

# FIA ACTION TRANSMITTAL

Department of Human Resources 311 West Saratoga Street Baltimore MD 21201

Control Number: # 09-40

#### Effective Date: IMMEDIATELY Issuance Date: June 11, 2009

- TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT FAMILY INVESTMENT SUPERVISORS/ELIGIBILITY STAFF,
- FROM: KEVIN M. MCGUIRE, EXECUTIVE DIRECTOR
- RE: NEW VERIFICATION FORM FOR PREGNANCY AND PREGNANCY RELATED IMPAIRMENT/DISABILITY

PROGRAM AFFECTED: TEMPORARY CASH ASSISTANCE (TCA)

# ORIGINATING OFFICE: OFFICE OF PROGRAMS

## SUMMARY:

TCA applicants and recipients are required to report and verify pregnancy only if the unborn is the only child that allows the assistance unit to be eligible for TCA. Disabled customers are required to provide verification of their disability in order to have good cause or an exemption from work activities. Pregnancy <u>is not</u> a disability; however, some pregnant customers have a pregnancy-related disability that prevents them from participating in a work activity. Pregnancy-related disability must be verified.

The 402 A form is an obsolete form. We revised the obsolete form to allow it to be used for a pregnancy-related disability only. The revised form is now a 402P. A copy of the form is attached.

## **ACTION REQUIRED:**

It is not necessary to have a specific form completed to verify pregnancy. As long as the health care provider verifies the pregnancy, the expected due date/date of confinement (EDC) and that the customer is receiving prenatal care, it is acceptable. It can be on the 402P form, the doctor's letterhead or on a prescription pad.

When the customer indicates she has a medical problem related to the pregnancy (such as high blood pressure, toxemia or the doctor has placed her on bed rest) that prevents her from participating in a work activity, it must be verified. Impairments or disabilities that are pregnancy related and expected to last through the end of the pregnancy may be verified using the 402P. A 402b and 402w are not required unless the impairment/disability is expected to last more than 12 months or result in the customer's death.

The customer is coded in Works as having good cause for not participating in a work activity.

## **CARES**

The following CARES screens must be completed in the highlighted field for all pregnant customers.

#### DEM1

Indicates the customer's due date or the date the baby is expected to be born, whether the unborn is TCA eligible, how many babies are expected (twins, triplets etc.), whether the customer is receiving prenatal care and that all the information is verified.

INQUIRY Month 07 09	CLIE	NT DEMOGRAPHIC 1 - TTT 06 11 09	DEM1	M1	01	
	Parental V	Pregnant		Unborn	Num V	Prenatal V
	Status	Due Date	V	Eligible	Expect	Care

#### DEM2

If the customer is disabled or impaired this section must be completed to verify what the disability is, how it was verified and the begin and end dates of the customer's impairment /disability.

INQUIRY Month 0709	CLIENT DEMOG TTT 06 2	DEM2 01						
Disability/Incapacity								
Disab/ GA Incap Type	SW Approval CTR Coop Source (MM YY)	Begin Date End Date (MM YY) (MM YY)	Loan Date (MM DD YY <b>)</b>	IAR Date (MM DD YY)				

#### WORK

Unless the customer has a 12 month impairment/disability the WORK Requirement field will be coded YES and the STATUS field is coded IL. The customer has good cause but is still in the work participation rate denominator.

INQUIRY Month 0709	WORK REGISTRATION	ON/PARTICIPATION - WORK	WORK 01
Client Name HOMER	R DAY	Client ID 462027362 Follow-up Interview? Del:	
TCA WORK Requirement Statu	<b>s Date</b> Offenses	Frequency: Next Appt: Number Next Schd Appt: Interviewer: Notice Text:	

#### WORKS

WORKS is coded for the appropriate activity the customer is engaged in or coded as OTP, OTD (disabled 12 months or more) or OTM (Wellness Rehabilitation –disability less than 12 months). When the case is coded OTP or OTM, the customer is still included in the Work Participation Rate.

Action Due: Upon receipt

**INQUIRIES:** Please direct all TCA inquiries to Marilyn Lorenzo at 410-767-7333, email <u>mlorenzo@dhr.state.md.us</u>, or Gretchen Simpson at 410-767-7937, email <u>gsimpson@dhr.state.md.us</u>. Works inquiries can be sent to Gretchen Simpson or to Mary Ellen Scalley at 410-767-7953, email <u>mscalley@dhr.state.md.us</u>.

cc: DHR Executive Staff FIA Management Staff Constituent Services DHR Help Desk