

MANUAL MATERIAL TRANSMITTED

MANUAL: INCOME MAINTENANCE

CHANGE NUMBER: 149

DELETE

INSERT OR CHANGE

PAGES	CHAPTER	DATED	PAGES	CHAPTER	DATED
6 a - 6 b	1	2/98	6 a - 6 b	1	12/99
125 - 126 a	1	9/98	125 - 126	1	12/99
			126 a	1	9/98
i-ii	9	8/97	i - ii	9	12/99
iii-iv	9	10/98	iii - iv	9	12/99
1	9	8/97	1 - 2 a	9	12/99
2-2a	9	9/95	3	9	12/99
3-4	9	12/96	4	9	12/96
7-8	9	9/95	7	9	9/95
			8	9	12/99
9	9	12/96	9	9	12/99
10	9	10/97	10	9	12/99
10a - 10b	9	9/98	10-10b	9	12/99
10c	9	1/99	10c	9	12/99
10e - 10g	9	11/98	10e - 10g	9	12/99
10h	9	9/98	10h	9	12/99
			10i	9	12/99
11	9	7/96	11	9	12/99
			12	9	4/96
17-18	9	8/97	17	9	12/99
			18	9	4/96
19-20	9	10/96	19-20	9	12/99
21-22	9	9/98	21-22	9	12/99
31-32	9	9/98	31-32	9	12/99
32a - 32i	9	8/97	32a-32i	9	12/99
33-34	9	8/97	33-34	9	12/99
35	9	5/97	35	9	12/99
36	9	6/96	36	9	12/99
37-38	9	9/98	37-38	9	12/99

39	9	12/96	39	9	12/99
40	9	9/95	40	9	12/99
41-42	9	8/98	41-42	9	12/99
43-44	9	10/98	43-44	9	12/99
45-46	9	11/95	45-46	9	12/99
47-50	9	9/95	47-50	9	12/99
51-52	9	5/97	51-52	9	12/99
53-56	9	9/95	53-56	9	12/99
57-58	9	8/98	57-58	9	12/99
59	9	8/97	59	9	7/99
60-62	9	6/99	60-62	9	12/99
			62a	9	12/99
67-70	9	6/99	67-70	9	12/99
			70a	9	12/99
DATE: DECEMBER 1999			TO: ALL INCOME MAINTENANCE MANUAL HOLDERS		

This change is being made to add clarifications and make needed corrections based on questions received by the OFS Policy Unit. The changes are briefly described below.

1. Terminology was changed throughout Chapter 9 to reflect use of assistance group or AG instead of benefit group.
2. The Sections on case composition were removed since they referred to the old data systems and have no bearing on RAPIDS entries.
3. Section 9.2, TANF Eligibility Determination Group, has been removed, since it is now obsolete.
4. A new introduction was added to Chapter 9.
5. Clarification was added to Section 9.1,A,1,c(2); 9.1,A,3 (reference added); 9.1,B; 9.1,D (next to last example); 9.4,D (4th example--last example removed); 9.6,C; 9.8,B and C; 9.10,B and C; 9.16,B;
6. Section 9.1,A,2,f-1 was reorganized in an attempt to identify which individuals are simply ineligible for FS, which are disqualified from receiving FS and which are excluded by law. Only those that are excluded by law are now in a chart format. Others are listed individually as some of them were before this change.
7. ABAWD policy was clarified in Section 9.1,A,2,1(2), (4) and (5). In item (5) clarification was added about regaining FS eligibility in order to maintain FS eligibility. In addition, clarification was added that the client must actually have completed a work requirement for 30 days to regain eligibility.
8. The definition of a ABAWD has been changed to reflect age as the only criteria. A person in the same AG with an individual under age 18 is

now considered to be an exempt ABAWD. This was done to match the way RAPIDS captures and reports ABAWD information.

9. Some states have demonstration projects that allow payments to be made to a child's legal guardian, much like foster care payments are made to foster parents. Just like foster children, children for whom guardianship payments are made are considered to be boarders. This is true whether the payment is from WV or any other state. In attempting to discover the source of income for the child, look for guardianship payments made under Title IV-E of the Social Security Act. These are the only payments to which this policy applies.
10. References to AFDC/U throughout Chapter 9 were changed to AFDC Medicaid.
11. Refusing to cooperate with JOBS was removed as a reason to exclude an AG member from Section 9.4,A,3, since AFDC Medicaid has no work requirement and JOBS no longer exists.
12. Section 9.4,A,4 was changed to clarify the assumption of caretaker status for minor parents.
13. A group of Deemed AFDC Medicaid Recipients, those with AFDC/U check amounts of \$1-9\$, was removed from Section 9.5. It is unnecessary since AFDC/U checks are no longer issued.
14. References were added to 9.5,C and D.
15. Clarification was added to Section 9.7,B about how to handle QC, PL and CHIP I children when the parents share joint custody of the child(ren).
16. Section 9.7,C was changed to add an age requirement for the siblings of the QC, PL and CHIP I child.
17. Reference to treatment of Essential Spouses of SSI recipients was added to Section 9.10,A.
18. Information that was in Section 9.12,D was moved to 9.12,A, since the entire Section 9.12,D was removed.
19. Information formerly found in Section 9.17,D (now removed) was moved to a NOTE at the beginning of Section 9.17.
20. Basic Family Unit (BFU) terminology was removed from Section 9.18,C to standardize use of Needs Group for all OFS programs and Medicaid coverage groups. Also, a reference to the old M-219 system was removed.
21. Updates and clarifications to the WV WORKS Section of Chapter 9 were released earlier with Change #143. To further clarify a change made in that release, Section 1.25 contains clarifications about the Caretaker Relative Option.
22. Section 1.2,F has been changed to further clarify ABAWD tracking procedures.

Questions should be directed to the OFS Policy Unit.

- Date on which the client last received or will receive benefits
- Effective date of the termination of benefits

NOTE: The effective date of case closure in West Virginia is the month for which the client last received benefits. This may not be true in other states.

- The individuals included in the benefit
- Whether or not any of the client's last benefits were returned to the agency
- For TANF/WV WORKS cases only: the Worker must determine how many months the client received TANF payments.

NOTE: States have until July, 1997 to convert from AFDC/U to a TANF-funded program. Therefore, for benefits received prior to 7/97, the Worker must also determine how many months of the cash assistance payments were funded under TANF. Appendix C contains information about when other states converted to TANF funding.

- For Food Stamp cases with ABAWDs only: The Worker must contact the other state to determine and record when the individual's 36-month period began, how many months of his 3-month limit without meeting the work requirement he has used, how many months of the 3-consecutive-month period he has used, and if any of the benefits he received were prorated.

NOTE: Counting a month for which benefits were prorated toward the 3-month limit and/or the 2nd 3-month period is an option for each state. The client's previous state of residence may include a month of prorated benefits if the Worker asks only for the number of months of receipt. Therefore, regardless of the option chosen by the other state, the Worker must not count any month for which benefits were prorated.

If he is residing in an ILC, eligibility must be determined according to Section 9.1,A,2,j. If he is residing in an NILC, the time limit does not apply, but he retains the 36-month period he started in the other state.

- Whether or not the client owes a repayment to any Program

Each Program has specific requirements related to receipt of benefits from other states. Refer to Date of Application under each Program section below.

G. CONTINUATION OF THE CASE NUMBER AND TRANSFER OF A CLOSED CASE

Prior to data system entry for disposition of any application, the Worker must determine if there is an existing case number for the client.

on the OFS-AP-1 of the relative with whom the child lives.

- Work Requirements: Explain the purpose of WV WORKS, DCA payments and activity placements. Also explain possible benefits available after ineligibility for WV WORKS such as TM, child care assistance, support service payments, case management, etc.
- Drug Attestation: Form IM-TANF-1 must be completed and signed as part of each application/redetermination for WV WORKS. Failure to complete or sign the form results in ineligibility for the entire AG. All adults normally required to be included must sign the form. If no adult is included in the payment, the caretaker adult(s) must sign for the children.
- Personal Responsibility Contract (PRC): Explanation and completion of the PRC is not required to be part of the intake interview, but it may be done at the same time. See item T below for details about the PRC requirements.
- Repayments: Discuss any outstanding repayments. See item L below.
- Eligibility: Explain beginning date of eligibility and the importance of establishing eligibility as soon as possible.
- Medicaid: Explain that Medicaid eligibility is a separate determination and how and when the medical card is issued, if appropriate.
- Lump Sum: If the client indicates he may be receiving a lump sum payment, explain the lump sum policy.
- Pregnancy: Explain the need for the client to report immediately when anyone in the AG becomes pregnant.
- Caretaker Relative Option

NOTE: When a parent(s) is included with his own child(ren), the OFS-WVW-10 must not be signed. When the AG includes a parent(s), his child(ren) and other children for whom the parent is a specified relative, the parent is required to be included and form OFS-WVW-10 must not be signed. The form is used only when a caretaker relative receives cash assistance for children to whom he is not a parent.

For cases in which the caretaker relative is not a natural or adoptive parent, form OFS-WVW-10 must be explained. The form must be signed and completed prior to approval, but not necessarily during the intake interview. The Worker must explain the option of being included or excluded from the AG and answer the client's questions about the consequences of each choice. Refusal, or other failure, of the caretaker relative to sign the form results in denial of eligibility for the caretaker relative for at least 12 months. Eligibility continues to be denied beyond 12 months, for as long as the caretaker fails to choose. The original form must be filed in the case record and the client must be given a copy. See Section 9.21 for details about the limited choice for the caretaker.

H. DUE DATE OF ADDITIONAL INFORMATION

The client and the Worker agree on the date by which additional verification must be obtained.

I. AGENCY TIME LIMITS

Data system action must be taken to approve, deny or withdraw the application within 30 days of the date of application.

EXCEPTION: When the delay is a result of factors outside the control of the Department and the applicant.

J. AGENCY DELAYS

If an application has not been acted on within the required time limit due to agency error, corrective action must be taken immediately.

If the Department failed to request the necessary verification, the Worker must immediately send a verification checklist or an ES-6 to the client and note that the application is being held in pending status. Because WV WORKS recipients are not automatically eligible for Medicaid and the eligibility decision may require more time, reimbursement for out-of-pocket medical expenses may apply. See Chapter 2.

K. PAYEE

The payee is the individual in whose name the WV WORKS check is written. The payee must use his legal name whenever possible, unless there is some circumstance that justifies the use of another name. If so, the decision to

allow use of another name is made by the Policy Unit, based on information submitted by the district office.

The parent with whom the child is residing is the payee. When the child lives with 2 parents, the parents choose the payee. When the child lives with a parent and a stepparent, the parent is the payee. When the child lives with one relative other than a parent, the specified relative is the payee. When a child lives with two specified relatives other than a parent, they must choose who will be the payee.

NOTE: Payments are not issued to minor parents. Instead, the parent or other responsible adult with whom the minor parent lives, or who supervises the minor parent's living arrangement, is the payee.

When a substitute payee or vendor payment status is appropriate at application, see Chapter 2.

L. REPAYMENT AND PENALTIES

Before the case is approved, the Worker must determine if there is a WV WORKS, TAN or AFDC/U claim outstanding against any member of the AG. If so, the Worker must initiate appropriate repayment procedures prior to approval.

If the client has been making voluntary payments, he must be informed that repayment must be made, when possible, from his check, i.e., recoupment.

When the AG has been sanctioned for failure to cooperate with WV WORKS, the case is subsequently closed and a reapplication made, that AG remains sanctioned until the sanction ends.

9.1 FOOD STAMP ELIGIBILITY DETERMINATION GROUPS 1

A. THE ASSISTANCE GROUP (AG) 1

1. Who Must Be Included 1

2. Who Cannot Be Included 8

3. The Determination Of A Boarder 10

4. Student Eligibility 11

5. Residents Of A Group Living Facility (GLF) . 17

B. THE INCOME GROUP (IG) 19

C. THE NEEDS GROUP (NG) 19

D. EXAMPLES OF AG COMPOSITION 19

9.2 RESERVED FOR FUTURE USE

9.3 MEDICAID ELIGIBILITY DETERMINATION GROUPS 31

9.4 AFDC MEDICAID 32

A. THE ASSISTANCE GROUP (AG) 32

1. Who Must Be Included 32a

2. Who May Choose To Be Included 32a

3. Who Cannot Be Included 32b

4. Treatment Of The Minor Parent (mp) In The AG 32e

B. THE INCOME GROUP (IG) 32f

C. THE NEEDS GROUP (NG) 32g

D. EXAMPLES OF AG COMPOSITION 32g

9.5 DEEMED AFDC MEDICAID RECIPIENTS 33

A. EXTENDED MEDICAID 33

1. The Assistance Group (AG) 33

2. The Income Group (IG) 33

3. The Needs Group (NG) 33

B. CHILDREN COVERED UNDER ADOPTION ASSISTANCE . . . 33

C. CHILDREN COVERED UNDER FOSTER CARE 33

9.6	TRANSITIONAL MEDICAID (TM), PHASES I AND II	34
A.	THE ASSISTANCE GROUP (AG)	34
B.	THE INCOME GROUP (IG)	34
C.	THE NEEDS GROUP (NG)	34
9.7	QUALIFIED, POVERTY-LEVEL AND CHIP I CHILDREN	35
A.	THE ASSISTANCE GROUP (AG)	35
B.	THE INCOME GROUP (IG)	35
C.	THE NEEDS GROUP (NG)	35
9.8	POVERTY-LEVEL PREGNANT WOMEN	37
A.	THE ASSISTANCE GROUP (AG)	37
B.	THE INCOME GROUP (IG)	37
C.	THE NEEDS GROUP (NG)	37
9.9	CONTINUOUSLY ELIGIBLE NEWBORN CHILDREN (CEN)	39
A.	THE ASSISTANCE GROUP (AG)	39
B.	THE INCOME GROUP (IG)	39
C.	THE NEEDS GROUP (NG)	39
9.10	SSI RECIPIENTS	40
A.	THE ASSISTANCE GROUP (AG)	40
B.	THE INCOME GROUP (IG)	40
C.	THE NEEDS GROUP (NG)	40
9.11	DEEMED SSI RECIPIENTS	41
A.	PICKLE AMENDMENT COVERAGE (PAC)	41
1.	The Assistance Group (AG)	41
2.	The Income Group (IG)	41
3.	The Needs Group (NG)	41
B.	ALL OTHERS	42
1.	The Assistance Group (AG)	42
2.	The Income Group (IG)	42
3.	The Needs Group (NG)	42

9.12 QUALIFIED MEDICARE BENEFICIARIES (QMB), SPECIFIED LOW-
INCOME MEDICARE BENEFICIARIES (SLIMB) AND QUALIFIED . 43
INDIVIDUALS (QI-1 AND QI-2)

A. THE ASSISTANCE GROUP (AG) 43

B. THE INCOME GROUP (IG) 43

C. THE NEEDS GROUP (NG) 43

9.13 QUALIFIED DISABLED WORKING INDIVIDUALS (QDWI) 45

A. THE ASSISTANCE GROUP (AG) 45

B. THE INCOME GROUP (IG) 45

C. THE NEEDS GROUP (NG) 45

9.14 ILLEGAL ALIENS - EMERGENCY COVERAGE 46

A. THE ASSISTANCE GROUP (AG) 46

B. THE INCOME GROUP (IG) 46

C. THE NEEDS GROUP (NG) 46

9.15 INDIVIDUALS RECEIVING HOME AND COMMUNITY BASED WAIVER
SERVICES UNDER TITLE XIX WAIVERS 48

9.16 CHILDREN WITH DISABILITIES COMMUNITY SERVICE PROGRAM
(CDCS) 49

A. THE ASSISTANCE GROUP (AG) 49

B. THE INCOME GROUP (IG) 49

C. THE NEEDS GROUP (NG) 49

9.17 AIDS PROGRAM 50

A. THE ASSISTANCE GROUP (AG) 50

B. THE INCOME GROUP (IG) 50

C. THE NEEDS GROUP (NG) 50

9.18 AFDC/U-RELATED MEDICAID 51

 A. THE ASSISTANCE GROUP (AG) 51

 B. THE INCOME GROUP (IG) 51

 C. THE NEEDS GROUP (NG) 52

9.19 SSI-RELATED MEDICAID 57

 A. THE ASSISTANCE GROUP (AG) 57

 B. THE INCOME GROUP (IG) 57

 C. THE NEEDS GROUP (NG) 58

9.20 RESERVED FOR FUTURE USE 59

9.21 WV WORKS ELIGIBILITY DETERMINATION GROUP 60

 A. THE ASSISTANCE GROUP (AG) 60

 1. Who Must Be Included 60

 2. Who May Choose To Be Included 61

 3. Who Cannot Be Included 62

 4. Treatment Of The Minor Parent (mp) In The AG 65

 B. THE INCOME GROUP (IG) 66

 C. THE NEEDS GROUP (NG) 66

 D. EXAMPLES OF AG COMPOSITION 67

This Chapter contains the policy for Food Stamps, WV WORKS and all Medicaid coverage groups. It is used to determine who receives the benefit, whose income assets are counted and whose needs are considered. The income/assets of all persons in the Income Group (IG) is compared to the income/asset limits for the number of persons in the Needs Group (NG). This comparison determines if those in the Assistance Group (AG) are eligible to receive the benefit.

9.1 FOOD STAMP ELIGIBILITY DETERMINATION GROUPS

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

A Food Stamp AG may be composed of any of the following individuals or groups of individuals, provided that such individuals or groups who live together are not residents of institutions or boarding houses.

An individual cannot be a member of more than one Food Stamp benefit group in any month.

EXCEPTION: Shelters for battered women and children. See Chapter 14.

Throughout this Section the word customarily is used to mean over 50% of meals on a monthly basis. When a child is eligible for free or reduced-price meals at school, these meals are considered provided by the person with whom the child resides.

NOTE: For all the following possible AG, an individual who meets the definition of an ABAWD in item j below can only receive AG benefits when he is otherwise eligible and:

- Is meeting the work requirements outlined in item 2 below; or
- Is residing in a Non-Issuance Limited County (NILC); or
- Regains eligibility after meeting the ABAWD work requirement, becoming exempt, or moving to an NILC; or
- Is in the first or second 3-month limit period while not meeting the work requirement or being exempt.

The following shows the make-up of a Food Stamp AG.

a. Individuals Living Alone

These individuals are an AG.

b. Individuals or Groups of Individuals Living With Others

(1) Purchase and Prepare Together

A group of individuals, for whom food is customarily purchased and prepared together is an AG.

(2) Purchase and Prepare Separately

Individuals or groups of individuals living with others, but who customarily purchase food and prepare meals separately are an AG. Customarily purchasing and preparing food separately means that, during the certification period, the client actually purchases and prepares his food separately from the others in the household, except for an occasional shared meal. This occasional sharing of food does not interfere with his separate AG status.

c. Exceptions

The following individuals living with others, or groups of individuals living together, must be considered as customarily purchasing food and preparing meals together, i.e., being in the same AG, even if they do not do so. Two of the following groups show exceptions to the general rule of being in the same AG.

(1) Spouses

For these purposes, spouse means individuals:

- Who are married to each other under state law; or
- Who are living together and are

holding themselves out to the community as husband and wife by representing themselves as such to relatives, friends, neighbors or tradespeople

Spouses must be in the same AG. There are no exceptions.

(2) Children Under Age 18, Not Living With a Parent

Children, under age 18, who are under the parental control of an adult AG member who is not a parent, and the member who exercises parental control, are assumed to purchase and prepare their food together and, therefore, must be in the same AG.

(3) Children Under Age 22, Living With a Parent

Parents living with their natural or adoptive children or stepchildren who are under 22 years of age and such children living with such parents are assumed to purchase and prepare their food together and, therefore, must be in the same AG.

(4) Elderly and Disabled Individuals

Although a group of individuals living together and purchasing food and preparing meals together constitutes a single AG under item b, (1) above, an individual who meets all of the following criteria may have himself, his spouse and children considered a separate Food Stamp AG.

He is:

- At least 60 years old; and
- Is unable to purchase and prepare meals. He must be unable to purchase and prepare meals because he suffers from a disability listed below, or suffers from some other severe, permanent physical or

mental disease or non-disease-related disability.

- Permanent loss of use of both hands, both feet or one hand and one foot.
- Amputation of leg at hip.
- Amputation of leg or foot because of diabetes mellitus or peripheral vascular diseases.
- Total deafness, not correctable by surgery or hearing aid.
- Statutory blindness, except if due to cataracts or detached retina.

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- IQ 59 or less, established after attaining age 16.
- Spinal cord or nerve root lesions resulting in paraplegia or quadriplegia.
- Multiple sclerosis in which there is damage of the nervous system because of scattered areas of inflammation which recurs and has progressed to varied interference with the function of the nervous system, including severe muscle weakness, paralysis and vision and speech defects.
- Muscular dystrophy with irreversible wasting of the muscles with a significant effect on the ability to use the arms and/or legs.
- Impaired renal function due to chronic renal disease, documented by persistent adverse objective findings, resulting in severely reduced function which may require dialysis or kidney transplant.
- Amputation of a limb, current age 55 or older

and

- The gross non-excluded income of the others with whom the individual resides, excluding the individual's own income and the income of his spouse and children, cannot exceed the amount shown in the E & D column of Appendix A of Chapter 10. The individual, his spouse and children are not included in the total count of those residing together, when comparing gross non-excluded income to the amount in column E & D. Only income, not

normally excluded from consideration for the Food Stamp Program, is used to determine the gross income compared to the E & D column amount.

The individual, who meets these three requirements, his spouse and children may be a separate AG, even if living and eating with others.

2. Who Cannot Be Included

The following individuals who reside with an AG are not considered AG members. They are designated as non-AG members.

a. Roomer

An individual(s) to whom a household furnishes lodging for compensation, but not meals. This individual(s) may be a separate AG(s).

b. Boarder

An individual(s) to whom a household furnishes lodging and meals and who pays a reasonable monthly payment for board, may receive Food Stamps as part of the AG with which he lives, if the AG so requests. The following individuals cannot be considered boarders and may not constitute a separate AG, except as specified in item 1,c,(2) and (3).

- The spouse of a member of the household
- Children and parents of a member of the AG, even if the child is age 22 or over
- Individuals furnished only meals and not residing with the household, regardless of the monthly payment made for these meals, may be a separate AG.

- Foster children are considered boarders. They may be included or excluded, depending upon the AG's wishes.
- Individuals furnished meals and lodging, but paying less than a reasonable amount. See item 3. These individuals are considered members of the same AG as the person who provides room and board.

c. Live-in Attendants

Individuals who reside with an AG to provide medical, housekeeping, child care or other similar personal services may be a separate AG. If the live-in attendant is a relative, other than a parent or child, who moved in with the AG to provide these services, the individual is considered a live-in attendant. If the relative lived in the home prior to the need for these services or would live with the AG whether or not the services were provided, the attendant is considered a member of the AG.

NOTE: If the live-in attendant is a parent or child of a member of the AG containing the individual who needs the personal service, the parent/child policy in item 1,c,(3) takes precedence over the live-in attendant policy.

d. Ineligible Aliens

Individuals who do not meet the citizenship or eligible alien status are ineligible to participate in the Program and may not be a separate AG. When a client indicates inability or unwillingness to provide documentation of alien status, that client is classified as an ineligible alien. Eligibility is determined for the remaining AG members. See Chapter 18.

e. Students

Persons who meet the Food Stamp definition of a student are ineligible to participate in the Program and may not be a separate AG.

See item 4 below for the definition of a student and for exceptions to the restriction on student participation.

f. Individuals Excluded By Law

Persons who are excluded by law as found below are ineligible and may not be a separate AG. The periods of ineligibility are as follows:

INDIVIDUALS EXCLUDED BY LAW

REASON FOR EXCLUSION	LENGTH OF EXCLUSION
Receipt of simultaneous multiple benefits as determined by an ADH or conviction in a state or federal court, due to a fraudulent statement with respect to identity or place of residence.	10 years
Conviction in a federal, state or local court of exchanging Food Stamps for illegal drugs, firearms, ammunition or explosives	Permanent
Fleeing to avoid prosecution, or custody/confinement after conviction, for a crime or attempt to commit a crime that is a felony under the law of the place from which the individual is fleeing	Ineligible while identified in this category
Violating a condition of probation or parole which was imposed under federal or state law.	Ineligible as long as the violation continues
Convicted on or after 8/23/96 of trafficking in Food Stamps involving \$500 or more	Permanent
Convicted of a felony offense which occurred on or after 8/23/96 which involved possession, use or distribution of a controlled substance as defined by section 102 (6) of the Controlled Substance Act	Permanent

g. IVP

Persons who have been found guilty of an IPV are ineligible as follows:

- 1st offense: 1 year
- 2nd offense: 2 years
- 3rd offense: Permanent

h. Enumeration

Persons who fail to meet the enumeration requirements as found in Chapter 8 are ineligible until compliance.

i. Unborn Children

The AG cannot receive Food Stamps for an unborn child.

j. Work Requirement Sanctioned Individuals

Persons against whom a sanction is imposed for failure to comply with work requirements found in Chapter 13 may not be separate AGs, even when living with others not affected by the sanction.

k. Those Who Do Not Purchase And Prepare Food Together

Other individuals who share living quarters with the AG, but who do not customarily purchase and prepare food with them. These individuals may apply as a separate AG. However, the parent/child/parental control relationship described in item 1,c,(2) and (3) must be considered.

l. Able-Bodied Adults Without Dependents (ABAWD)

NOTE: All work requirements in Chapter 13 also apply to ABAWDs.

(1) Definition of ABAWD

An ABAWD is any individual age 18 or over, but not yet age 50.

An individual who turns 18 becomes an ABAWD in the month following his birthday. An individual is no longer an ABAWD in the month of his 50th birthday.

(2) Exemptions

Receiving Food Stamps while exempt does not count toward the 3-month limit. An individual is exempt if he:

- Is included in the same AG with an individual under age 18.
- Is responsible for the care of an incapacitated person, whether or not the person receiving the care resides with the client and whether or not the incapacitate person is a member of the Food Samp AG; or
- Is receiving UCI as the result of registering with BEP; This includes persons receiving benefits under the Trade Readjustment Act (TRA); or
- Is medically certified as physically or mentally unfit for employment according to the provisions in Section 12.15; or
- Is a pregnant woman, regardless of the expected date of delivery; or
- Is a regular participant in a drug addiction or alcoholic treatment and rehabilitation program either on a resident or non-resident basis; or
- Is a student enrolled at least half-time in any recognized school, training program or institution of higher education. A student must meet one of the exceptions to the restriction on student participation listed in Chapter 9; or
- Resides in an ILC and is age 48 or over; or

- Is hired for work at least 30 hours per week; or
- Is hired for work paying the equivalent of at least 30 hours times the minimum wage per week.

NOTE: The last 2 exemptions qualify the individual to participate immediately, if otherwise eligible. Because this is an exemption, the individual is not required to complete any work hours to become eligible again. However, these exemptions do not qualify the individual for the additional 3-month period specified in item (7) below until he has worked 80 hours in 30 days or participated in a work or training program for a month.

EXAMPLE: An ABAWD residing in an ILC is a recipient of Food Stamps on December 1, 1996 with a redetermination due in March, 1997. At the March redetermination, it is determined the individual did not meet the ABAWD work requirement and was not exempt during December, January and February. His eligibility ends effective March, 1997.

EXAMPLE: An ABAWD receives his first full month's benefits in March, 1997. His 36-month period begins March, 1997. He is certified through May, when it is determined he did not meet the ABAWD work requirement for March, April and May, 1997. His eligibility ends effective May, 1997.

EXAMPLE: The same individual in the example above moves to an NILC and applies for Food Stamps in August, 1997. If otherwise eligible, he may receive Food Stamps while he resides in the NILC or while the county remains an NILC.

EXAMPLE: An ABAWD receives Food Stamps in January and February, 1997 without meeting the work requirement. These are his first and second months of eligibility. He finds part-time

employment of 20 hours per week in March. He is otherwise eligible and receives Food Stamps until October, 1997, when his job ends. He then receives Food Stamps in November, 1997, his third month of eligibility without meeting the work requirements. November, 1997 is his last month of eligibility.

EXAMPLE: The same individual in the example above has worked 80 hours between January 1 and January 31, 1998. If otherwise eligible, he may receive Food Stamps starting in February. On May 20, 1998, he loses the job. If otherwise eligible, he is eligible for up to 3 consecutive months, June, July and August, without meeting the ABAWD work requirement or being otherwise exempt.

(3) ABAWD Work Requirement

An ABAWD must meet work requirements to be eligible. As long as an ABAWD is exempt as found in item (2) above or meets either of the 2 requirements below, he may receive Food Stamps, if otherwise eligible. Otherwise, he is ineligible once he has received Food Stamps for 3 months without being exempt or meeting the work requirement. The 3 months need not be consecutive and includes Food Stamp benefits received from another state. The work requirement is met by either:

- Working at least 20 hours per week, averaged monthly; or
- Participating in a work program such as, but not limited to, JTPA, FSE&T, or a refugee resettlement program, at least 20 hours per week, averaged monthly. This does not include job search or job search training as part of a work program.

Months in which the client received prorated benefits do not count toward the 3-month limit. In addition, when circumstances change so that an ILC ABAWD, who has been exempt or meeting the requirement is no longer exempt or meeting the requirement, the month in which the change occurs is not counted toward the 3-month limit. This is true even if he has already received a full month's issuance for that month.

EXAMPLE: An ABAWD who works 25 hours per week loses his job the second week of February. February is not counted toward his 3-month limit.

EXAMPLE: An ABAWD applies on January 15 and is approved for a prorated allotment. January is not counted toward his 3-month limit.

- (4) Issuance Limited Counties (ILC) and Non-Issuance Limited Counties (NILC)

The following are ILC counties and the only ones in which the 3-month limit applies.

Berkeley	Kanawha	Monroe
Cabell	Mercer	Ohio
Hampshire	Mineral	Pendleton
Hardy	Monongalia	Putnam
Jefferson	Morgan	Wood

All other counties are Non-Issuance Limited Counties (NILC).

NOTE: When an NILC becomes an ILC, the first month of the client's 3-month limit is the month in which the county becomes an ILC.

- (5) Determining The 36-Month Period

The first 36-month period is determined as follows:

residence, the first 36-month period begins December, 1996 and ends November, 1999.

- For all individuals who applied after December 1, 1996, regardless of the county or state of residence, the first 36-month period begins with the first month for which he receives full benefits.

Once the 36-month period begins, it remains fixed, regardless of the ABAWD's recipient status or the county or state of residence.

EXAMPLE: A non-exempt ABAWD resides in an ILC and was receiving benefits on December 1, 1996. His 36-month period begins December 1, 1996 and ends November 30, 1999. During this period, he is eligible to receive benefits for 3 months without meeting the work requirement.

EXAMPLE: A non-exempt ABAWD in an ILC applies and receives his first full month's benefits in March, 1997. His 36-month period begins March, 1997 and ends February, 2000. He meets the work requirement each month from March, 1997 through February, 1998. He does not meet the work requirement in March and April, 1998, but does meet it in May and June. He does not work in July, but receives full benefits. July is the 3rd of his 3-month eligibility period.

EXAMPLE: An ABAWD resides in an NILC and received a full month's benefits in December, 1996. His 36-month period begins December 1, 1996. He moves to an ILC on September 15, 1997. He becomes subject to the work requirement and 3-month limit. September does not count toward the 3-month limit since he only lived in the ILC for a partial month. He participates for 3 months without meeting the ABAWD work requirement in October, November and December, 1997. His eligibility ends effective December, 1997. He moves back to an NILC in

January, 1998 and becomes eligible. His 36-month period continues through November, 1999.

EXAMPLE: A married couple with two children are recipients on December 1, 1996. The 36-month period begins on December 1, 1996 although neither adult is an ABAWD. In June, 1997, the wife moves out, taking the children with her. If otherwise eligible, the husband is subject to the 3-month limit beginning July, 1997, since July is the first month of non-exempt ABAWD benefits in the 36-month period which began December, 1996.

(6) Regaining Eligibility

An individual whose benefits are denied or terminated under this policy can become eligible again when:

- He no longer meets the definition of an ABAWD; or
- He resides in an NILC; or
- He has met the ABAWD work requirement as specified in item (3) for a 30-day period. This does not have to be the 30 days immediately preceding the date of application.
- He becomes exempt as specified in item (2) above; or

NOTE: Individuals who regain eligibility by one of the above methods must maintain eligibility monthly by meeting the ABAWD work requirement in item (2) above, by continuing to be exempt, by residing in an NILC or by continuing not to meet the definition of an ABAWD.

- He has worked 80 hours in a 30-day period. This does not have to be the 30 days immediately preceding the date of application; or he participates for a month in employment or training activities.

NOTE: Only individuals who have regained eligibility in this manner qualify for the additional 3-month period described in item (7) below.

(7) Qualifying For An Additional 3-Month Period Without Meeting the Work Requirement or Being Exempt

When eligibility is regained by having worked 80 hours in a 30-day period, or by participating for a month in an employment or training program, the individual is eligible to receive FS for up to 3 consecutive months without meeting the work requirement or being exempt. Prorated months do not count toward the 3-consecutive-month limit. This is the last time in the 36-month period that he may be eligible without meeting the work requirement or being exempt. Prorated months do not count toward the 3 consecutive month limit. After this second 3-month limit expires, he may only become eligible again by complying with the work requirement each month, residing in an NILC, or becoming exempt as specified in item (2) above.

EXAMPLE: An ABAWD uses his 3 months of eligibility in May, June and July, 1997, without meeting the work requirement and his case is closed effective July. He completes 80 hours of work between August 10 and August 31. He reapplies September 1. If otherwise eligible, may participate and has gained eligibility for the additional period of up to 3 consecutive months while not meeting the work requirement.

EXAMPLE: Same as above example except that he reapplies August 8 and will not complete 80 hours of work until September 9. He is not eligible to receive Food Stamps until September 9, when he has completed 80 hours of work.

3. The Determination Of A Boarder

NOTE: See item A,2 above to determine who cannot be considered a boarder.

Although boarders are considered non-AG members, they may not receive Food Stamps as a separate AG. They may, at the request of the AG, be included with them. To be a boarder, it is necessary to determine if an individual pays a reasonable monthly payment for board.

A reasonable monthly payment is defined as one of the following:

- More than two meals daily: An amount equal to or exceeding the maximum monthly coupon allotment for the appropriate size of the boarder AG; or
- Two meals or less daily: An amount equal to or exceeding two-thirds of the monthly coupon allotment for the appropriate size of the boarder AG.

NOTE: Foster children and children for whom guardianship payments are made under any state's demonstration project, are considered boarders, regardless of the amount of monthly payment.

4. Student Eligibility

In applying the student policy, it is first necessary to determine if any member of the Food Stamp AG is a student. If so, whether or not the student policy applies must be determined as found below in item a.

Student participation in the Food Stamp Program is limited to individuals who meet the criteria in item b.

a. Determination of Applicability of the Student Policy

If a member of the Food Stamp AG is a student and meets any one of the following criteria, he is not considered a student for Food Stamp purposes, and eligibility is determined as for any other individual. He does not have to meet one of the exceptions to the restriction on student eligibility in order to qualify.

- He is under age 18.
- He is age 50 or over.
- He is physically or mentally disabled. See Chapter 12.
- He is attending high school.

- He is attending school less than half-time.
- He is enrolled full-time in a school or training program which does not meet the definition of an institution of higher education. Vocational schools which are a substitute for high school are not considered institutions of higher education.

An institution of higher education is a business, technical, trade or vocational school that normally requires a high school diploma or its equivalent for enrollment in the curriculum or a college or university that offers degree programs whether or not a high school diploma is required for a particular curriculum. For this definition, a college includes a junior, community, 2-year or 4-year college.

- He is participating in an on-the-job training program. This does not include the practical experience requirements which may be part of some courses of study, i.e., student teaching, internships, etc.

A person is considered to be participating in on-the-job training, and thus not considered a student, during the period of time that he is being trained by the employer. During the period of time that he is only attending classes, he is considered a student.

EXAMPLE: Mr. A is in a program which requires that he attend classes full-time at an educational institution for 10 weeks and then be trained by an employer for an additional 10 weeks. Mr. A is considered to be participating in on-the-job training only during the latter 10-week period. During the 10-

EXAMPLE: The situation is the same as the previous example, except that the college student is 17 years old. He is eligible to be included in the Food Stamp AG because he is under age 18.

EXAMPLE: A woman, who is a student, wants Food Stamps for herself and her 10-year-old child. While the student is at school, her mother who lives across town takes care of the child. The student has the responsibility for the care of a dependent child between the ages of 6 and 12. Adequate child care is available, but because the student is a single parent, she qualifies for participation.

EXAMPLE: A man, woman and their 10-year-old child apply for Food Stamps. While the woman, who is a student, is in school, her mother, who lives across town, takes care of the child. She is only willing to keep her while she is in classes, but not while she works. The man works and there is no other available child care. The student qualifies to be included due to the lack of adequate child care.

EXAMPLE: Same situation as above, except that the grandmother is willing to keep the child for as long as necessary for the woman to work. The exception is not met, so the student cannot receive Food Stamps.

EXAMPLE: A FS AG consists of a child (age 10), his mother and his stepfather. The stepfather is a full-time student and is primarily responsible for the care of the child due to the mother's disability. The mother is, however, able to look after the child when the stepfather is in school. The stepfather does not qualify for an exception to the student policy based on caring for a child. To be included he must meet another exception.

EXAMPLE: Same situation as above except that the mother is not able to look after the child when the stepfather is in school. There is no other child care available. The stepfather qualifies for an exception based on having primary responsibility for the care of a child between 6 and 12 without adequate child care available.

EXAMPLE: A married woman separates from her husband and she and her daughter move out of the home. The woman is in college full-time, and her mother cares for her 10-year-old child while she goes to school. Because she is a single parent enrolled in school full-time, she qualifies for an exception to the student policy.

d. Definition of Enrollment and Participation

Enrollment, for the purpose of being enrolled in an institution of higher education, is defined as continuing during periods of vacation or recess. Students eligible during the school year continue to be eligible, providing all other eligibility factors are met, during the summer months. Students not eligible during the school year remain ineligible during vacation periods, unless they actually obtain work or meet other criteria outlined in item b to determine student eligibility. Students who fail to maintain continuous enrollment status, or who do not intend to register for the normal school session, excluding summer school, lose their student status and have the same eligibility requirements as any other Food Stamp client.

The residents of a GLF may each be a separate AG or may be combined in one AG, depending on the wishes of the GLF. When the GLF is the authorized representative, the individuals must be approved as one-person AGs.

B. THE INCOME GROUP (IG)

The income group includes all AG members and all individuals who are disqualified or excluded by law, who live with the AG. See Section 10.4 to determine how to count the income.

C. THE NEEDS GROUP (NG)

The income limit for the number of people in the AG is used to determine eligibility and the amount of the benefit.

Normally all AG members are included in one case number. However, some Food Stamp AG members may be eligible for other benefits which, due to data system limitations, must be issued in another case number.

D. EXAMPLES OF AG COMPOSITION

EXAMPLE: Miss A, age 20, lives with her parents. She is unmarried, has no children and is employed. She purchases food and prepares her meals separately. Because she is under age 22, Miss A must be in an AG with her parents.

EXAMPLE: Miss B, age 25, lives with her mother. She purchases food and prepares meals separately. Because she is over age 21 and purchases and prepares meals separately she is a separate AG.

EXAMPLE: Same situation as the previous example, except that Miss B purchases food and prepares meals with her mother. Miss B and her mother must be in an AG together.

EXAMPLE: Joan C, age 17, is a high school student who is employed part-time. She lives with her aunt, age 36, who exercises parental control over her. Joan and her aunt must be included in an AG together.

EXAMPLE: Tom D, age 17, and Tim D, age 18, are brothers. Their parents are deceased and the brothers live together. They purchase and prepare meals separately. They each qualify as a separate AG as they do not live with a parent or any other adult who exercises parental control.

EXAMPLE: Helen E, age 27, with 2 children, ages 1 and 2, moves back in with her parents after she is divorced. The grandmother cares for the children and feeds them their meals. The daughter works at night and eats separately. The daughter and her children are an AG, but the grandmother wants the children included with her because she feeds them their meals. Children under age 22 and their parents must be in the same AG, so the two AGs are as follows: grandmother and grandfather in one; daughter and her children in another.

EXAMPLE: Mr. F has been laid off. He and his family move in with friends. The friends are providing them all their meals since Mr. F and his family have no income. Mr. F indicates that the only reason they are not purchasing and preparing their food separately from their friends is that they have no money. Once they receive Food Stamps they will purchase and prepare meals separately. They qualify as a separate AG. The Worker may set a control to check with the clients after they begin receiving Food Stamps to confirm the situation.

EXAMPLE: Same situation as the previous example, except that the client indicates his family will continue to purchase and prepare food with his friends, even after receipt of Food Stamps. The F family and their friends must be in the same AG.

EXAMPLE: Mr. and Mrs. G, both age 35, live with Mr. G's mother. They purchase food and prepare meals separately from the mother. Separate AG status is approved. The assets of the mother make her ineligible for Food Stamps, but a case is approved for Mr. and Mrs. G.

EXAMPLE: Mr. and Mrs. H, ages 27 and 30, live with her elderly and disabled mother. They purchase food and prepare meals together. The elderly and disabled requirements are met, so two AG's are established: one for Mr. and Mrs. H and one for the elderly and disabled mother.

EXAMPLE: Mr. I, age 25, lives with his parents and meets the definition of a boarder. Because of the parent/child relationship, Mr. I. cannot be considered a boarder, even though he is over age 21. He may be included in an AG with his parents if they so request.

EXAMPLE: Mrs. J has two children, John and Jane. Jane attends school in another town where special education classes are taught. During the week she lives with Mrs. K and attends school, where she receives free breakfasts and lunches. Food for her is customarily purchased and prepared with Mrs. K. In order to receive FS, Jane must be included in an AG with Mrs. K. She cannot be included with her mother and brother because she customarily purchases and prepares food with Mrs. K.

EXAMPLE: Mr. L. works out of state and comes home on weekends and holidays. When he returns to West Virginia, he lives with his wife and 3 children who receive Food Stamps. He is not eligible to be included in the AG with his wife and children, because his food is not customarily purchased and prepared with his family's. Only the amount of income he makes available to his family is counted as income.

9.2 RESERVED FOR FUTURE USE

DUE TO THE DELETION OF SECTION 9.2,
THE NEXT PAGE IS P. 31.

9.3 MEDICAID ELIGIBILITY DETERMINATION GROUPS

The Medicaid AG is composed of the individual(s) who meets the eligibility requirements for coverage under a specific Medicaid coverage group. However, the income of the AG does not determine financial eligibility for all coverage groups. Some coverage groups require the determination of an Income Group to determine countable income and a Needs Group for comparison to the appropriate needs standard to determine financial eligibility. The case in which the AG member(s) receives coverage may be composed of eligible AG members of one or more coverage groups.

The criteria for all of these groups is found in this Section.

9.4 AFDC MEDICAID

Those who are eligible to receive AFDC Medicaid are those who would have qualified for an AFDC/U payment when the Program was active. For families that receive WV WORKS payments, Medicaid eligibility is not automatic. In order to qualify for AFDC Medicaid, each individual must be evaluated according to the criteria of the former AFDC/U Program. Only those WV WORKS recipients who also meet AFDC/U eligibility requirements are eligible for AFDC Medicaid. All others must be evaluated according to the eligibility criteria of all other coverage groups to determine Medicaid eligibility.

In addition to those individuals who receive WV WORKS, there may be others in the home who are not eligible for WV WORKS, but who would have been eligible to be included in an AFDC/U payment. These individuals must be evaluated for AFDC Medicaid. This also applies to any Medicaid applicant whether or not anyone in the home receives, or has applied for, WV WORKS.

Even though eligibility must be determined for each individual, income and asset eligibility are determined based on the circumstances of the Income Group. A deprivation factor must exist for each AFDC Medicaid-eligible child, the child must live with a specified relative and the individual must be eligible to be included in the AG, according to AFDC/U standards.

A. THE ASSISTANCE GROUP (AG)

NOTE: Whether an individual has earned or unearned income, other than SSI benefits, sufficient to meet his needs is not a factor to consider when determining if the individual is eligible to be included in the AG.

The process of determining who must be included in the AG begins with the child for whom AFDC Medicaid is sought. It is the child who draws his parent(s) and blood-related siblings into the AG, rather than the parent who draws his child into the AG. In addition, when two parents each have their own children and a common child, it is not the fact that the parents have a common child that determines AG composition. Instead, it is the fact that the common child is a blood-related sibling to each group of children that requires all of the children to be included in the same AG, if otherwise eligible. Otherwise eligible, for the purpose of this Section (9.4) only, means that a deprivation factor exists and the child lives with a specified relative. A child may not be excluded from the AG solely for financial reasons.

The AFDC Medicaid AG is composed of eligible children and their parent(s) or another specified relative.

1. Who Must Be Included

The following individuals are required to be included:

- All otherwise eligible dependent children and their otherwise eligible parent(s) who are living in the same household must be included in the AG. Parent is defined as a natural or adoptive parent. See Chapter 15 for the definition of a dependent child.
- All otherwise eligible blood-related or adoptive siblings who are living in the same household must be included in the same AG. Stepbrothers and stepsisters are not blood-related and, therefore, are not included in the AG.
- All otherwise eligible adoptive siblings who receive federal, state or local adoption assistance, when the AFDC/U check amount would remain the same or increase. See item 3 for income calculations.

NOTE: When an individual is required to be in two or more AGs, the AGs must be combined.

When an individual, not related as a parent, a dependent minor child or a minor sibling to a member of an AFDC Medicaid AG, lives in the household and applies for Medicaid, eligibility is determined separately.

2. Who May Choose To Be Included

The following individuals may choose to be included:

- One caretaker relative, other than natural or adoptive parents, can choose to be either included or excluded from the AG. If included, his non-excluded income and assets must be considered.
- The caretaker relative, who is otherwise eligible, when the only dependent child(ren) in the home receives federal, State or local foster care, adoption assistance payments or SSI. The needs and income

of the child are not considered when determining the amount of the benefit. The relative is treated like a parent, except that he may choose to be excluded at any time.

There are no restrictions on the number of times or when the individual may choose to be included or excluded.

3. Who Cannot Be Included

The following situations result in ineligibility for the individual who meets at least one of the following criteria. However, when all members of the AG meet any of the criteria listed below the entire case is ineligible. In addition, when all otherwise-eligible children meet any of the criteria listed below, except receipt of SSI, foster care or adoption assistance, the entire case is ineligible.

- Parents and siblings who are SSI recipients. The caretaker relative may receive AFDC Medicaid when there are no children in the AG, if the children are ineligible for AFDC Medicaid only because they are SSI recipients.
- Parents and siblings who are aliens and are ineligible because they have been sponsored by a private or public agency or organization or because of deeming income from sponsor to alien.
- Parents and siblings who are aliens and are ineligible because they do not meet the citizenship and alienage requirements.
- A child who is a recipient of federal, state or local foster care maintenance payments.
- A child of a minor parent, when the minor parent is a recipient of federal foster care payments.
- A child who is a recipient of federal, state or local adoption assistance, unless the exclusion of the child reduces the amount of payment the AG would have received.

When the child is included in the AG, any portion of the adoption assistance which meets any of the following criteria is excluded:

- The adoption assistance is for a different purpose than the AFDC/U check would have been, i.e., vocational rehabilitation; or
- The adoption assistance is for goods or services not included in the State's Standard of Need, i.e., money for special training or for medical care not provided for recipients of AFDC Medicaid; or
- The adoption assistance makes up the difference between the State's payment standard and the Standard of Need.

NOTE: Any portion of the adoption assistance which is excluded, using the above criteria, is also excluded prior to determining if the AFDC/U benefit would have been reduced if the needs of the adopted child are included.

NOTE: West Virginia's adoption assistance payments do not meet the above criteria.

To determine whether to exclude the adopted child, complete the following steps:

Step 1: Determine the amount of the benefit, excluding the needs of the adopted child.

Step 2: Determine the amount of the benefit, including the needs and non-excluded income of the adopted child.

If the amount in Step 2 is less than the amount in Step 1, the adopted child must be excluded from the AG.

If the amount in Step 2 is greater than the amount in Step 1, the adopted child must be included in the benefit group.

EXAMPLE: Mr. and Mrs. T are eligible for \$360 from the former AFDC Program for themselves and their three children. They adopt Sam and he receives \$200 non-excluded adoption assistance.

Step 1: \$360-AFDC AG of 5, excluding Sam

Step 2: Sam's \$200 non-excluded adoption assistance reduces the amount of AFDC a 6-person AG would receive from \$413 to \$213.

Because \$213 is less than \$360, and the benefit is reduced, Sam must be excluded from the AG.

EXAMPLE: Same as the preceding example, except that, Sam receives non-excluded adoption assistance of \$50.

Step 1: \$360 AFDC AG for 5, excluding Sam

Step 2: Sam's \$50 non-excluded adoption assistance reduces the AFDC 6 person AG payment of \$413 to \$363.

Because \$363 is greater than \$360, and the benefit is not reduced, Sam is included in the AG.

- Individuals who are ineligible due to failure to fulfill an eligibility requirement. This includes the following individuals:
 - The specified relative who fails to cooperate with BCSE medical support requirements without good cause, or who, after assigning rights, fails to cooperate without good cause
 - The individual who fails to meet the enumeration requirement
 - The mandatory referral to DRS who refuses referral or services, except surgery, without good cause
 - The caretaker relative, who is not a parent of the dependent child and who fails, without good cause, to apply for and accept a potential resource for which he may be eligible.
- Parents and siblings who are ineligible due to receipt of a lump sum

4. Treatment Of The Minor Parent (mp) In The AG

Treatment of the minor parent (mp) in the AG requires special consideration, depending upon whether he is under the care and control of the caretaker relative, or whether he has care and control of his own child.

Care and control is defined as providing or making provision for the day-to-day supervision of the child. Care and control may include, but is not limited to, the following:

- Managing the income of the child. This may include the payment of shelter expenses and the purchase of food, clothing, or incidentals for the child.
- Day-to-day care which may include meal preparation, feeding, dressing, bathing and supervision of activities
- Responsibility for obtaining medical treatment, including making appointments for and attending physician or clinic visits, and supervising the administration of prescribed treatment
- Responsibility for educational activities, such as making decisions about school enrollment, attending conferences or being listed as a contact person

The decision regarding care and control must be made on a case-by-case basis. If the Worker cannot make a decision using the above criteria, the Supervisor makes the decision.

A minor parent (mp) is treated as a dependent child in the AG when:

- An application is made by a caretaker relative who has care and control of both the mp and her child.
- An application is made for the mp only by a caretaker relative who has care and control of the mp.

NOTE: The mp who lives with a spouse cannot be considered a dependent child.

NOTE: When the mp is a dependent child, she must be included on the AG with her dependent blood-related siblings who are otherwise eligible.

The mp is treated as the caretaker relative anytime she has care and control of her own child.

NOTE: When the mp and the legal father of the child live together, it is assumed that they are the caretakers of their child. When the MP has more than one child and all of the children do not have the same father, the mp is assumed to be the caretaker of all the children as long as the legal father of one child lives in the home. However, when the mp lives with a spouse who is not the legal father of the child, or any of the children, it is not assumed that the mp is the caretaker of the child.

When an individual in the home, other than the mp, has care and control of the mp's child and applies for AFDC Medicaid for the child, the mp who lives in the home must be included in the AG because she is the parent of the child, not because she is the caretaker relative. In this situation, the mp is considered to be the non-caretaker parent. The individual who has care and control of the mp's child is the caretaker relative of the child.

NOTE: The mp must be treated the same for the Income Group and for the AG, i.e., when the mp is treated as a dependent child in the AG, the mp's own income is treated as that of a child. When the mp is treated as a caretaker relative or a non-caretaker parent, the income is treated as that of an adult.

B. THE INCOME GROUP (IG)

The non-excluded income of all AG members is counted.

The non-excluded income of the following individuals must be counted when determining eligibility, but not when determining need:

- The sanctioned individual
- The legal stepparent
- The spouse of a non-parent caretaker relative, when the non-parent caretaker is included in the AG

- The Major Parent who lives with a minor parent, when the minor parent is a caretaker relative or a non-caretaker parent

See Chapter 10 to determine how the income is counted.

C. THE NEEDS GROUP (NG)

Countable income is compared to the income limits for the number of persons in the AG to determine eligibility and the amount of the benefit.

D. EXAMPLES OF AG COMPOSITION

EXAMPLE: Household consists of Ms. A and her two dependent children. All are included in the AG.

EXAMPLE: Same as previous example, except that one child receives \$200 VA benefits each month. All are included in the AG, and \$200 is counted as income.

EXAMPLE: Household consists of Ms. B and her two nephews who are blood-related siblings. Both children are included. Mrs. B can choose to be either included or excluded. If she is included, her income is counted.

EXAMPLE: Household consists of Mr. and Mrs. C, their two children, and her child from a previous marriage. Mr. C is employed full-time. Therefore, he and his children are not eligible to be included because there is no deprivation factor. The AG consists of Mrs. C and her child. Mr. C's income is deemed to the AG according to instructions in Chapter 10. In addition, Mr. C's assets are considered when determining eligibility, since Mrs. C is included in the AG. See Chapter 11.

EXAMPLE: Household consists of Mr. and Mrs. D and their three children. One of the three children receives SSI. The AG consists of Mr. and Mrs. D and the two dependent children who do not receive SSI. The SSI child is not included in the AG and the SSI income is not counted.

EXAMPLE: Household consists of Mr. and Mrs. E, Mr. E's two children from a previous marriage and Mrs. E's child from a previous marriage. Mr. E and his two children are included in one AG. A separate AG is established for Mrs. E and her child.

EXAMPLE: Household consists of Mr. and Mrs. F, their two children and Mrs. F's niece. Mr. and Mrs. F and their children are in one AG. A separate AG is established for Mrs. F's niece.

EXAMPLE: Household consists of Mrs. G and her daughter Miss G. Mrs. G and her daughter receive AFDC Medicaid. After the birth of Miss G's child, Mrs. G seeks AFDC Medicaid for the child. Because the grandmother, the minor mother and the minor mother's child are all seeking AFDC Medicaid, the Worker must determine who is exercising responsibility for the care and control of Miss G's child.

If Miss G is the caretaker, the AG consists of Miss G and her child. Miss G is included in the AG as the caretaker relative. Mrs. G is no longer eligible because she has no dependent child.

If Mrs. G is the caretaker of Miss G's child, Miss G is still required to be included in the AG as the non-caretaker parent, and is treated as an adult.

If Mrs. G is the caretaker for both Miss G and Miss G's child, and applies for both as such, Miss G and her child are both treated as dependent children.

EXAMPLE: Household consists of Mrs. I and her two sons who receive AFDC Medicaid. Mrs. I's daughter Miss I, a minor parent, returns to the home with her child. Miss I has been living independently with her child, and receives AFDC Medicaid. After she returns home, Miss I continues to have responsibility for the care and control of her child. She and her child are a separate AG.

EXAMPLE: Household consists of Mr. J, his wife and her two children from a previous marriage. Mrs. J and her two children receive AFDC Medicaid.

Mr. J's ex-wife and her two children move into Mr. J's home and apply for AFDC Medicaid. Mr. J is the father of his ex-wife's children and meets the definition of an unemployed parent.

Mrs. J and her two children are included in one AG. A separate AG is established for Mr. J, his ex-wife and their two children.

EXAMPLE: Household consists of Mrs. K, her daughter Miss K, who is a dependent child, and Miss K's child. Mrs. K adopts Miss K's child and applies for AFDC Medicaid for her adopted child. The AG consists of Mrs. K, her adopted child and the natural mother, Miss K. Miss K, because she is a dependent child, is included as a sibling of the child adopted by her mother, Mrs. K.

EXAMPLE: A WV WORKS household consists of Mr. and Mrs. L and their 4 children. Mr. L was convicted of a felony for selling illegal drugs on 8/23/96. Mrs. L and the children are eligible for WV WORKS. Mr. L is not eligible for WV WORKS, but he meets the AFDC Medicaid definition of an unemployed parent. He also is otherwise eligible under all other AFDC Medicaid criteria. Because Mr. L would have been eligible for an AFDC check, Mr. L is eligible for AFDC Medicaid coverage only. In addition, due to Mr. L's deprivation factor, Mrs. L and the children also meet the requirements for being included in the AFDC Medicaid AG. Mr. L's ineligibility for WV WORKS has no bearing on his eligibility for AFDC Medicaid.

9.5 DEEMED AFDC MEDICAID RECIPIENTS

A. EXTENDED MEDICAID

1. The Assistance Group (AG)

All individuals, who are members of the AFDC Medicaid AG when the case becomes ineligible must be included in the AG. When an individual who would normally be required to be in the AG returns to the home, the returning individual is added to the Extended Medicaid AG.

2. The Income Group (IG)

Extended Medicaid recipients become eligible based on financial ineligibility for AFDC Medicaid. Therefore, no other financial test is required.

3. The Needs Group (NG)

No needs test is applied.

B. CHILDREN COVERED UNDER ADOPTION ASSISTANCE

These cases are managed by the Office of Social Services. When the child also receives SSI, see Chapter 16.

C. CHILDREN COVERED UNDER FOSTER CARE

These cases are managed by the Office of Social Services. When the foster child also receives SSI, see Chapter 16.

9.6 TRANSITIONAL MEDICAID (TM), PHASES I and II

A. THE AG ASSISTANCE GROUP (AG)

1. Who Must Be Included

The following persons must be included in the AG:

- All individuals, regardless of WV WORKS receipt, who meet the requirements for TM, Phase I or II. See Chapter 16.
- An individual who joins the household during either TM Phase I or II, who is otherwise AFDC Medicaid eligible, and who would be a mandatory AFDC Medicaid AG member, if the family were applying for AFDC Medicaid in the current month, i.e., a child is born or a parent or child returns to the home and would be a mandatory AFDC Medicaid AG member.

2. Who Cannot Be Included

- SSI Recipients
- Individuals sanctioned by BCSE for non-cooperation in obtaining medical support
- Individuals who are otherwise ineligible for AFDC Medicaid. See Section 9.4.

B. THE INCOME GROUP (IG)

The non-excluded income of the AG and sanctioned individuals is used when determining ineligibility for AFDC Medicaid and, therefore, eligibility for TM. The income of the same individuals is used to determine if income exceeds 185% FPL for TM, Phase II.

C. THE NEEDS GROUP (NG)

Countable income is compared to the income limit for the number in the AG to determine eligibility for TM, Phase II. There is no income test for Phase I.

9.7 QUALIFIED, POVERTY-LEVEL AND CHIP I CHILDREN

NOTE: SSI recipients, whether they are adults or children, are not included in the AG, Income or Needs Group.

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The Qualified, Poverty-Level or CHIP I child must be included.

2. Who Cannot Be Included

Only the Qualified, Poverty-Level or CHIP I child is included.

B. THE INCOME GROUP (IG)

The income of the following individuals is used to determine the child's eligibility:

- The child
- The child's mother, if living in the home
- The child's legal father, if living in the home
- The child's legal spouse, if living in the home

NOTE: In cases involving joint custody of a child when the child resides with each parent 50% of the time, the income of both parents is counted for the child. In joint custody cases involving more time with one parent than the other, only the income of the parent with whom the child resides the majority of the time, is counted.

C. THE NEEDS GROUPS (NG)

The needs of the following individuals are used to determine the child's eligibility.

- The child
- The child's mother, if living in the home
- The child's legal father, if living in the home
- The child's legal spouse, if living in the home

- The child's blood-related or adopted siblings who are under age 19, regardless of school attendance or course completion date, if living in the home

Countable income is compared to the income limit for the number of persons in the Needs Group to determine financial eligibility.

9.8 POVERTY-LEVEL PREGNANT WOMEN

NOTE: SSI recipients, whether they are adults or children, are not included in the AG, Income or Needs Group.

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The pregnant woman must be included.

2. Who Cannot Be Included

Only the pregnant woman is included. The unborn child(ren) is not included.

B. THE INCOME GROUP (IG)

The income of the following individuals is used to determine eligibility for the Poverty-Level pregnant woman:

- The pregnant woman
- The legal father of the unborn child, if living in the home, including the legal father who is court-ordered to perform unpaid public work or community service.
- The parent(s) of an under-age-18 pregnant woman when the pregnant woman lives with her parent(s).

See Chapter 10 to determine how the income is counted.

C. THE NEEDS GROUP (NG)

The needs of the following individuals are included in determining eligibility for the Poverty-Level pregnant woman:

- The pregnant woman
- The unborn child or children, when a multiple birth is medically verified
- The legal father of the unborn child, if living in the home. However, he is not included if he is court-ordered to perform unpaid public work or community service.
- Children of the pregnant woman and other blood-related siblings of the unborn child, up to age 19, regardless of school attendance.

Do not include the parent(s) or sibling(s) of the pregnant woman who is under age 18.

Countable income is compared to the income limit for the number of persons in the Needs Group to determine financial eligibility.

9.9 CONTINUOUSLY ELIGIBLE NEWBORN CHILDREN (CEN)

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The CEN must be included in the AG.

2. Who Cannot Be Included

The CEN is the only person who is included.

B. THE INCOME GROUP (IG)

No income determination is required.

C. THE NEEDS GROUP (NG)

No need determination is required.

9.10 SSI RECIPIENTS

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The SSI recipient must be included in the AG.

2. Who Cannot Be Included

Only the SSI recipient is included in the AG. When the SSI recipient has an essential spouse, See Section 9.11,B below.

NOTE: For SSI recipients who are children in foster care, or whose adoptive parents receive adoption assistance, see Chapter 16.

B. THE INCOME GROUP (IG)

SSA determines the income and assets which are counted for SSI. No additional income or asset test is made for Medicaid.

C. THE NEEDS GROUP (NG)

SSA makes the determination of need for SSI. Receipt of SSI is the only eligibility factor.

9.11 DEEMED SSI RECIPIENTS

A. PICKLE AMENDMENT COVERAGE (PAC)

1. The Assistance Group (AG)

a. Who Must Be Included

The individual who is eligible as a PAC must be included in the AG.

b. Who Cannot Be Included

Only the PAC individual is included in the benefit group.

2. The Income Group (IG)

a. Individual With No Spouse

Count only the individual's income.

b. Eligible Couple

Count the couple's income.

c. Eligible Individual With Ineligible Spouse

Consider the income of the ineligible spouse to determine if it must be deemed. See Chapter 10 for how to determine if the spouse's income is deemed.

d. Eligible Individual In A Nursing Facility or ICF/MR With Eligible/Ineligible Spouse.

Count only the individual's income. This applies when the spouse is in the community, in a nursing facility, or in an ICF/MR.

3. The Needs Group (NG)

a. Individual With No Spouse

The income limit for a single individual is used.

b. Eligible Couple

The income limit for a couple is used.

- c. Eligible Individual With Ineligible Spouse, No Income Deemed

The income limit for a single individual is used.

- d. Eligible Individual With Ineligible Spouse, Income Deemed

The income limit for a couple is used.

- e. Eligible Individual In A Nursing Facility or ICF/MR With Eligible/Ineligible Spouse

The income limit for a single individual is used. This applies when the spouse is in the community or in a nursing facility or ICF/MR.

B. ALL OTHERS

See Chapter 16 for a description of Deemed SSI Recipients.

- 1. The Assistance Group (AG)

- a. Who Cannot Be Included

The individual who is a Deemed SSI Recipient must be included in the AG.

- b. Who Cannot Be Included

Only the Deemed SSI Recipient is included in the AG.

- 2. The Income Group (IG)

SSA determines income eligibility for these groups.

- 3. The Needs Group

No income test is required.

9.12 QUALIFIED MEDICARE BENEFICIARIES (QMB), SPECIFIED LOW-INCOME MEDICARE BENEFICIARIES (SLIMB), and QUALIFIED INDIVIDUALS (QI-1 AND QI-2)

A. THE ASSISTANCE GROUP (AG)

NOTE: Both members of a couple must receive the same level of coverage, QMB, SLIMB, QI-1 or QI-2.

1. Who Must Be Included

The individual or couple, eligible for QMB, SLIMB, QI-1 or QI-2 must be included in the AG.

2. Who Cannot Be Included

Only the individual or couple who is eligible for QMB, SLIMB, QI-1 or QI-2 is included in the AG.

B. THE INCOME GROUP (IG)

1. Eligible Individual With No Spouse

Count only the individual's income.

2. Eligible Couple

Count the couple's income.

3. Eligible Individual With Ineligible Spouse

Consider the income of the ineligible spouse to determine if it must be deemed. See Chapter 10 for how to determine if the spouse's income is deemed.

4. Eligible Individual In A Nursing Facility or ICF/MR With Eligible/Ineligible Spouse

Count only the individual income. This applies when the spouse is in the community, in a nursing facility, or in an ICF/MR.

C. THE NEEDS GROUP (NG)

1. Individual With No Spouse

The income limit for a single individual is used.

2. Eligible Couple

The income limit for a couple is used.

3. Eligible Individual With Ineligible Spouse, No Income Deemed

The income limit for a single individual is used.

4. Eligible Individual With Ineligible Spouse, Income Deemed

The income limit for a couple is used.

5. Eligible Individual In A Nursing Facility or ICF/MR with Eligible/Ineligible Spouse

The income limit for a single individual is used. This applies when the spouse is in the community or in a nursing facility or ICF/MR.

9.13 QUALIFIED DISABLED WORKING INDIVIDUALS (QDWI)

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The QDWI individual must be included in the AG.

2. Who Cannot Be Included

Only the individual who is eligible for QDWI is included in the AG.

B. THE INCOME GROUP (IG)

1. Eligible Individual With No Spouse

Count only the individual's income.

2. Eligible Couple

Count the couple's income.

3. Eligible Individual With Ineligible Spouse

Consider the income of the ineligible spouse to determine if it must be deemed. See Chapter 10 for how to determine if the spouse's income is deemed.

C. THE NEEDS GROUP (NG)

1. Individual With No Spouse

The income limit for a single individual is used.

2. Eligible Couple

The income limit for a couple is used.

3. Eligible Individual With Ineligible Spouse, No Income Deemed

The income limit for a single individual is used.

4. Eligible Individual With Ineligible Spouse, Income Deemed

The income limit for a couple is used.

9.14 ILLEGAL ALIENS - EMERGENCY COVERAGE

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The AG is composed of the otherwise ineligible illegal alien.

2. Who Cannot Be Included

Only the illegal alien is included in the AG.

B. THE INCOME GROUP (IG)

The income of the following individuals is counted:

1. AFDC

- The alien
- The alien's legal spouse, or co-parent, who would be included in the AFDC Medicaid AG if he were a citizen.
- The child(ren) of the alien

2. SSI

a. Individual With No Spouse

Count only the individual's income.

b. Eligible Couple

Count the couple's income.

c. Eligible Individual With Ineligible Spouse

Consider the income of the ineligible spouse to determine if it is deemed. See Chapter 10 for how to determine if income is deemed.

C. THE NEEDS GROUP (NG)

The Needs Group is composed of the following individuals:

1. AFDC

- The alien
- The alien's legal spouse, or co-parent, who would be included in the AFDC Medicaid AG if he were a citizen/
- The child(ren) of the alien

Countable income is compared to the income limit for the number in the Needs Group.

2. SSI

a. Individual With No Spouse

The current SSI maximum payment amount for a single individual is used. See Chapter 10, Appendix A

b. Eligible Couple

The current SSI maximum payment amount for a couple is used. See Chapter 10, Appendix A

c. Eligible Individual With Ineligible Spouse, No Income Deemed

The current SSI maximum payment amount for a single individual is used. See Chapter 10, Appendix A

d. Eligible Individual With Ineligible Spouse, Income Deemed

The income limit for a couple is used. See Chapter 10, Appendix A.

9.15 INDIVIDUALS RECEIVING HOME AND COMMUNITY BASED SERVICES UNDER
TITLE XIX WAIVERS

See Chapter 17 for all information about the Assistance Group,
Income Group and Needs Group.

9.16 CHILDREN WITH DISABILITIES COMMUNITY SERVICE PROGRAM (CDCS)

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The CDCS child must be included in the AG.

2. Who Cannot Be Included

Only the CDCS child is included in the benefit group.

B. THE INCOME GROUP (IG)

Only the income of the CDCS child is counted. Income of the parent(s) is not deemed or counted in any way.

C. THE NEEDS GROUP (NG)

Only the CDCS child's needs are considered.

9.17 AIDS PROGRAM

NOTE: These cases are not entered in any data system. BMS is responsible for providing eligible services to these clients.

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The individual who meets the eligibility criteria for either of the two AIDS Program groups must be included in the AG.

2. Who Cannot Be Included

Only the individual who meets the eligibility criteria is included in the AG.

B. THE INCOME GROUP (IG)

Only the income of the individual who is eligible for one of the AIDS program groups is counted.

C. THE NEEDS GROUP (NG)

Countable income is compared to the limit for a single individual. BMS makes the financial determination.

9.18 AFDC/U-RELATED MEDICAID

NOTE: SSI recipients, whether they are adults or children, are not included in the Assistance, Income or Needs Group.

NOTE: For the purposes of this Section only (9.18), otherwise eligible means that a deprivation factor exists and the child lines with a specified relative.

A. THE ASSISTANCE GROUP (AG)

The same policy found in Section 9.4,A applies here. Those individuals who are required to be included or who choose to be included receive AFDC/U-Related Medicaid and will be in an AG. However, they are not all in the same AG. The following rules apply.

1. Parent(s)

Otherwise eligible married parents who live together are in the same AG. However, unmarried otherwise eligible parents must be in separate AG's. This is necessary to prevent illegal deeming from one unmarried parent to another.

2. Child, Including The Minor Parent (mp) Who Is A Dependent Child.

Each otherwise eligible child is in a separate AG to prevent illegal deeming of one child's income to another.

3. Minor Parent (mp) Who Is A Caretaker

The mp and the mp's spouse, who is also the parent of the mp's child, are in the same AG. The unmarried mp is in a separate AG even when the child's other parent is in the home. This is necessary to prevent illegal deeming from one unmarried parent to another.

4. Non-Parent Caretaker Who Chooses To Be Included

The non-parent caretaker is in a separate AG. Only one non-parent caretaker may be included. This is necessary to prevent illegal deeming from the caretaker to the child and vice versa.

See Section 9.4,A.

B. THE INCOME GROUP (AG)

The income counted depends on the AG member. Each member listed shows the income which is counted to determine his eligibility. Only the income of individuals who live in the home with the AG member is counted.

1. Parent(s)

Count the income of:

- The parent(s)
- The legal spouse of the parent

See Chapter 10 for deeming instructions.

2. Child, Including The Minor Parent (mp) Who Is A Dependent Child

Count the income of:

- The child
- The parent(s) of the child

NOTE: The income of a child is never counted for a parent or a sibling.

3. Minor Parent (mp) Who Is A Caretaker Relative

Count the income of:

- The mp
- The MP(s)

See Chapter 10 for deeming instructions.

4. Non-Parent Caretaker Who Chooses To Be Included

Count the income of:

- The caretaker relative
- The spouse of the caretaker relative

See Chapter 10 for deeming instructions.

C. THE NEEDS GROUP

Countable income and assets of the Income Group are compared to the limit for the number of persons in the Needs Group to determine financial eligibility. The Needs Group is not used to determine whose income to count or whose medical expenses to use to meet the spenddown. See item B and Chapter 10. The number of persons included in the Needs Group depends on the AG member. Only individuals who reside with the AG member(s) are counted.

NOTE: Recipients of SSI, whether they are adults or children, are not included in the Needs Group.

1. Parent(s)

The NG of the parent includes:

- The parent(s)
- The spouse of the parent described above, even when the spouse is not a parent of the children, regardless of the spouse's Medicaid status, except SSI
- Dependent children of the parent(s) and the parent's spouse and all of the blood-related siblings of the dependent children living in the home, regardless of the children or siblings' Medicaid status, except SSI
- When the parent is a minor living with his parent(s), the minor's parent(s) is also included in the NG, regardless of his Medicaid status, except SSI.

2. Child(ren)

The NG of the child includes:

- The dependent child
- The natural or adoptive parent(s) of the dependent child, regardless of the Medicaid status of the parent(s), except SSI
- The blood-related siblings of the dependent child, regardless of the siblings' Medicaid status, except SSI

- The natural or adoptive parent(s) of the minor parent(s), regardless of the Major Parent(s)' Medicaid status, except SSI.

3. Non-Parent Caretaker Who Chooses To Be Included

The NG of the caretaker consists of:

- The caretaker relative
- The spouse of the caretaker relative, regardless of his Medicaid status, except SSI
- Dependent children of the caretaker and the caretaker's spouse and all of their blood-related siblings living in the home, regardless of the Medicaid status, except SSI.

4. A Minor Parent (mp) Living With A Major Parent (MP)

NOTE: A minor parent (mp) is a parent under the age of 18, regardless of completion of school or training.

Cases involving an mp require special consideration, only because a variable, not present in other cases, exists, i.e., there are two parental groups in the family. The first parental unit is the MP(s), and the second is the mp. Any of the following combinations of eligible people are possible.

- mp + child
- MP + mp + child
- MP + mp

See Section 9.4,A,4 to determine the treatment of an mp as a dependent child or a caretaker relative. The composition of her NG is determined based on who makes an application for whom, and the mp's treatment in the AG.

a. When the AG Includes the mp and the Child

(1) The mp's NG

The mp's NG is composed of the MP(s) and the mp and the mp's child(ren) who live with her.

(2) The Child's NG

The child's NG is composed of the mp, the child, and the child's blood-related siblings who live with him.

b. When the AG Includes the MP(s), the mp Who Is a Dependent Child and the mp 's Child

(1) The MP(s) NG

The MP(s) NG composition is determined as found in item 1 above. The mp is included in the MP(s)' NG.

(2) The mp's NG

The mp's NG is composed of the MP(s), mp, the mp's blood-related sibling(s) who live with her and the mp's child(ren) who live with her.

(3) The Child's NG

The child's NG is composed of the mp, the child and the child's blood-related siblings who live with him.

c. When the AG Includes the MP(s), the mp Who Is An Adult and the mp's Child

(1) The MP(s) NG

The MP(s) NG composition is determined as found in item 1 above. The mp is not included in the NG.

(2) The mp's NG

The mp's NG is composed of the MP(s), the mp and the mp's child.

(3) The Child's NG

The child's NG is composed of the mp, the child and the child's blood-related siblings who live with him.

d. When the AG Includes the MP(s) and the mp Who Is A Dependent Child

(1) The MP(s) NG

The MP(s) NG composition is determined as found in item 1 above. The mp is included in the NG.

(2) The mp's NG

The mp's NG is composed of the MP(s), the mp, the blood-related sibling(s) of the mp who live in the home, and the mp's child.

NOTE: When the mp is included in the AG, only because she must be included as the parent of her child, i.e., another specified relative in the home applies for and has care and control of the mp's child, the mp is treated as an adult in the NG.

9.19 SSI-RELATED MEDICAID

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

The aged, blind or disabled individual and his eligible aged, blind or disabled spouse must be included, except when the spouse resides in a nursing facility or ICF/MR.

2. Who Cannot Be Included

- SSI Recipients
- Any other person except the aged, blind or disabled individual and his aged, blind or disabled spouse.
- The aged, blind, or disabled spouse of a nursing facility or ICF/MR resident cannot be included with the nf or ICF/MR resident and vice versa. The spouse may be in a separate AG.

B. THE INCOME GROUP (IG)

1. Adults

a. Individuals With No Spouse

Count only the individual's income.

b. Eligible Couple

Count the couple's income.

c. Eligible Individual With Ineligible Spouse

Consider the income of the ineligible spouse to determine if it must be deemed. See Chapter 10 for how to determine if the spouse's income is deemed.

d. Eligible Individual In a Nursing Facility or ICF/MR With Eligible/Ineligible Spouse

Count only the individual's income. This applies when the spouse is in the community, or in a nursing facility or ICF/MR.

2. Child

Count the income of the child and any income deemed from a parent(s). See Chapter 10 for deeming information.

C. THE NEEDS GROUP (NG)

1. Adult

a. Individual With No Spouse

The income limit for a single individual is used.

b. Eligible Couple

The income limit for a couple is used.

c. Eligible Individual With Ineligible Spouse, No Income Deemed

The income limit for a single individual is used.

d. Eligible Individual With Ineligible Spouse, Income Deemed

The income limit for a couple is used.

e. Eligible Individual In A Nursing Facility Or ICF/MR With Eligible/Ineligible Spouse

The income limit for a single individual is used. This applies when the spouse is in the community, in a nursing facility or in an ICF/MR.

2. Child

The income limit for a single individual is used.

9.20 RESERVED FOR FUTURE USE

9.21 WV WORKS ELIGIBILITY DETERMINATION GROUPS

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

NOTE: Whether or not an individual has earned or unearned income sufficient to meet his own needs, or the needs of his dependents, is not a factor to consider when determining if the individual is required to be included in the AG.

NOTE: Although the individuals listed below are required to be included in the WV WORKS AG, if otherwise eligible, an SSI recipient, age 18 or over, cannot be included in the AG. See item 3 below.

The following individuals are required to be included:

- All minor, dependent, blood-related and adoptive siblings who live in the same household and are otherwise eligible. For this purpose only, otherwise eligible means living with a specified relative.

EXAMPLE: Two children who have the same mother but different fathers live with the paternal grandparents of child A. The children are blood-related and would normally be required to be included in the same AG. However, the grandparents of child A are not specified relatives of child B. Therefore, child B is not eligible for WV WORKS.

- The parent(s) of the child(ren) identified above when the parent(s) lives with the child(ren):

In cases of joint custody, only the custodial parent is included. The custodial parent is the one with whom the child(ren) lives more than 50% of the time in a given month. The custodial parent of any child may change from month to month. If the child lives with each parent exactly 50% of the time, the parents must decide which is the custodial parent.

Parents who work, or are looking for work away from home, including those who work out of state, must be included, unless there is a legal separation.

- The legal spouse of the parent described above, regardless of the legal spouse's legal relationship to the child(ren).

The stepparent may not choose to be excluded when the parent is in the home.

- All minor, dependent, blood-related and adoptive children of the legal spouse of the parent, regardless of the relationship of the children to the other children in the home, provided they are otherwise eligible, i.e., living with a specified relative.
- The non-parent caretaker who has chosen to be included by signing form OFS-WVW-10 within the past 12 months.
- The parent(s) of an unemancipated minor parent, even when the minor parent requests benefits for the child only.

NOTE: When the parent(s) of the unemancipated minor parent is included, the blood-related siblings of the minor parent are included. The spouse of the parent and any of his dependent children who are blood-related siblings to each other must also be included.

NOTE: When an individual is required to be in two or more AGs, the AGs must be combined.

2. Who May Choose To Be Included

NOTE: Although the individuals listed below may be included in the WV WORKS AG, if otherwise eligible, an SSI recipient, age 18 or over, cannot be included in the AG. See item 3 below.

The following individuals may choose to be included:

- Caretaker relatives, who are not natural or adoptive parents, and stepparents when the parent is not in the home, may choose to be included or excluded from the AG. If a caretaker relative chooses to be included, the following individuals must also be included:

NOTE: When a parent and stepparent are both in the home, the stepparent is required to be included as the legal spouse of the parent. See item 1 above. However, when the parent is not in the home, the stepparent is treated as any other specified relative and may choose to be included or excluded.

- Legal spouse of the caretaker, regardless of the legal spouse's relationship to the child(ren); and
 - All minor, dependent children of the caretaker relative and all of their minor, dependent, blood-related and adoptive siblings living in the household; and
 - All minor, dependent children of the spouse of the caretaker relative and all of their minor, dependent, blood-related and adoptive siblings living in the household.
- If there is another minor child(ren) in the household who is not required to be included by item 1 or this item and the caretaker relative requests WV WORKS benefits for him, the caretaker relative may choose to include him in the AG. A separate case is not established for the child(ren).

The two groups of individuals identified above may choose to be included or excluded at the time of application. Once the decision is made, the decision is binding until the next annual, full-scale redetermination, regardless of changes in the circumstances of the caretaker relative or the child(ren). This must be explained to the caretaker relative at each application and each redetermination. When the case is closed and reopened before completion of a full-scale redetermination, the last decision is binding until one year from the date the last decision was made. Each decision must be made using form OFS-WVW-10. Refusal or other failure to choose by completing the form results in ineligibility for the caretaker relative for at least 12 months. Eligibility continues to be denied beyond 12 months, for as long as the caretaker fails to choose. See "Intake Interview" for WV WORKS in Chapter 1.

This does not apply when the caretaker relative is also receiving WV WORKS for his own children as well as for other children, because parents are required to be included when their children receive WV WORKS.

EXAMPLE: A woman applies for WV WORKS for her 5-year-old niece. She works and is not applying for her own 2 children. The case is approved effective February for the niece only; she chooses not to be included in the payment. In May, the woman loses her job and applies for WV WORKS for her own children. She is required to be included in the WV WORKS payment for her own children. She and her 2 children are added to the case for the niece effective June and they all receive WV WORKS until September, when she finds another job. At that time, she and the children are removed from the AG and she continues to receive a payment for the niece only.

received a payment and individuals for whom benefits are temporarily suspended due to overpayment.

NOTE: The caretaker relative may receive WV WORKS when there are no children in the AG if all the children are ineligible for WV WORKS only because they are age 18 or over and receive SSI benefits.

- The entire AG when the parent(s) or included non-parent caretaker does not meet the 24-month limit for being engaged in work, according to the definition in Section 15.7, and who does not have good cause for the failure.

NOTE: When the 12-month period during which the non-parent caretaker chooses to be included ends, the non-parent caretaker may again receive WV WORKS for the otherwise eligible child(ren), even when not meeting the 24-month work requirement, so long as he chooses to be excluded from the AG. If he reapplies during the 12-month period for which he chose inclusion, or after the 12-month period ends and he again chooses to be included, he must meet the 24-month work requirement to receive WV WORKS for the child(ren); he may not receive WV WORKS for only the children without meeting the 24-month work requirement.

- The non-parent caretaker when he refuses to sign form OFS-WVW-10.
- The non-parent caretaker(s) when he has elected not to be included within the past 12 months.

4. Treatment Of The Minor Parent (mp) In The AG

When an unemancipated minor parent lives with Major Parent(s) (MP), the minor parent must be included in the AG with: the MP(s); the minor parent's child(ren); the minor parent's minor, blood-related and adoptive siblings, if otherwise eligible; the legal spouse of the MP and the blood-related and adoptive siblings who are minor children of the spouse of the MP.

When a minor parent, who is emancipated, lives with MP(s), the minor parent and the child(ren) are a separate benefit group but must be included with all the emancipated minor parent's children, spouse or legal parent of the mp's child(ren). The income of the MP(s) is not counted or deemed. However, the presence

of the MP(s) in the home causes a 25% reduction in benefits. See Section 10.24,C,2.

When an unemancipated minor parent lives with an adult relative other than a parent, the minor parent and the child(ren) are a separate AG, as long as the other adult relative does not wish to receive a WV WORKS payment. If the other adult relative wants to receive WV WORKS, he must be a specified relative and the minor parent must be included in the AG with: the adult relative; the spouse of the adult relative; the adult relative's minor children who are blood-related or adoptive siblings and who are otherwise eligible; the minor children of the spouse of the adult relative, who are blood-related or adoptive siblings and who are otherwise eligible. Only when the other adult relative is included in the AG is his income counted for the minor parent.

When an emancipated minor parent lives with an adult relative other than a parent, the minor parent and the child(ren) are a separate AG. None of the income of the other relative or his spouse or a parent is counted for the minor parent.

When the mp does not live with the MP(s), the amount the MP(s) contribute to the mp is counted as unearned income. In addition, when the mp is not emancipated, a referral to BCSE is required to pursue child support from the MP(s).

The WV WORKS check must be made payable to an MP or other adult with whom the mp lives or who supervises the living situation of the mp.

B. THE INCOME GROUP

The non-excluded income of all AG members is counted.

The non-excluded income of the ineligible and disqualified individuals who would normally be required to be included in the AG must be counted when determining eligibility, but disqualified and excluded SSI individuals are not counted in the Needs Group.

See Chapter 10 to determine how the income is counted.

C. THE NEEDS GROUP

Countable income is compared to the income limits for the number in the AG to determine eligibility and the amount of the benefit.

D. EXAMPLES OF AG COMPOSITION

EXAMPLE: Household consists of Ms. A and her two dependent children. All are included in the AG.

EXAMPLE: Same as previous example, except that one child receives \$200 VA benefits each month. All are included in the AG, and \$200 is counted as income.

EXAMPLE: Household consists of Ms. B and her two nephews who are blood-related siblings. Both children are included. Mrs. B can choose to be either included or excluded. If she is included, her income is counted.

EXAMPLE: Household consists of Mr. and Mrs. D and their three children. One of the three children receives SSI. All are included in the AG. The SSI payment is not counted as income.

EXAMPLE: Household consists of Mr. and Mrs. E, Mr. E's two children from a previous marriage and Mrs. E's child from a previous marriage. All are included in the same AG.

EXAMPLE: Household consists of Mr. and Mrs. F, their two children and Mrs. F's niece. Mr. and Mrs. F want benefits for Mrs. F's niece so all are included in the AG.

EXAMPLE: Household consists of Mrs. G and her minor daughter Miss G who is not emancipated and is not married. Mrs. G and her daughter receive WV WORKS. After the birth of Miss G's child, Mrs. G applies for WV WORKS for the child. Mrs. G is considered the caretaker for both Miss G and Miss G's child. Miss G and her child are both treated as dependent children and all are included in the AG.

EXAMPLE: Household consists of Mrs. I and her two sons who receive WV WORKS. Mrs. I's daughter Miss I, a minor parent who is emancipated, returns to the home with her child. Miss I and her child are a separate AG because she is emancipated.

EXAMPLE: Household consists of Mr. J, his wife and her two children from a previous marriage. Mr. and Mrs. J and her two children receive WV WORKS.

Mr. J's ex-wife and her two children move into Mr. J's home and apply for WV WORKS. Mr. J is the father of his ex-wife's children. All are included in the same AG.

EXAMPLE: Household consists of Mrs. K, her daughter Miss K, who is a dependent child, and Miss K's child. Mrs. K adopts Miss K's child and applies for WV WORKS for her adopted child. The AG consists of Mrs. K, her adopted child and the natural mother, Miss K. Miss K, because she is a dependent child, is included as a sibling of the child adopted by her mother.

EXAMPLE: Household consists of Mr. and Mrs. L and their son, Their divorced minor daughter Mrs. M and her child move back into the home. Mr. and Mrs. L and their son are included in one AG. A separate AG is established for Mrs. M and her child because Mrs. M was previously married.

EXAMPLE: Mrs. M and her 3 children move in with her parents after her divorce. She is not a minor parent. The household consists of Mrs. M, her 3 children, her mother, her father and her grandmother. The WV WORKS AG consists of Mrs. M and her 3 children. However, because she lives in the home with other people, the 25% reduction is applied. None of the income of the mother, father and grandmother is counted.

EXAMPLE: Miss N applies for a WV WORKS check for her nephew. She has recently lost her job and chooses to be included in the payment. Two months later Miss N finds another job. Her earnings are excessive and she tells the Worker she wants to be removed from the payment. The Worker explains that she must still be included, based on her decision at application and closes the case, after proper notice. Eight months later Miss N is laid off and reapplies. She and her nephew are both included in the payment because one year has not elapsed. The following month, Miss N again finds employment and the case is closed. A year after the original application, Miss N applies for her nephew only and is approved with none of her income counted for him.

EXAMPLE: Household consists of Mr. and Mrs. O and their 4 children who are under age 18. Mr. O and 2 of the children are SSI recipients. Mrs. O and all of the children are included in the AG. Mr. O is not included in the AG because he is age 18 or over and is an SSI recipient. The SSI payments of Mr. O and the 2 children are not counted in determining the amount of the WV WORKS check.

EXAMPLE: Household consists of Mrs. P, her grandson and his sister. Mrs. P's son is the father of the grandson, but not of his sister. The children have the same mother. Mrs. P does not choose to be included in the AG. The AG includes only Mrs. P's grandson. His sister does not live with a specified relative and is not otherwise eligible.

EXAMPLE: Ms. Q has 2 minor children and is employed full-time. In February Ms. Q's sister abandons her 5-year-old son and Ms. Q takes the child to live with her. Ms. Q applies for WV WORKS and signs the OFS-WVW-10 indicating that she does not want to be included in the check. The case is approved only for her nephew beginning in February. In July, Ms. Q loses her job because the business was closed. She applies for WV WORKS for herself and her 2 children. The 3 of them are added to the nephew's AG. Even though Ms. Q signed the OFS-WVW-10 stating that she did not want to be included, she is required to be included when her own children receive benefits.

EXAMPLE: Continuation of above example.

In September the father of Ms. Q's children takes the children out of state to live with him. The only child left in the home is Ms. Q's nephew. She requests to be included in the check because she has no other income. Because she signed the OFS-WVW-10 in February, Ms. Q cannot be included. The child, however, remains eligible.

EXAMPLE: Miss R and her minor child apply and are found eligible for WV WORKS in June. In September her minor nephew runs away from home to live with Miss R. Miss R requests he be added to the WV WORKS case and this is done effective October. In January Miss R obtains employment and her salary makes her family ineligible for WV WORKS. However, she wants the check to continue for her nephew. At this point Miss R must sign an OFS-WVW-10 to indicate whether or not she wants to be included in the payment as a non-parent caretaker relative. This choice is binding from January-December, unless Miss R begins receiving WV WORKS for her own children.

