

2.1 INTRODUCTION 1

A. GENERAL SOURCES OF INFORMATION 1

B. PROCEDURES FOR COUNTY TRANSFERS AND CASE CLOSURES 3

 1. County Transfers 3

 2. Case Closures 3

C. PROCEDURES FOR ADDING NEWBORN CHILDREN (TANF, WV WORKS AND MEDICAID ONLY) 5

2.2 FOOD STAMPS 6

A. SOURCES OF INFORMATION 6

B. REPORTING REQUIREMENTS 7

 1. Timely Reporting And Follow-Up 7

 2. 12-Month Review of Eligibility 7

C. AGENCY TIME LIMITS 9

D. TYPES OF CHANGES 9

 1. Change In Case Name 9

 2. Change In Category Or Deprivation Factor 9

 3. Change In Benefit Group 9

 4. Change In Income 10

 5. Change Of Address 10

 6. Continuation Of Benefits 10

 7. Selling Food Stamps 11

 8. Food Stamps Returned To The County Office By The Client 11

 9. Cost-Of-Living Increases In Federal Benefits 11

 10. Change In Work Registration Status 12

 11. Change In Work Hours (ILC Only) 12

E. CORRECTIVE PROCEDURES 12

 1. Restoring Lost Benefits 12

 2. When Lost Benefits Are Not Restored 12a

 3. Time Limits For Restoring Benefits 12a

 4. Corrective Actions To Restore Benefits 14

 5. How Benefits Are Restored 15

2.3 TANF 16

A. SOURCES OF INFORMATION 16

B. REPORTING REQUIREMENTS 19

 1. What Must Be Reported 19

 2. Timely Reporting 19

C. AGENCY TIME LIMITS 19

D.	TYPES OF CHANGES	20
1.	Change In Case Name	20
2.	Change Of Address	20
3.	Change In The Category Or Deprivation Factor	20
4.	Change In The Assistance Group	21
5.	Continued Benefits After Case Closure	22
6.	Change In Work Registration Status	24
7.	Special Procedures	24
8.	Cost-Of-Living Increases In Federal Benefits	29
E.	CORRECTIVE PROCEDURES	30
1.	Correcting The Check Amount	30
2.	Correcting The Address	31
3.	Correcting The Payee	31
4.	Cancelling The Check	32
5.	Holding The Check	32
2.4	MEDICAID	33
A.	SOURCES OF INFORMATION	33
B.	REPORTING REQUIREMENTS	34
C.	AGENCY TIME LIMITS	35
D.	TYPES OF CHANGES	35
1.	Change In Case Name	35
2.	Change Of Address	36
3.	Change In The Assistance Group, Needs Group Or Income Group	36
4.	AG Closures	36
5.	Cost-Of-Living Increases In Federal Benefits	37
E.	CORRECTIVE PROCEDURES	37
1.	Reimbursement For Out-Of-Pocket Expenses	37
2.	Holding The Medicaid Card	38
3.	Procedures For Cards Which Are Returned, Incorrect or Not System-Issued	38a
4.	Incorrect Eligibility Dates	39
2.5	RESERVED FOR FUTURE USE	40
2.6	DEEMED AFDC RECIPIENTS	41
A.	EXTENDED MEDICAID	41

B. ADOPTION ASSISTANCE 41

C. FOSTER CARE 41

2.7 TRANSITIONAL MEDICAID 42

2.8 QUALIFIED CHILDREN AND POVERTY LEVEL CHILDREN 43

A. CLOSURES 43

B. CHANGE IN INCOME 43

C. OTHER CHANGES 43

2.9 POVERTY-LEVEL PREGNANT WOMEN 44

A. CHANGE IN THE BENEFIT GROUP 44

B. CHANGE IN INCOME AND/OR DEDUCTIONS 44

2.10 CONTINUOUSLY ELIGIBLE NEWBORN CHILDREN (CEN) 45

2.11 SSI RECIPIENTS AND DEEMED SSI RECIPIENTS 46

A. CATEGORY TRANSFER FROM D TO A 46

B. PROCEDURE WHEN CLIENT MOVES 46

 1. Change Of Address 46

 2. Loss of Contact 46

 3. The SSI Recipient Moves To Another State 46

C. ACTION REQUESTED BY THE IM MEDICARE BUY-IN UNIT 46

D. CLOSURE OF THE SSI MEDICAID CASE 46

2.12 QUALIFIED MEDICARE BENEFICIARIES (QMB) 48

2.13 SPECIFIED LOW-INCOME MEDICARE BENEFICIARIES (SLIMB) 49

2.14 CHILDREN WITH DISABILITIES COMMUNITY SERVICE PROGRAM (CDCS) 50

2.15 AIDS PROGRAM 51

2.16 AFDC/U-RELATED AND SSI-RELATED MEDICAID	52
A. CHANGE IN INCOME AND DEDUCTIONS	52
B. CHANGE IN DEPRIVATION FACTOR/CATEGORY	53
1. Change In Deprivation Factor - AFDC/U	53
2. Change In Category SSI-Related Medicaid	53
C. MRT REQUIREMENTS	53
D. CLOSURES	53
2.17 WV WORKS	54
A. SOURCES OF INFORMATION	54
B. REPORTING REQUIREMENTS	57
1. What Must Be Reported	57
2. Timely Reporting	57
C. AGENCY TIME LIMITS	58
D. TYPES OF CHANGES	58
1. Change In Case Name	58
2. Change Of Address	58
3. Change In The Category or Deprivation Factor	59
4. Change In The Benefit Group	59
5. Continued Benefits After Case Closure	59
6. Change In The Personal Responsibility Contract and Self-Sufficiency Plan	60
7. Special Procedures	60
8. Cost-Of-Living Increases In Federal Benefits	65
E. CORRECTIVE PROCEDURES	65
1. Correcting The Check Amount	65
2. Correcting The Address	67
3. Correcting The Payee	67
4. Cancelling The Check	67
5. Holding The Check	68
APPENDIX A MEDICAID CASE ACTION PRINTOUTS	A-1
A. COUNTY LIST OF SSI RECIPIENTS	A-1
B. INVALID MEDICAL CARDS NOT PRINTED	A-4
C. MAO CASE ACTION REMINDER LISTING	A-4
D. LIST OF ALL ACTIVE ABD CASES WITH DUPLICATE SSN'S	A-5

	E.	NEED TO EVALUATE PRINTOUT	A-5
	F.	SDX LIST OF T30, S09 AND M01 CASES	A-6
APPENDIX B		RSDI/SSI INCREASES 1998	B-1
	A.	THE RSDI/SSI COLA UPDATE PROCESS	B-1
	B.	REPORTS AND WORKER ACTION	B-2
	C.	COMMONLY FOUND MATCH RESULTS	B-8