Call Screen	ing Proc	edures
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Client or EUMEMROL parties call

AUTHREP Callers

Parents of disabled children (MADC)

State Workers (Missouri and Out of State)

Medical Providers

Presumptive Providers

Nursing Home/Assisted Living Facility

Child Care Providers

FSD Partners

Overview: Call Center staff must exercise caution when providing case specific information to or updating demographic information from any parties associated with a case. Staff will not release information over the telephone before satisfactorily verifying whom the caller is; what information is sought and that release of information is authorized. The following precautions must be followed in dealing with information requests.

Note: Caller identity verification is not required to provide general program information.

southeather saytemeness.	Client Calls	
Guidelines	Clients related to the case are required to provide the information listed in "A" through "C" below.	
	CSR's must ask questions "D" through "G" below however the client does not have to answer in order to have case specifics released to them.	
Type T, Pennission to Text Y —Sends commers by text cody: no reproder cubs. WI DES trestautions	NOTE: Parties listed in EUMEMROL are considered part of the Eligibility Unit and are allowed to have case specific information released to them after approved	

	authentication process.	
Required Information	A. First and Last name B. Full DCN or full SSN C. Date of Birth NOTE: if any of this information is missing or provided incorrectly, case specific information cannot be released. General information can be released and change information can be taken from the caller.	FAMIS instructions: FAMISPAR to verify first and last name, DCN, SSN SCMBR to verify Date of Birth EUMEMROL to check if caller is in the household MEDES instructions Enter DCN(minus first two 0's) or Social in Person Search, choose DCN or Social Security Number in Type and click Search. If no results display click Reset. Search by client's First Name Last Name and Date of Birth. Choose Gender Click Search
Other Information (not required to release case specific information)	D. Client's "mailing" address E. Client's "daytime" phone number. F. Would client like to receive text message or phone call notifications? G. Would client like to receive email notifications?	FAMIS Instructions: SCMBR/PRSNDTL to check Mailing address. PRSNDTL to check phone number and update notification preferences. Permission to text settings Type C, Permission to Text Y -sends call and text reminders to cell phone Type C, Permission to Text N Sends a call only; no text reminders. Type T, Permission to Text

SAME OF THE SAME O	SE committee serve	Person page lists address, phone number, and email address.
	SHORT A SHORT SEATON A T	

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Authrep				
Required Information	Verify at least last 4 of SSN and DOB or DOB and DCN. NOTE: The spouse of a client may receive information on a case, as long as the spouse is listed as part of EU on EUMEMROL for that case. In this circumstance the spouse would need to be verified like a client.	FAMIS Instructions: AUTHREP- If there is an end date listed the person calling is no longer an autrep and a new authrep form needs to be submitted. MEDES Instructions: Review Client Contact tab for		
I Avijsta Rectative marker and social sections marker with a secret marker and dident light and discount and discount and a secret and discount and a secret and discount and a secret and	Stenieri Paradores Lecture Inde	notes regarding authorization NOTE: A company name can be listed without a specific person's name attached. Also check ITRACKRS and Worksite if nothing in MEDES/FAMIS.		
Serial Helican processors and including a Physical		ori solicoe		

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	Parents of disabled child (MADC)	3/28/10/1
Required Information	Verify Child's name, date of birth, social security number.	VIEWREL to verify the person calling is the child's parent.
Fill proportions on Section	Verify parent's name, date of birth and social security number.	SCMBR to verify the parent is in the household. NOTE: If their name is not listed as

Person page lists address phone number and causi)		in the household on SCMBR CSR cannot release case specifics to them.
		FAMISPAR: Child's name
		SCMBR: Child's date of birth, social security number, parent's name, date of birth and social security number
	remitu.A.	
	V76K Indicated and Indicated	Required information

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State Workers (Missouri and out of state)		
Required Information	Client/Applicant's name, social security number, and date of birth	NOTE: CSR should also ask for the workers name, state and government agency they represent and place this information in the ELIMEMROL comment.
		FAMISPAR- client's name and social security number
14. A cour in name can	STORY CONTRACTOR OF THE CONTRA	SCMBR- social security number and date of birth

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	N N	Medical Providers
Requirements	Verify MOHealthNET Service Provider	Use the following link to verify providers with current provider directory https://dssapp.dss.mo.gov/ProviderList/sprovider.asg
	with current Provider directory Verify DCN of client	FAMISPAR to verify DCN

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schole odne weither	Presumptive Providers	ingoniar contra reginação
Requirements	Client DCN or If PE Provider needs to assign a DCN verify: First and last name of client,	NOTE: These types of providers do NOT have to be verified on the Provider list.
	DOB and gender	FAMISPAR for DCN

		SNME to verify client's first and last name, dob and gender.
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	Nursing Home/Assisted	
Requirements	See tips column	The state of the s
		EUMEMROL comments Look for "Nursing Facility Authorization Form" or 'IM- 6AR"
		If not AUTHREP and no Nursing Facility Authorization Form on file, refer to Nursing Home Unit
	Cl. 11 Com Dec	Back to Top
D :	Child Care Pro	
Requirements	See tips column to t	verify the child is <i>currently</i>
		authorized to the provider
202		Back to Top
		HUD, Children's' Division)
Requirements	Public Administrators	
	referred to contact th	
	designated Point of C	ontact. SCMBR
	HUD will need to be	e an
	authorized represe	ntative.
	Children's Division w	orkers : first
	and last name of clie	
	either the full DCN or security number	COL-2-1-17 (1992-21-17-17-17-17-17-17-17-17-17-17-17-17-17

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