
**Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements**

a. Recipients

For extension purposes these conditions are defined as follows:

- Physical acts that result in, or threaten to result in, physical injury; or
- Sexual abuse; or
- Sexual activity involving a dependent child; or
- Being the caretaker of a dependent child and being forced to engage in non-consensual sex acts; or
- Threats of, or attempts at, physical or sexual abuse; or
- Mental abuse; or
- Neglect or deprivation of medical care.

The individual who meets the definition must accept a referral to a domestic violence program that operates under a State license or through an agreement with DHHR. In addition, the client must participate in and follow any plans developed with the program.

Once an extension is approved based on the above criteria, the Worker must monitor the case for compliance. The WV WORKS check continues until the situation is resolved or the AG is no longer eligible for a check for other reasons. Normal redetermination procedures apply.

b. Applications After 60-Month Closure

Applications may be approved for individuals who have received 60 months of WV WORKS but who fit the criteria outlined in item a, above. The Worker must notify the Extension Committee of the approval and send a completed extension form for its review.

As in any extension, the Worker must monitor compliance and close the case when the client is no longer following a plan or when the situation has been resolved and domestic violence is no longer an issue.

There is no limit to the number of times a household may reapply and be approved so long as the situation remains unresolved and the client is in compliance.

Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements

2. Providing Care For A Relative

For extension purposes, all of the following conditions must be met.

- It must be a single parent household, unless one parent is providing care for the other parent who is disabled; and
- The care giver would normally be required to meet a work requirement; and
- Is needed at home to care for a child, spouse, parent or grandparent; and

The person who needs the care lives with the care giver and is physically or mentally disabled, as determined by medical evidence, to the extent that he would require institutionalization if not for the care being provided; or

- The person who needs the care requires constant monitoring and frequent medical attention or hospitalization; and
- No one else is available to provide this care.
- Such care will not be necessary for more than 6 months, or the family has made other care arrangements that will be completed within 6 months, or the family is attempting to make other care arrangements, including application for Title XIX Medicaid benefits, if appropriate.

3. Late Onset Of Incapacity

Clients who experience the onset of a temporary incapacity after the 55th month of WV WORKS may qualify for a one-time extension of up to 6 months while undergoing treatment for the injury or illness. The Worker must obtain a decision of incapacity from MRT, and the decision must indicate that the individual will be able to engage in gainful employment following the period of incapacity. **When there are two parents in the household, each parent must meet the requirements for the AG to be eligible for an extension under one of the categories outlined in this chapter.** Failure of the client to accept or continue treatment for the illness or injury before the extension begins will result in denial of the request. Failure to cooperate following the beginning of the extension period will result in case closure.

**Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements**

If it is determined by MRT that the individual will be temporarily unable to engage in gainful employment for a period of time on or following his 60th month of eligibility, he may qualify for an extension of up to six months. The number of months granted will depend on the length of time that MRT has determined him to be unable to engage in a gainful activity. The local office will be responsible for monitoring the medical status of the client each month.

4. Disabled

Disabled is defined as unable to engage in gainful employment, as determined by a medically qualified professional. It applies when there is only 1 parent or 1 non-parent caretaker in the household. **When there are two parents in the household, each parent must meet the requirements for the AG to be eligible for an extension under one of the six categories outlined in this chapter.**

It is assumed that an individual who states he is disabled will already have medically established his disability by the 55th month of TANF/WV WORKS receipt. If not, he must apply for SSI and be referred to MRT prior to approval of an extension. An SSI denial based on no disability does not automatically preclude an extension on this basis if MRT finds him to be disabled. However, the individual must be actively appealing his SSI denial to qualify for an extension.

If it is determined that the individual is not disabled, or is able to engage in gainful employment with no limitations, he does not qualify for consideration of an extension.

If it is determined that the individual is able to engage in gainful employment with some limitations, he may qualify for an extension of up to 6 months to locate suitable employment. The individual must be cooperating with Division of Rehabilitation Services during this period, if appropriate.

If MRT has determined, before or during the 60th month of benefits, that the individual will be temporarily unable to engage in gainful employment for a period of time extending beyond the 60th month of eligibility, he may qualify for an extension of up to six months. The number of months granted will depend on the length of time that MRT has determined him to be unable to engage in a gainful activity. The local office will be responsible for monitoring the status of the client on a monthly basis. If an MRT re-evaluation is due during that period and the decision again finds the individual unable to participate, the extension will continue up to six months. During the extension period, the Worker must monitor the case to make sure the client remains eligible.

Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements

EXAMPLE: If a person receives their 60th month of benefits in January 2006 and has been found to be disabled or incapacitated by MRT with a re-evaluation due in February 2006, the Committee approves a one month extension through February 2006. In February, MRT determines that the disability continues and sets the next re-evaluation for August 2006. The extension may be extended through July 2006, which would be the sixth month of benefits over the 60 month time limit.

If it is determined that the individual is permanently unable to engage in gainful employment, he qualifies for consideration for an extension of up to 6 months to apply for, or appeal prior denials of, statutory benefits. Statutory benefits include, but are not limited to, RSDI, SSI, VA, and/or Railroad Retirement.

5. Pregnancy/Age Of Child

An AG may qualify for an extension when both of the following conditions are met.

- There is only 1 adult or emancipated minor in the household; and
- The pregnant woman will be in her last trimester of pregnancy in the 60th month of TANF receipt; or

The AG includes a child who will be less than 6 months of age in the 60th month of TANF receipt.

EXAMPLE: A pregnant woman with one other child also cares for her nephew, age 17. She qualifies for consideration under this extension criteria.

EXAMPLE: A pregnant woman with two other children lives with her boyfriend, age 20, who is not the legal father of any of the children. She does not qualify for consideration under this extension criteria.

EXAMPLE: A woman with a newborn child lives with her other children and her mother. She does not qualify for consideration under this extension criteria.

When based on a verified pregnancy, the extension remains in effect for up to 6 months. When the pregnancy does not end in a live birth, the extension, if already approved, remains in effect for 2 months following the end of the pregnancy.

Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements

When based on age of a child, the extension remains in effect until the child is 6 months old.

6. In A Vocational Training/Educational Activity

The extension is based on maintaining satisfactory progress toward course completion in a vocational training or educational activity. Satisfactory progress is defined by the facility or course of study, but must be expected to result in a measurable outcome, such as a diploma, degree, or certificate, that will assist in attaining self-sufficiency.

To qualify for consideration of this extension, one of the following situations must exist:

- In his 55th month of TANF receipt, the client is attending a vocational training or an educational activity; or
- In his 55th month of TANF receipt, the client is enrolled to begin vocational training or an educational activity.

Vocational training is preparation for a specific occupation. The training is conducted by an instructor in a non-work site or classroom setting.

Educational activities are limited to literacy programs, high school, ABE and 2- and 4-year college programs.

When the person who is participating in the training/educational activity has a disability which is affecting their ability to make progress or extending the time necessary for them to complete the program, this must be considered when granting an extension. If it is determined the individual is progressing more slowly due to the disability, an extension will be granted.

The extension remains in effect for up to 6 months. The Worker is responsible for monitoring the attendance of the participant during the extension period. Should their enrollment end, the Worker must send notification and close the WV WORKS benefit.

When there are two parents in the household, each parent must meet the requirements for the AG to be eligible for an extension under one of the six categories outlined in this chapter.

7. The Extension Committee only may approve an extension based on agency error, if during the extension request process, either the local office or the Extension Committee does not act in a timely manner. This must occur between months 55 through 60. No repayment required if extension is not approved. This extension is limited to three months.

Specific WV WORKS, AFDC and
AFDC – Related Medicaid Requirements

8. Vance v. Nusbaum

Extension for assessment and referral for additional services in accordance with Vance v. Nusbaum Court Order. The extension is based on the criteria established in the above case Agreed Order entered March 10, 2004.

All WV WORKS recipients who had reached and exceeded 60 months of TANF, prior to April 1, 2004, whose case had been sanctioned during the course of those 60 months, and had not received an extension will be sent a notice dated November 2004 advising them of the opportunity to request a review of any sanction that had been applied to their case. From the time of the notice, the client will have 60 days to request a review of any sanction they believe was unfairly applied due to an existing physical or mental illness or learning disability recognized under the American Disabilities Act (ADA).

Review of the sanction(s) will be completed by a county Designated Case Worker (DCW) utilizing medical documentation of the disability at the time a sanction(s) was applied to the case. The Designated Case Worker may not be a Worker that ever applied a sanction to the case being reviewed. The Worker will make a determination as to whether or not the recipient was unfairly sanctioned based on the medical information provided by the recipient and the WV WORKS case record. If the Worker is unable to make the determination, the medical information will be referred to the Medical Review Team for evaluation within 90 days.

NOTE: In lieu of medical documentation, a disability will be established if Social Security found the recipient to be disabled within two years of the date a sanction was applied to the case.

If the Worker finds that the individual was unfairly sanctioned due to a disability, a referral will be made to the 60 Month Review Committee with a recommendation to reevaluate the new information gathered for a possible six month extension for additional assessment and referral for additional services.