Medicaid Work Incentive

23.3 APPLICATION/REDETERMINATION PROCESS

A. APPLICATION FORMS

A DFA-2 is used.

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

B. COMPLETE APPLICATION

The application is complete when the client or his representative signs a DFA-2 or DFA-MA-1 which contains, at a minimum, the client's name and address.

C. DATE OF APPLICATION

The date of application is the date the applicant submits a DFA-2, DFA-MA-1 in person, by fax or other electronic transmission or by mail, which contains, at a minimum, his name and address and signature. When the application is submitted by mail or fax, the date of application is the date that the form with the name, address and signature is received in the local office.

NOTE: When a faxed copy or other electronic transmission of an application is received that contains a minimum of the applicant's name, address and signature, it is considered an original application and no additional signature is required.

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, attached 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 the DFA-5 has been signed. No DFA-2 is required when the requirements in Section 1.3 are met.

D. INTERVIEW REQUIRED

No interview is required.

E. WHO MUST BE INTERVIEWED

Although no interview is required, when an interview is conducted, it is with the applicant or his representative.

A representative may make the application on behalf of the individual if it is established that he is physically/mentally unable to participate in the interview.

F. WHO MUST SIGN

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