

## 1.21 AFDC-RELATED MEDICAID

### A. APPLICATION FORMS

An **DFA-2** is completed.

A reapplication is treated as any other application, except in some situations when a new form is not required. See Section 1.3,F.

### B. COMPLETE APPLICATION

The application is complete when the client or his representative signs a **DFA-2** or **DFA-5** which contains, at a minimum, the client's name and address.

### C. DATE OF APPLICATION

The date of application is the date that the client or his representative signs the **DFA-2** or **DFA-5**, which contains, at a minimum, his name and address.

**NOTE:** When the applicant has completed the interactive interview, and there is a technical failure that prevents the printing of the **DFA-2**, Form **DFA-5** must be signed by the applicant and filed in the case record with the subsequently printed **DFA-2**. The DFA-RR-1 must also be completed and signed. He must not be required to return to the office to sign the **DFA-2** when an **DFA-5** has been signed.

For clients who reapply within 60 days of the previous application which was denied due solely to failure to meet a spenddown, the date of application is the date the client requests reconsideration. No **DFA-2** is required when the requirements in Section 1.3 are met.

### D. INTERVIEW REQUIRED

A face-to-face interview is required.

### E. WHO MUST BE INTERVIEWED

The individual who is interviewed is the specified relative with whom the child lives.

If the child is living with both parents, both must be interviewed unless:

- One parent is hospitalized; or
- One parent is incarcerated; or

- One parent is employed, and his working hours preclude participation in the interview during the agency's normal working hours.
- He is physically/mentally unable to participate in the interview and this is established by a written or verbal statement of a physician, social worker, attorney or other responsible person.

When the specified relative with whom the child lives has a legal committee, the committee must be interviewed.

When the child is living with only one specified relative, and that relative is unable to participate in the interview, a representative may be interviewed. A written statement, signed by the relative, which gives the representative authority to apply on his behalf, is required.

#### F. WHO MUST SIGN

The individual(s) who is interviewed must sign the **DFA-2**.

#### G. CONTENT OF THE INTERVIEW

In addition to the interview requirements in Section 1.2, the following must be discussed in the interview:

- BCSE: When the adult relative is applying for or receiving Medicaid, explain assignment of support rights, redirection requirements, good cause, penalties for failure to cooperate without good cause, possible referral to BCSE for signature of paternity acknowledgment, and obtain the signature on the **DFA-AP-1** of the relative with whom the child lives. See 1.6,G.
- That any child under age 18 may be evaluated for SSI-Related Medicaid based on blindness or disability
- The spenddown process
- The MRT process, if applicable
- They may receive more than one medical card if a child(ren) has income or there is income deemed to a parent.
- TPL: Explain Third-Party Liability procedures.

## H. DUE DATE OF ADDITIONAL INFORMATION

Additional information is due 30 days from the date of application.

## I. AGENCY TIME LIMITS

Data system action to approve, deny or withdraw the application must be taken within 30 days of the date of application.

**EXCEPTION:** When delay is a result of factors outside the control of the Department and the applicant, e.g., inability to obtain medical reports. This must be documented on each case as specified in Section 1.24, regarding documentation for pending applications.

## J. AGENCY DELAYS

When the Department fails to request necessary verification, the Worker must immediately send a verification checklist or form **DFA-6** and **OFS-6A**, if applicable, to request it. He must inform the client that the application is being held pending. When the verification or information is received and the client is eligible, medical coverage is retroactive to the date eligibility would have been established, had the Department acted in a timely manner.

Reimbursement for out-of-pocket expenses may apply. See Chapter 2.

## K. PAYEE

The parent or other specified relative who is the caretaker relative is the payee. When both parents are in the home, either parent may be the payee.

## L. REPAYMENT AND PENALTIES

An individual who is sanctioned for failure to cooperate with BCSE is not included in an AFDC-Related Medicaid AG.

## M. BEGINNING DATE OF ELIGIBILITY

### 1. Non-Spenddown

The beginning date of eligibility is the first day of the month of the POC. This date may be backdated up to 3 months prior to the month of application, when all eligibility requirements were met, and the client has medical expenses for which he seeks payment.

### 2. Spenddown

The date of eligibility is the day on which the client incurs medical expenses which bring the spenddown amount to \$0.