

B. OVERVIEW OF THE ELIGIBILITY DETERMINATION PROCESS

The components of the eligibility determination process and a brief description of each follow:

1. Application Process

This process determines initial eligibility for one or a combination of programs. Depending on the program or coverage group for which an individual applies, the process may involve an interview with a signed application, a signed mail-in application or submission of an online application using inROADS or receipt of an application through the SSA's data exchange. See **Mail-In, inROADS And Applications Initiated From The SSA's LIS/MPA Data Exchange And Redeterminations** below for inROADS applications.

Certain programs, such as CDCS, I/DD, TBI and HCB Waiver, require a medical and/or other determination by a community agency or government division other than DFA and a financial determination by an Income Maintenance Worker. When an applicant's medical eligibility for, or enrollment in, these programs is pending, he must not be refused the right to apply, but must be evaluated for any or all DFA programs.

The application may be held, pending receipt of necessary information or verification, but there are processing time limits which must be met. All applications must have a final disposition and the client must be notified of the decision.

2. Redetermination Process

Periodic reviews of total eligibility for recipients are mandated by law. These are redeterminations and take place at specific intervals, depending on the Program or coverage group. Failure by the client to complete a redetermination usually results in ineligibility. If the client completes the redetermination process by the specified program deadlines and remains eligible, benefits must be uninterrupted and received at approximately the same time.

NOTE: Counting months for which benefits were prorated toward the 3-month limit, is an option for each state. If the client's previous state of residence includes a month of prorated benefits, the Worker asks only for the number of whole months of receipt. Therefore, regardless of the option chosen by the other state, the Worker must not count a prorated month.

- Whether or not the client owes a repayment to any Program

Each Program has specific requirements related to receipt of benefits from other states. Refer to Date of Application under each Program section below.

G. CONTINUATION OF THE CASE NUMBER AND TRANSFER OF A CLOSED CASE

Prior to data system entry for disposition of another application, the Worker must determine if there is an existing case number for the client.

When an existing case number is found in another county, the Worker must request immediate data system transfer to the client's new county of residence. The case record must be mailed to the new county of residence within 10 working days. The request may be accomplished by memorandum, electronic mail release or by telephone.

H. WHEN APPLICATION IS MADE OR RECEIVED IN THE INCORRECT COUNTY OFFICE

1. Applications Made In Person Or By Mail

The following procedures are used when an applicant mails or makes his application in the office of a county in which he does not reside.

- When a mail-in application is received in the incorrect county office, it must be mailed to the correct county office the same day it is received. In addition, the correct county office must be notified the same day by electronic mail that the form is being mailed.
- If the client visits the incorrect office to apply, the application must be accepted and an intake interview completed. The Worker must complete a system transfer to the correct county office on the date the application is made. The correct county office must be notified

by electronic mail that the case is being transferred. The client must be informed of additional requirements he may have to complete in the correct county.

- If the client telephones the incorrect office, the Worker must give him the address and telephone number of the appropriate office. If he requests an application be mailed to him and does not choose to contact the appropriate office to have this done, one is mailed to him from the contact office, along with instructions to return it to the address of the correct county office. The Worker must notify the other office, by electronic mail, so the county may add the client's name to the application register. If the client, after explanation of the available Programs, wants to apply for SNAP benefits, the contact county screens for Expedited Service eligibility, explains this to the client and notifies the correct county office that this was done. Expedited benefits are issued by the county of residence within prescribed time limits, based on the date of application established by the contact office.

2. Applications Submitted By Use Of inROADS

The following procedure is used when an applicant submits his application by inROADS to a county in which he does not reside.

When an inROADS application is submitted to an incorrect county office, the printed application must be mailed to the correct county office the same day it is received. In addition, the correct county office must be notified the same day by electronic mail that the application is being mailed. When the application has been signed electronically or the signed signature page and any verification is received, these must also be mailed to the correct local office the same day received.

If the client printed and mailed the inROADS application, follow the procedures in **Applications Made In Person Or By Mail** above.

3. Applications Made In Person Or By Mail Initiated From The SSA's Low Income Subsidy (LIS)/Medicare Premium Assistance (MPA) Data Exchange

The SSA exchanges LIS data files with the Department to process the LIS applicant's request for MPA. The client files are considered applications for MPA. RAPIDS issues the DFA-QSQ-1 to these potential recipients of MPA. If the MPA applicant has had no case in RAPIDS in the last 30 days, RAPIDS designates a sending county based on the applicant's address in the LIS file. When the designated county is not the county of the client's residence, but the DFA-QSQ-1 is returned to the