Application/Redetermination Process

Case Reviews And Case Maintenance

While a redetermination is a required periodic review of total eligibility, a review may be conducted at any time on a single, or combination of questionable eligibility factor(s).

NOTE: SNAP recipients may be requested, but not required, to complete a face-to-face interview between redeterminations. See Section 2.2 for an explanation of the procedure used when the Worker or Agency needs to clarify information received about the SNAP AG.

The case maintenance process may involve a review or activities that update the Department's information about the recipient's circumstances between the application and first redetermination and between redeterminations. Changes in eligibility or the benefit amount may occur. If so, data system action and client notification of any changes are required.

Some special situations may require a more formal review process. This may be a special procedure to target an error problem.

NOTE: Home visits for SNAP AG's may only be made on case-by-case basis and not because an AG fits an error prone or other profile.

4. Resource Development

Medicaid recipients are responsible for applying for and accepting alternative means of support. This is an eligibility requirement for this Program. See Chapter 5.

WV WORKS recipients are responsible for taking necessary steps to apply for alternate available resources. This resource development is part of the Personal Responsibility Contract. See Section 5.2 for details and exceptions.

SNAP recipients must be encouraged to take advantage of any potential resources that may be available, but failure to apply for or accept such benefits does not affect SNAP eligibility.

C. APPLICATION REGISTER AND OTHER COUNTY CONTROLS

Application Register

Each local office must maintain a register of applications received by the Department on Form DFA-15, Application Log, or a similar method, containing at a minimum, the same information on the DFA-15. The office

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may choose to have the application register maintained for the entire office or unit. If retained by each unit, copies of the registers must be compiled at the end of each month and stored together in one location.

2. Home Visit Register

The local office must devise a method to control and monitor inquiries and requests for applications which require a home visit. In addition, any home visit made must be shown on the log.

If any other registers or controls related to the application process are required, they are program or coverage-group specific and listed with the program or group.

The Worker, Supervisor, CSM or RD may establish any other registers necessary for the day-to-day operation of the local office.

D. WORKER RESPONSIBILITIES

The Worker has the following general responsibilities in the application process. Responsibilities that are Program- or coverage group-specific are found in the Program sections of this Chapter.

- When the Worker has access to the applicant, he must inform him of Department benefits, and providing SSN's for non-applicants is not required but will be used to facilitate enrollment in insurance affordability programs for verification of financial information.
- Accept an application from any person or his representative who wishes to apply.

NOTE: Certain programs, such as CDCS, I/DD, TBI and **ADW** 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.

- Ensure the client is given the opportunity to apply for all of the Department's Programs on the date that he expresses an interest.
- Obtain all pertinent, necessary information through verification, when appropriate.
- Inform the client of his responsibilities, the process involved in establishing his eligibility, including the Department's processing time limits, and how the beginning date of eligibility is determined.