

## Client Notification

## 3. WV WORKS And Medicaid Redeterminations

The date entered must be no earlier than 10 days from the date the DFA-6 is completed.

If the client fails, without good cause, to provide the information by the established date, an DFA-NL-C must be sent to notify the client of the failure and the resulting case action.

**NOTE:** All data sources electronic or otherwise must be checked before verification is requested for MAGI Medicaid.

## B. WHAT CONSTITUTES AN ADVERSE ACTION

An DFA-NL-C is used for client notification of all adverse actions except those specified in 6.3. In this case, an DFA-NL-B is used. Adverse actions are defined as follows.

SNAP BENEFITS	WV WORKS	MEDICAID
AG closure Decrease in SNAP benefit amount Shortened certification period <b>NOTE:</b> The following are not adverse actions, but do require client notification: <ul style="list-style-type: none"> <li>- When the benefit amount does not increase following an SSI check reduction for repayment of an error caused by the client's intentional misrepresentation.</li> <li>- When the benefit amount does not increase following a reduction, suspension or termination of a federal, State or local means-tested welfare or public assistance program due to the client's failure to comply with the program's requirements. This includes a <b>closure of</b> WV WORKS benefits due to a sanction.</li> </ul>	AG closure, including closure due to imposition of a sanction  <b>Closure of</b> the benefit amount due to imposition of the 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> or 4 <sup>th</sup> sanction.  Removal of an individual from the AG, when the benefit amount decreases  <b>NOTE:</b> A special notice letter is required to impose a sanction based on failure to comply with the PRC. See item E below.	AG closure  Removal of an individual from the AG