



Department of Human Resources
311 West Saratoga Street
Baltimore MD 21201

**Family Investment Administration
ACTION TRANSMITTAL**

Control Number: 05-10

Effective Date: October 1, 2004

Issuance Date: October 1, 2004

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

FROM: KEVIN M. MCGUIRE, EXECUTIVE DIRECTOR

RE: TEMPORARY DISABILITY ASSISTANCE PROGRAM (TDAP)

**PROGRAM AFFECTED: TRANSITIONAL EMERGENCY, MEDICAL AND HOUSING
ASSISTANCE (TEMHA)**

ORIGINATING OFFICE: OFFICE OF PROGRAMS

SUMMARY:

During FY 2004, the Transitional Emergency, Medical and Housing Assistance (TEMHA) program experienced a budget shortfall. To address the crisis the Department took a number of steps that included promulgating regulatory changes to ensure that this important program is strengthened and to keep it financially solvent.

The Secretary of Human Resources repealed regulations under the Community Services Administration's COMAR 07.06.05 for Transitional Emergency, Medical, and Housing Assistance (TEMHA) and adopted new regulations under the Family Investment Administration's COMAR 07.03.05 for the Temporary Disability Assistance Program (TDAP). The new regulation changes the name of the program to more accurately reflect its purpose, limits the period of eligibility for individuals with a short-term disability, and describes how countable income will reduce the allowable benefit amount. The regulation is effective August 1, 2004. We will implement TDAP in three phases.

OVERVIEW

We will implement phase I of the TDAP rules for new applicants beginning October 1, 2004, and at interview for TEMHA redeterminations with a certification end date of November 30, 2004 or later. Phase II of TDAP will be implemented with on-line automated CARES changes that are scheduled for February 1, 2005, while Phase III will be implemented at a later date. The major TDAP requirements for beginning/continuing payments to applicants and recipients are listed below. Phase I addresses the first three of these changes:

Phase I

- TDAP cases with medical reports of at least 3 months, but less than 12 months are eligible for benefits for 9 out of 36 months.
- To receive TDAP for more than 9 out of 36 months, recipients must be:
 1. Certified as medically disabled by the State Review Team (SRT), **AND**
 2. Have a pending application for Supplemental Security Income (SSI) that has not been withdrawn or finally denied, **AND**
 3. Accepted by the Disability Entitlement Advocacy Program (DEAP) that continues to pursue the case.
- TDAP requires a dollar-for-dollar deduction for certain types of unearned income from the benefit amount.

Phase II

- All notices for TDAP will be CARES automated.
- Changes wording on certain CARES screens to TDAP or GA wherever appropriate.
- The GA counter will function correctly.

Phase III

- Local departments may require participation in appropriate medical treatment such as, but not limited to, drug screening and assessment, and if positive, substance abuse treatment. Prior to implementing this component of TDAP, local departments that wish to conduct substance abuse screening procedures must have an approved plan that meets criteria that the Family Investment Administration (FIA) will send out.
- Local departments may contract with a specific entity for medical examination services and require applicants to use that entity for the medical evaluation. This also requires approval by FIA.
- TDAP Overpayments are subject to recoupment/repayment.
- IPVs and Sanctions will be applied where required.

THE ACTION REQUIRED TO IMPLEMENT PHASE I BEGINS ON THE NEXT PAGE.

TDAP APPLICATIONS

Beginning October 1, 2004 for new applications that have not received TEMHA or TDAP benefits in the prior 36 months, consider eligibility for TDAP as follows:

- Initially, follow the existing policy and procedures for screening and determining technical and financial eligibility requirements such as citizenship, residence, etc. for TDAP applications in the same manner as you did for TEMHA applications.
- Pend the case as GA, and pend for Medical Assistance (MA). If requested, pend also for Food Stamps. Process Food Stamps in accordance with existing policy and procedures.
- If the individual already has an active MA case, utilize the current SRT decision information in determining TDAP eligibility. Follow existing SRT procedures for individuals with extended periods of MA eligibility or special circumstances as outlined in FIA Action Transmittal #01-28 when processing the TDAP application. If the individual does not have an active MA case, proceed as follows.
- Request a Medical Report Form 402B and Medical Assistance Program Vocational, Educational, and Social Data Form 4204. Review the 402B and the length of the disability:
 - A. If the medical form indicates a temporary disability of at least 3 months, but less than 12 months, process the application as a Type 1 TDAP.
 1. If the individual meets all other technical and financial eligibility criteria, approve the GA application and certify the case as a Type 1 TDAP. The certification end date is effective the last month of the medical, or 9 months, whichever is less.
 2. Suppress the system-generated notice of eligibility, and send CARES manual letter #0112 for approval of TDAP. (Appendix B- Example 1). Enter a delay reason for the pending MA AU.
 3. If the individual is determined not eligible for TDAP, deny the application, using the appropriate COMAR citation from the attached list (Appendix A). Suppress the system-generated notice of denial and send CARES manual letter #0112 for denial (Appendix B- 2).
 4. Prepare the SRT packet, and forward the SRT referral. Do not send the individual to SSI or DEAP at this time.
 5. Once an SRT decision is made, review the case for MA eligibility.
 - If the SRT decision is that the individual is “not disabled”, file the SRT

information in the case record, and deny the MA AU. The Type 1 TDAP case will close at the end of the certification period.

- On occasion, SRT will find such an individual “disabled.” This is usually because they have developed other medical evidence that leads to a conclusion that there is a disability that will last for more than 12 months. In this case, the SRT will return their evidence to the local department. The local department shall certify the MA AU for 12 months and process for TDAP in accordance with B. below.
- B. If the medical form shows that the individual has a long-term disability that will last for 12 months or more, process the application as follows:
1. Have the individual sign the Authorization for Interim Assistance Reimbursement (IAR) 340 form. Have the individual apply for SSI and other appropriate benefits and return verification that they have done so.
 2. If the individual is otherwise eligible, approve the GA application as a Type 1 TDAP with a 9-month certification. Suppress the system-generated notice and send CARES manual letter #0112 with appropriate message (Appendix B-3). Enter a delay reason for the pending MA.
 3. Prepare the SRT packet and forward it to SRT. Prepare and forward the DEAP packet.
 4. Once an SRT decision is made, review the case for MA eligibility and for Type 2 TDAP eligibility.
 - If SRT certifies the individual as “disabled” approve the MA AU using a certification end date of 12 months from the date of application.
 - If SRT certifies the disability **AND** the individual has a pending SSI application **AND** is cooperating with DEAP, change the case to Type 2 TDAP, extending the eligibility to 12 months from the date of application. Send CARES manual letter #0112 (Appendix B-4).
 - If SRT certifies the disability but the individual does not meet one or more of the other two requirements listed above, send a CARES manual letter #0112 to deny additional TDAP beyond the 9-month certification period (Appendix B-5). The Type 1 TDAP case will close at the end of the 9-month certification period.
 - If the SRT decision is that the individual is “not disabled”, file the information in the case record, and deny the MA AU. The Type 1 TDAP case will close at the end of the 9-month certification period.

TDAP REAPPLICATIONS

- Beginning October 1, 2004, in determining eligibility for TDAP when an individual has applied for or received TEMHA or TDAP benefits in the past 36 months, and the case has been denied or closed, consider the application as described above, with the following additional requirements. First, obtain a new medical 402B and pend the case as GA and MA. Review the closed or denied case to determine the reason for the closing/denial, and review the benefit history. If requested, also pend for Food Stamps. Process the Food Stamps in accordance with existing policy and procedures.
- If the individual already has an active MA case, utilize the current SRT decision information in determining TDAP eligibility. Follow existing SRT procedures for individuals with extended periods of MA eligibility or special circumstances as outlined in FIA Action Transmittal #01-28 when processing the TDAP application. If the individual does not have an active MA case, proceed as follows.
 - A. If the new 402B indicates a disability of less than 12 months, determine how many months in the past 36 months the applicant has already received TEMHA/TDAP.
 - 1. If the individual has received 9 or more months of benefits in the prior 36 months, deny the GA application. Suppress the system-generated notice and send CARES manual letter #0112 (Appendix B-6).
 - 2. Prepare the material for the SRT referral for an eligibility decision on the MA AU. Process the MA case in accordance with existing MA policy and existing SRT procedures.
 - 3. If the individual has not received up to 9 months of benefits in the prior 36 months, review the reason for closing or denying the case and determine if the individual now satisfies TDAP eligibility requirements. If so, certify for TDAP for the remaining months up to the period of disability noted on the 402B (not to exceed 9 months total) and send the material to SRT using existing procedures.
 - B. If the new 402B indicates a disability that will last for 12 months or more, have the individual complete the 4204 to prepare the material for an SRT referral.
 - 1. Have the individual sign the Authorization for Interim Assistance Reimbursement (IAR) 340 form.
 - 2. If the individual has not already applied for SSI, send the individual to apply for SSI and other appropriate benefits and return verification that they have done so. Prepare and forward the DEAP package.

3. Forward the new SRT packet along with any old 402B's and previous SRT decisions that are available to the SRT unit. Write **"SRT Reapplication"** on the referral.
4. If the individual meets all other technical and financial eligibility criteria, approve the GA application as Type 1 TDAP, and certify the case for **3 months only**. This is a temporary period while awaiting the SRT decision. Suppress the system-generated notice and send CARES manual letter #0112 (Appendix B-7). Enter a delay reason for the MA AU. Generate a 745 alert to review the case in 45 days for the SRT decision.
 - When the SRT material is returned, review the case for MA eligibility and for continued Type 2 TDAP:
 - If SRT certifies the individual as "disabled" approve the MA AU, using a certification end date of 12 months from the date of application.
 - If the individual is certified by SRT as "disabled" **AND** the individual has a pending SSI application **AND** is cooperating with DEAP, change the case to Type 2 TDAP, extending the certification period to 12 months. Send a manual letter (Use Appendix B-4).
 - If SRT certifies the disability but the individual does not meet one or more of the other two requirements listed above, close the TDAP case. Suppress the system-generated notice and send a CARES manual letter #0112 (Use Appendix B-5).
 - If SRT's decision is that the individual is "not disabled", deny the MA AU. Close the TDAP case. Suppress the system-generated notice and send CARES manual letter #0112 (Appendix B-8). **See CARES PROCEDURES.**
5. Once SRT has denied a person at TDAP reapplication as "not disabled," the individual may not receive any other temporary periods of eligibility pending any further SRT reviews of their situation. Only one 3-month certification period of TDAP may be approved when an individual has received the maximum TDAP eligibility. Subsequent GA applications are denied for maximum receipt of benefits. Process subsequent MA and Food Stamps applications in accordance with existing policy and procedures.

TEMHA AND TDAP RECERTIFICATIONS

Effective for all TEMHA or TDAP customers with a certification end date of November 30, 2004 or later, the FIA case manager conducts the recertification as follows:

TYPE 1 NOTIFICATIONS

- A. Review the medical information in the case record and the benefit history to determine the number of months that TEMHA benefits have been paid. If the disability is less than 12 months, and the individual has already received benefits for the duration of the medical, or for 9 or more months in the past 36 months, the case will close effective the end of the certification period. CARES does not send a redetermination appointment for Type 1 TEMHA/TDAP certifications, so there is no need to initiate action regarding TDAP.
- B. If the individual is receiving Food Stamps, initiate the recertification and process in accordance with existing policy and procedures for Food Stamp recertification.
- C. If the customer contends that he/she now has a more serious medical condition that makes him/her unable to work for more than 12 months, provide the individual with a 402B and advise that he/she may apply for TDAP benefits to begin after the current TEMHA/TDAP certification period expires. Process any subsequent application as a **TDAP Reapplication** in accordance with the section beginning on page 5.

TYPE 2 RECERTIFICATIONS

- Initiate the GA redetermination. If individual has an active Food Stamp case, follow existing policy and procedures for Food Stamp recertification. If the individual already has an active MA case, follow existing SRT procedures as outlined in FIA Action Transmittal #01-28 for individuals with extended periods of MA eligibility or special circumstances when processing the TDAP application. For those with a 12-month MA certification, initiate the MA redetermination also, and process the TDAP recertification as follows.
 - A. Obtain a new 402B and 4204 to complete the SRT packet.
 - B. Recertify the case as a Type 2 TDAP for 12 months. Suppress the TEMHA system-generated notice and send CARES manual letter #0112 (Appendix B-9).
 - C. Send the information to SRT and maintain a copy of the material in the case file. Generate a 745 alert to follow up with SRT in 45 days.
 - When the SRT decision is returned, review the case for MA eligibility, and for continued TDAP eligibility.
 - If SRT certifies the individual as “disabled” the individual remains eligible for MA. Recertify the MA AU for 12 months.

- If certified by SRT as “disabled” **AND** the individual has a pending SSI application **AND** is cooperating with DEAP, they remain eligible for the 12-month TDAP certification. File the information in the case record.
- If the individual is SRT “disabled” but does not meet all three eligibility requirements above, close the TDAP case. Suppress the system-generated notice and send CARES manual letter #0112 (Use Appendix B-5).
- If the SRT decision is “not disabled”, close the MA AU. This individual does not meet all three TDAP eligibility requirements without the SRT certification of disability. Close the TDAP case. Suppress the system-generated notice and send CARES manual letter #0112 (Use Appendix B-8). **See CARES PROCEDURES.**

CARES PROCEDURES

Phase I of automated CARES implementation of TDAP is effective October 1, 2004. CARES will apply new unearned income rules for applicants who apply for assistance on October 1, 2004 or after. Current TEMHA recipients will not be immediately affected by the changes. However, the new unearned income rules will affect existing TEMHA AU's with a certification end date of November 30, 2004 or later. CARES' processing under new TDAP regulations is modified as follows:

- CARES will deduct most unearned income types from the \$185.00 benefit amount dollar for dollar on applications and redeterminations. Exceptions to this rule will be unearned income types:
 - EA, EDUCATIONAL ASSISTANCE – UNDERGRADUATE NOT FROM COMMISSIONER OF EDUCATION;
 - UG, EDUCATIONAL ASSISTANCE – UNDERGRADUATE FROM COMMISSIONER OF EDUCATION;
 - LA, LOAN-NO REPAYMENT PLAN (CLIENT IS BORROWER);
 - LR, LOAN-REPAYMENT OF INTEREST (CLIENT IS LENDER);
 - ON, OTHER NON-COUNTABLE ALL PROGRAMS; and
 - MU, OTHER COUNTABLE MEDICAL ASISTANCE ONLY.These income types will be excluded from the eligibility calculation.
- If the customer receives unemployment insurance income while participating in a TDAP Assistance Unit, the AU will deny or close with a reason code of **364 (RECEIVING UNEMPLOYMENT BENEFITS)**.
- The receipt of SSI benefits will continue to close or deny a TDAP AU with reason code **203 (RECEIVING SSI)**.
- **CARES will close TYPE 1 cases that have received TEMHA or TDAP more than 9 out of the last 36 months at the end of the current certification period.**

TDAP APPLICATIONS

TDAP Type 1

Screening – Option J on the AMEN

- On the KIND screen select PA (TDAP) and MA (Medical Assistance). This will pend the customer in these two programs.

Interview – Option O on the AMEN

- On the DEM2 screen indicate
 - The disability/incapacitation
 - Type field is 1
 - Complete the Approval source field
 - Complete begin and end date fields.
 - Complete all appropriate CARES screens as required.

Process Application – Option P on the AMEN

- Check all screens for correct information and that required fields are completed.

Finalize Application – Option Q on AMEN Screen

- In finalization, put a “Y” in the Notice Override field and commit the benefit.
- Create a manual letter. (See Creating a Letter and Appendix A and B.)

SRT Decision on Type 1 TDAP

When SRT determines that the customer is not disabled:

- Using Option Q on the AMEN screen finalize the pending MA AU. This will deny the Medical Assistance with code 151 (Not totally Disabled).
- Allow the system generated Notice to be sent.

When SRT determines that the customer is disabled:

- Using the client ID, initiate a redetermination for the TDAP AU selecting Option N on the AMEN.
 - On the Initiate Redetermination (REDE) screen place a “Y” in the select field for the GA AU and hit enter.
 - Using Option R on the AMEN (the client ID will still appear on the AMEN), complete the Redetermination.
 - On the DEM2 screen change
 - The Type field to 2,
 - Change the Approval Source field to MS,
 - Change the Approval Source Date to the SRT decision date,
 - Change the Begin and End Dates to match the SRT decision dates.
 - Complete the IAR Date field.
 - On the UINC screen complete the Application Type, Status and Date fields.
 - On the MISC screen place a “Y” in the Redet Complete field.
 - Confirm the benefit and on the CAFI screen change the Redet End date to match the End date on the DEM2 screen.
 - Put a “Y” in the Notice Override field and commit the benefit.
 - Create a manual letter. (See Creating a Letter and Appendix A and B.)

Finalize the pending MA AU.

TDAP Type 2

Screening – Option J on the AMEN

- On the KIND screen select PA (TDAP) and MA (Medical Assistance). This will pend the customer in these two programs.

Interview – Option O on the AMEN

- On the DEM2 screen indicate
 - The disability/incapacitation
 - Type field is 1
 - Complete the Approval source field
 - Complete begin and end date fields (give a 9 month certification).
 - Complete the IAR Date field.
 - On the UINC screen complete the Application Type, Status and Date fields.

- Complete all appropriate CARES screens as required.

Process Application – Option P on the AMEN

- Check all screens for correct information and that required fields are completed.

Finalize GA Application – Option Q on AMEN Screen

- In finalization, put a “Y” in the Notice Override field and commit the benefit.
- Create a manual letter. (See Creating a Letter and Appendix A and B.)

SRT Decision on Type 2 TDAP

When SRT determines that the customer is not disabled:

- Using Option Q on the AMEN screen finalize the pending MA AU. This will deny the Medical Assistance with code 151 (Not totally Disabled).
- Allow the system generated Notice to be sent.

NOTE: TDAP will close at the end of the 9 month certification period

When SRT determines that the customer is disabled:

- Using the client ID, initiate a redetermination for the TDAP AU selecting Option N on the AMEN.
 - On the Initiate Redetermination (REDE) screen place a “Y” in the select field for the GA AU and hit enter.
 - Using Option R on the AMEN (the client ID will still appear on the AMEN), complete the Redetermination.
 - On the DEM2 screen change
 - The Type field to 2,
 - Change the Approval Source field to MS,
 - Change the Approval Source Date to the SRT decision date,
 - Change the Begin and End Dates to match the SRT decision dates.
 - Complete the IAR Date field.
 - On the UINC screen complete the Application Type, Status and Date fields.
 - On the MISC screen place a “Y” in the Redet Complete field.
 - Confirm the benefit, and on the CAFI screen change the Redet End date to match the End date on the DEM2 screen.
 - Put a “Y” in the Notice Override field and commit the benefit.
 - Create a manual letter. (See Creating a Letter and Appendix A and B.)

Finalize the pending MA AU.

TDAP REAPPLICATIONS

Review CARES benefit history to determine the number of months that TEMHA/TDAP has been received.

TDAP Type 1

- Follow the CARES procedures for applications.

TDAP Type 2

Follow the CARES procedures for applications only giving a 3-month certification. When SRT decision is received follow CARES application procedures.

RECERTIFICATION:

Note: Type 1 TEMHA/TDAP do not receive a redetermination. Allow the current certification period to end.

TEMHA/TDAP TYPE 2

- Initiate the Redetermination for both GA and MA (**Option N from AMEN**).
- Complete the Redetermination for the GA AU only:
 - On the **DEM2** screen
 - Change the Begin and End date to match the new 402B.
- Complete all appropriate CARES screens.
- Proceed to the **MISC A** screen and place a “Y” in the **Redet Complete** field.
- Confirm the benefit, and on the CAFI screen change the Redet End date to match the End date on the DEM2 screen.
 - Put a “Y” in the Notice Override field and commit the benefit.
- Create a manual letter. (See Creating a Letter and Appendix A and B.)
- Do not complete the Redetermination for the MA AU until a decision is received from SRT.

When the SRT decision is returned:

- Complete the Redetermination on the MA as appropriate.
- If found not disabled by SRT, close the GA and MA AUs.
 - On the **DEM2** screen, change the **Disability/Incapacity** code to “U”, and the **Disability/Incapacity source code** to “MP”. This will close both GA and MA with code **151 (NOT TOTALLY DISABLED)**.
 - Create a manual letter. (See Creating a Letter and Appendix A and B.)

CREATING A LETTER

- From the CARES main menu select option F, Letters.
- On the Letter Menu select option A, Letter Generation.
- Put the TDAP AU ID number in the AU ID field.
- Put 0112 in the Letter Type field, and press Enter.
- Complete the Letter Detail (LDTL) screen.
- **PF13** to bring up the Letters (LETT) screen.
- Complete all appropriate fields.

NOTE: If the benefit amount from the CAFI screen is less than \$185.00, make sure to change the amount on the LETT screen to correspond accordingly.

PF13 to the next page. Place a “Y” beside “more” at the bottom of the screen and **PF13** to access “additional text” screen.

On the “additional text” screen add appropriate text (see Appendices A and B).
When the Letter is complete, press Enter.

INQUIRIES:

Please direct policy questions to Cynthia Carpenter at (410) 767-7495 and CARES questions to Kim Butler at (410) 767-7950

cc: FIA Management Staff
DHR Help Desk
Constituent Services

APPENDIX A

COMAR CITATIONS FOR TDAP DENIALS AND CLOSINGS	MESSAGE
07.03.05.04	Because you have already received the maximum benefits.
07.03.05.12	Because agency mail was returned by the post office with no forwarding address. Please contact this department.
07.03.05.12	Because you have failed to provide information or verification needed to determine your eligibility.
07.03.05.04	Because you are currently receiving unemployment benefits.
07.03.05.04	Because you are receiving Supplemental Security Income.
07.03.05.09	Because of lump sum income received you are ineligible for benefits until_____.
07.03.05.07	Because income determined available from your sponsor is higher than the amount allowed.
07.03.05.07	Because your income is over the allowable benefit amount.
07.03.05.04	Because you are not technically ineligible for a category of assistance in which there is federal financial participation as required by regulation.
07.03.05.04	Because you are living in a public institution.
07.03.05.04	Because you are not living in Maryland.
07.03.05.04	Because you are employed.
07.03.05.04	You do not meet the disability requirement for this type of assistance.
07.03.05.07	Because your assets are higher than the amount allowed.
07.03.05.04	Because the State Review Team concludes that you are not disabled under federal Supplemental Security Income standards.
07.03.05.04	Because you refused to sign an Interim Assistance Agreement (State Loan Agreement).
07.03.05.15	You are disqualified due to a fraud conviction.
07.03.05.04	Because you do not meet immigrant rules.

07.03.05.05	A medical care provider did not confirm your disability.
07.03.05.10	You did not provide information/proof of income and resources of your sponsor.
07.03.05.12	Because of the reported death of the member of the assistance unit.
07.03.05.10	Because a person living in your home who does not receive assistance has begun paying support or increased the amount of support provided to you.
07.03.05.05	Because the eligibility period established when you applied has expired. If you feel that you are still in need, you may reapply.
07.03.05.04	You did not apply for Supplemental Security Income.
07.03.05.04	Because you have been determined ineligible for Federal benefits due to your own acts or omissions.
07.03.05.11	Because you refused to cooperate in a Quality Control review.
07.03.05.11	Because you may not receive benefits while temporarily out of the state for more than one month.
07.03.05.04	Your disability has an expected duration of less than three (3) months.
07.03.05.04	You do not meet the requirement for receiving benefits for more than 60 days from the date you were determined eligible for benefits, when you are 65 years old or older.
07.03.05.05	You refuse to participate in appropriate medical treatment.
07.03.05.12	Because the agency cannot locate you.
07.03.05.04	Because you did not cooperate with the Disability Entitlement Advocacy Program.
07.03.05.04	You did not apply for all other benefits that you might be eligible to receive.
07.03.05.04	Because you are no longer disabled.
07.03.05.08	The total amount of your assets is more than allowed for this program.
07.03.05.09	You transferred some of your assets to other people to be eligible for this program.
07.03.05.17	Your application was denied because there is no more money in the budget for this program this year.
07.03.05.12	You told us you want to withdraw your application.
07.03.05.12	You have asked us to close your case.

TEXT FOR TDAP LETTERS

LETTER #0112

_____, YOU APPLIED FOR MARYLAND'S TDAP PROGRAM. THIS LETTER IS ABOUT YOUR ELIGIBILITY FOR THE PROGRAM. PLEASE READ ALL OF THE PAGES OF THIS LETTER CAREFULLY. YOUR NEW WORKER IS SHOWN ABOVE. THE INFORMATION CHECKED BELOW APPLIES TO YOU:

- () APPROVAL: YOU ARE ELIGIBLE FOR:
TDAP ASSISTANCE FOR THE MONTHS OF _____ TO _____
YOUR REGULAR MONTHLY BENEFIT WILL BE \$185.00 DOLLARS AND AVAILABLE THROUGH:
 - () EBT (INDEPENDENCE CARD)
 - () AUTHORIZED REPRESENTATIVE
 - () VENDOR PAYMENTS
 - () CALL YOUR WORKER TO ARRANGE FOR AN AUTHORIZED REPRESENTATIVE OR VENDOR PAYMENT.
 - () DENIAL: YOU ARE NOT ELIGIBLE FOR TDAP ASSISTANCE
THE REASON FOR YOUR DENIAL IS _____
-

EXAMPLE #1 – Complete the approval section of the letter, giving the certification dates. On the page for additional text add:

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF YOUR MEDICAL ASSISTANCE ELIGIBILITY WHEN THE STATE REVIEW TEAM HAS MADE A DECISION.

EXAMPLE #2 – Complete the denial section of the letter. After “THE REASON FOR YOUR DENIAL IS” add SEE ADDITIONAL PAGES.

On the page for additional text add:

YOU ARE NOT ELIGIBLE FOR TDAP BENEFITS BECAUSE YOU ARE CURRENTLY RECEIVING UNEMPLOYMENT BENEFITS. THIS DECISION IS BASED ON THE CODE OF MARYLAND REGULATIONS 07.03.05.04.

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF MEDICAL ASSISTANCE ELIGIBILITY ONCE THE STATE REVIEW TEAM HAS MADE A DECISION.

EXAMPLE #3 – Complete the approval section of the letter with a nine-month certification period. On the page for additional text add:

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF MEDICAL ASSISTANCE ELIGIBILITY WHEN THE STATE REVIEW TEAM HAS MADE A DECISION.

YOUR ELIGIBILITY FOR TDAP BENEFITS BEYOND NINE MONTHS IS ALSO BASED ON THE STATE REVIEW TEAM'S DECISION. IF YOU ARE ELIGIBLE FOR ADDITIONAL TDAP BENEFITS, YOU WILL RECEIVE A SEPARATE NOTICE.

EXAMPLE #4 – Complete the approval section, using the extended 12-month certification dates. On the page for additional text add:

THE STATE REVIEW TEAM HAS MADE A DECISION ON THE MEDICAL INFORMATION YOU GAVE US AND CONCLUDES THAT YOU ARE MEDICALLY DISABLED UNDER THE FEDERAL SUPPLEMENTAL SECURITY INCOME STANDARDS. YOU WILL CONTINUE TO RECEIVE TDAP BENEFITS UNTIL _____.

EXAMPLE #5 – Complete the denial section of the letter. After “THE REASON FOR YOUR DENIAL IS” add *SEE ADDITIONAL PAGES*.

On the page for additional text add:

ALTHOUGH THE STATE REVIEW TEAM HAS MADE A DECISION THAT YOU ARE DISABLED, YOU MAY NOT RECEIVE TDAP BENEFITS BEYOND NINE MONTHS BECAUSE YOU ARE NOT COOPERATING WITH THE DISABILITY ENTITLEMENT ADVOCACY PROGRAM. THIS DECISION IS BASED ON THE CODE OF MARYLAND REGULATION 07.03.05.04.

EXAMPLE #6 – Complete the denial section of the letter. After “THE REASON FOR YOUR DENIAL IS” add *SEE ADDITIONAL PAGES*. On the page for additional text add:

YOU HAVE RECEIVED THE MAXIMUM AMOUNT OF CASH BENEFITS THAT MAY BE PAID FOR THE TDAP PROGRAM IN A 36-MONTH PERIOD. THIS DECISION IS BASED ON THE CODE OF MARYLAND REGULATION 07.03.05.05.

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF YOUR MEDICAL ASSISTANCE ELIGIBILITY ONCE THE STATE REVIEW TEAM HAS MADE A DECISION.

EXAMPLE #7 – Complete the approval section of the letter with a three-month certification period. On the page for additional text add:

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF YOUR MEDICAL ASSISTANCE ELIGIBILITY ONCE THE STATE REVIEW TEAM HAS MADE A DECISION.

YOUR ELIGIBILITY FOR TDAP BENEFITS BEYOND THREE MONTHS IS ALSO BASED ON THE STATE REVIEW TEAM’S DECISION. IF YOU ARE ELIGIBLE FOR ADDITIONAL BENEFITS, YOU WILL RECEIVE A SEPARATE NOTICE.

EXAMPLE #8 – Complete the denial section of the letter. After “THE REASON FOR YOUR DENIAL IS” add SEE ADDITIONAL PAGES.

On the page for additional text add:

YOU ARE NO LONGER ELIGIBLE FOR TDAP BENEFITS BECAUSE THE STATE REVIEW TEAM MADE A DECISION THAT YOU ARE NOT MEDICALLY DISABLED UNDER SUPPLEMENTAL SECURITY INCOME STANDARDS. THIS DECISION IS BASED ON THE CODE OF MARYLAND REGULATION 07.03.05.04.

EXAMPLE #9 – Complete the approval section of the letter with a 12-month certification period. On the page for additional text add:

THE MEDICAL INFORMATION YOU GAVE US HAS BEEN SENT TO THE STATE REVIEW TEAM FOR A DECISION ON YOUR MEDICAL ASSISTANCE ELIGIBILITY. YOU WILL RECEIVE A SEPARATE NOTICE OF YOUR MEDICAL ASSISTANCE ELIGIBILITY ONCE THE STATE REVIEW TEAM HAS MADE A DECISION.

YOUR ELIGIBILITY FOR TDAP BENEFITS FOR TWELVE MONTHS IS ALSO BASED ON THE STATE REVIEW TEAM’S DECISION. IF YOU ARE NOT ELIGIBLE FOR THE ENTIRE TWELVE MONTHS OF TDAP BENEFITS, YOU WILL RECEIVE A SEPARATE NOTICE.