

## 4.1 INTRODUCTION

**NOTE:** Verification, except for identity, prior to approval is waived for SNAP Expedited Service cases. See Chapter 1.

Verification of a client's statement is required when:

- Policy requires routine verification of specific information. See Section 4.2.
- The information provided is questionable. To be questionable, it must be:
  - Inconsistent with other information provided; or
  - Inconsistent with information received by the Department from other sources; or
  - Incomplete; or
  - Obviously inaccurate; or
  - Outdated.
- Past experience with the client reveals a pattern of providing incorrect information or withholding information. A case recording must substantiate the reason the Worker questions the client's statement.
- The client does not know the required information.

**NOTE:** During the certification period for SNAP, reported changes resulting in a decrease in benefits do not require verification unless the reported change is a new source of income.

Verification is not required from the individual when:

- It is known the individual does not have access to the requested information.
- The information is known or available to the Department.
- The client's response is a negative statement unless his statement is questionable. An example of a negative statement is when a client reports that he has no bank account. His negative statement is not verified unless there is a valid reason to question it.

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It is an eligibility requirement that the client cooperate in obtaining necessary verifications. The client is expected to provide information to which he has access and to sign authorizations needed to obtain other information.

For Medicaid Groups and WV CHIP Only: Being homeless, a victim of a natural disaster or emergency situation are all considered as limiting an individual's compliance with obtaining verifications. Once citizenship and alien status are verified, an eligibility decision is made for these individuals on existing information alone.

Depending upon the program and the item or requirement for which verification is requested, refusal to cooperate may result in one of the following:

- Denial of the application
- Closure of the AG
- Ineligibility of an individual(s)
- Disallowance of an income deduction or an incentive payment

No case may be determined ineligible when a person outside the AG or Income Group fails to cooperate with verification. The following persons are not considered outside the AG or Income Group for these purposes:

- Ineligible student (SNAP)
- Ineligible aliens (all programs)
- Disqualified persons (WV WORKS and SNAP)
- Persons who fail to attest to or verify citizenship or alien status (requirements varied by program)
- SSI recipients who would be required to be included in the WV WORKS AG, except for receipt of SSI.

## Verification

## A. CLIENT RESPONSIBILITY

The primary responsibility for providing verification rests with the client. For Medicaid and WV CHIP verification begins with client self-attestation verified by electronic data sources. Failure of the client to provide necessary information or to sign authorizations for release of information results in denial of the application or closure of the active case, provided the client has access to such information and is physically and mentally able to provide it.

The client must not be required to provide verification unless information cannot be obtained electronically or self-attestation and electronic data sources are not reasonably compatible. See item C below.

## B. WORKER RESPONSIBILITIES

The Worker has the following responsibilities in the verification process:

- At application, redetermination and anytime an DFA-6 is used, the Worker must list all required verification known at the time. The client must not be required to verify a few items at a time, unless information received after the eRAPIDS verification notice or DFA-6 is issued calls for additional verification.
- If the client is unsuccessful in obtaining information, or, if physical or mental limitations prevent his compliance, and there is no one to assist him, the Worker must obtain the verification.
- The Worker must accept any reasonable documentary evidence as verification and must not require a specific kind or source of verification, if the client's verification is reasonable. Verification may be submitted in person, by mail, fax or electronically.
- The Worker must not request verification if the case record or other documentation shows that verification has previously been supplied. It may, however, be requested if the verification provided or shown in the Department's records is incomplete, inaccurate, outdated or inconsistent with recently reported information. Unchanged information is not verified unless it is incomplete, inaccurate, outdated or inconsistent with recently reported information.

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- If the client requests a receipt for verification he leaves at the county office or with the Worker, the Worker must provide a signed statement for the client showing the following information:
  - Name of person who leaves the information
  - Case name
  - Date received
  - Specific description of the information, including the date, title and source of any documents
  - Any other information the Worker wishes to include
- When the client alleges domestic violence, the Worker, in order to insure the safety of the individual, must never contact the abuser, his relatives or friends. See Section 4.2,E,7 for acceptable method of verification in domestic violence situations.
- When the Worker must make collateral contact, such as but not limited to a client's employer, the Worker must not disclose the client's status as an applicant/recipient of a DHHR program.
- When the Worker receives information about the SNAP AG during the certification period which requires additional clarification or verification, the Worker may request, but not require that the client report to the office for an interview.

**NOTE:** For SNAP, home visits are made only on a case-by-case basis and not because an AG fits an error prone or other profile. A home visit is used for verification only when documentary evidence cannot be obtained or is insufficient to make an eligibility or benefit level determination.

### C. REASONABLE COMPATIBILITY – MAGI MEDICAID GROUPS AND WV CHIP

#### 1. Definition

Reasonable compatibility refers to the process and result of reconciling discrepancies between an individual's self-attestation about his non-financial and financial information and the information reported by the federal data hub or other electronic data source.

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**2. Reasonable Compatibility Standard**

This refers to the allowable difference in income between the data match income reported in the electronic data source and that of the client. The current standard is 10% of the client reported income, arrived at by multiplying the client reported figure by .1. See 3,b.

**3. Applying Reasonable Compatibility**

This provision applies to all MAGI, and WV CHIP groups.

**a. Applying Reasonable Compatibility to Eligibility Factors:**

Eligibility determination begins with the client's self-attestation regarding his non-financial and financial information. When available, client information is matched by the federal data hub or other electronic data source.

Self-attestation is accepted without further verification for factors including name, age and date of birth.

The majority of eligibility factors are subject to the reasonable compatibility assessment when there is a discrepancy between the client's statement and information in the hub or other electronic data source.

**NOTE:** When the discrepancy concerns income, if the difference between the amount reported in the electronic data source and the client's stated amount is equal to or less than 10% of the current reasonable compatibility standard, the difference is allowable and no further verification is required.

Discrepancies must be reconciled. First, the client must be given the chance to provide an explanation for the differences. If the client explains the differences and this is accepted as reasonable, no further verification is necessary.

Second, if questionable and the explanation not accepted, the Worker must check all other electronic data bases first as well as any other information available to the Department, such as the record, rather than requesting verifications from the individual. See Section 4.2 for acceptable sources of verification for each item needed.

Only when responses from the applicant and information from the federal data hub, or other electronic data source continue to not be reconciled as reasonably compatible is the applicant pended.

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**EXCEPTION:** Citizenship and immigration status must be verified regardless of the citizens explanation of discrepancies.

**EXAMPLE:** John's reported SSN is sent to the hub for verification. The hub reports no information in the system on John. He must verify his SSN and citizenship.

b. Reasonable Compatibility Specific to Financial Eligibility Factors

The client's self-attestation regarding his income is matched by the federal data hub and Workforce WV wage data. When no financial information is returned by any of these electronic sources, there is nothing to reconcile with the self-attestation. If the self-attested figure is above or below the maximum threshold for the household size, the self-attested amount is used for eligibility determination without further verification.

Discrepancies greater than 10% must be reconciled when eligibility is affected.

When the applicant's income figures are reasonably compatible, the Worker accepts the difference and the eligibility determination process continues.

When determining if the figures are considered reasonably compatible, the Worker applies the reasonable compatibility standard in one of the following ways:

(1) Stated income above and electronic data source income above the allowable income limit

Regardless of the size of the difference in the amount of the two incomes, it does not affect eligibility. Since both are over the allowable income limit, they are reasonably compatible. No additional verification is required.

**EXAMPLE:** Harold applies for Adult Medicaid and states his income is \$1700 per month. The hub returns a figure of \$2,200 per month. The allowable income limit is \$1,238 per month. The Worker denies the Medicaid.

(2) Stated income above and electronic data source income below the allowable income limit

The client's self-attestation is the starting point for determining eligibility. Since the Department does not verify negative

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information, the difference in the amount of the two incomes does not affect eligibility. No additional verification is required.

**EXAMPLE:** Marjorie applies for Medicaid for her and her two daughters. She attests to income in excess of the allowable income amount for a tax filing unit of three. The hub indicates her income is below the allowable income for this Medicaid Group. The Worker accepts the client's self-attestation and denies the Medicaid.

- (3) Stated income and electronic data source income below the allowable income limit

Regardless of the size of the difference in the amount of the two figures, it does not affect eligibility. Since both are below the allowable income limit, they are reasonably compatible. No additional verification is required.

**EXAMPLE:** Jean applies for Medicaid with a tax household of two. She states that her income is \$1,300 per month. The hub returns IRS data with a figure of \$1,500 per month. The allowable income limit for Jean's group is \$1,677 per month. Although the difference between the stated and hub income is \$200, an amount greater than the 10% reasonable compatibility standard of \$130, the two figures are reasonably compatible since both are below the allowable income limit and eligibility is not affected. Medicaid is approved.

- (4) Stated income below, electronic data source income above allowable income limit

Since the difference affects eligibility, differences between the income figures must be reconciled to determine if they are reasonably compatible.

- (a) When the difference between the stated and electronic data source income is less than or equal to 10% of the client reported income figure, the two figures are considered reasonably compatible. No additional verification is required.

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**EXAMPLE:** Jamie applied for Medicaid as a single adult. He states his income is \$1,200 per month. The electronic data source returns income of \$1,340 per month. The allowable income limit is \$1,238. Differences that affect eligibility must be reconciled to determine if the two figures are reasonably compatible.

The reasonable compatibility standard is the client reported income X .1.

In this example -  $\$1200 \times .1 = \$120$ . The difference in the income figures must be \$120 or less to be reasonably compatible.

The difference between the client reported income and the electronic data source income is \$140 ( $\$1340 - \$1200$ ); therefore, the amounts are not reasonably compatible, that is they are discrepant.

The Worker must check other available data sources known to the Department. If the client reported income cannot be verified by the Worker, income verification is requested from the client.

**EXAMPLE:** Same as the above, except Jamie states there must be an error in the information transmitted from the electronic data source, but offers no explanation. The worker does not accept his explanation and checks other data sources available to the Department before pending the applicant. None are available regarding Jamie and he is pending for income verification.