2.17 WV WORKS

A. SOURCES OF INFORMATION

In addition to the sources in Section 2.1, case maintenance action may also originate from the following sources:

- Information from the Office of Social Services: This includes, but is not limited to, Child Care, CPS and Foster Care.
- Information from CSED: This may include the return of the absent parent or the receipt of child support in excess of the WV WORKS check.
- Information from WV WORKS/FSE&T and BEP: This may include a change in work registration status, a request for application of a penalty or sanction or a report of new income or a change in income.
- Form ES-CG-CM-1: Although the purpose of this form is to collect information for the Food Stamp Program, the client may report other changes which affect the WV WORKS check.
- Form ES-FS-2: Although the client uses this to report changes in his Food Stamp case, he may report information which also affects the WV WORKS check.
- Monthly Case Action Report, WEA380P1: This printout is received in the county office monthly. It is accompanied by a computer-generated dump sheet for each case on the printout. The information sheet shows the reason(s) the case is selected. The following types of case maintenance are identified by this printout:
 - Quarterly Reporting: Cases required to QR are noted with an asterisk on the printout. See Chapter 7 for the QR process.
 - Duplicate SSN: The same SSN has been entered in one or more other cases in the C-219 system. Check to assure that the client's SSN is correct in the data system and change if appropriate. Take any other corrective action necessary.
 - Check Blocks 49/55: Alerts the Worker when either of these Blocks is coded for a potential resource, case change, etc.

- •□ WV WORKS Child Reaching Age 18: The Worker must evaluate the case to see of the child is eligible to remain in the benefit group until age 19. Otherwise, remove the child from the benefit group. When the form is not returned, the Worker must contact the client to obtain the information. When the client refuses to comply, the child is removed from the benefit group, after proper notice.
- Invalid SSN: SSN coded for an individual has not been verified by SSA files. The Worker must obtain the correct SSN for data system entry.
- ES-CG-CM-3 Due: Cases with children between the ages of 16 and 18 in the benefit group are sent this form in January, April, July and October. The Worker must review the returned form to determine school or training attendance, or employment, and make appropriate changes.

When the form is not returned, the Worker must contact the client to obtain the information. When the client refuses to comply, the child is removed from the benefit group or the case closed, after proper notice, whichever is appropriate.

- ES-CG-TM-1 or ES-CG-TM-3 Due: See Chapter 16, Appendix A for schedule of letters sent to TM recipients
- Closed Extended Medicaid: Indicates that a case is in the 4th month of eligibility for Extended Medicaid and will automatically close at the end of the month.
- C-219 Active Cases and SSIS Provider Match, WEZR6331P1:
 Received monthly. Clients who are vendors for Social Service programs such as Child Care and Chore Services.
 Requires Worker action when income was not reported or when incorrect amounts are reported.
- BENDEX RSDI C/U Cases, WEBEN4P2: Received monthly and shows RSDI information for matched cases. Requires Worker action when income was not reported or when incorrect amounts are reported. See Chapter 3.
- C-219 BEERS Match, WEBER15P1: Received quarterly, and lists client's employers and earnings record. Worker must check cases for unreported income. May require

IFM referral or initiation of repayment. May identify potential resources.

- Workers' Comp Match, WER1581DP1: Received monthly, and lists recipients of WC benefits. Worker must check case, verify reported information and take appropriate action.
- Employment Security Cross Match, WEAR2871P1: Received daily for approvals and quarterly for active cases with UCI benefits. Worker must check case, verify reported information and take appropriate action.
- Supplemental Wage Match, WEAR3202P1: Received quarterly and lists clients, their employers and quarterly wages. Worker must check case for unreported or misreported earnings and possible IFM referral for repayment. May be used to verify labor force attachment.
- UCI Cross Match, WEAR2875P1: Received monthly and lists clients who receive UCI. Worker must check cases for unreported income or to verify UCI amount.
- UCI Wage Exception Report, WEA710P1: Received monthly and lists cases with information which does not match BEP information, i.e., SSN matches, but name is different. Worker must correct case information, if appropriate.
- Client Notification, WEAL03P1: Received daily and lists cases coded for computer-generated letters. Cases with an asterisk do not receive a CG notice and Worker must send a manual letter.
- SDX Need to Open, WESDX101P3: Received weekly and lists SSI recipients. SSI income must be coded for Food Stamps and WV WORKS, if appropriate. See Chapter 1.
- County List of SSI Recipients, WESDX100P1: Received monthly and lists all recipients of SSI. It provides income information and may be used to verify income for Food Stamps and WV WORKS. See Chapter 2.
- ARTS Exception Report, WEA627P2: Received monthly and lists cases with repayment which do not match ARTS information. Repayment Officers must check case and take appropriate action to enter case in ARTS, remove repayment if complete, or correct C-219 or ARTS case information.

- Births Due In (mm/yy), WEA396P1: Received monthly, after deadline. Cases with special coding in Blocks 49 or 55 in the C-219 system appear on the printout. The special coding indicates that a child is due to be born in the following month. Form IM-CM-2 is mailed to the client at the same time the printout is produced. The individual designated by the CSM is responsible for clearing this printout by making sure that the newborn child is added to the check and/or medical card and that the change is transmitted within 5 working days of its birth. If the family is also receiving Food Stamps, the child must be added to the Food Stamp benefit group at the same time.

Other printouts which are received may provide information which is used in the case maintenance process, but do not require a specific case action. These include:

- C/U County Payroll, WEA140P1
- PA Food Stamp Authorization, WES142P1
- Daily Pickups (Food Stamps), WEA930AP1
- PA Cases Having A-K in Block 45, WEAR2802P1

B. REPORTING REQUIREMENTS

1. What Must Be Reported

All changes in income, assets, household composition and other circumstances must be reported.

When the client receives his WV WORKS benefit by direct deposit, he must report changes in bank account information to the Auditor's Office.

2. Timely Reporting

All changes in a client's circumstances must be reported immediately. In addition, new earned income must be reported within 10 days of the date new employment begins to avoid certain penalties. See Chapter 10.

When a dependent child, included in a WV WORKS payment, will be absent from the home for a period of 30 consecutive calendar days or more, the parent or other caretaker must notify the Department by the end of the 5-calendar-day period that begins with the date it becomes clear to the parent/caretaker that the child will be absent for at least 30 days. Failure to report timely results in ineligibility for 6 consecutive months for the parent(s) or other caretaker.

C. AGENCY TIME LIMITS

The agency must act on reported changes effective with the next month's benefit, when advance notice requirements permit. Benefits must be restored to the client or repaid to the agency when changes cannot be made in a timely manner. See Chapter 20.

D. TYPES OF CHANGES

1. Change In Case Name

The case name may be changed from one individual to another at the request of the individuals involved or when a change in circumstances requires it. In the case of a minor parent, the payee will be the major parent or other responsible adult.

A new CAF or OFS-2 must be completed and signed by the individual now being designated as payee, unless his signature is on the most recent CAF or OFS-2. However, if the case is in a protective payment status due to a request from Social Services, a substitute payee is not required to sign the CAF or OFS-2.

When the payee changes, an EBT card is issued to the new payee. The entry of a new payee in RAPIDS results in inactivation of the previous payee's card the following day, if not already inactivated.

NOTE: For EBT, changes in the payee, address and authorized cardholder must be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadline.

2. Change Of Address

A change of address is made in the data system as soon as the client reports it. Any other changes which the client reports, in addition to the address change, are also acted on at the same time, when notice requirements permit. A change made prior to the deadline date is effective the following month.

When the address change is made after the deadline date, the change is effective 2 months after the change is made. See item E for instructions for returned benefits.

A change of address after deadline does not affect receipt of WV WORKS in an EBT account. When the client requests a

replacement EBT card and his address has changed, the address change must be made before the new card is issued to insure the card is sent to the correct address.

NOTE: For EBT, changes in the payee, address and authorized cardholder must be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadline.

For WV WORKS cases which receive Food Stamps, the data system issues form AELL for a change of address within the same county or form CML1 for a change of address and county transfer. The form must be returned in 10 days, and requests information about shelter/utility expenses and household composition. When the form is not returned timely, the Worker must contact the client for the information using the RAPIDS verification checklist or form ES-6. See Chapter 6.

3. Change In The Category Or Deprivation Factor

There are no categories of WV WORKS assistance, and deprivation factors do not have a bearing on WV WORKS eligibility. Only when Medicaid eligibility for the AFDC Medicaid or AFDC-Related Medicaid coverage group, is being determined for a WV WORKS case, is it necessary to establish a AFDC deprivation factor.

4. Change In The AG

- Additions: Additions to the AG are effective the month the change occurs, provided the individual is otherwise eligible.

An individual who is added to an existing AG is treated as an applicant. No CAF or OFS-2 is required. Benefits for the individual are prorated from the date that all eligibility requirements are met, including signing the PRC and attending orientation. Eligibility cannot begin earlier than the date the individual entered the home.

- Deletions: Deletions from the AG are effective the month after the change occurs and the advance notice period expires. Repayment is sought for any overpayment that occurs. When a parent leaves the household, referral procedures to BCSE apply.
- 5. Continued Benefits After Case Closure
 - a. Continuation of Food Stamp Benefits After WV WORKS Closure

If a WV WORKS AG, also certified for Food Stamps, is closed and there is sufficient information, Food Stamps must continue uninterrupted.

A new CAF or OFS-2 is not required. See Chapter 1 for establishing the redetermination date.

The closure notice sent to the client must state that the AG continues to be eligible for Food Stamps. If the benefit increases or decreases, appropriate notification must be sent. See Chapter 6.

b. Medicaid Eligibility When a WV WORKS Case is Closed

Because Medicaid eligibility is not linked to receipt of a WV WORKS check, Medicaid eligibility does not end automatically when WV WORKS eligibility ends. However, the circumstances which led to ineligibility for WV WORKS may have some bearing on Medicaid eligibility, so the Worker must evaluate continuing Medicaid eligibility based on the new circumstances. See Chapter 16 for details about all Medicaid coverage groups.

c. Ineligibility for Food Stamps

When the WV WORKS recipient is ineligible for Food Stamps for any reason, such as excess income, the Food Stamps are removed from the WV WORKS case, and the WV WORKS case, if eligible, remains open.

6. Change In The Personal Responsibility Contract and Self-Sufficiency Plan

The Worker is responsible for ensuring, on an ongoing basis, that the participation status of each recipient is consistent with the terms of his Personal Responsibility Contract.

- 7. Special Procedures
 - a. Child Care

When a WV WORKS client requests, or the Worker otherwise recognizes the need, a referral for assistance with child care expenses is made to Social Services. The referral is made using a DHS-1 which shows the client's name, case number, address, telephone number and the reason child care is needed. The Child Care Worker is responsible for determining eligibility for such assistance and for notifying the client of his status.

b. Protective Payments

NOTE: The client may request a Fair Hearing any time he is placed on protective payments or he questions the substitute payee selected.

Protective Payments are payments which are made to a substitute payee or by vendor payment. There are two situations which require that the client be placed on protective payments. These are:

(1) Money Mismanagement

A Social Worker, providing protective services to the family, may request the case be placed in protective payment status.

When the Social Worker determines that protective payments are necessary due to money mismanagement, he sends a DHS-1 to the Worker requesting the case be placed on protective payments and indicates the substitute payee and the date protective payments are to begin. The name of the substitute payee is provided by the Social Worker.

When the case is placed on protective payments, the bills paid are those chosen by the client or with his participation and consent, to the extent possible.

With the conversion to EBT, any cash benefits which are not directly deposited into a bank account will be deposited into an EBT account. The person named as the protective payee will receive the EBT card and PIN and is able to spend the AG's benefits.

Even though other cash benefits and Food Stamps go into the EBT account, the WV WORKS benefit can be directly deposited into the local office account so that the check may be written by the Financial Clerk to pay the family's expenses. The client must compl'ete the appropriate direct deposit form and designate the account of the local office. Because only the monthly WV WORKS benefit is direct deposited, other cash benefits such as CSI, DCA or initial or supplemental cash WV WORKS benefits go into the EBT account.

If the direct deposit method is used for the WV WORKS benefit, the Financial Clerk does not have to be designated as the payee in RAPIDS.

In order for the client to access his other cash benefits and Food Stamp benefits, he must be the payee, unless another individual protective payee is chosen for the EBT benefits.

(2) Protective Payments at the Client's Request

When the client requests a substitute payee in writing, the Worker must honor his request and advance notice is not required. The Worker takes the action as soon as possible after the request. The protective payments are discontinued as soon as possible after the client makes a request in writing.

(3) Choosing the Substitute Payee

When a substitute payee is used, the selection of a substitute payee is made by the client, or with his participation and consent, to the extent possible. When it is in the best interest of the client for a staff member of a private agency or any other appropriate organization to serve as a substitute payee, the selection is made, preferably, from the staff of an agency or that part of the agency providing protective services.

The substitute payee cannot be an immediate member of the client's family. Immediate family members include parents, grandparents, children, spouse, uncle or aunt, brother or sister. In addition, the substitute payee cannot be living in the same home with the client.

No employee of the Department can be a substitute payee, except when it is in the best interest of the client for a staff member of the Department to serve as such. The substitute payee is selected from Protective Service staff. Landlords, grocers or other vendors of goods, services or items who deal directly with the client may not be a substitute payee.

The substitute payee must agree to accept the responsibility, and must be at least age 18.

A review of the way in which a substitute payee's responsibilities are carried out is conducted as frequently as indicated by the client's circumstances, and at least once every 12 months.

See the RAPIDS User Guide.

c. Special Procedure When a WV WORKS Recipient Becomes Eligible for SSI

When a WV WORKS recipient is determined eligible for SSI, SSA is required to count his portion of the cash assistance payment as income. When determining the amount of SSI to which the individual is entitled, the SSA must have this information before the SSI claim can be processed.

Although children are not removed from the WV WORKS check, the child's portion must be determined and provided to SSA.

The following method is used to determine the individual's portion of the check:

- Step 1: Determine the amount of the check with the individual included in the AG. This includes all applicable incentives, reductions or sanctions.
- Step 2: Determine the amount of the check with the individual not included in the AG. This includes the same applicable incentives, reductions or sanctions which were applied in Step 1, even if not including the individual in the payment could eliminate the incentive, reduction or sanction. In addition, do not apply the 25% reduction simply because the check amount is being computed without including the individual.
- Step 3: Subtract the amount in Step 2 from the amount in Step 1. The remainder is the individual's portion of the check.

This amount must be determined for each month for which SSA requests the information.

8. 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.

9. EBT Cash Conversion Request

EBT cash benefits are not converted to checks or cash. The EBT card must be used to access cash benefits. The client may elect direct deposit of his regular monthly benefit into his own checking or savings account.

10. Change In EBT Authorized Cardholder

When the client wishes to change the authorized cardholder for EBT, the Worker must delete the current cardholder on RAPIDS screen AIRQ and enter the new cardholder's information, including the benefit(s) to which the cardholder has access. The client may terminate cardholder access immediately by calling the ARU or DHHR Customer Service Center. Only DHHR Customer Service Center staff can inactivate a card.

When the client calls the ARU first to stop cardholder access, he must still notify the DHHR Customer Service Center or the local office of the cardholder change.

NOTE: For EBT, changes in the payee, address and authorized cardholder must be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadlines.

- 11. Inactive, Dormant and Expunged EBT Accounts
 - a. Inactive Account 45 Days

When the AG does not use cash benefits for 45 days, the Worker receives an alert and RAPIDS automatically sends a letter to notify the client of the inactivity. The Worker must contact the client to attempt to determine the reason for no account activity. If the client contacts the Worker and wishes to continue to receive benefits, the account activity date is reset by use of the administrative function. If the client does not contact the Worker or if he request AG closure, WV WORKS benefits are stopped after proper notice. Unused benefits remain in the account.

b. Dormant Account - 180 Days

When the AG does not use cash benefits in the account for 180 days, the account becomes dormant, i.e., inaccessible. An alert is sent to the Worker in the local office and, when there is an open claim on RAPIDS screen BVCL, an alert is also sent to the RI. A letter is sent automatically from RAPIDS to notify the client he cannot access his account, i.e., use benefits, unless he contacts the local office. The letter also informs the client that if he does not contact the local office within 13 days, benefits in the account will be applied to any outstanding cash assistance claim(s). client contacts the local office, the Worker resets the account activity date and benefits cannot be applied to a claim(S) unless the client requests. If there are no claims and the client does not contact the local office, the benefits remain in the account.

If the account activity date is not reset, the RI, after contact with the local office Worker to check for client contact, takes action to apply the benefits to any outstanding claim(s). Any benefits which are not applied to a claim(s) remain in the account until expunged. See item c.

NOTE: When the Worker is notified of a dormant account, and the AG is still active, the Worker must contact the client to determine if he wishes to continue to receive benefits. If the client does not respond, the AG is closed after proper notice. So long as the AG remains active, benefits are deposited into the EBT account. Closure of the WV WORKS AG does not affect or close the EBT account.

c. Expunded Accounts - 270 Days

When the AG does not use cash assistance benefits for 270 days, benefits are expunged, i.e., removed, from the EBT account. An alert is sent to the Worker in the local office and to the RI, when there is an open claim(s) indicated on RAPIDS screen BVCL. A letter is automatically sent from RAPIDS to notify the client that all benefits in his account have been expunged. Expunged cash benefits may be used to reduce any outstanding cash assistance claims.

After benefits are expunded, any deposit into the account resets the activity date.

E. CORRECTIVE PROCEDURES

1. Correcting The Check Amount

Prior to issuing a corrective payment, the Worker must determine if the AG owes an overpayment. If so, the corrective payment must be offset by the amount of the overpayment. See Section 20.3, items D,4 and E,3.

NOTE: DCA payments must not be used to offset an overpayment.

a. Underpayments

A corrective payment is made to the client when he did not receive a benefit for which he was eligible, or the amount he received was less than that to which he was entitled.

The amount of the corrective payment is the difference between the benefit the client received and the amount he was entitled to receive, over the period involved, as determined using RAPIDS procedures. See the RAPIDS User Guide.

For current recipients, or persons who would have been recipients, had the error causing the underpayment not occurred, the corrective payment is made when it is discovered. It does not matter when the error occurred or who was at fault. For inactive clients, the corrective payment is made when it is discovered, no matter who was at fault, provided the underpayment occurred on or after June 1, 1988.

NOTE: A corrective payment for an addition to the AG is made only for the time the new AG member was eligible to be included, but was not.

Corrective payments are made to active and inactive recipients in RAPIDS. See the RAPIDS User Guide.

NOTE: When a corrective payment is used to offset an overpayment, due to fraud or an intentional client error, the amount offset is counted as Food Stamp income, if the corrective payment would normally have been counted. See Chapter 10 to determine when corrective payments are counted as Food Stamp income.

NOTE: Only the monthly WV WORKS benefit may be received by direct deposit.

b. Retroactive Payments

A retroactive payment is made when, at any time during the appeal process, it is found that, due to a Department error, the client did not receive a payment for which he was eligible, or that the payment he received was less than that to which he was entitled. The appeal process begins when the client requests a formal appeal. The retroactive payment covers the period over which the error occurred and is computed in the same manner as a corrective payment. Payment is made using the RAPIDS system. See the RAPIDS User Guide.

Retroactive payments are also made when eligibility is determined in a month(s) following the month of application and the client is eligible for benefits in the prior month(s).

NOTE: Only the monthly WV WORKS benefit may be received by direct deposit.

With the conversion to EBT, any WV WORKS cash benefit which is not directly deposited into a bank account is deposited into an EBT account.

2. Correcting The Address

When the WV WORKS check is returned to the Accounts Receivable Office, the return is entered into RAPIDS and the Worker receives an alert.

When the Worker receives the alert, he must determine the correct disposition of the check and enter the appropriate information in RAPIDS. See the RAPIDS User Guide. The new address must be entered into RAPIDS as soon as possible to insure that the check is mailed to the correct address when released by Accounts Receivable.

The Worker receives an alert when the returned benefit is released.

With the conversion to EBT, cash benefits are not returned due to an incorrect address.

EBT cards which are sent to an incorrect address are returned to the card vendor and destroyed. When the client reports non-receipt of a card, the Worker must correct the address and indicate that a new card is required. A new card is then issued to the correct address. The Worker can check EBT card issuance on the administrative terminal.

NOTE: For EBT, changes in the payee, address and authorized cardholder must be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadlines.

3. Correcting The Payee

When a check is issued and the payee must be changed for any reason, i.e., death of the payee or payee leaves the home, the Worker notifies Accounts Receivable using the appropriate RAPIDS procedure. See the RAPIDS User Guide

NOTE: If the payee is deceased, and has endorsed his check prior to his death, no repayment is sought, regardless of his living arrangements. If the endorsed check is returned, and there is another specified relative to whom the payment can be made, appropriate RAPIDS procedures are used to request that the check be rewritten in the other person's name. See the RAPIDS User Guide.

See item D,1 above for correcting the payee for EBT benefits. The new payee has access to the EBT account for the AG.

NOTE: For EBT, changes in the payee, address and authorized cardholder must be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadlines.

4. Cancelling The Benefit

When the benefit, either a check or direct deposit is returned, the Worker receives an alert in RAPIDS. If the client does not report a new address after an attempt to contact him, the case is closed. The benefit must be cancelled. The Worker uses appropriate RAPIDS procedures. See the RAPIDS User Guide.

When cancellation is requested, data system action to close the AG must be taken. If the benefit, either a check or direct deposit, is returned and cancelled, it is not counted toward the 60-month time limit.

Checks which are returned to the local office must be forwarded to Accounts Receivable Office with an appropriately completed ES-14.

When a WV WORKS AG is closed, EBT benefits remain in the account until the AG uses the benefits or until there is no account activity for 270 days, i.e., no withdrawal or use of benefits. See item D,9 above for expunged EBT benefits. See item 7 below for benefits voluntarily returned from an EBT account.

5. Holding The Benefit

The benefit, as a check, direct deposit or EBT cannot be held under any circumstances.

6. Reissuing a Returned Direct Deposit

The Accounts Receivable Office receives a list of direct deposits which cannot be completed and updates RAPIDS benefit issuance history and cancels the benefit. The Worker receives an alert in RAPIDS, and after contact with the client, must use the appropriate RAPIDS procedure to issue a check to the client. See the RAPIDS User Guide. Under no circumstances is a direct deposit reissued by an additional direct deposit. If the client cannot be contacted and information obtained to issue a check, the benefit is cancelled. See item 4 above. If a check is written and not received by the client, proper procedures for check replacement must be followed. See Section 21.3,D.

7. Returned EBT Benefits

When the client wishes to return cash assistance benefits in the EBT account, the client is referred to the RI, when such staff is available in the local office. The RI completes a claim and removes the benefits from the EBT account, using the administrative terminal, and credits the benefits as a repayment on the claim. The client must sign form IFM-EBT-1. The RI completes the bottom of the form to indicate the benefits were removed.

If the RI staff is not available in the local office, a Supervisor in the local office completes the IFM-EBT-1, removes the benefits from the EBT account, using the administrative terminal. The Supervisor completes a referral through RAPIDS to IFM for the claim and forwards the original IFM-EBT-1 to the RI.