

From: DPA Field Services
Sent: Friday, June 29, 2001 8:47 AM
To: ALL DPA Statewide Staff
Subject: Interpreter Service

Interpretalk for Language Services Associates is our new telephonic interpreter service. This is **effective 7/1/01**. You can access Interpretalk by calling **1-800-305-9673** and pressing #2. They will need to have an account code that you will find in the following list:

- #4100 Ketchikan District Office
- #4110 Sitka District Office
- #4120 Juneau District Office
- #4130 Fairbanks District Office
- #4140 Nome District Office
- #4150 Kotzebue District Office
- #4160 Kodiak District Office
- #4170 Bethel District Office
- #4180 Kenai District Office
- #4190 Anchorage District Office
- #4200 Muldoon District Office
- #4210 Mat-Su District Office
- #4220 Eagle River District Office
- #4230 Homer District Office
- #4240 Anchorage APA Office
- #4250 Southeast APA Office
- #4260 Coastal Field Office
- #4270 Field Services
- #4280 Office of Hearings and Appeals
- #4290 Denali Kid Care
- #4300 Heating Assistance Program
- #4310 QA
- #4320 Fraud

Attached is a list of the languages that that provide interpretation service for:

Please let [Julie Morris](#) 465-1754 know if you have any problems or concerns with our new contract.



LANGUAGE SERVICES ASSOCIATES

P.O. Box 205 • 607 N. Easton Road - C2 • Willow Grove, PA 19090

Phone: (215) 657-6571 • 800-305-WORD • FAX: (215) 659-7210

www.Call-Lsa.com • E-mail: Lsa@Call-Lsa.com

- **InterpreTalk®**
Telephone Interpreters
- All Languages
- Court Interpreters
- Accredited Master Translators
- Simultaneous & Consecutive Interpreters
- American Sign Language Interpreters

LIST OF LANGUAGES PROVIDED

| | | |
|---------------------------------|-------------------------|----------------------------------|
| 1. AFGHANI (DARI) | 57. GUJARATI | 116. PUNJABI |
| 2. AFRIKAANS | 58. GYPSY (ROMANY) | 117. PASHTO |
| 3. AKAN | 59. HAITIAN CREOLE | 118. PERSIAN (FARSI) |
| 4. ALBANIAN (GHEG & TOSK) | 60. HAKKA | 119. POLISH |
| 5. AMERICAN SIGN LANGUAGE (ASL) | 61. HARARI | 120. PORTUGUESE |
| 6. AMHARIC | 62. HAUSA | 121. PULAAR |
| 7. AMOY | 63. HEBREW | 122. QUECHUA |
| 8. ARABIC (ALL DIALECTS) | 64. HINDI | 123. ROMANIAN |
| 9. ARMENIAN | 65. HINDUSTANI | 124. RUSSIAN |
| 10. ASANTE | 66. HMONG | 125. SAMOAN |
| 11. ASSYRIAN | 67. HUNGARIAN | 126. SARIKOLI |
| 12. AZERBAIDJANI | 68. IBO | 127. SERBO-CROATIAN |
| 13. BAMBARA | 69. IGBO | 128. SERBIAN |
| 14. BAMBANANKA | 70. ICELANDIC | 129. SHANGHAI (CHINESE) |
| 15. BASSA | 71. ILONGO | 130. SINHALESE |
| 16. BATA | 72. ILOKANO | 131. SLOVAK |
| 17. BASQUE | 73. INDONESIAN | 132. SLOVENE |
| 18. BENGALI | 74. ITALIAN | 133. SOMALI |
| 19. BERBER | 75. JAPANESE | 134. SONINKE |
| 20. BOSNIAN | 76. JIANGXI (CHINESE) | 135. SOSO |
| 21. BULGARIAN | 77. JOULAKA | 136. SPANISH |
| 22. BURMESE | 78. KALENJIN | 137. SUSU |
| 23. BYELORUSSIAN | 79. KASHMIRI | 138. SWAHILI |
| 24. CAMBODIAN (KHMER) | 80. KATCHI | 139. SWEDISH |
| 25. CANTONESE | 81. KAZAKH | 140. TAGALOG |
| 26. CATALÁN | 82. KHAMER | 141. TAIWANESE |
| 27. CHAOZHOU | 83. KICONGO | 142. TAMASHEK (TUAREC) |
| 28. CEBUANO | 84. KOMI | 143. TAMIL (SRI LANKAN & INDIAN) |
| 29. CROATIAN | 85. KONJABOL | 144. TELUGU |
| 30. CUKCHI | 86. KOREAN | 145. TEMNE |
| 31. CZECH | 87. KRIO (SIERRA LEONE) | 146. THAI |
| 32. DANISH | 88. KURDISH | 147. TIBETAN |
| 33. DARI | 89. LAO | 148. TIGRIGNA |
| 34. DUTCH | 90. LATIN | 149. TOISHAN (CHINESE) |
| 35. ENGLISH | 91. LATVIAN | 150. TURKISH |
| 36. ESTONIAN | 92. LETA | 151. TWI |
| 37. ETHIOPIAN | 93. LINGALA | 152. UKRANIAN |
| 38. EWE | 94. LITHUANIAN | 153. URDU |
| 39. FANG | 95. LUGANDA | 154. VIETNAMESE |
| 40. FANTE | 96. LUHYA | 155. VISAYAN |
| 41. FARSI | 97. MACEDONIAN | 156. WASSA |
| 42. FIJIAN | 98. MALAY | 157. WELSH |
| 43. FILIPINO | 99. MALAYALAM | 158. WENZHOU (CHINESE) |
| 44. FLEMISH | 100. MALINKE | 159. WOLOF/OUOLOFF |
| 45. FINNISH | 101. MANDARIN | 160. YIDDISH |
| 46. FRENCH | 102. MANDINGO | 161. YORUBA |
| 47. FUZHOU (FOOCHOW) | 103. MANINKA | 162. ZULU |
| 48. FUKIANESE | 104. MARI | |
| 49. FULANI | 105. MARATHI | |
| 50. GA | 106. MAURITIAN | |
| 51. GALICIAN | 107. MINANGKABAU | |
| 52. GAELIC | 108. MONGOLIAN | |
| 53. GEORGIAN | 109. MOORE | |
| 54. GERMAN | 110. NAVAJO | |
| 55. GREEK | 111. NING PO (CHINESE) | |
| 56. GUARANI | 112. NZIMA | |
| | 113. NORWEGIAN | |
| | 114. NUBIAN | |
| | 115. PALAU | |

From: DPA Field Services
Sent: Wednesday, June 27, 2001 2:53 PM
To: ALL DPA Statewide Staff
Cc: Henderson, Kevin; Leonard, James; Foglia, Patricia; Gore, Anne M; Vlastuin, Linda D.
Subject: NEW MEDICAID ELIGIBILITY CATEGORY

**BROADCAST TO ALL DPA STAFF
FROM: DMA, BENEFICIARY ELIGIBILITY UNIT and DPA FIELD SERVICES**

NEW MEDICAID ELIGIBILITY CATEGORY

Breast and Cervical Cancer (BC)

On Monday, June 25 Governor Knowles signed into law House Bill 65, which authorizes a new Medicaid eligibility category for women needing treatment for breast or cervical cancer, who are under age 65, who do not have insurance coverage, and who have been screened under CDC the National Breast and Cervical Cancer Early Detection program. Emergency regulations are expected to be filed on Wednesday, June 27. July will be the first benefit month available.

Only a limited number of women across the state are expected to qualify for this Medicaid category. Because of the small number and unique eligibility requirements, all applications for this category will initially be processed by Terry Hamm in the Field Services Unit.

While there will be only a small number of women eligible for this new category of Medicaid, we anticipate a lot of media coverage over it's start up. You may get several inquires about this new coverage, so we are providing the following information to help you direct the calls and questions appropriately.

HOW DO WOMEN GET SCREENED?

The Division of Public Health (DPH) operates the Breast and Cervical Health Check (BCHC) program to screen individuals, which uses 25 different providers in 15 communities throughout the state. There are also three tribal grantees who provide screening services: Southcentral Foundation; Southeast Regional Health Corporation; and Arctic Slope Regional Health Corporation. DPH determines eligibility based upon age, being uninsured, and below 250% of poverty level. To find out more information about screening and finding a screening provider, individuals in Anchorage can phone DPH at 269-8069; individuals outside of Anchorage can call 1-800-410-6266.

APPLICATION PROCESSING

Applications will primarily be coming from two sources. Some women will have already been referred to the BCHC screening program and may get an application from DPH or their private health care provider. DPH will forward all applications they receive to Terry Hamm. Others will come to DPA offices for an application. Applicants should be given the GEN 50B and a one page supplement that helps screen applicants for other eligibility categories. We will be sending a copy of the supplement to you separately. If a completed application comes to your office (with or without a supplement), register the application as an ME-AD case and then forward it to the Terry Hamm in the Field Services Unit.

GENERAL INFORMATION/INQUIRIES

When people call with general questions about how to be screen for breast or cervical cancer, please direct those calls to the Division of Public Health as noted above. When people call about how to get Medicaid or have specific questions about how Medicaid works for this eligibility category please direct those calls to Terry Hamm in Field Services at 269-7854 or email Terry_Hamm@health.state.ak.us.

From: DPA Field Services
Sent: Monday, June 25, 2001 10:48 AM
To: ALL DPA Statewide Staff
Subject: Schedule of Release - Information about Prospective Budgeting Changes

**This is a broadcast message from
Mary Rogers
to all DPA staff**

Prospective Budgeting is almost here!

To assist clientele, partner agencies, and client advocate groups understand and learn about our upcoming ProBudgeting changes, the Division will be distributing informational flyers and posters.

The first batch of informational flyers are inserted with the August monthly reports and will be mailed to clients on July 15. The flyer will inform clients that they do not have to turn in a monthly report effective October 1, but they will be responsible for reporting changes. Here is the link to the draft of this flyer:

<http://dpa.liminis.net/probudget/download/communication/julyMRF.pdf>

Colorful posters that can be displayed in public places will also be distributed on July 15 to all DPA offices, AJCN partners, service providers, advocate groups, native organizations and other DHSS agencies.

A second mailing of flyers is scheduled on August 15. In September, the revised Gen 55 along with the third informational flyer will be distributed. These flyers will contain more information about the new change reporting requirements.

Here is a brief summary of the information contained in the flyer:

An individual only needs to report the following changes in their employment:

- *they start or stop a job*
- *their rate of pay changes*
- *if their employment changes from full-time to part-time or part-time to full-time.*

Other changes an individual is required to report are:

- *they move or get a new mailing address*
- *someone moves into or out of the home*
- *their bank account or cash on hand exceeds \$2000*
- *they get a vehicle*
- *there is a change in income greater than \$25 from any source other than a job*
- *there is a change in the allowable expenses / utilities the client pays*
- *there is a change in their insurance coverage*

Clients will need to report changes within 10 days for all Public Assistance programs. However, there is still a five-day reporting requirement when a child leaves the home.

Changes may be reported on the Review / Recertification form (Gen 72), on a change report form (Gen 55), and by phone, letter, or personal visit.

Plans for conducting public forums are also underway and scheduled to be held between August 1 and September 15.

We anticipate an increase in phone calls from clients asking questions about the change. Here is the link to the “frequently asked questions” section of the Prospective Budgeting website. The information contained in this section may help you answer questions that may arise:

http://dpa.liminis.net/probudget/faq.php?myfaq=yes&id_cat=2&categories=About+ProBudgeting

If you have any questions about the schedule of releases, please contact Clarissa Ridgway at 269-7879, or Clarissa_Ridgway@health.state.ak.us <mailto:Clarissa_Ridgway@health.state.ak.us> for assistance.

From: DPA Field Services
Sent: Friday, June 15, 2001 3:46 PM
To: ALL DPA Statewide Staff
Subject: "The Work Number"

**Broadcast to all DPA Staff
From Field Services**

A new and easy way to obtain income verification on clients is now available to all field staff. Effectively immediately, *The Work Number* is now accessible for obtaining income information from certain companies, many of which have traditionally been difficult to get detailed data from.

The Work Number is a new service that provides complete employee information from over 600 companies including Wal-Mart, K-Mart, and Fred Meyer. Here are some of the features of *The Work Number*:

- You can make inquiries either through the Internet or by using an 800 number.
- The service is free.
- Replies are sent to your office's fax number within 5 working days.
- The inquiry process is easy to use.

Attached to this email are three documents that will assist you in using *The Work Number*. The "How to Social Service" PDF file is a set of instructions on how to use the service. The "Sample Verification" Word file contains an example of a sample request for verification, and the "Subsidiary Listing" Excel file has a listing of the companies that participate in *The Work Number*.

If you have any questions, please contact Steve Neel at 269-7876 or Steve_Neel@health.state.ak.us for assistance.

From: Rogers, Mary
Sent: Tuesday, April 24, 2001 1:27 PM
To: ALL DPA Statewide Staff
Subject: COLLATERAL CONTACTS

**Broadcast to All DPA Staff
from Field Services, Food Stamp Policy, Division of Medical Assistance, and
the Policy and Program Development Team**

Conflicting policies and procedures were identified as one of the “rubs” in the recent Business Analysis meetings. Through this research, we learned that one of the conflicts is in the purpose and use of collateral contacts. Thanks for bringing this to our attention. This broadcast message clarifies the Division’s policies and procedures on the purpose and use of collateral contacts and applies to all programs we administer.

PURPOSE OF COLLATERAL CONTACTS. Collateral contacts are a method for obtaining information or verification that is needed to correctly determine:

- a household’s eligibility for assistance or benefit amount,
- an individual’s participation in a work-related activity, or
- a family’s need for child care.

Collateral contacts may also be used when information provided by the client is questionable or when evidence of certain eligibility criteria is not available.

Clarification. Collateral contacts are essentially a form of customer service. The easiest and quickest method for obtaining necessary information or verification may be for the case worker to assist the household by directly contacting a third party - a collateral contact. The primary responsibility for providing information, however, always rests with the client.

CASE REVIEW GUIDELINES. The Case Review Guide currently requires collateral contacts be made on applications and Food Stamp recertifications. It also suggests case workers complete at least two collateral contacts.

Policy Clarification. Collateral contacts enhance verification and contribute to quality casework. However, they are not a factor of eligibility for any public assistance program and failure to designate a contact person is not a valid reason to deny or terminate benefits. Program policies recognize third party contacts are a valuable tool. We support and encourage the practice of asking clients to provide them and for permission to use them to obtain information as they can provide helpful information about a household’s circumstances.

A collateral contact, however, cannot be required and case workers cannot restrict the household to one method of verification. Households must always be given the opportunity to provide necessary information or to resolve questionable information. We must never deny or delay benefits solely because a household fails to designate a contact person, and a household’s assistance may only be denied or terminated if they fail to provide necessary information after being requested to do so.

Case Review Guide Clarification. To alleviate the confusion regarding collateral contacts please make the following change to the Case Review Guide. To keep alignment with Program and Policy, Field Services no longer requires two collateral contacts be made, but recognizes using a collateral contact as a method for obtaining information or verification that is needed to correctly determine a family’s situation. As part of good quality casework, staff will need

to determine when to use collateral contacts as a tool.

Errors will no longer be cited for not contacting a collateral contact. If a payment error has been cited a recommendation might be made to use a collateral contact to verify the situation.

Please remove the Collateral Contacts section from the Case Review Guide on page 29. Please insert this clarification into the guide until a new page is emailed to you.

For more information about the proper use of collateral contacts, please see Administrative Procedures Manual Section 105-7. If you have any questions, please contact the appropriate policy section.

Again, thanks for bringing this to our attention. We hope this helps to eliminate the confusion on this issue and helps with process improvements and efficiencies.

From: Bryan, Shirley
Sent: Wednesday, January 17, 2001 12:12 PM
To: ALL DPA Statewide Staff
Subject: Native Dividend Review

Broadcast Message from Staff Development and Training

The recent CIRI Dividend distribution has provided all of us with an opportunity to review the policies surrounding native dividend distributions. In an effort to assist staff, SD&T in cooperation with Program and Policy, has created a Native Dividend Review Sheet (attached). You will find the major program policies relating to native dividends on one easy to reference document.

Additionally, Staff Development and Training has created a Native Dividend Skill Challenge on our web-site. This is an excellent opportunity for you to test your skills and knowledge (and to impress your friends and neighbors!) You can find the Skill Challenge at <http://hss.state.ak.us/dpatraining/>. You can also find a PDF version of the Native Dividend Review Sheet on the web-site.

HOW THE CIRI DIVIDEND AFFECTS PUBLIC ASSISTANCE PROGRAMS

Native dividends are treated as income in the month of receipt, and as a resource the months following the month of receipt.

FOOD STAMPS

Income:

Exempt. FS MS 602-3D(10) states, "Alaska Native Claims Settlement Act (ANCSA) Alaska Native corporation payments to shareholders are exempt." CIRI is one of 13 regional Native corporations established by Congress under the terms of ANCSA.

Resource:

Exempt, under specific conditions. FS MS 602-2B(12) states, "Exempt ANCSA cash payments that are kept in a separate account containing only exempt monies retain their resource exemption indefinitely."

FS MS 602-2A(4) states, "When any money considered an exempt resource is commingled or deposited into an account with countable resources, the exempt portion is disregarded for six months from the date the funds were commingled. After the six months the entire account balance is counted toward the resource limit."

Eligibility:

Most food stamp recipients who receive the CIRI dividend will remain eligible, providing all other eligibility factors are met. If the household uses the cash payment to buy items like a boat, car, or real property, these items must be examined to determine if they are exempt for reasons identified elsewhere in the Food Stamp Program policy manual.

TEMPORARY ASSISTANCE (ATAP)

Income:

"The first \$2,000 per year of cash distributions made by Native corporations to Alaska Natives under ANCSA are excluded as income. This \$2,000 exclusion applies to each individual and to each single calendar year."

"Cash distributions paid in excess of \$2,000 per calendar year to an individual shareholder...count as income to the individual shareholder in the month of receipt." ATAP MS 758-5

The CIRI dividend is not considered a non-recurring lump sum as defined at ATAP MS 761 therefore excess averaging does not apply.

Resource:

“The first \$2,000 (retained) per individual per calendar year of cash payments made by ANCSA corporations is...excluded from consideration as a resource.”
ATAP MS 754-9A

Eligibility:

Eligibility is always determined prospectively. Families receiving ATAP who receive the CIRI dividend will most likely be prospectively ineligible as they will be over the \$1,000 resource limit.

If the family has (or is expected to have) less than \$1,000 in countable resources remaining in the month following the month of receipt, they would be prospectively eligible on this factor.

Any Native dividend amount received in excess of \$2,000 in a calendar year is countable income in the month of receipt. If the case is in retrospective budgeting, under the \$1,000 resource limit, and otherwise eligible, this will likely result in a one-month suspension.

FAMILY MEDICAID**Income:**

“The first \$2,000 per year of cash distributions made by Native corporations to Alaska Natives under ANCSA are excluded as income. This \$2,000 exclusion applies to each individual and to each single calendar year.” MA MS 5166 & AFDC MS 363-11B.

Resource:

“The first \$2,000 (retained) per individual per calendar year of cash payments made by ANCSA corporations is...excluded from consideration as a resource.” MA MS 5154 & AFDC MS 352-9A

Eligibility:

Since financial eligibility for Medicaid is always determined prospectively, the only time cash distributions are countable income is if the amount in excess of the first \$2,000 is received in a month of application or in a month in which retroactive Medicaid is being determined. For recipients, Family Medicaid benefits will have already been issued for the month in which the family receives the CIRI dividend due to the EIS auto-roll.

Family Medicaid recipients who receive the CIRI dividend will most likely be prospectively ineligible for continued benefits, as they will exceed the \$1,000 resource limit. **Children remain eligible through the end of their review period** due to the six-month continuous eligibility policy at MA MS 5007. The adult(s) should be coded out of the Family Medicaid case. Adverse action is required.

The case should remain a Family Medicaid case until the end of the review period. If, at any time during the review period, the household falls below the \$1,000 resource limit, the adult(s) should be coded back in, provided all other eligibility criteria have been met.

If the family has (or is expected to have) less than \$1,000 in countable resources remaining in the month following the month of receipt of the dividend, there will be no affect on the case.

DENALI KIDCARE

Income:

DKC income policy regarding receipt of Native dividends mirrors Family Medicaid policy. Since financial eligibility for DKC is always determined prospectively, the only time cash distributions are countable income is if the amount in excess of the first \$2,000 is received in the month of application. For recipients, Denali KidCare benefits will have already been issued for the month in which the family receives the CIRI dividend due to the EIS auto-roll.

Resource:

Because the DKC program has no resource restrictions, there is no affect on eligibility for this program based on this factor.

ADULT PUBLIC ASSISTANCE AND RELATED MEDICAID

Income:

APA MS 442-3A(8)(f) states, "Cash distributions are excluded from income to the extent that the distributions do not exceed \$2,000 per individual per calendar year.

When an individual receives more than \$2,000 from all ANCSA corporations in a single calendar year, any amounts exceeding \$2,000 are considered countable income in the month of receipt."

Resource:

"The total of all distributions received from ANCSA corporations in a calendar year are excluded up to \$2,000 per individual.

If the individual keeps more than \$2,000 from any year's distribution, the amount exceeding the \$2,000 exclusion for that year is a countable resource" beginning the month following the month of receipt. APA MS 432-4L(6)(b)

Eligibility:

For non-SSI recipients, count the dividend as income in the month received. For SSI recipients, disregard the dividend as income. Per APA MS 452-1C, SSI recipients are budgeted using the appropriate SSI income standard as the amount of countable income. Count the dividend as a resource for all applicants and recipients in subsequent months.

Resource eligibility for all applicants and recipients is based on countable resources. If the individual is under the resource limit on *the first moment of the month* and is otherwise eligible, there is no affect to the case. If the individual exceeds the resource limit, send timely notice of adverse action and close the APA case. Be sure to look for Medicaid eligibility such as QMB only or SLMB as they have higher resource limits.

Reminder: SSI recipients remain eligible for Medicaid until SSI stops. Timely notice of adverse action must be given when closing the APA portion of the case. Like APA, the SSI program will count the dividend as income in month received, and will determine resource eligibility in the following months.

GENERAL RELIEF ASSISTANCE

Income:

Dividends from Native corporations are not exempt. GRA MS 2006.3

Resource:

Dividends from Native corporations are not an exempt resource. GRA MS 2006.2

CHRONIC AND ACUTE MEDICAL ASSISTANCE

Income:

Per a clarification from DMA Policy dated 01/03/01, the CAMA program counts Native corporation dividends toward income and resource limits.

CAMA MS 540 states, "A payment made under ANCSA that is not taxable by the IRS is not counted as income." However, this statement is referring to payments made from the original settlement, not the current Native corporation dividends (including the CIRI dividend).

Resource:

Dividends from Native corporations are not an exempt resource. The amount remaining is considered an available resource the month(s) following the month of receipt.

From: Rogers, Mary
Sent: Monday, February 05, 2001 5:10 PM
To: ALL DPA Statewide Staff; Sturrock, Kathy
Subject: Earned Income Tax Credit Campaign

This is a broadcast message to all DPA staff from Field Services

In recognition of the importance of the Earned Income Tax Credit (EITC) to low income families, we are stepping up DPA's participation on a marketing campaign about the EITC. In the past we participated in distributing flyers and brochures to inform individuals. This year our goal is to increase the number of low income workers in Alaska who apply for and receive the EITC which can help many of our clients become self-sufficient. It is also a key element to helping keep people from needing on assistance.

In order to accomplish this goal, Field Services is currently working on the following strategies to help share information about the benefits of EITC:

- reaching out to families through schools,
- involving businesses and employers,
- promoting free tax filing assistance by VITA (Volunteer Income Tax Assistance),
- recruiting volunteers to provide free tax help,
- setting up a local EITC information on our Division's IVR, and
- using media advertisements on radio, movie theaters and bus transits statewide.

Starting today, February 5th, bus ads will start. Movie ads will begin running February 12th in Anchorage. This advertisement will run prior to a movie. Radio ads will begin in a couple of weeks. All ads will direct people to the DHSS website and our IVR number which will be changed so that option number one gives information about the EITC and directs caller to a VITA site. VITA sites are located all over the state to help people with income tax and are staffed by AARP volunteers. Low income families will be asked to talk to their case worker if they have questions.

In addition to the marketing strategies, training classes presented by the Internal Revenue Service will be offered to staff in the Anchorage and Fairbanks areas. This training is intended to help support and educate staff about this important tool. Supervisors are being sent information about the details on these trainings and will let you know when they need help and who should attend. For areas outside of Anchorage and Fairbanks, supervisors will be sent a PowerPoint presentation that will help you learn about the program.

Thousands of Alaskans qualified last year for the EITC but did not claim it on their tax return. One of the many benefits of EITC is that it makes work more attractive than welfare because it is designed to help low-income workers increase their financial stability. For those who qualify, the EITC can mean paying less tax, no tax, or even getting a refund on their federal income tax.

In the next few days, you will be receiving a packet from the Field Services Unit regarding the Earned Income Tax Credit. The packets will contain brochures, posters, and other promotional products for the EITC. Help us get the EITC message out to your customers. Please display the posters at your work site and distribute the brochures, magnets and pens.

From: Rogers, Mary Sent: Monday, February 05, 2001 5:10 PM Subject: Earned Income Tax Credit Campaign

When a family calls to discuss the EITC, please utilize the packets, discuss the benefits to applying for the EITC and make referrals to complete tax forms. Remember our overall goal is to increase the application of EITC. Let's do our part to ensure families are aware of this benefit to help them in their steps to become self-sufficient.

From: DPA Field Services
Sent: Monday, December 18, 2000 11:46 AM
To: ALL DPA Statewide Staff
Subject: CIRI Dividend Information

Broadcast to all DPA staff from Field Services and the Policy and Program Development Team

This weekend Cook Inlet Region, Incorporated (CIRI) announced that they will be distributing large dividend payments to their shareholders over the next couple of weeks. The dividends will be \$500 per share, or \$50,000 for 100 shares, to its nearly 7,000 shareholders.

CIRI will be holding a meeting this afternoon at Brother Francis shelter in Anchorage to further discuss their distribution plans. DPA representatives in Anchorage will be attending this meeting to provide information and answer questions about public assistance program policies. If they receive additional information about the distributions at this meeting, we will send another broadcast to keep you posted.

We also developed an informational flier explaining program reporting requirements and the special treatment of native dividend payments. CIRI will be mailing this flier to its shareholders as a means of informing them of our reporting requirements and how public assistance programs count the dividend payments. This flier is attached below for your information and use.

If you have any questions or need any policy guidance or clarification please email the appropriate policy sections at the following email addresses:

Medical Assistance: dma_pol@health.state.ak.us
Food Stamps: joan_chase@health.state.ak.us
All other programs: dpapolicy@health.state.ak.us



Information from Public Assistance about receiving money from a Native corporation

Native Corporation Distributions and Public Assistance

How does a Native Corporation dividend affect my eligibility?

Alaska Temporary Assistance (ATAP) and Adult Public Assistance (APA):

The first \$2000 received each year in Native dividends is not counted as income or toward your asset or resource limit if you save it. Any amount over \$2000 a year counts.

Both ATAP and APA payment amounts are based on the income you received two months before the benefit payment is made. This means that the Native dividend could reduce or stop your benefit payment two months after you receive it. It is very important that you talk to your Public Assistance caseworker and plan for a possible reduction to your cash benefit.

If you receive Temporary Assistance from Tanana Chiefs Corporation (TCC), Central Council of Tlingit and Haida (T&H), or Asso-

ciation of Village Council Presidents (AVCP), please contact them to find out how your Native dividend counts.

Medicaid and Denali KidCare

These programs calculate eligibility by looking ahead to see what your income is expected to be in the upcoming month. Native Corporation dividends usually are not announced far enough ahead of time to include them in the determination, so they are not counted for ongoing cases. If you are just applying, any amount of Native dividends that exceed \$2000 in a year will count as income in the month you receive it.

Any amount over the \$2000 you save will count toward the asset limit, if there is a asset test in the type of Medicaid you receive. Denali KidCare does not have an asset limit, most other types



of Medicaid, including long term care, do have an asset limit.

There are 'transfer of asset' penalties for ATAP, Medicaid, long-term care or home and community-based waivers. Giving away distributions over the \$2000 that's not counted could result in a period of ineligibility. Be sure to check with your Public Assistance caseworker if you receive these types of Medicaid. (continued)

Public Assistance Office Locations

Anchorage
269-6599

Juneau
465-3551

Fairbanks
451-2850

Ketchikan
225-2135

Sitka
747-8234

Kodiak
486-3783

Kenai
283-2900

Mat-Su
376-3903

Bethel
543-2686

Homer
235-6132

Nome
443-2237

Kotzebue
442-3451

Alaska Division of Public Assistance

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Website
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December 12, 2000

Continued...

Food Stamps, CAMA and Heating Assistance:

For the Food Stamp Program, Native corporation dividends are not counted as income. This means when you receive a Native dividend, it will not reduce your Food Stamp benefit. Native dividends are also not counted as a resource, as long as they are not mixed with other countable money, such as in a personal bank account. If Native dividends are mixed with other countable money, the entire balance of the

account may count as a resource after six months."

If you are going to save the money, it's best to keep it in a separate account so program staff will know to not count it.

The state's Heating Assistance Program (HAP) does not count Native dividends at all.

However, if you receive Energy Assistance from a Native organization, you'll need to check with them to find out if it counts.

The state's General Relief Assistance (GRA) and Chronic and Acute Medical Assistance (CAMA) both count Native dividends toward the income and asset limits.



How do I tell Public Assistance about my Native Dividend?

You can call or write to your local Public Assistance office to tell them when you received the distribution and how much it was.

Food Stamp recipients who submit a Monthly Report Form (MRF) can report getting the payment on their next monthly report.

All other recipients should

report within 10 days after receiving payments.

Public Assistance workers know the rules and will be happy to explain them. We encourage you to check with your worker before you spend the distribution money.

If you have received a large distribution, you may be

asked to explain how you intend to use the funds so that continued eligibility for assistance can be determined.

If you receive assistance from a Native organization, be sure to report and talk to them about their policies on Native Corporation dividends.

Will the way I spend my dividend effect my eligibility?

If you receive public assistance, there are some things to keep in mind when spending a dividend. We suggest that families decide what they want to do with their money and talk with their case worker before taking action. Saving all or part of the money may make a difference in eligibility.

So can buying things.

Temporary Assistance and Adult Public Assistance households receiving large amounts of money should make plans for paying their bills two months ahead, when they may not get a public assistance benefit.

Some items purchased with distribution money (like cars or boats) may make households ineligible for public assistance.

Other expenditures do not affect eligibility (like the purchase or equity paydown on a home, clothing, and basic household items).

There are also transfer of asset penalties for Medicaid recipients in nursing homes or on home and community-based waivers. Giving away distributions in excess of \$2,000 could result in a period of ineligibility for Medicaid.

From: DPA Field Services
Sent: Wednesday, December 06, 2000 3:14 PM
To: ALL DPA Statewide Staff
Subject: FW: ADDITIONAL LANGUAGE CODES FOR INTERPRETER SERVICE

We have received a list of the language codes for the contracted interpreter service. They are:

| <u>LANGUAGE</u> | <u>CODE</u> | <u>LANGUAGE</u> | <u>CODE</u> |
|-------------------|-------------|-------------------|-------------|
| Afrikaans | 701 | Macedonian | 775 |
| Albanian | 702 | Malaysian | 737 |
| Amharic | 91 | Mandarin | 97 |
| Arabic | 92 | Nepali | 741 |
| Armenian | 772 | Norwegian | 742 |
| Bengali | 706 | Papiamento | 743 |
| Bulgarian | 707 | Pashto | 98 |
| Burmese | 708 | Polish | 5 |
| Cambodian | 991 | Portuguese | 996 |
| Cantonese | 93 | Punjabi | 749 |
| Cebuano (Visayan) | 768 | Romanian | 750 |
| Creole (Haitian) | 780 | Russian | 997 |
| Croatian | 752 | Serbian | 752 |
| Czech | 710 | Sinhala | 754 |
| Danish | 711 | Slovak | 755 |
| Dari | 782 | Slovenian | 756 |
| Dutch | 713 | Somali | 757 |
| Estonian | 783 | Spanish | 1 |
| Farsi (Persian) | 94 | Swahili | 998 |
| French | 95 | Swedish | 761 |
| Fukanese | 715 | Tagalog | 762 |
| Georgian | 784 | Taiwanese | 763 |
| German | 4 | Tajik | 788 |
| Greek | 993 | Tamil | 729 |
| Gujarati | 738 | Thai | 992 |
| Haitian (Creole) | 780 | Tigrinya | 773 |
| Hebrew | 722 | Tshiluba | 760 |
| Hindi | 994 | Turkish | 764 |
| Hmong | 744 | Ukrainian | 765 |
| Hungarian | 724 | Urdu | 999 |
| Indonesian | 727 | Uzbek | 793 |
| Italian | 995 | Vietnamese | 2 |
| Japanese | 96 | Visayan (Cebuano) | 768 |
| Korean | 3 | Yoruba | 794 |
| Kurdish | 731 | Zulu | 770 |
| Lao | 732 | | |
| Lingala | 734 | | |

If you need a language that is not listed above please enter '0' in for the language code and you will

be directed to a Customer Service Representative who will connect you to the proper interpreter.

Thanks,
Margaret

STATE OF ALASKA

DEPT. OF HEALTH & SOCIAL SERVICES DIVISION OF PUBLIC ASSISTANCE

TONY KNOWLES, GOVERNOR

FIELD SERVICES

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June 6, 2000

To: All DPA Field Staff

From: Rebecca Eames
Chief of Field Services

Subj: On-line Case Notes

On-line case notes were a long time in coming and have greatly increased our ability to easily share critical case information. The CANO improves the coordination of services and saves time when multiple DPA staff need access to the same case. As with any new tool, kinks have to be worked out. SYSOPS has already made some great improvements and more are anticipated. One kink that became apparent immediately was the proliferation of unit and local office standardized CANO formats. Because of the frequency of case transfers, we determined that a statewide standard format was needed. A team of field users has developed this format.

The team decided to develop a series of standardized formats from which the user can select the appropriate one for the situation. There are six formats:

- Monthly Report Form/Med Review CANO
- Pre-Hearing Conference CANO
- Denali KidCare Initial Application CANO
- Food Stamp/CAMA/GRA Intake CANO
- APA Intake CANO
- ATAP/Family Medicaid Intake CANO

These new standardized CANO formats are to be used by all field staff statewide effective June 12, 2000. Please discontinue to use any locally developed CANO formats.

This is a good time for a reminder and clarification about CANO use. When the CANO was first implemented instructions were given to use it to record all contacts, actions, and information used in making case decisions, with the exception of extremely sensitive information. This expectation remains. A variety of manual tracking forms are in use in different offices. Some caseworkers use these instead of, or in addition to, recording the information in the CANO. The income tracking sheet in particular is viewed as instrumental in error prevention. Other documents however, need to be reviewed to determine their value and to ensure the requirements outlined in MAP 30-6 have been followed. We need to consider what is the best use of our time, keeping the division mission, guiding principles and program objectives in mind. Where multiple forms have been developed within the same region for the same purpose, they should be re-evaluated to determine if one good form is better than many perhaps mediocre forms. Whenever possible, we need to avoid redundancy and make use of automated tools available. Some examples of manual tracking practices which need to be re-evaluated at the regional level;

- Some caseworkers are using the manual ABAWD tracking sheet instead of, or in addition to the ABWD screen on EIS
- Some caseworkers use a shelter deduction tracking sheet
- Some use applications logs and phone logs

The following guidance is provided in regard to the use of the income tracking sheet:

If you use it, do not manually re-enter all the detailed information and calculations on the CANO. Either cut and paste the pertinent month's information on to the CANO under the section entitled : "Income (Continued)" or enter a summary of the total countable monthly income and the source in narrative format under the "Income" section. If you don't know how to cut and paste into EIS, call Terry Hamm for instructions.

ATAP/Family Medicaid Intake CANO

| <u>SUBJECT</u> | <u>ELEMENTS</u> |
|------------------------|---|
| RECORD TITLE | Program(s) (TA, FS, etc.); indicate whether application, recert, recycle, etc. |
| APP DATE: | Application Date |
| BSD: | Benefit Start Date |
| INTERVIEW DATE: | Date of caseworker or fee agent interview |
| R&R: | Rights and Responsibilities, Release of Info. and Fraud addressed |
| INTERFACES: | List all interfaces checked. (i.e. INGENS, SVES, NSTAR, DOL) |
| ALERTS: | Indicate whether alerts were checked and list pertinent information. |
| HHC: | Household Composition <ul style="list-style-type: none"> ▪ List relationship code of persons in the mandatory filing unit (MFU) ▪ Address felony convictions (if any) ▪ List any non-MFU persons in household |
| ROPD: | Record of Permanent Documents List permanent documents and how verified (i.e. VV, HC, CC, etc.) |
| CSED: | Child Support Enforcement Agency <ul style="list-style-type: none"> ▪ 1603 completed ▪ Does the client co-operate with CSEA ▪ If no, why not; list good cause reason, if applicable ▪ If exempt, provide reason |
| PRIOR SUPPORT: | <ul style="list-style-type: none"> ▪ How has the client been supporting the family; What has changed (job, income, resources, etc.) ▪ List number of months received TANF from other states |
| WORK REQ: | Work Requirements List exemptions, job quits, ABAWD status |
| RESOURCES: | Include all liquid and non-liquid resources <ul style="list-style-type: none"> ▪ Resource limits addressed |
| STUDENT STATUS: | <ul style="list-style-type: none"> ▪ List household members receiving school loans, scholarships, and grants ▪ List members working towards High School Diploma or GED |

| | |
|---|--|
| INCOME: | <p>In a narrative format, list:</p> <ul style="list-style-type: none"> ▪ Unearned income <ul style="list-style-type: none"> ▪ Source and amount ▪ Earned income <ul style="list-style-type: none"> ▪ Employer name and phone number ▪ How prospective income will be calculated ▪ Whether job is regular/temporary, part-time/full time, seasonal ▪ Self employment income <ul style="list-style-type: none"> ▪ State if seasonalized or annualized ▪ List income and expense totals |
| <p>INCOME (Continued)</p> <p>Include a chart with the following items:</p> <p><u>Name</u> <u>Pay period ends</u> <u>Pay date</u> <u>Gross Pay/Tips</u> <u>Hours</u> <u>Y-T-D</u> <u>Verif. Code</u></p> | |
| DEMH: | <ul style="list-style-type: none"> ▪ List each expense; how verified; if collateral verification, provide name and telephone number ▪ If shared expenses, explain ▪ List expenses out of household (i.e. child support payments, child care, etc.) |
| MED: | <ul style="list-style-type: none"> ▪ List TPL/TPR resource information ▪ Retro Med Requested (Mo. and Determination) |
| MRF: | 1 st MRF due |
| FSSP/JAS: | <ul style="list-style-type: none"> ▪ Was the FSSP completed; referred to case manager/work activities ▪ Was JAS involvement registered or opened |
| CC: | <p>Collateral Contacts</p> <ul style="list-style-type: none"> ▪ List name and phone number of collateral contacts ▪ State information verified |
| ACTION: | <ul style="list-style-type: none"> ▪ State what type of action taken (i.e. authorize, pend, deny) ▪ What program ▪ Which months ▪ Type of benefit (i.e. R for regular, I for immediate, E for expedite or A for advance) ▪ State certification through date, if applicable. ▪ State the notice numbers that were sent (i.e. W102) |

APA Intake CANO

| <u>SUBJECT</u> | <u>ELEMENTS</u> |
|----------------------------|--|
| <i>RECORD TITLE</i> | Program(s) (APA, FS, etc.); indicate whether application, recert, etc. |

| | |
|------------------------|--|
| APP DATE: | Application Date |
| BSD: | Benefit Start Date |
| INTERVIEW DATE: | Date of caseworker or fee agent interview |
| R&R: | Rights and Responsibilities, Release of Info. and Fraud addressed |
| INTERFACES: | List all interfaces checked. (i.e. INGENS, SVES, NSTAR, DOL) |
| ALERTS: | Indicate whether alerts were checked and list pertinent information |
| HHC: | Household Composition <ul style="list-style-type: none"> ▪ List relationship code of persons in the mandatory filing unit (MFU) ▪ Address felony convictions (if any) ▪ List any non-MFU persons in household |
| ROPD: | Record of Permanent Documents List permanent documents and how verified (i.e. VV, HC, CC, etc.) |
| DISABILITY DET: | <ul style="list-style-type: none"> ▪ Completed IA and AD2 forms or ▪ APA 4 and APA 5 forms |
| PRIOR SUPPORT: | <ul style="list-style-type: none"> ▪ How has the client been supporting the family; What has changed (job, income, resources, etc.) |
| RESOURCES: | <ul style="list-style-type: none"> ▪ Address resources and limits |
| WORK REQ: | Work Requirements List exemptions, job quits, ABAWD status |
| INCOME: | In a narrative format, list: <ul style="list-style-type: none"> ▪ Unearned income <ul style="list-style-type: none"> ▪ Source and amount ▪ Earned income <ul style="list-style-type: none"> ▪ Employer name and phone number ▪ How prospective income will be calculated ▪ Whether job is regular/temporary, part-time/full time, seasonal ▪ Self employment income |

| | |
|--|---|
| | <ul style="list-style-type: none"> ▪ List income and expense totals ▪ Food Stamps only-state if seasonalized or annualized |
| INCOME (Continued) <p>Include a chart with the following items:</p> <p><u>Name</u> <u>Pay period ends</u> <u>Pay date</u> <u>Gross Pay/Tips</u> <u>Hours</u> <u>Y-T-D</u> <u>Verif. Code</u></p> | |
| MED: | <ul style="list-style-type: none"> ▪ List TPL/TPR resource information ▪ Retro Med Requested (Mo. and Determination) ▪ QMB |
| MRF: | 1 st MRF due or exempt status |
| CC: | Collateral Contacts <ul style="list-style-type: none"> ▪ List name and phone number of collateral contacts ▪ State information verified |
| ACTION: | <ul style="list-style-type: none"> ▪ State what type of action taken (i.e. authorize, pend, deny) ▪ What program ▪ Which months ▪ Type of benefit (i.e. R for regular, I for immediate, E for expedite or A for advance) ▪ State certification through date ▪ State the notice numbers that were sent (i.e. W102) |

Food Stamp/CAMA/GRA Intake CANO

| <u>SUBJECT</u> | <u>ELEMENTS</u> |
|-----------------------|---|
| <i>RECORD TITLE</i> | Program(s) (FS, ME, etc.); indicate whether application, recert, etc. |

| | |
|------------------------|--|
| APP DATE: | Application Date |
| BSD: | Benefit Start Date |
| INTERVIEW DATE: | Date of caseworker or fee agent interview |
| R&R: | Rights and Responsibilities, Release of Info. and Fraud addressed |
| INTERFACES: | Collateral Contacts <ul style="list-style-type: none"> ▪ List name and phone number of collateral contacts ▪ State information verified |
| ALERTS: | List all interfaces checked. (i.e. INGENS, SVES, NSTAR, DOL) |
| HHC: | Household Composition <ul style="list-style-type: none"> ▪ List relationship code of persons in the mandatory filing unit (MFU) ▪ Address felony convictions (if any) ▪ List any non-MFU persons in household ▪ FS household ▪ SEU |
| ROPD: | Record of Permanent Documents List permanent documents and how verified (i.e. VV, HC, CC, etc.) |
| PRIOR SUPPORT: | <ul style="list-style-type: none"> • How has the client been supporting the family; What has changed (job, income, resources, etc.) |
| RESOURCES: | <ul style="list-style-type: none"> ▪ Address resources and limits |
| WORK REQ: | Work Requirements <ul style="list-style-type: none"> ▪ List exemptions, job quits, ABAWD status |
| INCOME: | In a narrative format, list: <ul style="list-style-type: none"> ▪ Unearned income <ul style="list-style-type: none"> ▪ Source and amount ▪ Earned income <ul style="list-style-type: none"> ▪ Employer name and phone number ▪ How prospective income will be calculated ▪ Whether job is regular/temporary, part-time/full time, seasonal |

| | |
|---|--|
| | <ul style="list-style-type: none"> ▪ Self employment income <ul style="list-style-type: none"> ▪ List income and expense totals ▪ Food Stamps only-state if seasonalized or annualized |
| INCOME (Continued) Include a chart with the following items: <u>Name</u> <u>Pay period ends</u> <u>Pay date</u> <u>Gross Pay/Tips</u> <u>Hours</u> <u>Y-T-D</u> <u>Verif. Code</u> | |
| DEMH: | <ul style="list-style-type: none"> ▪ List each expense; how verified; if collateral verification, provide name and telephone number ▪ If shared expenses, explain ▪ List expenses out of household (i.e. child support payments, child care, etc.) |
| MED: | <ul style="list-style-type: none"> ▪ List TPL/TPR resource information ▪ Retro Med Requested (Mo. and Determination) |
| MRF: | 1 st MRF due or exempt status |
| CC: | Indicate whether alerts were checked and list pertinent information <ul style="list-style-type: none"> ▪ State what type of action taken (i.e. authorize, pend, deny) ▪ What program ▪ Which months ▪ Type of benefit (i.e. R for regular, I for immediate, E for expedite or A for advance) ▪ State certification through date ▪ State the notice numbers that were sent (i.e. W102) |
| ACTION: | |

Pre-Hearing Conference CANO

| <u>SUBJECT</u> | <u>ELEMENTS</u> |
|------------------------|--|
| RECORD TITLE | Pre-Hearing Conference |
| REQUEST DATE: | <ol style="list-style-type: none"> 1. List date client requested fair hearing 2. List date of pre-hearing conference 3. List which program(s) fair hearing is requested for |
| ISSUE: | Summarize the issue chronologically |
| FACTS OF CASE: | <p>In narrative form, address each of the following:</p> <ol style="list-style-type: none"> 1. Why was an adverse action taken? 2. Cite all applicable manual sections. 3. Any policy clarification on issue? 4. Was correct notice sent? 5. Conciliation attempted by caseworker? 6. Was policy explained to client? 7. Does good cause apply? Why/Why not? 8. Were continued benefits addressed? |
| CLIENT CONTACT: | <ol style="list-style-type: none"> 1. Was conference by phone or in person? 2. If unable to contact client by phone, was notice sent to client? 3. Was client advised of their right to legal representation (i.e. AK Legal Services, Disability Law Center, etc.)? |
| STATUS: | <ol style="list-style-type: none"> 1. Was part of or all issue(s) resolved? 2. Will client receive continued benefits? 3. State date fair hearing request forwarded. |

Monthly Report Form/Med Review CANO

| <u>SUBJECT</u> | <u>ELEMENTS</u> |
|---------------------|---|
| RECORD TITLE | <ul style="list-style-type: none"> ▪ Enter "MRF, (benefit month), BENE..." (i.e. MRF 12/99 BENE) ▪ Add clarifying action when pertinent (i.e. MRF 12/99 BENE-add child) |
| DATE REC'D: | Date MRF received by district office |
| ETAL: | State ETAL reviewed and any significant information |
| CHANGES: | List any changes in household comp, resources, insurance, etc. |
| INCOME: | <ol style="list-style-type: none"> 1. Copy/paste from previous CANO or type in prospective income 2. Copy/paste from previous CANO or type in retrospective titles (i.e. pay period end, pay received, etc.) 3. Enter current retrospective amounts, dates, etc. |
| DEMH: | List expenses used in budget (i.e. child support, child care, rent, etc.) |
| ACTION: | <ul style="list-style-type: none"> ▪ State what type of action taken (i.e. authorize, incomplete, pend, deny) ▪ What program ▪ Which months ▪ State the notice numbers that were sent (i.e. W102) |

Denali KidCare Initial Application CANO

| SUBJECT | ELEMENTS |
|---|--|
| RECORD TITLE | Program(s) (FS, ME, etc.); indicate whether application, recert, etc. |
| APP DATE: | <ul style="list-style-type: none"> ▪ Application Received Date ▪ Benefit Start Date if different than the month of application |
| HHC: | Household Composition <ul style="list-style-type: none"> ▪ List relationship code of persons in the mandatory filing unit (MFU) ▪ List any non-MFU persons in household |
| ALERTS/INTERFACES: | List all interfaces checked. (i.e. INGENS, SVES, DOL, NSTAR) |
| ROPD: | <ul style="list-style-type: none"> ▪ Did client provide SSN, DOB, Citizenship info ▪ List any permanent documents provided |
| CSED: | <ul style="list-style-type: none"> ▪ Absent parent name provide or on APID ▪ Cooperating/Good Cause Requested/Exempt ▪ 1603 Requested |
| PRIOR SUPPORT: | How has applicant/family been supporting itself up to time of application? |
| INCOME : Include a chart with the following items: <u>Name</u> <u>Pay period ends</u> <u>Pay date</u> <u>Gross</u> <u>Pay/Tips</u> <u>Hours</u> <u>Y-T-D</u> <u>Verif. Code</u> | In a narrative format, list: <ul style="list-style-type: none"> ▪ Unearned income <ul style="list-style-type: none"> ▪ Source and amount ▪ Earned income <ul style="list-style-type: none"> ▪ Employer name and phone number ▪ How prospective income will be calculated ▪ Whether job is regular/temporary, part-time/full time, seasonal ▪ Self employment income <ul style="list-style-type: none"> ▪ List income and expense totals ▪ Indicate if seasonalized or annualized |
| DEDUCTIONS | <ul style="list-style-type: none"> ▪ Childcare Deductions including how verified |
| MED: | <ul style="list-style-type: none"> ▪ List TPL/TPR resource information ▪ Termination of Insurance Issues ▪ Retro Med Requested (Mo. and Determination) |
| ACTION: | <ul style="list-style-type: none"> ▪ State what type of action taken (i.e. authorize, pend, deny) ▪ Indicate actions taken on request for retro med if applicable ▪ State certification through date ▪ State the notice numbers that were sent (i.e. D101) |