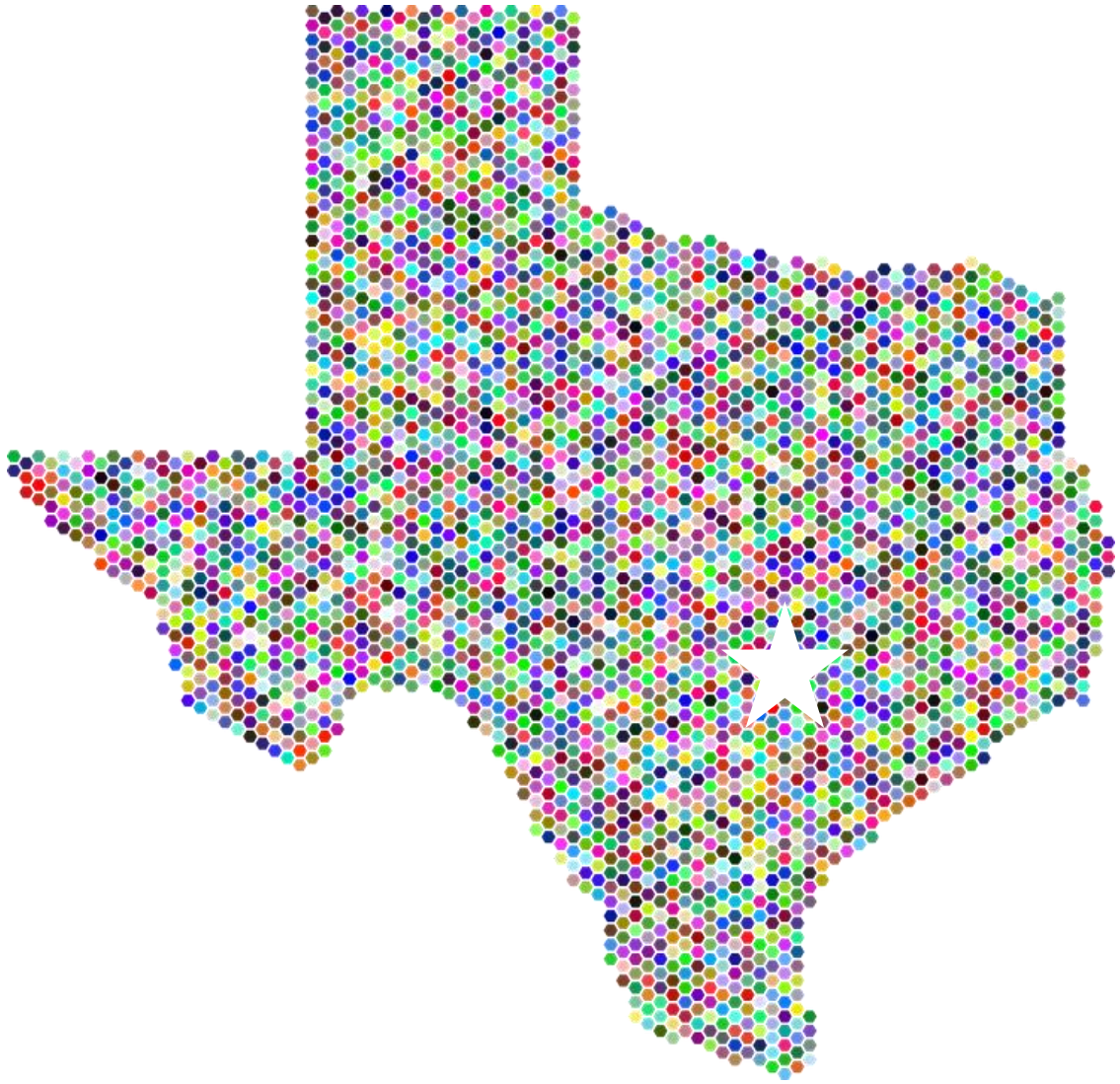
Take Charge Texas (TCT) User Engagement Session

January 30th, 2025



Meet the Facilitators

DSHS/HHSC TEAM

Charletha Joseph
Program Support

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HIV Care and Medications Unit Director

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ADAP Regional Manager

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HIV Care Services Group Manager

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TCT Help Desk Program Specialist

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Texas HIV Medication Program Manager (Interim)

DELOITTE TEAM

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Consultant/Discovery

Agenda

1. Introduction & Overview of Objectives
2. TCT Roadmap of Deployed Enhancement Features
3. TCT In Progress Enhancement Features
4. System Overview: New TCT Enhancement Features
5. Gathering Your Feedback
6. Close Out & Next Steps

How to Ask Questions:

All lines are muted.

We will save time for your feedback & questions throughout the presentation. Please come off mute and ask questions at that time!

Poll Everywhere

Poll Everywhere

Please navigate to the following Poll Everywhere Link to respond to the following question:

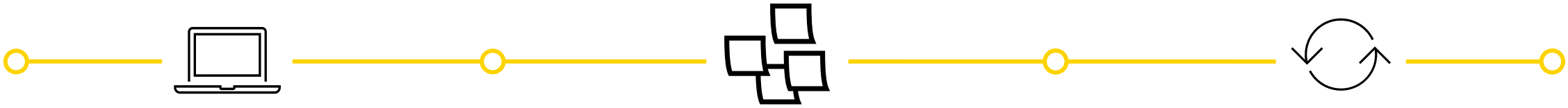
If you are a **DSHS Staff member**, please use this link:
PollEV.com/tctdshsstaff

If you are **not** a DSHS Staff member (agency workers, etc.), please use this link:
PollEV.com/tctnondshsstaff

What do you hope to learn through this session? Select all that apply.

Today's Objectives

The objective of today's session is to provide an overview of new features implemented in the TCT system and gather your feedback to ensure the features we plan to implement in the future result in improved client service delivery and health outcomes for people with HIV in Texas.



SYSTEM AWARENESS

Provide this group with **transparency** surrounding the TCT roadmap & future system enhancements so that end-users **gain direct knowledge** of the features we have & plan to implement in TCT.

GATHER FEEDBACK

Gather your **feedback** and **assess opportunities for improvement** of the TCT system.

UPDATE TCT ROADMAP

Review the feedback received with leadership, **prioritize** the features, & **update the TCT Roadmap** accordingly.

TCT Roadmap of Deployed Enhancement Features

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 1

Focused on RSR submission in TCT System, supporting multiple agencies as they submitted the annual report, in addition to establishing a new client creation process.

SPRINT 2

Focused on establishing the framework to initiate an automated client merge process, in addition to features for task board which provided a seamless workflow for TCT users.

SPRINT 3

Focused on establishing an automated client merge process which reduced the lengthy manual client merge process, updating Share Status capabilities, and enabling the privatization of Case Notes

SPRINT 4

Focused on the creation of a drug regimen override process as well as other Pharmacy Portal enhancements, and the introduction of Standard Deduction process for determining THMP Eligibility

User Stories

Sprint 1
- Client Import into TCT & New Client Creation
- TCT Client Import – Successful Creation
- TCT Client Import – Failed Creation
- Adding EUCI Code as a Search Parameter
- Updating 'Sex at Birth' to an Editable Field

Sprint 2
- Identification of Potential Duplicates
- Client Merge Automation Rules
- UI Screen: Duplicate Client Report
- Inactivating 'Apply Now' for Linked Clients
- Updating Filters to Multi-Select Values
- Addition of THMP Subprograms
- Addition of Date Submitted Filters

Sprint 3
- Client Merge Report
- Exception Messages for Failed Merges
- Client Merge Automation Rules
- Split CARE & THMP Services in 'My Needs'
- Adding New Case Note Categories
- Allowing for Private Case Notes
- Updating Share Status in Agency Portal
- Updating Task Board Permissions
- Edit THMP Subprograms

Sprint 4
- Manage Approvals & Denials Of Client Regimen Overrides
- Add Pharmacy Information To Shipping Details
- Order Override Request
- Day Supply Limitations On Add Prescribed Drug & Worker Portal Order Screens
- Client Merge Report Agency Filter
- Drug Approval & Regimen Drop Date Details
- Submitting Client Regimen Overrides
- Separate Spouse/Partner/Common Law Relationship Options
- Standard Deduction Reference Table Management
- Standard Deduction – THMP Adjusted Household FPL

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 5

Focused on the establishment of pharmacy site creation as well as pharmacy order creations. Provided additional features in maintaining client status activities

SPRINT 6

Focused on creating Pharmacy reports as well as notification letters for Pharmacy related updates on Client profiles. Provides additional immunization report capabilities.

SPRINT 7

Focused on the application workflow enhancements as well as client merge/linking history. Provided improvements to Task Board for processing applications effectively.

SPRINT 8

Focused on enhancements of Agency Portal Client Pages and updates to Client Merge process. Provided enhancements to Eligibility and Client Import process.

User Stories

Sprint 5
- Creation of Secondary Sites
- Assigning Secondary Sites to Clients
- Display Additional Client Results on Order Dashboard
- Open Order Enhancements
- Agency Assigned ID Numbers (AIDN)
- Prevent Updates to THMP Subprograms on Task Board from Updating Application History
- Addition of Emergency Screening Questionnaire Page to All Applications
- Update Permissions for Inactivating Clients
- Allow Access to Profiles of Inactive Clients

Sprint 6
- Shingrix Vaccine Enhancements
- Exclude ADAP Clients on Hold From the Clients Coming Up For Renewal Report
- Update Client Letter Templates
- Monthly Pharmacy Orders Report
- Generating Letters by Client ID
- Update Letter Triggering Conditions
- Client/Pharmacy Update Letter Pharmacy Copy
- Client Order Count by Medication Report

Sprint 7
- Update Hyperlink in Client Portal
- Expand Provider Agencies for Selection on Application Workflow
- Combine Household Details Questions on Clients' Relationship Pages
- Display Only Active Provider Agencies on Agency Selection Screen & Task Board
- Display Master Client ID in Edit Client Profile & Merge/Linking History
- Update Mpox Language in TCT
- Pharmacy Cover Letter Updates
- Task Board – Displaying Reason for Emergency Application
- Performing Bulk Edits on the Task Board: THMP Owner & CARE Owner
- Remove THMP Region from User Scope Assignment

Sprint 8
- Creating History Logs: Relationships
- Creating History Logs: Medical Data
- Creating History Logs: About You Information
- Creating History Logs: Authorized Release
- Updates to Automated & Manual Merge Exception Handling
- Updates THMP Denial, Pend, Reject Reasons when Overriding Eligibility Recommendation
- Ability to Manually End Ongoing Eligibility
- Displaying Override Comments after Eligibility is Complete
- Capturing Hold History for Manual/Automatic Holds
- Update Create Client Import XML to Include AIDN

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 9

Focused on providing enhancements to the Pharmacy Portal and improving client privacy in the TCT Portal. Additionally, enhancements were provided to the Medical and Client Services import process for agencies.

SPRINT 10

Focused on enhancing the financial information, FPL process and history tracking capabilities for financials and insurance. Additionally, updated the SFTP process for Medical and Services imports to allow for increased data import volume.

SPRINT 11

Focused on enhancing the Financial Information and its history, updating the FPL process to accommodate TCT and non-TCT Portal Clients for RSR Reporting, in addition, curated pharmacy report for overrides. Furthermore, established SFTP process for Medical and Services Import through Global Scape.

SPRINT 12

Focused on enhancing the medication resubmission process as well as updating the verbiage within the HOPWA contracts. Furthermore, provided the capability for Admins to view the FPL and RSR Client by Zip Code Reports, and enhancements to allow System denial on expired Eligibility periods.

User Stories

Sprint 9
- Masking SSN on Client Search and Client Details Screens
- Display Created By on Order Dashboard
- Notification for Order Override Denials for Pharmacist
- Notification for Order Override Approvals for Pharmacist
- Pharmacy Notes on Pharmacy Details Screen
- Merging Eligibility Records by Eligibility Decision Date for Clients with the Same Subprogram
- Addition of TX Department of State Health Services on the HAB Report
- HAB Report – Multiple Agency Selection
- Generating Pharmacy Copy Letters Based on Latest Transaction
- Updated Services Import XML Process to Include AIDN
- Updated Medical Import XML Process to Include AIDN

Sprint 10
- Client Financial Information Enhancements
- Creating History Log: Financial Data
- Relationships Screen Enhancements
- Creating History Log: Insurance History
- Pharmacy Portal: Indication Whether Batches were Received
- Resubmission Process for Resubmission of Orders
- RSR: Calculating Missing FPL Values for CARE Clients via Batch
- FPL Process: Create Client Import Process Enhancement
- STFP Process: Service Records Updates
- STFP Process: Service Records – Successful Client Update Email
- STFP Process: Service Records – Failed Client Update Email
- STFP Process Medical Records Updates
- STFP Process: Medical Records – Successful Client Update Email
- STFP Process: Medical Records – Failed Client Update Email

Sprint 11
- Document Start and End Date Enhancements
- Standardize Login Error Messages in Agency Portal
- FPL: Overriding System Derived Household FPL for CARE Clients
- Enhancements to Comments Provided When Overriding or Ending Eligibility
- TCT Client Portal – Instructional Text Updates
- Order Override Accessibility Enhancement
- Shipment Resubmission Overrides
- Client Medicine Order History Enhancements
- Pharmacy Report: Client Regimen Overrides
- Pharmacy Report: Order Overrides
- Ad Hoc Query: Facility Information Enhancements
- Removing Pre-Selected Services on Recert and Self-Attest Applications

Sprint 12
- Banner Message Configuration for Portal Downtime
- Pharmacy Report: Medication Resubmitted
- Shipment Resubmission Overrides Denial Notification
- Shipment Resubmission Overrides Approval Notification
- Resubmission of Medications Enhancement
- Update Primary, Secondary, and Subservice Names for HOPWA Contracts
- RSR Client by Zip Code Report
- FPL: RSR CARE System-Derived FPL Report

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 13

Focused on enhancing the Task Board, search capabilities post Client merge, and application workflow in the Client Portal. Additionally, provided enhanced features for Staff Audit Report, while introducing the Worker Performance Report, WICY Report and Unsubmitted Client Application Report for seamless workflow process.

SPRINT 14

Focused on enhancing the eligibility process as well as updating the RSR Completeness Report and RSR Client by Zip Code Report. Furthermore, introduced beneficial features to the STAR Report, and automations to the Task Board.

SPRINT 15

Focused on separating out the eligibility application(s) by THMP and/or CARE services, as well as preventing Users from ending a Client's current eligibility due to applications pending processing. Furthermore, introduced enhanced features to the Pharmacy Portal and to the HAB, Clients Coming Up for Renewal, and Clients on Hold Reports.

SPRINT 16

Focused on displaying THMP referral applications on the Eligibility Period Selection page, implemented pre-merged eligibility transactions to the Eligibility History screen, and enabled enhancements for Income & Tax, Level of Education, Exposed Infant, HIV/AIDS Test Location Sites, Client Name, Task Board, Contracts, and Pharmacy Search priorities.

User Stories

Sprint 13
- Client Services Detail Record Enhancements
- Task Board Assignment Enhancement
- Staff Audit Report: Search by Username
- Save & Exit Applications in Client Portal
- Unsubmitted Client Application Report
- Worker Performance Report: Applications Processed
- WICY Report
- Ability to Search with Prior Client IDs Post Client Merge

Sprint 14
- RSR Completeness Report: Update Client IDs to Hyperlinks
- Pending Eligibility Report: Including CARE Filter
- Automating Task Status on Task Board
- STAR Report - Multiple Agency Selection
- STAR Report: Contract & Funding Source Filter Enhancements
- STAR Report: Viral Load & CD4 Count Category Enhancement
- STAR Report: Primary Service Filter Enhancements
- STAR Report: Client Data Section
- RSR Client By Zip Code Report: Addition of Address Type

Sprint 15
- Separate THMP and CARE Eligibility Processing
- Eligibility Period Selection Page Enhancements: Displaying All Submitted Applications
- Adding 6 Months to Eligibility Periods
- Preventing Users from Ending Current Eligibility Due to Applications Pending Processing
- Pharmacy Portal: Email Notifications When Placing Orders for Multiple Pharmacies
- Addition of Pharmacy Site Information on Client Drug Screen
- Worker Performance Report: Application Submitted and Eligibility Processed
- HAB Report: Addition of Ethnicity Field
- Clients Coming up for Renewal Report Enhancements
- Clients on Hold Report

Sprint 16
- Display THMP Referral on the Eligibility Period Selection Screen
- Eligibility Enhancements for Various THMP Referral Application Decisions
- Client Name Enhancements
- Eligibility History to Include Pre-Merged Eligibility Transactions
- Task Board Pend Application Enhancement
- Pharmacy Update History
- Multiple Pharmacies Associated to One User
- Contract Drop-Down List Enhancement
- Client Merge Enhancement
- Create Client Import Process Enhancement
- Exposed Infant Enhancements
- Income & Tax Enhancements
- HIV & AIDS Test Location Enhancements
- Level of Education Enhancement
- Pharmacy Search Enhancements

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 17

Focused on enhancing the Pharmacy Portal to trigger in portal notifications for unassigned Primary Pharmacies and deactivated Primary and/or Secondary Pharmacies. Improved the Ad Hoc and HAB report outputs to include additional data element features. Introduced the Medicaid Match and Clients with Medicare Insurance Reports and created the Verification Checklist repository.

SPRINT 18

Focused on identifying deactivated pharmacies on the Worker Portal Order and Review Order screens, as well as enhanced features on the Order Conflicts screen to mandate justifications for medication record(s) selected for override. Implemented the ability to update clients' pre-existing address, income, and/or insurance information via the Update Client data elements found on the Create Client XML. Implemented the ability to change a client's status from Inactive to Active.

SPRINT 19

Focused on implementing the Order Status flag for Open(Started) and Open(Empty) orders enabling the ability for THMP Admin and/or ADAP Order Processor Users to update the order(s) to the new Closed(Empty) status. Improved the Staff Activity Audit Report to identify Client Profile updates and integrated screen navigation via hyperlinks. Introduced the Universal Service Utilization Report to provide a comprehensive, data-driven report of Client Services and Medical Information for HRSA and internal audit reporting.

SPRINT 20

Focusing on modifying existing queries via the Ad Hoc Query Builder by enabling the ability to edit/update search criteria filters. Improving the Pharmacy Portal by implementing System logic to identify deactivated pharmacies on the Order Overrides screen. Enhancing the STAR Report to include search criteria filters and associated values on the report outputs, incorporating Insurance results tables and applicable values on the report outputs, and introducing the Contract search criteria selection when curating the STAR Report. Introducing the CARE Plan Task Report, providing details of CARE Plans for Clients, ensuring comprehensive analysis of care can be performed.

User Stories

Sprint 17

- Pharmacy Banner Enhancements
- Notification for Pharmacy Orders & Order Override Submissions
- Pharmacy Assignment & Deactivation Notification Enhancements
- Ad Hoc Report Export Enhancements
- HAB Report Export Enhancements
- Medicaid Match Report
- Clients with Medicare Insurance Report
- Task Board Export Enhancements
- Notification for Task Board Updates
- Ability to Delete Service Entries
- Verification Checklist Screen
- Create Client Import Change with Multiple AIDNs

Sprint 18

- Pap Smear Test Result Enhancement
- Failed Orders Email Recipient Enhancement
- Adding ART Drugs to HIV Medication Information Screen
- Adding Pharmacy Code Search Field to User Scope Assignment Screen
- Worker Portal Order and Review Order Pharmacy Deactivation Enhancements
- Submitting Order Conflict Enhancements
- Reactivating Inactive Clients Enhancement
- STAR Report Funding Source Enhancement
- WICY Report Funding Source Enhancements
- Active User and Role Report Enhancements
- Adding Prescription Notes to Drug Regimen Screen
- Eligibility History Detail Enhancements
- Addition of Updates to Change Request and/or Self-Attestation Applications on Task Board
- Improving Batch Import Files – Services, Medical, Update Client, and Create Client
- Update Client XML Enhancement

Sprint 19

- Notification Center - Select All Enhancement
- Notification Center - Expiration Notification Enhancement
- Agency and Client Portals - Save & Exit Enhancement
- Agency Portal Login Screen Enhancement
- Contracts - Edit Total Budget Amount Enhancement
- Modifications to Household Detail Input Requirements
- Display Application ID on Application History Screen
- Updating Eligibility Rules for HIV Diagnosis
- Auto-Denying ADAP Clients Upon Eligibility Period Expiration
- Task Board Bulk Edit Enhancements
- Drug Regimen and Case Notes Real Time Synchronization of Prescription Notes
- Resolving Open(Started) and Open(Empty) Medication Orders on Orders Screen
- Addition of Pharmacy Information on Orders, Shipping Status, and Review Order Screens
- Hold Screen Enhancements
- Expanding Parameters of Staff Activity Audit Report
- Universal Service Utilization Report

Sprint 20

- Race and Sub Origin Enhancements
- Help Text Enhancement for All Applications
- Display Previously Selected Agency on Subsequent Applications
- Identifying Deactivated Pharmacies on Order Overrides Screen
- Application Submission Success Screen Enhancements
- Removing Pharmacy Assignments on Assign/Change Pharmacy Screen
- Ad Hoc Report: Client Race & Client Ethnicity Origin Table and Column Name Enhancements
- Ad Hoc Report: Pharmacy Table and Column Name Enhancements
- Ad Hoc Report: Modifying Existing Queries
- STAR Report Contracts Addition
- ACA Insurance Detail Enhancements
- STAR Report Export Enhancements
- STAR Report Output Insurance Enhancements
- CARE Plan Task Report
- Updates to Inactive Clients

Project Plan: Successfully Completed Features

The graphic below represents the features & user stories our team has developed since initiation of Enhancements in January 2023.

SPRINT 21

Focused on enhancing the Pharmacy Portal by implementing the Manufacturer Search and Manufacturer Details screens, so manufacturer information can be independently searched and created. Enhanced the Eligibility Summary and Eligibility History screens when a Client's THMP and/or CARE eligibility is manually ended, so an audit trail of the details can be effectively tracked. Updated the Client Portal Help Center Spanish translations. Introduced the Dropped THMP ADAP Report to conveniently export client record(s) who have been dropped from the THMP program. Created the Client Inactivation Report to track client(s) who have been flagged as inactive (*Other Inactive or Deceased*) in the TCT System.

SPRINT 22

Introduced the Scheduled Client Medication Unordered Report to identify clients who have not submitted a medication order in the last 6 months. Enhanced the Transfer Report screen and results table to include additional search criteria and data elements. Updated Task Board records to display only CARE transactional data when a User submits a referral application requesting additional CARE services. Enhanced the Order Overrides and Shipment Resubmission Overrides screens to detect removed and/or deactivated pharmacies. Updated the Contact Preferences functionality to remove pre-selected values in both the Application Workflow and Client's Profile and introduced Facility Information as part of the Emergency Screening page in the Application Workflow. Incorporated the Substance Use and Mental Health screening test results as part of the STAR Report and View STAR Reports screens.

SPRINT 23

Introduced the THMP Denial Letter when a Client is denied/rejected THMP eligibility, as well as enhanced the Multi-Provider Document Verification and Verification Checklist screens to render THMP Denial Letter records. Incorporated the Risk Factor screening assessment as part of the STAR Report and View STAR Report screens. Enhanced the Manufacturer Search screen to render all manufacturers in the TCT System for HRAR Admin users. Revamped Task Board logic to update a record's THMP Subprogram value when a Client submits a subsequent application requesting additional THMP services following the ADAP > SPAP >TIAP hierarchy. Introduced an in-portal Income Validation Message pop up when a Client and/or Related Individual's income has been updated on the Client Financial Information screen. Enhanced System logic to identify if a newly prescribed drug has the same Drug Group as an existing medication requiring override on a Client's Drug Regimen screen.

User Stories

Sprint 21

- Add New Manufacturer Screen
- Search Manufacturer Enhancement
- Addition of Task Board Updates to Staff Activity Audit Report
- Task Board History Pop Up Enhancement
- Alphabetization and Export Enhancements of Reports
- Eligibility History Screen Enhancements
- Tabular Format Relationships Screen Enhancement
- Spanish Translation Updates in Client Portal
- Client Merge and Duplicate Client Identification Reports HSDA & Hyperlink Enhancements
- Dropped THMP ADAP Clients Report
- Client Inactivation Report
- Addition of Authorized Release Enhancement to Application Workflow
- Package Size Enhancements to Pharmacy Portal Screens
- Preventing Duplicate Values for Primary and Secondary Languages

Sprint 22

- Separation of Private Employer and Veteran Affairs Insurances
- Add UOS Unit to the Universal Service Utilization Report
- Restrict Task Board THMP Tasks for Self-Referral CARE Applications
- Order Overrides and Shipment Resubmission Overrides Screen Enhancements
- Adding Drug Code Column to Pharmacy Portal Screens
- My Relationships, Client Financial Information and Countable Income Screen Enhancements
- Facility Information Enhancements
- Transfer Report Screen Enhancements
- STI/HEP Test Result Enhancements
- Scheduled Client Medication Unordered Report
- Contact Preference Enhancements
- STAR Report Screening Enhancements
- Multi-Provider Document Verification Tooltip for Insurance
- Client Merge Request
- Pharmacy Search Screen Enhancement

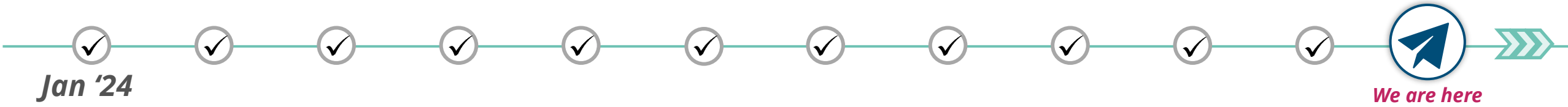
Sprint 23

- Insurance Names Master List Enhancement
- Application Workflow Enhancements for Insurance Types
- STAR Report Risk Factor Enhancement
- Manufacturer Search Screen Enhancements
- THMP Denial Letter
- Automatically Upload THMP Denial Letter Records to Clients' Multi-Provider Document Verification and Verification Checklist Screens
- Task Board THMP Subprogram Enhancements
- Task Board Help Text Enhancement
- Help Text Post Application Submission on Client Dashboard
- New Medication Banner Notification Enhancement
- Validation Message for Income Update
- Drug Regimen Overrides for Drugs with the same Drug Group

TCT In Progress Enhancement Features

Project Plan: In Progress Features

The graphic below represents the features & user stories our team is currently consuming for Sprint 24 & Sprint 25.



Sprint 24

Enhanced the Eligibility Recommendation screen to include updated language for Eligibility Recommendation decision. Introduced the Secondary Review action on the Eligibility Period Selection and Task Board screens for applicable application/eligibility records. Incorporated Clients' Insurance Information as part of the On Demand and Scheduled Client Medication Unordered Reports. Introduced the On Demand Client Medication Unordered Report as part of the Agency Portal. Enhanced the Countable Income screen to include THMP and/or CARE FPL values outside of the eligibility process. Introduced and updated English and Spanish translations in the Client Portal Help Center to accommodate THMP and CARE programs. Introduced the Worker Performance Daily Tracker Report to track Clients' eligibility transactions. Enhanced the Drug Equivalency and Conflicts section on the Drug Details screen to include Trade Name and Generic Name search criteria.

- Calculate FPL on Countable Income Screen
- Task Board Secondary Review Status Update Automation
- Transfer Report 'From Client ID' Search Criteria Enhancement
- Secondary Review on Eligibility Period Selection Screen
- Addition of Insurance Information in the On Demand & Scheduled Client Medication Unordered Report
- On Demand Client Medication Unordered Report
- Updated Eligibility System Recommendation Language in the TCT Agency Portal
- English and Spanish Translation Modifications for Help Center in Client Portal
- Addition of 'Original Client ID' Search Criteria to Client Merge Report Screen
- Worker Performance Report: Daily Tracker
- Updating Future Eligibility Durations
- Drug Equivalency Search Enhancements
- Activate Inactive Status Flag for All Notifications

Sprint 25

Introduced the Contract Allocation & YTD Expenditures Report to provide a comprehensive view of agency contract details. Enhanced the Application Workflow and Client's Profile to include new Living Situation search criteria and applicable values. Updated the RSR Report to include the updated Living Situation mappings. Incorporated the Program filter as part of the Task Board. Introduced the Initial Amount, Initial Unduplicated Client Count, and Initial Units of Service search criteria on the Agency Contract Information screen for tracking purposes. Enhanced the Pharmacy Portal by introducing the Supplier Details and Supplier Search screens to conveniently create and search drug suppliers in TCT. Introduced the Insurance Assistance Questionnaire screens as part of the Application Workflow and Client's Profile in both the Agency and Client Portals,

- Contract Allocation & YTD Expenditures Report
- Initial Amount, Initial Unduplicated Client Count, and Initial Units of Service Search Criteria on Agency Contract Information Screen
- Addition of Insurance Assistance to Application Workflow
- New Case Screen for Insurance Assistance Questionnaire
- Program Search Criteria on Task Board
- Living Situation Drop Down for Physical Address Enhancement
- Addition of Living Situation Enhancements to RSR Output
- RSR Report EHE Data Field Enhancements
- RSR Report Data Field Enhancements
- Creation of Supplier Details Screen
- Creation of Search Supplier Screen

System Overview: **New** TCT Features

Live Demonstration of TCT Features

TCT Features Video Presentation

- Application Workflow Enhancements for Insurance Types
- Insurance Names Master List Enhancements
- THMP Denial Letter
- Automatically Upload THMP Denial Letters to Clients' Multi-Provider Document Verification and Verification Checklist Screens
- STAR Report Risk Factor Enhancement
- Manufacturer Search Screen Enhancements
- Task Board THMP Subprogram Enhancements
- Task Board Help Text Enhancement
- Help Text Post Application Submission on Client Dashboard
- New Medication Banner Notification Enhancement
- Validation Message for Income Update
- Drug Regimen Overrides for Drugs with the Same Drug Group

Poll Everywhere

Poll Everywhere

Please navigate to the following Poll Everywhere Link to respond to the following question:

If you are a **DSHS Staff member**, please use this link:
PollEV.com/tctdshsstaff

If you are **not** a DSHS Staff member (agency workers, etc.), please use this link:
PollEV.com/tctnondshsstaff

How beneficial are the upcoming TCT System enhancements for your role? Please click on the applicable rank to submit your answer.

Gathering Your Feedback

Poll Everywhere

Poll Everywhere

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What additional items would you like to see for these sessions?

How to Provide Feedback to TCT?

The **TakeChargeTexas Portal**, is a system with a goal to benefit all end users – providers, admins and clients. To achieve future growth and scale, **we request you to provide your suggestions and feedback.**

Our team always welcomes your feedback!
Please feel free to reach out to **Charletha Joseph** at **Charletha.Joseph@dshs.texas.gov**.

Reasons to Provide Feedback

- TCT System will include enhancements that cater to your responsibilities!
- Your Clients will benefit with the Enhancements and Maintenance of the System!

Next Steps

Upcoming Activities

Please reach out Charletha for any questions related to this presentation.

Charletha Joseph

Charletha.Joseph@dshs.texas.gov

Our team will **share this presentation** with this group following this session.

Thank You!

System Overview: **New** TCT Features

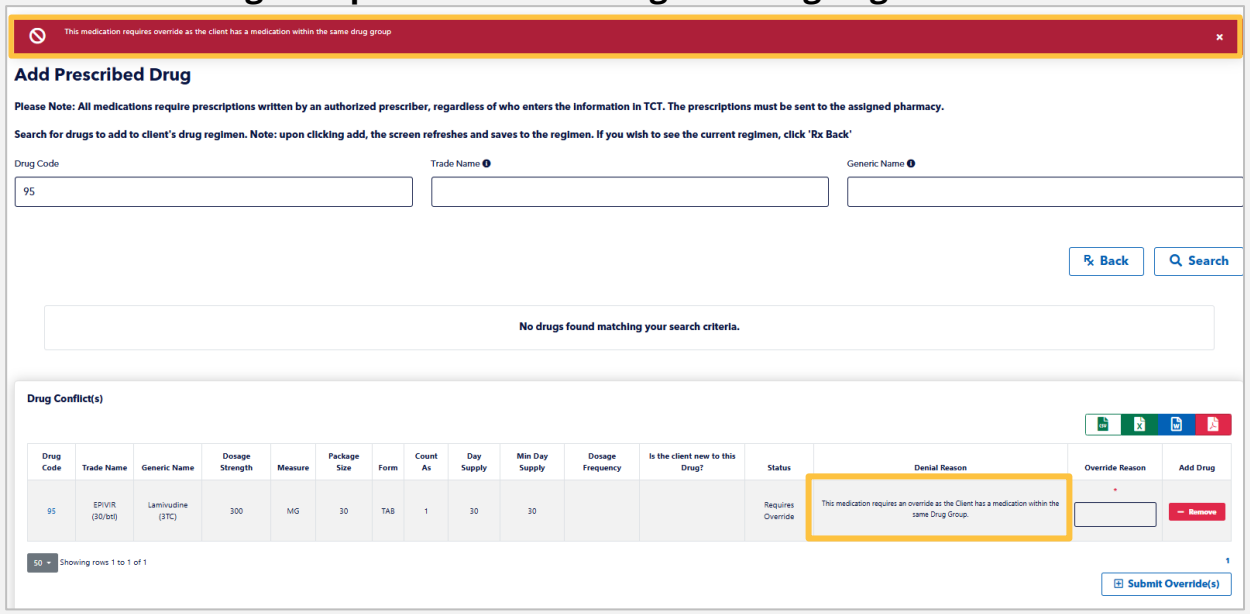
Feature Updates: Sprint 23

Pharmacy Drug Regimen Overrides for Drugs with Same Drug Group

When a TCT User navigates to the Drug Regimen screen of a Client's Profile, the following enhancements will occur:

- **Pre-Condition:** To successfully demonstrate this enhancement, the Client must have at least one medication assigned to their respective Drug Regimen screen.
- In the event a User attempts to add a second/third/and so forth medication with the same **Drug Group** as the first medication by clicking on the 'Add' button on the Client's Drug Regimen screen, the following enhancements will occur:
  - The System will flag that the new medication the User is trying to prescribe on behalf of the Client has the same Drug Group as an existing medication already prescribed and will display, in red, the following banner message on the Drug Regimen screen, stating:
    - "This medication requires override as the client has a medication within the same drug group."
      - This same validation message will also display as the value under the respective record's 'Denial Reason' column in the Drug Regimen results table.

Same Drug Group Validation Message on Drug Regimen Screen



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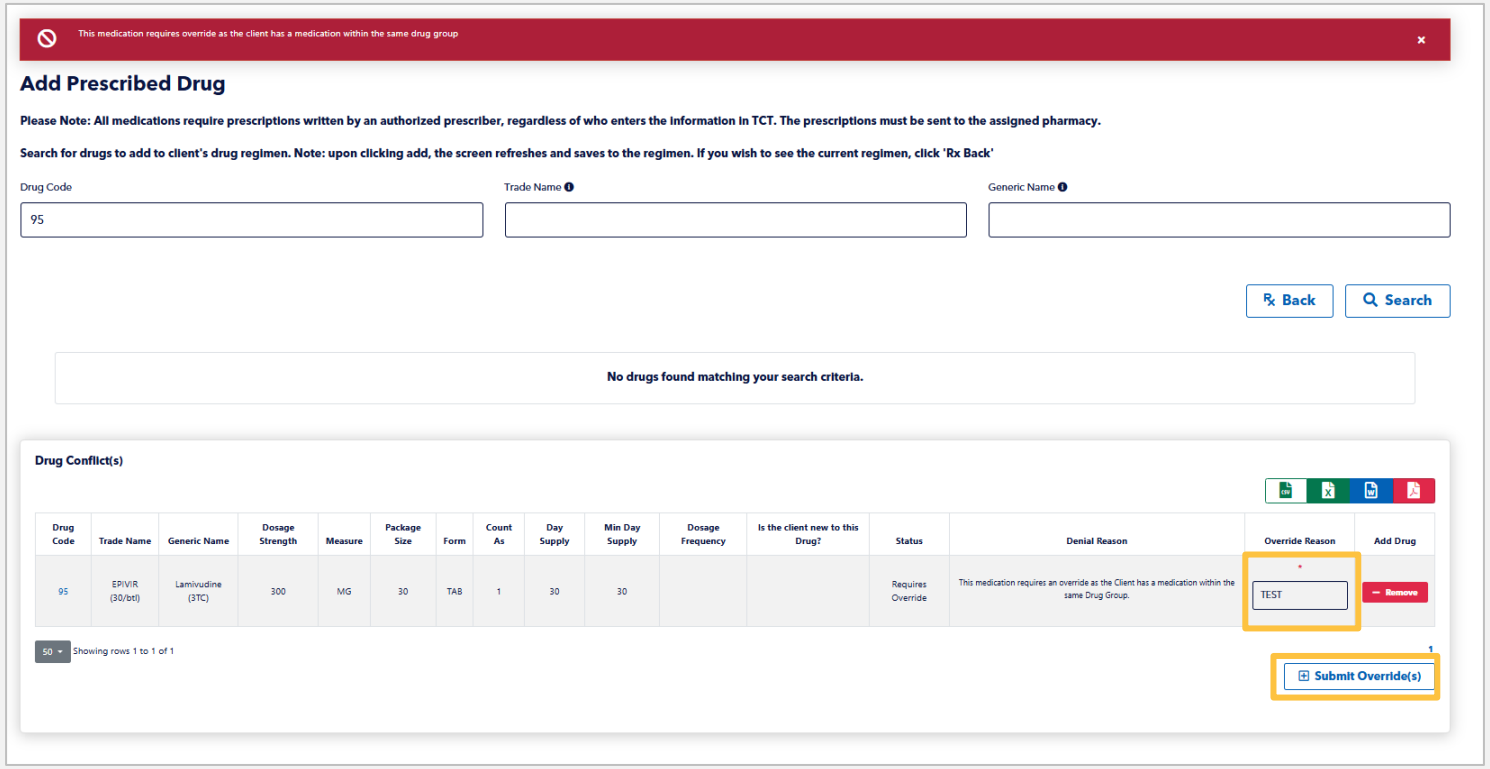
Feature Updates: Sprint 23

Pharmacy Drug Regimen Overrides for Drugs with Same Drug Group Cont.

- Due to the System having flagged the medication as having the same Drug Group as another medication on the Client's Drug Regimen screen, the User will have the capability to submit an override request (if they wish to proceed forward with prescribing the medication to the Client) by entering the respective record's 'Override Reason' and clicking on the 'Submit Override(s)' button.

Override Request for Medication Flagged for Same Drug Group



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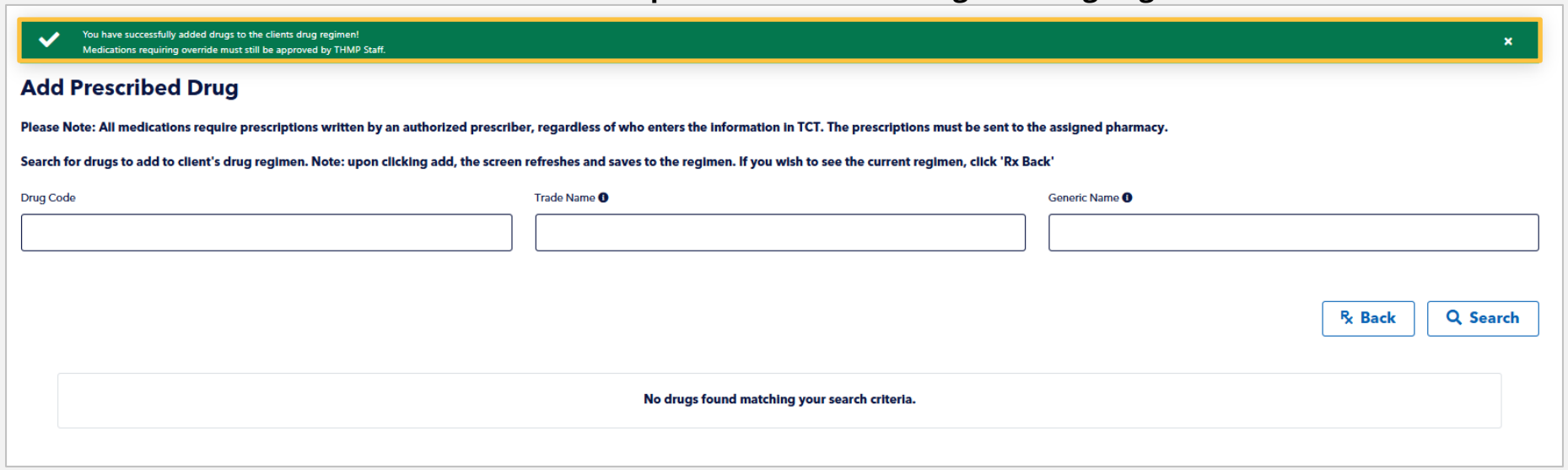
Feature Updates: Sprint 23

Pharmacy Drug Regimen Overrides for Drugs with Same Drug Group Cont.

- Upon the User clicking on the 'Submit Override(s)' button to submit the medication override request, the following temporary banner message will display, in green, on the Client's Drug Regimen screen, stating:
  - "You have successfully added drugs to the client's drug regimen! Medications requiring override must still be approved by THMP Staff."
    - *This validation message is informing the User that the medication's override request requires THMP Staff approval.*

Submitted Medication Override Request Validation Message on Drug Regimen Screen



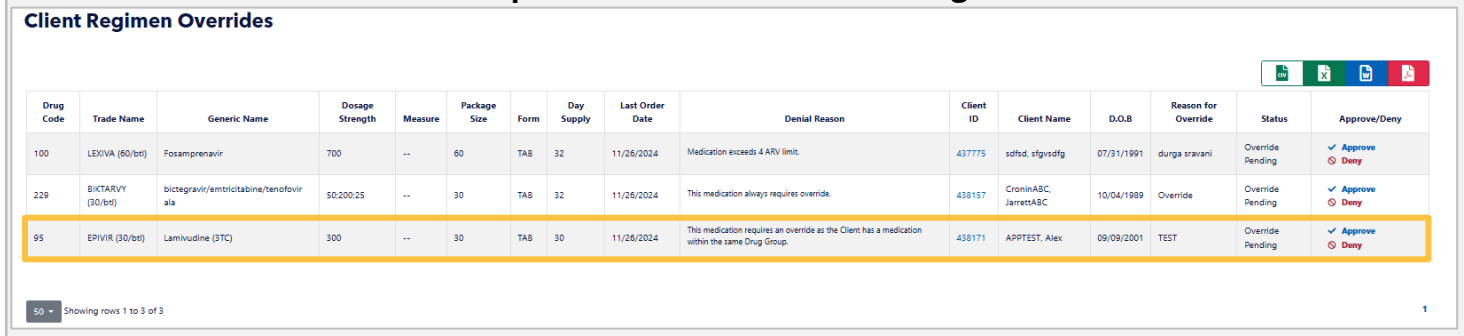
 |

Feature Updates: Sprint 23

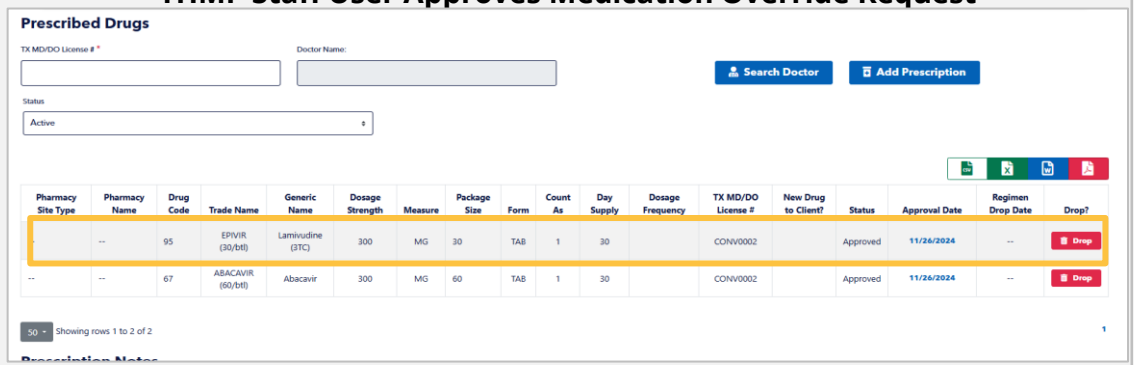
Pharmacy Drug Regimen Overrides for Drugs with Same Drug Group Cont.

- Once the User has submitted the medication override request on the Client's Drug Regimen screen, the request will then render on the Client Regimen Overrides screen/results table which will require THMP Staff approval as the drug is flagged as having the same Drug Group as an existing medication.
  - If the THMP Staff User approves the medication override, then the medication will be added to the Client's Drug Regimen results table.
  - If the THMP Staff User denies the medication override, then the medication will not be added to the Client's Drug Regimen results table.
- Existing in-portal pop up messages will continue to display if a Client does not have a Primary Pharmacy assigned on the Drug Regimen screen.
- This enhancement is applicable to the Agency Portal only.

Medication Override Request Renders on the Client Regimen Overrides Screen



THMP Staff User Approves Medication Override Request



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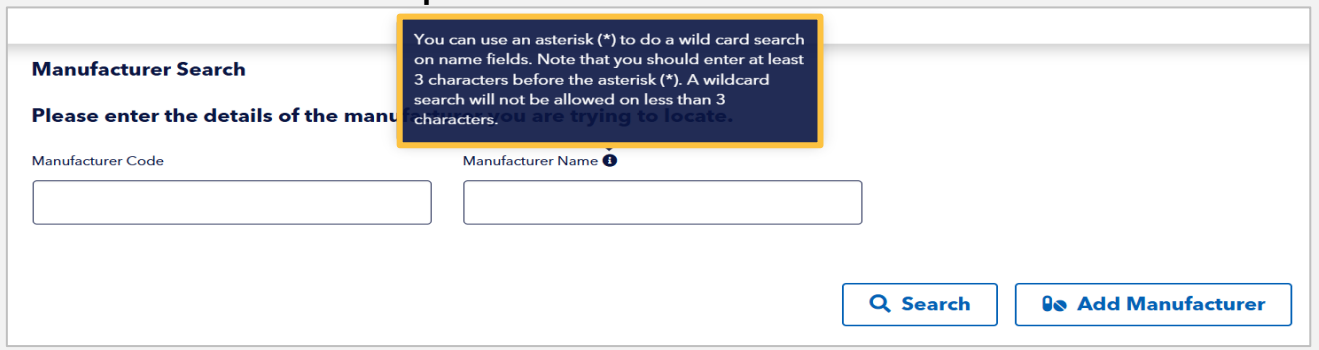
Feature Updates: Sprint 23

Pharmacy Manufacturer Search Screen Enhancements

When a TCT User navigates to the Manufacturer Search screen via the Pharmacy Portal, the following enhancements will occur:

- A new Informational Icon will appear to the right of the existing 'Manufacturer Name' search criteria displaying the following Help Text:
  - "You can use an asterisk (*) to do a wild card search on name fields. Note that you should enter at least 3 characters before the asterisk (*). A wildcard search will not be allowed on less than 3 characters."
    - *The above Help Text will appear each time the User hovers over the 'Manufacturer Name' Informational Icon.*
    - *The 'Manufacturer Name' Informational Icon will display each time the User lands on the Manufacturer Search screen.*
- This enhancement is applicable to the Agency Portal only.

'Manufacturer Name' Help Text Informational Icon on Manufacturer Search Screen



- HRAR Admin Users will now be able to render all TCT manufacturers on the Manufacturer Search screen by clicking on the 'Search' button without any search criteria entered.
  - Upon clicking on the 'Search' button, the Manufacturer Search screen's results table will display the following manufacturer columns and System generated values, including:
    - Manufacturer Code
      - This column will display the Manufacturer Code value, sourced from the 'Manufacturer Code' field, on the Manufacturer Details screen.
    - Manufacturer Name
      - This column will display the Manufacturer Name value, sourced from the 'Manufacturer Name' field, on the Manufacturer Details screen.

Feature Updates: Sprint 23

Pharmacy Manufacturer Search Screen Enhancements Cont.

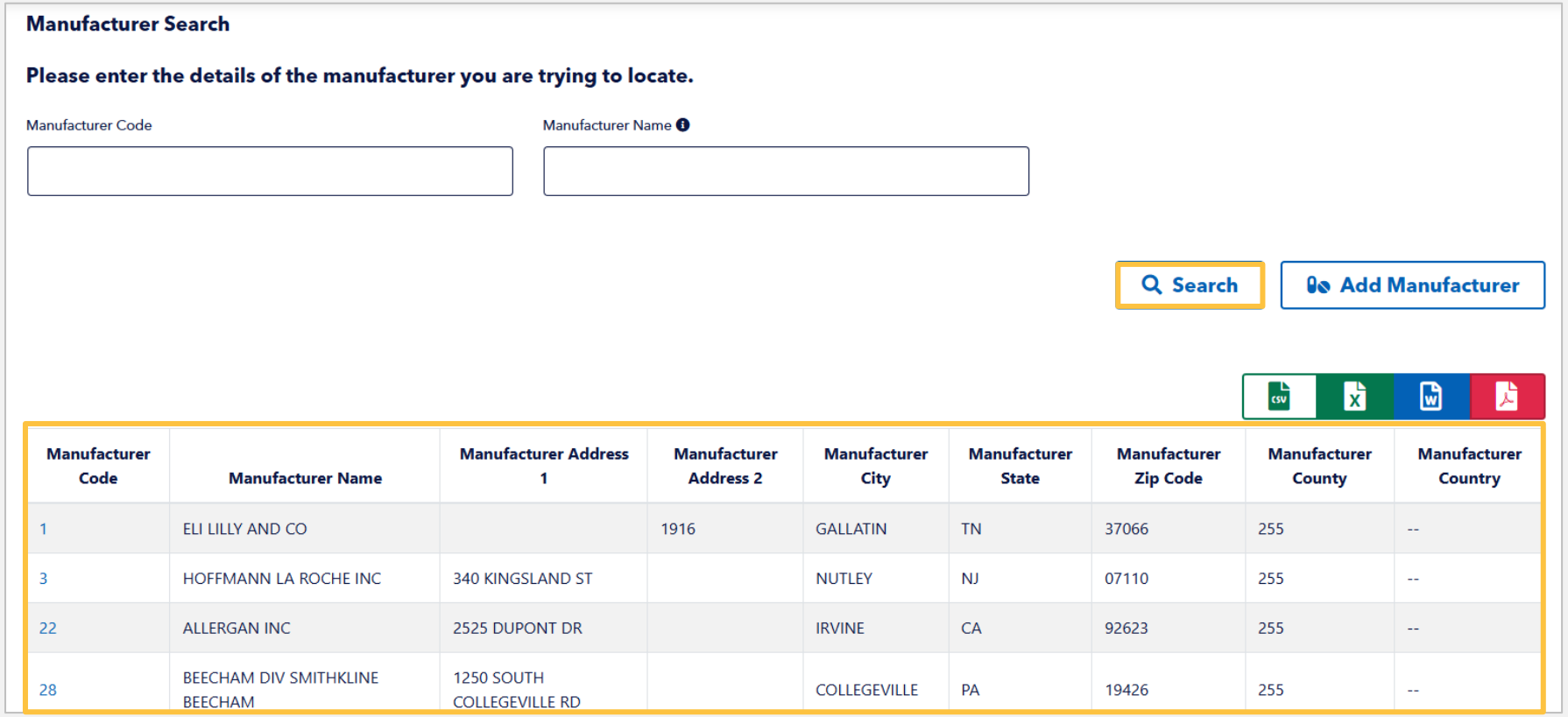
- Manufacturer Address Line 1
  - This column will display the Manufacturer Address Line 1 value, sourced from the Physical 'Address Line 1' field, on the Manufacturer Details screen.
- Manufacturer Address Line 2
  - This column will display the Manufacturer Address Line 2 value, sourced from the Physical 'Address Line 2' field, on the Manufacturer Details screen.
- Manufacturer City
  - This column will display the Manufacturer City value, sourced from the Physical 'City' field, on the Manufacturer Details screen.
- Manufacturer State
  - This column will display the Manufacturer State value, sourced from the Physical 'State' field, on the Manufacturer Details screen.
- Manufacturer Zip Code
  - This column will display the Manufacturer Zip Code value, sourced from the Physical 'Zip Code' field, on the Manufacturer Details screen.
- Manufacturer County
  - This column will display the Manufacturer County value, sourced from the Physical 'County' field, on the Manufacturer Details screen.
- Manufacturer Country
  - This column will display the Manufacturer Country value, sourced from the Physical 'Country' field, on the Manufacturer Details screen.

- The ability to search all TCT manufacturers on the Manufacturer Search screen will be limited to HRAR Admin Users only.
- This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

Pharmacy Manufacturer Search Screen Enhancements Cont.

All TCT Manufacturers Render on Manufacturer Search Screen for HRAR Admin Users



Manufacturer Code	Manufacturer Name	Manufacturer Address 1	Manufacturer Address 2	Manufacturer City	Manufacturer State	Manufacturer Zip Code	Manufacturer County	Manufacturer Country
1	ELI LILLY AND CO		1916	GALLATIN	TN	37066	255	--
3	HOFFMANN LA ROCHE INC	340 KINGSLAND ST		NUTLEY	NJ	07110	255	--
22	ALLERGAN INC	2525 DUPONT DR		IRVINE	CA	92623	255	--
28	BEECHAM DIV SMITHKLINE BEECHAM	1250 SOUTH COLLEGEVILLE RD		COLLEGEVILLE	PA	19426	255	--

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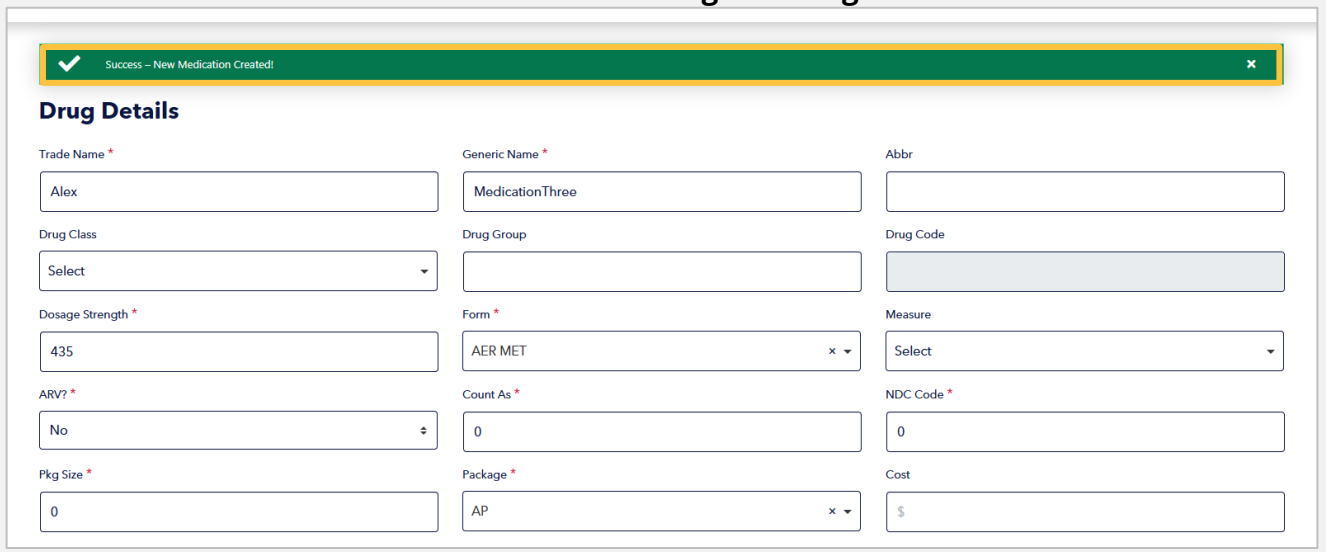
Feature Updates: Sprint 23

Pharmacy New Medication Banner Notification Enhancement

When a TCT User navigates to the Drug Details screen via the Pharmacy Portal, the following enhancement will occur:

- A new banner message will display when a User successfully creates a drug, stating the following:
  - "Success – New Medication Created!"
- The banner message will only display if the User completes all required fields and clicks on the 'Add Drug' button.
  - *The new drug cannot be a duplicate of an existing drug that already exists in the TCT System.*
- The banner message will only display for the following User Roles who have permission to create medications, including:
  - HRAR Admin/THMP Admin
    - *Above user roles are used interchangeably.*
- This enhancement is applicable to the Agency Portal only.

New Medication Banner Message on Drug Details Screen



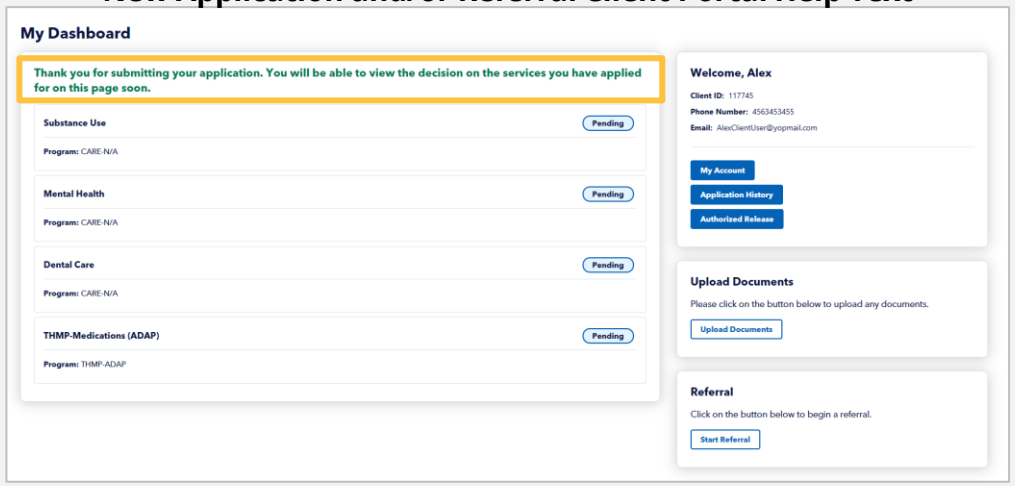
Feature Updates: Sprint 23

Client Portal Help Text Post Application Submission on Client Dashboard

When a TCT User submits an application (*New Application and/or Referral*) via the Client Portal, the following enhancement will occur:

- The following Help Text will display on the Client's Dashboard after clicking the 'Go To Dashboard' button on the Application Submitted Success screen, stating:
  - "Thank you for submitting your application. You will be able to view the decision on the services you have applied for on this page soon."
    - *Spanish translation: Gracias por enviar su solicitud. Pronto podrá ver la decisión sobre los servicios que ha solicitado en esta página.*
- The Help Text (*identified above*) will only display for the following Application Types:
  - New Application
  - Referral
- Once an eligibility determination is made by a TCT Staff Member, the Help Text will no longer display on the Client's Dashboard.
  - *Exception: If a Client requests services for both THMP and CARE programs and an eligibility determination is made for only one program (THMP or CARE) while the other program (THMP or CARE) remains in 'Pending' status, the Help Text (identified above) will no longer display on the Client's Dashboard as eligibility determination was provided on the first program.*
- This enhancement is applicable to the Client Portal only.

New Application and/or Referral Client Portal Help Text



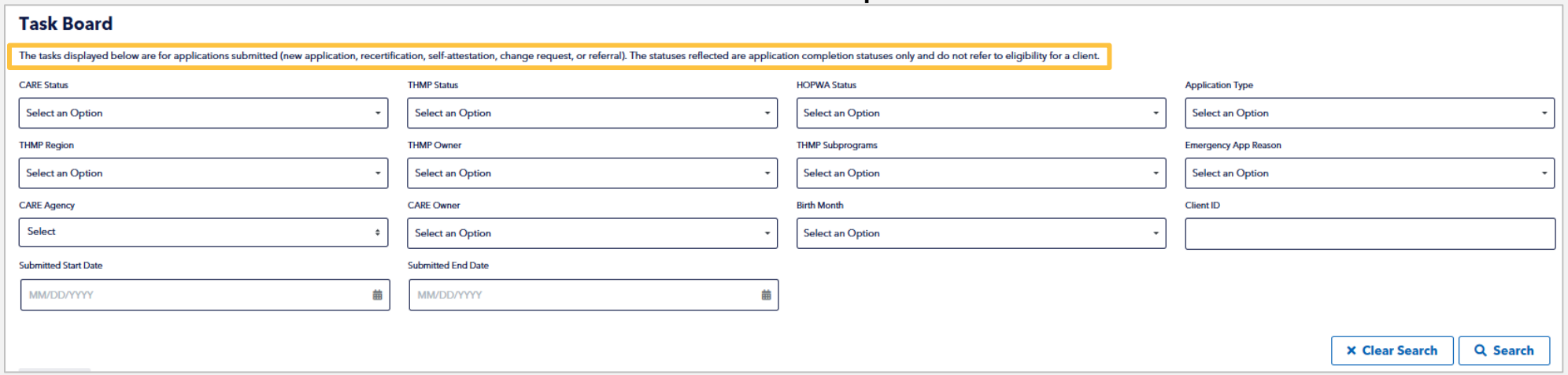
Feature Updates: Sprint 23

Task Board Task Board Help Text Enhancement

When a TCT User navigates to the Task Board screen via the Agency Portal, the following enhancement will occur:

- The following Help Text will display on the Task Board screen beneath the existing 'Task Board' title and above the search criteria, stating:
    - "The tasks displayed below are for applications submitted (new application, recertification, self-attestation, change request, or referral). The statuses reflected are application completion statuses only and do not refer to eligibility for a client."
        - *The above Help Text will appear each time the User lands on the Task Board screen.*
            - *This includes being redirected back to the Task Board screen from the Bulk Edit Task, Edit Task, and Task Board History pop up(s).*
- This enhancement will assist Users when reviewing/processing Task Board record(s).
- This enhancement is applicable to the Agency Portal only.

New Task Board Help Text



Feature Updates: Sprint 23

Task Board Task Board THMP Subprogram Enhancements

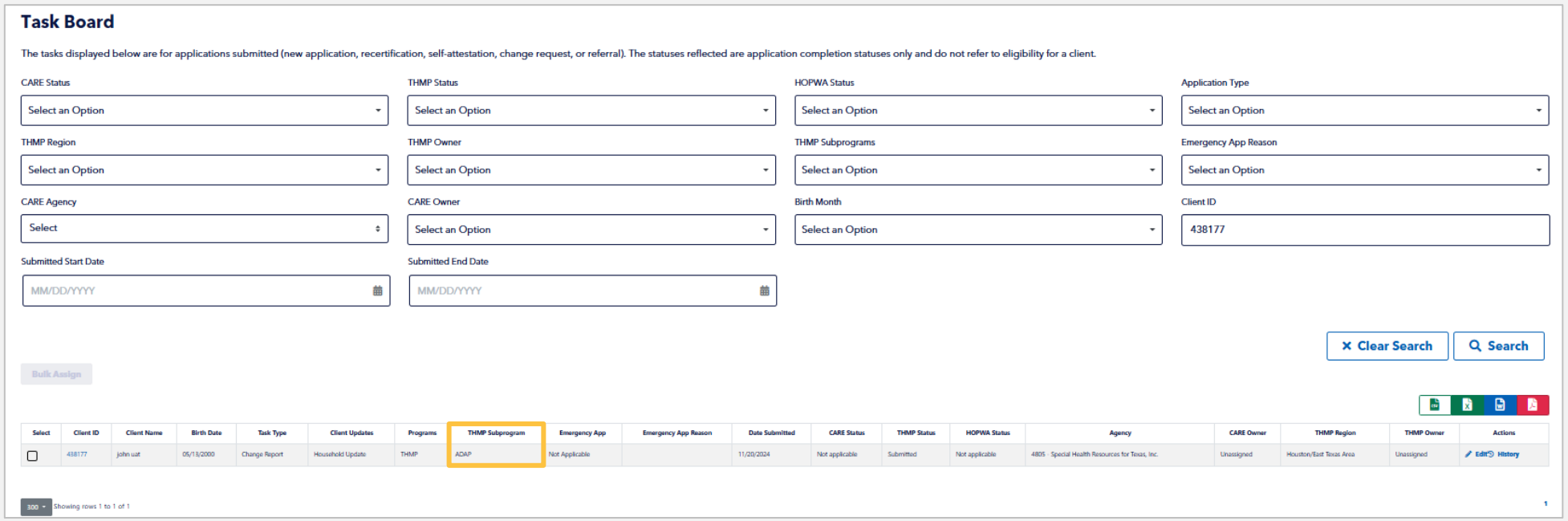
When a TCT User navigates to the Task Board screen via the Agency Portal, the following enhancements will occur:

- In the event a User submits a subsequent application (*i.e., Referral*) and indicates additional THMP subprogram(s) (*i.e., ADAP, SPAP, and/or TIAP*) on the My Service Needs page of the Application Workflow, the Task Board record's 'THMP Subprogram' value will be updated to reflect the hierarchy subprogram.
    - The TCT System will follow the hierarchy logic of **ADAP > SPAP > TIAP**.
        - If a User selects all 3 of the THMP subprograms (*ADAP, SPAP, and TIAP*), then only the "ADAP" value will display in the Task Board record's respective THMP Subprogram column.
            - *This is due to the THMP subprogram hierarchy logic.*
        - If a User selects any combination of the ADAP and TIAP subprograms, then only the "ADAP" value will display in the Task Board record's respective THMP Subprogram column.
            - *This is due to the THMP subprogram hierarchy logic.*
        - If a User selects any combination of the ADAP and SPAP subprograms, then only the "ADAP" value will display in the Task Board record's respective THMP Subprogram column.
            - *This is due to the THMP subprogram hierarchy logic.*
        - If a User selects any combination of the SPAP and TIAP subprograms, then only the "SPAP" value will display in the Task Board record's respective THMP Subprogram column.
            - *This is due to the THMP subprogram hierarchy logic.*
        - If a User only selects the ADAP subprogram, then only the "ADAP" value will display in the Task Board record's respective THMP Subprogram column.
        - If a User only selects the SPAP subprogram, then only the "SPAP" value will display in the Task Board record's respective THMP Subprogram column.
        - If a User only selects the TIAP subprogram, then only the "TIAP" value will display in the Task Board record's respective THMP Subprogram column.
- Per the enhancement, only one subprogram value will display in the Task Board record's respective THMP Subprogram column due to the hierarchy logic described above.
- When a User successfully submits a subsequent application (*i.e., Referral*) indicating additional THMP subprogram(s), the TCT System will then trigger the updated value for the Task Board record's respective THMP Subprogram column.
    - *If the User does not successfully submit a subsequent application (i.e., Referral) indicating additional THMP subprogram(s), the existing THMP Subprogram value will continue to remain intact for the Task Board record(s).*
- This enhancement is applicable to both the Task Board screen and the Task Board History pop up(s).
- This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

Task Board Task Board THMP Subprogram Enhancements Cont.

THMP Subprogram Value Before Subsequent Application (*i.e., Referral*) is Submitted



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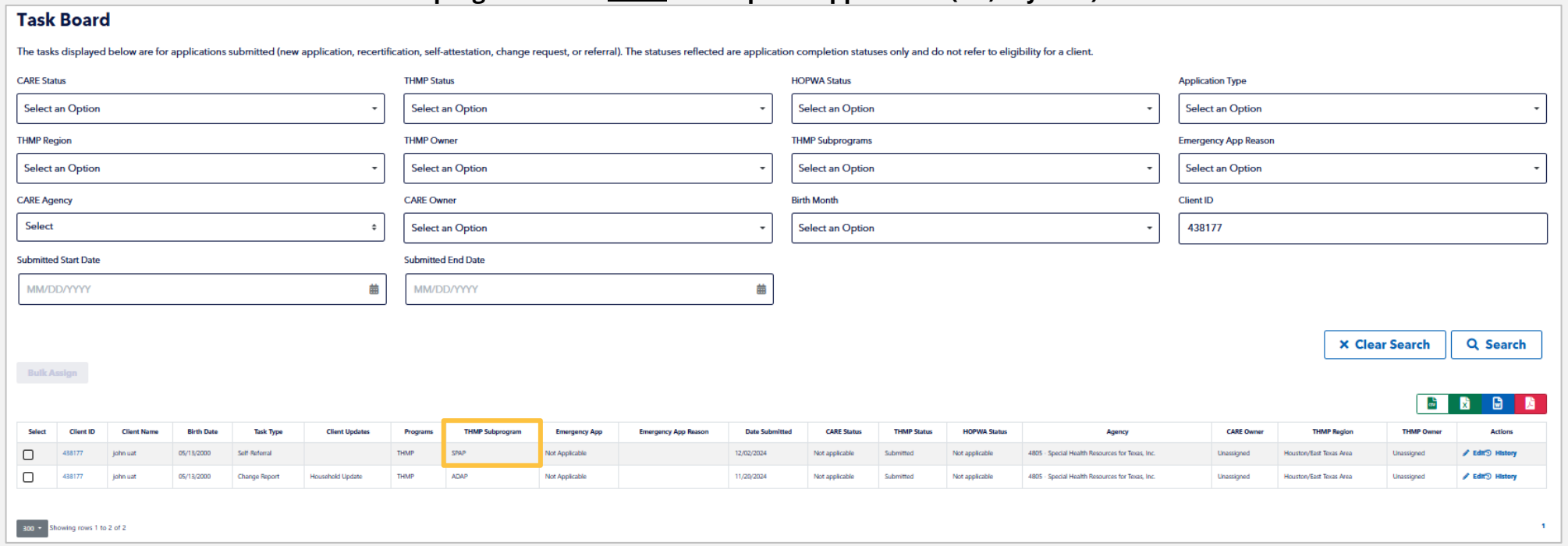
Feature Updates: Sprint 23

Task Board Task Board THMP Subprogram Enhancements Cont.

THMP Subprogram Value After Subsequent Application (*i.e., Referral*) is Submitted



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Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement

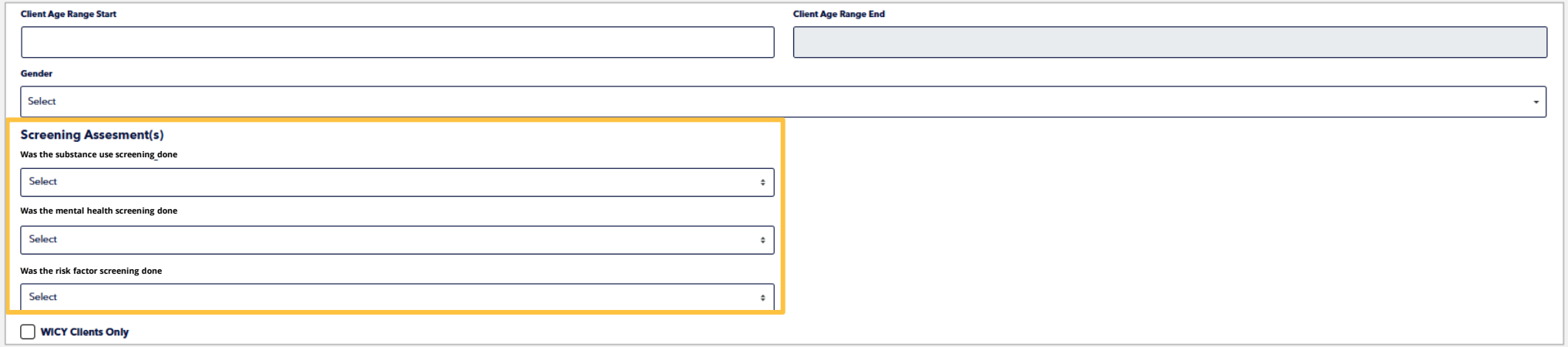
When a TCT User navigates to the STAR Report and View STAR Reports screens via the Agency Portal, the following enhancements will occur:

- A new sub header titled "**Screening Assessment(s)"** will be added to the STAR Report screen beneath the existing 'Gender' multi-select drop down.
    - This new sub header will house the following optional, single-select drop downs, including:
        - "Was the substance use screening done"
            - *Existing single-select drop down.*
        - "Was the mental health screening done"
            - *Existing single-select drop down.*
        - "Was the risk factor screening done"
            - This will be a new optional, single-select drop down.
                - The following picklist values will be available for selection:
                    - No
                    - Yes
            - If the User selects the 'Yes' value to the "Was the risk factor screening done" question, the following conditional, optional multi-select drop down will display titled "**Risk factor screening result**".
                - The following picklist values will be available for selection:
                    - Male to Male sexual contact (MSM)
                    - Heterosexual contact
                    - Sex with cisgender partner(s)
                    - Sex with transgender partner(s)
                    - Injection drug use (IDU)
                    - Sex with person who injects drug
                    - Hemophilia/coagulation disorder
                    - Receipt of blood transfusion, blood components, or tissue
                    - Perinatal transmission (Birth parent with HIV)
                    - History of sexual abuse or sexual assault
                    - Risk factor not reported or not identified

Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

“Screening Assessment(s)” Sub Header on STAR Report Screen



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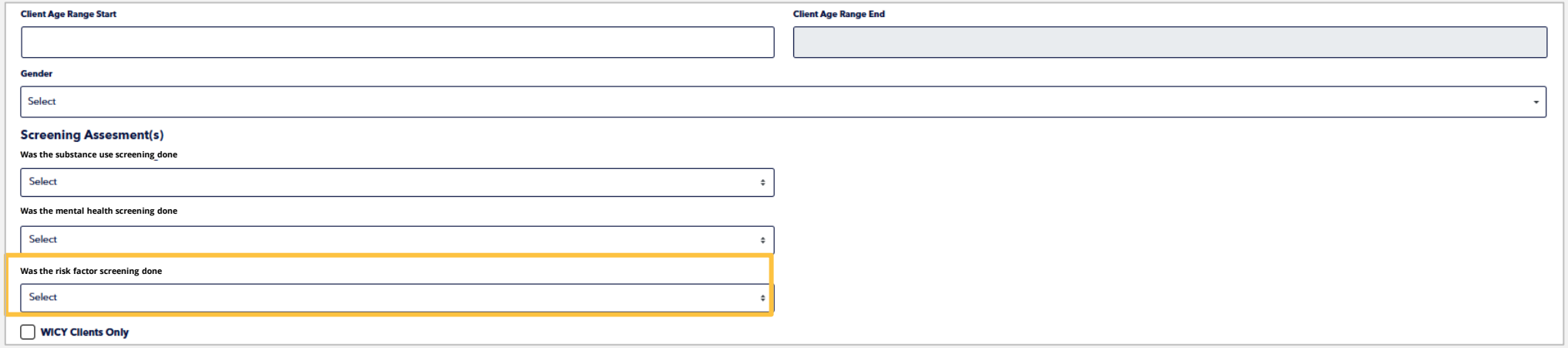
Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

“Was the Risk Factor Screening Done” Multi-Select Drop Down on STAR Report Screen



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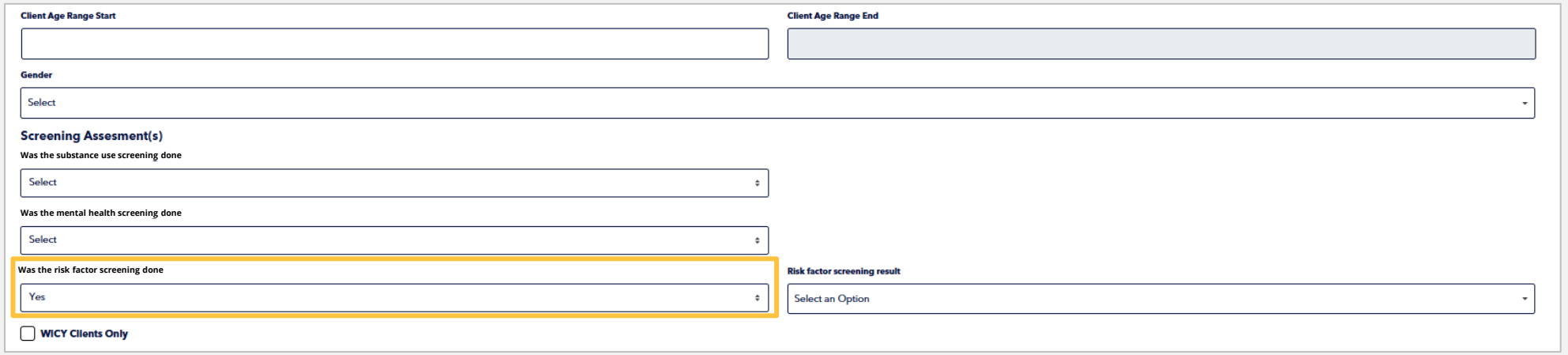
Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

“Risk Factor Screening Result” Conditional Multi-Select Drop Down on STAR Report Screen



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Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

- Per the enhancement, the following results tables will now display in the Accessible View and Download PDF actions on the View STAR Reports screen beneath the existing 'Criteria' and 'Selected Value' columns, including:
    - Mental Health Screening
        - This will be the corresponding subtitle for the new **Mental Health Screening** results table.
        - The Mental Health Screening results table will have the following columns and System generated values:
            - Client ID
                - This column will display the Client's unique TCT Client ID.
                    - Format: ######
            - Client DOB
                - This column will display the Client's Date of Birth sourced from the Client's Profile.
                    - Format: MM/DD/YYYY
            - Program
                - This column will display the Program(s) the Client is approved for.
                    - Values: THMP and/or CARE
            - Subprogram
                - This column will display the Subprogram(s) the Client is approved for.
                    - Values: ADAP, SPAP, TIAP, RW CARE, and/or MAI
            - Was the Mental Health Screening Done
                - This column will display the 'No' or 'Yes' value as indicated on the STAR Report screen.
                - If no value is selected on the STAR Report screen due to the "Was the Mental Health Screening Done" question being optional, the cell will appear empty/blank.
            - Mental Health Screening Result
                - This column will display the Mental Health Screening Result as indicated on the STAR Report screen.
                - If no value is selected due to the "Mental Health Screening Result" drop down being optional, the cell will appear empty/blank.
                - If a Client had multiple Mental Health Screening Results, then the "Mental Health Screening Result" column will display the values as comma separated.
        - The Mental Health Screening results table will have the following export capabilities: CSV, Excel, Word, and PDF.
        - This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

- Per the enhancement, the following results tables will now display in the Accessible View and Download PDF actions on the View STAR Report screen beneath the existing 'Criteria' and 'Selected Value' columns, including:
    - Substance Use Screening
        - This will be the corresponding subtitle for the new **Substance Use Screening** results table.
        - The Substance Use Screening results table will have the following columns and System generated values:
            - Client ID
                - This column will display the Client's unique TCT Client ID.
                    - Format: ######
            - Client DOB
                - This column will display the Client's Date of Birth sourced from the Client's Profile.
                    - Format: MM/DD/YYYY
            - Program
                - This column will display the Program(s) the Client is approved for.
                    - Values: THMP and/or CARE
            - Subprogram
                - This column will display the Subprogram(s) the Client is approved for.
                    - Values: ADAP, SPAP, TIAP, RW CARE, and/or MAI
            - Was the Substance Use Screening Done?
                - This column will display the 'No' or 'Yes' value as indicated on the STAR Report screen.
                - If no value is selected on the STAR Report screen due to the "Was the Substance Use Screening Done" question being optional, the cell will appear empty/blank.
            - Substance Use Screening Result
                - This column will display the Substance Use Screening Result as indicated on the STAR Report screen.
                - If no value is selected due to the "Substance Use Screening Result" drop down being optional, the cell will appear empty/blank.
                - If a Client had multiple Substance Use Screening Results, then the "Substance Use Screening Result" column will display the values as comma separated.
        - The Substance Use Screening results table will have the following export capabilities: CSV, Excel, Word, and PDF.
        - This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

- Per the enhancement, the following results tables will now display in the Accessible View and Download PDF actions on the View STAR Report screen beneath the existing 'Criteria' and 'Selected Value' columns, including:
    - Risk Factor Screening
        - This will be the corresponding subtitle for the new **Risk Factor Screening** results table.
        - The Risk Factor Screening results table will have the following columns and System generated values:
            - Client ID
                - This column will display the Client's unique TCT Client ID.
                    - Format: ######
            - Client DOB
                - This column will display the Client's Date of Birth sourced from the Client's Profile.
                    - Format: MM/DD/YYYY
            - Program
                - This column will display the Program(s) the Client is approved for.
                    - Values: THMP and/or CARE
            - Subprogram
                - This column will display the Subprogram(s) the Client is approved for.
                    - Values: ADAP, SPAP, TIAP, RW CARE, and/or MAI
            - Was the Risk Factor Screening Done?
                - This column will display the 'No' or 'Yes' value as indicated on the STAR Report screen.
                - If no value is selected on the STAR Report screen due to the "Was the Risk Factor Screening Done" question being optional, the cell will appear empty/blank.
            - Risk Factor Screening Result
                - This column will display the Risk Factor Screening Result as indicated on the STAR Report screen.
                - If no value is selected due to the "Risk Factor Screening Result" drop down being optional, the cell will appear empty/blank.
                - If a Client had multiple Risk Factor Screening Results, then the "Risk Factor Screening Result" column will display the values as comma separated.
        - The Risk Factor Screening results table will have the following export capabilities: CSV, Excel, Word, and PDF.
        - This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

STAR Report STAR Report Risk Factor Enhancement Cont.

Mental Health, Substance Use, and Risk Factor Screening Results Tables on View STAR Report Accessible View and Download PDF Actions

Mental Health Screening

Client ID	Client DOB	Program	Subprogram	Was the mental screening done	Mental Screening Result
No data available for this area					

Substance Use Screening

Client ID	Client DOB	Program	Subprogram	Was the substance use screening done	Substance use screening result
No data available for this area					

Risk Factor Screening

Client ID	Client DOB	Program	Subprogram	Was the risk factor screening done	Risk factor screening result
436987	04/24/1986	THMP,CARE	ADAP,RWCARE	YES	Male to Male sexual contact (MSM),Heterosexual contact
436468	11/06/1982	CARE	RWCARE	YES	Heterosexual contact,Sex with person who injects drug
435574	01/16/2002	CARE	RWCARE	YES	Male to Male sexual contact (MSM)

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Feature Updates: Sprint 23

Eligibility Validation Message for Income Update

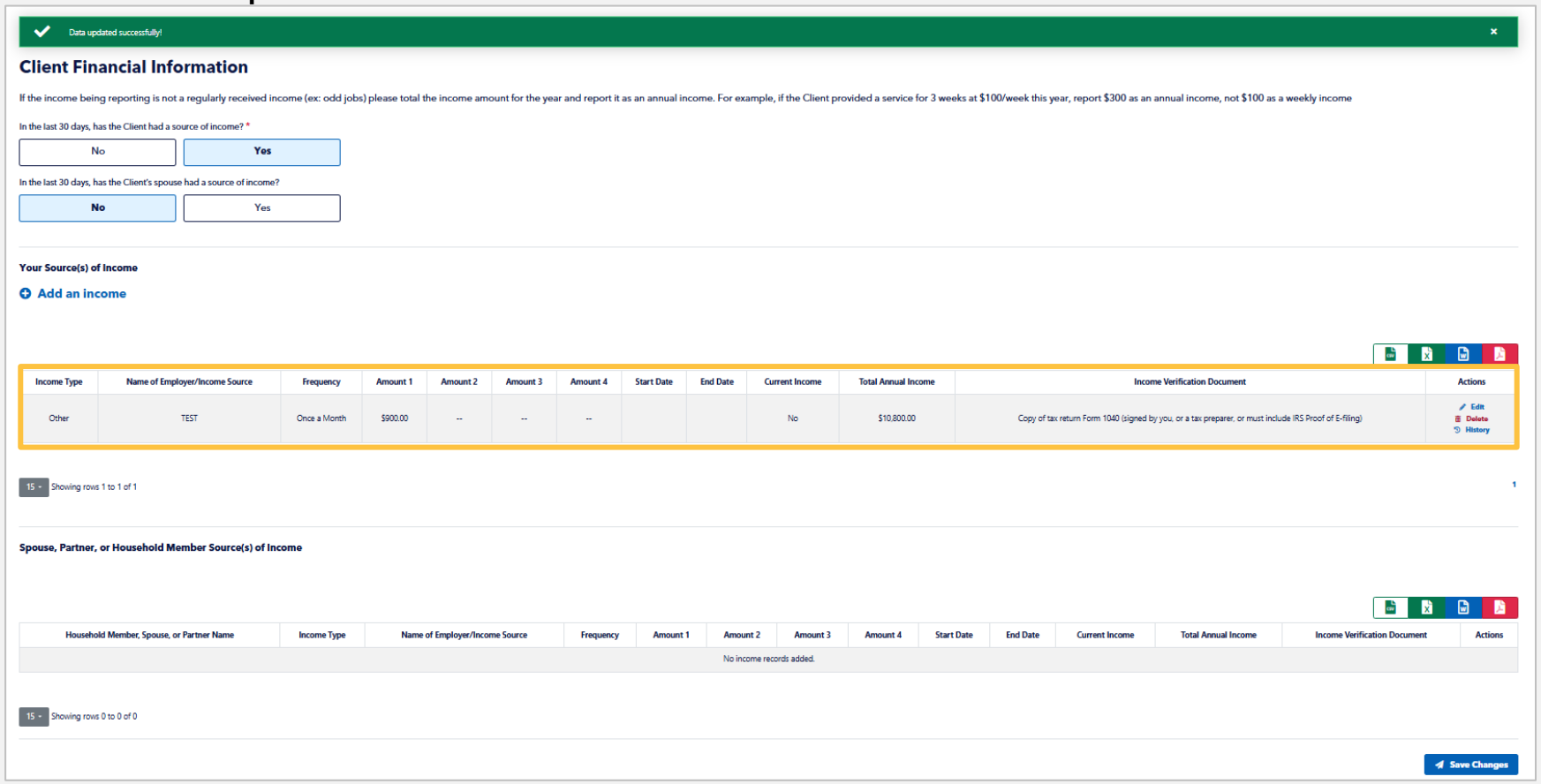
When a TCT User navigates to the Household Composition, Countable Income, and/or Eligibility Period Selection screen(s) via the Agency Portal, the following enhancements will occur:

- In the event a User navigates straight to the Household Composition, Countable Income, and/or Eligibility Period Selection screen(s), and the income of the Client or Related Individual has been updated on the Client Financial Information screen, then an in-portal income validation message pop up will display on the respective screen(s), stating the following:
    - "The financial information has been updated. Please acknowledge the updated income information by clicking confirm."
- The in-portal income validation message pop up will include two action buttons – *User must click on one of the below buttons to close out of the income validation message.*
    - Confirm
    - Cancel
- The logic of the income validation message pop up will be as follows:
    - If a User navigates to the Household Composition screen and there is a Client and/or Related Individual income update, then the pop up will appear.
        - If the User clicks on the 'Confirm' button on the pop up and proceeds forward by clicking 'Next', then the validation message pop up will not appear on the Countable Income and Eligibility Period Selection screens.
    - If a User navigates to the Countable Income screen and there is a Client and/or Related Individual income update, then the pop up will only appear if the User did not confirm the pop up on the Household Composition screen.
        - If the User clicks on the 'Confirm' button on the pop up and proceeds forward by clicking 'Next, then the validation message pop up will not appear on the Eligibility Period Selection screen.
    - If a User navigates to the Eligibility Period Selection screen and there is a Client and/or Related Individual income update, then the pop up will only appear if the User did not confirm the pop up on the Household Composition and Countable Income screens.
        - If the User clicks on the 'Confirm' button on the pop up and proceeds forward by clicking 'Continue', then the User can proceed forward with processing eligibility.
- The below triggers on the Client Financial Information screen will prompt the in-portal income validation message pop up:
    - When any new income is added and/or removed for the Client and/or Related Individual on the Client Financial Information screen.
    - When an update is made to a Client and/or Related Individual's existing income on the Client Financial Information screen. The TCT System will compare existing income data with any changes based on Income Type/Employer name combination. If any update is identified in terms of amount, then it will be considered as change in the Client and/or Related Individual's income.
    - When any income updates are indicated via an Application submission, the System will perform above 2 checks before reflecting the data submitted via the application to the Client's profile income tables. Any updates will be considered as change in client's income.
- This enhancement is dependent on an income update having been made to the Client and/or Related Individual on the Client Financial Information screen.
    - *The above pre-condition must be met for the income validation message pop up to display on the applicable screens.*
- This enhancement is applicable to the Household Composition, Countable Income, and Eligibility Period Selection screens only.
- This enhancement is applicable to the Agency Portal only.

Feature Updates: Sprint 23

Eligibility Validation Message for Income Update Cont.

User Updates Client and/or Related Individual's Income on Client Financial Information Screen



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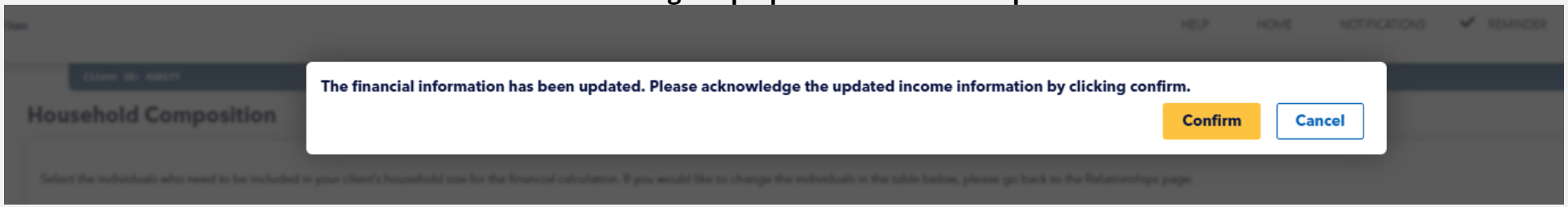
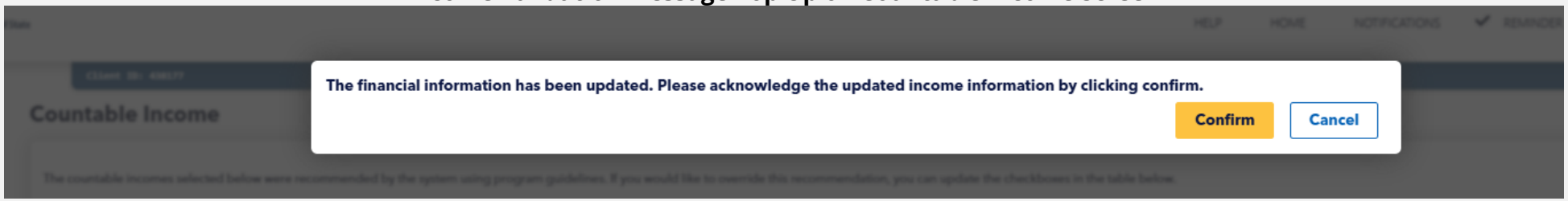
Feature Updates: Sprint 23

Eligibility Validation Message for Income Update Cont.

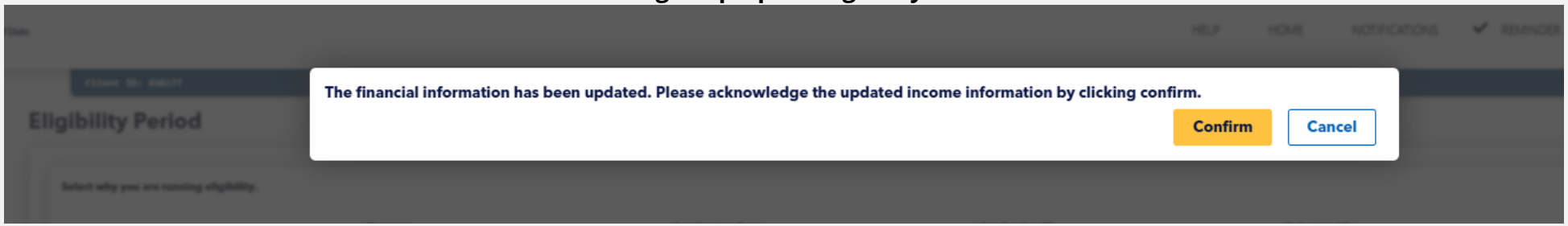
Income Validation Message Pop Up on Household Composition Screen



Income Validation Message Pop Up on Countable Income Screen



Income Validation Message Pop Up on Eligibility Period Selection Screen



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Feature Updates: Sprint 23

Eligibility THMP Denial Letter

When a TCT User navigates to the Eligibility Period Selection screen via the Agency Portal, the following enhancements will occur:

- In the event a User processes a Client's THMP eligibility, and the User accepts the System's deny/reject Eligibility Recommendation decision on the Eligibility Recommendation screen, the Client will receive an auto-generated **THMP Denial Letter** to their email informing them of the reason they were denied/rejected services.
- In the event a User processes a Client's THMP eligibility, and the User overrides the System's deny/reject Eligibility Recommendation on the Eligibility Overrides screen, the Client will receive an auto-generated **THMP Denial Letter** to their email informing them of the reason(s) they were denied/rejected services.
- In the event a Client is auto-denied from the THMP program due to failure to recertify, the Client will receive an auto-generated THMP Denial Letter to their email informing them of the reason they were denied/rejected services.
- Per the enhancement, a Client will only receive an auto-generated THMP Denial Letter if they are denied/rejected THMP eligibility.
    - *This enhancement is unrelated to the CARE program and is specific to the THMP program only.*
- A Client may be denied/rejected THMP eligibility for the following Eligibility Recommendation, Eligibility Override, or System reason(s), including:
    - Deceased
        - *Spanish translation: Difunto*
    - Does not meeting residency eligibility requirements (out-of-state, out of service area)
        - *Spanish translation: No cumple con los requisitos de elegibilidad de residencia (fuera del estado, fuera del área de servicio)*
    - Does not meet insurance eligibility requirements – ACA Plan
        - *Spanish translation: No cumple con los requisitos de elegibilidad para el seguro – Plan ACA*
    - Does not meet insurance eligibility requirements – Medicare and Full LIS
        - Spanish translation: No cumple con los requisitos de elegibilidad para el seguro: Medicare y LIS completo
    - Does not meet insurance eligibility requirements – Private insurance
        - *Spanish translation: No cumple con los requisitos de elegibilidad del seguro – Seguro privado*
    - Failure to provide acceptable proof of residency
        - *Spanish translation: No presento una prueba de residencia aceptable*
    - Failure to provide acceptable health insurance information
        - *Spanish translation: No presento información aceptable sobre el seguro de salud*
    - Failure to provide acceptable proof of income or support for applicant for spouse
        - *Spanish translation: No presento una prueba aceptable de ingresos o apoyo para el solicitante o su cónyuge*
    - Failure to provide more than one of the following: proof of income, proof of residency, proof of diagnosis, health insurance information
        - *Spanish translation: No presento uno o más de los siguientes: comprobante de ingresos, comprobante de residencia, comprobante de diagnóstico, información del seguro médico*
    - Failure to provide proof of household change, when required
        - *Spanish translation: No presento prueba de cambio de hogar, cuando se requiera*
    - Failure to provide verification documents, when required
        - *Spanish translation: No presento los Documentos de Verificación, cuando se requieran*

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

- A Client may be denied/rejected THMP eligibility for the following Eligibility Recommendation or Eligibility Override reason(s), including:
  - Inactivity denial
    - *Spanish translation: Negación por Inactividad*
  - Incarcerated
    - *Spanish translation: Encarcelado*
  - Income exceeds eligibility requirements based on FPL
    - *Spanish translation: Los ingresos exceden los requisitos de elegibilidad según el nivel federal de probreza (FPL por sus siglas en ingles)*
  - Lives in a nursing home, hospital, or other community facility responsible for medical care
    - *Spanish translation: Vive en un Asilo de Ancianos, Hospital u otro Centro Comunitario responsable de atención médica*
  - Missing proof of diagnosis
    - *Spanish translation: Falta prueba de diagnóstico*
  - Negative HIV confirmatory test results
    - *Spanish translation: Resultado negativo de la prueba confirmatoria*
  - One or more pages are missing form the application or parts of the application are blank
    - *Spanish translation: Faltan una o más páginas en la solicitud o partes de la solicitud están en blanco*
  - Other
    - *Spanish translation: Otro*
  - TCT error (such as: approved by unauthorized staff member, duplicate, etc.)
    - *Spanish translation: Error de TCT (como: aprobado por un miembro del personal no autorizado, duplicado, etc.)*
  - TCT application is not dated
    - *Spanish translation: La solicitud no tiene fecha*
  - TCT application is not signed
    - *Spanish translation: La solicitud no está firmada*
  - TCT application signature and date are over 60 days old
    - *Spanish translation: La firma y la fecha de la solicitud tienen más de 60 días de antigüedad*
  - Voluntary application removal by client or agency worker
    - *Spanish translation: Retiro voluntario de la solicitud por parte del cliente o del trabajador de la agencia*
  - Failure to Recertify
    - *Spanish translation: Falta de Renovación*

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

- When a Client who is denied/rejected THMP eligibility for the various Eligibility Recommendation, Eligibility Override, or System reason(s), the Client will receive the auto-generated THMP Denial Letter (*in both English and Spanish*) to their email which will follow the template structure below:
    - The THMP Denial Letter will contain a Cover Letter as the first page.
        - The Cover Letter will include the Date the letter was issued and the Address of the Client.
    - The THMP Denial Letter, beginning on the second page (*main page*), will display the following information:
        - On the left hand-side, as part of the header, the HHSC logo will display.
            - Logo: Texas Health and Human Services
        - On the right hand-side, as part of the header, the DSHS logo will display.
            - Logo: Department of State and Health Services
        - On the right hand-side, as part of the header, beneath the DSHS logo, the Commissioner's Information will display.
            - Commissioner's Information: Jennifer A. Shuford, M.D., M.P.H,
        - On the right hand-side, as part of the header, beneath the Commissioner's Information, the following value will display:
            - Value: Commissioner
    - Beneath the header, on the second page (*main page*), the THMP Denial Letter will display the following Date, Attention, and TCT ID subheaders and System generated values:
        - Date:
            - This header will display the Date the TCT System generated the THMP Denial Letter for the Client – *dependent on the Client having been denied/rejected eligibility.*
                - *Spanish translation: Fecha:*
                    - Format: MM/DD/YYYY
        - Attention:
            - This subheader will display the Client's First and Last Name on the THMP Denial Letter which will get auto-generated by the TCT System when the Client is denied/rejected eligibility.
                - *Spanish translation*: *Atención:*
                    - Format: First Name & Last Name
        - TCT ID:
            - This subheader will display the Client's unqiue TCT ID on the THMP Denial Letter which will get auto-generated by the TCT System when the Client is denied/rejected eligibility.
                - *Spanish translation: Identificación de TCT:*
                    - Format: ######

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

- When a Client who is denied/rejected THMP eligibility for the various Eligibility Recommendation, Eligibility Override, or System reason(s), the Client will receive the auto-generated THMP Denial Letter (*in both English and Spanish*) to their email which will follow the template structure below:
    - Beneath the Date, Attention, and TCT ID subheaders and System generated values, the following language will display on the THMP Denial Letter, stating:
        - "At this time, we cannot approve assistance with your THMP formulary medications. Please see below for reasons:"
            - The Spanish translation for the above language on the THMP Denial Letter will be: "En este momento, no podemos aprobar asistencia con sus medicamentos del formulario de THMP. Consulte a continuación las razones:"
        - Below the "Please see below for reasons:" verbiage, the THMP Denial Letter will display, in a bulleted list, the deny/reject Eligibility Recommendation, Eligibility Override , or System reason(s) applicable to the Client.
            - For example, if a Client was denied/rejected THMP eligibility due to only one Eligibility Recommendation reason, the decision would display in a bulleted list format on the THMP Denial Letter:
                - Negative HIV Confirmatory Test Result
            - For example, if the Client was denied/rejected THMP eligibility due to one or more Eligibility Override reason(s), the decision(s) would display in a bulleted list format on the THMP Denial Letter:
                - Does not meet insurance eligibility requirements – ACA Plan
                - Failure to provide acceptable proof of residency
            - For example, if the Client was denied/rejected THMP eligibility due to the Failure to Recertify System reason, the decision would display in a bulleted list format on the THMP Denial Letter:
                - Failure to recertify

    - Beneath the Eligibility Recommendation, Eligibility Override, or System reason(s) bulleted list, a new section titled "Comments:" will display on the THMP Denial Letter.
        - The "Comments:" section will display the comment value(s) the User indicated when denying/rejecting a Client's THMP eligibility on the Eligibility Overrides screen.
            - The Spanish translation for the new "Comments:" section on the THMP Denial Letter will be: COMENTARIOS:
        - The comment value(s) will only populate for the Eligibility Override scenario only.
            - As the "Comments' free-text field is optional on the Eligibility Overrides screen for both THMP deny/reject scenarios, if a User does not indicate a comment, the "Not Applicable" value will then display under the 'Comments:' section on the THMP Denial Letter.
                - Value: Not Applicable
            - Due to the User entering comments in real-time on the Eligibility Overrides screen, the comment value(s) will appear exactly as entered in the Comment box on both the English and Spanish THMP Denial Letters.

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

- When a Client who is denied/rejected THMP eligibility for the various Eligibility Recommendation, Eligibility Override, or System reason(s), the Client will receive the auto-generated THMP Denial Letter (*in both English and Spanish*) to their email which will follow the template structure below:
    - Beneath the Comments section, a new section titled "Your Next Steps:" will display on the THMP Denial Letter.
        - The Spanish translation for the new "Your Next Steps:" section on the THMP Denial Letter will be: SUS PRÓXIMOS PASOS:
    - The new "Your Next Steps:" section will display the following language on the THMP Denial Letter:
        - "Keep this letter as proof of denial from THMP. If you apply for help from a drug manufacturer, refer to this program as the Texas ADAP. You can find information at needymeds.org. Contact your agency or clinic and share your enrollment status. They can help you with possible alternative assistance. For Medicare Copay assistance, contact the Patient Advocate Foundation at patientadvocate.org or 1-800-532-5274. To reapply to the THMP or for other assistance with medications, contact your local agency or clinic and inform them of this letter. You may also call 2-1-1 for case management services or other community resources in your local area."
            - *Spanish translation: Guarde esta carta como prueba de negación de THMP. Si aplica para ayuda de un fabricante de medicamentos, refiere a este programa como el ADAP de Texas. Puede encontrar información: www.needymeds.org. Póngase en contacto con su agencia o clínica y comparte el estado de su inscripción. Ellos pueden ayudarle con posibles alternativas de asistencia. Para obtener asistencia con el copago de Medicare, comuníquese con la Fundación del Defensor del Paciente al patientadvocate.org o al 1-800-532-5274. Para volver a solicitar el THMP o para obtener otro tipo de asistencia con los medicamentos, comuníquese con su agencia o clínica local e infórmeles de esta carta. También puede llamar al 2-1-1 para obtener servicios de administración de casos u otros recursos comunitarios en su área local.*
        - "If your situation changes, and you think you may be eligible for help through THMP, reapply. You reapply by contacting your local agency, complete and mail the THMP application or apply online through the online system, Take Charge Texas at: https://takechargetexas.gov . If you reapply to THMP, you need to submit documentation of changes to your income, household, or Texas Residency."
            - *Spanish translation: Si su situación cambia y cree que puede ser elegible para recibir ayuda a través de THMP, vuelva a presentar una solicitud. Complete y envíe la solicitud de THMP por correo o póngase en contacto con su agencia local para obtener asistencia con la solicitud. Si vuelve a solicitar a THMP, debe presentar documentación de cambios en sus ingresos, hogar o residencia en Texas con su solicitud.*
        - "Please call us if you have any questions at 800-255-1090."
            - *Spanish translation: Favor de llamar al THMP al 1-800-255-1090 si tiene preguntas.*

Feature Updates: Sprint 23

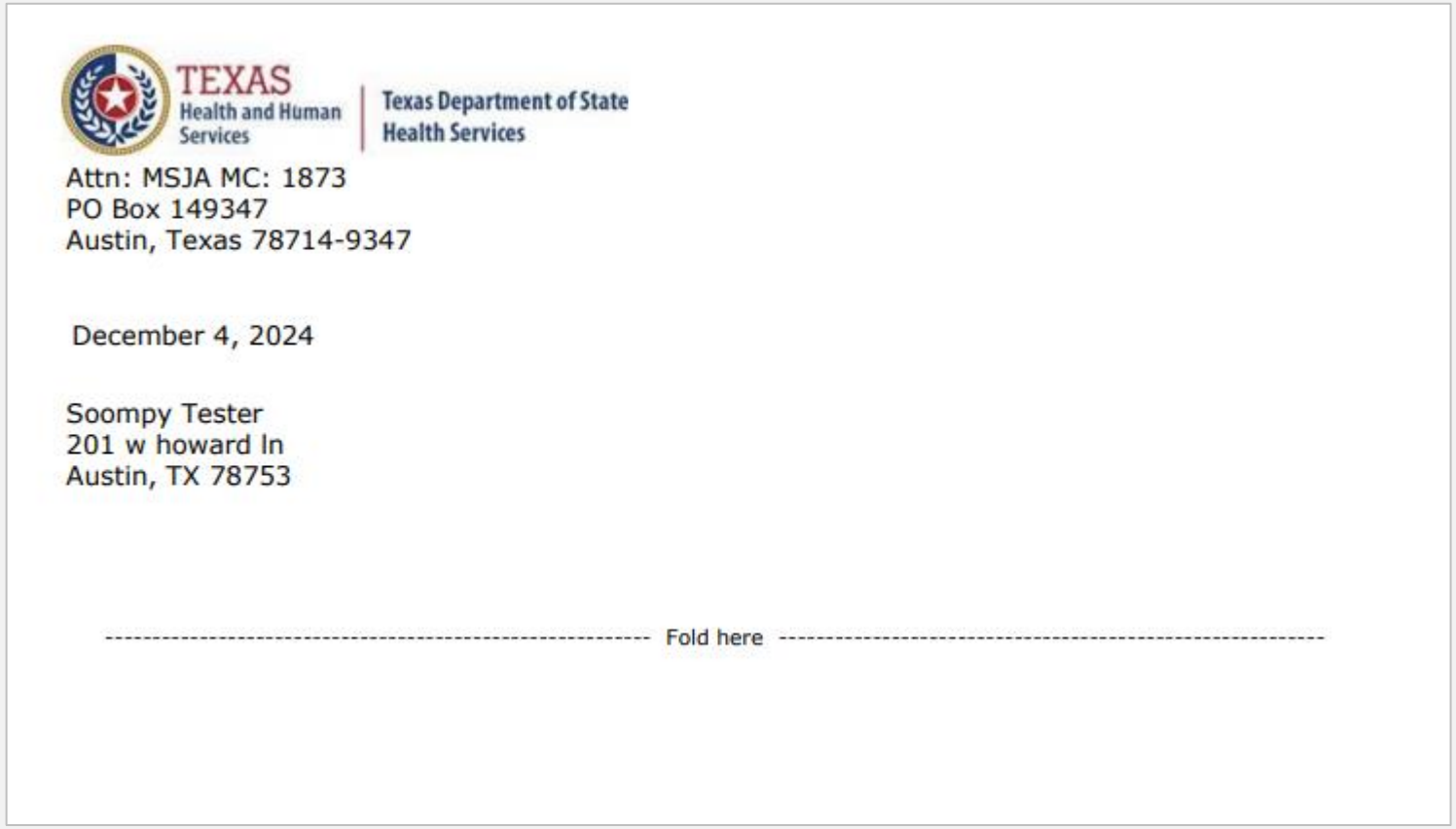
Eligibility THMP Denial Letter Cont.

- When a Client who is denied/rejected THMP eligibility for the various Eligibility Recommendation, Eligibility Override, or System reason(s), the TCT System will auto-generate the THMP Denial Letter to the Client's email address and will create a record on both the Multi-Provider Document Verification and Verification Checklist screens' results tables.
    - The new THMP Denial Letter will display as a record on the Multi-Provider Document Verification screen in the 'Generated Letters' results table.
        - The THMP Denial Letter record that gets created in the Generated Letters results table will have the following columns and System generated values, including:
            - Document Name
                - The Document Name column will display the "THMP Denial Letter" value for the respective record.
                    - Value: THMP Denial Letter
            - Document PDF
                - The Document PDF column will display the hyperlinked "THMP Denial Letter" value for the respective record.
                - When a User clicks on the hyperlinked "THMP Denial Letter" value, the THMP Denial Letter will then open in PDF format in the User's browser.
                    - Value: THMP Denial Letter
            - Generated On
                - The Generated On column will display the Date and Timestamp the THMP Denial Letter was generated by the TCT System.
                    - Format: MM/DD/YYYY
    - The new THMP Denial Letter record that gets triggered on the Verification Checklist screen will appear in the new "Generated Letters" section/results table.
        - The THMP Denial Letter record that gets triggered in the Generated Letters results table will have the following columns and System generated values, including:
            - Document Category
                - The Document Category column will display the "Batch" value for the respective record.
                    - Value: Batch
            - File Name
                - The File Name column will display the hyperlinked "THMP Denial Letter" value for the respective record.
                - When a User clicks on the hyperlinked "THMP Denial Letter" value, the THMP Denial Letter will then open in PDF format in the User's browser.
                    - Value: THMP Denial Letter
            - Application ID
                - The Application ID column will display the Client's unique TCT Application ID.
                    - Format: #######
            - Uploaded By
                - The Uploaded By column will display the "System" value for the respective record.
                    - Value: System
            - Generated On
                - The Generated On column will display the Date and Timestamp the THMP Denial Letter was generated by the TCT System.
                    - Format: MM/DD/YYYY HH:MM:SS AM / PM
- If a Client is not denied/rejected THMP eligibility, no THMP Denial Letter records will display on the Multi-Provider Document Verification and Verification Checklist screens/results tables.
- This enhancement is aplicable to the Agency Portal only.

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

THMP Denial Letter Cover Letter



TEXAS Health and Human Services | Texas Department of State Health Services

Attn: MSJA MC: 1873
PO Box 149347
Austin, Texas 78714-9347

December 4, 2024

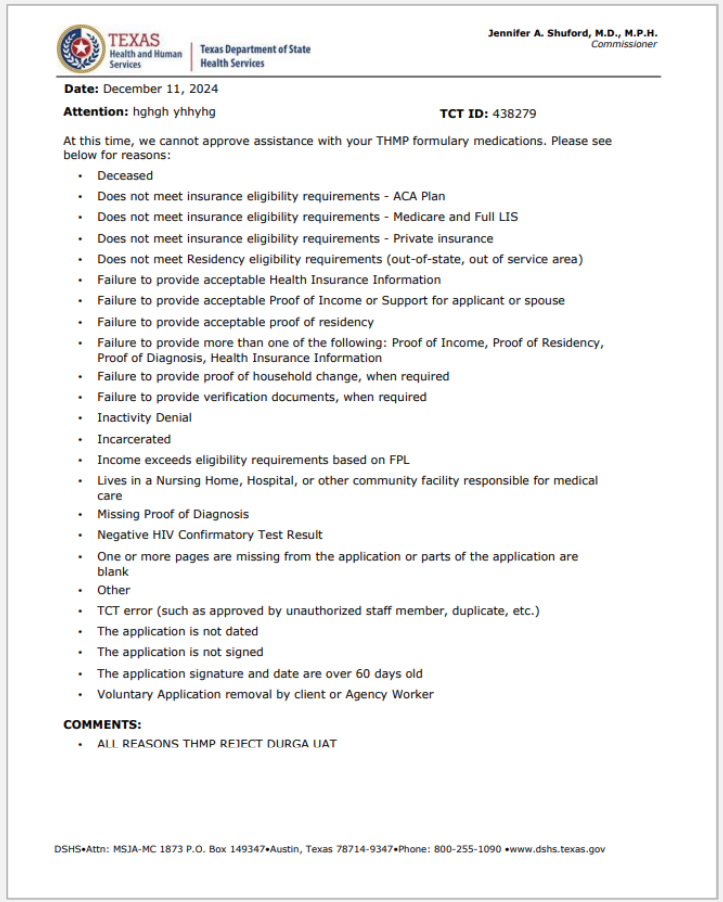
Soompy Tester
201 w howard ln
Austin, TX 78753

---------- Fold here ----------

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

THMP Denial Letter Main Letter (*English version*)



TEXAS Health and Human Services | Texas Department of State Health Services

Jennifer A. Shuford, M.D., M.P.H.
Commissioner

Date: December 11, 2024

Attention: hghgh yhhyhg **TCT ID:** 438279

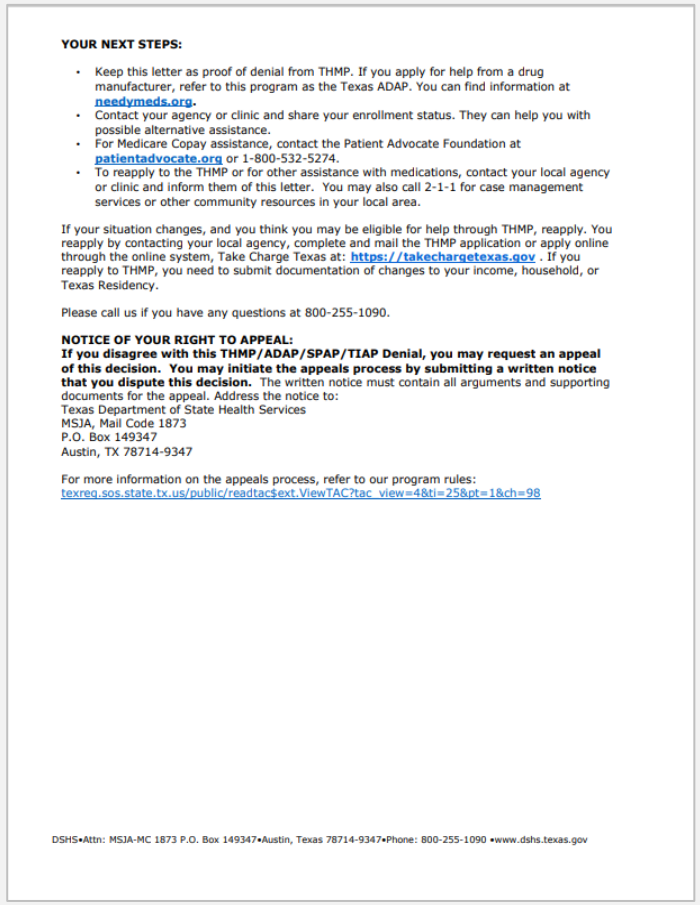
At this time, we cannot approve assistance with your THMP formulary medications. Please see below for reasons:

- Deceased
- Does not meet insurance eligibility requirements - ACA Plan
- Does not meet insurance eligibility requirements - Medicare and Full LIS
- Does not meet insurance eligibility requirements - Private insurance
- Does not meet Residency eligibility requirements (out-of-state, out of service area)
- Failure to provide acceptable Health Insurance Information
- Failure to provide acceptable Proof of Income or Support for applicant or spouse
- Failure to provide acceptable proof of residency
- Failure to provide more than one of the following: Proof of Income, Proof of Residency, Proof of Diagnosis, Health Insurance Information
- Failure to provide proof of household change, when required
- Failure to provide verification documents, when required
- Inactivity Denial
- Incarcerated
- Income exceeds eligibility requirements based on FPL
- Lives in a Nursing Home, Hospital, or other community facility responsible for medical care
- Missing Proof of Diagnosis
- Negative HIV Confirmatory Test Result
- One or more pages are missing from the application or parts of the application are blank
- Other
- TCT error (such as approved by unauthorized staff member, duplicate, etc.)
- The application is not dated
- The application is not signed
- The application signature and date are over 60 days old
- Voluntary Application removal by client or Agency Worker

COMMENTS:

- ALL REASONS THMP REJECT DURGA UAT

DSHS•Attn: MSJA-MC 1873 P.O. Box 149347•Austin, Texas 78714-9347•Phone: 800-255-1090 •www.dshs.texas.gov



YOUR NEXT STEPS:

- Keep this letter as proof of denial from THMP. If you apply for help from a drug manufacturer, refer to this program as the Texas ADAP. You can find information at **needymeds.org**.
- Contact your agency or clinic and share your enrollment status. They can help you with possible alternative assistance.
- For Medicare Copay assistance, contact the Patient Advocate Foundation at **patientadvocate.org** or 1-800-532-5274.
- To reapply to the THMP or for other assistance with medications, contact your local agency or clinic and inform them of this letter. You may also call 2-1-1 for case management services or other community resources in your local area.

If your situation changes, and you think you may be eligible for help through THMP, reapply. You reapply by contacting your local agency, complete and mail the THMP application or apply online through the online system, Take Charge Texas at: **https://takechargetexas.gov** . If you reapply to THMP, you need to submit documentation of changes to your income, household, or Texas Residency.

Please call us if you have any questions at 800-255-1090.

NOTICE OF YOUR RIGHT TO APPEAL:
If you disagree with this THMP/ADAP/SPAP/TIAP Denial, you may request an appeal of this decision. You may initiate the appeals process by submitting a written notice that you dispute this decision. The written notice must contain all arguments and supporting documents for the appeal. Address the notice to:
Texas Department of State Health Services
MSJA, Mail Code 1873
P.O. Box 149347
Austin, TX 78714-9347

For more information on the appeals process, refer to our program rules:
texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=98

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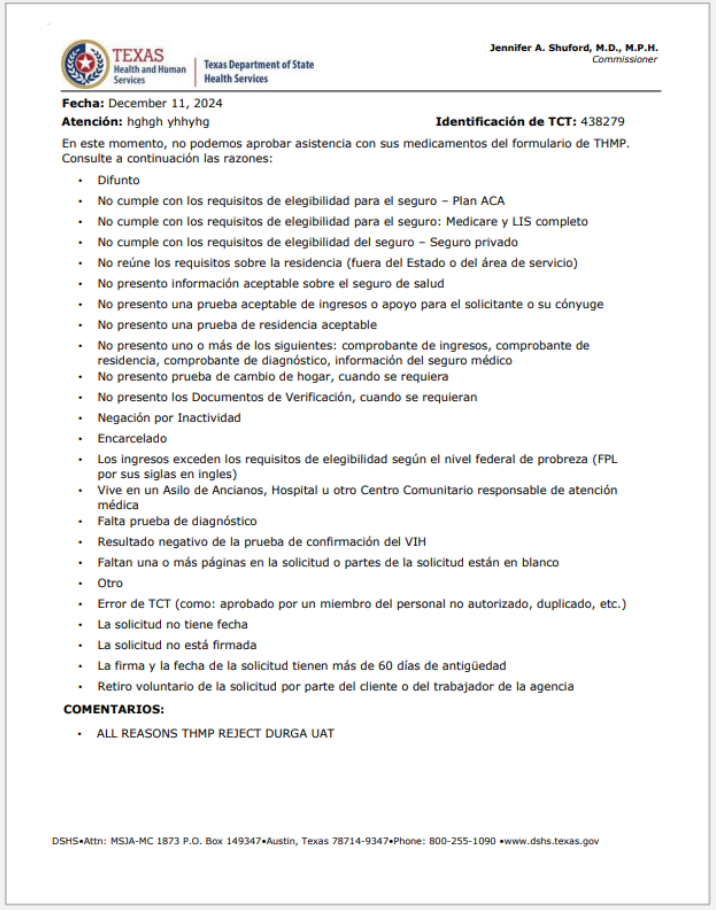
Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

THMP Denial Letter Main Letter (*Spanish version*)



TEXAS Health and Human Services | Texas Department of State Health Services

Jennifer A. Shuford, M.D., M.P.H.
Commissioner

Fecha: December 11, 2024

Atención: hghgh yhhyhg **Identificación de TCT:** 438279

En este momento, no podemos aprobar asistencia con sus medicamentos del formulario de THMP. Consulte a continuación las razones:

- Difunto
- No cumple con los requisitos de elegibilidad para el seguro – Plan ACA
- No cumple con los requisitos de elegibilidad para el seguro: Medicare y LIS completo
- No cumple con los requisitos de elegibilidad del seguro – Seguro privado
- No reúne los requisitos sobre la residencia (fuera del Estado o del área de servicio)
- No presento información aceptable sobre el seguro de salud
- No presento una prueba aceptable de ingresos o apoyo para el solicitante o su cónyuge
- No presento una prueba de residencia aceptable
- No presento uno o más de los siguientes: comprobante de ingresos, comprobante de residencia, comprobante de diagnóstico, información del seguro médico
- No presento prueba de cambio de hogar, cuando se requiera
- No presento los Documentos de Verificación, cuando se requieran
- Negación por Inactividad
- Encarcelado
- Los ingresos exceden los requisitos de elegibilidad según el nivel federal de probreza (FPL por sus siglas en ingles)
- Vive en un Asilo de Ancianos, Hospital u otro Centro Comunitario responsable de atención médica
- Falta prueba de diagnóstico
- Resultado negativo de la prueba de confirmación del VIH
- Faltan una o más páginas en la solicitud o partes de la solicitud están en blanco
- Otro
- Error de TCT (como: aprobado por un miembro del personal no autorizado, duplicado, etc.)
- La solicitud no tiene fecha
- La solicitud no está firmada
- La firma y la fecha de la solicitud tienen más de 60 días de antigüedad
- Retiro voluntario de la solicitud por parte del cliente o del trabajador de la agencia

COMENTARIOS:

- ALL REASONS THMP REJECT DURGA UAT

DSHS•Attn: MSJA-MC 1873 P.O. Box 149347•Austin, Texas 78714-9347•Phone: 800-255-1090 •www.dshs.texas.gov

SUS PRÓXIMOS PASOS:

- Guarde esta carta como prueba de negación de THMP. Si aplica para ayuda de un fabricante de medicamentos, refiere a este programa como el ADAP de Texas. Puede encontrar información: www.needymeds.org.
- Póngase en contacto con su agencia o clínica y comparte el estado de su inscripción. Ellos pueden ayudarle con posibles alternativas de asistencia.
- Para obtener asistencia con el copago de Medicare, comuníquese con la Fundación del Defensor del Paciente al patientadvocate.org o al 1-800-532-5274.
- Para volver a solicitar el THMP o para obtener otro tipo de asistencia con los medicamentos, comuníquese con su agencia o clínica local e infórmeles de esta carta. También puede llamar al 2-1-1 para obtener servicios de administración de casos u otros recursos comunitarios en su área local.

Si su situación cambia y cree que puede ser elegible para recibir ayuda a través de THMP, vuelva a presentar una solicitud. Complete y envíe la solicitud de THMP por correo o póngase en contacto con su agencia local para obtener asistencia con la solicitud. Si vuelve a solicitar a THMP, debe
presentar documentación de cambios en sus ingresos, hogar o residencia en Texas con su solicitud.

Favor de llamar al THMP al 1-800-255-1090 si tiene preguntas.

AVISO SOBRE SU DERECHO DE APELAR ESTA DECISIÓN:

Si no está de acuerdo con esta negación de THMP/ADAP/SPAP/TIAP, puede solicitar una apelación. Para iniciar el proceso de apelación, envíe una carta en la que cuestione esta decisión. Incluya en esta carta todos los argumentos y documentos que apoyen la apelación y envíela a la siguiente dirección:

Texas Department of State Health Services
Attn: MSJA, Mail Code 1873
P.O. Box 149347
Austin, TX 78714-9347

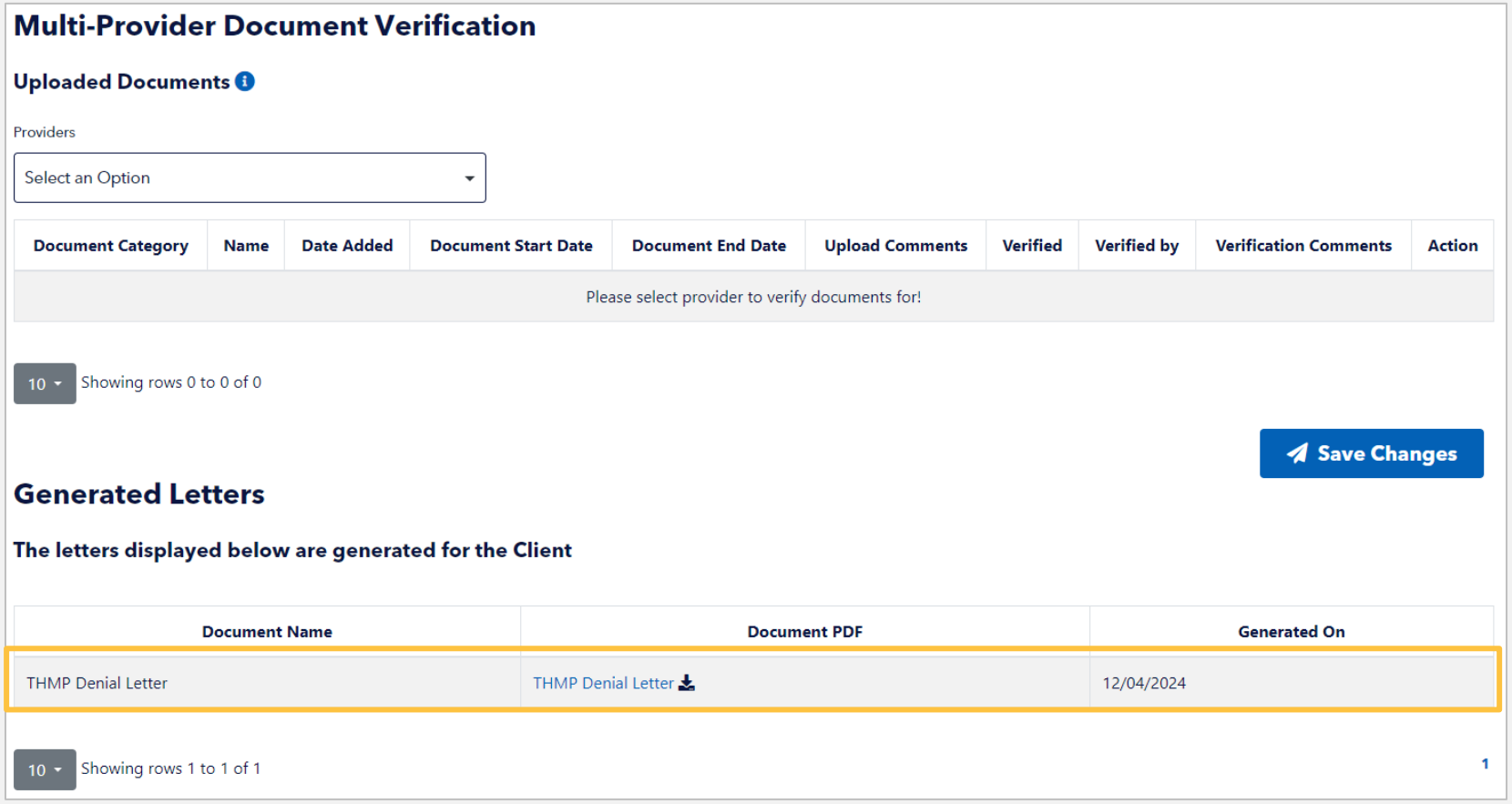
Para más información sobre el proceso de apelaciones, vea las reglas del programa en la página web (en inglés):
https://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=98

DSHS•Attn: MSJA-MC 1873 P.O. Box 149347•Austin, Texas 78714-9347•Phone: 800-255-1090 •www.dshs.texas.gov

Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

THMP Denial Letter Record on Multi-Provider Document Verification Screen



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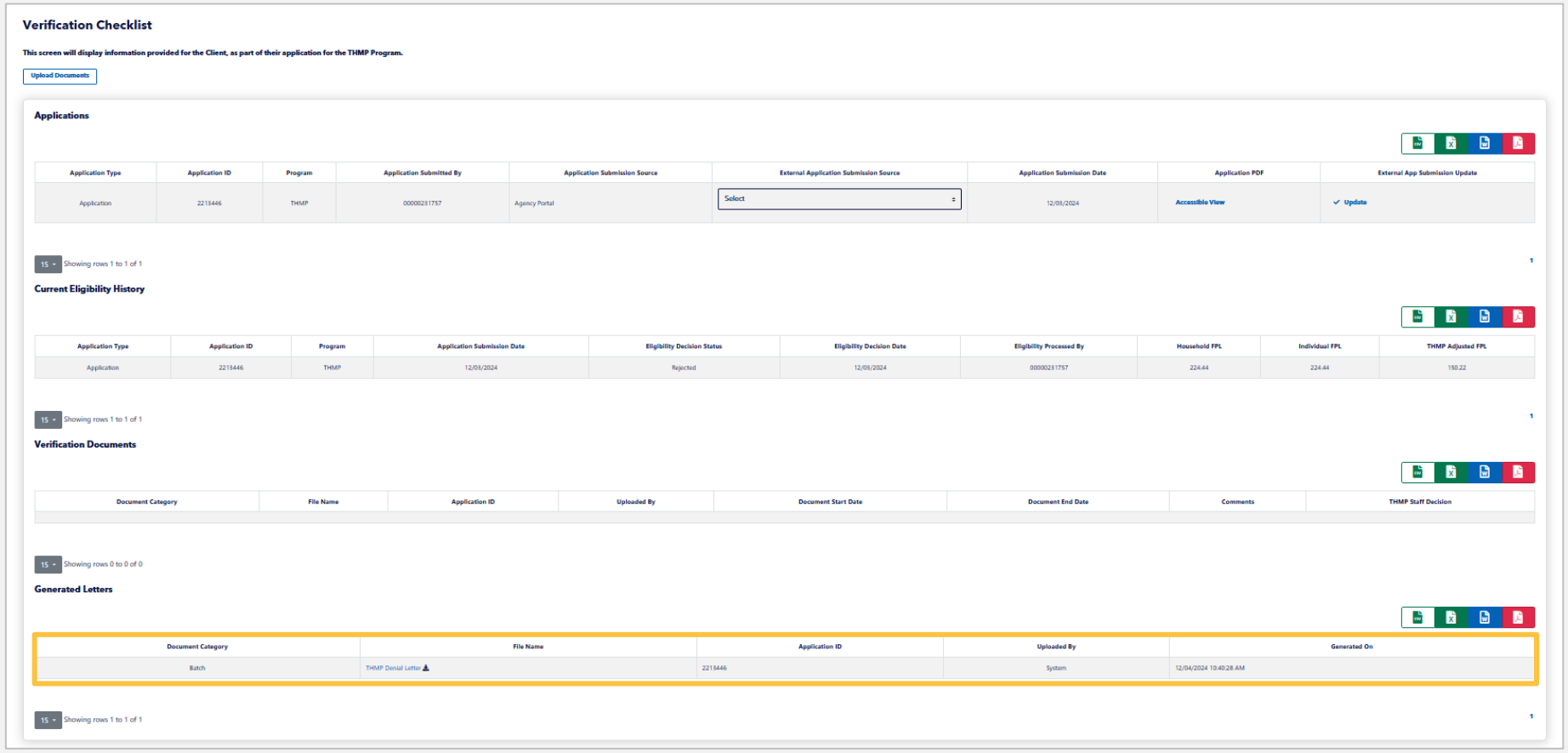
Feature Updates: Sprint 23

Eligibility THMP Denial Letter Cont.

THMP Denial Letter Record on Verification Checklist Screen



Verification Checklist

This screen will display information provided for the Client, as part of their application for the THMP Program.

Upload Documents

Applications

Application Type	Application ID	Program	Application Submitted By	Application Submission Source	External Application Submission Source	Application Submission Date	Application PDF	External App Submission Update
Application	2213446	THMP	00000231757	Agency Portal	Select	12/03/2024	Accessible View	Update

15 Showing rows 1 to 1 of 1

Current Eligibility History

Application Type	Application ID	Program	Application Submission Date	Eligibility Decision Status	Eligibility Decision Date	Eligibility Processed By	Household FPL	Individual FPL	THMP Adjusted FPL
Application	2213446	THMP	12/03/2024	Rejected	12/03/2024	00000231757	224.44	224.44	150.22

15 Showing rows 1 to 1 of 1

Verification Documents

Document Category	File Name	Application ID	Uploaded By	Document Start Date	Document End Date	Comments	THMP Staff Decision

15 Showing rows 0 to 0 of 0

Generated Letters

Document Category	File Name	Application ID	Uploaded By	Generated On
Batch	THMP Denial Letter	2213446	System	12/04/2024 10:40:28 AM

15 Showing rows 1 to 1 of 1

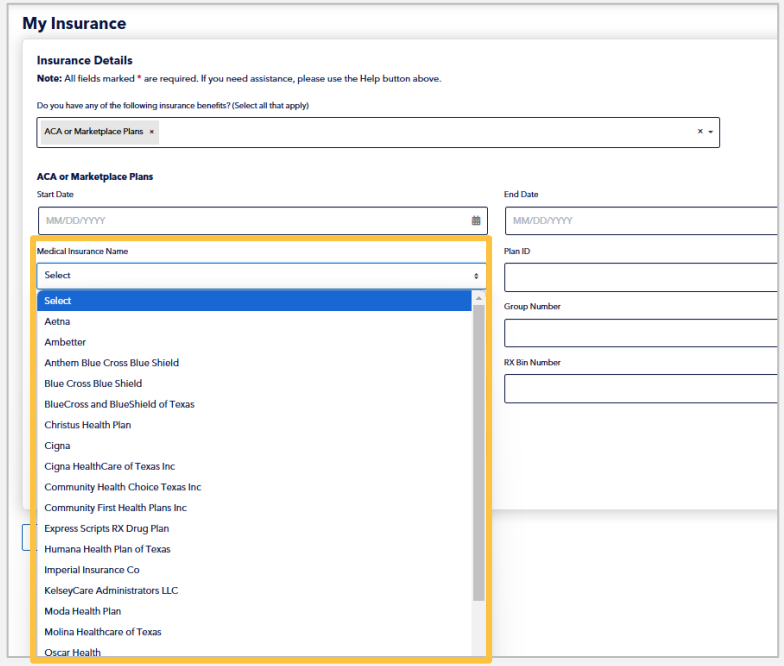
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
  - For example, when a User indicates the '**ACA Marketplace Plans**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
    - Aetna
    - Ambetter
    - Anthem Blue Cross Blue Shield
    - Blue Cross Blue Shield
    - BlueCross and BlueShield of Texas
    - Christus Health Plan
    - Cigna
    - Cigna HealthCare of Texas Inc
    - Community First Health Plans Inc
    - Community Health Choice Texas Inc
    - Express Scripts RX Drug Plan
    - Humana Health Plan of Texas
    - Imperial Insurance Co
    - KelseyCare Administrators LLC
    - Moda Health Plan
    - Molina Healthcare of Texas
    - Oscar Health
    - Other
    - Scott and White
    - Scott and White Health Plan
    - Sendero
    - Superior HealthPlan
    - United Healthcare
    - US Health and Life
    - Aetna Health Texas

ACA Marketplace Plans Medical Insurance Names



- This enhancement is applicable across all Application Types.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

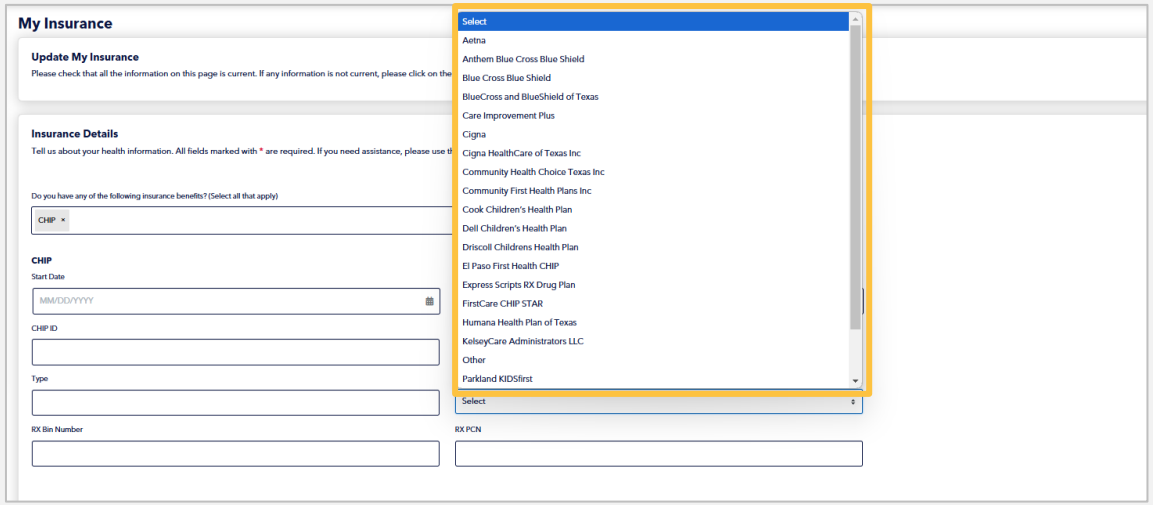
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
    - For example, when a User indicates the '**CHIP**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
        - Aetna
        - Anthem Blue Cross Blue Shield
        - Blue Cross Blue Shield
        - BlueCross and BlueShield of Texas
        - Care Improvement Plus
        - Cigna
        - Cigna HealthCare of Texas Inc
        - Community First Health Plans Inc
        - Community Health Choice Texas Inc
        - Cook Children's Health Plan
        - Dell Children's Health Plan
        - Driscoll Childrens Health Plan
        - El Paso First Health CHIP
        - Express Scripts RX Drug Plan
        - FirstCare CHIP STAR
        - Humana Health Plan of Texas
        - KelseyCare Administrators LLC
        - Other
        - Parkland KIDSfirst
        - Texas Children's Health Plan
        - United Healthcare
        - United Healthcare Community Plan of Texas L.L.C.

CHIP Medical Insurance Names



- This enhancement is applicable across all Application Types.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

 |

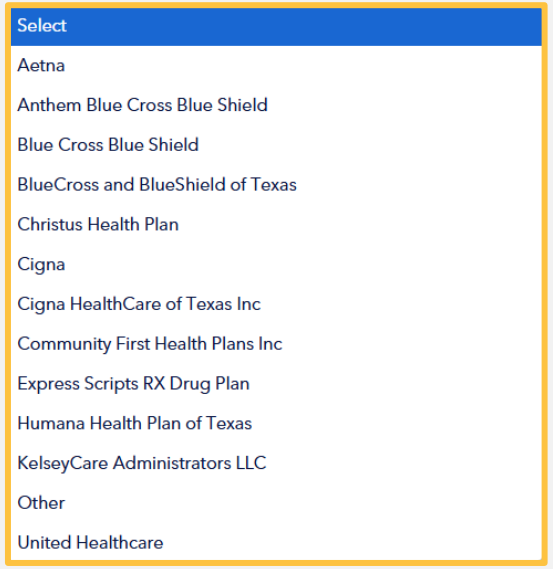
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
  - For example, when a User indicates the '**COBRA**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
    - Aetna
    - Anthem Blue Cross Blue Shield
    - Blue Cross Blue Shield
    - BlueCross and BlueShield of Texas
    - Christus Health Plan
    - Cigna
    - Cigna HealthCare of Texas Inc
    - Community First Health Plans Inc
    - Express Scripts RX Drug Plan
    - Humana Health Plan of Texas
    - KelseyCare Administrators LLC
    - Other
    - United Healthcare
  - This enhancement is applicable across all Application Types.
  - This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

COBRA Medical Insurance Names



Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
    - For example, when a User indicates the '**Medicaid**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
        - Aetna
        - Aetna Better Health of Texas Inc
        - Aetna Health Inc
        - Anthem Blue Cross Blue Shield
        - Blue Cross Blue Shield
        - BlueCross and BlueShield of Texas
        - Cigna
        - Cigna HealthCare of Texas Inc
        - Community First Health Plans Inc
        - Community Health Choice Texas Inc
        - Cook Children's Health Plan
        - Driscoll Childrens Health Plan
        - El Paso First Health CHIP
        - FirstCare CHIP STAR
        - FirstCare Health Plans
        - Humana Health Plan of Texas
        - KelseyCare Administrators LLC
        - Moda Health Plan
        - Molina Healthcare of Texas
        - Other
        - Parkland Community Health Plan, Inc.,
        - Parkland KIDSfirst
        - Scott and White
        - Scott and White Health Plan
        - Superior HealthPlan
        - Texan Plus
        - Texas Children's Health Plan
        - Texas Independence Health Plan, Inc. SNP
        - United Healthcare

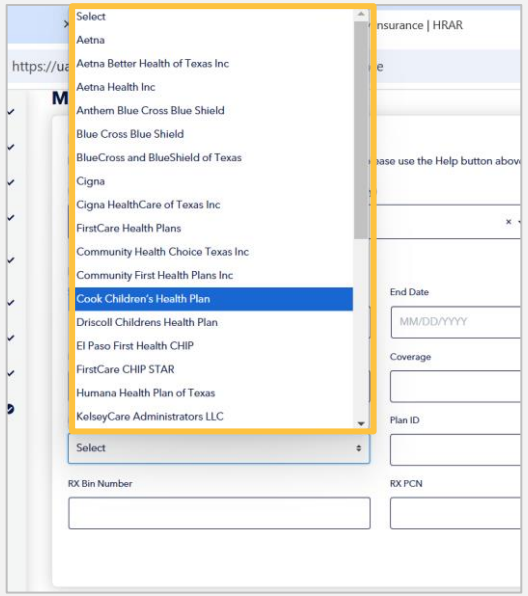
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
    - For example, when a User indicates the '**Medicaid**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
        - United Healthcare Community Plan of Texas, L.L.C.
        - Wellpoint Texas, Inc.
        - RightCare from Scott and White Health Plan
- This enhancement is applicable across all Application Types.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

Medicaid Medical Insurance Names



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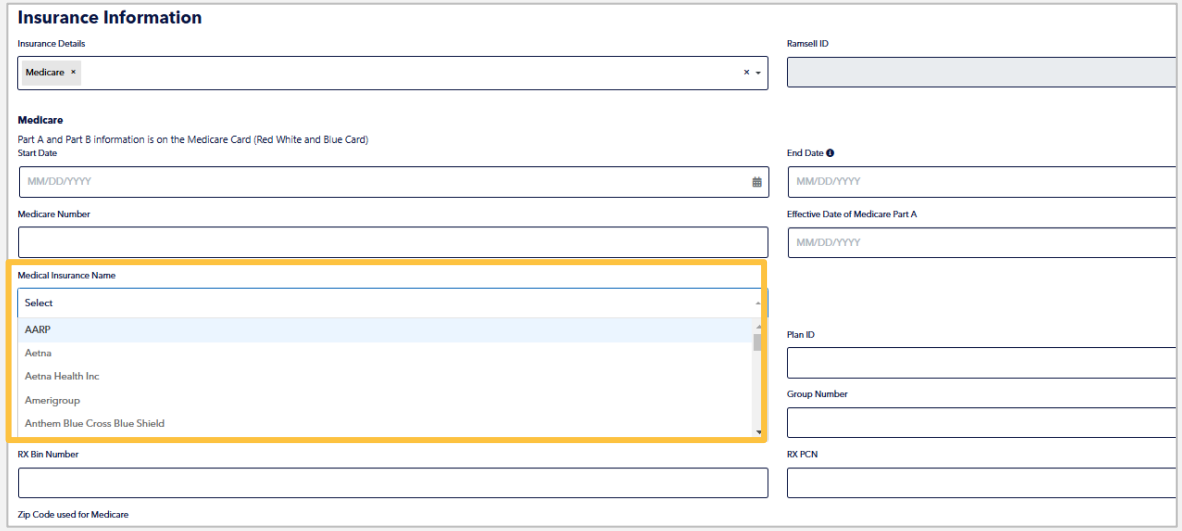
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
    - For example, when a User indicates the '**Medicare**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
        - AARP
        - Aetna
        - Aetna Health Inc
        - Anthem Blue Cross Blue Shield
        - BlueCross and BlueShield of Texas
        - Care Improvement Plus
        - Christus Health Plan
        - Cigna
        - Cigna HealthCare of Texas Inc
        - Cigna HealthSpring
        - Community Health Choice Texas Inc
        - Community First Health Plans Inc
        - Devoted Health Plan of Texas Inc
        - Essence Healthcare Inc
        - Humana Health Plan of Texas
        - KelseyCare Administrators LLC
        - Memorial Herman Health Plan
        - Mutual of Omaha Medicare Advantage Company
        - Other
        - Physicians Health Choice of Texas, HMO
        - Scott and White
        - Scott and White Health Plan
        - Silverscript
        - Texan Plus
        - Texas Independence Health Plan, Inc. SNP
        - United Healthcare
        - WellCare of Texas, Inc.

Medicare Medical Insurance Names



- This enhancement is applicable across all Application Types.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

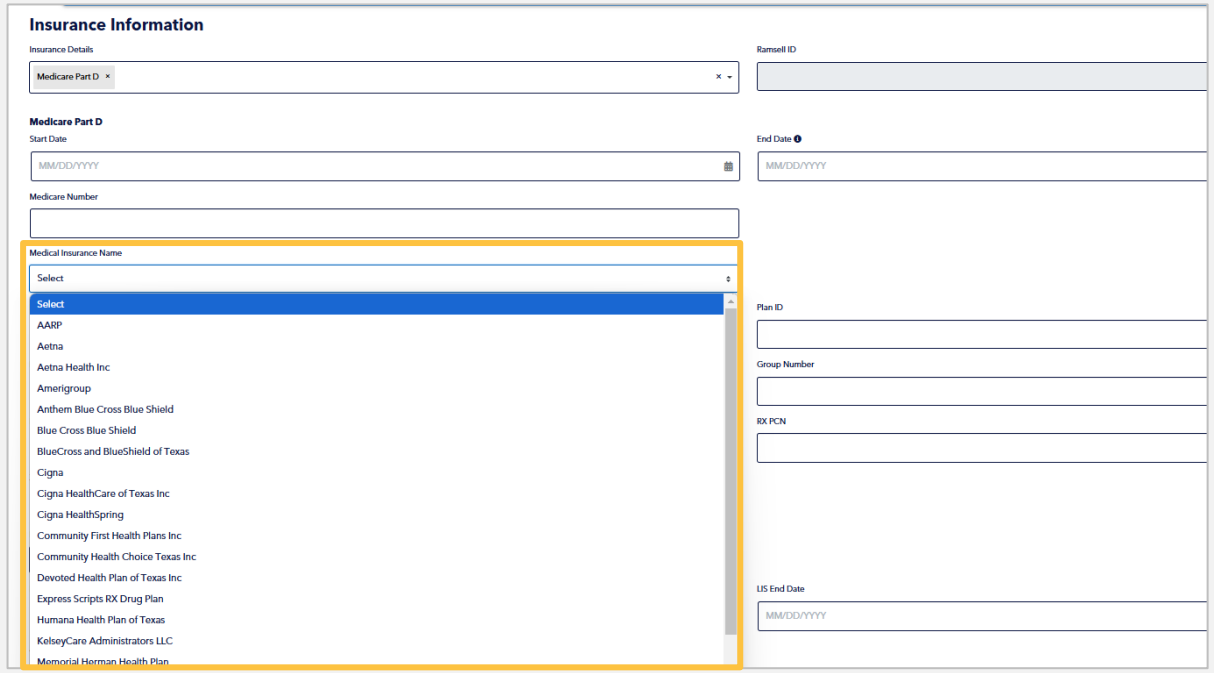
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
  - For example, when a User indicates the '**Medicare Part D**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
    - AARP
    - Aetna
    - Aetna Health Inc
    - Anthem Blue Cross Blue Shield
    - Blue Cross Blue Shield
    - BlueCross and BlueShield of Texas
    - Cigna
    - Cigna HealthCare of Texas Inc
    - Cigna HealthSpring
    - Community Health Choice Texas Inc
    - Community First Health Plans Inc
    - Devoted Health Plan of Texas Inc
    - Express Scripts RX Drug Plan
    - Humana Health Plan of Texas
    - KelseyCare Administrators LLC
    - Memorial Herman Health Plan
    - Mutual of Omaha Medicare Advantage Company
    - Other
    - Silverscript
    - United Healthcare
    - WellCare of Texas, Inc.
- This enhancement is applicable across all Application Types.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

Medicare Part D Medical Insurance Names



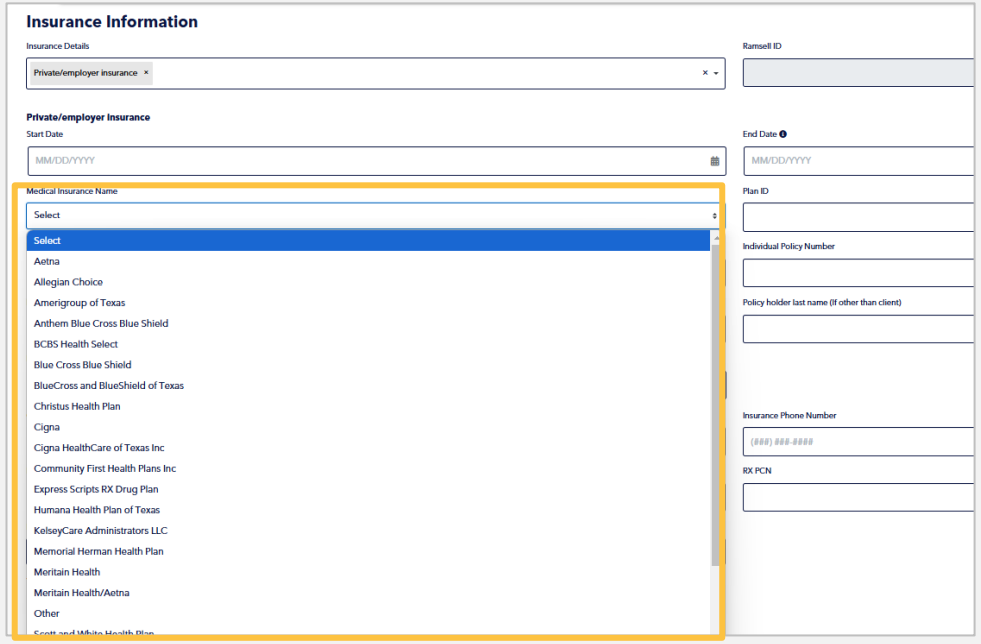
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral*), and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
  - For example, when a User indicates the '**Private/Employer Insurance**' insurance type, the following picklist values will display under the Medical Insurance Name single-select drop down, including:
    - Aetna
    - Anthem Blue Cross Blue Shield
    - BCBS Health Select
    - Blue Cross Blue Shield
    - BlueCross and BlueShield of Texas
    - Christus Health Plan
    - Cigna
    - Cigna HealthCare of Texas Inc
    - Community First Health Plans Inc
    - Express Scripts RX Drug Plan
    - Meritain Health
    - Meritain Health/Aetna
    - Other
    - Scott and White Health Plan
    - Seton Health Plan, Inc.
    - Unicare
    - United Healthcare
- In the event a User selects a Medical Insurance Name that is no longer applicable the Private/Employer insurance type, the following banner message will display, in red, on the My Insurance/Insurance Information screens, stating:
  - "The selected value of [Not Applicable Medical Insurance Name] for insurance name is no longer associated to [Insurance Type]. Please select another insurance name."
    - *"Not Applicable Medical Insurance Name" refers to the Medical Insurance Name that is no longer applicable to the respective insurance type.*
    - *"Insurance Type" refers to the Insurance Type which no longer supports the selected Medical Insurance Name.*
- This enhancement is applicable to the Private/Employer insurance type only.
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

Private/Employer Medical Insurance Names



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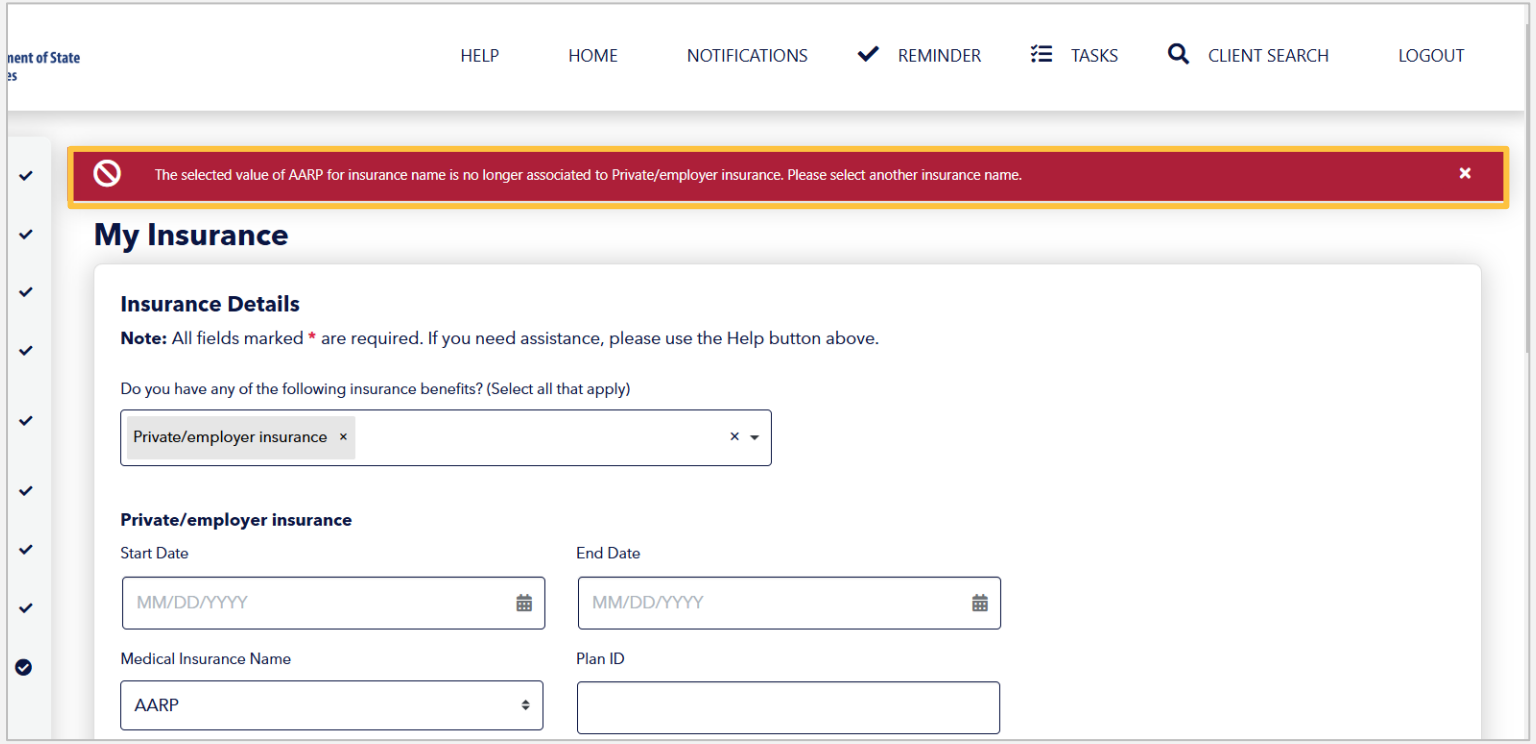
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

Not Applicable Medical Insurance Name Validation Message for Private/Employer Insurance



 |

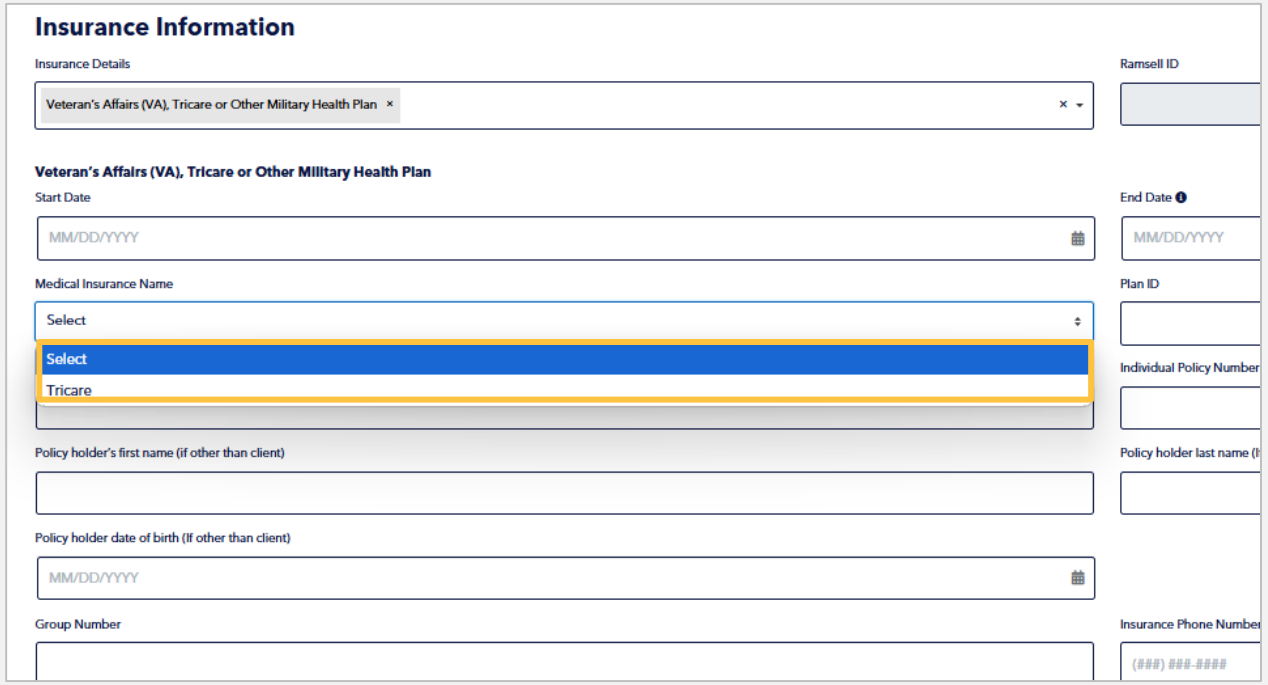
Feature Updates: Sprint 23

Insurance Verification Insurance Names Master List Enhancement Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- When a User initiates an application (*New Application, Recertification, Self-Attestation, Change Request, or Referral)*, and indicates an insurance type(s) on the My Insurance/Insurance Information screens, the respective, updated Insurance Name value(s) will be available for selection:
  - For example, when a User indicates the '**Veteran's Affairs (VA), Tricare or Other Military Health Plan**' insurance type, the following picklist value will display under the Medical Insurance Name single-select drop down, including:
    - Tricare
- This enhancement is applicable to both the Application Workflow and Client's Profile in the Agency and Client Portals.

Veteran's Affairs (VA), Tricare or Other Military Health Plan Medical Insurance Names



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

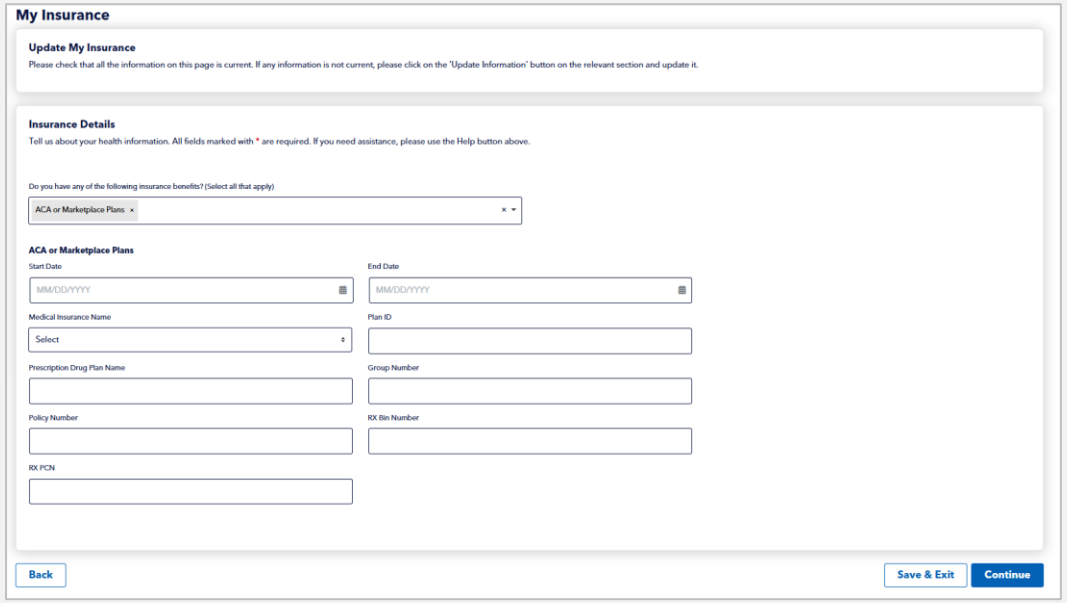
- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - ACA Marketplace Plans
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the ACA Marketplace Plans Insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - Aetna
                    - Aetna Health Life
                    - Ambetter
                    - Anthem Blue Cross Blue Shield
                    - Blue Cross Blue Shield
                    - BlueCross and BlueShield of Texas
                    - Christus Health Plan
                    - Cigna
                    - Cigna HealthCare of Texas Inc
                    - Community First Health Plans Inc
                    - Community Health Choice Texas Inc
                    - Express Scripts RX Drug Plan
                    - Humana Health Plan of Texas
                    - Imperial Insurance Co
                    - KelseyCare Administrators LLC
                    - Moda Health Plan
                    - Molina Healthcare of Texas
                    - Oscar Health
                    - Other
                    - Scott and White
                    - Scott and White Health Plan
                    - Sendero
                    - Superior HealthPlan
                    - United Healthcare
                    - US Health and Life

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Prescription Drug Plan Name
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Plan ID
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.

ACA Marketplace Plans Search Criteria on My Insurance Screen of Application Workflow



 |

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - CHIP
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - CHIP ID
            - This will be an optional, free-text field accepting numeric values only.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 9.
        - Coverage
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 2.
        - Type
            - This will be an optional, free-text field accepting numeric values only.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 2.
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the CHIP Insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - Aetna
                    - Anthem Blue Cross Blue Shield
                    - Blue Cross Blue Shield
                    - BlueCross and BlueShield of Texas
                    - Care Improvement Plus
                    - Cigna
                    - Cigna HealthCare of Texas Inc
                    - Community First Health Plans Inc
                    - Community Health Choice Texas Inc
                    - Cook Children's Health Plan
                    - Dell Children's Health Plan
                    - Driscoll Children's Health Plan
                    - El Paso First Health CHIP

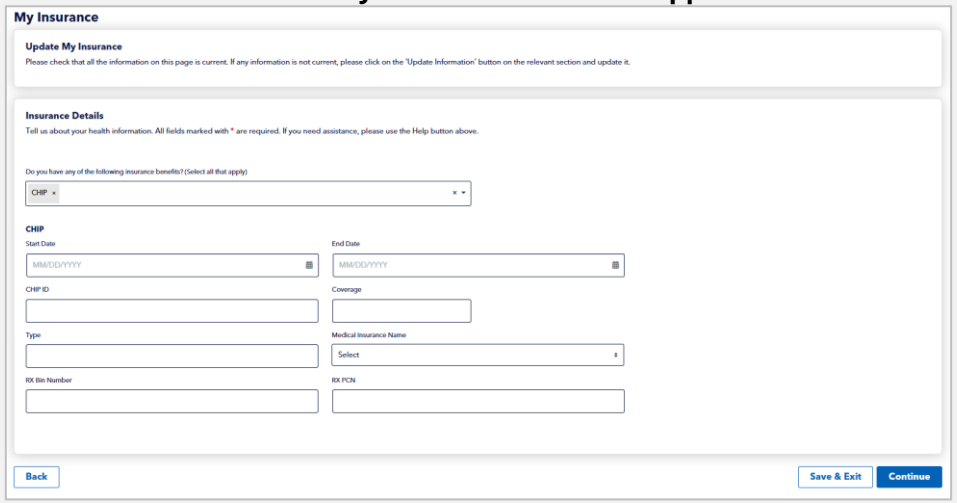
Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Express Scripts RX Drug Plan
- FirstCare CHIP STAR
- Humana Health Plan of Texas
- KelseyCare Administrators LLC
- Other
- Parkland KIDSfirst
- Texas Children's Health Plan
- United Healthcare
- United Healthcare Community Plan of Texas L.L.C.

- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.

CHIP Search Criteria on My Insurance Screen of Application Workflow



 |

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - COBRA
        - Name of Previous Employer Offering COBRA
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Did the client elect?
            - This will be an optional, single-select drop down with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - Dental
                        - *This will be the default, pre-selected value.*
                    - Medical
                    - Vision
        - COBRA Administrator Name
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - COBRA Initial Payment Due Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
                    - *The corresponding Spanish translation will exist in the Client Portal.*
        - COBRA Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
                    - *The corresponding Spanish translation will exist in the Client Portal.*
        - COBRA End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
                    - *The corresponding Spanish translation will exist in the Client Portal.*
        - Prescription Drug Plan Name
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

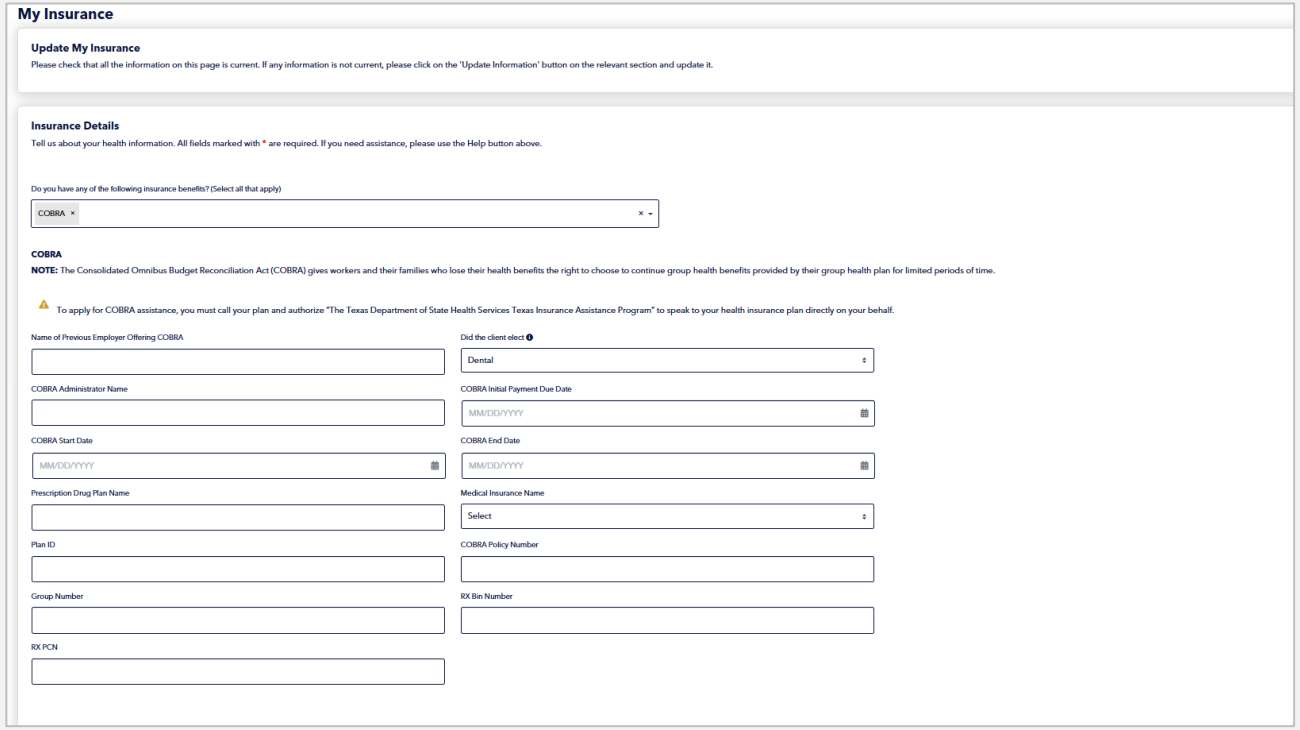
- Medical Insurance Name
  - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the COBRA Insurance type with the following picklist values available for selection:
    - *The corresponding Spanish translation will exist in the Client Portal.*
      - Aetna
      - Anthem Blue Cross Blue Shield
      - Blue Cross Blue Shield
      - BlueCross and BlueShield of Texas
      - Christus Health Plan
      - Cigna
      - Cigna HealthCare of Texas Inc
      - Community First Health Plans Inc
      - Express Scripts RX Drug Plan
      - Humana Health Plan of Texas
      - KelseyCare Administrators LLC
      - Other
      - United Healthcare
- Plan ID
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- COBRA Policy Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Per the enhancement, we removed the existing, mandatory 'Have you lost insurance and are interested in COBRA?' radio button question on both the My Insurance and Insurance Information screens of an Application Workflow/Client's Profile.
- Per the enhancement, we removed the existing, mandatory 'Do you have COBRA and are interested in COBRA Assistance?' radio button question on both the My Insurance and Insurance Information screens of an Application Workflow/Client's Profile.

COBRA Search Criteria on My Insurance Screen of Application Workflow



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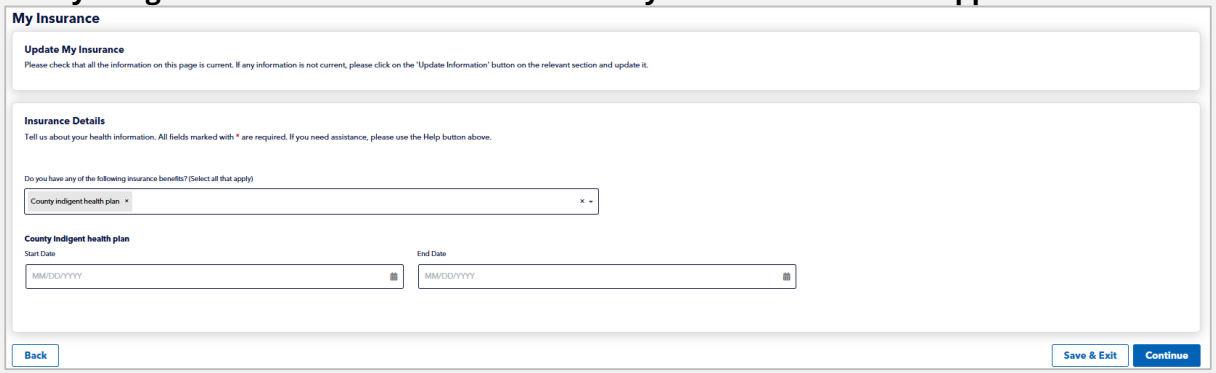
Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - County Indigent Health Plan
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
    - Medicaid
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medicaid ID
            - This will be an optional, free-text field accepting numeric values only.
                - *The corresponding Spanish translation wil exist in the Client Portal.*
            - Max character limit of 6.
        - Coverage
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation wil exist in the Client Portal.*
            - Max character limit of 2.
        - Type
            - This will be an optional, free-text field accepting numeric values only.
                - *The corresponding Spanish translation wil exist in the Client Portal.*
            - Max character limit of 2.

County Indigent Health Plan Search Criteria on My Insurance Screen of Application Workflow



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

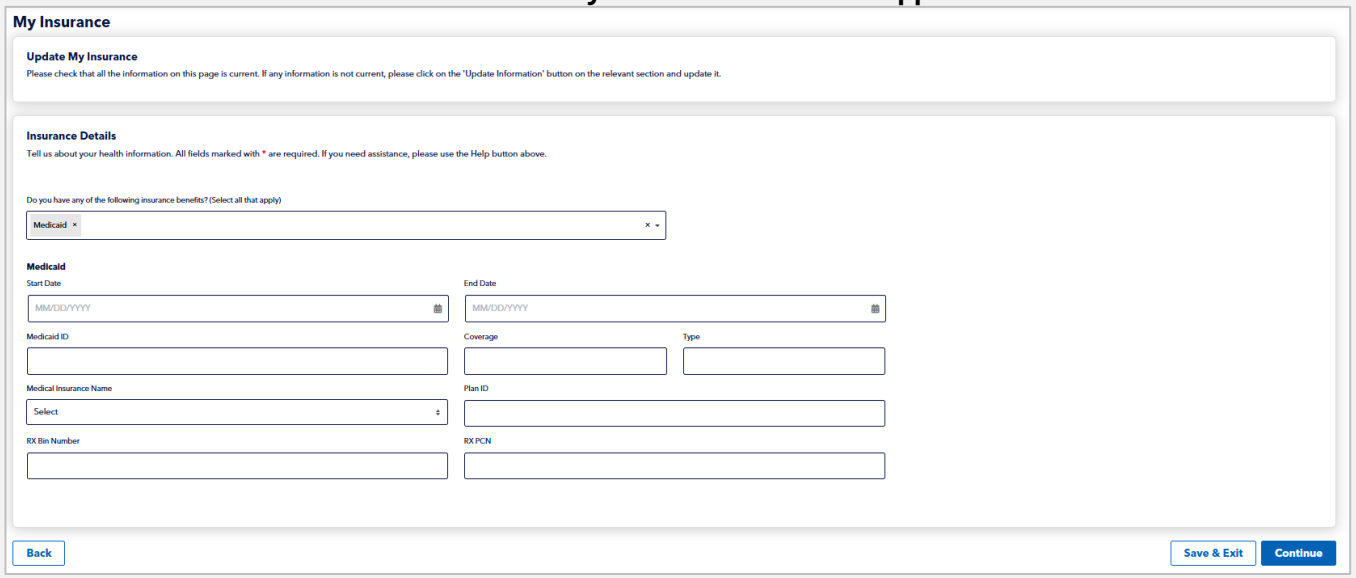
- Medical Insurance Name
  - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the Medicaid insurance type with the following picklist values available for selection:
    - *The corresponding Spanish translation will exist in the Client Portal.*
      - Aetna
      - Aetna Better Health of Texas Inc
      - Aetna Health Inc
      - Anthem Blue Cross Blue Shield
      - Blue Cross Blue Shield
      - BlueCross and BlueShield of Texas
      - Cigna
      - Cigna HealthCare of Texas Inc
      - Community First Health Plans Inc
      - Community Health Choice Texas Inc
      - Cook Children's Health Plan
      - Driscoll Children's Health Plan
      - El Paso First Health CHIP
      - FirstCare CHIP STAR
      - FirstCare Health Plans
      - Humana Health Plan of Texas
      - KelseyCare Administrators LLC
      - Moda Health Plan
      - Molina Healthcare of Texas
      - Other
      - Parkland Community Health Plan, Inc.,
      - Parkland KIDSfirst
      - Scott and White
      - Scott and White Health Plan
      - Superior HealthPlan
      - Texan Plus
      - Texas Children's Health Plan
      - Texas Independence Health Plan, Inc. SNP
      - United Healthcare
      - United Healthcare Community Plan of Texas, L.L.C.
      - Wellpoint Texas, Inc.
      - RightCare from Scott and White Health Plan

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Plan ID
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation wil exist in the Client Portal.*
  - Max character limit of 50.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.

Medicaid Search Criteria on My Insurance Screen of Application Workflow



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - Medicare
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medicare Number
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 11.
        - Effective Date of Medicare Part A
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
                - *The corresponding Spanish translation will exist in the Client Portal.*
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the Medicare insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - AARP
                    - Aetna
                    - Aetna Health Inc
                    - Anthem Blue Cross Blue Shield
                    - BlueCross and BlueShield of Texas
                    - Care Improvement Plus
                    - Christus Health Plan
                    - Cigna
                    - Cigna HealthCare of Texas Inc
                    - Cigna HealthSpring
                    - Community First Health Plans Inc
                    - Community Health Choice Texas Inc
                    - Devoted Health Plan of Texas Inc
                    - Essence Healthcare Inc
                    - Humana Health Plan of Texas
                    - KelseyCare Administrators LLC
                    - Memorial Hermann Health Plan

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

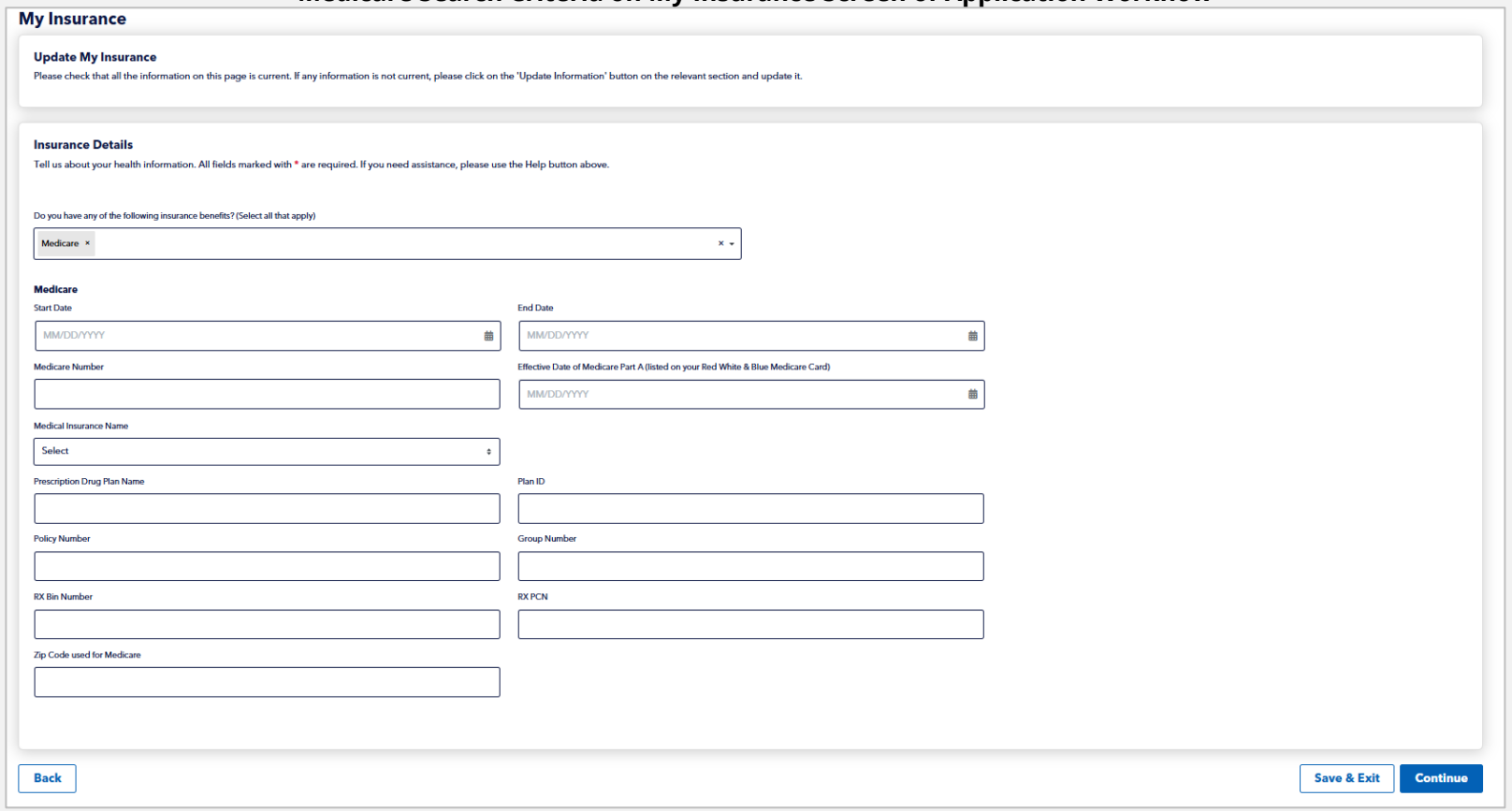
- Mutual of Omaha Medicare Advantage Company
- Other
- Physicians Health Choice of Texas, HMO
- Scott and White
- Scott and White Health Plan
- Silverscript
- Texan Plus
- Texas Independence Health Plan, Inc. SNP
- United Healthcare
- WellCare of Texas, Inc.

- Prescription Drug Plan Name
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Plan ID
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.
- Zip Code Used for Medicare
  - This will be an optional, free-text field accepting numeric values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 5.

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

Medicare Search Criteria on My Insurance Screen of Application Workflow



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - Medicare Part D
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medicare Number
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 11.
                - *The corresponding Spanish translation will exist in the Client Portal.*
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the Medicare Part D insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - AARP
                    - Aetna
                    - Aetna Health Inc
                    - Anthem Blue Cross Blue Shield
                    - Blue Cross Blue Shield
                    - BlueCross and BlueShield of Texas
                    - Cigna HealthCare of Texas Inc
                    - Cigna
                    - Cigna HealthSpring
                    - Community First Health Plans Inc
                    - Community Health Choice Texas Inc
                    - Devoted Health Plan of Texas Inc
                    - Express Scripts RX Drug Plan
                    - Humana Health Plan of Texas
                    - KelseyCare Administrators LLC
                    - Memorial Hermann Health Plan
                    - Mutual of Omaha Medicare Advantage Company
                    - Other
                    - Silverscript
                    - United Healthcare

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

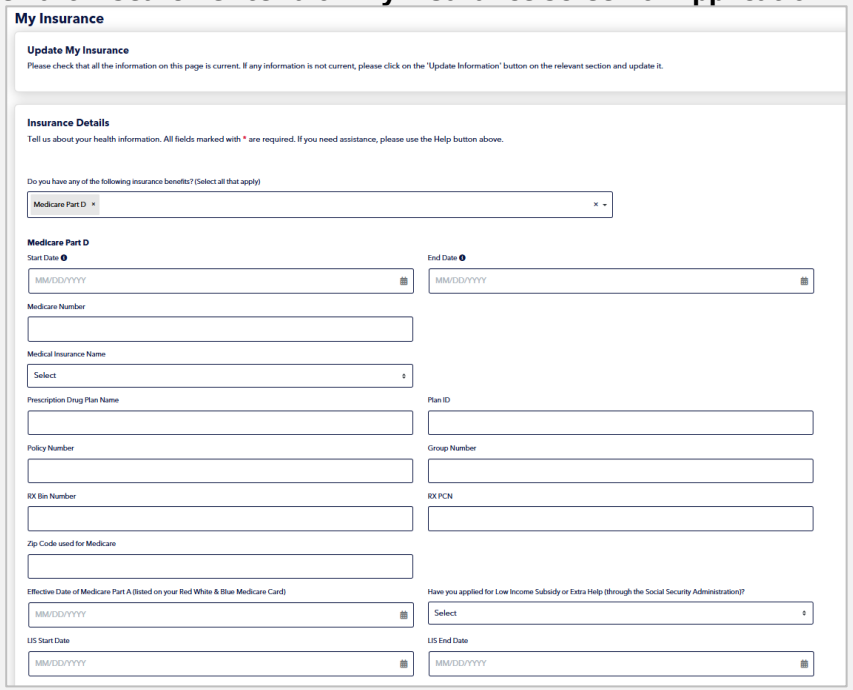
- WellCare of Texas, Inc.
- Prescription Drug Plan Name
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Plan ID
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 25.
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 25.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.
- Zip Code Used for Medicare
  - This will be an optional, free-text field accepting numeric values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 5.
- Have you applied for Low Income Subsidy or Extra Help (through the Social Security Administration)?
  - This will be an optional, single-select drop down with the following picklist values available for selection:
    - *The corresponding Spanish translation will exist in the Client Portal.*
      - Approved, 100% Assistance
      - Approved, Partial Assistance
      - Awaiting Determination
      - Denied Assistance
      - Have Not Yet Applied
      - I Don’t Know

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- LIS Start Date
  - This will be an optional, calendar field.
    - Format: MM/DD/YYYY
      - *The corresponding Spanish translation will exist in the Client Portal.*
- LIS End Date
  - This will be an optional, calendar field.
    - Format: MM/DD/YYYY
      - *The corresponding Spanish translation will exist in the Client Portal.*

Medicare Part D Search Criteria on My Insurance Screen of Application Workflow



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - Private/Employer Insurance
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the Private/Employer insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - Aetna
                    - Anthem Blue Cross Blue Shield
                    - BCBS Health Select
                    - Blue Cross Blue Shield
                    - BlueCross and BlueShield of Texas
                    - Christus Health Plan
                    - Cigna
                    - Cigna HealthCare of Texas Inc
                    - Community First Health Plans Inc
                    - Community First Health Plans Inc
                    - Express Scripts RX Drug Plan
                    - Meritain Health
                    - Meritain Health/Aetna
                    - Other
                    - Scott and White Health Plan
                    - Seton Health Plan, Inc.
                    - Unicare
                    - United Healthcare
        - Plan ID
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Prescription Drug Plan Name
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Individual Policy Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Holder's First Name (if other than Client)?
  - This will be an optional, free-text field accepting alphabetical values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Holder's Last Name (if other than Client)?
  - This will be an optional, free-text field accepting alphabetical values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Policy Holder's Date of Birth (if other than Client)?
  - This will be an optional, calendar field.
    - Format: MM/DD/YYYY
      - *The corresponding Spanish translation will exist in the Client Portal.*
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Insurance Phone Number
  - This will be an optional, free-text field accepting numeric values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.

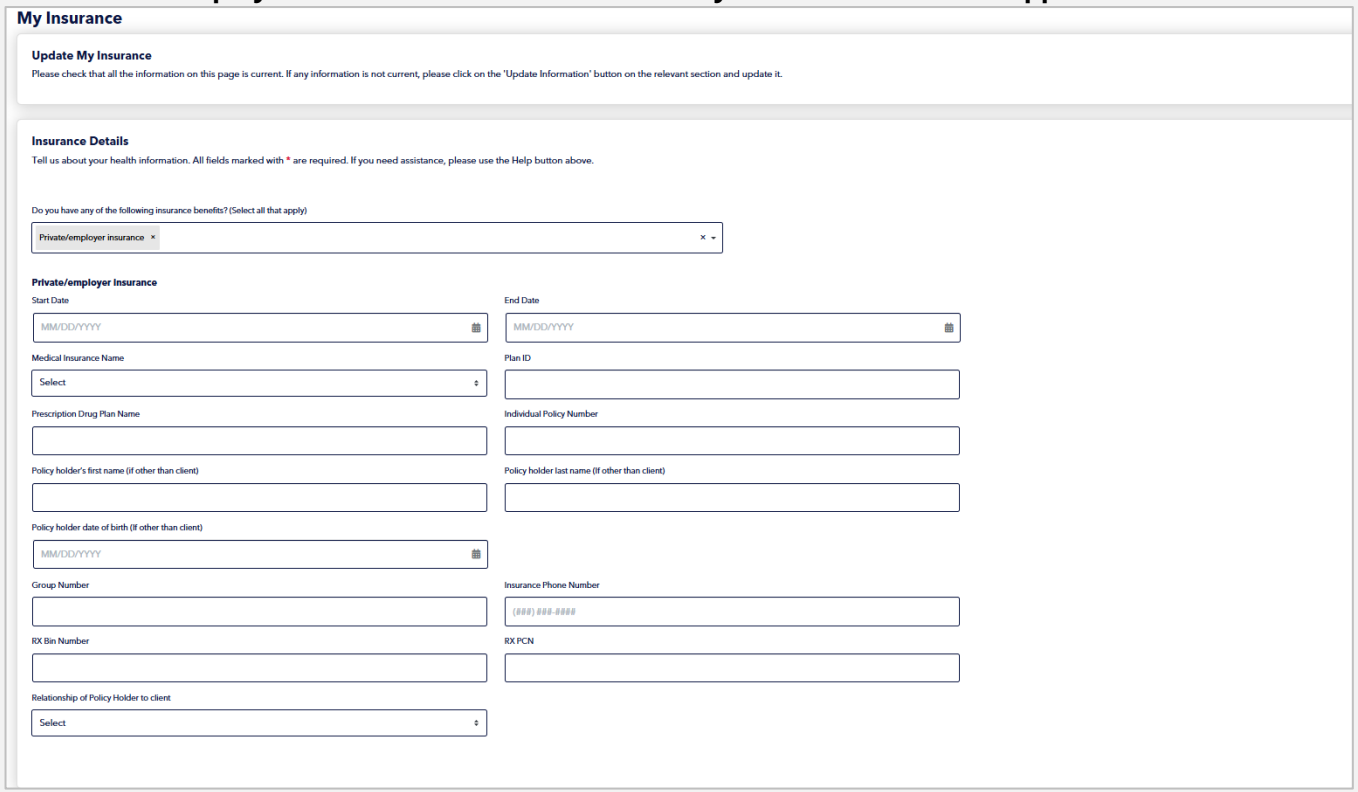
- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

- Relationship of Policy Holder to Client
  - This will be an optional, single-select drop down with the same picklist values, sourced from the 'Relationship' search criteria, on the My Relationships/Client Relationships screens of an Application Workflow/Client's Profile.
    - *The corresponding Spanish translation will exist in the Client Portal.*

Private/Employer Insurance Search Criteria on My Insurance Screen of Application Workflow



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Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

When a TCT User navigates through an Application Workflow in both the Agency and Client Portals, the following enhancements will occur:

- The following search criteria will now display for the respective Insurance type(s) on the My Insurance screen, so the Application Workflow and Client's Profile remain in sync, including:
    - Veteran's Affairs (VA), Tricare or Other Military Health Plan
        - Start Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - End Date
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
        - Medical Insurance Name
            - This will be an optional, single-select drop down of the updated Medical Insurance Name values applicable to the Veteran's Affiars (VA), Tricare or Other Military Health Plan insurance type with the following picklist values available for selection:
                - *The corresponding Spanish translation will exist in the Client Portal.*
                    - Tricare
        - Plan ID
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Prescription Drug Plan Name
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Individual Policy Number
            - This will be an optional, free-text field accepting alpha-numeric values.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Policy Holder's First Name (if other than Client)?
            - This will be an optional, free-text field accepting alphabetical values only.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Policy Holder's Last Name (if other than Client)?
            - This will be an optional, free-text field accepting alphabetical values only.
                - *The corresponding Spanish translation will exist in the Client Portal.*
            - Max character limit of 50.
        - Policy Holder's Date of Birth (if other than Client)?
            - This will be an optional, calendar field.
                - Format: MM/DD/YYYY
                    - *The corresponding Spanish translation will exist in the Client Portal.*

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

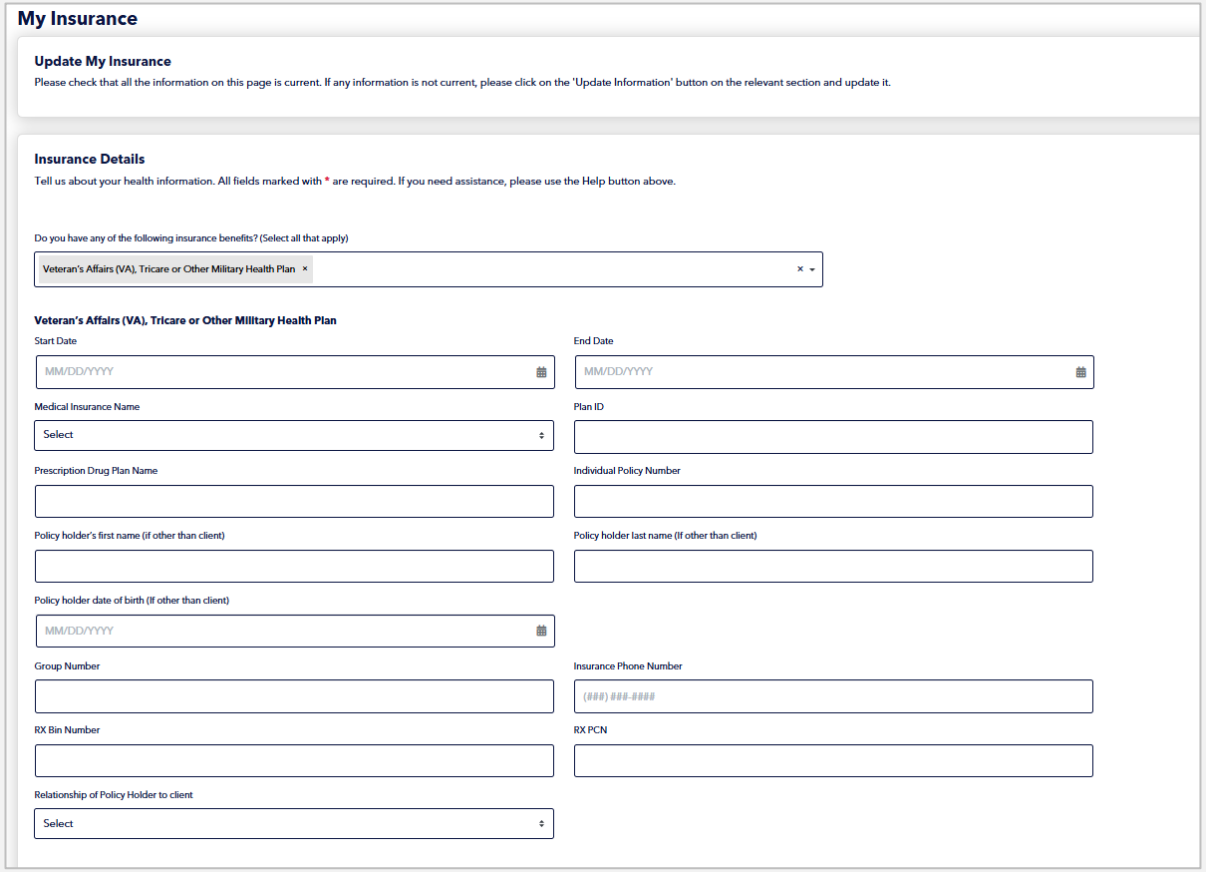
- Group Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 50.
- Insurance Phone Number
  - This will be an optional, free-text field accepting numeric values only.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.
- RX Bin Number
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 6.

- RX PCN
  - This will be an optional, free-text field accepting alpha-numeric values.
    - *The corresponding Spanish translation will exist in the Client Portal.*
  - Max character limit of 10.
- Relationship of Policy Holder to Client
  - This will be an optional, single-select drop down with the same picklist values, sourced from the 'Relationship' search criteria, on the My Relationships/Client Relationships screens of an Application Workflow/Client's Profile.
    - *The corresponding Spanish translation will exist in the Client Portal.*

Feature Updates: Sprint 23

Insurance Verification Application Workflow Enhancements to Insurance Types Cont.

Veteran's Affairs (VA), Tricare or Other Military Health Plan Search Criteria on My Insurance Screen of Application Workflow



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