



Department of Human Resources  
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## FIA INFORMATION MEMO

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TO: DIRECTOR, BALTIMORE CITY DEPARTMENT OF SOCIAL SERVICES, DISTRICT MANAGERS AND ADMINISTRATORS FOR FAMILY INVESTMENT, SUPERVISORS AND CASE MANAGERS

FROM: CHARLES HENRY, ACTING EXECUTIVE DIRECTOR, FIA

RE: QUESTIONS AND ANSWERS – BALTIMORE APPEALS AND HEARINGS TRAINING

PROGRAM AFFECTED: TEMPORARY CASH ASSISTANCE

ORIGINATING OFFICE: OFFICE OF POLICY, RESEARCH AND SYSTEMS

FIA Policy and Training staff conducted the Baltimore City Appeals and Conciliation Training in May and Consent Order training in August. Both training sessions provided BCDSS staff with information concerning new policy and procedures. The following is a compilation of questions resulting from the sessions with answers and clarifications related to those questions.

Q1. The 200, 300 and 400 level codes are generated by CARES after the customer's case closes. Should case managers go into prior active case months to PF-13 and generate additional text behind CAFI screen?

A. No. Most of the codes listed on the CARES Reason Codes and COMAR Text chart distributed during training are case manager generated adverse action codes. **When case managers take negative action on a case that causes a denial, reduction or closing code to appear on the CAFI screen, they must add appropriate additional text to the notice prior to finalizing the case.**

The following codes may be either worker generated or automatically batch generated because of a system interface:

230 – No required verif

235 – Failed to reapply

306 - Unearned income

231 - Member did not give required verification

302 – Child support more than grant

327 - Recoupment amount change.

Sometimes CARES generates a closing or reduction notice because of an automated systems action. In these situations, the notices are sent out during the overnight batch. Since this is a systems action, the case manager cannot add additional text. **When the notice is due to a case manager's action, additional text must be added.** The CARES Notice Report does not include those actions that are system generated.

- Q2. One of our customers is on her first sanction. She came back to reapply in the middle of the month. The case is in pending status. A new activity appointment was given to the customer who still did not comply. If the application is denied at the end of the 30-day application period, will this be counted as a second instance?
- A. Since this is a denial, no incident of sanction is counted and she will still be on her first sanction. We can only count a sanction instance on active cases.
- Q3. Will CARES prompt the case manager to enter the text on the notice screen?
- A. Yes, CARES prompts the case manager to add text. A new soft edit was put on the system effective August 28. The case manager will still have to check the CAFI screen for an adverse action code and add case specific text.
- Q4. Is there a difference between conciliation notice and contact notice?
- A. Yes, the conciliation notice starts the formal first sanction 30-day conciliation process. The contact notice is used when follow-up information needs to be addressed during the 30-day period. It is also used for second and third instances that do not require a 30-day period.
- Q5. When a customer applies for TCA, they are given a 1052 for child support. If the child support requirement is not completed, a 1050 is mailed. If there is no response, the application is denied. Is this procedure still the same for TCA applications or is another letter now used?
- A. The procedure is basically the same but you would need to add case specific text to the denial notice such as:
- “You did not see the Child Support Worker” or  
“The Child Support Worker said you did not cooperate by providing the absent parent’s \_\_\_\_\_.”

Q6. Will all the adverse action codes on CARES be changed to address every reason a case manager closes a case? I am only speaking to the 500 series codes.

A. The 500 series codes have been changed to reflect simple, easy to understand language. It is impossible to cover every circumstance. Pick the code closest to your reason and give specific information in the freeform text you add. You may want to ask your supervisor for help.

Q7. What is the appeals process?

A. All customers have the right to file a verbal or written appeal. The district office helps customers with this process. When corrective action is needed, the unit will promptly complete that action. The district office gives the appeal record to the appeals liaison. The liaison offers the customer an informal conference. Depending on the outcome, the liaison can offer the customer an opportunity to withdraw the appeal, determine eligibility for pending benefits or reinstates benefits, if appropriate.

The liaison forwards the appeals file to the Appeals Unit. The Appeals Unit Representative does a review and may return the case for follow-up on the Administrative Law Judge's ruling if the agency decision is reversed or remanded back to the department. See AT 01-04 for additional information. DHR will offer additional training in October.

Q8. For MA purposes, can the words in bold letters for code 552 be changed? **"You must verify assets, income and case information that is unclear. We asked you to \_\_\_\_\_ . You did not \_\_\_\_\_ ."**

A. Yes. The case manager can change the bold text to more accurately reflect an MA reason.

Q9. What does the BCDSS Appeals Unit look for when a customer appeals their case? If there is something missing in the case record, does that customer automatically win the appeal?

A. The Appeals Unit looks at a case to ensure supporting evidence is available and proper procedures are followed. If the center made a mistake, the unit returns the case via the center's appeal liaison. During a hearing, this unit summarizes the case and answers questions about department actions. The Judge's ruling depends on how well the department supported their action. If information is missing, he will remand the case back to the department. That is why proper documentation and verification is such an important part of the record.

Q10. The appeals letters are scaring customers. Can they be simplified?

A. FIA has revised the appeals letters to address this issue. We have modified CARES to ensure that "Appeal Requests" are mailed to appropriate case types such as approvals, reinstatements, denials, changes, UP/OP, closings and suspensions.

Q11. Why is the responsibility of proving eligibility removed from the customer and placed on the worker?

A. The customer is still responsible for proving eligibility. The case manager, as always, will help the customer obtain proper verification. Under the Consent Order terms, the case manager is responsible for adding simple language to an adverse action notice or a denial. We want to ensure that the customer knows exactly why we are taking the action.

Q12. Why do we have to initiate a redet if the customer contacts us by phone? Why can't we wait until the customer shows up for the interview and narrate that the customer made contact by phone?

A. We want to acknowledge in writing that the customer scheduled a second appointment but did not keep that appointment. Initiating the redet allows the case manager to take the following CARES actions: reschedule the second appointment, close the case with a case manager generated CARES notice when customers do not keep second appointments and give customers a more accurate and correct closing reason. By doing this, FIA can automatically track the case, prove customers were given every recertification opportunity and show that they were correctly notified when they failed to meet requirements.

Q13. Can we use another code? The 552 code we are using now is not correct. In the past we used 566. "You did not do what you needed to do to meet all the program rules." It is not effective to go back to using the 552 code when the customer has never had a face to face interview.

A. The 500 series of codes are worker-generated codes. FIA used the 552 code as an example in the original Consent Order Training. You may select any code that more closely reflects the reason for taking an action. In this situation, BCDSS recommends that you use code 566.

- Q14. When is Johnston Square getting an up-to-date list of subsidized housing? QC is holding us responsible for knowing what is subsidized when the landlord and customer give us incorrect information.
- A. There is no list of subsidized housing at the present time. We recommend that you ask the customer if they are living in Section 8, Public Housing projects, or Rehab Housing. **DO NOT** count \$60 as income for HOPWA (Housing Opportunities for Persons with Aids)
- Q15. Will DHR provide written clarification on the need to initiate a redetermination based on the customer's request for a new appointment?
- A. FIA provided written clarification of this policy during the August training. We will offer additional training through the end of the year. FIA has completed system upgrades that reduce the amount of text the worker must enter.
- Q16. Do case managers make the decision on the 90-day appeal limit?
- A. No, the case manager should accept the appeal request from the customer. The judge will decide whether the appeal will be heard.
- Q17. What should the case manager do with the 334 Appeals Form?
- A. The case manager should help the customer fill out the 334 and give the completed form to their Appeals Liaison in the center.
- Q18. What should the case manager do if the customer was prompted by legal aid to test the case manager?
- A. Quality customer service is one of the case manager's main responsibilities. Regardless of the reason for a customer's request, you should always put forth your best effort to provide prompt and courteous service. You may request supervisory input to ensure the proper response. If this is an appeal situation, as always, accept the appeal request and offer the customer any assistance they may need.
- Q19. How do I handle sanctions? I am confused about sanction, conciliation and instance of sanctions.
- A. Action Transmittal 99-28 has a desk guide and detailed instructions on sanction, conciliation and instance. If you do not understand the process after reading this AT, please ask your supervisor for training. We will provide training on sanctions in October and November.

- Q20. Is Public Housing, HUD or Section 8 only for mothers on TCA? Can a person get housing aid if they work but are not on welfare or social services?
- A. Public Housing, HUD and Section 8 offer assistance to an applicant based on income. The applicant does not have to be on Welfare or Social Services.
- Q21. How soon must an oral request for an appeal be reduced in writing?
- A. Either the agency or customer should reduce an oral appeal to writing as soon as possible but no later than seven days after receiving the request.
- Q22. If a substance abuse customer attends treatment as a work requirement, which conciliation/sanction should be used if the customer fails to comply with the treatment program?
- A. Use the substance abuse conciliation/sanction. Remove the individual's needs from the grant. Refer the customer to a regular work activity. If they fail to comply with the activity, apply a full-family sanction. See AT 99-28 for additional information.
- Q23. If more than one adverse action reason code is showing on the CAFI screen, will more than one code show as "no text added" on the monthly compliance report?
- A. No. The report only shows one "no text added" reason code per notice regardless of the number of adverse actions listed on the CAFI. Add text for the most important TCA closing reason.
- Q24. CARES notices now show the case manager's full first and last name. Can CARES be changed to show only the case manager's first initial and last name?
- A. The local security monitor sets up this parameter. The district office can ask the local security monitor to make this change on CARES.
- Q25. Can the state add an edit that would remind case managers to add text on negative action cases?
- A. FIA has had an overwhelming number of requests for a soft edit that would serve as an "add text" reminder. We have processed the request and the edit is now in place. (Refer to question 3 for additional information)

Q26. Sometimes you expect a case to close for a specific reason but CARES selects another reason. Can we change the text to more accurately explain the closing?

A. You may change the text with supervisory approval. Review the case to make sure data elements are coded correctly. An incorrectly coded data element may be the reason you are not getting the code you expected.

Q27. Does CARES send a redet initiated alert?

A. Yes, CARES sends a number 304 "Redetermination Pending" alert. It is generated the day after a redet is initiated online. The alert is system deleted when the redet is completed.

Q28. I was closing a case for reason 552 "You did not give us the information we needed." I added the appropriate text. CARES entered the wrong COMAR text "A family member who was convicted of a drug felony after Aug. 22, 1996 cannot get TCA." Are the codes wrong?

A. The CARES codes are correct. We think you may have transposed a number on the STAT screen Reason Code field. If you accidentally entered code 525 instead of 552, CARES would generate drug felon text.

Q29. If you are processing more than one program such as TCA and FS, can you add the four lines of text for each program?

A. Yes, you can add four lines of text on the CAFI screen for the TCA and four lines of text on the FSFI for FS. The additional text for both programs will appear at the bottom of the notice.

cc: DHR Executive Staff  
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