TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS/ELIGIBILITY STAFF

FROM: KEVIN MAHON, EXECUTIVE DIRECTOR, FIA

RE: NEW HIRE REGISTRY SYSTEM

PROGRAMS AFFECTED: ALL

ORIGINATING OFFICE: OFFICE OF POLICY AND RESEARCH

SUMMARY:

Effective July 1, 1997, new federal and state laws require employers to report specific information on new employees to the Department of Labor, Licensing, and Regulation within 20 days of the first day of work for the employee. A private vendor has been hired to collect this information and then forward an electronic new hire database file to DHR. FIA is requiring that this list of new hires be compared to the current FIA recipient files for potential matches.

The New Hires Registry file will match on a daily basis against individuals in an active, pending, spend down, or suspended status using their social security numbers. If a match is found, an alert will be generated to the case manager informing them of the potential new hire information. This information will include the individual’s name and social security number, employer’s name and address, and first day of work. In addition, the alert will also include the salary, pay frequency, and availability of medical benefits if this optional information is provided by the employer. Currently, if an individual on CARES or a case on AIMS has earned income already reported, an alert will not be generated. This matching criteria will be changed in the future after the current process has been evaluated.

ACTION REQUIRED:

When the case manager receives a “New Hire Individual Match Alert,” and if the employment information has not already been reported to the agency by the individual, the case manager must:

- Send a manual 1052 - “Request for Information” letter along with a 491 - “Report of Change” form, and

- Send an employer verification form to the head of household informing them that employment information has been received and allowing 10 days to return the requested information.
When the case manager receives the requested information from the individual, or receives no response by the due date, or if the information is already known to the agency, then the case manager must disposition the alert using the appropriate “New Hire Alert Disposition Code” (See attachment “A”).

**AIMS:**

A paper “New Hire Individual Match Alert” (Attachment “B”) will be generated and sent to the worker of record. A “Potential New Hire Match - District Office Summary Report” (Attachment “C”) will be sent monthly to the Baltimore City DSS listing the previous month’s matches. Once the appropriate action is taken on the case:

- Write the disposition code on the form.
- Place a photocopy in the case record (the alert can be retired at the next recertification).
- Forward the original to the local New Hire Coordinator.
- The local New Hire Coordinator will write the disposition code beside the individual’s name on the monthly “Potential New Hire Match - District Office Summary Report” and send the completed monthly report within 10 days from receipt to:

  Yolanda Holmes  
  Bureau of Continuous Improvement  
  311 W. Saratoga St.  
  Baltimore, MD 21201  
  Phone: (410) 767-8238

**CARES:**

**INTERIM PROCEDURE:**

A paper “New Hire Individual Match Alert” (Attachment “D”) will be generated and sent to the worker of record. A “Potential New Hire Match - District Office Summary Report” (Attachment “E”) will be sent monthly to each LDSS listing the previous month’s matches. Once the appropriate action is taken on the case:

- Write the disposition code on the form.
- Place a photocopy in the case record (the alert can be retired at the next recertification).
- Forward the original to the local New Hire Coordinator.
- The local New Hire Coordinator will write the disposition code beside the individual’s name on the monthly “New Hire Match Report” and send the completed monthly report within 10 days from receipt to:

  Yolanda Holmes  
  Bureau of Continuous Improvement  
  311 W. Saratoga St.  
  Baltimore, MD 21201  
  Phone: (410) 767-8238

FIA anticipates the New Hire 2-tier alerts will be automated on CARES by December 31, 1997. Once the alerts are automated, the following procedures are to be followed:

- The system generates alert code “990” (Potential New Hire Match) to the worker of record.
The first tier of the alert will indicate the individual’s name. This can be accessed from option “D” (Alerts) on the CARES Main Menu and then option “B” (Priority Detail List).

The second tier of the alert will list the individual’s name and social security number, employer’s name and address, and first day of work. In addition, the alert will also include the salary, pay frequency, and availability of medical benefits if this optional information is provided by the employer. This can be accessed by entering “Y” to the left of the alert and pressing the PF13 key.

- A “New Hire Match Report” (Attachment “E”) will be sent monthly to each LDSS and the FIA Bureau of Continuous Improvement (BCI) listing the previous month’s matches per case manager. The local New Hire Coordinator will write the disposition code beside the individual’s name on the monthly “New Hire Match Report” (Attachment “E”) and send the completed monthly report within 10 days from receipt to BCI. This report will be used for supervisory review and tracking purposes.

- A “New Hire Match Report - District Office Summary” (Attachment “F”) will be sent to each LDSS and BCI listing each case manager’s number of matches and disposition codes. This report will be used for supervisory review and tracking purposes.

- A “New Hire Match Report - Statewide Summary” (Attachment “G”) will be sent to BCI listing each district office’s total number of matches and disposition codes. This report will be used for analysis and tracking purposes.

**ACTION DUE DATE:**

The case manager must notify the individual or head of household within 10 days of the alert being generated. As soon as action is taken on the case, an alert disposition code must be entered. Supervisors will review their unit’s alerts on a regular basis to ensure the alerts are being processed timely.

**CORRECTIVE ACTION INFORMATION:**

It is anticipated that this initiative will have a significant effect on our error rate. Earned income cases have traditionally been an issue. It is therefore vital that this information be acted upon immediately to offset agency errors.

**ACTION REQUIRED OF:** All Local Departments of Social Services

Please direct inquiries to Joyce Westbrook, Division of Program and Systems Support at 410-767-8735.

cc: FIA Management Staff
DHR Executive Staff
DHR Help Desk
DHMH
CTF
Constituent Services
NEW HIRE ALERT DISPOSITION CODES

1 - Completed Timely - No Change, Employment Already Reported

2 - Completed Timely - Over Scale, Case Closed

3 - No Action Taken - Case Denied, Closed

4 - Completed Timely - Increased Earnings

5 - Completed Timely - Decreased Earnings

6 - Not Completed Timely - Resulted in Overpayment

7 - Not Completed Timely - Case Fell Off System

Attachment “A”
MARYLAND DEPARTMENT OF HUMAN RESOURCES

POTENTIAL NEW HIRE MATCH

INDIVIDUAL ALERT

LDSS: 31 HOMELESS UNIT

RUN DATE: 08/13/1
AS OF DATE: 07/31

CUSTOMER NAME: RANGER

SOCIAL SECURITY NUMBER: 123-45-6789

CASE NUMBER: 30999999

EMPLOYER NAME: UNCLE BOB'S FARM

EMPLOYER ADDRESS: 12 MOO COW LANE HAYVILLE, MD. 28000

START DATE: 07/01/1997

PAY FREQUENCY: H

SALARY: $ 4.75

MEDICAL BENEFITS: N

DISPOSITION CODE: 

All rights reserved.
| CUSTOMER NAME | EMPLOYER NAME | EMPLOYER ADDRESS | CASE NUMBER | SSN | START DATE | FA Y | FREQ | SALARY | MEDICAL
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MARYLAND DEPARTMENT OF HUMAN RESOURCES
CLAIMS AUTOMATED RESOURCE AND ELIGIBILITY SYSTEM
POTENTIAL NEW HIRE MATCH
INDIVIDUAL ALERT

DO: XXX
WORKER: XXXXXX
JOB DATE: MM/DD/YYYY

----- CUSTOMER INFORMATION -----

CUSTOMER NAME: XXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX
SOCIAL SECURITY NUMBER: ###-##-####
DN: ############

----- ALERT INFORMATION -----

NOTIFICATION HAS BEEN RECEIVED THAT CUSTOMER HAS STARTED EMPLOYMENT.

----- EMPLOYMENT INFORMATION -----

EMPLOYER NAME: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
EMPLOYER ADDRESS: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
STREET: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CITY, STATE ZIP: XXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXX

EMPLOYMENT START DATE: MM/DD/YYYY
PAY FREQUENCY: XX
SALARY: $##,###.##
MEDICAL BENEFITS: X

DISPOSITION CODE:

DISPOSITION CODES

1. COMPLETED TIMELY - NO CHANGE, EMPLOYMENT ALREADY REPORTED
2. COMPLETED TIMELY - OVER SCALE, CASE CLOSED
3. NO ACTION TAKEN - CASE DENIED, CLOSED
4. COMPLETED TIMELY - INCREASED EARNINGS
5. COMPLETED TIMELY - DECREASED EARNINGS
6. NOT COMPLETED TIMELY - RESULTED IN OVERPAYMENT
7. NOT COMPLETED TIMELY - CASE FELL OFF SYSTEM

COMMENTS:

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SIGNATURE                DATE