MANUAL MATERIAL TRANSMITTED							
MANUAL: INCOME MAINTENANCE CHANGE NUMBER: 18							
DELETE			INSERT OR CHANGE				
PAGES	CHAPTER	DATED	PAGES	CHAPTER	DATED		
47 - 48	1	9/95	47	1	9/95		
99 - 100	1	9/95	48 - 48 a	1	3/96		
			99	1	9/95		
			100 - 100 a	1	3/96		
i	2	2/96	i	2	3/96		
ii	2	9/95	ii	2	9/95		
7	2	2/96	7	2	3/96		
8	2	9/95	8	2	9/95		
11	2	2/96	11	2	2/96		
12	2	9/95	12	2	3/96		
			12 a	2	2/96		
				Timo was			
19 - 20	15	6/95	19 - 20	15	3/96		
DATE: January, 1996 TO: All Income Maintenance Manual Holders							

This change restores good cause for referral of bona fide offer of employment or training and adds the change in work registraiton status to Food Stamp case maintenance.

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

- 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 immediately report when anyone in the benefit group becomes pregnant.
- TPL: Explain Third-Party Liability procedures.

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; e.g., inability to obtain medical reports.

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 an ES-6 to the client and note that the application is being held in pending status. When the verification is received, AFDC/U benefits are retroactive to the date of application. Because AFDC/U recipients are also Medicaid recipients, reimbursement for out-of-pocket expenses may apply. See Chapter 2.

K. PAYEE

The payee is the individual in whose name the AFDC/U check and medical card are written. The following rules apply.

- AFDC: The specified relative with whom the child is residing is the payee.

after the employment or training is no longer available. See Chapter 15 for the determination of good cause.

For the beginning date of Medicaid eligibility, see Section 1.6.

verbal statement of a physician, social worker, attorney or other responsible person.

When the specified relative with whom the child lives has a legal committee, the committee must be interviewed.

When the child is living with only one specified relative, and that relative is unable to participate in the interview, a representative may be interviewed. A written statement, signed by the relative, which gives the representative authority to apply on his behalf, is required.

F. WHO MUST SIGN

The individual(s) who is interviewed must sign the ES-2.

G. CONTENT OF THE INTERVIEW

In addition to the interview requirements in Section 1.2, the following must be discussed in the interview:

- That any child under age 18 may be evaluted for SSI-Related Medicaid based on blindness or disability
- The spenddown process
- The MRT process, if applicable
- They may receive more than one medical card if a child(ren) has income or there is income deemed to a parent.

H. DUE DATE OF ADDITIONAL INFORMATION

The client and the Worker decide on a reasonable time to return the information.

I. AGENCY TIME LIMITS

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

EXCEPTION: When delay is a result of factors outside the control of the Department and the applicant, e.g., inability to obtain medical reports. This must be documented on each case as specified in Section 1.24, regarding documentation for pending applications.

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2. Spenddown

The date of eligibility is the day on which the client incurs medical expenses which bring the spenddown amount to \$0.

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2.1	INTR	ODUCTION
	A.	GENERAL SOURCES OF INFORMATION
	В.	PROCEDURES FOR COUNTY TRANSFERS AND CASE CLOSURES
2.2	FOOD	STAMPS
	A.	SOURCES OF INFORMATION 6
	В.	REPORTING REQUIREMENTS
	C.	AGENCY TIME LIMITS
	D.	TYPES OF CHANGES 1. Change In Case Name
	E.	CORRECTIVE PROCEDURES
2.3	AFDC/	/U
	A.	SOURCES OF INFORMATION
	В.	REPORTING REQUIREMENTS
	c.	AGENCY TIME LIMITS

recording must be made on the ES-5 to indicate that the case was automatically closed.

Monthly Food Stamp Payrolls, WES142P1

The county office receives 2 listings each month which provides the following information: case number, case name and address, Food Stamp income, number in Food Stamp benefit group, CA and SUA indicator. The listings contain the names of all cases active in the data system as of the first day of each month. In addition, all cases that are approved after the deadline date for the appropriate Program appear during the month of approval on a WEA930AP1 pick-up listing. This listing is run on a daily basis and sent to the county office.

The information on these printouts provides the Worker with a reference to all active cases and the pertinent information about the case.

B. REPORTING REQUIREMENTS

1. QR

QR benefit groups are not required to report changes outside the QR process.

2. Non-QR

Changes must be reported within 10 days of the date the change becomes known to the benefit group. Form ES-FS-2 is one means by which this may be done. See item A,1.

EXCEPTION: The benefit group is not required to report any mass changes in federal benefits, such as the yearly increase in RSDI or SSI benefits. RSDI/SSI increases are handled by the Department in accordance with instructions in Appendix B of this Chapter. All other federal benefit cost-of-living increases are treated as any other change, except that the client is not penalized for failure to report these mass changes.

NOTE: This does not apply to an individual change affecting the level of a client's benefits, only to mass changes.

EXCEPTION: Non-QR benefit groups with earned income must only report income when the following change:

The notification must state that the benefit group continues to be eligible for Food Stamps. See Chapter 6.

7. Selling Food Stamps

Complaints are referred to the USDA field office in Charleston.

8. Food Stamps Returned To The County Office By The Client

NOTE: The following procedures are not intended to circumvent client notification procedures found in Chapter 6.

When Food Stamps are returned to the county office, the Worker determines if the amount is a full or a partial month's allotment. Unused Food Stamps may not be redeemed for cash.

Returned Food Stamps are forwarded to the Financial Clerk who disposes of them as follows.

- When a full month's allotment is returned, Form ES-FS-11 is completed and the Food Stamps returned to the State Office within 30 days.
- When a partial month's allotment is returned to repay an overissuance, a claim must be established. See Chapter 20.
- When a partial month's allotment is returned for some reason other than an overissuance, Form FNP-135 is completed and submitted to the Food Stamp Issuance Unit in OFS, along with the Food Stamps which were cancelled by the Financial Clerk.
- 9. Cost-Of-Living Increases In Federal Benefits

Recipients of federal benefits such as RSDI, SSI, Black Lung or VA Benefits may receive periodic cost-of-living increases (COLA's). RSDI/SSI increases are handled in accordance with instructions in Appendix B of this Chapter. All other federal benefit cost-of-living increases are treated as any other change, except that the client is not required to report the change.

2. When Lost Benefits Are Not Restored

Lost benefits are not restored when:

- The client fails to take required actions without good cause.
- Benefits are lost due to the client's failure to provide correct and timely information.
- When the client requests restoration of lost benefits, but fails to provide documentation to verify the loss.

Benefits are not restored under any circumstances for periods of time in excess of those described in item 3 below.

3. Time Limits For Restoring Benefits

Benefits are not restored for more than twelve months prior to whichever of the following occurred first:

of onset and ends with the quarter in which the last disability payment is due. In the case of a disability freeze, the period ends with the second month following the month in which the disability ceases.

(3) Is Available for Employment (AFDCU Only)

The unemployed parent whose activities or responsibilities preclude his being available for employment or training does not meet the definition of unemployment. If the parent states that he will end the activities that preclude his availability for employment or training when an offer is made by W & T, he will meet the requirement of being available for employment. The parent who takes the position that he cannot accept employment or training does not meet this component of the definition.

The parent who has part-time employment or is engaged in other activities must indicate that he is willing to accept full-time employment or training if offered.

(4) Has Not Refused a Bona Fide Offer of Employment or Training Without Good Cause

The unemployed parent must not have refused or left employment or training for employment in the 30-day period prior to the date of application without good cause. See Chapter 1 for determining eligibility dates when such an instance occurs.

Before it is determined that the unemployed parent has refused a bona fide offer of employment or training for employment without good cause, the Worker must determine that such an offer was actually made and whether the offer remains available. In the case of offers of employment made through public employment or manpower agencies, the determination of whether the offer was bona fide, and if there was good cause to refuse it, is made by that office or agency.