HOW TO- COMPLETE A DENIAL REVERSAL

If an Application has been denied, CAAs may complete a Denial Reversal to put the Application back into a pending status in order to make updates/corrections to and recertify the Application.

Follow the steps below once documentation necessary to recertify or correct the Application has been received and HEAP guidelines has been met.

Click 'Change' Button to put Application in Change Mode.

Suzanne MH [02/24/	/2023] 🗙					
Application Info	Benefits H	istory				
				Confirm Changes	Cancel Save Address Approved	Save Settings
Comments						
- Primary Applicant						
Client Number			Application Status*		Agency*	
322576866			Ineligible - Over Income Denied	*	Community Concepts, Inc	•
First Name*			Middle Name		Last Name*	
Suzanne					MH	
Service Street Address*			Service Apartment		Service Address 2	
393 Test Road						
Service City*			Service State*		Service ZIP*	
Leeds		•	ME	•	04263	
County*						
Androscoggin		•				
Service Address Status						
Address Approved						
🗹 Mailing Same As Serv	ice Address					
Mailing Street Address*			Mailing Apartment		Mailing Street 2	
393 Test Road						
Mailing City*			Mailing State*		Mailing ZIP*	
Leeds		v	ME	~	04263	
Mailing Address Status						

Click on the 'Benefits' Tab.

Click the "Down Arrow' on the 'Denied Reason' to open the dropdown.

Ap	plication -	Suzanne	MH - Ine	eligible - C	over Income D	enied	I [CHAN	Change	New Application	Print Client Letter	More 🕶	-		×
	Suzanne M	VH [02/24/	2023] 🗙											
	Applicatio	on Info	Benefits	History										
										Qualify	Certify	Undo (Certify	-
	Oenied	Denied Re	ason				Denied Date							
		Over Inco	ome)	6/13/2023							

Select 'None'.

Once this step is completed the Application status will change to Application Pending – Reversed. Application is now ready to have necessary changes made.

Suzanne MH [[02/24/2023] 🗙						
Application In	nfo Benefits	History					
						Qualify	Certify Undo Cer
Denied De	nied Reason		Denied Date				
C	Over Income		6/13/2023		Ċ	•	
ſ	none						
🖬 Qu 🤇	Over Income						
N	Aissing Documentat	ion	Additional Ben	ofit	Benefit	Balance	Max Remaining
	CHIP Only		Additional Den			to oo	to op
	Other		50	1.00	\$0.00	\$0.00	\$0.00
	0255-5044		S	0.00	\$0.00	\$0.00	\$0.00
			\$	0.00	\$0.00	\$0.00	\$0.00
	025HLAP						

Once the necessary changes have been made to the Application, click 'Confirm Changes'. The Application will go into either an Eligible, benefit determined or Qualify Failure status depending on what changes were made.

Suzanne MH [02/24/2023] 🗙			
Application Info Benefits History		\frown	
	Co	onfirm Changes Cancel Save Address Approved Save Se	rtting
Comments			
 Primary Applicant 			
Client Number	Application Status*	Agency*	
322576866	Application Pending - Reversed	 Community Concepts, Inc 	-
First Name*	Middle Name	Last Name*	
Suzanne		MH	
Service Street Address*	Service Apartment	Service Address 2	
393 Test Road			
Service City*	Service State*	Service ZIP*	
Leeds	- ME	- 04263	
County*			
Androscoggin	•		
Service Address Status			
Address Approved			
Mailing Same As Service Address			
Mailing Street Address*	Mailing Apartment	Mailing Street 2	
393 Test Road			
Mailing City*	Mailing State*	Mailing ZIP*	
Leeds	- ME	· 04263	

olication - Suzanı	ne MH - Elig	gible, bene	fit determined	New Application Print Client Letter More -				
Suzanne MH [02/2	4/2023] 🗙							
Application Info	Benefits	History						
				Cancel Save Address Approved Save Settin				
Comments								
Primary Applican	t							
Client Number			Application Status*	Agency*				
322576866			Eligible, benefit determined	Community Concepts, Inc				
First Name*			Middle Name	Last Name*				
Suzanne				MH				
Service Street Addres	s*		Service Apartment	Service Address 2				
393 Test Road								
Service City*			Service State*	Service ZIP*				
Leeds			▪ ME	• 04263				
County*								

Enter a comment on the Application to clearly explain the reason and justification for processing a denial reversal. The comment should include dates, documents received, action taken, errors that were corrected, etc.

Suz	anne MH [02/24/202	3] 🗙			
Ap	plication Info Be	nefits History			
			Ca	ancel Save Address	Approved Save Set
Con	iments				
			Print Comments	Remove Comments	
	User Name	Comment	Comment from Client	Comment to Client Sent	
	Lori McPherson	Completed denial reversal. Applicant provided med 4/18/2023.	ical expenses on		
	Crystal Armstrong	Your households total income for 1month is \$3,283. income guideline for a household of 1 is \$2,572[NEV household is over income by \$711.39	39[NEWLINE]The WLINE]Your		
om	nont				
onni	nent				

Next step is to add the denial reversal information to the Denial Reversal Monthly Log.