

2.1 INTRODUCTION

Case maintenance is used to describe all activities which are required, between AG approval and the first redetermination and between redeterminations, to ensure that only eligible clients receive benefits and that the benefit amount is correct.

The process requires that specific changes in the client's circumstances be reported to the Department. The primary source of such information is expected to be the client, but information from all sources is considered. The Worker is then required to take all necessary action to update the client's case record and data system case, when appropriate. When any case maintenance activity results in AG closure or a change in the benefit level, the Worker must notify the client. Some changes, such as an address change, require client notification even when the benefit is not affected. See Chapter 6.

A. GENERAL SOURCES OF INFORMATION

The need for case maintenance originates from many sources. The following general list of sources applies to all programs and coverage groups. More specific information about these sources and others is found in the Program-specific sections which follow.

- The client
- An individual acting for the client. The client may ask someone to act on his behalf. When an individual, other than the client, reports information about the client, no action is taken based on such information, until it is confirmed by the client. The Worker must initiate contact with the client, when required by the Program.

EXCEPTION: In the following circumstances, action is taken without client confirmation:

- The client is a child, and the information is reported by a parent, or by another individual, who applied for the child.
- The individual is the appointed legal representative for the client. This includes, but is not limited to, a conservator, Power-of-Attorney (POA), **Authorized Representative** or committee.
- The information is provided by the client's spouse, who is living with him, or would be living with him, if he were not institutionalized.
- The client is unable to act for himself because of mental or physical illness, and there is no reason to doubt the motives or competency of the individual who supplies the information.

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- For the Supplemental Nutrition Assistance Program (SNAP), the client's Authorized Representative(s) or Authorized Cardholder(s).

The case recording must state the source of information, whether or not the client confirmed the information, or the reason confirmation was not obtained.

- Complaints about the client. Individuals in the community and other DHHR employees may report information to the Department which has a bearing on the client's eligibility. The report may be in the form of a complaint about the client or a claim that he is receiving benefits fraudulently. If the reported information would have no effect on eligibility for the specific Program, this must be explained to the individual providing the information, without confirming that the client receives such benefits or revealing any case information. The nature of the complaint must be recorded in the case record, but not the name of the complainant.

If the reported information would have a bearing on eligibility or the benefit level, if true, the Worker must contact the client to confirm it, keeping in mind the AG's reporting requirements. Verification may be requested, if appropriate. The Worker must not take action, or indicate he is taking action, until the complaint is substantiated. Regardless of the outcome, the nature of the complaint, but not the complainant's name, and the resolution must be recorded. When the complaint involves allegations of fraud, the Worker must determine if there is reason to believe the client committed fraud. If so, and the amount is \$500 or more, the Worker must make a referral to IFM. See Chapter 20.

EXAMPLE: A woman calls to report her neighbor's oldest son moved out of the home and she has purchased a new vehicle. After reviewing the case, the Worker finds that the AG is receiving SNAP benefits only and is not required to report changes except when the AG's income exceeds the 130% FPL. The Worker thanks the caller for her information and explains that countable assets and reporting requirements differ among Programs. The information is noted in case comments and explored at the next scheduled redetermination.

- Information from other offices or bureaus within DHHR.
- Data system matches and case maintenance functions. Each Program has specific reports and other case maintenance functions. See Program-specific information.
- **Federal Data Hub is used for Medicaid Groups.**

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- A SNAP or WV WORKS AG redetermination is not completed by the deadline date in the month the AG is due for redetermination.
- Phase II of TM ends.
- Extended Medicaid coverage ends.
- Medically Needy non-spenddown AG's, not redetermined in the 6th month of eligibility.
- Medically Needy spenddown AG's at the end of the POC.

b. Closure Due to Loss of Contact

Loss of contact occurs when the client moves and does not notify the Department. The Worker may become aware of this when a support services payment, medical card or other correspondence is returned. **The Federal Data Hub may also indicate a client's updated address.**

The Worker must first check the address in RAPIDS. If it is incorrect due to a data entry error, the Worker must correct it and release the benefit(s) to the correct address. For SSI Medicaid recipients, the Worker must check SOLQ.

If the address is correct and/or the Postal Service indicated a new address on the returned correspondence, the Worker sends an DFA-6 to the client's new address. If the DFA-6 is returned as undeliverable, or, if the client does not report his new address by the date indicated on the form, the AG is closed, after proper notice. If the Postal Service indicates no new address on the returned correspondence, the AG is closed, after proper notice.

NOTE: This does not apply to Medicaid for Continuously Eligible Medicaid (CME) AG's. The AG remains open until the next redetermination.

For SNAP AG's, see the specific reporting requirement in Section 2.2.B. SNAP AG's are not required to report a change of address and information from the Postal Service is not considered verified upon receipt. The Worker must only act on this information if it affects other programs of assistance in RAPIDS.