

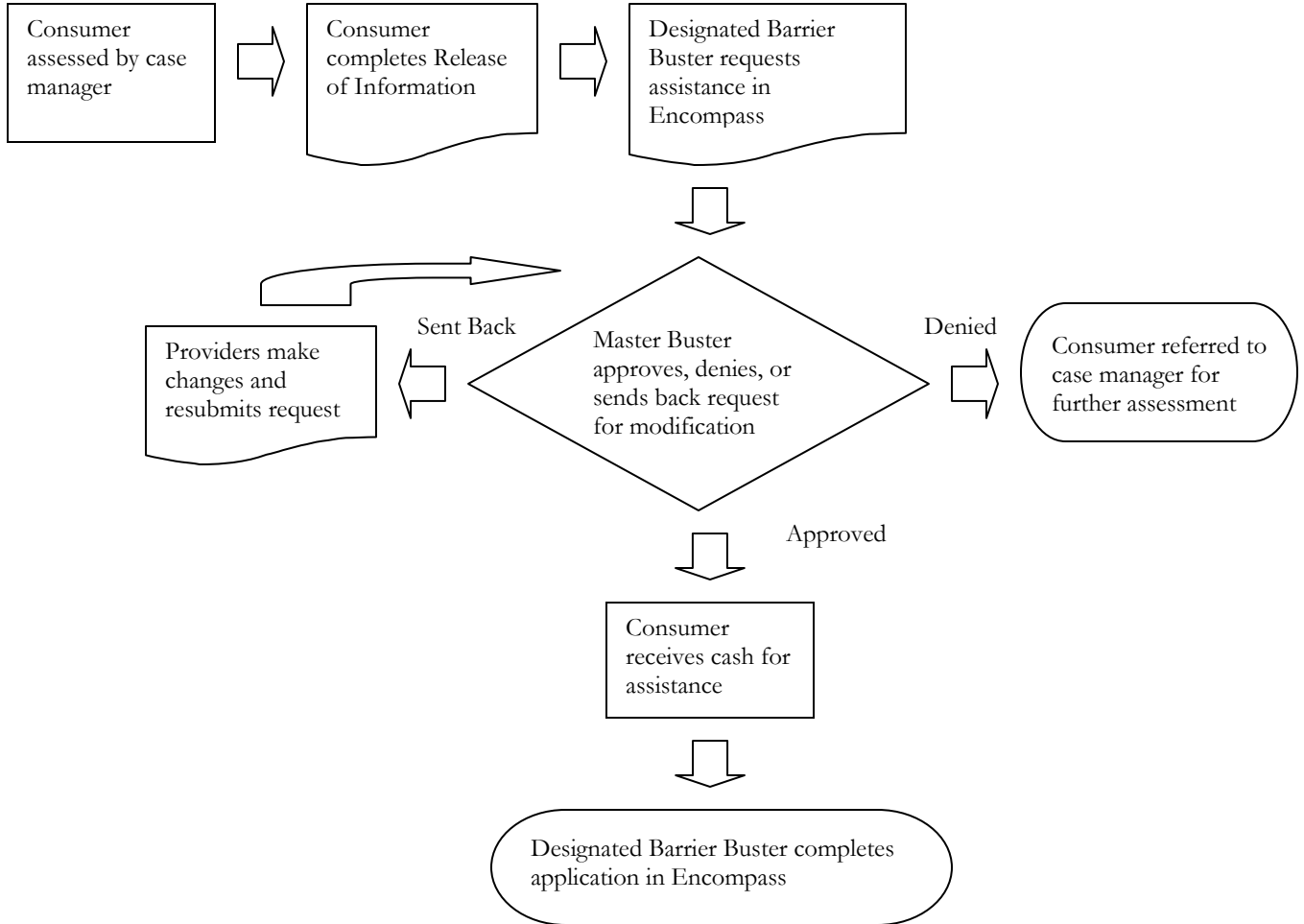
Barrier Buster Master Buster Manual

Table of Contents

Barrier Buster Requests.....	2
Barrier Buster History.....	8
Approving Barrier Buster Requests.....	10
Updating Barrier Buster Requests with Check Information.....	15
Barrier Buster Funding Sources.....	18
Barrier Buster Itemized Requests/Expenditures List.....	22
Barrier Buster Reports.....	24
Consumer Release of Information.....	26

Barrier Buster Requests

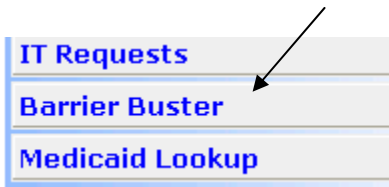
How to View, Add, Change, Submit, Delete, and Print Barrier Buster Requests



Note: Don't share your Encompass user name and password with others. Each person is responsible for completing his or her own forms. Other staff members cannot complete a form for someone else once it has already been started by another person. If additional staff need access to Encompass, contact Mike Scholl at 734-544-6856.

To View Barrier Buster Requests:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [View Barrier Buster Requests](#) link to the right of the Main Menu.



3. Search for a consumer by entering any of the following and clicking **SEARCH**:
 - a) Consumer Last Name
 - b) Consumer Last Name and First Name
 - c) WCHO Consumer ID
 - d) Social Security No.
 - e) Birth Date
 - f) Case #
 - g) AKA or Other Information

Note: If the consumer was not found then he or she isn't in the system. Review the search criteria to make sure everything was entered correctly. If there are no errors, you will have to add the consumer to the system as outlined below in "To Add Barrier Buster Requests" on **page 3**. If a consumer's record is displayed, he or she is already in the system and a request has been made for that consumer in the past.

4. Click the [Select](#) link to the right of the consumer you want to view information on.
5. Click the [View](#) link to the right of the record you want to view.

1 Barrier Buster Requests

Consumer	Agency	Request Date	Request Type	Amount	Status	Add Request
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	\$650.00	Approved	View Print Request

To Add Barrier Buster Requests:

When adding a request, two possible links can be used. The [Add Request](#) link is used for consumers who are already in the Barrier Buster system. The [click here](#) link is used to make a request for consumers who aren't in the Barrier Buster system. The only difference between the two forms is that the form for consumers who are not yet in the system has a few extra fields at the top of it.

1. Follow steps 1-4 under "To View Barrier Buster Requests" on **page 3**.

- Click on the [Add Request](#) link if it is available. If the consumer wasn't found click on the [click here](#) link in the box below the search fields.

Please review your search results below. If you **could not** find an existing consumer record [click here](#) to continue.

1 Barrier Buster Requests

Consumer	Agency	Request Date	Request Type	Amount	Status	Add Request
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	\$650.00	Approved	View Print Request

- If you click the [click here](#) link, fill in the information as instructed in the table below. If a consumer was found and you used the [Add Request](#) link, skip this step and go to step 4.

Field/Section:	Instructions:
Release From Agency	Enter the name of the agency where the Release of Information was completed.
Release To Agency	The name of the agency the Release of Information was sent to will pre-fill.
Date Consumer Signed	Enter the date the consumer signed the Release of Information.
Effective Date	Enter the date the consumer signed the Release of Information.
Expiration Date	Enter the date that is 2 years after the effective date. This is the date the Release of Information expires.
Condition of Expiration, Restrictions Requested for this Specific Disclosure, and Comments	These fields are generally not used. If these fields are needed use them to explain when the Release of Information will expire and any restrictions the release has.

- Fill in the information as instructed in the chart below. If the consumer was found and you clicked on the [Add Request](#) link, this is where the form will start. If you used the [click here](#) link to add a consumer, these fields will be in the middle of the form.

Field/Section:	Instructions:
Request Date	The date of the Barrier Buster request will pre-fill. Change it if incorrect.
Barrier Buster Name, Phone, Email address, and Agency	The name of the current user will pre-fill. The user's phone, email address, and agency they work for will also pre-fill if the information is available.

First Name, MI, Last Name, Address, City, State, and Zip	If the information doesn't pre-fill, enter the consumer's first name, middle initial (optional), last name, Social Security number, address, city, state, and zip code. You can use the lookup button to select the consumer's zip code.
SSN	When entering the consumer's Social Security number, do not enter a false number . If you or the consumer is concerned about security issues, use only the last four digits (ex. 000-00-4321).
City of Ann Arbor Resident?	Select "Yes" or "No" if this doesn't pre-fill.
Phone	Enter the consumer's phone number.
# of Adults in Household	Enter the number of adults living in the consumer's house.
# of Children in Household	Enter the number of children living in the consumer's house.
Gender	Select either male or female if it doesn't pre-fill.
Ethnicity	If the information doesn't pre-fill, select Hispanic or Latino, Not Hispanic or Latino, or Unknown. Please note if the consumer is Hispanic or Latino, "white" must be select in one of the race/ethnic origin fields.
Race/Ethnic Origin 1	If this field doesn't pre-fill, select the primary race or ethnicity of the consumer.
Race/Ethnic Origin 2	If the consumer has more than one race or ethnicity, select the second most prominent race or ethnicity the consumer identifies. This field might pre-fill.
Race/Ethnic Origin 3	If the consumer has more than two races or ethnic origins, select the consumer's third race or ethnicity. This field might pre-fill.
Living Arrangement	Select rent or own.
Monthly Rent	If the consumer rents housing, enter the amount of the consumer's monthly rent. Do not enter a dollar sign.
Annual Income	Enter the consumer's annual income. This information can be found on the verification sheet. Do not enter a dollar sign.
Check here if you authorize that this electronic narrative can be considered equal to a letter on your agency's letterhead	Click on this box to verify this form is filled out like a formal document and that all the data is correct.

Explanation of Need	Explain the nature of the emergency and why the consumer has this need. Make sure to include the consumer's account number, the amount of money he or she needs, and a brief history of the consumer and his or her need.
Amount Requested	Enter the amount of money requested. Do not enter a dollar sign.
Date by which check is needed	Enter the date the money is needed by. This date will help the Master Buster determine the consumer's level of emergency.
Check Payable to (agency/company name)	Enter the name of the agency or company the check is payable to.
Check Payable to (Address)	Enter the address of the agency or company the check is payable to. Make sure to include the city, state, and zip code of the company or agency.
Choose One of the Following (Mail Check or Hold Check for Pickup by)	Select whether the check will be mailed or held for pickup. If the check is held for pickup, enter the first and last name of the person who will be picking up the check, along with the person's phone number and email address in the provided fields. If possible, have the payee make the payment arrangements or mail the check. This is quicker and more efficient than having the check held for pickup.
Required Documentation Attached or has Been Sent	Click on this box if there is a receipt or invoice. Enter the account or reference number in the field provided, if applicable.
Request Type	Use the drop-down menu to select the type of request the consumer needs. Enter an explanation of the request in the "Please explain" field.
Other Funding Sources	For each option in the list, choose whether the funding source was not applicable (NA), denied, or utilized. If the consumer utilized any funds, enter the amount of those funds in the box to the right. Do not enter a dollar sign.

Note: The fields from "# of Adults in Household" through "Race/Ethnic Origin 3" are required for reporting purposes. Please fill in these fields and **don't** skip over them.

- Click the **SAVE & SUBMIT FOR APPROVAL** button to save the information and submit it for approval. Click the **Save** button save the form and submit it later. To exit the form without saving any information click **CANCEL**.

To Change and Submit Barrier Buster Requests:

If you added and saved a request but have not yet submitted it (the form status is pending), the form can be changed or submitted by using the [Change/Submit](#) link. This link is also used to change a request if the Master Buster sends the form back for modifications.

- Follow steps 1-4 under “To View Barrier Buster Requests” on **page 3**.
- Click on the [Change/Submit](#) link.

2 Barrier Buster Requests

Consumer	Agency	Request Date	Request Type	Amount	Status	Add Request
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	\$650.00	Approved	View Print Request
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Health - Prescription Costs	\$650.00	Returned to Barrier Buster	Change/Submit View Print Request

- Make any needed changes. If the record is ready to be submitted click on the **SAVE & SUBMIT FOR APPROVAL** button.
- If changes were made and the form isn't ready to be submitted, click on the **SAVE** button. Follow steps 1-3 in this section when the form is ready to be submitted.

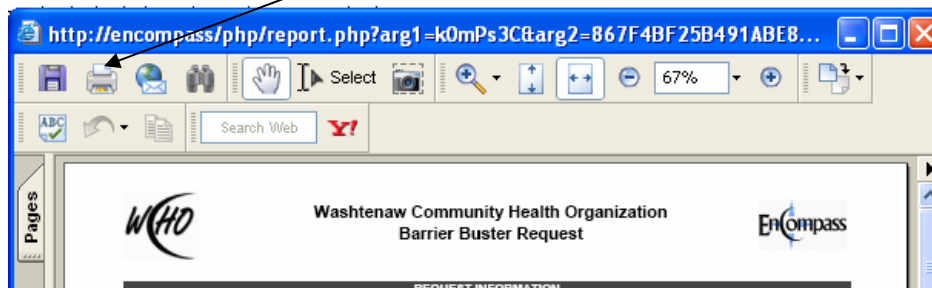
To Print Barrier Buster Requests:

- Follow steps 1-4 under “To View Barrier Buster Requests” on **page 3**.
- Click on the [Print Request](#) link to the right of the record you want to print.

1 Barrier Buster Requests

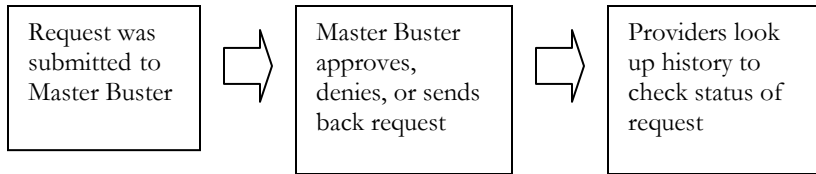
Consumer	Agency	Request Date	Request Type	Amount	Status	Add Request
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	\$650.00	Approved	View Print Request

- The Barrier Buster request will open in a new Adobe Acrobat window. Click on the print icon in the upper-left side of the screen.



Barrier Buster History

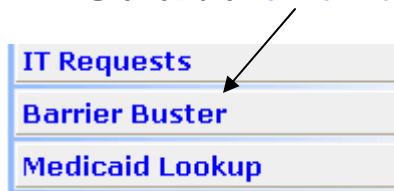
How to View and print the History of Barrier Buster Requests



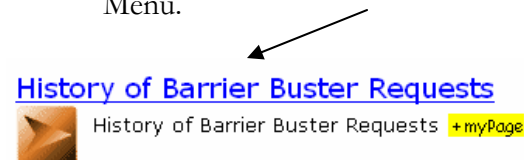
This form is used to check the status of a submitted request. The status of a request can also be viewed by looking up a particular consumer in the Barrier Buster Request List. This can be accessed by clicking on the [Barrier Buster](#) link in the Main Menu and then clicking on the [View Barrier Buster Requests](#) link. For more information, read the “Barrier Buster Requests” instructions on [pages 2-7](#).

To View History of Barrier Buster Requests:

1. Click on the [Barrier Buster](#) link in the Main Menu.



2. Click on the [History of Barrier Buster Requests](#) link to the right of the Main Menu.



3. Look up requests by entering any of the following and clicking **SEARCH**:
 - a) Provider
 - b) Request Type
 - c) Status
 - d) Consumer Last Name
 - e) Consumer ID
 - f) Request Date on or after

Note: To bring up a list of all requests, even for consumers who do not yet have an account, leave all the fields blank then click **SEARCH**. If the Master Buster has not yet created an account for a consumer, he or she will not show up in the search results if any of the fields are filled out. Once the Master Buster has created an account for a consumer, he or she will show up when data is entered into a search field.

- Click on the [View](#) link to the right of the record you want to view.

769 Barrier Buster Requests ◀PREVIOUS Page 1 of 77 NEXT▶

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Health - Prescription Costs	No	\$650.00	Returned to Barrier Buster	View Print Request

- Use the [PREVIOUS](#) and [NEXT](#) links on the top and bottom of the list to view different pages.

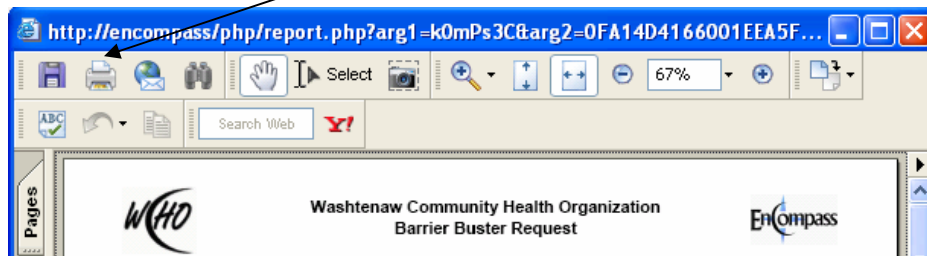
To Print History of Barrier Buster Requests:

- Follow steps 1-3 under “To View History of Barrier Buster Requests” on **page 8**.
- Click on the [Print Request](#) link to the right of the record you want to print.

769 Barrier Buster Requests ◀PREVIOUS Page 1 of 77 NEXT▶

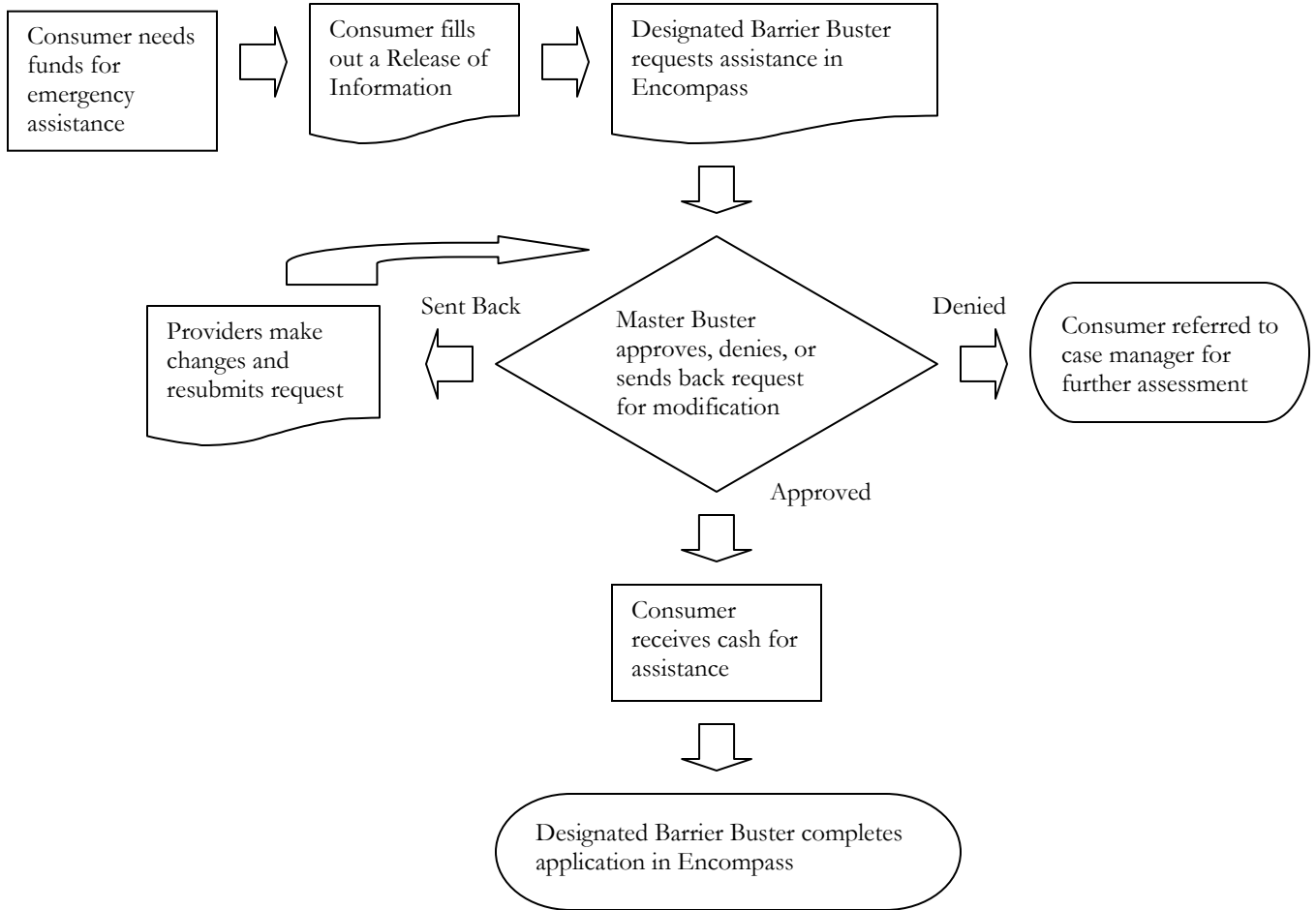
Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Health - Prescription Costs	No	\$650.00	Returned to Barrier Buster	View Print Request

- The Barrier Buster request will open up in a new Adobe Acrobat window. Click on the print button in the upper-left side of the screen.



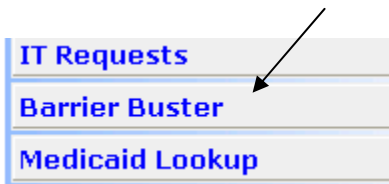
Approving Barrier Buster Requests

How to View, Change, Approve, Deny, and Print Barrier Buster Requests

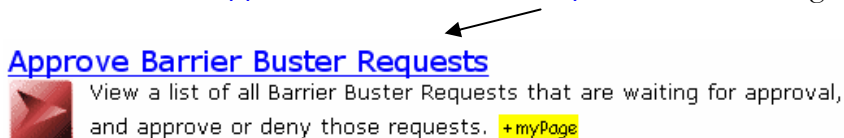


To View Barrier Buster Requests:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [Approve Barrier Buster Requests](#) link to the right of the Main Menu.



3. A list of all the requests will be displayed. You can narrow the requests shown by entering any of the following and clicking **SEARCH**:
 - a) Provider
 - b) Request Type
 - c) Status
 - d) Consumer Last Name
 - e) Encompass ID
 - f) Request Date on or after
4. Click on the [View](#) link to the right of the record you want to see.

24 Barrier Buster Requests ◀PREVIOUS Page 1 of 3 NEXT▶

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Friends in Deed	06/25/2007	Health - Dental Costs	No	\$650.00	Waiting for Approval	View Change Approve/Deny Print Request

To Change Barrier Buster Requests:

If changes need to be made to a request before it is approved or denied, use the [Change](#) link. Changes can be made to a request as many times as needed.

1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 10**.
2. Click on the [Change](#) link to the right of the request that needs to be changed.

24 Barrier Buster Requests ◀PREVIOUS Page 1 of 3 NEXT▶

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Friends in Deed	06/25/2007	Health - Dental Costs	No	\$650.00	Waiting for Approval	View Change Approve/Deny Print Request

3. Make the necessary changes.
4. Click the **SAVE** button to save the changes. To cancel any changes made, click **CANCEL**.

To Approve or Deny Barrier Buster Requests:

1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 10**.
2. Click on the [Approve/Deny](#) link to the right of the request that needs to be approved or denied.

24 Barrier Buster Requests ◀PREVIOUS Page 1 of 3 NEXT▶

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Friends in Deed	06/25/2007	Health - Dental Costs	No	\$650.00	Waiting for Approval	View Change Approve/Deny Print Request

3. If you are taken to a screen with a chart containing a list of consumer's names (as shown in the picture below), follow the steps under **(A)** on **page 12**. After completing the instructions under **(A)**, continue to follow the instructions under **(B)** on **page 13**.

Barrier Buster Request			
You must select an existing client from below, or if there is no acceptable match, create a new client.			
Client Name	SSN	Date of Birth	Create New Client
TEST CLIENT			Select
JESSE C. CLIENT	111-11-1101	03/02/1956	Select

If you are taken to the screen shown below, skip **(A)** and follow the steps under **(B)** on **page 13**.

Barrier Buster Request			
Request Date 05/18/2007			
Barrier Buster Name Wcho Admin Access	Phone	Email address hardingm@ewashtenaw.org	Agency Friends in Deed
Client Information		SSN	
First Name MI Last Name John Doe	000-00-0000		
Address 2222			

(A) If you have to select the correct consumer:

If the Barrier Buster who filled out the request was unable to find the consumer and had to add him or her as a new client in the system, the Master Buster must select the correct consumer if he or she is listed in the chart

1. Find the consumer on the chart of names and click on the [Select](#) link to the right of the consumer's record. If the consumer is not in the chart, click on the [Create New Client](#) link at the top of the chart.

Barrier Buster Request			
You must select an existing client from below, or if there is no acceptable match, create a new client.			
Client Name	SSN	Date of Birth	Create New Client
TEST CLIENT			Select
JESSE C. CLIENT	111-11-1101	03/02/1956	Select

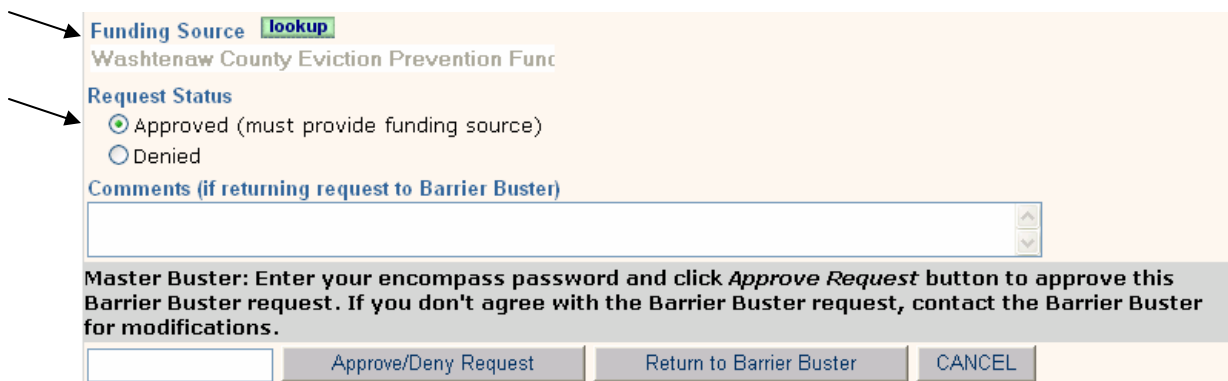
2. Clicking on either one of these links will take you to the Approve Barrier Buster Request form. All information will pre-fill except for the area at the bottom used for the approval or denial of the request. Make any changes that are needed.
3. Complete the form by following the instructions under **(B)** on **page 13**.

(B) If the [Approve/Deny](#) link took you directly to the Approve Barrier Buster Request screen or you completed the instructions in (A):

If the Master Buster was taken directly to the Approve Barrier Buster Request screen, the form will pre-fill, and the information on the form cannot be changed.

1. At the bottom of the Approve Barrier Buster Request screen complete the following fields:

Field/Section:	Instructions:
Funding Source	If the request will be approved use the lookup button to select the funding source.
Request Status	Select either “Approved” or “Denied.”
Comments	If the request needs to be returned to the Barrier Buster, enter an explanation of what needs to be added or modified. Filling out this field is the only way the Barrier Buster will know what to modify. What is entered will be seen by the Barrier Buster receiving the request in the “Request Status” column of the Barrier Buster Request List. The returned form can be accessed by using the View Barrier Buster Requests link.



2. To approve or deny a request, enter your Encompass password in the provided field and click the **Approve/Deny Request** button. Click on the **Return to Barrier Buster** button to send the form back to the Barrier Buster for modifications. To cancel a request, click the **CANCEL** button.

To Print Barrier Buster Requests:

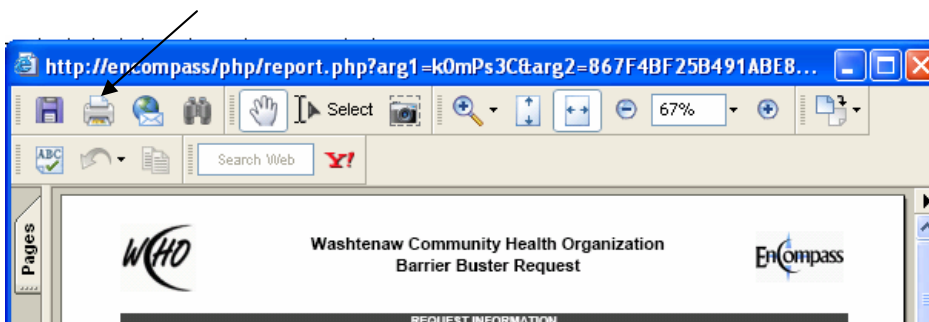
1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 10**.
2. Click on the [Print Request](#) link to the right of the request you want to print.

24 Barrier Buster Requests

◀PREVIOUS Page 1 of 3 NEXT▶

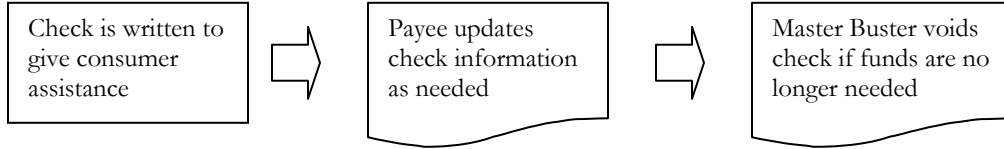
Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Friends in Deed	06/25/2007	Health - Dental Costs	No	\$650.00	Waiting for Approval	View Change Approve/Deny Print Request

3. A new Adobe Acrobat window will open up. Click on the print icon in the upper-left side of the screen.



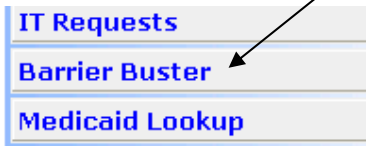
Updating Barrier Buster Requests with Check Information

How to View, Update, Void, and Print Check Information



To **View** Barrier Buster Requests:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [Update Barrier Buster Requests with Check Information](#) link to the right of the Main Menu.



3. A list of all the requests will be displayed. You can narrow the requests shown by entering any of the following and clicking **SEARCH**:
 - a) Provider
 - b) Request Type
 - c) Status
 - d) Consumer Last Name
 - e) Encompass ID
 - f) Request Date on or after

4. Click on the [View](#) link to the right of the record you want to see.

9 Barrier Buster Requests

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	No	\$650.00	Approved	View Update Check Information Print Request

To Update Check Information:

1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 15**.
2. Click on the [Update Check Information](#) link to the right record that needs updating.

9 Barrier Buster Requests

Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	No	\$650.00	Approved	View Update Check Information Print Request

3. Fill in the following information:

Field/Section:	Instructions:
Check Date	Enter the date of the check.
Check Number	Enter the number of the check.
Check Mailed Date	Enter the date the check was mailed. Ideally this should be the same as the check date, but checks can't always be mailed out the same day.

4. Click the **SAVE** button to save the changes. To cancel the entry, click **CANCEL**.

To Void Checks:

1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 15**.
2. Click on the [Void Check](#) link to the right of the desired record.

John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	No	\$650.00	Check Mailed	View Void Check Print Request
----------	---	------------	--------------------------	----	----------	--------------	---

3. Enter the date the check was voided in the “Date Check Voided” field.
4. Click **SAVE** to save the voided check. To cancel the void, click **CANCEL**.

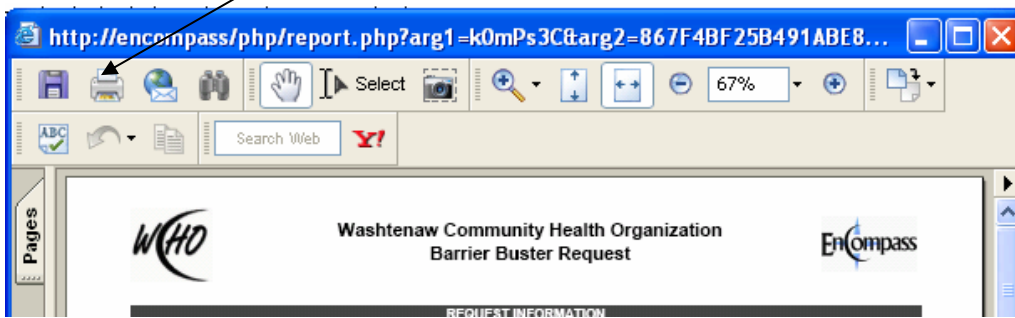
To Print Barrier Buster Requests:

1. Follow steps 1-3 under “To View Barrier Buster Requests” on **page 15**.
2. Click on the [Print Request](#) link to the right of the record that needs to be printed.

9 Barrier Buster Requests

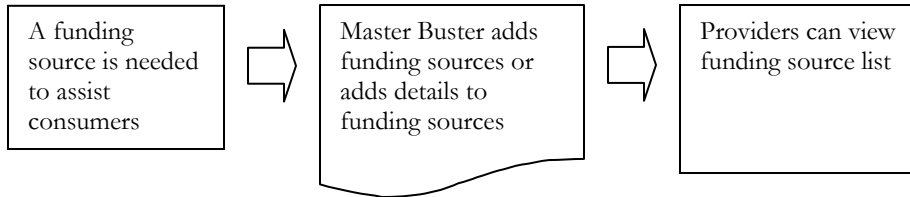
Consumer	Agency	Request Date	Request Type	Ann Arbor Resident	Amount	Status	
John Doe	Community Support and Treatment Services - CSTS	06/25/2007	Utilities - Gas/Electric	No	\$658.00	Approved	View Update Check Information Print Request

3. A new Adobe Acrobat window will open. Click the print icon in the upper-left side of the screen.



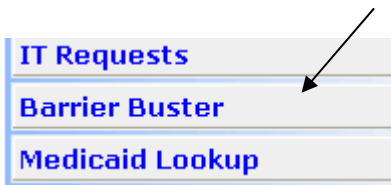
Barrier Buster Funding Sources

How to View, View Details, Add, Add Details, Change, Change Details, and Delete Funding Sources

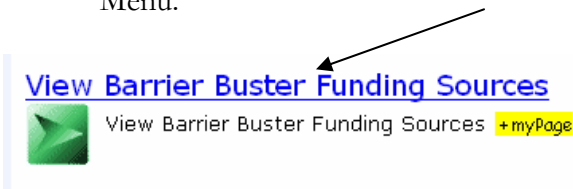


To View Funding Sources:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [View Barrier Buster Funding Sources](#) link to the right to the Main Menu.



A list of all the funding sources will be displayed. Use the [PREVIOUS](#) and [NEXT](#) links on the top and bottom of the list to view different pages.

3. Click on the [View](#) link to the right a record to view it.

13 Barrier Buster Funding Sources [◀PREVIOUS](#) Page 1 of 2 [NEXT▶](#)

Category	Source Name	Description	Balance	
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$3834.00	View Details
Ann Arbor Community Foundation	Hurricane Katrina Local Relief Fund	Available to individuals and families in Washtenaw County displaced by Hurricane Katrina	\$126.24	View Details

To View Details of Funding Sources:

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Details](#) link to the right of the desired record. This will take you to a new chart.

13 Barrier Buster Funding Sources ◀PREVIOUS Page 1 of 2 NEXT▶

Category	Source Name	Description	Balance	
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$3834.00	View Details
Ann Arbor Community Foundation	Hurricane Katrina Local Relief Fund	Available to individuals and families in Washtenaw County displaced by Hurricane Katrina	\$126.24	View Details

3. Click on the [View](#) link to the right of the detailed record you want to view.

17 Barrier Buster Funding Source Detail(s) ◀PREVIOUS Page 1 of 2 NEXT▶

Detail Date	Description	Amount	
06/25/2007	Barrier Buster Request for John Doe	\$-650.00	View

Note: If nothing is shown when the [Details](#) link is clicked, that means the funding source doesn’t have details listed. To add details, follow the directions under “To Add Details to Funding Sources” on **page 20**.

To Add Funding Sources:

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Add Funding Source](#) link at the top of the chart.

13 Barrier Buster Funding Sources ◀PREVIOUS Page 1 of 2 NEXT▶

Category	Source Name	Description	Balance	
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$1834.00	Add Funding Source Change Delete View Details

3. Fill in the following information:

Field/Section:	Instructions:
Funding Source Category	Use the drop-down menu to select the correct funding source. If the correct funding source is not listed, enter the correct funding source under the “Specify” field. You can only enter information in one of the two fields.
Funding Source Name	Enter the name of the funding source.
Description/Usage	Enter a description of the fund, or describe how the fund will be used.
Contributor	Enter the name of the contributor to the funding source.

Balance	Enter the beginning balance of the funding source. Do not enter a dollar sign in front of the number.
Check if this Funding Source should NOT be used any more.	If the funding source should no longer be used, click on the box to the left.

4. Click **SAVE** to save the form. To cancel the form, click **CANCEL**.

To Add Details to Funding Sources:

Details change the balance of the funding source. Adding details adds money to a funding source balance.

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Details](#) link to the right of record that needs details added to it.

13 Barrier Buster Funding Sources ◀PREVIOUS Page 1 of 2 NEXT▶

Category	Source Name	Description	Balance	Add Funding Source
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$1834.00	Change Delete View Details

3. Click on the [Add Funding Source Detail](#) link on top of the chart.

Source Information	
Source Name	Description/Usage
test	Use money to fund people who need medical help.
Balance	Contributor
\$500.00	Test

0 Barrier Buster Funding Source Detail(s)

Detail Date	Description	Amount	Add Funding Source Detail
-------------	-------------	--------	---

4. Fill in the following information:

Field/Section:	Instructions:
Date of Detail Entry	Today’s date will pre-fill. Change the date if it is incorrect.
Description of Detail	Enter a description of the detail.
Amount	Enter the amount of money that will be added to the funding source. Do not enter a dollar sign in front of the number.

5. Click the **SAVE** button to save the detail. To cancel the detail, click **CANCEL**.

To Change Funding Sources:

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Change](#) link to the right of the source that needs changing.

13 Barrier Buster Funding Sources ◀PREVIOUS Page 1 of 2 NEXT▶

Category	Source Name	Description	Balance	Add Funding Source
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$1834.00	Change Delete View Details

3. Make the needed changes.
4. Click **SAVE** to save the changes. To cancel the changes, click **CANCEL**.

To Change Details of Funding Sources:

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Details](#) link to the right of the desired record.
3. Click on the [Change](#) link to the right of the record you want to change.

1 Barrier Buster Funding Source Detail(s)

Detail Date	Description	Amount	Add Funding Source Detail
05/21/2007	Test	\$50.00	Change View

4. Make any necessary changes.
5. Click **SAVE** to save the changes. To cancel the changes, click **CANCEL**.

To Delete Funding Sources:

Funding sources can only be deleted if the source doesn't have any details.

1. Follow steps 1-2 under “To View Funding Sources” on **page 18**.
2. Click on the [Delete](#) link to the right of the record you want to erase.

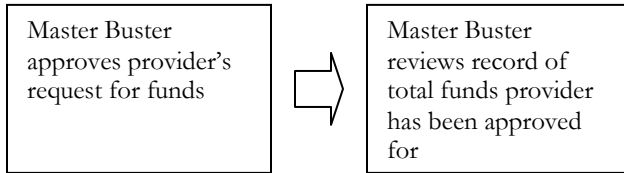
13 Barrier Buster Funding Sources ◀PREVIOUS Page 1 of 2 NEXT▶

Category	Source Name	Description	Balance	Add Funding Source
Ann Arbor Community Foundation	Bach Home Fund	Ages 60+	\$1834.00	Change Delete View Details

3. Click the **DELETE** button to delete the funding source. To go back to the record without deleting the funding source, click **CANCEL**.

Barrier Buster Itemized Requests/Expenditures List and Barrier Buster Reports

How to View Itemized Requests and Expenditures



This form shows the total amount of money each agency has been approved for. To view the amount of money improved for an individual consumer, see the instructions under “How to View Total Fund Use” on **page 23**.

To View Itemized Requests and Expenditures:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [Itemized Requests/Expenditures](#) link to the right of the Main Menu.



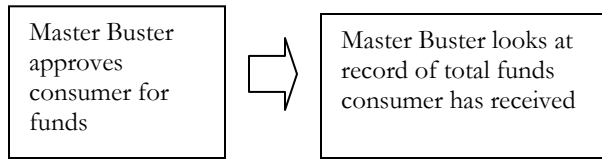
3. Search for requests and expenditures by entering any of the following and clicking **SEARCH**:
 - a) Start Date (required)
 - b) End Date (required)
 - c) Agency
 - d) Request Category

The results of the search will be displayed in a chart that looks like the picture below. This information can only be viewed. No actions can be done to this list.

3 Barrier Buster Requests/Expenditures

Agency	Request Category	Amount Approved
		-\$4940.00
Friends in Deed	Health	\$5000.00
	Health	-\$2000.00

How to View Total Fund Use



This form shows the amount of money each consumer has received. To view the amount of money each agency has received, follow the instruction under “How to View Itemized Requests and Expenditures” on **page 22**.

To **View Total Fund Use**:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the **Total Fund Use** link to the right of the Main Menu.



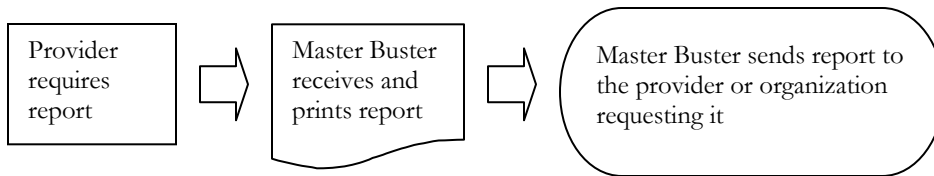
3. Search for the total funds received by a consumer by entering the following and clicking **SEARCH**:
 - a) Start Date (required)
 - b) End Date (required)
 - c) Funding Source
 - d) Consumer ID
 - e) Agency
 - f) Request Category
4. The results of the search will be displayed in a chart below. To view details of a record, click on the **Details** link to the right of that record.

6 Barrier Buster Requests/Expenditures

Consumer	Amount Requested	Amount Approved	Funding Source	
Client Test	\$150.00			Details
John Doe	\$16000.00			Details
John Doe	\$2000.00	\$2000.00	Ann Arbor Community Foundation - Bach Home Fund	Details
John Doe	\$5000.00	-\$5000.00	Ann Arbor Community Foundation - Washtenaw County Eviction Prevention Fund	Details

The **Details** link will take you to the Barrier Buster Request List. For instructions on using the Barrier Buster Request List, click on the **View Help** link on that screen.

How to Run a Report



To Run a Report:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the **Barrier Buster Reports** link to the right of the Main Menu.



3. A list of all available reports will be displayed in a chart. To narrow the reports displayed, enter the following information and click **SEARCH**:
 - a) Report Name
 - b) Reporting Category
4. Click on the **Run Report** link to the right of report you want to run.

4 SQL Server Report(s)

Report Name	Reporting Category	Report Description	
Barrier Buster Requests Approved by Status and Zip code	Barrier Buster	Barrier Buster Requests Approved by Status and Zip code	Run Report

5. Fill in the following information:

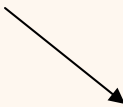
Field/Section:	Instructions:
Start Date	Enter the start date of the data you want a view in the report.
End Date	Enter the end date of the data you want to view in the report.
Report Format	The report format will pre-fill. Use the drop down-menu to change the selection, if needed.

6. To run the report, click **RUN**. To cancel the run, click **CANCEL**.

7. If you clicked the **RUN** button, click on the [Display Report](#) link to view the report. It will be displayed in a new window.

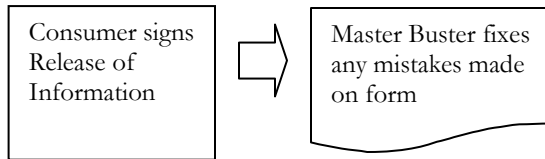
Report Parameters	
Start date(1/1/04)	5/21/2007
End date	5/21/2007
Report Format	HTML4.0

[Display Report](#)



Consumer Release of Information

How to View, Add, and Change Consumer Release of Information



To View Consumer Release of Information:

1. Click on the **Barrier Buster** link in the Main Menu.



2. Click on the [View Consumer Release of Information Agreements](#) link to the right of the Main Menu.



3. Click on the [Release of Information](#) link to the right of the consumer whose record you want to view.
4. Click on the [View](#) link to the right of the Release of Information record you want to view.

1 Matched

Date Signed	Effective Date	Expiration Date	Release Information From	Release Information To	Status	Add Release of Information
05/14/07	05/14/07	05/30/07	Testing	Release to Barrier Buster Member Agencies	Authorized	Change View

To Add Consumer Release of Information:

1. Follow steps 1-3 under “To View Consumer Release of Information” above.
2. Click on the [Add Release of Information](#) link.

1 Matched

Date Signed	Effective Date	Expiration Date	Release Information From	Release Information To	Status	Add Release of Information
05/14/07	05/14/07	05/30/07	Testing	Release to Barrier Buster Member Agencies	Authorized	Change View

3. Fill in the following:

Field/Section:	Instructions:
Release From Agency	Enter the name of the agency submitting the Release of Information.

Release To Agency	The name of the agency the Release of Information was sent to will pre-fill.
Date Consumer Signed	Enter the date the consumer signed the Release of Information.
Effective Date	Enter the date the Release of Information is effective. The current date must be between the effective date and the expiration date.
Expiration Date	Enter the date the Release of Information will expire. The current date must be between the effective date and the expiration date.
Status	Selected either “Authorized” or “Denied.”
Condition of Expiration	This field can be skipped. If necessary, explain any conditions that will cause the Release of Information to expire.
Specific Information to be Disclosed	Select all that apply.
Specific Information to be Disclosed About Communicable Diseases and Infections	Select all that apply.
Use of Disclosure	Select all that apply.
Restriction Requested for this Specific Disclosure	Enter any restrictions that have been requested for this Release of Information.
Comments	Enter any other information that pertains to the Release of Information that is not already entered in the fields provided in this form.

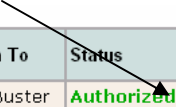
4. Click **SAVE** to save the form. To cancel the form, click **CANCEL**.

To Change Consumer Release of Information:

1. Follow steps 1-3 under “To View Consumer Release of Information” on **page 26**.
2. Click on the [Change](#) link to the right of record that needs to be changed.

1 Matched

Date Signed	Effective Date	Expiration Date	Release Information From	Release Information To	Status	Add Release of Information
05/14/07	05/14/07	05/30/07	Testing	Release to Barrier Buster Member Agencies	Authorized	Change View



3. Make any needed changes.
4. Click **SAVE**.