

Verification

ITEM	PROGRAMS	WHEN TO VERIFY	POSSIBLE SOURCES OF VERIFICATION
9. Participation Hours in Employment and Training Activities	WV WORKS	Monthly	Time sheets, verbal confirmation over the phone from training or volunteer site <b>may be accepted but must be followed up with receipt of a signed timesheet.</b> For employment, phone confirmation by employer <b>followed with written, signed employer statement, or</b> pay stubs.
	<b>WV WORKS Support Payments</b>	<b>Monthly</b>	Participation hours may be recorded based on employment hours, but no support services may be issued without appropriate verification or signed time sheet and the appropriate submitted request.

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11. 60-Month Lifetime Limit	WV WORKS	Prior to approval beginning in October, 2001	RAPIDS; case record information; contact <b>and obtain written verification from</b> other states <b>using the DFA-WVW-Verif-1;</b> Departmental printouts or other records
12. 24-Month Time Limit	WV WORKS	Prior to approval beginning October 1998	RAPIDS; case record information; contact with other states; Departmental printouts or other records; BEP records
13. Offer Or Guarantee Of Employment Or Other Income	WV WORKS	Prior to approval of DCA payment	Contact with future employer or entity from which the income is expected
14. Participation in the Medicare Prescription Drug Discount Card Program	FS	Prior to approval, at redetermination, when a client reports he has been approved for the program	Actual Medicare Prescription Drug Discount Card, a copy of a card or an approval letter for the program.

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15. Deployment to a Designated Combat Zone	FS	Documentation of a person's deployment to a designated combat zone is only required when it is questionable or not known to the AG	<p>The Leave and Earnings Statement (LES), Orders issued to the military person, Public records, Local base financial office, The internet. A list of designated combat zones is available at: <a href="http://www.fns.usda.gov/fsp/government/certification_policy.htm">www.fns.usda.gov/fsp/government/certification_policy.htm</a></p> <p>Use the best source of verification available. When there is absolutely no other source of verification, the client's statement must be used.</p>
16. Medicare Enrollment – Parts A and B	Medicaid	Prior to approval and at redetermination when not verified at application.	Award letter from Social Security (SSA), Medicare card, SSA referral form.