Payment Received Before end of Month | MAPP late premium received after AA but before the end of the month. Re open MAPP. | A late MAPP premium was paid after Adverse Action but before the end of the month. | Review the MAPP premium page to confirm the premium was paid. Run eligibility for the month after closure to re-open MAPP. If other programs are open, eligibility may need to be run with dates for the month of closure. |
| 332 | 207 | MAPP Individual Work Exemption Ends | A MAPP individual's work exemption ends. Re run eligibility to redetermine other health care elig | A MAPP individual's work exemption ends. | Run eligibility to redetermine other health care eligibility. This action item is created on the first Friday of the month in which the exemption ends. |
| 504 | 209 | Tax Dependency ends. Run eligibility. | An individual(s) who is a tax dep for only the current tax year is no longer claimed. Run elig | This action item is created when an individual(s) is claimed as a dependent for only this tax year. | Run eligibility to remove the tax dependent from the eligibility determination. This action item is created annually after November adverse action. |

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| 505 | 210 | Remove Deceased Tax Dependent | New tax year, remove deceased tax dependent from the case. | This action item is created annually after November adverse action. A deceased tax dependent for BadgerCare Plus may no longer be claimed as a tax dependent. | Review the case to determine if the deceased tax dependent should be removed from the case and take needed action. |
| 561 | 214 | SSN APP DATE GREATER THAN 6 MO | SSN APP DATE GREATER THAN 6 MO | This action item automatically generates 6 months from the SSN Application Date on the Permanent Demographics page for a child. | Pend Eligibility for the child's SSN on the Household Members page. |
| | 227 | HC not Confirmed Closed in Batch Eligibility. | Health care AG closure was not confirmed in batch eligibility process.Run eligibility and confirm. | One or more health care assistance group closures were not confirmed in the batch eligibility process. | Initiate eligibility to explore other health care programs before confirming health care closure. |
| | 228 | HC not Maintained Because of a System Error. | Health care benefit was not maintained for the next month due to a system error. | Health care must be maintained for the next month when a renewal is received after Adverse Action and is being processed. Due to a system error, the health care benefit was not maintained. | Run eligibility with dates for the following month. Use overrides to maintain health care coverage as needed and send notice and complete manual certification(s). |