

MANUAL MATERIAL TRANSMITTED					
MANUAL: INCOME MAINTENANCE			CHANGE NUMBER: 1		
DELETE			INSERT OR CHANGE		
PAGES	CHAPTER	DATED	PAGES	CHAPTER	DATED
1 - 2	5	5/95	1 - 2	5	7/95
3 - 4	5	5/95	3	5	5/95
11 - 12	5	5/95	4	5	7/95
			11	5	7/95
			12	5	5/95
DATE: June, 1995			TO: All Income Maintenance Manual Holders		

Section 5.1: A grammatical error was corrected.

Section 5.2: The Medicaid coverage groups to which resource development applies was added.

Section 5.4: The complete policy about penalties was added. They were omitted when the Chapter was released.

Section 5.6: An incorrect statement about Medicare, Part A, was removed from page 11.

NOTE: A "1" now appears on the pages on which there was a substantive change. It appears on the left side of the footer. Each time a substantive change is made on a page, the number of the Manual change is added to the footer. The change number will not be placed on the page when it is simply reprinted.

Questions should be directed to the IM Policy Unit in the Office of Family Support.

5.1 INTRODUCTION

The resource development process is designed to enable AFDC/U and Medicaid clients to achieve financial independence.

The Worker assists clients in developing alternate or additional sources of income to reduce or eliminate the need for AFDC/U and Medicaid. Sections 5.2 - 5.5 contain the procedures and requirements which are applicable to the resource development process. Section 5.6 contains a description of the benefits for which a client may qualify, and referral instructions.

5.3 THE WORKER'S RESPONSIBILITIES

The responsibilities of the Worker in the resource development process include the following:

A. IDENTIFICATION OF POTENTIAL BENEFITS

The Worker will make this determination of potential eligibility at application and redetermination.

B. PROCEDURES AFTER IDENTIFICATION:

The Worker must:

- Explain to the client how to apply for the benefit.
- Explain to the client the consequences of failure to develop the resource.
- Initiate the referrals to potential resources when appropriate.
- Record in the case record all action taken in the process of developing potential resources.
- Aid the client who needs help with the referral.
- Enter the proper code in the Case Action Block of the data systems. See Chapter 23.
- Monitor the client's progress and take any indicated action.
- Apply the penalty shown in Section 5.4 when the client fails without good cause to pursue the resource.

Part A, the individual must meet a work requirement or must be the surviving spouse of the individual. If the individual does not qualify for Medicare, Part A because of lack of work coverage he may purchase the coverage by payment of a monthly premium.

- Medicare - Part B - Supplementary Medical Insurance (SMI)

There is no work coverage requirement for Part B. Any citizen or legally admitted alien who has resided in this country for five years and who is age 65 or over is eligible even though he may not be eligible for Part A.

NOTE: An exception occurs when the individual voluntarily drops his Part B coverage twice. In that case, he cannot enroll in Part B again.

Individuals enrolled in Part B pay a small monthly premium. If he is receiving RSDI or Railroad Retirement Benefits, the premium is deducted from his benefit check, otherwise, he must pay the premium from his income.

b. Automatic Enrollment of Individuals in Medicare

In the following circumstances, an individual will be automatically enrolled in Medicare, Part A. He will also be automatically enrolled in Part B unless he specifically requests that he not be.

- If the individual is receiving RSDI, he is automatically enrolled by the Social Security Administration when he becomes eligible.
- If the individual is receiving Railroad Retirement Benefits, he will automatically be enrolled by that Board when he becomes eligible.