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# MCO Business Rules for SK-SAI & SK-ISP

STAR Kids Project

The purpose of this document is to communicate rules that the STAR Kids MCOs should follow when processing the STAR Kids Screening and Assessment Instrument (SK-SAI) and STAR Kids Individual Service Plan (SK-ISP), including interfacing with the Texas Medicaid and Healthcare Partnership (TMHP) Long Term Care (LTC) Online Portal.

**HHSC Version**

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## 1 SK-SAI and SK-ISP Business Rules

This purpose of this document is to communicate rules that the STAR Kids managed care organizations (MCOs) should follow when processing the STAR Kids Screening and Assessment Instrument (SK-SAI) and STAR Kids Individual Service Plan (SK-ISP), including interfacing with the Texas Medicaid and Healthcare Partnership (TMHP) Long Term Care (LTC) Online Portal system.

### 1.1 General Rules for the SK-SAI

#### 1.1.1 SK-SAI Design & Layout

The MCO must:

1. Adhere to the HHSC Document Map for the flow of Modules, Sections within Modules and Fields within Sections (aka skip logic and triggers).
2. Adhere to the HHSC Document Map for the field data types, values, limits and required versus conditional or optional rules.
3. Adhere to the XML schema for the SK-SAI interface file when submitting to TMHP.

#### 1.1.2 SK-SAI Processing

The MCO must:

1. Prevent duplicate SK-SAIs from being submitted for the same applicant or member.
2. Allow for submission of an abbreviated form (see Section 8.1.39.1). The abbreviated form is not a subset of the SK-SAI. The abbreviated form is a convenience for the user to create an SK-SAI from a previously submitted form, thereby accepting previously entered values in fields and changed values in others.
3. Enforce SK-SAI timeframes as outlined in Sections: 8.1.38.16.5, 8.1.39 and 8.3.1 of the MCO contract.
4. Prevent submission of an SK-SAI Reassessment if an Initial Assessment is not on file for the applicant or member.
5. Prevent submission of an SK-SAI Significant Change in Condition Reassessment (SCCR), for Medically Dependent Children Program (MDCP) or Community First Choice (CFC), if an SK-SAI or medically necessity (MN) and level of care (LOC) with MN Approval within 365 days is not on file at the MCO.
6. Prevent submission of any SK-SAI requesting MN determination for CFC, if CFC services have not been requested (i.e., if Section M is not requested for assessment by the applicant or member).
7. Prevent submission of any SK-SAI requesting MN determination for MDCP, if the applicant is not an existing MDCP member or if a referral number has not been received from HHSC Program Support Unit (PSU).
8. Prevent submission of an SK-SAI initial assessment for an MDCP child without Medicaid (i.e., medical assistance only (MAO)), if a referral number has not been received from HHSC PSU.
9. Prevent completion of Section M, when a STAR Kids member is receiving CFC services from their enrollment in an Intellectual and Development Disability (IDD) waiver, Community Living Assistance and Support Services (CLASS), Deaf Blind with Multiple Disabilities (DBMD), Home and Community- based Services (HCS) and Texas Home Living (TxHmL).

10. Ensure the license associated with the Medical Provider, whose National Provider Identifier/Atypical Provider Identifier (NPI/API) is listed in SK-SAI field A26e, is valid prior to submission to TMHP.
11. Follow rules for the submission of any SK-SAI correction or inactivation, as laid out in the respective scenario sections below.
12. Prevent submission of any SK-SAI requesting MN determination more than 90 days before applicant's/member's SK-ISP expires.
13. Ensure SK-SAIs submitted by the same MCO meet the following conditions:
  - a. MCO may submit an inactivation at any time and for any reason described in Inactivation Scenarios below.
  - b. MCO may only submit a major correction on an SK-SAI that is in the MN workflow that has not reached final disposition.
  - c. MCO may only submit a major or minor correction on an SK-SAI within 14 days of the initial submission.
14. Ensure Transfer SK-SAIs are managed in the following manner by the Gaining (see Transfer Scenarios section for details):
  - a. Gaining MCO may only submit an inactivation for an SK-SAI submitted by the original MCO prior to the assessment reaching final disposition in the TMHP Portal.
  - b. Gaining MCO may not submit inactivation on any SK-SAI pending fair hearing.
  - c. Gaining MCO may not submit a major or minor correction on an SK-SAI completed by a previous MCO.
15. Allow for submission of an SK-SAI for a child referred by HHSC PSU (from the interest list) where the Social Security Number (SSN) is not available and the Medicaid ID is not available. See the document map for allowable value in these fields under this condition.

## 1.2 General Rules for SK-ISP

### 1.2.1 SK-ISP Design & Layout

The MCO must:

1. Adhere to the ISP PDF provided by HHSC for the design and layout of the Service Tracking form in the MCO system. This form corresponds to the SK-ISP 278 data.
2. Transmit the SK-ISP Service Tracking data (not the narrative addendum) to TMHP via an X12 278 EDI transaction or electronically as Form 2604, STAR Kids Individual Support Plan - Service Tracking Tool:
  - a. Field data types, values, limits and identification of required versus optional must match the X12 278 Companion Guide.
3. Upon request by HHSC the MCO must post to TxMedCentral in a PDF format the ISP Narrative addendum for the member(s) identified by HHSC.
  - a. Refer to the STAR Kids Handbook for the file format and TxMedCentral location.
4. Ensure the naming convention established by TMHP is adhered to for the associated transmission of the SK-SAI Substantive Response file. ISP:
  - a. *ISP.\*.txt, or*
  - b. *ISP.\*.dat or*
  - c. *ISP.\*.Zip*
  - d. *Note: the \* can be replaced with any name and no spaces within the file name*

### 1.2.2 SK-ISP Processing

1. For all applicants/members the MCO must:
  - a. Enforce the SK-ISP requirements as outlined in Sections: 8.1.38.3 and 8.3.4 of the MCO contract.
  - b. Ensure the applicant's/member's Medicaid Number on the SK-ISP matches the Medicaid Number on the associated SK-SAI.
2. For existing MDCP members the MCO must:
  - a. Submit the Reassessment SK-ISP Summary Tracking form (as X12 278 transaction or electronically as Form 2604 to TMHP within 30 days of the annual ISP expiration date for all members receiving MDCP services.
  - b. Establish the begin date of the Reassessment ISP as the first day of a month and must be one (1) day following the expiration of the prior ISP.
  - c. Set the ISP cost ceiling, for an MDCP child, based on the Resource Utilization Groups (RUG) received from TMHP in the SK-SAI Substantive Response File.
  - d. Set the Lifetime Limits on associated services for an MDCP child in accordance with service limits described in the STAR Kids Handbook.
  - e. Ensure the applicant's/member's Medicaid Number on the SK-ISP matches the Medicaid Number on the SK-SAI prior to submission of the SK-ISP X12 278 transaction to TMHP.
  - f. Submit the SK-ISP X12 278 transaction to TMHP (see Appendix D for details on the location and response file handling for this transaction).
3. For applicants of MDCP that are received as a referral from HHSC PSU the MCO must:
  - a. Set the ISP cost ceiling, for an MDCP child, based on the RUG received from TMHP in the associated SK-SAI Substantive Response File.
    1. This is a link to the Resource Utilization Groups (RUG) Individual Plan of Care (IPC) Cost Limits, Provider Types and Service Rates: [STAR Kids Appendix VIII](#).
  - b. Set the Lifetime Limits on associated services for an MDCP child in accordance with service limits described in the STAR Kids Handbook.
  - c. The following process is required to establish the begin and end date of the ISP:
    1. MCO must submit the SK-ISP as Form 2604, STAR Kids Individual Service Plan - Tracking Tool electronically to the TMHP LTC Online Portal or as an X12 278 transaction for the PSU to perform their process.
      - i. Once PSU staff processes the ISP, PSU staff will generate the Form H2065-D, Notification of Managed Care Program Services, in the TMHP LTC Online Portal and mail to the applicant or member. The MCO must check the TMHP LTC Online Portal to retrieve the notification.
      - ii. The Form H2065-D -will have the effective date for MDCP services and the MCO cannot initiate MDCP services until Form H2065-D is received.
    2. Once the MCO receives confirmation of the Begin and End dates for the ISP the MCO must:
      - i. Update the ISP dates in their system and submit the ISP Summary Tracking 278 transaction to TMHP per normal processing rules.

- ii. Submit the SK-ISP within 60 days from the date of referral for MDCP services.

## 2 Rules for SK-SAI Interfaces with TMHP

### 2.1 TMHP Document Locator Number

A Document Locator Number (DLN) is a unique identifier assigned by TMHP upon successful submission of an SK-SAI by the MCO. Although a DLN is assigned, this is no guarantee the SK-SAI will be successfully processed within the workflow in the TMHP LTC Online Portal. An SK-SAI DLN could result in an 'Invalid/Complete' status if the rules are not followed for the fields in Section O for RUG determination as defined in the Document Map. The DLN can be used on the TMHP LTC Online Portal to locate SK-SAIs, successfully submitted by the MCO. The assigned DLN must be maintained in the MCO system to allow for further systems processing operations (correction and inactivation) with TMHP.

### 2.2 Transmitting SK-SAIs to TMHP:

An SK-SAI must be transmitted to the TMHP LTC Online Portal using the XML schema for the interface file:

1. The schema is the layout for the SK-SAI fields as defined in the Document Map.
2. The filename for the SK-SAI batch file is: **<SKSAIPCYYYYMMDDSEQ>** where
  - a. SKSAI = STAR Kids Screening and Assessment Information
  - b. PC = MCO Plan Code
  - c. YYYYMMDD = Date file submitted
  - d. SEQ = 3 digit number to denote batch sequence of the file.
3. The details of the fields within this response file can be found in the SK-SAI\_Inbound Batch.
4. A batch file produced by the MCO with SK-SAI forms, in the XLM schema format, must be placed on TxMedCentral in the designated folder assigned to the MCO:  
\\...\**<MCO>GENL**\... where **<MCO>** corresponds to the abbreviated MCO name.
  - a. AETGENL - AETNA
  - b. AMCGENL – AMERIGROUP Texas, Inc.
  - c. BCBGENL – Blue cross Blue Shield
  - d. CFGENL - Community First Health Plans
  - e. CKCGENL - Cook Children's Health Plan
  - f. DRCGENL - Driscoll Children's Health Plan
  - g. SUPGENL – Superior Health plan
  - h. TXCGENL - Texas Children's Health Plan
  - i. UHCGENL – United Healthcare - Texas
5. The MCO may submit up to 100 files per batch file and 20 batch files in a single day for a total of 2,000 forms per day.



### 2.3 SK-SAI Response Files from TMHP

There are two types of response files (Validation Response and Substantive Response) transmitted by TMHP to the MCOs, depending on the type of SK-SAI assessment submitted and form action indicated by the MCO.

The MCO will receive a validation response from TMHP for all transmitted SK-SAI forms indicating the receipt of the SK-SAI as either accepted or rejected.

TMHP will only send the more substantive response file when the status of the MN determination, the validation of the Medicaid Number and/or the calculated RUG is required (i.e. an applicant requesting MDCP or CFC services).

Two fields in Section Q of the SK-SAI CORE module are used by the MCO to inform TMHP the steps to be taken in their system and operational workflow processes for MN Determination and calculation of the RUG. These fields must be completed by the MCO to inform TMHP of the actions to be taken:

1. Q6a 'MN Determination Needed?' must always be completed by the MCO to inform TMHP if the determination of MN is needed on the applicant or member for MDCP or CFC program eligibility.
2. Q6b 'MDCP RUG Calculation Required?' must always be completed by the MCO to inform TMHP when a RUG is needed for an individual requesting MDCP services. The RUG is only relevant to the MDCP services.

There is also a field within the inbound SK-SAI XML schema, not a field on the form, which is used by TMHP to determine the steps to be taken in their system to inactivate a form:

1. The 'Form Action' field is completed by the MCO to inform TMHP to inactivate a previously submitted SK-SAI. This action is further described in the Inactivation scenario within this document.

#### 2.3.1 Validation Response file

1. The Validation Response file will be placed on TxMedCentral in the corresponding MCO folder: \\...\... where <MCO> corresponds to the abbreviated MCO name:
  - a. AETGENL - AETNA
  - b. AMCGENL – AMERIGROUP Texas, Inc.
  - c. BCBGENL – Blue Cross Blue Shield
  - d. CFGENL - Community First Health Plans
  - e. CKCGENL - Cook Children's Health Plan
  - f. DRCGENL - Driscoll Children's Health Plan
  - g. SUPGENL – Superior Health plan
  - h. TXCGENL - Texas Children's Health Plan
  - i. UHCGENL – United Healthcare - Texas
2. The naming convention for the Validation Response file is <fileid>.RSP<SKSAIPCYYYYMMDDSEQ> where:

- a. <fileid> = an eight (8) digit TMHP-assigned identifier followed by a period (.) and prepended to the filename.
  - b. RSP = Response file
  - c. <SKSAIPCYYYYMMDDSEQ> = Inbound SK-SAI File name
3. Each transmitted SK-SAI by the MCO to TMHP will be evaluated for acceptance or rejection using two levels of validation: schema validation and business validation.
4. The details of the fields within this response file can be found in the SK\_SAI\_Batch\_Validation\_Response schema file and Appendix B of this document.
5. The information communicated by TMHP to the MCO in this response file should be used by the MCO to determine next steps in their system and operations processes.
6. The DLN received in the Inbound SK-SAI becomes the parent DLN in the Validation Response file when the MCO has requested a major or minor correction and the SK-SAI has successfully passed business validation; otherwise it will be blank.
7. The DLN received in the Inbound SK-SAI becomes the Inactivated DLN in the Validation Response file when the MCO has requested an inactivation of the SK-SAI by indicating a 'Form Action = Inactivate' and the SK-SAI has successfully passed business validation; otherwise it will be blank.
8. The DLN received in the Inbound SK-SAI becomes the submitted DLN (DLN previously created and received from TMHP for an SK-SAI) in the Validation Response file only when the MCO has requested an inactivation or a major/minor correction on the SK-SAI and the validations failed, otherwise it will be blank.
9. Validation status will indicate the results of both the schema and business validation and can be accepted or rejected.
10. Reject reason field will list up to 100 errors (per form) that were found during both types of validation, schema and business.

#### 2.3.1.1 SK-SAI Schema Validation

The schema validation checks to see if the SK-SAI conforms to the XML schema, which is based on the Document Map. It is the state's expectation that the MCO will validate the data prior to submission and the SK-SAI will be rejected if it does not pass this level of validation.

1. For Inactivation:
  - a. There are no schema validations. The business validations confirm the values submitted.
2. For other scenarios:
  - a. The schema validation is part of the standard XSD file sent to the MCO's with all length and format validations being done on SK-SAI fields. The required/optional field validation is done on the CORE Module only.

#### 2.3.1.2 SK-SAI Business Validation

The business validation checks to see if the SK-SAI conforms to the business rules associated with creation of the DLN in the TMHP LTC Online Portal. The business validations executed by TMHP (per SK-SAI) can be found in Appendix A of this document.

### 2.3.2 Substantive Response File

1. The Substantive Response file will be placed on TxMedCentral in the corresponding MCO folder: [\\...\... where <MCO> corresponds to the abbreviated MCO name.
  - a. SUPGENL – Superior Health plan
  - b. UHCGENL – United Healthcare - Texas
  - c. AMCGENL – AMERIGROUP Texas, Inc.
  - d. CFGENL - Community First Health Plans
  - e. TXCGENL - Texas Children's Health Plan
  - f. CKCGENL - Cook Children's Health Plan
  - g. DRCGENL - Driscoll Children's Health Plan
  - h. AETGENL - AETNA
  - i. BCBGENL – Blue cross Blue Shield](#)
2. The naming convention for the Validation Response file is: [SUB<SKSAIPCYYYYMMDD>](#) where:
  - a. SUB = Substantive Response file
  - b. [<SKSAIPCYYYYMMDDSEQ>](#) = Inbound SK-SAI File name
3. The details of the fields within this response file can be found in the SK-SAI\_Batch\_Substantive\_Response schema and Appendix C of this document.
4. The information that is communicated from TMHP to the MCO in this response file must be used by the MCO to determine next steps in their system and operations processes. The information includes:
  - a. Medicaid Number when obtained by TMHP for the applicant who was pending Medicaid (indicated by the MCO as a plus sign (+) in the A13c field). Note: the process of obtaining a Medicaid Number by TMHP (from Texas Integrated Eligibility Redesign System (TIERS)) could take up to 180 days. The SK-SAI remains in a 'Medicaid ID Pending' status on the TMHP LTC Online Portal during this time period.
  - b. RUG value when the MCO indicated a one (1) for yes in Q6b field.
  - c. Notes from TMHP operations staff when additional information is needed from the MCO to determine MN.
  - d. MN status as it progresses at TMHP to a final outcome.
  - e. Medicaid Number validation status resulting from checking for a valid Medicaid Number in the HHSC systems. It is expected that the MCO will have validated the Medicaid Number against their local data prior to submitting an SK-SAI to prevent unnecessary errors.

## 2.4 SK-SAI Rules for MN, RUG and Medicaid Number

The MN Status and Medicaid Number Validation Status fields in the SK-SAI substantive response file work together to communicate the status of the corresponding processes at TMHP. As the SK-SAI moves through the MN determination and the Medicaid Number validation workflows at TMHP there are statuses that trigger the system to send the SK-SAI substantive response to report status or in some cases request action required by the MCO.

The SK-SAI field A13c Medicaid Number is used by TMHP to determine next steps in their process. The A13c field can be completed with either a valid Medicaid Number or a plus sign '+'.

The Medicaid Number should be completed as a plus sign '+' when the following conditions are met:

1. the applicant has been released from the MDCP Interest List;
2. the MCO has received a referral number from HHSC PSU staff; and
3. the applicant does not yet have Medicaid eligibility.

Otherwise, the field should contain a Medicaid Number, which was validated by the MCO using their system data to reduce rejections in the Medicaid Number validation process.

When a plus sign '+' in the A13c field is received at TMHP the MN process is executed first, followed by the Medicaid Number validation process. When a valid Medicaid Number is received at TMHP in the A13c field, the Medicaid Number validation process is executed first followed by the MN process.

Therefore, a combination of statuses could be returned in the Medicaid Number Validation Status field and MN Status fields of the SK-SAI substantive response as outlined in the tables below.

**Table 1. SK-SAI for Individual released from MDCP Interest List (no Medicaid Number)**

<b>A13c Plus Sign '+' submitted</b> - Medical Necessity (MN) starts first - Medicaid Number Validation starts second	
MN Status	Medicaid # Validation
In progress	Not started
Info Needed	Not started
Denied	Not started
Approved	Invalid
Approved	Valid
Approved	In Progress

**Table 2. SK-SAI for Individual with Medicaid Number**

<b>A13c = Medicaid Number</b> - Medicaid Number Validation starts first - Medical Necessity (MN) starts second	
MN Status	Medicaid # Validation
In progress	Valid
In progress	In Progress
Info Needed	Valid
Denied	Valid
Not started	Invalid

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Approved	Valid
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## 2.5 MN Status from TMHP

The Substantive Response file will be used to communicate the status of MN determination when required at TMHP. The MCO must wait for a final determination of MN from TMHP before establishing the ISP for an MDCP or CFC member.

1. **MN status = 'Approved'** means the MCO must move on to creation of the ISP and use the RUG received for an MDCP member.
2. **MN status = 'Denied'** means this is a final MN denial status including a fair hearing outcome, if applicable.
3. **MN status = 'Info Needed'** means the MCO must notify appropriate staff to contact TMHP with additional information that is needed for MN determination by TMHP Operations staff.
4. **MN status = 'In Progress'** means the MN process is continuing as expected, but the substantive response may have been transmitted to the MCO as a result of the Medicaid Number Validation process. The Medicaid Number Validation Status field value should be examined for actions that may need to be taken by the MCO. See the 'Medicaid Number Status from TMHP' section in this document for more information.
5. **MN Status = 'Not Started'** means the determination of MN has legitimately not started at TMHP. The substantive response file, in this case, may have been transmitted to the MCO as a result of the Medicaid Number Validation process. See the Medicaid Number Status from TMHP section in this document for more information.

## 2.6 Medicaid Number Status from TMHP

A validation process will take place when the SK-SAI is received at TMHP. The SK-SAI Substantive Response file will be used to communicate the status of that process.

1. **Medicaid Number Validation Status = 'Valid'** means no further action is required and the MN determination process at TMHP will continue normally for SK-SAIs with a valid Medicaid Number. For SK-SAIs with a plus sign (+) in the Medicaid Number field the MN determination process at TMHP is conducted first so there is no further action being taken at TMHP for this type of form.
2. **Medicaid Number Validation Status = 'Invalid'** the MCO should seek to correct the errors in the Medicaid Number through validation in their systems or contact with HHSC.
3. **Medicaid Number Validation Status = 'In Progress'** the process is continuing as expected. When this status is transmitted, the MCO should examine the MN status field to determine if action is required.
4. **Medicaid Number Validation Status = 'Not Started'** the validation process has legitimately not started at TMHP. The substantive response file in this case may have been transmitted to the MCO as a result of the MN process, and the MCO should examine the MN status field to determine if action is required.

## 2.7 RUG value from TMHP

The SK-SAI field Q6b 'MDCP RUG Calculation Required?' is used by TMHP to determine if a RUG calculation should be completed. Section O of the SK-SAI has mandatory fields that are used at TMHP to calculate the RUG. If these fields do not contain valid data, the RUG value field in the SK-SAI substantive response will be a value of 'invalid'. Otherwise this field will contain the value of the RUG from within the RUG-III 34 code set to be used by the MCO for an MDCP member's SK-ISP and payment of some of the services as defined in the long term

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services and supports (LTSS) billing matrix.

### 3 Submission Scenarios

The information in this section describes proper handling of the assessment by the MCO for submission to the state and the expected results for each type of scenario. The scenarios indicate a sequential process with a substantive response from TMHP after each step. However, it is possible that since the Substantive Response file is sent on a daily basis, a single substantive response could be transmitted with all information included for MN status, Medicaid ID Validation Status and RUG.

#### 3.1 Initial Assessment Scenarios

##### 3.1.1 Basic SK-SAI Scenario

###### 3.1.1.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number
  - b. A2 = 0 (Initial)
  - c. Q6a = 0 (No)
  - d. Q6b = 0 (No)
3. Submits the SK-SAI to TMHP.
4. Handles the Validation Response from TMHP for SK-SAI.
5. Completes the SK-ISP for the individual (submission to TMHP is not required).

###### 3.1.1.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the Validation Response file. And stores SK-SAI in the TMHP LTC Online Portal database for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file.
3. Sends the validation response to the MCO.
4. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

##### 3.1.2 CFC Scenario 1: Applicant has been receiving CFC, already has MN in TMHP LTC Online Portal (SG 21) active in the last 365 days

###### 3.1.2.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number
  - b. A2 = 0 (Initial)
  - c. Q6a = 0 (No)
  - d. Q6b = 0 (No)
- 3.
4. Completes Section M for CFC services.

5. Submits the SK-SAI to TMHP.
6. Handles Validation Response file from TMHP.
7. Completes the SK-ISP for the applicant (submission to TMHP is not required).

#### 3.1.2.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Note: there is no SK-SAI Substantive Response sent to the MCO for this scenario since MN determination already exists for the applicant.

#### 3.1.3 CFC Scenario 2: Applicant has been receiving or is seeking CFC, but has or needs level of care (LOC) through the Local Intellectual Developmental Disability Authority (LIDDA) or Local Mental Health Authority (LMHA)

##### 3.1.3.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Completes Section M for CFC services.
4. Submits the SK-SAI to TMHP.
5. Handles the validation response from TMHP for SK-SAI.
6. Completes the SK-ISP for the member (submission to TMHP is not required).

##### 3.1.3.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Note: there is no SK-SAI Substantive Response file sent to the MCO for this scenario since Q6a and Q6b are marked as '0'.



### 3.1.4 CFC Scenario 3: Applicant is seeking CFC, needs MN determination

#### 3.1.4.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 0 (No).
3. Completes MN required fields according to the Document Map.
4. Completes Section M for CFC services.
5. Submits SK-SAI to TMHP.
6. Handles the Validation Response from TMHP.
7. Handles Substantive Response from TMHP for MN and Medicaid Number Validation.
8. Completes the SK-ISP for the member (submission to TMHP is not required).

#### 3.1.4.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Performs Medicaid Number validation process.
5. Updates the Medicaid Number Validation Status field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs MN determination.
8. Updates the MN status field (and possibly the Notes field) in the substantive response.
9. Sends the substantive response to the MCO.
10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.

### 3.1.5 CFC Scenario 4: Client is seeking CFC but is receiving CFC in IDD Waiver

#### 3.1.5.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Submits SK-SAI to TMHP.
4. Handles verification response from TMHP.

5. Completes the SK-ISP for the individual (submission to TMHP is not required).

#### 3.1.5.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Note: there is no SK-SAI Substantive Response file sent to the MCO for this scenario since Q6a and Q6b are marked as '0'.

#### 3.1.6 MDCP Scenario 1: Current MDCP member, has active MN within the past 365 days (using the MN/LOC assessment not SK-SAI). No change in cost limit sought.

##### 3.1.6.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Validates MN approved status exists within 365 days.
4. Submits SK-SAI to TMHP.
5. Handles the validation response from TMHP.
6. Completes the SK-ISP Summary Tracking form and narrative form for the member.
7. Submits the SK-ISP Summary Tracking form (as an X12 278 initial transaction) to TMHP.
8. Handles response from TMHP for SK-ISP.

##### 3.1.6.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.



### 3.1.8 MDCP Scenario 3: New MDCP member with Medicaid Number

#### 3.1.8.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes MN required fields according to the Document Map.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits SK-SAI to TMHP.
6. Handles response from TMHP for RUG, MN and Medicaid Number Validation.
7. Completes the SK-ISP Summary Tracking form and narrative form for the member.
8. Submits the SK-ISP Summary Tracking form (as an X12 278 initial transaction) to TMHP.
9. Handles response from TMHP for SK-ISP.

#### 3.1.8.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the validation response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Calculates the RUG using Section O values.
5. Updates the RUG Value field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs Medicaid Number validation process.
8. Updates the Medicaid Number Validation Status field in the substantive response.
9. Sends the substantive response to the MCO.
10. Performs MN determination.
11. Updates the MN status field (and possibly the Notes field) in the substantive response.
12. Sends the substantive response to the MCO.
13. Steps 10 through 12 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
14. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and State staff.
    - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
  - b. Sends the X12 278 validation response to the MCO.

### 3.1.9 MDCP Scenario 4: New MDCP member without Medicaid Number (MAO)

#### 3.1.9.1 *MCO actions:*

1. Confirms a Referral number has been received from HHSC PSU staff.
2. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
3. Completes the fields to inform TMHP:
  - a. A13c = + (plus sign indicating pending Medicaid);
  - b. A2 = 0 (Initial);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
4. Completes MN required fields according to the Document Map.
5. Completes MDCP module (Section O) for calculation of RUG.
6. Submits SK-SAI to TMHP.
7. Handles response from TMHP for RUG, MN and Medicaid Number Validation.
8. Completes the SK-ISP Summary Tracking form and narrative form for the applicant.
9. Submits the SK-ISP Summary Tracking form (as an X12 278 initial transaction) to TMHP.
10. Handles response from TMHP for SK-ISP.

#### 3.1.9.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the validation response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Calculates the RUG using Section O values.
5. Updates the RUG Value field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs MN determination.
8. Updates the MN status field (and possibly the Notes field) in the substantive response.
9. Sends the substantive response to the MCO.
10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
11. Performs Medicaid Number validation process.
12. Updates the Medicaid Number Validation Status field in the substantive response.
13. Sends the substantive response to the MCO.
14. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
  - b. Sends the X12 278 validation response to the MCO.

### 3.1.10 CFC and MDCP Scenario 1: SK member requesting both CFC and MDCP services

#### 3.1.10.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 0 (Initial Assessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes the MN fields as defined in the Document Map.
  
4. Completes Section M for CFC services.
5. Completes MDCP module (Section O) for calculation of RUG.
6. Submits SK-SAI to TMHP.
7. Handles response from TMHP for RUG and Medicaid Number Validation.
8. Completes the SK-ISP Summary Tracking form and narrative form for the applicant.
9. Submits the SK-ISP Summary Tracking form (as an X12 278 initial transaction) to TMHP.
10. Handles response from TMHP for SK-ISP.

#### 3.1.10.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Calculates the RUG using Section O values.
5. Updates the RUG Value field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs MN determination.
8. Updates the MN status field (and possibly the Notes field) in the substantive response.
9. Sends the substantive response to the MCO.
10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
11. Performs Medicaid Number validation process.
12. Updates the Medicaid Number Validation Status field in the substantive response.
13. Sends the substantive response to the MCO.
14. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the X12 278 validation response.

- b. Sends the X12 278 validation response to the MCO.

## 3.2 Reassessment Scenarios

### 3.2.1 Basic SK-SAI Scenario

#### 3.2.1.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Submits the SK-SAI to TMHP.
4. Handles validation response from TMHP.
5. Completes the SK-ISP form for the member (submission to TMHP is not required).

#### 3.2.1.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the Validation Response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file.
2. Sends the validation response to the MCO.
3. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

### 3.2.2 CFC Scenario 1: Member has been receiving CFC, needs MN annual redetermination; OR existing member is now seeking CFC for the first time and needs MN

#### 3.2.2.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 0 (No).
3. Completes MN required fields according to the Document Map.
4. Completes Section M for CFC services.
5. Submits SK-SAI to TMHP.
6. Handles the response from TMHP for MN and Medicaid Number Validation.
7. Completes the SK-ISP form for the member (submission to TMHP is not required).

#### 3.2.2.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.



- a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
  4. Performs Medicaid Number validation process.
  5. Updates the Medicaid Number Validation Status field in the substantive response.
  6. Sends the substantive response to the MCO.
  7. Performs MN determination.
  8. Updates the MN status field (and possibly the Notes field) in the substantive response.
  9. Sends the substantive response to the MCO.
  10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.

### 3.2.3 CFC Scenario 2: Applicant or Member has been receiving or is seeking CFC, but has/needs LOC through the LIDDA or LMHA

#### 3.2.3.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Completes Section M for CFC services.
4. Submits the SK-SAI to TMHP.
5. Handles validation response from TMHP.
6. Completes the SK-ISP form for the applicant or member (submission to TMHP is not required).

#### 3.2.3.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the Validation Response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file.
2. Sends the validation response to the MCO.
3. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

### 3.2.4 CFC Scenario 3: Applicant or Member has been receiving CFC in IDD Waiver

#### 3.2.4.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Submits SK-SAI to TMHP.
4. Handles verification response from TMHP.
5. Completes the SK-ISP form for the member (submission to TMHP is not required).

#### 3.2.4.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP system.
3. Sends the validation response to the MCO.
4. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

### 3.2.5 MDCP Scenario 1: Current STAR Kids MDCP member

#### 3.2.5.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes MN required fields according to the Document Map.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits SK-SAI to TMHP.
6. Handles response from TMHP for RUG, MN and Medicaid Number Validation.
7. Completes the SK-ISP form for the member.
8. Submits the SK-ISP Summary Tracking form (as an X12 278 reassessment transaction) to TMHP.
9. Handles response from TMHP for SK-ISP.

#### 3.2.5.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.

- a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
  4. Calculates the RUG using Section O values.
  5. Updates the RUG Value field in the substantive response.
  6. Sends the substantive response to the MCO.
  7. Performs Medicaid Number validation process.
  8. Updates the Medicaid Number Validation Status field in the substantive response.
  9. Sends the substantive response to the MCO.
  10. Performs MN determination.
  11. Updates the MN status field (and possibly the Notes field) in the substantive response.
  12. Sends the substantive response to the MCO.
  13. Steps 10 through 12 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
  14. Later receives the submitted SK-ISP:
    - a. Executes schema and business validations.
      - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
      - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
    - b. Sends the X12 278 validation response to the MCO.

### 3.2.6 MDCP Scenario 2: Current SK member, new MDCP client with Medicaid Number

#### 3.2.6.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK individual, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes MN required fields according to the Document Map.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits SK-SAI to TMHP.
6. Handles response from TMHP for RUG, MN and Medicaid Number Validation.
7. Completes the SK-ISP form for the applicant.
8. Submits the SK-ISP Summary Tracking form (as an X12 278 reassessment transaction) to TMHP.
9. Handles response from TMHP for SK-ISP.

#### 3.2.6.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.

- a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
  4. Calculates the RUG using Section O values.
  5. Updates the RUG Value field in the substantive response.
  6. Sends the substantive response to the MCO.
  7. Performs Medicaid Number validation process.
  8. Updates the Medicaid Number Validation status field in the substantive response.
  9. Sends the substantive response to the MCO.
  10. Performs MN determination.
  11. Updates the MN status field (and possibly the Notes field) in the substantive response.
  12. Sends the substantive response to the MCO.
  13. Steps 10 through 12 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
  14. Later receives the submitted SK-ISP:
    - a. Executes schema and business validations.
      - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
      - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
    - b. Sends the X12 278 validation response to the MCO.

### 3.2.7 CFC and MDCP Scenario 1: SK member for both CFC and MDCP services

#### 3.2.7.1 MCO actions:

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 1 (Reassessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes MN required fields according to the Document Map.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits SK-SAI to TMHP.
6. Handles response from TMHP for RUG, MN and Medicaid Number Validation.
7. Completes the SK-ISP form for the member.
8. Submits the SK-ISP X12 278 reassessment transaction to TMHP with only MDCP services.
9. Handles response from TMHP for SK-ISP.

#### 3.2.7.2 TMHP actions:

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.

- a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the Validation Response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the Validation Response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Calculates the RUG using Section O values.
5. Updates the RUG Value field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs Medicaid Number validation process.
8. Updates the Medicaid Number Validation status field in the substantive response.
9. Sends the substantive response to the MCO.
10. Performs MN determination.
11. Updates the MN status field (and possibly the Notes field) in the substantive response.
12. Sends the substantive response to the MCO.
13. Steps 10 through 12 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.
14. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
  - b. Sends the X12 278 validation response to the MCO.

### 3.3 Significant Change in Condition Reassessment (SCCR)

#### 3.3.1 Basic SK-SAI Scenario

##### 3.3.1.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Submits the SK-SAI to TMHP.
4. Handles validation response from TMHP.
5. Completes the SK-ISP for the member (submission to TMHP is not required).

##### 3.3.1.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.

- a. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the validation response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
- b. If rejected, indicates 'rejected' in the Validation Status field in the validation response file.
3. Sends the validation response to the MCO.
4. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

### 3.3.2 CFC Scenario 1: Member has been receiving CFC, already has MN within the past 365 days

One possible reason for this scenario is that there was a significant change in life circumstance or new medical condition that does not impact MN and the member is seeking significant changes in their approved hours for PCS/CFC and/or PDN. In those cases, the MCO would reassess the child in order to establish a new ISP for those services, but does not need a new MN determination. Regardless, the SK-SAI must be submitted to TMHP.

#### 3.3.2.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Completes Section M for CFC services.
4. Validates an SK-SAI with MN approved status exists within 365 days.
5. Submits the SK-SAI to TMHP.
6. Handles validation response from TMHP.
7. Completes the SK-ISP Summary Tracking form and narrative form for the member.
8. Submits the SK-ISP Summary Tracking form (as an X12 278 initial transaction) to TMHP.
9. Handles response from TMHP for SK-ISP.

#### 3.3.2.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the validation response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the Validation Status field in the validation response file.
2. Sends the validation response to the MCO.
3. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

### 3.3.3 CFC Scenario 2: Current SK client, seeking CFC due to Significant Change in Condition, MN needed

#### 3.3.3.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 0 (No).
3. Completes MN required fields according to the Document Map.
4. Completes Section M for CFC services.
5. Submits SK-SAI to TMHP.
6. Handles validation response from TMHP.
7. Handles substantive response from TMHP for MN and Medicaid Number Validation.
8. Completes the SK-ISP for the member (submission to TMHP is not required).

#### 3.3.3.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the validation response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the validation response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Performs Medicaid Number validation process.
5. Updates the Medicaid Number Validation status field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs MN determination.
8. Updates the MN status field (and possibly the Notes field) in the substantive response.
9. Sends the substantive response to the MCO.
10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.

### 3.3.4 CFC Scenario 3: Member has been receiving or is seeking CFC, but has/needs LOC through the LIDDA or LMHA

#### 3.3.4.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid Number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No);

3. Submits the SK-SAI to TMHP.
4. Handles validation response from TMHP.
5. Completes the SK-ISP for the applicant (submission to TMHP is not required).

#### 3.3.4.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the validation response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the Validation Status field in the validation response file.
2. Sends the validation response to the MCO.
3. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

#### 3.3.5 MDCP Scenario 1: Current MDCP member reassessed due to Significant Change in Condition, seeking new cost limit

##### 3.3.5.1 *MCO actions:*

1. Completes SK-SAI required fields and triggers according to the Document Map.
2. Completes the field used to inform TMHP as follows:
  - a. A13c = Medicaid number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 1 (Yes).
3. Validates an SK-SAI with MN approved status exists within 365 days.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits the SK-SAI to TMHP.
6. Handles validation response from TMHP.
7. Handles response from TMHP for RUG and Medicaid Number Validation.
8. Completes the full SK-ISP and narrative form for the member once RUG has been received and Medicaid Number is valid (submission to TMHP is not required).

##### 3.3.5.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, assigns it to the DLN field, and indicates 'accepted' in the Validation Status field in the validation response file. And stores SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the Validation Status field in the validation response file.
2. Sends the validation response to the MCO.
3. Calculates the RUG using Section O values.
4. Updates the RUG Value field in the substantive response.
5. Sends the substantive response to the MCO.
6. Performs Medicaid Number validation process.



7. Updates the Medicaid Number Validation status field in the substantive response.
8. Sends the substantive response to the MCO.

### 3.3.6 CFC and MDCP Scenario 1: SK member requesting both CFC and MDCP services

#### 3.3.6.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 2 (Significant Change in Condition Reassessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 1 (Yes).
3. Validates an SK-SAI with MN approved status exists within 365 days.
4. Completes MDCP module (Section O) for calculation of RUG.
5. Submits SK-SAI to TMHP.
6. Handles response from TMHP for RUG and Medicaid Number Validation.
7. Completes the full SK-ISP and narrative form for the member once RUG has been received and Medicaid Number is valid (submission to TMHP is not required).

#### 3.3.6.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted, creates a DLN, assigns it to the DLN field, indicates 'accepted' in the Validation Status field in the validation response file and stores the SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected, indicates 'rejected' in the Validation Status field in the validation response file. No DLN is created and the SK-SAI data is not stored in the TMHP LTC Online Portal.
3. Sends the validation response to the MCO.
4. Calculates the RUG using Section O values.
5. Updates the RUG Value field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs Medicaid Number validation process.
8. Updates the Medicaid Number Validation status field in the substantive response.
9. Sends the substantive response to the MCO.
10. Later receives the submitted SK-ISP:
  - a. Executes schema and business validations.
    - i. If accepted, creates a DLN, stores SK-ISP in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
    - ii. If rejected, indicates 'rejected' in the X12 278 validation response.
  - b. Sends the X12 278 validation response to the MCO.

## 4 SK-SAI Correction Scenarios

There are two types of corrections allowed on an SK-SAI, Major and Minor. In both cases, the corrected SK-SAI must be submitted in its entirety, as it will *replace* the previously submitted assessment on the applicant or member as most current (i.e., the MCO may not simply submit corrections to specific fields). A Corrected SK-SAI may only be submitted within 14 days following submission of the SK-SAI. Otherwise, it must be inactivated (see Inactivation Scenario below). A Major correction to a previously submitted assessment is used to correct MN fields on the SK-SAI. The fields used for MN are identified on the Document Map.

- a. An MCO may not submit a major correction on an SK-SAI originally submitted by another MCO. See Transfer Scenarios below.
2. A Minor correction to a previously submitted assessment is used to correct fields other than the MN fields on the SK-SAI.
  - a. An MCO may not submit a Minor correction on an SK-SAI originally submitted by another MCO. See Transfer Scenarios below.

An SK-SAI minor or major correction should not be submitted to TMHP until after an SK-ISP has been submitted with the following exception:

1. When a referral is received from HHSC PSU for a child off the MDCP interest list and the child does not have an SSN, the SK-SAI will be accepted by TMHP with zeroes in the SSN. The MN process will take place with substantive response files being transmitted.
2. However, if an ISP Summary Tracking 278 initial transaction is submitted without a valid SSN it will be rejected.
3. If a valid SSN is received within 14 days of the submission date for the SK-SAI a Minor Correction SK-SAI can be submitted to TMHP with the valid SSN and the same Section Q6a and Q6b values as the originally submitted SK-SAI.
4. If obtaining the SSN takes longer than the allowable 14 days for a correction, the SK-SAI will be rejected at TMHP. To adjust the SSN under this condition the original SK-SAI must be inactivated and a new SK-SAI submitted with the valid SSN at which time the MN process will begin again at TMHP.

### 4.1 Major Correction

#### 4.1.1 Major Correction Scenario 1: Changes to MN fields on a previously submitted SK-SAI for an MDCP member.

##### 4.1.1.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 4 (Major correction to recent assessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 1 (Yes).
3. Completes MN fields with change(s).
4. Submits to TMHP with DLN field (in the schema) = DLN previously provided by TMHP for the SK-SAI being corrected.
5. Handles validation response from TMHP.

- a. If accepted, the original SK-SAI DLN will now be marked as status “Corrected” in the TMHP LTC Online Portal. The newly submitted SK-SAI will be assigned a new DLN and supersede the submitted SK-SAI DLN.
6. Handles substantive response from TMHP for MN, RUG and Medicaid Number Validation.
7. Completes the full SK-ISP for the member once MN is approved, RUG is calculated and Medicaid Number is valid (submission to TMHP is not required).

#### 4.1.1.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted:
    - i. Creates a DLN and assigns it to the DLN field in the Validation Response.
    - ii. Assigns the DLN submitted by the MCO to the Parent DLN.
    - iii. Indicates ‘accepted’ in the Validation Status field.
    - iv. Changes the status of the submitted DLN to ‘Corrected’, thus making it a parent SK-SAI. This DLN is available for access by MCOs and HHSC staff, but is no longer active in the TMHP LTC Online Portal.
    - v. Stores the child SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected:
    - i. Indicates ‘rejected’ in the Validation Status field in the validation response file.
    - ii. Assigns the DLN submitted by the MCO in the Submitted DLN field.
    - iii. Provides the reason for rejection in the Reject Reason field.
    - iv. No child DLN is created and the SK-SAI data is not stored in the TMHP system.
3. Sends the validation response to the MCO.
4. Calculates RUG using Section O values.
5. Updates the Substantive Response with RUG value.
6. Sends the Substantive Response to the MCO.
7. Performs Medicaid Number validation process on the child DLN.
8. Updates the Medicaid Number Validation status field in the substantive response.
9. Sends the substantive response to the MCO.
10. Performs MN Determination on the child DLN.
11. Updates the MN status field (and possibly the Notes field) in the substantive response.
12. Sends the substantive response to the MCO.
13. Steps 10 through 12 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.

#### 4.1.2 Major Correction Scenario 2: Changes to MN fields on a previously submitted SK-SAI for a CFC applicant.

##### 4.1.2.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;

- b. A2 = 4 (Major correction to recent assessment);
  - c. Q6a = 1 (Yes);
  - d. Q6b = 0 (No).
3. Completes MN fields with changes.
4. Submits to TMHP with DLN field (in the schema) = DLN previously provided by TMHP for the SK-SAI being corrected.
5. Handles validation response from TMHP.
  - a. If accepted, the original SK-SAI DLN will now be marked as status "Corrected" in the TMHP LTC Online Portal. The newly submitted SK-SAI will be assigned a new DLN and supersede the submitted SK-SAI DLN.
6. Handles substantive response from TMHP for MN and Medicaid Number Validation.

#### 4.1.2.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted:
    - i. Creates a DLN and assigns it to the DLN field in the Validation Response.
    - ii. Assigns the DLN submitted by the MCO to the Parent DLN.
    - iii. Indicates 'accepted' in the Validation Status field.
    - iv. Changes the status of the submitted DLN to 'Corrected', thus making it a parent SK-SAI. This DLN is available for access by MCOs and HHSC staff, but is no longer active in the TMHP LTC Online Portal.
    - v. Stores the child SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected:
    - i. Indicates 'rejected' in the Validation Status field in the validation response file.
    - ii. Assigns the DLN submitted by the MCO in the Submitted DLN field.
    - iii. Provides the reason for rejection in the Reject Reason field.
    - iv. No child DLN is created and the SK-SAI data is not stored in the TMHP system.
3. Sends the validation response to the MCO.
4. Performs Medicaid Number validation process on the child DLN.
5. Updates the Medicaid Number Validation status field in the substantive response.
6. Sends the substantive response to the MCO.
7. Performs MN Determination on the child DLN.
8. Updates the MN status field (and possibly the Notes field) in the substantive response.
9. Sends the substantive response to the MCO.
10. Steps 7 through 9 will repeat if additional information is needed from the MCO to arrive at a final determination of MN.

## 4.2 Minor Correction

### 4.2.1 Minor Correction Scenario 1 (Basic SK-SAI): Changes made to non-MN fields (as defined in Document Map) not including Section O

#### 4.2.1.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic SK member, according to the Document Map.
2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 3 (Minor correction to recent assessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 0 (No).
3. Prevents changes to MN fields for a Minor Correction.
4. Completes any changes to non-MN fields (not Section O for this scenario).
5. Submits to TMHP with DLN field (in the schema) = DLN previously provided by TMHP for the SK-SAI being corrected.
6. Handles validation response from TMHP.
  - a. If accepted, the original SK-SAI will now be marked as status “Corrected” in the TMHP LTC Online Portal. The newly submitted SK-SAI will be assigned a new DLN and supersede the previous SK-SAI.

#### 4.2.1.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted:
    - i. Creates a DLN and assigns it to the DLN field in the Validation Response.
    - ii. Assigns the DLN submitted by the MCO to the Parent DLN.
    - iii. Indicates ‘accepted’ in the Validation Status field.
    - iv. Changes the status of the submitted DLN to ‘Corrected’, thus making it a parent SK-SAI. This DLN is available for access by MCOs and HHSC staff, but is no longer active in the TMHP LTC Online Portal.
    - v. Stores the child SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected:
    - i. Indicates ‘rejected’ in the Validation Status field in the validation response file.
    - ii. Assigns the DLN submitted by the MCO to the Submitted DLN field.
    - iii. Provides the reason for rejection in the Reject Reason field.
    - iv. No child DLN is created and the SK-SAI data is not stored in the TMHP system.
3. Sends the validation response to the MCO.

### 4.2.2 Minor Correction Scenario 2 (CFC and MDPCP): Changes made to non-MN fields including Section O fields

#### 4.2.2.1 *MCO actions:*

1. Completes SK-SAI required fields, for a basic STAR Kids member, according to the Document Map.

2. Completes the fields to inform TMHP:
  - a. A13c = Medicaid Number;
  - b. A2 = 3 (Minor correction to recent assessment);
  - c. Q6a = 0 (No);
  - d. Q6b = 1 (Yes).
3. Prevents changes to MN fields for a Minor Correction.
4. Completes changes to non-MN fields including Section O for RUG.
5. Submits to TMHP with DLN field (in the schema) = DLN previously provided by TMHP for the SK-SAI being corrected.
6. Handles validation response from TMHP.
  - a. If accepted, the original SK-SAI will now be marked as status “Corrected” in the TMHP LTC Online Portal. The newly submitted SK-SAI will be assigned a new DLN and supersede the previous SK-SAI.
7. Handles Substantive Response from TMHP for the RUG value.
8. Completes the full SK-ISP for the member (submission to TMHP is not required).
9. Submits the SK-ISP X12 278 transaction to TMHP (for MDCP members only).
10. Handles response from TMHP for SK-ISP.

#### 4.2.2.2 *TMHP actions:*

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted:
    - i. Creates a DLN and assigns it to the DLN field in the Validation Response.
    - ii. Assigns the DLN submitted by the MCO to the Parent DLN.
    - iii. Indicates ‘accepted’ in the Validation Status field.
    - iv. Changes the status of the submitted DLN to ‘Corrected’, thus making it a parent SK-SAI. This DLN is available for access by MCOs and HHSC staff, but is no longer active in the TMHP LTC Online Portal.
    - v. Stores the child SK-SAI in the TMHP LTC Online Portal for later access by MCOs and HHSC staff.
  - b. If rejected:
    - i. Indicates ‘rejected’ in the Validation Status field in the validation response file.
    - ii. Assigns the DLN submitted by the MCO in the Submitted DLN field
    - iii. Provides the reason for rejection in the Reject Reason field
    - iv. No child DLN is created and the SK-SAI data is not stored in the TMHP system.
3. Sends the validation response to the MCO.
4. Calculates the RUG using data in Section O on the child DLN.
5. Stores the RUG in the RUG Value of the substantive response.
6. Sends the substantive response to the MCO.
7. Performs Medicaid Number validation process on the child DLN.
8. Updates the Medicaid Number Validation status field in the substantive response.
9. Sends the substantive response to the MCO.

## 5 SK-SAI Inactivation Scenario

An SK-SAI Inactivation should only occur in three cases:

1. When changes to fields in an existing SK-SAI must occur outside the 14-day correction period.
2. If an applicant or member or legally authorized representative (LAR) chooses voluntarily to refuse Medicaid services and such refusal is documented on file with the MCO.
3. If the wrong applicant or member was assessed.

### 5.1 MCO actions:

1. User identifies SK-SAI to be inactivated in MCO system.
2. Submits SK-SAI to TMHP with:
  - a. DLN field (in the schema) = DLN previously provided by TMHP for the SK-SAI to be inactivated.
  - b. Form Action (in the schema) = 'Inactivate'
3. Handles validation response from TMHP.
4. Inactivates SK-SAI in MCO system once the Inactivation request was successful at TMHP.
5. For MDCP members only, inactivates associated SK-ISP in MCO system.
6. For MDCP members only, inactivates the SK-ISP using the TMHP LTC Online Portal.
  - a. (Note: this function will not be available in the TMHP LTC Online Portal at go-live (November 1, 2016). The function is currently scheduled to release in January 2017. If an inactivation is needed please contact HHSC PSU.

### 5.2 TMHP actions:

1. Receives the submitted SK-SAI.
2. Executes schema and business validations.
  - a. If accepted:
    - i. Assigns the DLN submitted by the MCO to the Inactivated DLN field in the Validation Response file.
    - ii. Indicates 'accepted' in the Validation Status field.
    - iii. Changes the status of the submitted DLN to 'Form Inactivated'. This DLN is available for access by MCOs and HHSC staff, but is no longer active in the TMHP LTC Online Portal.
  - b. If rejected:
    - i. Indicates 'rejected' in the Validation Status field in the validation response file.
    - ii. Assigns the DLN submitted by the MCO in the Submitted DLN field in the validation response file.
    - iii. Provides the reason for rejection in the Reject Reason field in the validation response file.
    - iv. The submitted DLN remains active in the TMHP system.
3. Sends the validation response to the MCO.
4. No SK-SAI Substantive Response file is sent to the MCO for this scenario.

## 6 Transfer Scenario

When a member changes MCOs, the gaining MCO will obtain access through the TMHP LTC Online Portal to the current and all previous SK-SAI forms for that member. Previous SK-SAI forms are not available for download. The losing MCO will no longer have access to these SK-SAI forms. All SK-SAIs and ISPs submitted to the TMHP LTC Online Portal are tied to the Medicaid member.

### 6.1 MCO actions:

1. The MCO can use an existing SK-SAI present on the TMHP Portal system by searching for the latest SK-SAI and SK-ISP for the incoming member. Note: The data associated with the SK-SAI is not available for download from the TMHP LTC Online Portal.
  - a. If an SK-SAI is located on the TMHP LTC Online Portal, view the A2 field for the type of assessment
    - i. Determine when the next required SK-SAI is due:
      1. If the A2 field is equal to 0 (Initial) or 1 (Reassessment) the next required assessment is 365 days from the R3 Assessment Reference Date field. However, a Significant Change in Condition Reassessment (SCCR) where A2 is equal to 2, can be submitted off-cycle when required.
      2. If the A2 field is equal to 2 (Significant Change in Condition Reassessment) search for an SK-SAI where the A2 field is equal to a 0 or 1 and determine the next due date of the assessment as 365 days from the R3 Assessment Reference Date field.
    - b. Locate the MN status at the top of the page:
      - i. If the MN status is 'Not Applicable' meaning there was no MN determined:
        1. MCO may submit a Reassessment (A2=1) or SCCR (A2=2).
        2. MCO may not submit an Initial, Minor Correction, or Major Correction.
        3. MCO may deactivate the SK-SAI form on file.
      - ii. If the MN status is 'Approved'
        1. MCO may submit a Reassessment or SCCR.
          - a. A Reassessment may not be submitted with "Q6a=1" if the member is not due for MN redetermination.
        2. The MCO may not submit an Initial, Minor Correction, or Major Correction.
        3. The MCO may deactivate the SK-SAI form on file.
      - iii. If the MN status is 'Not Started' or 'In Progress'
        1. The substantive response with the results of MN will be transmitted to your plan code using TxMedCentral.
        2. MCO may not submit an Initial, Reassessment, SCCR, Major Correction, or Minor Correction.
          - a. MCO must wait for SK-SAI to reach final disposition before submitting a new SK-SAI.
        3. MCO may Inactivate an SK-SAI form that is in pending status other than the following fair hearing form statuses:



- a. Pending Fair Hearing; or
  - b. FH Appeal Denied.
- iv. If the MN status is denied, then this applicant or member is not eligible for either CFC or MDCP, whichever is designated on the SK-SAI.

**7 Appendix A. SK-SAI Schema and Business Validations**

The Business Validations executed by TMHP for each SK-SAI submitted by the MCO are listed in the following table. Any changes to these validations will be communicated to the MCOs as a new version of this document.

Note that Table 4 was removed in Version 5.0 since it was duplicate information to Table 3 in this section.

**Table 3. Schema & Business Validations**

#	Business Validation	Error Message
1	More than 100 SK-SAI forms within the Inbound SK-SAI batch file	'14-The number of forms within the batch file exceeded the limit.'  Note: The entire batch file will be rejected and each form will have the same error message stated above in validation response file.
2	Duplicate record id's within the Inbound SK-SAI batch file	'13- Duplicate record id.'
3	Plan code associated to contract number on the Schema for the SK-SAI form is not the same the plan code on the file name of Inbound SK-SAI batch file	'15- Valid Contract Number is required to process the request'
4	Invalid 'Field Identifiers' are present in the Inbound SK-SAI batch file for SK-SAI form	'16- Invalid Field Identifiers'
5	Invalid Value in Form Action Field	'11- Valid value is required on Form Action field to process the request'
6	Invalid Value in Reason for Assessment Field	'12-Valid value is required on Reason for Assessment field to process the request'
7	If schema does not have a DLN AND Form Action = Blank AND Reason for Assessment = 'Initial (0)' or 'Reassessment (1)' or 'Significant change in condition re-assessment (2)', then set status of the SK-SAI form to 'Form Submitted' else go to step 8	N/A

#	Business Validation	Error Message
8	If schema has a DLN and that is not located within TMHP LTC Online Portal, then reject the form else go to step 9	If Form Action = 'Inactivate' then '1- Inactivation Request is rejected. DLN received in Schema is not valid'  Else Form Action = Blank, then '7- Correction Request is rejected. DLN received in Schema is not valid'
9	If schema does not have a DLN AND Form Action = 'Inactivate', then reject the form else go to step 11	'0- Inactivation Request is rejected. Valid DLN is required to process the request'
10	If schema does not have a DLN AND Form Action = Blank AND Reason for Assessment = 'Minor Correction (3)' or 'Major Correction (4)', then reject the child SK-SAI form else go to step 17	'6- Correction Request is rejected. Valid DLN is required to process the request'
11	If schema has a DLN and that is located within TMHP LTC Online Portal - AND Form Action = 'Inactivate' AND Form Status = 'Corrected' or 'Inactivated' or 'Invalid/Complete', then reject the form else go to step 12	'2- Inactivation Request is rejected. DLN should be in valid status to process the request'
12	If schema has a DLN and that is located within TMHP LTC Online Portal - AND Form Action = 'Inactivate' AND Medicaid ID on DLN = '+' AND MCO = MCO2 submitted the inactivation request for SK-SAI form submitted by MCO1, then reject the form else go to step 13	'3- Inactivation Request is rejected. Forms with '+' sign in Medicaid id field will only be inactivated by the submitter of the form'

#	Business Validation	Error Message
13	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = 'Inactivate' AND Medicaid ID on DLN = 9 digit Medicaid Id AND MCO = MCO2 submitted the inactivation request for SK-SAI form submitted by MCO1 AND Applicant Elig on Current Date = applicant is associated to MCO2 on day inactivation request is received AND Form Status = 'FH Appeal Denied' or 'MN Approved' or 'Pending Fair Hearing' or 'Processed Complete' , then reject the form else go to step 14	'4 - Inactivation Request is rejected. Forms in this status will only be inactivated by the submitter of the form'
14	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = 'Inactivate' AND Medicaid ID on DLN = 9 digit Medicaid Id AND MCO = MCO2 submitted the inactivation request for SK-SAI form submitted by MCO1 AND Client Elig on Current Date = Client does not associated to MCO2 on day inactivation request is received, then reject the form else go to step 9	'5- Inactivation Request is rejected. Member is not associated to the plan code on the date inactivation request is received.'
15	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = 'Inactivate' AND Medicaid ID on DLN = 9 digit Medicaid Id AND MCO = MCO1 submitted the inactivation request for SK-SAI form submitted by MCO1 AND Form Status ≠ 'Corrected' or 'Inactivated' or 'Invalid/Complete' , then set status of a SK-SAI form to 'Inactivated' and stop processing the form.else go to step 15	N/A

#	Business Validation	Error Message
16	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = 'Inactivate' AND Medicaid ID on DLN = 9 digit Medicaid Id AND MCO = MCO2 submitted the inactivation request for SK-SAI form submitted by MCO1 AND Client Elig on Current Date = Client is associated to MCO2 on day inactivation request is received AND Form Status ≠ 'Corrected' or 'Inactivated' or 'Invalid/Complete' or 'FH Appeal Denied' or 'MN Approved' or 'Pending Fair Hearing' or 'Processed Complete' , then set status of a SK-SAI form to 'Inactivated' and stop processing the form	
17	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = Blank AND Reason for Assessment ≠ 'Minor Correction (3)' or 'Major Correction (4)' , then reject the child form and not change the status of the parent form else go to step 18	'10- DLN is not required to process the request'
18	If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = Blank AND Reason for Assessment = 'Minor Correction (3)' or 'Major Correction (4)' AND Form Status = 'Corrected' or 'Inactivated' or 'Invalid/Complete' , then reject the child form and not change the status of the parent form else go to step 19	'8- Correction Request is rejected. DLN should be in valid status to process the request'

#	Business Validation	Error Message
19	<p>If schema has a DLN and that is located within TMHP LTC Online Portal AND                      Form Action = Blank AND                      Reason for Assessment = 'Minor Correction (3)' or 'Major Correction (4)' AND                      Form Status ≠ 'Corrected' or 'Inactivated' or 'Invalid/Complete' AND                      Child Form = Fails Schema Validation, then reject the child form and not change the status of the parent form                      else go to step 20</p>	<p>Schema Validation Error messages will be sent for Child form</p>
20	<p>If schema has a DLN and that is located within TMHP LTC Online Portal AND                      Form Action = Blank AND                      Reason for Assessment ≠ 'Minor Correction (3)' or 'Major Correction (4)' AND                      Form Status ≠ 'Corrected' or 'Inactivated' or 'Invalid/Complete' AND                      Child Form = Passes Schema Validation AND                      MCO = MCO2 submitted the Correction request for SK-SAI form submitted by MCO1 , then reject the child form and not change the status of the parent form                      else go to step 21</p>	<p>'9- Correction Request is rejected, Forms submitted by other entity cannot be corrected.'</p>
21	<p>If schema has a DLN and that is located within TMHP LTC Online Portal AND Form Action = Blank AND                      Reason for Assessment ≠ 'Minor Correction (3)' or 'Major Correction (4)' AND Form Status ≠ 'Corrected' or 'Inactivated' or 'Invalid/Complete' AND Child Form = Passes Schema Validation AND MCO = MCO1 submitted the Correction request for SK-SAI form submitted by MCO1 , then set status of the child SK-SAI form to 'Form Submitted' and parent form to 'Corrected'</p>	<p>N/A</p>

<b>22</b>	If the fields that are indicated as “Required” (Document map) for an SK-SAI submission through TMHP LTC Online Portal, the submission request will be rejected through a business validation ‘19’	<b>*19- Valid value is required on {Field Name} field to process the request'</b>
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**8 Appendix B. SK-SAI Validation Response File Layout**

**Table 4. Validation Response File layout**

Field Name	Required Optional Conditional	Conditional Rule	Data Type	Field Length	Valid Values
Record ID	Required	N/A	Numeric	30	N/A
MCO Unique Identifier	Optional	N/A	Alphanumeric	50	N/A
DLN	Conditional	If Validation status = 'Accepted' Form Action = 'Blank'	Numeric	12	DLN Blank
Parent DLN	Conditional	If Reason for Assessment = 'Minor or Major Correction' Validation Status = 'Accepted'	Numeric	12	Parent DLN Blank
Inactivated DLN	Conditional	If Form action = 'Inactivate' Validation Status = 'Accepted'	Numeric	12	Inactivated DLN Blank
Submitted DLN	Conditional	If 'Minor or Major Correction Request' = Rejected OR If 'Inactivation Request' = Rejected	Numeric	12	Original DLN Blank
Validation Status	Required	N/A	Alphanumeric	100	Accepted Rejected

Field Name	Required Optional Conditional	Conditional Rule	Data Type	Field Length	Valid Values
'Reject Reason code' + 'Reject reasons'	Conditional	If Validation status = 'Rejected'	Alphanumeric	500 per reject reason code and reject reason <b>Note:</b> <b>Repeater field max 100 reasons will be displayed</b>	N/A



9 Appendix C. Substantive Response File Layout

Table 5. Substantive Response File layout

Field Name	Required Optional Conditional	Data Type	Field Length (Max field Length)	Valid Values
DLN	Required*	Numeric	12	NA
First Name	Required*	Alphanumeric	15	NA
Middle Initial	Optional	Alphanumeric	1	NA
Last Name	Required*	Alphanumeric	25	NA
Birthdate	Required*	Date	mm/dd/yyyy	NA
SSN	Required*	Numeric	9	NA
Medicaid Number	Required*	Alphanumeric (apply restriction to allow only numeric and the special character '+')	9	NA
RUG value	Optional	Alphanumeric	4	N/A
Notes	Optional	Alphanumeric	500 per Notes Note: max 100 Notes will be displayed	NA
MN Status	Optional	Alphanumeric	100	Approved Denied In Progress Info Needed Not Started Not Applicable Invalid
Medicaid Number Validation Status	Optional	Alphanumeric	100	Valid Invalid In Progress Not Started

## 10 Appendix D. SK-ISP Processing with TMHP

**SK-ISP TMHP System Requirements**

Accenture must support receiving 5010 X12 278 transaction requests from STAR Kids and STAR Health MCOs that represent SK-ISP forms.

The system must accept batch X12 278 SK-ISP request files in TxMedCentral from MCO submitters.

The system must allow MCOs to submit X12 278 SK-ISP request files to the following folder located in TxMedCentral:\\...\\<MCO>ENC\\...

where <MCO> corresponds to the abbreviated MCO name.

The system will accept up to 75 MB for the SK-ISP request files retrieved from the MCO TxMedCentral folders.

EDI will rename the SK-ISP request files retrieved from the MCO TxMedCentral folders with '<fileid>.<filename>.FileTooLarge>' when file size exceeds 75 MB.

EDI will rename the SK-ISP request files retrieved from the MCO TxMedCentral folders with '<fileid>.<filename>.ZeroByte>' when file size equals 0 MB.

The system must accept X12 278 SK-ISP requests in .txt, .dat & .zip file types.

The system must identify and pick up files that are named as ISP.\*.txt or ISP.\*.dat or ISP.\*.Zip from TxMedCentral for processing.

The system must detect when SK-ISP Inbound files are not processed within 24 hours of receipt and will re-process those files.

Accenture must validate inbound X12 278 STAR Kids ISP transaction requests received from STAR Kids and STAR Health MCOs.

EDI must perform HIPAA validation on the SK-ISP X12 278 request files received from MCO submitters.

The TMHP LTC Online Portal services must perform business validation on the SK-ISP X12 278 request files received from MCO submitters. (Refer to the SK-ISP Mapping Document in Appendix E).

**SK-ISP TMHP System Requirements**

Accenture must generate a 5010 X12 278 response to the submitter indicating the outcome of the inbound STAR Kids ISP transaction requests.

EDI must generate 999, 824, and 278 response files for an X12 278 SK-ISP complete acceptance, when all transactions passed HIPAA validation.

EDI must generate only a negative 999 response file for an X12 278 SK-ISP full file rejection, when all transactions within the request file failed HIPAA validation.

EDI must generate 999, 824, and 278 response files for an X12 278 SK-ISP partial file rejection, when some transactions within the file failed HIPAA validation.

EDI must place the TA1 response file in the following TxMedCentral folder to be picked up by the MCO submitter:

\\...\<MCO>ENC\....

The system must name the TA1 response file with the following naming convention:

Submitter ID.File ID.TA1

The system must place the 999 response file in the following TxMedCentral folder to be picked up by the MCO submitter:

\\...\<MCO>ENC\....

EDI must name the 999 response file with the following naming convention:

Submitter ID.File ID.999

Each X12 278 SK-ISP response file will be placed in the following TxMedCentral folder to be picked up by the MCO Submitter:

\\...\<MCO>ENC\....

The system must name the X12 278 SK-ISP response file with the following naming convention:

Submitter ID.File ID.278

The system must return the DLN in X12 278 SK-ISP response, if no AAA in both 2000E and 2000F with the following logic:

2000E.REF.01 = NT (Administrator's Reference Number)

2000E.REF.02 = ISP care form system DLN

Accenture must include error codes on the 5010 X12 278 response transactions for submitted STAR Kids ISP inbound transactions that fail validation.

The system must generate SK-ISP X12 278 response for rejections with error codes in AAA segment. (Refer to the SK-ISP 278 Mapping Document spreadsheet in Appendix E.)

**SK-ISP TMHP System Requirements**

The system must include the Healthcare Service Review (HCR) segment in SK-ISP X12 278 response with the following logic when there is an (AAA) error found in the 2000F (Services Level):

Patient Event Level

2000E.HCR01 = A3

2000E.HCR02 = Leave blank

2000E.HCR03 = 25

Where “A3” and “25” indicate an error was encountered. (Services not considered due to other errors in the request.)

## 12 Appendix E. ISP Edit Error Messages

Line No.	Edit No.	Portal System Validation	X12 Response	Error Description	Error Type - Fatal, Warning
1	Bx27808000	The Requesting provider MCO Contract number (2010B.NM109) could not be uniquely identified.	2010B.AAA.01 = N 2010B.AAA.03 = 51 2010B.AAA.04 = C	The MCO Contract ID (2010B.NM109/REF02) could not be uniquely identified.	Fatal
2	Bx27808001	The Requesting provider Service Coordinator information is missing (2010B.PER.02).	2010B.AAA.01 = N 2010B.AAA.03 = 15 2010B.AAA.04 = C	The Requesting Provider Service Coordinator (2010B.PER02) information is missing.	Fatal
3	Bx27808002	The MCO County Code information is missing or invalid(2010B.REF.02).	2010B.AAA.01 = N 2010B.AAA.03 = 79 2010B.AAA.04 = C	The MCO County Code value sent in 2010B.REF02 is missing or invalid.	Fatal
4	Bx27808003	Finalized/Approved SK-SAI was not found for the submitted applicant identification number (2010C.NM109).	2010C.AAA.01 = N 2010C.AAA.03 = 75 2010C.AAA.04 = C	Finalized/Approved SK-SAI was not found (or) Member could not be identified.	Fatal
5	Bx27808004	Submitted SSN does not match SSN for Medicaid ID submitted. (2010C.REF.02).	2010C.AAA.01 = N 2010C.AAA.03 = 79 2010C.AAA.04 = C	SSN (2010C.REF02) does not match the Applicant/Member's Medicaid ID.	Fatal
6	Bx27808005	Submitted Date of Birth does not match Date of Birth for Medicaid ID submitted. (2010C.DMG.02)	2010C.AAA.01 = N 2010C.AAA.03 = 71 2010C.AAA.04 = C	Date of Birth (2010C.DMG02) submitted is incorrect.	Fatal
7	Bx27808007	For 2000E.UM.02 = "I" or "R" ISP "From Date" must be the 1st day of a month (2000E.DTP.03)	2000E.AAA.01 = N 2000E.AAA.03 = 56 2000E.AAA.04 = C 2000E.MSG.01 = -->	ISP From Date (2000E.DTP03) must always be 1st day of a month.	Fatal

Line No.	Edit No.	Portal System Validation	X12 Response	Error Description	Error Type - Fatal, Warning
			business edit number.		
8	Bx27808011	For 2000E.UM.02 = "I" or "R" ISP "To Date" must always be the last day of a month (2000E.DTP.03)	2000E.AAA.01 = N 2000E.AAA.03 = 56 2000E.AAA.04 = C 2000E.MSG.01 = --> business edit number.	ISP "To Date" (2000E.DTP03) must be the last day of a month.	Fatal
9	Bx27808012	For 2000E.UM.02 = "I" or "R" ISP "From Date" & "To Date" date difference must <= 365 days (2000E.DTP.03)	2000E.AAA.01 = N 2000E.AAA.03 = 56 2000E.AAA.04 = C 2000E.MSG.01 = --> business edit number.	ISP "To Date" must be one year minus one day from ISP "From Date" (2000E.DTP03).	Fatal
10	Bx27808013	For 2000E.UM.02 = "I" or "R"  Duplicate or Overlapping ISP form found for the specified "From Date & To Date" (2000E.DTP.03)	2000E.AAA.01 = N 2000E.AAA.03 = 56 2000E.AAA.04 = C 2000E.MSG.01 = --> business edit number.	Duplicate or Overlapping ISP form found for the specified From and To Date (2000E.DTP03).	Fatal
11	Bx27808014	Type Authorization. Only 'Initial' OR 'Reassessment' is allowed  2000E.UM.02 must always be "I" or "R"	2000E.AAA.01 = N 2000E.AAA.03 = 33 2000E.AAA.04 = C 2000E.MSG.01 = --> business edit number.	(2000E) UM.02 must always be either "I" or "R".	Fatal

Line No.	Edit No.	Portal System Validation	X12 Response	Error Description	Error Type - Fatal, Warning
12	Bx278080 33	Form type value is missing. Expected value is XSKISP	2000E.AAA. 01 = N 2000E.AAA. 03 = 33 2000E.AAA. 04 = C 2000E.MSG. 01 = --> business edit number.	Missing form name in (2000E) MSG01. Expected value is XSKISP.	Fatal
13	Bx278080 20	Total Estimated Annual Costs must be <= Annual Cost Limit. (Sum of all 2000F.SV102)<= annual cost limit.	2000E.AAA. 01 = N 2000E.AAA. 03 = 33 2000E.AAA. 04 = C 2000E.MSG. 01 = --> business edit number.	Total Estimated Cost of all the services exceeds the Annual Cost limit (Sum of all 2000F.SV102).	Fatal
14	Bx278080 21	This request does not include a 2000F loop. Accenture system processing requires all requests to include at least one 2000F loop in order to communicate the requested service/procedure code. Please correct and resubmit.	2000E.AAA. 01 = N 2000E.AAA. 03 = 33 2000E.AAA. 04 = C 2000E.MSG. 01 = --> business edit number.	Requires at least one service line information (2000F).	Fatal
15	Bx278080 22	Must be valid HCPCS code and modifier combination in the SK-ISP Billing Crosswalk table	2000F.AAA. 01 = N 2000F.AAA. 03 = 33 2000F.AAA. 04 = C 2000F.MSG. 01 = --> business edit number.	Service Line (2000F.SV1) submitted is not a covered service.	Fatal

Line No.	Edit No.	Portal System Validation	X12 Response	Error Description	Error Type - Fatal, Warning
16	Bx278080 23	Duplicate Procedure Code (2000F.SV101.2) submitted within the same form	2000F.AAA. 01 = N 2000F.AAA. 03 = 33 2000F.AAA. 04 = C 2000F.MSG. 01 = --> business edit number.	Duplicate Service Line (2000F.SV1) submitted.	Fatal
17	Bx278080 24	The requested procedure code requires a valid modifier (2000F.SV101.3, 2000F.SV101.4, 2000F.SV101.5, 2000F.SV101.6).	2000F.AAA. 01 = N 2000F.AAA. 03 = 33 2000F.AAA. 04 = C 2000F.MSG. 01 = --> business edit number.	The requested procedure code requires a valid modifier (2000F.SV1).	Fatal
18	Bx278080 25	Est. Annual Service Units for submitted HCPCS code must be greater than 0. (2000F.SV104)	2000F.AAA. 01 = N 2000F.AAA. 03 = 33 2000F.AAA. 04 = C 2000F.MSG. 01 = --> business edit number.	Est. Annual Service Units for submitted HCPCS code must be greater than 0 (2000F.SV104).	Fatal
19	Bx278080 26	Est. Annual Service Rate for submitted HCPCS code must be greater than 0. (2000F.SV102)	2000F.AAA. 01 = N 2000F.AAA. 03 = 33 2000F.AAA. 04 = C 2000F.MSG. 01 = --> business edit number.	Est. Annual Service Rate for submitted HCPCS code must be greater than 0 (2000F.SV102).	Fatal
20	Bx278080 27	During any unexpected exception or portal services down (or) When Portal responds with an	2010A.AAA. 01 = N 2010A.AAA. 03 = 42 2010A.AAA. 04 = P	The system is temporarily unavailable to process this request. Please resubmit the request.	Fatal



Line No.	Edit No.	Portal System Validation	X12 Response	Error Description	Error Type - Fatal, Warning
		invalid Business edit.			
21	Bx27808028	Incorrect MEWAIVER string.	2010C.AAA. 01 = N 2010C.AAA. 03 = 78 2010C.AAA. 04 = C	Incorrect MEWAIVER string in 2010C.REF02.	Fatal
23	Bx27808032	ISP From Date is not within the approved SK-SAI dates.	2000E.AAA. 01 = N 2000E.AAA. 03 = 56 2000E.AAA. 04 = C 2000E.MSG. 01 = --> business edit number.	ISP From Date (2000E.DTP03) is not within the approved SK-SAI dates.	Fatal

## 13 Document Change Log

Date	Version #	Changes
3/17/2016	1.0	Original Document
4/12/2016	2.0	<ul style="list-style-type: none"> <li>• Rule clarifications associated with SK-SAI form submissions (by the same MCO and by the gaining MCO on a transfer).</li> <li>• Rule clarification associated with SK-ISP submissions.</li> <li>• Rule clarification associated with SK-SAI corrections, inactivations and submission in a transfer scenario.</li> </ul>
4/26/2016	3.0	<ul style="list-style-type: none"> <li>• Rules clarification for submission of ISP 278 (MDCP only).</li> <li>• Rules clarification for posting of ISP Narrative.</li> <li>• Update of scenarios reflecting the ISP 278 rule changes</li> <li>• Clarifications within the Transfer &amp; Inactivation scenarios</li> <li>• TMHP has modified the naming conventions for: <ul style="list-style-type: none"> <li>○ SK-SAI XML file</li> <li>○ Validation response file</li> <li>○ Substantive response file</li> </ul> </li> <li>• Rejection Reason Codes for the Validation Response File have been added to Appendix B.</li> </ul>
5/18/2016	4.0	<ul style="list-style-type: none"> <li>• Appendix outlining the SK-ISP 278 processing by TMHP</li> <li>• Appendix describing TMHP SK-ISP edits and error messages</li> <li>• Updated Appendix A with TMHP SK-SAI edits and error messages</li> <li>• Clarifications for SK-ISP submission throughout the document</li> </ul>
9/27/2016	5.0	<ul style="list-style-type: none"> <li>• Add rule to require removal of name suffix prior to submission.</li> <li>• Corrected some errors in the scenarios</li> <li>• Removed Table 4 since it was duplicate information to the table in Appendix A.</li> </ul>
9/1/2017	6.0	<ul style="list-style-type: none"> <li>• Added electronic ISP process and X12 278 transaction process</li> <li>• Minor edits to language</li> <li>• Changed client to either applicant or member</li> <li>• Corrected TxMedCentral spelling</li> </ul>
3/1/2017	7.0	<ul style="list-style-type: none"> <li>• Minor edits to language</li> </ul>

Date	Version #	Changes
12/13/2021	8.0	<ul style="list-style-type: none"><li>• Updated field labels for fields that were moved to match the document map</li><li>• Removed reference to PCAM as a whole, and modified references to PCAM Section P to reflect Core Section M</li><li>• Updated description of Significant Change in Condition Reassessment (previously Significant Change in Status Reassessment)</li><li>• Added draft business validation in Appendix A SK-SAI Schema and Business Validations</li></ul>