

MANUAL MATERIAL TRANSMITTED

MANUAL: INCOME MAINTENANCE

CHANGE NUMBER: 273

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			iv	1	12/99
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60a - 60b	11	7/00	60a	11	1/03
			60b	11	7/00
61 - 62	11	7/00	61	11	1/03
			62	11	7/00
65 - 66	11	7/00	65	11	1/03
			66	11	7/00
iii	16	5/01	iii	16	1/03
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52c	16	19/98	52c	16	1/03
			QI-2 Termination Notice		One Time Only
DATE: DECEMBER, 2002 TO: All Income Maintenance Manual Holder					

This change is being made to terminate the QI-2 Medicaid coverage group. Implementing legislation for this coverage group provided funding only through December 31, 2002. A NOTE was added to Section 16.6 and the information in that section will remain for historical purposes. References to QI-2 were removed from all other sections.

QI-2 recipients will not receive a redetermination form in November, 2002.

All active recipients will receive a termination notice which will be mailed on December 13, 2002. Benefits will end December 31, 2002 and benefit checks for 2002 for individuals approved by December 31, 2002 will be sent around the first full week of January, 2003.

A WordPerfect copy of the termination notice will be provided with this change and by GroupWise so that it can be provided to any QI-2 who is approved after December 11, 2002. The Worker must fill in the date the notice is mailed, the recipient's name, address and case number. A copy must be filed in the case record.

Policy questions should be directed to the OFS Policy Unit.

RAPIDS questions should be directed to the RAPIDS Help Desk.