



Department of Human Resources
 311 West Saratoga Street
 Baltimore MD 21201

Family Investment Administration
ACTION TRANSMITTAL

Control Number: 08-24

Effective Date: Immediately

Issuance Date: March 10, 2008

**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
 DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
 FAMILY INVESTMENT SUPERVISORS AND ELIGIBILITY STAFF
 HEALTH OFFICERS, LOCAL HEALTH DEPARTMENTS
 LOCAL HEALTH DEPARTMENT ELIGIBILITY STAFF**

FROM: KEVIN M. MCGUIRE, EXECUTIVE DIRECTOR, FIA

**RE: TECHNICAL ELIGIBILITY, FORMS, and FREQUENTLY ASKED
 QUESTIONS and ANSWERS**

**PROGRAMS AFFECTED: PUBLIC ASSISTANCE TO ADULTS (PAA) and FOOD
 STAMPS (FS)**

ORIGINATING OFFICE: OFFICE OF PROGRAMS

SUMMARY:

FIA recently provided training on the Public Assistance to Adults (PAA) program. During the training we heard reports that reflected inconsistencies in gathering information and documentation the case manager needs before making an eligibility decision. This action transmittal provides answers to questions pertaining to eligibility raised during the training, discusses the completion of the DHR/FIA 900, DEAP Consent to Release Information form, as a technical eligibility requirement (see attachment A), provides a list of basic information needed (forms) before making an eligibility decision, and updates to the PAA manual. Finally, the Rehabilitative Residence Certification form which had been issued by the Department of Health and Mental Hygiene, is now issued as a DHR/FIA form with the same number, DHR/FIA 4352 (see attachment B).

ACTION REQUIRED:

PAA Manual

Chapter 200 of the PAA on-line manual (**200.2**) has been updated with a list of forms used in the eligibility process.

Application Requirements

The basic components of the application process remain the same. Applicants applying for PAA have differing needs in obtaining required documentation requiring assistance from the local department case manager, appointed representatives or other state, local or private organizations. General forms used to complete the eligibility determination are:

1. A signed and completed application by the customer/representative. (Either a system generated eligibility determination document (EDD) or a paper application (DHR/FIA 9702)
2. Consent for Release of Information form (DHR/FIA 704)
3. Representative Payee Agreement form (DHR/SSA 132), if needed
4. Authorization to Give Information form (DHR/SSA 220), if needed
5. Medical Evaluation form (DHR/FIA 402B) for all applicants applying for Social Security Benefits
6. The DHR/FIA 900 DEAP Consent to Release Information form, if needed
Note: This form is not *needed or required* for Rehabilitative Residence applicants.
7. Statement of Need. This statement varies according to the program type:
 - a. Assisted Living – Medical Evaluation form (402B)
 - b. Project Home – Verification of Level of Care
 - c. Rehabilitative Residence – Rehabilitative Residence Certification form (DHR/FIA 4352)

Reminder: A statement of need is required for DEAP

NOTE: The 402A is **not** an acceptable medical evaluation form for this program.

Rehabilitative Residence Certification Form (DHR/FIA 4352)

Attachment B is in print and in the process of being delivered to the local departments.

DEAP Referral Process

Effective November 1, 2007, all Project Home (CARE) and Assisted Living applicants/representatives must sign the DHR/FIA 900 DEAP Consent for Release of Information form (Attachment A). This form must be included in the DEAP referral packet. Failure to sign this consent form is considered non-compliance with DEAP and results in the customer being determined ineligible for PAA benefits for failure to cooperate with the eligibility process.

Reminder: Do not refer Rehabilitative Residence customers to DEAP.

PAA Questions and Answers

1. Are Rehabilitative Residence customers required to sign the DHR/FIA 340 Interim Reimbursement Form? Does the state get reimbursed for the \$82 personal needs allowance?

Answer

No, they don't have to sign the 340 and we don't receive reimbursement for the Personal Needs Allowance, Chapter 3 (300.5).

2. Are customers required to pay more than the amount designated by the Level of Care? We have received numerous inquiries about customers or family members who are paying more than the PAA need and the customer's earned or unearned income. Family members and/or the customer are paying the providers directly.

Answer

The State cannot govern the agreements between the provider and the customer.

3. Customers receive a \$20 unearned income disregard when determining available income towards their cost of care. Several local offices stated the provider returns that \$20 to the customer. In essence they receive a total of \$102 for personal needs. Does this have an impact on the income calculation for Food Stamps and how should we treat the income for PAA after we have already disregarded it?

Answer

The personal needs allowance is \$82 and is considered as income to the customer for food stamps. If the case manager verifies the customer also receives \$20 from the provider it is countable for food stamps. No additional income is counted for PAA.

4. A customer in a long term care (LTC) facility is transferred to a PAA facility. The customer's income was paid towards the cost of care in the LTC facility. Should the customer's income be counted in the month of transfer when it is no longer available to the customer? Currently, when the customer enters the PAA facility after the first day of the month and income is entered on the ERN1 or UINC screens, the case is being denied for over scale income.

Answer

Do not count income paid to a facility and unavailable to the customer when the customer files the PAA application (See Chapter 500, 500.10).

5. When child support is being deducted from the customers' income (SSI/SSDI), is the gross or net income counted?

Answer

Count the gross income.

6. Is a DHR/FIA 402B required on all customers? (The 402B is a requirement when referring a customer applying for SSI/SSDI benefits to DEAP). The services

worker has a separate instrument to determine level of care when filing a PAA application. (See Chapter 300, 300.6).

Answer

The 402B is not required if the customer receives SSI.

7. The PAA definition of group homes is changing to eliminate any home with 4 or fewer customers as meeting the definition of a group home. Does this have an impact on how a customer's eligibility for food stamp benefits is calculated?

Answer

No

8. When a CARE customer returns to a state or private medical facility for a period of less than 30 days, does this affect the customer's continued eligibility for PAA and the medical coverage (S04) included?

Answer

A customer returning to a state or private medical facility as a continuum of their plan of care for a period less than 30 days is not considered to be institutionalized and retains eligibility for PAA, (Chapter 300.3.C).

INQUIRIES:

Please direct questions to Deborah Weathers at 410-767-7994 or via e-mail at dweather@dhr.state.md.us.

cc: FIA Management Staff OTHS System Support Center
DHMH Management Staff
Constituent Services