Specific WV WORKS, AFDC and AFDC – Related Medicaid Requirements

- At least 1,000 individuals were living on the reservation or in the village;
 and
- At least 50% of the adults living there were unemployed.

B. BENEFITS WHICH COUNT TOWARD THE LIMIT

Receipt of any of the following benefits counts as 1 month toward the 60-month limit when an adult or emancipated minor is included in the AG.

- TANF check from WV or from any state that used TANF block grant money for the payment. See Appendix C of Chapter 1 for a list of states and when they converted to TANF.
- WV WORKS cash assistance when the benefit is funded by federal TANF/MOE funds or by a WV Solely State Funded (SSF) Program.

EXCEPTION: When a TANF or WV WORKS check was received ineligibly, and is repaid in full, that month does not count toward the 60-month limit. **The WV WORKS benefit cannot be repaid or returned to the Department unless the AG was ineligible.**

The limit is not 60 months for each state of residence. The time limit applies to all benefits received throughout the United States and its territories as long as the benefits were received under the TANF Block Grant. Therefore, when a client indicates he has been a resident of another state, the Worker must determine if he received cash assistance and, if so, if the program was funded under the Block Grant authorized by PRWORA. See Section 15.1 for a detailed explanation of the welfare reform legislation and its impact on cash assistance programs. States had until July 1997 to convert from the former AFDC Program to a program funded under the Block Grant. Many states converted to the new program early. Therefore, the Worker must contact the other state to determine when the benefits were received and for how many months. These months must be documented in case comments and on ANLM. Workers must fax the DFA-WVW-Verif-1 to the other state to obtain written verification of the TANF months received in that state. Agency printouts or other written verification obtained from the state are also acceptable. That verification must be placed in the case record. If months prior to 7/97 are involved, the Worker must also determine how many months of benefits the client received under the Block Grant program. See Appendix C to Chapter 1 for a list of states and their effective dates of conversion to TANF.

The calculation of the number of months of TANF benefits received must be completed at the time of application. At that time the number of months listed on ANLM should be adjusted and case comments should document why the adjustment was made.

Specific WV WORKS, AFDC and AFDC – Related Medicaid Requirements

C. PROVISIONS FOR AN EXTENSION OF THE TIME LIMIT

There are provisions which may allow a family to receive benefits for more than 60 months. There is a limit imposed by the federal government on the percentage of the caseload that is allowed to be exempt from the 60-month requirement.

The limit is 20% of the average monthly number of WV WORKS AG's, minus only the average monthly number of child-only AG's. This number is only valid on a statewide basis. Therefore, the percentage of extensions from county to county may vary greatly.

The Worker must not inform the client that he is, or may be, exempt from the time limit during the 60-month eligibility period, unless written notice of approval has already been received from the 60-Month Extension Committee.

Once an extension is approved, the client must continue to meet the criteria on which the extension was based each month of the extension period. In addition, the individual must be actively engaged in an activity or process designed to further the AG's goal of self-sufficiency, such as pursuing other resources. The Worker may close the case at any time during the extension period when the client fails to follow through on requirements established for receipt of the additional months of WV WORKS. The Worker must continue to monitor the case each month to determine if the client continues to meet the extension criteria identified at the time of the Committee's extension approval. Once the case is closed and the extension ends for failing to meet these requirements, the household is no longer eligible for the extension. The Worker must document the closure and notify the Family Support Policy Unit.

A temporary extension of up to 6 months may be given only once for the adults and emancipated minors in the AG at the time the extension is approved, unless the extension is based wholly or in part on domestic violence. See item 1 below.

Once an AG is closed due to receipt of TANF benefits for 60 months, every application that includes an individual who received benefits as an adult or emancipated minor for 60 months is denied. No extensions are approved after AG closure for this reason.

NOTE: Although the 60-month lifetime limit does not apply to a non-recipient Work-Eligible parent, if another parent is included in the AG, the time limit applies to the adult AG members.

EXCEPTION: Victims of domestic violence, who meet the criteria in item C, 1, below, may reapply for WV WORKS after the 60-month closure.