One-e-App - CEC Supervisor Guide Revised September 2015

The CEC Supervisor Dashboard

Below is the Dashboard for the CEC Supervisor User in One-e-App.



Section – Application Assistance



- 1. <u>Begin Application</u> An application can be started after searching for whether the applicant has an application already. This link takes you to the Conduct Application Search feature.
- <u>Conduct Application Search</u> This link is used to search for individual applications. An application search can be accomplished through several methods:
 - Unique identifier such as person or application ID
 - Personal detail such as first/last name, gender, date of birth (DOB) and mother's maiden name

- Applicant's contact information such as their phone number or email address or
- Assistor or application date range

Exact or Scored Match search:



The exact match will search for only the information provided such as John Doe, male, DOB 01/01/1980. If there is no match, no application will be returned.

The scored match will return results that are similar to the information provided along with a score (94.1 or 89.3) showing a similar application. For example, a search of John Doe, male, DOB 1/7/1980 may return a result of John Doe, male, DOB 1/1/1980 with a score number to let the user decide whether the two are the same person. This is where the use of a mother's maiden name is recommended to narrow a search result where an applicant's name, gender and DOB are the same. Below is an example of an application match.

Se	earch Re	esult - I	Match	Found	1	Click the a	oplicant's nan	ne to see		/	Click on the Application ID			
						Medical Ho	ome, Coverag	e period			nur	nber	to view the Application	
Sι	ubmitted A	Applicatio	ons		_	and dispos	ition. See scre	een below.			Sun	nmar	ry. This summary has	
	Applicant Name	Date Of Su Birth	bmitted Su By	ıbmission I Date	Prog Name	Cover A Sheet	plication 1D	Person ID	Score	Notes	арр	licat	ion details.	
	Greg Iles	1/1/1980 30	rge Staff 7,	/24/2014 F	Medi-Ca - Restricte No Shar of Cost	ed Fax 1900	022014204001233190	0201032204142	100.00	*				
	Greg Iles	1/1/1980 Jo	rge Staff 7,	/24/2014	1y Healt LA	th Fax 1900	022014204001233190	0201032204142	100.00	*		C	licking this icon will show you	
												w	hether there are uploaded	
Pı	rogram Di	spositio	n Details	s /								d	ocuments, more information	
	Applicant Name	Program Name	Disposit	tion Dispo	osition ate	Medical Home	Denial/Disenro Reasons	II Coverage Period	Dise	nrollme Date	nt Com	<mark>n</mark> u	nder View Scanned Document	S
	Iles, Greg	Medi-Cal - Restricted No Share o Cost	f Pending	g N	I/A	NORTHEAST COMM- WILMINGTON	N/A	N/A		N/A	1	I/A		
•	Iles, Greg	My Health LA	Reinstate	ed 07/25	5/2014	NORTHEAST COMM- WILMINGTON	N/A	07/24/2014 - 07/23/2015	-	N/A	7	I/A		
	Iles, Manny	Medi-Cal - Restricted No Share o	f Pending	g N	I/A	NORTHEAST COMM- WILMINGTON	N/A	N/A		N/A	7	I/A		

3. Print Blank Forms – This link takes you to blank forms you can print.

Print Blank Fo	Print Blank Forms You can print the following blank forms.													
Program Name Document														
My Health LA	My Health LA Rights and Declarations													
Healthy Kids	Healthy Kids Program Information													
My Health LA	Profit and Loss Statement													
My Health LA	Sample Affidavit													
Medi-Cal	Rights, Responsibilities & Other Important Information (SAWS2AQR)													

4. <u>Renew/Modify Application</u> – This link takes you to the Conduct Application Search. For detailed information on renewing and modifying applications, visit the MHLA Website MHLA Webpage under "One-e-App Renewal Materials" at: http://dhs.lacounty.gov/mhla. Click on the "For DHS and Community Partners" link. Username: mhlacpp. Password: Lacounty1.

5. <u>Search Disenrolled Patients</u> – This link takes you to the Conduct Application Search. The following screen will give you the results along with the disenrollment date and reason.

	the "Generate
	NI 11 // 11 I
Disenrolled Participants	Notice" link.
Person Date of Name Disenrollment Reason for Disenrollment App ID MSN Person ID Enrollment	
Alaina Butler 2/12/1989 7/18/2014 Member's Request 19002201408600058 2 31900201012086147 7/12/2014	
Alaina Butler 2/12/1989 7/18/2014 Member's Request 19002201408600058 2 31900201012086147 7/12/2014	
Note: Each P Indicates a renewal application which has started and not completed through analeligibility review.	

<u>Another method to determine eligibility</u>: when you conduct a general Conduct Application Search you can click on the applicant's name. The screen that follows will give you more applicant information.

Sı	ıbr	nitted A	Applicat	ions												-	Click on the name
		Applicant Name	Date Of Birth	Submitted By	Submission Date	Program Name	Retrieve Document Cover Sheet	Application ID	Person ID	,	Score	Notes		View Documents			The following
]	Alaina Butler	2/12/1989	Susan J Thomas	6/5/2014	Medi-Cal - Restricted No Share of Cost	N/A 19	2002201408600058	3190020101208	36147	100.00		5	N/A			screen will give
]	Alaina Butler	2/12/1989	Susan J Thomas	6/5/2014	My Health	N/A 19	9002201408600058	3190020101208	36147	100.00		3	N/A			you disposition
]	Alaina L Butler	6/18/2000	Susan J Thomas	6/18/2014	Not Preliminarily Eligible for Programs in One-e-App	N/A 19	9002201416800872	3190020111116	58148	100.00		8	N/A			and coverage
	Pr	ogram	Disposit	tion Deta	ils					_	_	_	_				lick the arrow on the first table
	ApplicantProgram Name Name Disposition Disposition Medicational Coverage Period Disenvoluents															d	etailed
	•	Butler, Nigel	My Healt	h Disenroll	ed 07/01/2	014 N/A	N/A	06/18/2014	4 - 07/01/2014	07/0	1/2014		N/A				aformation
	•	Butler, Alaina	My Healt LA	h Disenroll	ed 07/18/2	014 N/A		07/12/2014	4 - 07/18/2014	07/1	8/2014		N/A			11	normation.
	A	pplication	n(s)														
19002201408600058 (Disenrolled) Disenrolled 07/18/2014 Primary Participant has DHS Primary Care Provider. 07/12/2014-07/18/2014 07/18/2014																	

6. <u>Attach Scanned Documents</u> – This link takes you to the Conduct Application Search. Conduct an application search. Below are three options to view application documents. Upload documents through Option 3 only.

Submitted Applications	Three options:
Application ID Person ID Score Notes View Documants Image: Birth By Date Name Cover Sheet Application ID Person ID Score Notes Documants Image: Display the imag	 Click this icon and the uploaded/faxed documents appear. Click hand icon and click on the green links in the next screen.
Total number of applications in progress : 0 Total number of determined applications pending submission : 1 Total number of submitted persons : 1 Export Results to Excel Add Notes Search View/Attach Scanned Documents View Clinboard	3. Checkmark the box and click on the link View/Attach Scanned
	Documents. You will be taken to the screen

below.

Attach Scanned Documents to My One-e-App App	Upload documents	
You will need to provide several documents to verify the inform <i>Scanned Documents</i> will list the types of proof required for the information you entered into the system. You can upload scann your application. Please use the <i>Browse</i> button to locate the do document to the system.	refron (s) en de document cument and t	
Maximum file size per upload: 7MB	your computer drive for	
Application ID: 19002201420400628	/ the document, open and	
Select All Documents 🗆	then attach.	View Documents
Select All Permanent Verification Documents		Click on the green link to see the
Documents in this Person Name Permanent !	Verification Documents	application's documents. The
Jorge C Proc	of of Identification	link displays the date and
Jorge C My Health	LA Rights & Declarations	whather the documents were
Select All Temporary Verification Documents 🛛		uploaded or faxed
Documents in this Upload Person Name	Temporary Verification Documents	
Jorge C	Proof of Income	
Jorge C	Proof of County Residency	
Browse Attach		
Merge and View attached documents Remove Docu	ments Print Document Cover Sheet	
View Application Commany		

 Print Document Coversheet (Faxing Only) – This link takes you to the Conduct Application Search. Conduct an application search. This Coversheet is only for <u>faxing purposes</u>. It is not needed to upload scanned documents.

Sub	mitted	Applica	tions														
	Applicant Name	Date Of Birth	Submitted By	Submission Date	Program Name	Retrieve Document Cover Sheet	Application ID	Person ID	4	Score	Notes	De	View ocuments				
	Harry Bosch	1/1/1966	Jorge Lopez	6/26/2014	Medi-Cal - Restricted No Share of Cost	Fax	19002201417600230	31900201036176147	P 1	.00.00		*	N/A				
	Bosch	1/1/1966	Jorge Lopez	6/26/2014	My Health LA	Fax	19002201417600230	31900201036176147	1	.00.00		₿.	N/A				
Note: Note: Note: Note: Note:	Met: Each Chick the box and the link "Print Document Cover Sheet." Pop- up: Document Cover Sheet for faxing purposes only.																
Note:	Each milicates IDR pending application(s)/person(s). Sheet for faxing purposes only.																
	Total number of determined applications pending submission : 0 Total number of submitted persons : 2																
	Export Results to Excel Add Notes Search View Clipboard Begin New Application Print Document Cover Sheet																
ŀ	• 🗎	• 실	(∂ ♣	1 / 2		• 87.3% •	🖶 🚼 🛛 Find	d				./				
B																	
11		0				Docu T	iment Cove	r Sheet				•	863955	57			
			Applicat	ion ID :	19002	22014 [,]	17600230		c	s s	T	E	M P *				
		Pr	rimary Info	ormant : Ha	rry Bos	ch							Date :	8/8/2014			
			Other Pe	ersons :													
Sę.			Ad	idress : 31	3 N Figu	ieroa St,	Los Angeles, Cali	fornia, 90012									
Ø	2		F	Phone : (H)(626)29	9-6363										-	

- **8.** <u>Print/Reprint Forms</u> This link will take you to the same information as the Print Blank Forms link. Please refer to the Print Blank Forms link (above) for direction.
- **9.** <u>Support Documentation</u> This link takes you to sample forms. These forms are similar/same to the forms found under Print Blank Forms or Print/Reprint Forms. Here is the screenshot:

Common Tasks	Vi	ew:	uments	O Los Angeles	only	
		Name	Size	Туре	Category	Uploaded On
<u>View or Download Document</u>		Profit and Loss Statement	246.2 kb	Word Document	Tip Sheets	7/8/2014 6:56:42 PM
		MHLA Consent Form	26 kb	Word Document	Program Materials	7/8/2014 6:57:14 PM
Admin Tasks		MHLA Rights and Declaration	23.92 kb	Word Document	Program Materials	7/8/2014 6:58:49 PM
		MHLA Sample Affidavit	388.5 kb	Word Document	Tip Sheets	7/17/2014 6:25:25 PM
		<u>Blank Affidavit</u>	392.5 kb	Word Document	Tip Sheets	7/17/2014 6:17:56 PM

Section - Enrollment Assistance



<u>Update Applicant Data</u> – The purpose of this link is to update information on an application. This update does not affect the application's eligibility period. You can update the following information: the applicant's address, telephone numbers, email address, applicant's name and preferred language. This link takes you to the Conduct Application Search. Conduct an application search. Once identified click on the name and you are taken to the screen below.

Primary Informant's Address and Contact	Information		
Primary Informant's Address		View History	
Effective Date			
Are home and mailing address same?			
Home Address (do not use PO Box)	Mailing Address		Click on the boxes to make
Street Address 1 204 N Dixie Hwy	Street Address 1 204 N Dixie Hwy		shangaa Once shangaa ara
Street Address 2	Street Address 2		changes. Once changes are
City Los Angeles	City Los Angeles		made click the Save button at
State California	State California		
Zip 90012	Zip 90012	1	the bottom of the screen.
County Los Angeles	County Los Angeles		
Brimany Informant's Mode of Contact			
Effective Date			
Emective Date	lamai com		
Check if email provided is invalid	gindircom		
Home Phone 657 9	77 5468		
Cell Phone	Work Phone X]	
	Message Phone X]	
How would you like to be contacted?	ione V		
Are home and mailing address same?	○ Yes ● No		
Person Details			
Demographics			
Effective Date			
First Name Mike	Primary Informant's Miles		
Middle Name	First Name		
Last Name Miller	Middle Name		
SuffixSelect One V	Primary Informant's Miller		
	Primary Informant's Preferred Spoken Language	\sim	
	Primary Informant's	\sim	
	Preferred Written Language		
		Caur	
		Save	

Section - Caseload

2	
Caselo	ad 😑
	Program Submission Workload
	Expired Applications
	View CEC Workload
	Review Supervisor Expired Applications
	<u>View Supervisor Workload</u> Summary
	View Application Workflow History
a	

1. <u>Program Submission Workload</u> – This link will show your own OEA application production history. This is the same function as clicking on your dashboard for submitted applications.

<u>Assignment</u> - You have the capability of assigning a pending application to another assistor through this link. See the directions below.

Appli	ication	s Pend	ling	Submiss	ion					- [Click the box for the
	Applicat	ion ID	MSN	Applicant Name	Deall	any Eligibility	Coverage		ectom Namo		
	190022014	15400427	L	Little, Frank	My H	Health LA	Prima	ary	One-e-App	1	application being
	190022014	15400427	2	Little, Sara	, Hea	lthy Kids	Prima	ary	One-e-App	×.	assigned and click Assign
Add	d Notes	Remo	ve	Assign							
Applie	cation ID	Applican	t Nan	Submission	Submission	Preliminary	Coverage	System	Documents		
900220	1420100327	Leo, R	alph	Successful	Date 7/21/2014	Eligibility Medi-Cal Restricted, No Share of Cost	Type Primary	One-e-Ap	p N/A	€	
900220	1420100327	Leo, Do	orothy	Successful	7/21/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₽	
900220	1420100525	Half, R	obert	Successful	7/21/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	€	
900220	1420100624	Pike,	Joe	Successful	7/21/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₽	
900220	1420100624	Pike, Je	essica	Successful	7/21/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₽	
900220	1420100673	Half, R	obert	Successful	7/21/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₽	
900220	1420200267	Q, Jo	rge	Successful	7/23/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₿	
900220	1420200267	Q, Jo	rge	Successful	7/23/2014	My Health LA	Secondary	N/A	N/A	3	
900220	1420200564	M, Jo	rge	Successful	7/22/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-Ap	p N/A	₿	
900220	1420200564	М, Јо	rge	Successful	7/22/2014	My Health LA	Secondary	N/A	N/A	3	
lote: Each lote: Each	is a link to a indicates Re	Re-print forms. econsider Progra	am(s).								
ssig	n Appli	cation	IS O	f Jorge L	opez						Select who you are
Date	Received	Арр	olican	t Name	Applica	tion ID	A	ssign Appl	ication To		assigning the applicatio
6/2	27/2014	L	ittle, I	Frank	19002201	415400427	Lo	pez, Jorge (C	EC)		and click Next. The
t Help									Ne	×t	assignment is complete

- <u>Expired Applications</u> This link will show your own OEA expired applications. You are able to see this information under My Assisted Applications, Expired.
- **3.** <u>View CEC Workload</u> This link will show your own OEA applications in progress. You are able to see this information under My Assisted Applications, In Progress.

4. <u>Review Expired Supervisor Applications</u> – This link will show your staff expired applications. Expired applications are applications not submitted after 30 days. As a CEC Supervisor you have the ability to close an expired application or return the expired application to the worker. See the example below.

Expired Applications

	Due Date	Applicant Name	<u>Assistor</u> <u>Name</u>	App ID	Program	MSN	Reason	App Status
✓	8/2/2014 8:14:46 AM	Chan, Hue	Camron Thissen	19002201416800120	N/A	1	Expired	Class Application
	7/21/2014 11:49:35 AM	Gonzalez, Jacob	Ernesto Reynoso	19002201417000654	Healthy Kids	4	Expired	Return to Worker
	7/21/2014 11:49:36 AM	Gonzalez, Jane	Ernesto Reynoso	19002201417000654	Healthy Kids	5	Expired	~
	7/21/2014 11:49:36 AM	Gonzalez, Jack	Ernesto Reynoso	19002201417000654	Healthy Kids	6	Expired	~

Note: Each R indicates a renewal application. Note: Indicates Application has been expired before due date.

Total no. of Expired Applications: 2

5. <u>View Supervisor Workload Summary</u> – This link allows you to see your staff workload summary.



You can also assign workload to another CEC through this screen. See assignment process above.

Applications Pending Submission

Applicat	tion ID	MSN	Applicant Name	Prelimina	ary Eligibility	Coverage	е Туре	System Name		
190022014	1	C, Jorge	Medi-Cal Restricted No Share of Cost			iry	One-e-App 卷			
Add Notes Remove Assign Applications Submitted										
Application ID	Applican	t Nan	ne Submission Status	Submission Date	Preliminary Eligibility	Coverage Type	Syste Nam	e Document	ts	
19002201420400123	Iles, C	Greg	Successful	7/24/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-	App N/A	杏	
19002201420400123	Iles, G	Greg	Successful	7/24/2014	My Health LA	Secondary	N/A	N/A	*	
19002201420400123	Iles, M	anny	Successful	7/24/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-	App N/A	3	
19002201420400123	Iles, M	anny	Successful	7/24/2014	My Health LA	Secondary	N/A	N/A	3	
19002201420400289	S, Hum	berto	Successful	7/24/2014	My Health LA	Secondary	N/A	N/A	3	
19002201420400560	B, Jo	rge	Successful	7/24/2014	Medi-Cal Restricted, No Share of Cost	Primary	One-e-	App N/A	杏	
19002201420400560	B, Jo	rge	Successful	7/24/2014	My Health LA	Secondary	N/A	N/A	3	
19002201420400628	C, Jo	rge	Successful	7/24/2014	My Health LA	Secondary	N/A		3	

6. <u>View Application Workflow Summary</u> – This link takes you to Conduct Application Search feature. A better feature to search for your workflow is through your dashboard's submitted application feature, or to search for your staff workflow through the View Supervisor Workflow Summary.

<u></u>	
Outreach	-
 <u>View Messages</u> 	
View Faxes	
View Reminders	
View Follow-Up Workloa	ad
 View Renewal Outreach 	List
View Ticklers	

1. <u>View Messages</u> - This link allows you to see Broadcast messages sent by your agency's System Administrator.

oneeapp			logout
One Stop Access to Apply for Assistance			Men
		Change Font Size	<u>A</u> <u>A</u>
Broadcast Messages			
Subject	Posted	Expires	
	no matering records were round.		
			In the second
			Nex

- <u>View Faxes</u> This link takes you to the Conduct Application Search feature. A better search of faxes is through the View Scan Document link described below. It has instructions on viewing faxed and scanned documents.
- 3. <u>View Reminder</u> This link takes to your own Reminders. This reminder feature allows the user to create a reminder but only with applications that are In Progress.

Application	s in Progress								
	Due Date	Creation Date	Applicant Nan	ne	Application ID				
	9/25/2014	8/11/2014	Ray A		19002201422200091				
Note: Each O indicates an extension of 2 days has been applied.									
Note: Each 🗾 indi	cates a reminder is ass	ociated with this application.				Kenniders.			
Note: Each R indi	cates a renewal applica	ation.							
Note: Each Y indic Note: Each brown b Note: Each purple b	Note: Each purple bold row indicates an application has was created more than 13 days ago. Note: Each purple bold row indicates an application that was created more than 13 days ago.								
Add Notes	Reminder	s Extend	Remove	Assign	Next				

A	Due Date 8 11 2014 Remind the applicant to bring in his income and county residency information.	Ray A	Rei	e t minders	Enter the information in the box and click Save. Below is how you will see the reminders.		
	< >	Applic		<u>Applicant</u> <u>Name</u>	Reminder Messages	<u>Due Date</u>	Application ID
				Ray A	Remember to ask the applicant Ray A to bring in his income information.	8/11/2014	19002201422200091
\boxtimes	Close	Save		Ray A	Remind the applicant to bring in his income and county residency information.	8/11/2014	19002201422200091

- 4. <u>View Follow Up Workload</u> This link allows you to see your own application workload. A better workload summary is through your dashboard's submitted application history.
- 5. <u>View Renewal Outreach List</u> This link allows you to search for staff applications by assistor, applicant, or date range. The table will identify the application termination date, organization, medical home and applicant's phone number. Searching by termination date is a useful way of identifying participants who will be coming up for renewal.

	View Potential Renewal Persons										
	Organizatio Assistor Medical Hom Program Nam Application J Person First Nan Termination Start D	n Department of Health s Jorge Staff (Certified eSelect One e My Health LA S D ate	Services Enrollment	Counselor)	Te	I L rmination	Person IDast Name End Date]	
•	Search 🎔 Reset 🌘	Select All									
	Application ID	Person ID	Person Name	Termination Date	Program	Assistor	Organization	Medical Home	<u>FPL</u>	<u>Spoken</u> Language	<u>Hor</u> Pho
	19002201420400123	31900201032204142	Greg Iles	7/23/2015	My Health LA	Jorge Staff	Department of Health Services	NORTHEAST COMM- WILMINGTON	81.16	English	626 299 636
	19002201420400123	31900201033204140	Manny Iles	7/23/2015	My Health LA	Jorge Staff	Department of Health Services	NORTHEAST COMM- WILMINGTON	81.16	English	626 299 636
	19002201420400289	31900201052204140	Humberto S	7/23/2015	My Health LA	Jorge Staff	Department of Health Services	VENICE FAMILY- COLEN	27.95	English	626 299 636

6. <u>View Ticklers</u> - This link shows your ticklers. A tickler will be sent and seen by you as the user. Your supervisor can also see your ticklers.

Ticklers							
From: All Tickler Type: All General Start Date: General End Date: Composition Status: Active New: All Second Search Reset	Nodified					/	Ticklers created. You can activate or inactivate already created ticklers.
Application ID	Person Name	Tickler Type	<u>Summary</u>	<u>Status</u>	Start Date	End Date	
N/A	Jorge Lopez	General	View Details	Active	7/23/2014	7/23/2014	Click Add Tickler to graate
N/A	Jorge Lopez	General	View Details	Active	7/30/2014	7/31/2014	Click Add Tickler to create
							a new tickler
Add Tickler I Ma	ake Active	Make Inac	tive			Next	

New Tickler		
Tickier Type : Ge Summary : Co Description : Rer nev	eneral compatibility View member to check compatibility view when using a w computer to enroll in OEA.	This screen allows you to create a new tickler.
Start Date : 08 End Date : 08	8 07 2014 III 8 31 2014 III	
Add 🛛	Close	
Ticklers Form: Al Tickler Type: Al T	Tickler Type Summary Status Start Date End Date General View Details Active 7/23/2014 7/23/2014 General View Details Active 7/30/2014 7/31/2014 General View Details Active 8/7/2014 8/31/2014	The new tickler will appear on your list of ticklers.
Add Tickler Make Active I	Make Inactive	Clicking "View Details" on the screen above will show this pop up screen.
https://www.assistedoneeapp.info/App/Tickler	Details.aspx?tid=54489	You will also see the tickler also to user
Date Sent : 8/7/2014 Person Name : Jorge Lopez Tickler Type : TICKGE Start Date : 8/7/2014 End Date : 8/31/2014 Description : Compatibility View Remem in OEA. CEC : Jessica Lopez	mber to check compatibility view when using a new computer to enrol	You Will also see the tickler alert on your dashboard.

Section - Administration

Administration =								
 Supervisor Tickler Summary 								
 <u>View Supervisor Summary</u> 								
<u>View Scanned Documents</u>								
<u>View Notes</u>								
 <u>Manage Events</u> 								

1. <u>Supervisor Tickler Summary</u> – This link will show a summary of your staff ticklers.

2. <u>View Supervisor Summary</u> – This screen shows the workload summary of your CECs.

CEC Supervisor Workload Summary										
Orgainzation Department of Health Services										
User t	ype CEC Supervisor	\sim								
User	ID									
Application User										
First Na	ime Jorge									
Last Na	ime Staff									
Search Reset										
Organization : Depa	rtment of Health Services									
erganization i Bopa										
User Name	Applications Awaiting	Applications in	Applications							
Jorge Staff (CEC)	1	1	2							
Total applications Awaiting D Total applications in Progress	s : 1									
Total Applications Dispositioned in last 60 Days: 2										

- 3. <u>View Scanned Documents</u> This link takes you to the Conduct Application Search feature. Conduct an application search. You can view scanned/faxed documents through the same three options given under section Attach Scanned Documents above.
- 4. <u>View Notes</u> This link takes you to the Conduct Application Search feature. Search for the application and once the application is found if you see the icon under Notes, there were notes created.

s	Submitted Applications															
			Applicant Name	Date Of Birth	Submitted By	Submissior Date	Program Name	Retrieve Document Cover Sheet	Application ID	Person ID		Score	Note	5	View Documents	
[Ð	Isabel Allende	1/1/1980	Jorge Lopez	8/5/2014	My Health LA	Fax	19002201421600440	31900201056216147	8	100.00		₫	N/A	
N N N	Note: Each R indicates a renewal application. Note: Each R indicates a renewal application which has started and not completed through final eligibility review. Note: Each Indicates a link to view verification documents. Note: Each Indicates program closed application(s)/person(s).								This icon who crea the note.	w te	ill sh d th	iow e no	wl ote	nen ther can clic	e are notes. The user k on the icon and see	
Note: Each is a link to a person's application summary. Note: Each is a link to add a person to the elipboard. Note: Each is a link to application workflow history. Note: Each indicates IDR pending application(s)/person(s).							Any othe View App Applicatio	r C olic on	DEA catio ID r	use in Si num	r ca um be	an view Imary fe r above.	the note through the ature. Click the			

This is a sample of the note in the View Application Summary.

Notes	
Name	Notes
Isabel Allende	I am testing this feature.

5. <u>Manage Events</u> – This link allows you to search for or create a new event. This feature allows an agency to track application activity at a particular event. This feature does not affect the chosen medical home.

Select Event	Select an existing event or create a new event.		Select Event Event Get Help Report a Bug/Make a Sug	U A T New Test Enrollment Event! August 4 Enrollments Testing 123 Testing 123 My Health La Fair Enroll Everyone! Revalidation Testing Outreach At Homeless 5 July 29 Event -cec Sup July 30 Test -cec Sup Mhla Simms	helter
Event Location De	tails				
Event: Enroll Everyone! [Choose Event]				Event]	If you choose an existing
Event Location(s): Enroll Everyone! event you can click on the green link and the green link and the previously entered information will populate to add. The Event Location ID must not be more than 8 green link and the previously entered information will populate You can edit information will populate You can edit information will populate to add. The Event Location Description An Event To Enroll All The Low Income Applix					
Start Enc Add	Date 8 5 2014 Date 8 6 2014 Control of the second		∎v	verify	

When an assistor logs into the system they will be prompted to select their location and event. Under location the assistor should select "other location." The event will appear under the Other Location drop down. They can then start with their program enrollment.

	Click on "other		Select your
Work Location	location."	Work Location	event.
Please select a work lo Central - LA CP21 Work Location Work Location Manage Care Services Monterey Park		Please select a work location.	
Get Help		Other LocationSelect One	on.