

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ADDR	Narration	ALL	<p>Is each page of the narrative dated? Does it identify the worker and DO? Does it provide a complete and concise summary of the action taken? The narrative should include all action(s) completed for all AU's and/or associated AU's. Does it identify the HOH by name and ID number on each narrative page? Does it explain verification codes entered as other (OT)? Does it explain information about the case that cannot be entered on the screens, such as the actual U.S. entry date as well as the date of qualified alien status? Does it address others living in the home listed on the Application/Living With Form but not included in the AU? Does it address areas outside of CARES, such as Work Activity/WOMIS/SVES/SOLQ/MABS/SAVE, etc.? Does the narration explain why the case manager added free-form text on notices, especially worker-entered denials and closings?</p>	<p>PF21 from the ADDR screen to access the Narration. Review Narrative for proper documentation of case action. Does the narrative state what was done and why it was done? Does the narrative document instances of non-cooperation with work programs, substance abuse, and minor parent school attendance? Does it document conciliation and sanction and was the customer only allowed 1 conciliation period?</p>	<p>TCA-07.03.03.04 Chapter IV Section 16 FS Manual Section408 MA Manual Chapters 4, 8, 10, and 12</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Past Management	ALL	<p>At application: What caused the applicant to apply for benefits? Redetermination: Why isn't the customer working or receiving disability or unemployment benefits? Review the customer's current situation regarding deficit budget.</p>	<p>Does Narrative give explanation of past management when applying for any benefits or managing with excessive expenses</p>	<p>FS Manual Sec. 110 TCA-07.03.03.04 Chapter IV Section 4 MA Manual Chapters 4 and 6</p>
	ADDR	ALL	<p>Is the customer's residence within the project area (Maryland) and the local department area? Is this a "New Address?" Is there a separate mailing Address? Review if necessary the AU transfer process. Is there a residential address besides a post office box? Is the address complete and correct? Is it a Maryland address, and if not, why not? Are any previous addresses from the last 2 years entered (e.g., previous home address for a LTC applicant)? Is there a current, telephone number given to reach the customer and any representative?</p>	<p>Compare residential and mailing addresses against verifications or form(s) completed/ submitted by customer that shows address (CARES), 491, Rent form, etc. Review and update previous address when necessary.</p>	<p>TCA-07.03.03.04 TCA Manual Chapter V Section 3 FS Manual 110 MA Manual Chapter 4, 5 and Verifications in Appendix</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ADDR	Residency	ALL	If customer states household lived in another state before applying in Maryland, check to see if the customer received TANF, FS or MA /MCHP in the state.	Call the other state contact from AT#05-15 Ask the customer to provide written verification of residency, if questionable	TCA-07.03.03.07 Chapter V Section 3 FS Manual 110 MA Manual Chapter 5
	Authorized REP.	ALL	Has an authorized representative been designated to access benefits, etc., especially the spouse in a two-parent unit on the associated cash/FS AREP screens? If the customer requested a change in representative or that there be no representative, was this information entered?	If Authorized Rep make sure Rep is not listed in the mailing address. Go to AREP screen to review codes for who gets benefits and who gets notices (customer or rep or a combination). Review data and compare to record.	TCA-07.03.03.04 Chapter IV Section 3 FS Manual 404 MA Manual Chapter 4

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Primary Language	ALL	Has the primary language been determined for Notices, etc.?	<p>Review Primary Language and Interpreter Needed fields.</p> <p>Review to determine, if the customer is visually or hearing impaired, was this information entered and acted on? If the customer requested or needed an interpreter, was this information entered and acted on?</p>	<p>TCA-0703.03.04 TCA Manual Chapter IV Section 3</p> <p>MA Manual Chapter 4</p>
STAT	AU/HH Composition Mandatory Filing Unit	ALL	<p>Have all mandatory members been included (including family members who have financial responsibility but aren't requesting benefits—spouse, parent) and all sanctioned, disqualified or ineligible individuals been coded correctly? Were correct closing codes used to remove from case? Were MA/MCHP units constructed into the most beneficial coverage groups to allow for proper trickling and/or sprouting?</p> <p>NOTE: Penalty Information will also appear on STAT screen. A separate STAT will appear for each program (TCA, MA, FS). Check Penalty End Date. Take appropriate action when penalty</p>	<p>Check AU composition constructed at application/redet. Check Relationship and Financial Responsibility codes against verification in case. If "OTHER" is used for Relationship, check Narration for documentation. Check MA/MCHP coverage group for NPA/MA as worker can change this field. If a closing, check the status reason.</p> <p>NOTE: Penalty information will also appear on the STAT screen. A separate STAT will appear for each program (TCA, FS, MA/MCHP).</p>	<p>TCA-07.03.03.06 TCA Manual Chapter VIII Section 1</p> <p>FS Manual Section 100</p> <p>MA Manual Chapters 4, 6 and 8</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
STAT	Age	ALL	Is there a child age 19 attending school and expected to graduate in the calendar year included in the TCA unit? Is there a child 18 years old and still in school in the unit? Has a child age 19, but under 21 been evaluated for MA/MCHP appropriately?	Check Relationship and Financial Responsibility Codes. Check verifications in the record.	TCA-07.03.03.07 TCA Manual Chapter V Section 2
		FS	Are deemers identified (i.e., stepparent, alien sponsor)? Are <u>children</u> under the age of 22 living with parents included in the FS unit?	Check verifications in record. Review School Form (604) or school tape match in Baltimore City.	FS Manual Sec 100
DEM1	Age	MA MCHP	Are <u>parents</u> of child under 22 included in FS unit?	Review Living Arrangement verification form, check for relationship between tenant and landlord.	MA Manual Chapter 4, 6
		MCHP	Are spouses included in the unit? Are parent(s) with whom a child is living included in the unit? Has a child under 21 been evaluated for MA appropriately? Has a child under 19 been evaluated for MCHP appropriately?	Review Medical Coverage Group to ensure correct Medical Assistance Coverage Group. Review trickling and sprouting. Review MCHP AU to ensure proper trickling. Review DHMH referral filed to ensure proper MCHP Premium referral.	

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
DEM1	Voter REGIST	All	Has each HH member 16 or older, present at the interview been offered an opportunity to apply to register to vote.	Review case record for DHR 784 compare VOTER REG field for correct coding	TCA-7.03.03.04 TCA Manual Chapter III Section 12
	SSN/AGE/ NAME/ CLIENT ID	ALL	<p>Has SSN or application for SSN been verified for each A/U member? Remember a SS card is not required. System verification will change the code to "FV" when verified. If the customer has gone by more than one SSN, determine why and ensure the additional numbers are entered on the CLR screen.</p> <p>Is there a date in the SSN APPL DATE field and a code in referral field? If the customer has gone by more than one name, enter all of them. Is the name entered correctly?</p> <p>Is the date of birth correct?</p> <p>Has date of birth been verified for critical age factors such as child turning 18 or 22 for FS, and 19 or 21 for the MA/MCHP groups, or adult turning 65, etc.?</p> <p>Does the customer have more than one client ID?</p>	<p>Review SSN, DOB, and verification codes against verification in file. For newborn is there an IMA-20 or other verification in case correct. Has an alert been set for follow up of SSN for newborn? Validate questionable information against SVES/SOLQ. No SS card needed. If newborn, has 1184 process been completed? Is alert for follow-up of SSN pending.</p> <p>Check for punctuation marks in names –there should not be any. CARES bulletin 03-07 and FIA INFO MEMO 99-29.</p> <p>Ensure that a new client ID isn't/wasn't established for a previously known customer just because the name is entered differently.</p>	<p>TCA-07.03.03.07- TCA Manual Chapter V Section 6</p> <p>FS manual Section 405</p> <p>MA Manual Chapter 4, 5</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Living Arrangement	ALL	<p>If living with others, is there verification in record that the others purchase and prepare food separately, unless parent and child under 22 or spouse.</p> <p>Are there minor parents in the household? Is the minor parent the HOH? Is there a caretaker relative other than a parent in the household?</p>	<p>Check rent/living arrangement or shared expenses verification form to see who is listed and relationship to head of household. Review Living Arrangement and Verification codes. Check record for verification of living with for school age children.</p>	<p>TCA 07.03.03.07 TCA Manual Chapter V Section 6</p> <p>FS Manual Section 100</p> <p>MA Manual Chapter 4 and 6</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
DEM1	Marital Status	ALL	Is the marital status entered correctly? If the customer was previously married and now claims to be divorced or otherwise not married, verify the current marital status.	Verify marital status as necessary	MA Manual Chapter 4, 6, and Verifications Appendix
	Parental Status	TCA MA	Although there is no longer a Deprivation requirement for TCA and MA, CARES still requires that codes be entered for this screen. MA requires that the parental status and verification be completed for Absent Parent medical support referral to Child Support. Is there a Parental Status code for at least one child in the FAC unit?	Review DEM1" Parental Status Code and "Verification" codes for each child against case EDD/forms completed by the customer. Review parental status and verify if Absent Parent referral is needed for medical support/health insurance.	TCA-07.03.03.10 TCA Manual Chapter V Section 7 MA Manual Chapters 4 and 6
	Pregnancy	TCA MA MCHP	Review all fields associated with pregnancy, including EDC to ensure correct redet end date. Note that verification is not required of pregnancy for MCHP, unless there is a discrepancy.	Review pregnancy verification codes against case. If Other is used, check Narrative. Was an alert created for follow-up?	TCA-07.03.03.10 TCA Manual Chapter V Section 7 MA Manual Chapter 4, 5 and 6

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
DEM2	Citizenship	All	<p>Has citizenship been declared for all members? Is citizenship coded correctly, such as an asylee or refugee not being coded as a legal alien? If illegal or ineligible alien and medical emergency exists, has approval been requested /received from BSA and disability been approved (if 21-64 and not pregnant) by SRT?</p> <p>If a customer previously reported to be an alien and now claims to be a citizen, was this change verified?</p>	<p>Utilize SAVE to support citizenship status. Follow-up on secondary verifications process, when necessary. Review citizenship and verification codes on CARES against verification in case. If Other is used as a code, check Narrative for explanation. If coded as non-citizen, focus attention to ALAS field coding and Attachment A. (Immigration coding chart.)</p>	<p>07.03.03.07 07.03.03.15 TCA Manual Chapter V Section 4</p> <p>FS Manual Section 120</p> <p>MA Manual Chapter 5</p>
	Student Status	<p>FS</p> <p>MA</p>	<p>Does any NPA /FS member age 18-50 attending post secondary school meet the definition of an eligible student (i.e. has a dependent child under 12 or works at least 20 hours per week or is in work study.)?</p> <p>Review student earnings for a child under 21 who is either a full-time student or a part-time student and not employed full-time.</p>	<p>Review age and student status code against verification in case. If other is used for verification check Narrative. If PT, HT, or FT is entered in "student status" field review ALAS screen for correct coding. NOTE: Student Status field is coded Former Student (FS) for anyone who ever attended school but is currently not attending.</p>	<p>FS Manual Section 102</p> <p>MA Manual Chapter 7</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
DEM2	MEDICAL INCAPAC	TCA MA	<p>Is any member claiming a disability and has the disability been verified? Has the time period on the medical form expired? Does the medical appear altered? If MA (unless receiving SSI/SSDI) or potential MA, has medical been submitted to SRT unless receiving SSI or SSDI. Has decision returned from SRT? Is customer eligible?</p> <p>For any one in the AU determined disabled by SRT, is the Disability Approval Source code that gives uncapped shelter correct?</p> <p>For an MA ABD customer, aged 21-64, SSA or SRT requires a current disability determination.</p> <p>Is there a HH member receiving SS, SSDI, SS (including children), VA, RR</p>	<p>Check the disability and verification code against medical verification in record and SRT material in case record.</p> <p>Review "Disability Approval Source" code.</p> <p>Note: A customer who has a disability but is not receiving SSA/SSI, Railroad Retirement, or VA benefits (determined to by VA to be 100% disabled) must be active MA -and coded MS in the disability source field.</p>	<p>TCA 07.03.0.08 TCA Manual Chapter V Section 11</p> <p>FS Manual Section 130</p> <p>MA Manual Chapter 4 and 5</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
DEM2	IPV	ALL	<p>Has a member committed an Intentional Program Violation? Was the electronic Disqualified Recipient System used to verify previous IPV penalties?</p> <p>If TCA eligibility was lost due solely to IPV, was MA eligibility redetermined for coverage group F04?</p>	<p>Review this screen for IPV code and compare to case record.</p> <p>Was the electronic Disqualified Recipient System used-information entered and obtained?</p>	<p>TCA 07.03.03.17 TCA Manual Chapter XVI Section 1</p> <p>FS Manual Section 480</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	PPI: Health Health Insurance Entitled to Medicare Part A Insurance Dropped Premium OK	TCA MA/MCHP MA MA/MCHP MA/MCHP	Customer must provide proof of health examination once per year for children from birth to 6 years. Do any HH members have health insurance? Review Medicare Part A eligibility Has the customer dropped health insurance in the last 6 months? Is the HOH willing to pay the premium?	Review Pre-school codes against verifications in case record. (See ALAS screens for more entries on PPI.) A child under 7, subject to Pre-school health, must be coded PT for student status to prevent system closure of the child. Check verifications in record against DEM2: medical entitlement codes. Review the health insurance field and third party liability. Review the Entitle Med A field for accuracy and if necessary, referral to SSA. Review Insur Dropped Field. Review the Premium OK field.	TCA 07.03.03.07 TCA Manual Chapter V Section 8 MA Manual Chapter 4
TPL1	Medical Insurance	MA/MCHP FS	Does customer or AP have health Insurance?	From DEM2 hit PF22 to access TPL1. If customer or AP has 3 rd party coverage, make sure the correct information was entered.	MA Manual Chapter 4

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
FSME	Medical Bills	FS	Is there any FS member age 60 or older or disabled who is entitled to special medical expense deductions? Has <u>gross</u> medical expense been entered on FSME?	If DOB on DEM1 results in age 60 + or the Disability codes on DEM2 show disabled per federal guidelines, the FSME will appear. Review for entry of medical expenses against documentation in case record. If no expenses entered check Narrative for explanation.	FS Manual Section 212
LTSI	Spousal assets	MA LTC and waiver	Was the information entered correctly and completely about spousal assets as of either the first date of institutionalization or the date of waiver eligibility?		MA Manual Chapter 10

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ALAS	Alien	All	If non-citizen, have SAVE procedures been followed? Is the non-citizen eligible for state TCA program?	If non-citizen, compare Citizenship and verification codes to verifications, SAVE material and sponsor information (if applicable) in case record. Check to make sure all ineligible members are coded "ND202" on STAT screen. Compare DEM2 Citizenship code and ALAS "INS STATUS" code against Immigration Coding Requirement Chart.	MA Manual Chapter 5
	Student	MA/MCHP	<p>Has all information been entered on the eligible student for FS?</p> <p>If there is a student in the household, what is their age, do they have earnings?</p>	<p>Check verifications in record against code entered in "Good standing" field. For child eligible for benefits based on graduation in the calendar year he turns 19, check screen "Graduation Date" field for month and year of the child's 19th birthday.</p> <p>Review student status regarding MA/MCHP age and earning requirements.</p>	MA Manual Chapter 7

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ALAS	PPI –School	TCA	Customer must verify once every year that school age children (age 7 in calendar year, or <u>under age 19 and expected to graduate in the calendar year he turns age 19</u> are attending school at least 80% of the time.	Check verifications in record against code entered in “Good Standing” field. For child eligible for benefits based on graduation in the calendar year the child turns 19,check screen” Graduation date” field for month and date of the child’s 19 th birthday.	07.03.03.07 TCA Manual Chapter V Section 8

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
APID	Child Support	TCA MA	<p>Has AP been identified for the appropriate children? A series of AP screens will appear for each absent parent-APAD, APDE, APEM, and APCO. Is non-cooperation or good cause indicated? Have support rights been assigned?</p> <p>Has all case record information been entered?</p> <p>Was available information on IV (CAS1/CAS2) screens used to complete CARES child support screens? If the AP is unknown, is there an explanation in narration?</p> <p>Has AU closed because of excess child support? Did the AU trickle and sprout appropriately? If receiving NPA/FS, has child support income been entered?</p>	<p>Check that AP name is correct and complete as compared to case documents and information known to CS. Review the Legal Relationship code for each child and AP. Make sure the children are coded correctly for the AP. Make sure children are associated with any correct court orders. Check APID "Cooperation" code. An "A" in this field indicates the caretaker failed to keep an appointment and a #957 alert was generated to the case manager.</p> <p>Is the caretaker cooperative with CS? Has the payee been sanctioned for non-cooperation or filed good cause?</p> <p>Access the CSCP screen from the child's UINC screen; to ensure correct amount of support payment is entered on the UINC screen. Review the MA trickling process to ensure the correct coverage group.</p>	<p>TCA 07.03.03.10 TCA Manual Chapter V Section 7 and Chapter XVII Section 3</p> <p>MA Manual Chapter 4 , 6 and 15 FS Manual Section 212</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
AST1,2	Assets	All	<p>Have all assets been recorded in CARES in the correct asset type? If a change was reported, was the change entered timely? Have cash values for life insurance been included? Are burial contracts recorded? Even though the asset may not be counted towards a program it must still be entered on CARES.</p>	<p>Review AST1 for any assets listed and compare Liquid Asset Type and verification codes against verifications in case. Check to ensure the asset was attributed to correct individual. Check life insurance (cash value) and burial contract information. NOTE: Asset type is important as it can determine how each program treats the asset.</p>	MA Manual Chapter 8, 15
	Real Property	MA	<p>Has the home property or other real property been identified? If a lien is required, was the information entered correctly and was the lien referred to DHMH? If the customer is not living at home (e.g., is in LTC), was information obtained about where the customer previously lived in order to determine if there is countable home property or property for a lien?</p>	<p>Review AST2 – Real Property fields, along with proper verification of real property.</p>	

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
AST1,2,3	Other	ALL	Are there any other assets or have assets been transferred?	AST3 is used to record any assets not previously listed. Transfer of assets appears on "TRAN" screen. Check any data that appears on these screens.	07.03.03.11 TCA Manual Chapter IX Section 3
TRAN	Transfer of Assets	LTC	If a transfer of assets has occurred, has the transfer been recorded and calculated correctly?	Review the TRAN screen fields and documentation to ensure that the transfer has been properly entered. It is imperative that the penalty period on the STAT screen be reviewed for accuracy in relation to the penalty period.	FS Manual Section 200 MA Manual Chapter 8

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ERN 1,2	Earnings	ALL	<p>If earnings are indicated, have gross amounts been entered with correct begin and end dates? Has anyone voluntarily quit (VQ) a job? Were cents retained for hourly and daily amounts until weekly amounts were calculated? Is anyone self-employed (child care, taxi driver, roomer or boarder income, rental property income)?</p>	<p>On ERN1 check begin and end dates for each job and check employers name and address. If VQ, check code against case documents. Were good cause and # of hours explored? Was customer penalized for TCA for 30 days from VQ if no good cause?</p> <p>CARES correctly calculates self-employment earnings coded "SE". SE means gross income <u>before any</u> deductions for expenses, taxes, etc.</p>	<p>TCA-07.03.03 TCA Manual Chapter IX Section13</p> <p>FS Manual Sections 210, 211,212</p> <p>MA Manual Chapter 7</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Employer Insurance Available	TCA, MA/MCHP	Review if employer based health insurance is available.	<p>ERN2, check earnings entered against verification in case record. Check frequency of pay against frequency entered in "FREQ" field. Make sure the right frequency code " AC" is used for semi-monthly and monthly earnings</p> <p>CARES will correctly calculate earnings using the actual income and the correct frequency code for each program. Review Employer Ins Avail field for accuracy</p>	<p>TCA-07.03.03 TCA Manual Chapter IX Section13</p> <p>FS Manual Sections 210, 211,212</p> <p>MA Manual Chapter 4</p>
	New Hires Alerts (990 Alerts)	All	Are there outstanding 990 alerts? Were alerts dispositioned using the correct code?	PF 23 from the ADDR screen or STAT screen to check status of alerts.	<p>TCA-07.03.03.04 TCA Manual Chapter IV Section 19</p> <p>MA Manual Chapter 4, 7, 12</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
ERN1,2	Wage Screening	ALL	Is there a current WS (MABS) completed for each individual age 16-17 not in school and each individual over age 18? Have earnings on MABS for the last 2 quarters been verified? MCHP verified only if questionable. Are there unreported wages? Has employment status been verified? Has an overpayment (OP) referral been completed?	Check MABS screens for information on wages and compare to case documents. Check date on the print out to ensure it was obtained within last 60 days of case submission for review. OP referral in case file?	TCA-07.03.03.04 TCA Manual Chapter IV Section 19 FS Manual MA Manual Chapter 4, 7, 12

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
CARE	Dependent Care	ALL	<p>If questionable, are expenses verified? Were the actual amounts as paid or billed entered in the "AMT1, AMT2" fields? Is the actual frequency entered into the "FREQ" field? For child care expenses paid or billed monthly, was the actual amount entered in the "AMT" field and coded "AC" in the "FREQ" field? Are there two or more providers for one child over 2 years old? When a child has more than one child care provider, CARES does not recognize the situation and cannot determine the deduction at the allowable maximum amount. Actual amounts and Actual Frequency codes are entered (i.e., "AMT 1, AT2, etc. with "FREQ" codes WE or if Biweekly coded BW).</p> <p>CARES will calculate amounts correctly for each program.</p>	<p>Review case record for verification. Check that child care expense is listed for the proper children in the correct amount. Check for the provider name.</p> <p>Review verifications and compare to amounts entered in the "AMT" fields and check to ensure that the "FREQ" field is correctly coded. Check the CARE screen to be sure a "Y" is not entered for more providers. Check to make sure, there is only one provider's name and the entire amount paid to both providers is entered in the "AMT" field. Narration should have multiple providers' names and amounts paid to each.</p>	<p>TCA 07.03.03.01 TCA Manual Chapter IX, Section 14</p> <p>FS MANUAL Section 212</p> <p>MA Manual Chapter 7</p>
	Child Support Deduction	FS	Is child support is paid by a household member for -a nonmember of the household?	Note: need CARES procedures	FS Manual Section 212.11

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
CARE	Homeless Shelter Deduction	FS	Is the household homeless? Is the homeless household paying any amount for shelter? (FS Manual Section 212.10	If yes, was the \$143 homeless shelter deduction coded on the CARE or Work expense screen?	FS Manual Section 212.10

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
UINC	Unearned Income	ALL	<p>Are all sources and amounts such as SSA, SSI, UIB, Pension, Phantom Income, etc. considered? Has unearned income been entered for correct household member? Has the claim #including Alpha letter been listed for SSA/RSDI/SSI?</p> <p>If customer has applied for benefits, was the pending information listed to generate a 745 ALERT?</p> <p>Is unearned income entered using correct amounts and frequencies? If a change was reported or became known was the change processed timely? If the benefit increases annually, did the worker set a 745 alert in order to promptly make the change?</p> <p>Check child support screen for minor children</p>	<p>Check for person receiving, type of income, amounts, frequency codes and verification codes against documents from sources in case. Do not accept checks, as this may be net rather than gross income. Use SVES, Award Letter, SDX, MABS II or IEVS. If customer has pending benefits, review bottom of screen for block checked for potential income to generate an Alert to follow up on claim.</p> <p>Check "APPL TYPE AND "STAT/DATE" fields to ensure follow-up for potential benefits and ensure correct eligibility for certain MA coverage groups. NOTE: Source of income is particularly important as each type is identified separately for each program.</p> <p>Actual amounts and Actual Frequency codes are entered (i.e. AMT1, AMT2, etc. with the FREQ code WE or if Biweekly code BW). Cents <u>are not included</u> when entering unearned income.</p>	MA Manual Chapter 7

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
WORK	Work Requirements	TCA	<p>Are individuals properly screened and referred for work requirements? Is there good cause for the non-compliance? If customer is non-compliant was a conciliation period allowed? Have sanctions been appropriately applied if non-cooperative?</p> <p>Is customer exempt because of family violence, a disability, or because the customer is employed?</p>	<p>Was an allowed exemption verified? (TCA) Review Assessment/Independence Plan in case record. Check "WORK" screen PI Status code. Review WO-MIS printouts in case record. Compare Activity Code on WO-MIS against CARES "WORK" screen <u>PI Status code</u>. If sanction, check HH size to ensure individual is not included or full family sanction (TCA). Full family sanction for failure to meet work requirement: Check WORK screen for PI status "MN" Check AF STAT screen for sanctioning code. Check DEM1 Screen for non-compliant individual. Check the "Birth City" field for correct code that records the number of sanctions incurred. Check MA STAT screen for MA F04 coverage. Make sure the MA certification end date matches the TCA end date. Fast path to MAFI/FSFI to check cert dates.</p>	<p>TCA-07.03.03.07 07.03.03.15 TCA Manual Chapter VI Section 1 Chapter XVIII, Section1</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
WORK	Work Requirements	TCA	Are individuals properly screened and referred for work requirements?	<p><u>INDIVIDUAL SANCTIONING:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Check WORK screen for PI status "MP" Check UINC screen for code "OA" (Other countable CASH or MA). <input type="checkbox"/> Check the amount entered (the difference in the amount of the grant of the grant for the HH size with the customer and without.) <input type="checkbox"/> Check DEM1 screen for non-complaint individual. Check the "Birth City" field for correct code that records the number of sanctions incurred by the individual 	TCA-07.03.03.07 07.03.03.15 TCA Manual Chapter VI Section 1 Chapter XVIII, Section 1

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Universal Engagement	TCA	There are no exemptions to the universal engagement requirements. Customers must be enrolled and participating in a <u>Federal Core or Non-Core Work Activity</u> , if determined customer is not meeting the work requirements, was there follow-up with conciliation and sanctioning? 16-17 year olds and Minor Teen Parents not enrolled in school, a remedial education or an alternative school which leads to a GED or diploma must be referred to work or receive an individual sanction if referred and refused to cooperate.		
WORK	FSET	FS	Are mandatory individuals referred to FSET? Have good cause procedures been followed before sanctioning? Has sanctioning been applied if non-cooperative?	If a Personal Exemption was granted, check against case record for documentation. Check FS Registration status. Check sanction code and HH size.	
	ABAWD	FS	In non-exempt counties, are able-bodied adults without dependents (ABAWD) properly identified? Are they meeting the ABAWD work requirement? Have they received their free months?		FS Manual 130.24.

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
SHEL	Shelter Cost	FS MA/LTC	<p>Are shelter costs and billing for utilities correctly determined? If verification was requested and not received, was eligibility determined without expense? If responsible for mortgage payment, is there verification of monthly cost, are taxes or home insurance included in mortgage payment or the responsibility of HH to pay separate from mortgage? If responsible for 2nd mortgage, ground rent, were costs entered in the correct expenses field?</p> <p>Was rent prorated for ineligible immigrants or ABAWDS?</p> <p>Is the shelter cost of the community spouse entered correctly for the community spouse's maintenance allowance? Is the institutionalized person's shelter cost entered correctly for the residential maintenance allowance?</p>	<p>Check amounts and verification codes against documents in case. Check Utility Standard indicators based on case situation. Check for verification of mortgage amount and tax bill. Ensure amount for mortgage payment and for taxes verified as HH responsibility are correct and entered in correct "EXPENSE TYPE" field.</p> <p>Follow the MA LTC policy for post-eligibility deductions from the cost of care</p>	MA Manual Chapter 10

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
SHEL	Utilities	FS MA/LTC	Is SUA or LUA coded properly? Does household pay for a phone?	Review SHEL Screen carefully. Does HH pay for heat or air conditioning? Does HH pay for multiple utilities?	CARES Bulletin 05-03 FS Manual Section 214 MA Manual Chapter 10
	Housing Type	TCA	Is the customer in subsidized housing? Was the \$60 added as unearned income? Is this case a caretaker relative who does not have the \$60 counted as income? Has subsidized housing been verified at application, after a change of address or once per year at redet?	Check for verification of housing type. Look for inconsistencies in address and type of housing. NOTE: This does not apply to non-legally responsible relatives who are not in the AU.	TCA 07.03.03.12 TCA Manual Chapter IX Section 5
	Retro MA	MA	Has customer applied for MA coverage for any of the 3 months prior to application month? Has eligibility been correctly tested?	Check screening form completed at application for a request for RETRO period. Review ELIG and MAFI screens and compare to income reported.. Review Narrative for proper documentation.	MA Manual Chapter 4, 9, 10

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Spend Down	MA	Have MA applicants with over scale income been tested for SPENDDOWN? If yes, have requirements been followed? Is case preserved? If the customer met spend down based on an in-patient hospital bill, has the 0102 letter (Report of Patient Obligation) been correctly completed and forwarded? Have recipient, hospital, and authorized representative been sent a copy of the 0102 letter?	Check income entered on ERN1, 2 and UINC screens against case for verifications of income. Check SDME (option W) from AMEN. Review medical expenses for date of occurrence. Option W=SPEND DOWN Expense Inquiry.	MA Manual Chapter 4, 9
	Case Record Format	ALL	Is the case record in the proper format with correct documents filed in appropriate sections? Should the case manager make a retired folder?	Review case record contents. Is there information in the case record that is obsolete?	TCA Manual Chapter IV Section 17 FS Manual Section 400 MA Manual Chapter 4

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	9707/EDD Signed		Has customer signed and dated the screening form, 9707, EDD, and any other document that requires a signature?	Review case for properly signed documents.	TCA Manual Chapter IV Section 3 FS Manual Section 400
	Alerts	TCA FS MA	Has the case manager correctly created/dispositioned alerts?	PF23 from "ADDR" screen or "STAT" screen to check status of Alerts.	MA Manual Chapter 4
	Clearances		Has the case manager completed all necessary clearances? Review CARES Bulletin #03-07 RE- CARES DATA ENTRY REMINDERS	Review for MABS, SAVE, SVES/SOLQ, CARES, MMIS, etc. Check punctuation and related data entry per CB 03-07.	
	SOP				
	Delay Reason	MA/MCHP	Did case meet Standard of Processing for timeliness of application compliance.	Check Date Application Filed against Issuance Date or MA/MCHP timely eligibility determination date.	MA Manual Chapter 4
	QMB Override	MA	When standard of promptness is not met, review delay reason for accuracy.	Has correct the delay reason been entered in the delay reason field accurately?	
		ALL	Identify the month in which QMB eligibility should begin.	Review the QMB OVRD field for the correct QMB begin date.	MA Manual Chapter 3
	Case Assignment Override		Is case assigned to a worker other than the worker of alphabet?	Check auto reassign override indicator if applicable.	

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
RMEN	BEG	TCA FS	Are there any outstanding BEGs or BEG Alerts that have not been acted on?	From Welcome to MD Screen, check Alerts for Outstanding BEGs and go to Option R (Benefit Error Group).	
CAFI FSFI MAFI	APPL. Month	ALL	Have TCA and/or FS benefits been correctly prorated from the application date? Has correct application month been used?	Check screen for application month benefits.	TCA 07.03.03.05 TCA Manual Chapter IV Section 14 FS Manual Section 412 MA Manual Chapter 4
		ALL	Have correct certification periods been assigned?	Review certification periods for correct assignment. FS simplified reporting cases have 6 month cert.	TCA 07. 03.04.05 TCA Manual Chapter IV Section15 FS Manual Section 410 MA Manual Chapter 4, 11

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
CAFI FSFI MAFI	Household	BENEFITS	Is AU/HH size correct Are MA coverage groups correct?	Check AU/HH and MA coverage groups against expected results. Check for deemed income for stepparents, parents of minor children, immigrants' sponsors, excluded immigrants and ineligible HH members.	MA Manual Chapter 4 and 6 TCA 07.03.03.06 , 07.03.03.13 TCA Manual Chapter VIII Section 2 And Chapter IX Section 6 and Section 7 Fs Manual Section 100

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
			Are results of financial calculation correct? Was the correct notice sent? For MA, has a notice been sent for each certification period?	Check benefit level for ongoing benefits.	TCA 07.03.03.05 TCA Manual Chapter IV Section13 FS Manual Section 600 MA Manual Chapter 7, 8, 11
MISC	Expedited F/S	FS	Is HH eligible for Expedited Food Stamps and if so were they available to the customer within 7 calendar days after the date of application?	Check Expedited Discovery date against Issuance Date.	FS Manual Section 401
	Processing	ALL	Did case meet Standard of Processing for timeliness of application compliance? If not was the reason appropriately coded as agency or customer delay? (See additional information below)	Check Date Application Filed against Issuance Date. NOTE: If non-compliance because of timeliness is identified, an error is cited but the worker will not be able to correct the case.	TCA 07.03.03.05 TCA Manual Chapter IV Section 12 FS Manual Section 406 MA Manual Chapter 4

SUPERVISORY REVIEW SYSTEM GUIDELINES

SCREEN	ITEM	PROGRAM	FOCUS	WHAT TO DO	MANUAL SEC.
	Delay Fault Code	FS	FOR FS, if benefits were delayed beyond 7 or 28 day processing time, was delay fault determined correctly?	Check Delay Reason if Applicable. Failure to enter reason will cause system to assign Agency fault.	FS Manual Section 406
	Case Assignment Override	ALL	<p>Review "ELIG" screen for MPM-FINANCIAL results, especially individual status reason for correct AU. If penalty is indicated, check type and date.</p> <p>Is case assigned to a worker other than the worker of alphabet?</p>	<p>If a child under 7 has been coded NO for student status at redet the system will close the child with a 231 code. To remove the closure, change DEM2 student status from NO to PT.</p> <p>Check auto reassign override indicator if applicable.</p>	None

TCA CUSTOMERS THAT CAN BE MOVED FROM FEDERAL FUNDED TCA TO STATE FUNDED TCA

	DESCRIPTION	FOCUS	CARES CODING FOR CUSTOMER GROUPS	COMAR
Students Age 19	Families with a child, age 18 who will turn 19 or a child who is 19, who is a full-time student and will graduate from high school before the end of the calendar year the child turns 19.	Follow up on the child's age to ensure the child will graduate before the end of the calendar year in which the child turned 19. Review to ensure the 18 or 19 year old is registered in school and attending. Follow up on the date of graduation.	On the STAT screen REL field is CH, CP, CC, SC, GC, NN, FC, SI, HS, OR SS.	07.03.03.07C Chapter V Section2
Immigrants	State funded TCA: Families with legal immigrant adults and children (admitted to the country after August 22, 1996) who are not eligible under federal law and meet all other TCA eligibility requirements.	Ensure the case manager has correctly identified families that meet eligibility for State funded TCA versus Federally funded TCA. State funded families are not subject to time limits but are subject to Universal Engagement work requirements. Ensure that families subject to time limits can be identified for	On the DEM2 screen code the Citizen field L On the ALAS screen enter the MM YY in the Entry date field (the date of entry in the U.S. must be equal to or greater than 9/96). This AU will not have an immigration and Naturalization status of AA, AS or RF INS status or alien country code AA or CU –	07.03.03.07A 07.03.03.15 Chapter V Section 4
Family Violence	Families that include a child or adult victim of domestic/ family violence.	Review for family participation in family violence counseling. For work participation exemption the mandatory person must be in counseling.	On the DEM2 screen the DMVIOL field is coded <u>Y</u> .	07.03.03.04 Chapter IV Section6

TCA CUSTOMERS THAT CAN BE MOVED FROM FEDERAL FUNDED TCA TO STATE FUNDED TCA

	DESCRIPTION	FOCUS	CARES CODING FOR CUSTOMER GROUPS	COMAR
Disabled Adults & Children	Families that include adults or children who are disabled (have a disability form that indicates a 12-month disability or expected to result in the person's death) or a series of medical reports that total 12 months or more, must sign a 340 Interim Payment Reimbursement Authorization Form, be referred to and cooperate with DEAP. The responsible adult must sign for a disabled child. The adult must also sign a 1696 representative form listing DEAP as their	Review for medical form certifying disability or a series of disability forms = 12 months or more. Was the DEAP referral completed and sent to DEAP? Was the 340 signed? Was the 1696 signed and completed? Has the customer filed for all benefits he or she may be eligible for. Check SVES for SSI and SSA. Check MABS for UNEI. Is the DEM2 coded properly for disability?	On the DEM2 HO, HP, OR, PA, RR, RS, VA, or VZ is entered in the Approval Source field. The date the 340 was signed is entered in the IAR date field. The Begin and End dates are indicated on the disability verification form. On the UINC screen enter DE in the APPL Type field. P in the STAT field (update STAT field as changes occur). The date the customer was referred to DEAP in Date	07.03.03.08 Chapter V Section 11

TCA CUSTOMERS THAT CAN BE MOVED FROM FEDERAL FUNDED TCA TO STATE FUNDED TCA

	DESCRIPTION	FOCUS	CARES CODING FOR CUSTOMER GROUPS	COMAR
Non-Parent Caretaker Relatives	Benefits paid for a child who lives with a relative other than a parent. The caretaker may or may not be included in the benefit and may or may not have children of his/her own included.	Are the parents of the child absent from the home? Does not have to be verified unless questionable. If the caretaker and his or her children are included in the benefit, are the income and resources of the caretaker counted for the caretaker relative and his or her children only The benefit should never be	On the STAT screen REL field for the child is grand/great child GC, niece/nephew NN, first cousin FC, sibling SI, half sibling HS, or step sibling SS.	07.03.03.06 07.03.03.07 D Chapter V Section 5

TECHNICAL FACTORS – FOOD STAMPS

Note: These are technical factors for eligibility for this program that will be cited as an error if not present during the SRS review.

FOOD STAMP PROGRAM

WHAT TO DO

<p>Social Security Numbers-Individuals who refuse or fail without good cause to provide a social security number (SSN) or to apply for one are ineligible to participate as a member of the household.</p> <p>Remember: A social security card is not required. SSN verification is completed via a CARES match with Social Security Administration records. A valid value of "FV" in the Social Security # Verification Source field indicates that the match has verified the numbers</p>	<p>Verification of SSNs is not required for households that are categorically eligible based on TCA or SSI payments because it has already been verified. However, a SSN may be verified for a member of a categorically eligible household when the number is needed to do an SVES check and the SSN is not in the case file or it appears incorrect. For other households, including those households, which are categorically eligible, based on TDAP payments; verification of the SSN through SSA must be obtained for each household member. If the SSN is not verified, the case is cited in error.</p>
<p>Application/EDD-Application forms must be signed and dated by the customer prior to payment of benefits. This pertains to all programs.</p>	<p>Review Application/EDD form for signature and date.</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
Child Record		If a payment adjustment to a provider was approved for a child with a disability, is there documentation of compliance with the definition of “child with a disability”?	Check for documentation from a qualified physician, psychologist, or licensed social worker that verifies the child has a disability limiting self-care as appropriate to the child’s age.
Milestones		<p>Was the most recent application, dated and signed by the applicant and case manager? (Technical Factor)</p> <p>Was the decision made for denial of service within thirty days from the date of receipt of the application from?</p> <p>Was the decision made for acceptance of service within thirty days from the date of receipt of all requested verifications?</p>	<p>Check for a DHR/CCA 354 or DHR/CCA 8004 application form that includes the fraud statement and is signed and dated by the applicant and case manager.</p> <p>Check the case file for a DHR/CCA 354 or the DHR/CCA 8004 or CCAMIS milestones indicating the date the application was received and the date of case denial. Check case file for a Service – 1 (CIS) form that indicated both an Application Date and Denial Code.</p> <p>Check case file for denial notice dated no more than 30 days after the Application Date.</p> <p>Check the case file for a DHR/CCA 354 or the DHR/CCA 8004 or CCAMIS milestones showing the application received date and case acceptance date.</p> <p>Check the case file for CCAMIS letters or other locally produced letters requesting verification, for the listed verifications with date stamp or a case manager’s log entry indicating the date verifications were received and for a Service 1 (CIS) form that indicates both an Application and Acceptance Dates. The Acceptance Date is no more than 30 days after the last verification is received.</p> <p>Check the file for a voucher with an effective date on or after the date the last verification was</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
---------------	-------------	--------------	-------------------

			received. If the voucher's effective date is before the date the last verification was received, then the case is not in compliance and an overpayment has occurred.
--	--	--	--

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
--------	------	-------	------------

Milestones	Priority Code	Is there documentation in the case record to support the indicated priority code	<p>Check to case file for a DHR/CCA 354, DHR/CCA 8004, a CCAMIS case profile or case milestones screen that indicates the priority codes.</p> <p>For Priority 1 customers – Check the case file for proof that the customer is receiving or has applied for TCA. If the customer has applied for TCA the application must still be pending for Priority 1 status to be granted.</p> <p>Check the case file for proof that the customer is working (pay stubs or statement from employer) or participating in an approved activity (statement from FIP case managers or a program approved by FIA). When an employment verification form letter is used to verify employment check the form for a date stamp from the employer. In the absence of a date stamp check the file for documentation that the case manager contacted the employer and verified the information on the form.</p> <p>For customers in an approved activity, check the file for documentation of participation in public school, training, work experience, job search, work activity, community service or other activity included in the customer personal responsibility plan. If the customer is in school or a training activity, a schedule, which includes start and end dates must be in the case file. If the customer is working, pay stubs or other verification of work activity must be in the case file.</p>
------------	---------------	--	---

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
---------------	-------------	--------------	-------------------

		Is there documentation in the case record to support the indicated priority code?	For Priority 2 customers- Check the case file for proof that the customer is working and received TCA during the prior 6 months. CARES screens can be used to verify this information.
--	--	---	--

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
Milestones	Priority Codes		Priority 3 customers- Check the case file for a DHR/CCA 354 or DHR/CCA 8004 which indicates the gross family income. The family must meet the income requirement. Check the application form for customer’s activity (work, school or training program including undergraduate school). If the customer is in school or a training activity, a schedule, which includes start and end dates must be in the case record. If the customer is working, pay stubs or other verification of work activity must be in the case record.
			All Priority Codes- Check the case file for a DHR/CCA 354 or DHR/CCA 8004, which indicates the gross family income. The family must meet POC income requirement for the family size.
Voucher	Benefits	Is there indication in the case record of the subsidy and the co-payment to be paid for each child? (Technical factor)	Check the case file for a DHR CCAMIS generated voucher or a manual voucher (DHR/CCA 411F or DHR/CCA 411I). For the voucher to be valid it must be signed and dated by the customer and the provider and returned to the agency with 60 days of the date of authorization listed on the voucher. An unsigned copy of a voucher is acceptable only if the 60 days period has not elapsed. If there is no voucher in the case file or only an unsigned copy is the case file when the 60-days period has elapsed, then the case is non-compliant.
Income Work sheet	Income	Does the case record contain documentation of the family income, which was the basis for the subsidy and co-payment level?	For TCA, a CIS clearance or benefits letter must be in the case file. When unearned income is received (SSI, UIB, SSB VA) or benefit award letter must be in the case file. If a CARES screen can

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
--------	------	-------	------------

			<p>verify the unearned income it may be substituted for a benefit award letter. When a customer is currently receiving a benefit, the documentation of income must verify the amount of funds received in the month the action is being taken.</p> <p>For working customers, copies of recent and consecutive payroll receipts representing 4 weeks of pay must be included in the case file.</p> <p>When a letter from an employer is used to verify pay it must be on company letterhead. If an employment form is used it must contain a store or business. The case manager must verify the information, if questionable. Letters from employers and employment forms must verify gross pay, dates of pay amount paid hourly and the number of hours worked per week.</p>
		<p>Does the case record contain documentation of the family income, which was the basis for the subsidy and co-payment level?</p>	<p>For newly employed or recently terminated customers the letter or form must also verify the first day of work and first date of pay or the last day of work and pay. Check for the DHR / CCA 354 or the DHR / CCA 8004 application form indicating the gross family income. Check for a copy of the Deed Wage History Screen for the most current application or redetermination for non-TCA customers.</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
Activity Log	Adverse Action	<p>If the service is terminated, was customer given a timely and correctly written notice of adverse action?</p>	<p>Check for a Notice of Adverse Action or a Termination letter written at least 5 days before the action. Check that the notice contains the action to be taken, the reason for the action, the regulation supporting the action, and an explanation of the right to a fair hearing and the method for obtaining it.</p> <p>When the customer's case is being closed, check for a copy of the notice to the provider indicating termination of service, dated at least 5 days prior to termination date of the case.</p>
		<p>If the service was terminated, was the provider given timely written notice?</p>	<p>When payment to a provider is being denied, check the case file to determine if payment to the provider is stopped: (1) based on documentation of risk to the health or safety of a child in that placement, or (2) to an informal provider based on a child abuse or neglect case review. If so then, check for a Notice of Adverse Action written at least 5 days before the action. Check that the notice contains the action to be taken, the reason for the action, the regulation supporting the action, and an explanation of the right to a fair hearing and the method for obtaining it.</p>
	Voucher Expiration	<p>Did the customer receive 15 days notice that the voucher was about to expire?</p>	<p>Check the file for a written notice to the customer that is dated 15 days prior to the expiration of the current voucher.</p>

SUPERVISORY REVIEW SYSTEM GUIDELINES – POC

SCREEN	ITEM	FOCUS	WHAT TO DO
Case Program Activity	Customer Activity	Does the case file contain documentation of the customer's activity? (Technical Factor)	Check the case file for documentation of the customer's activity and schedule. The schedule must include the days and hours of the activity. For working customers four consecutive weeks of pay stubs and the customer's declaration on the application is sufficient. The pay stubs must be the most recent stubs received by the customer.
Informal Provider Registry		Does the case record contain documentation that the informal provider was eligible for payment? (Technical Factor)	<p>Check the case record for a:</p> <p>DHR / CCA 1714 completed and signed by the provider and customer. Check the 1714 to assure that the provider is caring for no more than six children. The six children include no more than two children under the age of two and the provider's children under the age of six.</p> <p>DHR / CCA 1420 signed by the provider and any adult regularly present in the home when the child is in care.</p> <p>CIS Services clearance or a POC evaluation form (DHR / CCA 1716) completed by the local Services Unit or designated staff. The form must indicate that the provider is recommended for the provision of child care for the provider to be eligible for payment, and</p> <p>A copy of the informal provider registry screen. The informal provider registry screen and the information on the informal child care forms listed above must match.</p> <p>All of the required documentation must be present for the case to be compliant.</p>

Technical Factors For Eligibility For These Programs That Will Be Cited As An Error If Not Present During The SRS Review

POC Application Form-The DHR/CCA 354 or 8004 must be in the case file. The application must contain an original signature of the potential customer.

POC Voucher-A valid CCAMIS generated voucher or manual voucher (DHR/CCA411 F or DHR/CCA411I) must be in the case file. For the voucher to be valid it must be signed and dated by the customer and the provider and returned to the agency within 60 days of the date of authorization listed on the voucher.

Proof of acceptable activity-Documentation of the customer's activity must be in the case file. It must include the customer's activity, days scheduled and hours worked. For working customers 4 consecutive weeks of pay stubs and the customer's declaration on the application form is sufficient.

For Customers Using Informal Care- The following items must be in the case file:

- a. DHR/CCA 1714 completed and signed by each provider and customer. Check the 1714 to assure that the provider is caring for no more than six children. Of these children no more than two children under the age of two including the provider's children under the age of six.
- b. DHR/CCA 1420 signed by the provider and any adult regularly present in the home when the child is in care.
- c. CIS Services clearance or a POC evaluation form (DHR/CCA 1716) completed by the local Services unit or designated staff and recommending the provider for the provision of child care must be in the file.
- d. A copy of the informal provider registry screen. The informal provider registry screen and the informal child care forms listed above must match.

All of the required documents must be present for the case to be compliant.

Guideline For Determining The Correct Utility Allowance

Utility Allowance	Criteria	CARES Action
Standard Utility Allowance	Households billed separately from rent or mortgage for utility costs that include heating or cooling Money paid to someone else towards heating or cooling costs (includes flat rate) Shared utility expenses for heating and cooling Households in public or private housing that are billed for excess usage of heating or cooling costs or a flat rate Households that include an ineligible member who pays the bill	Enter "Y" in SUA field on the SHEL Screen
Limited Utility Allowance	Households that incur expenses for two or more utilities that do not include heating or cooling costs Shared expense for two or more utilities that does not include heating and cooling costs Households in public housing that are billed for excess usage of two or more utility expenses that do not include heating or cooling or a flat rate Households that include an ineligible member who pays the bills	Enter "Y" in the LUA Field on the SHEL Screen
Actual	Only one utility other than phone, heating or cooling expense Shared expense of one utility other than telephone	Enter "Y" in the "Actual Expenses Claimed" field, and the actual amount of the expense in the appropriate field on the SHEL screen
Telephone	Pays for telephone only	Enter a "Y" in "Phone Only" Field on the SHEL Screen

UTILITY ALLOWANCE REFERENCE GUIDE

HOUSEHOLD SITUATION	SUA	LUA	ACTUAL EXPENSE	CASE MANAGER ACTION	CODING SHEL SCREEN
Billed for heat, including flat rate to landlord for heat.	X			Allow the full SUA	Put a Y in SUA
Billed for cooling, including flat rate to landlord for cooling.	X			Allow the full SUA	Put a Y in SUA
Billed for any 2 or more utilities but not heat or cooling.		X		Allow the full LUA	Put a Y in LUA
Billed for heating or cooling that are more than the SUA.	X			Allow full SUA. <i>Do not use actual expenses</i>	Put a Y in SUA
Billed for two or more utilities but not heat or cooling that are more than LUA.		X		Allow full LUA. <i>Do not use actual expenses</i>	Put a Y in LUA
Billed for telephone only.				Allow the full basic phone allowance	Put a Y next to phone
Billed for excess usage of heating or cooling. Either private or public housing.	X			Allow the full SUA. Verify expense and amount	Put a Y in SUA
Billed for excess usage of two or more utilities but not heating or cooling. Either private or public housing.		X		Allow the full LUA. Verify expense and amount	Put a Y in LUA
Multiple households live together and each pays a portion of the utilities (sharing) including heat.	X			Each FS household is eligible for the Full SUA	Put a Y in SUA
Multiple households live together. One pays the heat while the other household pays (sharing) the other utilities.	X			Allow the Full SUA for both households	Put a Y in SUA

UTILITY ALLOWANCE REFERENCE GUIDE

HOUSEHOLD SITUATION	SUA	LUA	ACTUAL EXPENSE	CASE MANAGER ACTION	CODING SHEL SCREEN
Customer lives with her mother who is not part of the FS household. Mother pays all shelter expenses for the customer.				Do not allow any shelter expenses	None
Husband, wife and 3 children live together. Husband is an ineligible immigrant (ABAWD, no SSN etc.). HH is billed for utilities and heat separately from rent. Husband pays all expenses.	X			Allow the Full SUA	Put a Y next to SUA
Household pays for water only. (1 utility)			X	Enter the actual amount paid monthly	Enter the amount in the appropriate field under Actual Expenses claimed
Household contains an ineligible immigrant and pays for 1 utility only.			X	Enter the full actual amount	CARES will prorate the expense of the ineligible person

Remember:

SUA = heating or cooling costs (not a fan or supplemental heating such as a wood stove)

LUA = any two or more utilities –no heat or cooling costs (for example: water, gas, trash pick up, electric)

Actual Utility = 1 utility that does not include heating or cooling costs or cost of the phone. Actual utility costs are only utility costs that are prorated because of ineligible members.

Telephone =Households with only a phone expense are eligible for the basic phone allowance.