BROADCAST TO ALL DPA STAFF AND DPA SERVICE PROVIDERS FROM THE POLICY AND PROGRAM DEVELOPMENT TEAM

At long last we are pleased to announce changes to Temporary Assistance policies for serving families with incapacitated adults. We believe these changes will provide you with new options to help prepare incapacitated adults for employment and other activities that will help their family reach self-sufficiency. The changes include:

- A revised, strength-based TA10 form
- A streamlined process for determining incapacity
- Changes to the definition of incapacity
- Family self-sufficiency planning for incapacitated adults

Attached are copies of the new Medical Examination & Capacity form (TA10) and guidelines for the immediate implementation of the new policy.

If you have any questions regarding this broadcast or the attached materials, please email the Policy and Program Development Team at dpapolicy@health.state.ak.us.

Assistant Regional Managers, please forward this information to your service providers.

---

Ron Kreher  
Work Services Program Officer  
Division of Public Assistance
Memorandum

Date: December 10, 2001

To: All DPA Staff and Case Management Service Providers

From: Ellie Fitzjarrald, Chief
Policy and Program Development Team

Subject: Temporary Assistance “Incap” Policy changes

This memorandum implements the long awaited changes to our Temporary Assistance policies for serving incapacitated adults. These policy changes reflect our renewed focus on employment as a goal for all families and are the result of feedback we received from DPA staff last year during the business analysis meetings.

The changes provide more options for helping individuals address challenges to employment and self-sufficiency and are intended to simplify the process for determining an individual’s incapacity. The changes take effect immediately and are as follows:

- New policy specifying that incapacity only exists if the individual is unable to work full-time;
- New policy requiring all incapacitated adults to develop and comply with the provisions of a Family Self-Sufficiency Plan;
- Revisions to the Medical Examination Form (TA #10), and;
- Dissolution of the Medical Review Team (MRT).

**New Definition of Incapacity**

An individual is considered incapacitated when they have a physical or mental condition that will last at least 30 days and the condition is severe enough to prevent the individual from working full-time. Incapacity may also exist if the condition discourages employers from hiring the individual or providing reasonable accommodations. The inability to do home chores or to pursue subsistence activities are no longer factors in determining incapacity.

**New FSSP Requirement**

Families with an incapacitated adult in the assistance unit are now required to develop, sign, and follow a Family Self-Sufficiency Plan. When developing the FSSP, remember that incapacitated individuals are still exempt from participating in “work” activities. However, they are now required to participate in self-sufficiency activities and activities that are directly related to preparing them to take part in work activities when they become mandatory participants, as noted in manual section 719-2.
FSSPs should focus on the individual’s ability to engage in self-sufficiency activities such as wellness plans, treatment activities, pursuit of disability benefits or other forms of financial support, stable housing, and other activities that enhance the well-being and quality of life of the individual and the family. Steps in the FSSP should also be designed to improve their capacity to engage in activities that prepare them for employment.

In some instances the individual’s condition may limit their participation, but not wholly prevent them from doing part-time employment, vocational training, or other job readiness activities. When developing an FSSP with an incapacitated adult, case managers must ensure the activities are tailored to the person’s capabilities and that the need for and availability of reasonable accommodations are considered.

**New TA #10 Form**
The revised Medical Examination and Capacity Form (TA #10) includes the new incapacity definition and removes the language asking about home chores and subsistence activities. It also makes it easier for medical professionals to furnish information about a person’s ability to engage in activities. The revised form is available on the DPA e-forms website at [http://dpaweb.hss.state.ak.us/e-forms/eformhome.htm](http://dpaweb.hss.state.ak.us/e-forms/eformhome.htm). The form should be printed as a two-sided document. **Please destroy or recycle any existing supplies of the old TA #10 form and begin using the 12/2001 version of the form when you receive this memo.**

**Medical Review Team**
The Medical Review Team (MRT) is discontinued. Eligibility Technicians already make the initial determination of incapacity based on the information provided on the TA #10. Now, they will also use the medical professional’s estimate of how long the condition is expected to last to schedule the review for a redetermination of incapacity. If necessary, the redetermination can be completed as part of the TA six-month review. Eligibility Technicians and case managers should collaborate to determine if more frequent medical reviews are necessary.

**Implementation**
A list of all Temporary Assistance families with an incapacitated adult will be distributed to regional managers today. Eligibility technicians and case managers need to review these cases to determine how the changes in policy affect families and take necessary action. The list provides the number of months each family has left on assistance. Cases closest to the 60-month limit should be reviewed first. Reviews should be conducted taking into consideration the scheduling of case staffings. **All cases that require an incapacity redetermination should be completed by March 31, 2002.**
Cases affected by new incapacity definition

1. Eligibility staff
   - Need to review cases to identify those affected by the change in the definition of incapacity. When an individual’s incapacity has been based solely on an inability to engage in home chores or subsistence activities, the incapacitated adult will need a new medical examination completed using the revised TA #10.

   Send notice W004 to the individual requesting a new TA #10, and allow sufficient time for the individual to schedule an appointment for an exam, if needed, and to return the form.

   Redetermine incapacity based on the information provided by the TA #10. Send a copy of the completed TA #10 to the case manager and notify them of the determination.

   If the individual no longer meets the definition of incapacity, send the new W790 “Change in Work Requirement” notice to the client.

1. Case Managers
   - Contact the incapacitated adult to schedule an appointment to develop the FSSP.

   FSSP development for incapacitated adults should take into consideration the nature and extent of the adult’s incapacity as documented on the TA #10.

Cases affected by the change in FSSP requirements

1. Eligibility staff:
   - Review cases to identify families previously exempt from the FSSP requirement because an adult in the household is incapacitated;
   - Send notice W789 “Self-Sufficiency Plan Needed” to advise the family of the change in policy and the need to schedule an appointment with their case manager;
   - Refer the family to a case manager, using existing office procedures; and
   - Provide a copy of the completed TA #10 to the case manager.

2. Case managers:
   - Contact the family to schedule an appointment; and
   - Work with the family to develop, or modify their FSSP, taking into consideration the incapacitated individuals’ ability to engage in appropriate activities.
For new applicants

1. Eligibility staff
   - Use the new TA #10 form in processing applications for Temporary Assistance families that include an adult with an incapacity; and
   - Refer the family to a case manager, using existing office procedures, for development of their Family Self-Sufficiency Plan; and
   - Provide a copy of the completed TA #10 to the case manager.

2. Case managers
   - Contact the family to schedule an appointment; and
   - Work with the family to develop their FSSP, taking into consideration the incapacitated individuals’ ability to engage in appropriate activities.

Notices
The new W789 “Self-Sufficiency Plan Needed” and W790 “Change in Work Requirement” notices, and the revised W004 Medical Information Needed notice are in EIS Production and available for immediate use.

Manual Changes
These changes will be included in Temporary Assistance manual change #5, which is scheduled for distribution later this month, and in the next Administrative Procedures Manual change. In the interim, please keep this document in your Temporary Assistance manual for reference.

We are also developing new work activity policies for individuals who are able to work part-time. However, we need to amend the Temporary Assistance regulations to make these changes and expect to have them in place by July 2002.

If you have any questions, comments or suggested improvements to the new policies, the new notices, or the new TA #10 form, please let us know by emailing us at: DPAPolicy@health.state.ak.us. We are also interested in hearing about any feedback or suggested improvements you receive from medical professionals.
Broadcast to All DPA Staff & DPA Service Providers  
From the Policy and Program Development Team

Draft 60-Month Time Limit Extension Criteria Guidance

Attached is draft policy guidance for determining extensions to the 60-month time limit. We are using this guidance for the extension review staffings now underway for families who are about to reach the time limit. It enhances the 60-month policy in Chapter 701 of the Temporary Assistance Manual. Feedback on the use of this draft guidance by the review teams will provide us with the information we need to continue to refine and clarify this policy. Once we have tested this policy in practice, we will issue a change to the Temporary Assistance manual that includes the enhanced policy.

If you have any questions, please contact the Policy and Program Development Team at DPAPolicy@health.state.ak.us.<mailto:DPAPolicy@health.state.ak.us>.

Assistant Regional Managers, please share this information with our service providers.
MEMORANDUM

Date: October 19, 2001

To: Field Managers
   60-Month Review Team Members

From: Ellie Fitzjarrald
      Chief of Policy and Program Development

Subject: 60-Month Extension Policy

This memo presents a draft of the enhanced Alaska Temporary Assistance Program policy for determining extensions to the 60-month time limit. This policy is intended as a companion to the case staffing procedures released last week. We are issuing in this format rather than a manual change so that the review teams for the “Early Families” can use it and give us feedback. We will use their comments to refine and clarify the policy prior to its inclusion in the Temporary Assistance Manual.

This is new territory for all of us – staff and families alike. As Jim Nordlund pointed out in his recent October 9 message to all staff, many families have moved off assistance and into jobs. The great majority of “long term” recipients have not been successful for the very reasons outlined in the extension policies. However, some do not have these challenges and their assistance will end. Our goal is to ensure that we have the best policy guidance possible to see the safety net is in place for our most vulnerable families and to ensure that we do not degrade the integrity of the time limit principle.

Please use this policy for making extension determinations over the next couple months. We are here to support you and encourage you to e-mail or call any one of us anytime for guidance, questions or just to discuss issues. The main phone line is 465-3347, or you may call Ellie at 465-5847, Carolyn at 465-2340, Angela at 465-3200, Bob at 465-5772, Shannon at 465-3382 or Jim Steele at 465-3201.
60-MONTH TIME LIMIT EXTENSION CRITERIA

A family is not eligible for Temporary Assistance if the family includes an adult who has received 60 months of assistance from the Temporary Assistance program or another state or Native TANF-funded program. The family will receive an extension to the 60-month time limit if they are unable to become self-supporting because of:

- Domestic violence;
- Physical or mental inability to perform gainful activity;
- Caring for a child or relative who is experiencing a disability; or
- Hardship.

An extension should be allowed when additional information or assessment is needed to determine if a family qualifies for a specific extension reason. The extension should be allowed for the period of time necessary to obtain the information or to perform the assessment. The extension will then be reviewed based on the information or assessment results when they are received, and a new determination will be made.

**Two-parent families**

The great majority of Temporary Assistance families subject to the 60-month limit are single parents or caretaker relatives, thus the criteria below will usually be applied to one parent or caretaker. In two-parent families, the family is considered to have reached the time limit if just one of the parents reaches the 60 months (these are cases where another parent may have joined the family during the time they were receiving assistance, so has not accumulated 60 months). For these families, each parent must meet at least one of the extension criteria below in order be extended. If a family with two parents contains a parent who is able-bodied and does not meet any of the extension reasons below, the family is not eligible for an extension.

**Extension Criteria**

1. **Domestic Violence**

   This extension is given if there is reason to believe a parent or caretaker is, or recently has been, the victim of domestic violence and the physical, mental, or emotional well being of the victim would be endangered by a strict application of the 60-month time limit.

   A victim of domestic violence will receive an extension to the 60-month time limit if it is determined that the individual is unable to gain or keep employment, participate in work activities, or achieve self-sufficiency as a result of domestic violence.

   The statement of the parent or caretaker is sufficient to establish that the individual is a victim of domestic violence if a written statement from a medical professional, domestic violence counselor, law enforcement representative or other source is not available.
Division of Public Assistance

If appropriate, the determination to allow an extension will be made in consultation with a domestic violence program. An FSSP will be developed that incorporates the recommendations of the staffing team, and that is designed to lead to work and, to the extent possible, and to alleviate the conditions that endanger the victim’s well-being.

It is difficult to gauge how far into the future an incident will impact the family, or at what point an individual became a victim. In determining a family’s need for an extension to the time limit because of domestic violence, it is important to assess the family’s total situation. The effects of domestic violence may make it difficult for a family to maintain employment or move toward self-sufficiency even after the immediate danger has passed. Parents or caretakers that have a history of domestic violence but who have not experienced a recent episode may be considered for an extension under the hardship criteria.

2. **Incapacity**

An extension is allowed if a parent or caretaker is physically or mentally unable to perform gainful activity.

An individual is considered to be physically or mentally unable to perform gainful activity if he or she:

a) is determined to be disabled by the Social Security Administration; or

b) has a physical or mental condition that, on the basis of competent medical testimony, is expected to last at least 30 days and is severe enough

- to prevent the individual from working at full time employment; or
- that potential employers refuse to hire the individual or refuse to provide a reasonable accommodation under the Americans with Disabilities Act.

Physical or mental inability to perform gainful activity is documented under #2 above using the TA-10 Medical Examination Form. (A revised version of the TA-10 will be issued shortly.)

A recent change in law now requires incapacitated caretakers to complete and follow an FSSP. Additional information on this change will be distributed soon. Under our extension policy, an appropriate FSSP should be developed that incorporates the recommendations of the staffing team, includes activities that are not precluded by the individual’s incapacity, and that are directed towards helping the family become self-supporting.

3. **Caring For A Child Or Relative Who Is Experiencing A Disability**

An extension is allowed if a parent or caretaker is unable to work or to participate in work activities because they are needed in the home to provide care for a child or relative who is experiencing a disability.
Division of Public Assistance

For a family to qualify for an extension under this criterion, all of the following conditions must be met:

- The person requiring care must be a dependent child or an adult who is related to the parent or caretaker within the fifth degree;

- The disability must be verified by a written statement from a physician or psychiatrist, or by other relevant documentation such as receipt of Social Security disability benefits or Supplemental Security Income; and

- The need for a level of care that prevents the parent or caretaker from working or participating in work activities must be supported by documentation from a physician or other licensed medical professional.

FSSPs developed with these parents or caretakers should incorporate the recommendations of the staffing team and should be directed toward helping the family develop the resources and skills that will allow them to become more independent of the Temporary Assistance program if appropriate.

4. Hardship

A family receives an extension for hardship when they experience circumstances outside of their control that prevent the family from reaching self-sufficiency AND the loss of Temporary Assistance benefits would result in conditions that threaten the health or safety of the family.

**Circumstances Outside of the Family’s Control**

Circumstances outside of a family’s control may include, but are not limited to:

- A specific catastrophic event meeting the criteria for a formal disaster declaration under state and federal laws that impacts the family; or

- An adult in the family has a documented functional impairment that interferes with their ability or potential to earn a wage sufficient to support the family.

A family experiencing circumstances outside of their control that prevent them from reaching self-sufficiency must be taking appropriate action to work towards self-sufficiency. If a family is taking appropriate action and is still unable to become self-sufficient, they are considered to be experiencing circumstances outside their control. A family demonstrates that they are taking appropriate action by developing and following plans to become self-supporting, participating in activities towards that goal, and working to resolve problems that interfere with their plans and activities.
Functional Impairment:

A functional impairment is a condition in which the individual has limited capability for attaining employment at a level that allows the family to be self-sufficient. A functional impairment may be documented by work history that shows limited earning potential, history of the types of work activities participated in and attempted, information from screenings and formal assessments, or documentation of a medical or mental health condition provided by a medical professional. Indicators of functional impairment include:

- The individual’s work history or participation in work activities shows that he/she has been unable to obtain, retain or advance in employment at a level that allows the family to be self-supporting.

- The individual has a history of regular full-time employment, but is unable to support his/her family at the current wage or to advance in employment enough to be self-supporting.

- Screenings and assessments or medical documentation that provide additional information about problems and conditions that are limiting the capability for self-sufficiency.

Some types of functional impairment are:

- Difficulty performing specific tasks or in learning skills that are required in a broad range of jobs.

- Inability to be employed or to pursue additional or higher level employment due to entering rehabilitation or a treatment program for mental or physical health or substance abuse.

- Learning disability which affects the potential for employment and which the individual is working to accommodate.

- Limited English proficiency which affects the potential for employment and which the individual is working to overcome.

- Limited capacity for earnings as shown by the capability for employment only through a supported work environment.

Conditions that Threaten the Health or Safety of the Family

The loss of Temporary Assistance benefits would result in conditions that threaten the health or safety of the family when the family:

- Will not have sufficient income or resources to provide for essential needs, and

- Does not have access to support from any other source to meet those needs.
Families facing conditions that threaten their health or safety include:

- The family cannot provide for housing, food, transportation, child care or other essential needs while seeking or continuing employment, or pursuing other plans for self-sufficiency.

- The family will be unable to stay together if benefits are ended.

- Family reunification plans underway with Division of Family and Youth Services would be disrupted and it is determined that a child would likely be removed from the home and placed into emergency shelter or foster care if assistance was ended.

**Making the Determination**

The extension review staffing team should use prudent judgment and the best information available in making the determination that a family suffers from hardship. Determinations will be made based on the individual family’s situation. The team will review how the specific family is impacted by circumstances outside of their control and whether conditions exist that will threaten this family’s health or safety if benefits are discontinued.

Do not base a determination on inability to perform one particular job or work activity, or on the lack of jobs in the local area. The determination should be based on inability to perform a broad range of jobs.

Families may meet the hardship criteria for a time limit extension even if they have incurred a penalty for non-compliance with the Family Self-Sufficiency Plan or non-participation in work activities, as long as they are complying at the time they are considered for an extension.

**Compliance with Family Self-Sufficiency Plan While on Extension**

The family must continue to develop and follow a Family Self-Sufficiency Plan (FSSP) while they are receiving an extension to the 60-month time limit. The activities incorporated into the FSSP will include recommendations developed by the time limit review staffing.

- For families that receive an extension based on domestic violence, incapacity of a parent or caretaker, or the need for the parent or caretaker to care for a child or adult who is experiencing a disability, the family may be subject to a penalty if they do not fulfill the FSSP requirement.

- For families that receive an extension based on hardship, developing and complying with an FSSP is a way to demonstrate that they are experiencing circumstances outside their control. If this requirement is not met, the family may be denied an extension or the extension may be ended.
BROADCAST TO ALL DPA STAFF
FROM THE POLICY AND PROGRAM DEVELOPMENT TEAM

ProBudgeting Processing Details

Now that prospective budgeting has been in place for a few weeks, we have identified several areas where auto-issuance of benefits does not recognize case changes that must be acted on. While we do not have solutions to all of these problems, we want you to know that they have been identified and that System Operations and the policy units are working on solutions.

Refuse Cash: EIS currently counts the amount of a refused Temporary Assistance and APA grant in calculating the Food Stamp allotment. As stated in an earlier broadcast, please continue to authorize the food stamp allotment first, and then authorize the Temporary Assistance or APA grant. A work request has been submitted, and SysOps is moving ahead with a permanent solution.

Temporary Assistance Earned Income Disregard Counter: The Temporary Assistance earned income disregard decreases after each 12 months of earned income reported by a client. EIS does not automatically change the benefit amount when an individual has used all 12 months at a particular disregard level. A work request has been submitted to have EIS generate an alert when the thresholds are reached.

Until that work request is completed, the change in the disregard amount will be made when the case next requires action, or at the next Temporary Assistance review. No corrective action is necessary in these circumstances.

When the work request is completed, case workers will need to respond to the alerts by manually authorizing the next month’s Temporary Assistance benefits. If a Food Stamp case is attached, the case worker will also have to authorize the following month’s food stamp allotment to reflect the changed Temporary Assistance grant.

Beginning and Ending Recoupments: EIS automatically changes Temporary Assistance and APA benefits when a recoupment begins or ends. Federal Food Stamp regulations require a recalculation of the Food Stamp allotment to account for this change in the Temporary Assistance or APA grant. A work request has been submitted to have EIS generate an alert when a Temporary Assistance or APA recoupment begins or ends. The caseworker will have to manually authorize the following month’s benefits to ensure that the food stamp allotment is correct.

Until the work request is completed, correct the food stamp allotment when the case next requires action, or at the next Food Stamp recertification. Complete a claim determination or issue a supplemental allotment as required.

If you have any questions, email a member of the Policy and Program Development Team at dpapolicy@health.state.ak.us for Temporary Assistance and APA questions, or Joan Chase at joan_chase@health.state.ak.us for Food Stamp questions.
This broadcast updates the instructions you were given on September 25, 2001, asking you not to initialize cases beyond the current system month. That broadcast was based on our concern that cases initialized beyond the current system month would not be updated by automated mass change jobs, and might not receive some system-generated alerts.

Now, case workers may initialize and authorize into the benefit month of December if it is necessary to process a reported change within the 10 days specified in policy. For Temporary Assistance, Food Stamps, and APA the first mass change under prospective budgeting will be for the benefit month of January. Please remember that initializing cases into December may cause the case to miss system-generated alerts.

No Temporary Assistance, Food Stamp or APA cases should be initialized into the benefit month of January until after rollover is completed on November 30, 2001.

We have not identified any mass changes that will affect Medicaid programs. Medicaid cases can be initialized into future months if necessary. This will occur primarily on Transitional Medicaid cases, where it is necessary to initialize and authorize future months. It may also occur in cases where a Medicaid recipient needs coupons for future months to accommodate travel.

If you have any questions, email a member of the Policy and Program Development Team at dpapolicy@health.state.ak.us for Temporary Assistance and APA questions, or Joan Chase at joan_chase@health.state.ak.us for Food Stamp questions.
From: Chase, Joan
Sent: Monday, October 15, 2001 8:40 AM
To: ALL DPA Statewide Staff
Subject: Military Household Changes

BROADCAST TO ALL STAFF
From the Food Stamp Policy Unit and the Program & Policy Development Team

The deployment of military servicemen and women in response to the terrorists attacks has brought disruptions to many families. Active duty personnel, reservists and National guardsmen and women are being called to serve, and most will be required to leave home. We are providing a brief summary of policy to help you process changes reported by these households.

INCOME

Families are required to report when a member leaves the home, including when a serviceman or woman leaves to join his or her military unit.
- For Food Stamps, the individual is removed from the household if anticipated to be absent for more than one calendar month. Any part of the absent military person's earnings made available to the family will count as unearned income to the family. This may include paychecks deposited into joint bank accounts or money sent by the military person directly to the family.
- For Temporary Assistance, the individual is considered temporarily absent for an allowable purpose. The military person's earnings and other income continue to count.

RESOURCES

- For Food Stamps, any of the military person's resources to which the family has access will count as resources to the family.
- For Temporary Assistance, the military's person's resources continue to count.

HOUSEHOLD EXPENSES

In some cases, the military person may continue to pay the household's rent directly to the landlord.
- For Food Stamps, this payment is excluded as income, and the shelter expense is not allowed as a deduction.
- For Temporary Assistance, the shelter expenses are considered to be paid by a household member, and are included in the calculation of the family's shelter allowance.

EFFECTIVE DATE OF CHANGE

The household will be required to report the military person's departure within ten days, and the caseworker has ten days to act on the change.
- Changes that result in an increased benefit are effective the month following the receipt of the report of change. In most cases, this will require the caseworker to issue a supplemental benefit to the family.
- Changes that result in a decreased benefit to the household are effective the month following adverse action notice.

ADDITIONAL POLICY GUIDANCE

- For information on household composition and mandatory filing unit, refer to FS Manual Section 602-1A and
Temporary Assistance Manual Section 711-2.

- For information on allowable absences lasting more than a month, refer to Temporary Assistance Manual Section 711-7.
- For information on processing changes and determining the effective date of change, refer to FS Manual Section 604-3 and TA Manual Section 790-2.
- For information on vendor payments, refer to FS Manual Section 602-3D(3).

If you have Food Stamp Program policy questions, contact Joan Chase at Joan_Chase@health.state.ak.us. Direct Temporary Assistance policy questions to DPAPolicy@health.state.ak.us.
Broadcast Message to All DPA Staff
from Ellie Fitzjarrald, Chief of Policy

I am pleased to announce Stacy Goade is our new Child Care Coordinator. Stacy has a wealth of experience in the child care field, both in front-line service delivery and in an administrative capacity. She has worked as a Program Director and in child care licensing, and she has a real passion for children.

Stacy will officially start with DPA on October 29, 2001, but you may have the opportunity to meet her sooner as she will be doing some cross training with Mary Lorence over the next couple of weeks. Mary’s last day with DPA is November 1, 2001.
From: DPA Policy
Sent: Monday, October 01, 2001 4:45 PM
To: ALL DPA Statewide Staff
Cc: ALL DPA State Associates
Subject: PFD Hold Harmless Time Is Near

Broadcast to All Staff
From the Food Stamp Policy, DMA Policy, and the Policy & Program Development Teams

Subject: PFD Hold Harmless Time Is Near

The new PFD Hold Harmless Manual are in the mail. The PFD-1 forms and the PFD flyer will be mailed to all current public assistance cases this week. Supplies of these forms and flyers will be sent to all offices next week.

There are no new PFD Hold Harmless Program policies or EIS procedures this year. However, with implementation of prospective budgeting, fewer food stamp cases will be placed in PFD hold harmless status. Cases that receive PFD hold harmless benefits will be processed the same as in past years. Any PFD hold harmless benefits that are issued to replace food stamps will be paid by check, rather than being put on the household's Alaska Quest card.

The PFD Hold Harmless Manual has been revised to remove monthly reporting and retrospective budgeting information. In addition, we removed much of the Food Stamp Program policy related to PFD Hold Harmless. This food stamp policy is contained in the Alaska Food Stamp Manual at section 605-7.

Permanent Fund Dividends can be a significant asset to families. Case workers and case managers, whether service providers or DPA employees, should work with individuals to help them identify ways to use their PFDs to move their family toward employment and self-sufficiency, or an improved quality of life. This is an opportunity to help families establish specific goals, such as securing reliable transportation or paying off old debts. However, it's also important to keep in mind that some individuals may not get the PFD because of a garnishment. Our Temporary Assistance Leavers Study completed this year found 37% of Temporary Assistance recipients have their PFD garnisheed.

If you have any questions, please email a member of the Policy & Program Development Team at dpapolicy@health.state.ak.us <mailto:dpapolicy@health.state.ak.us> (for Temporary Assistance, APA, GRA and SSI policy), Joan Chase at Joan_Chase@health.state.ak.us <mailto:Joan_Chase@health.state.ak.us> (for Food Stamp policy questions), or the Division of Medical Assistance policy unit at DMAPOLicy@health.state.ak.us <mailto:DMAPOLicy@health.state.ak.us> (for Medicaid and CAMA questions).
Broadcast to All DPA Staff
From System Operations and the ProBudgeting Policy Team

Subject: Working beyond current system month

Since the implementation of prospective budgeting, several questions have come up about initializing and authorizing cases beyond current system month. For now, we are asking that field staff only work cases through the current system month and no further.

The system design for prospective budgeting works best when cases are initialized and authorized into the current system month. This allows correct auto-issuance of benefits and makes system corrections easier and less time consuming.

In addition, we will be implementing a mass change feature for Temporary Assistance and Food Stamps in the near future. Like the APA mass change job, this new EIS function will automatically recalculate benefits in situations such as the annual COLA change in the Temporary Assistance need standards. These mass change jobs cannot make the automatic adjustments if a case is not in the current system month, and programs sitting too far in the future will miss system-generated alerts and be at risk for possible payment errors.

Working cases only as far as the current system month does present some problems for field staff when households report changes that are effective for a future benefit month. When this happens please set an alert and work the reported change after the system rolls over into the affected month. Although this will require you to touch the case twice, that disadvantage will be outweighed by the smoother functioning of the system as a whole.

Thank you.
Broadcast to All DPA Statewide Staff  
From the ProBudgeting 2001 Policy Team  

ProBudgeting Manual Change Distribution  

Beginning Monday, August 27 we will be mailing the manual changes for prospective budgeting and change reporting. Temporary Assistance Manual Change #4 will be the first document distributed, followed by APA Manual Change #3 and Food Stamp Manual Change #6.

The changes we are making to the PFD Hold Harmless Manual will be distributed in mid-September, with manual changes for the Medical Assistance and Administrative Procedures manuals to follow.

If you do not receive your Temporary Assistance, Food Stamp and Adult Public Assistance manual changes by the end of the first week of September, please contact Anna Hotchkiss at 465-3360 or email her at anna_hotchkiss@health.state.ak.us
BROADCAST TO ALL DPA STAFF
From the Policy and Program Development Team
and the Food Stamp Policy Unit

Subject: Transition to Prospective Budgeting and Change Reporting

Implementation of prospective budgeting and change reporting begins today, August 1, 2001. This means that households applying from now on will be prospectively budgeted, subject to change reporting requirements, and no longer required to submit Monthly Report Forms (MRF’s).

The first steps in this conversion are to begin applying new procedures for applications received on or after August 1, 2001. These steps include informing applicants of the new reporting requirements and coding EIS so MRF’s are not sent to them.

Informing Applicants

Since August applicants will not be subject to monthly reporting requirements, we must inform them of the new change reporting requirements.

Attached to this broadcast are electronic copies of the new Reporting Changes (Gen 55) form and the new Reporting Changes (Gen 93) pamphlet. Please print these forms and provide copies to August applicants. We will provide each office with a supply of these forms as soon as they are available from the printer, approximately August 15.

Note: Individuals who applied in July, but are not interviewed until August remain subject to the MRF and retrospective budget requirements and, if eligible, will be converted with other ongoing cases in September for October benefits.

Coding EIS

Households that apply in August will never be placed in retrospective budgeting. Because these cases will not be budgeted retrospectively, they will not be required to submit a MRF in September.

To insure that August applicants do not receive a MRF with the August mailing, the "First MMR Required in Month of:" field on the MMHR screen must be set to 10/01.

Most DPA staff will be trained within the next three weeks and have by now received a Prospective Budget Training Pre-packet or viewed it on the web at http://dpa.liminis.net/probudget/download/training/TrainingPrepacket.pdf. The Pre-packet includes more information about the new policies and a schedule of implementation activities.

If you have any questions, please contact the Policy and Program Development Team at 465-3347 or email dpapolicy@health.state.ak.us
Use this form to report changes in your household or family. Public Assistance needs to know about these changes so we can determine your eligibility and benefit amount. For information on types of changes to report and the time frame for reporting, ask for the pamphlet called “Reporting Changes.” You can use this form for all programs.

Give this form to DPA within 10 days or 5 days if a child leaves home. Please print.

Your Name: _______________________________ Social Security #: ____________________________

Which type of Public Assistance program benefits do you receive?

Alaska Temporary Assistance  Food Stamps  Adult Public Assistance  Medicaid

1) Did you have a change in Employment?

Whose employment in your household changed? _____________________________________________

Date of the change: _______ Job ended  Job Started  Job is Full-Time  Job is Part-Time

New Job - Employer Name: __________________________________________  Phone Number: __________

Rate of Pay: $ _______ per hour OR $ _______ per month  How often paid? _____ times per month When? ______

Do you expect the job to continue at this rate for the next couple months?  Yes  No

If no, please explain: ________________________________________________________________

2) Did you have a change in Other Income? (child support, unemployment, Social Security, etc.)

Source: ______________________  Amount: $ _______  When _______  Who receives? __________

3) Did You Get a Vehicle?

Type of vehicle: __________________________________________  Approximate Value: $ _______

What is it used for? (family transportation, to look or go to work, etc.) ___ __________________________

When did you get it? _______ Did you sell a vehicle(s) - if so, please list: ________________________

4) Did You Have a Change in Your Medical Coverage? (only for Medical Assistance recipients)

Did anyone start or stop medical insurance coverage? If so, list who, what type of coverage and effective date:

_____________________________________________________________

Did anyone become pregnant? If so, who and when is she due?: ____________________________
5) Did you Move?

Home Address: ___________________________ Phone: ____________
Mailing Address: ___________________________

Date of move: _______ New rent amount (attach verification):$ _______ Is heat included in rent? Yes No
Expected household expenses: (heat, electricity, phone, etc.): __________________________________________

6) Did Someone Move In or Out of your Household?

Who? ___________________________ In or out? _______ When? ____________

Relationship to you ___________________________ Does person buy and eat food with you? Yes No

Do you want them included in your benefits? Yes No If yes, provide the following information:

Social Security # ____________ Their income (source and amount) ________________________________

US Citizen? Yes No Legal Immigrant? Yes No

7) Did You Have a Change in Your Expenses?

This is for expenses other than housing, such as child care, child support payments, or medicine/medical care.

Type of expense: ___________________________ Date of Change: ____________ Monthly amount:$ ____________

Who pays? ___________________________

Who is it for? ___________________________

8) Any Other Changes You Want to Report? (attach another paper if needed)

________________________________________

________________________________________

________________________________________

9) Please Sign Below

I believe the information I entered on this form is correct and complete to the best of my knowledge. I understand that giving false information on this form or holding back information may result in penalty. I understand that I may be required to provide proof of the changes I reported and agree to get proof if necessary.

Your Signature: ___________________________ Date: ____________

Be aware: A person who intentionally breaks Food Stamp Program rules will be disqualified for one year for the first offense, two years for the second, and permanently for the third. A person can also be fined up to $250,000, imprisoned up to 20 years or both.

If you believe any action of the Division of Public Assistance is incorrect, improper or illegal, you may request a Fair Hearing by making the request to any Division of Public Assistance employee.
How to Report

We use the information you give us to decide the amount of your public assistance benefits. To be sure you receive the right amount, you must report a change as soon as you know about it.

You can report by:

- Stopping in the office
- Calling your case worker
- Filling out and mailing the "Reporting Changes" form

Report changes right away or you might get the wrong benefit amount. If you do not report changes or information you report is untrue, you could be charged with a crime.

When to Report

If you receive Food Stamps, Medicaid, or Adult Public Assistance, you must report changes within 10 days from when you know about them.

If you receive Alaska Temporary Assistance, you must report within 5 days if a child moves out of your home. Report all other changes within 10 days from when you know about them.

We provide opportunities for Alaskans in need to achieve an improved quality of life.
Address
Report changes in your mailing address, where you live, and your phone number. If you move, report changes in your rent and utilities, or we cannot use your new shelter costs when we calculate your benefits.

Who Lives With You
Tell us if you or anyone in your household:
- Becomes pregnant
- Moves into or out of your home
- Gets married, separated, or divorced

Vehicles
Let us know when you or anyone in your household gets a vehicle.

Employment
Let us know if you or anyone in your household:
- Gets a pay raise
- Starts or ends a job
- Starts or ends fishing
- Starts or ends a business
- Gets a decrease in rate of pay
- Change job status from part time to full time, or from full time to part time

Other Income
Tell us if you or anyone in your household’s unearned income starts, stops, or changes by more than $25. Some unearned income types are:
- Inheritance
- Child Support
- Insurance Settlements
- Unemployment Benefits
- Worker’s Compensation
- Social Security and Veteran’s Benefits

Child Support
Let us know if the amount you must pay for child support changes.

Money
Tell us if the money you and others in your household have in cash and bank accounts totals more than $2,000.

If you have Medical Assistance or Adult Public Assistance
We need to know when you or anyone in your household starts or ends medical insurance if you receive medical assistance.
If you receive Adult Public Assistance or related Medicaid, you must report all changes in employment and income.
Broadcast to All DPA Managers and All DPA Field Supervisors

From the Policy and Program Development Team

Last Friday, July 13, we published our proposed Temporary Assistance and Adult Public Assistance regulation changes for public comment. The public comment period runs 30 days, beginning July 13, 2001 and ending August 13, 2001.

The public notices are running in newspapers statewide and on the Alaska on-line public notice system soliciting comment. The public notices and the proposed regulations are also published on our DPA website at: <http://www.hss.state.ak.us/htmlstuf/pubassis/table.htm>

Hearings to receive comments on these regulations are scheduled on August 6th, 7th, and 8th. Information about the time and locations for the hearings are included in the public notices. We have also mailed a letter to stakeholders inviting their comments on our proposals and provide a matrix that outlines the major changes and a list of the hearing dates, times, and locations by community. These documents are attached for your reference.

Please share this information with your staff. If you receive requests for the proposed regulations, please access the information from our web site, print it, and give it to the interested person. You may also want to keep a copy of the public notices and the proposed regulations in your office for convenience in case you receive additional requests.

These regulatory changes are a necessary part of implementing prospective budgeting and change reporting. They also include other changes such as the Temporary Assistance policy alignments we will be making with the Food Stamp Program on October 1 and a new transfer of resource penalty for APA.

Thanks very much for your help on this. Let us know if you have any questions about this message or about the proposed regulations.
July 13, 2001

Dear Alaskan:

We are proposing to make a number of changes in the Alaska Temporary Assistance and Adult Public Assistance programs. The primary purposes for these changes is to simplify client reporting requirements, streamline program access, and implement new budgeting methods that support families in their self-sufficiency endeavors.

We are interested in receiving your feedback on the proposed changes. Enclosed for reference is an outline that highlights many of these changes. In addition, the ATAP and APA regulations are also now available for public review and comment. Copies of the proposed regulations are available upon written request to:

Division of Public Assistance  
P.O. Box 110640  
Juneau, Alaska 99811-0640  
Attn: Sandra Ruiz

You can also request copies of the proposed regulations by calling (907) 465-3347, or you may access them through our Division web page at http://www.hss.state.ak.us/dpa, or asking for a copy at any Public Assistance Office.

Please send written comment on the proposed regulations to the address above, or provide oral comments at one of the public hearings. A list of the scheduled public hearings is enclosed. The public comment period will be open through August 13, 2001.

Thank you for your time and help. Your interest and involvement in serving needy Alaskans and promoting welfare-to-work is essential to us.

Sincerely,

_____________________________  ______________________________
Karen Perdue, Commissioner     Jim Nordlund, Director
Department of Health and Social Services     Division of Public Assistance
## PUBLIC HEARING SCHEDULE

**PROPOSED CHANGES IN**

**ALASKA TEMPORARY ASSISTANCE PROGRAM**

**REGULATIONS**

<table>
<thead>
<tr>
<th>DATE</th>
<th>LOCATION</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 6, 2001 Monday</td>
<td>Teleconference Hearing at the Legislative Information Offices in: Cordova Juneau Ketchikan Kenai Kodiak Homer Petersburg Seward Sitka Valdez Wrangell</td>
<td>9:00 a.m. - 12:00 a.m.</td>
</tr>
<tr>
<td>August 6, 2001 Monday</td>
<td>Teleconference Hearing at the Legislative Information Offices in: Barrow Bethel Delta Junction Dillingham Fairbanks Glenallen Kotzebue Mat-Su Nome</td>
<td>1:00 p.m. - 4:00 p.m.</td>
</tr>
<tr>
<td>August 7, 2001 Tuesday</td>
<td>Anchorage Egan Center Board Room A 555 W. 5th Avenue</td>
<td>9:00 a.m. - 12:00 a.m.</td>
</tr>
<tr>
<td>DATE</td>
<td>LOCATION</td>
<td>TIME</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>August 7, 2001</td>
<td>Anchorage</td>
<td>1:00 p.m. and 4:00 p.m.</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Egan Center</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Board Room A</td>
<td></td>
</tr>
<tr>
<td></td>
<td>555 W. 5th Avenue</td>
<td></td>
</tr>
<tr>
<td>August 8, 2001</td>
<td>Juneau</td>
<td>11:00 a.m. to 1:00 p.m.</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Health and Social Services Building</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Room 509</td>
<td></td>
</tr>
<tr>
<td></td>
<td>350 Main Street</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Persons outside of Juneau who wish to attend this public hearing may do so by teleconference. To participate by teleconference, you must call 1-800-315-6338 and enter access code APA#</td>
<td></td>
</tr>
</tbody>
</table>
## OVERVIEW OF PROPOSED TEMPORARY ASSISTANCE REGULATION CHANGES

### 7/11/01

<table>
<thead>
<tr>
<th>Regulation Section</th>
<th>Subject</th>
<th>Current Policy</th>
<th>New Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>45.235</td>
<td>Incapacity</td>
<td>Individual may be considered incapacitated if unable to work full time, unable to perform normal household chores, or unable to engage in subsistence activities.</td>
<td>An individual will be considered incapacitated only if they are unable to work full-time. This links incapacity directly with an individual's ability to work, and does not take into account their ability to do household chores and subsistence activities.</td>
</tr>
<tr>
<td>45.270</td>
<td>Family Reporting</td>
<td>Reporting requirements built around monthly paper report.</td>
<td>As part of the new budgeting method and elimination of the monthly report, families must report changes within 10 days of when they occur. The number and type of changes a family must report are also simplified.</td>
</tr>
<tr>
<td>45.277</td>
<td>Periodic Redeterminations</td>
<td>No current policy for periodic reviews of eligibility.</td>
<td>A full redetermination of eligibility will occur at least once a year. Not every review will require a family to come into the office for a face-to-face interview. When an interview is needed it may be possible to complete it over the phone.</td>
</tr>
<tr>
<td>Code</td>
<td>Section</td>
<td>Description</td>
<td>Notes</td>
</tr>
<tr>
<td>--------</td>
<td>-----------</td>
<td>-----------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>45.280</td>
<td>Resource Limit</td>
<td>$1,000 limit on countable resources.</td>
<td>Increase the resource limit to $2,000, $3,000 if household includes someone 60 or older. This aligns Temporary Assistance and Food Stamp policy, and better situates families for their transition off of assistance.</td>
</tr>
<tr>
<td>45.300</td>
<td>Exempt Resources</td>
<td>DPA provides conditional benefits if family is attempting to sell property that would cause ineligibility; family is required to repay benefits if property is sold.</td>
<td>Continues to exempt property that is for sale, but eliminates the repayment requirement. This was not a cost effective policy, and seldom resulted in payment recovery. The change also aligns Temporary Assistance and Food Stamp policy.</td>
</tr>
<tr>
<td>45.360</td>
<td>Prior Month Budgeting</td>
<td>Temporary Assistance eligibility and benefits are based on income and expenses from a previous month.</td>
<td>These two changes implement a new budgeting method. Benefits will be based on the family’s expected income and expenses instead of two months in the past. This allows families too more easily budget their income and expenses. Benefit amounts will better coordinated with the family’s actual circumstances, and it will eliminate the constant fluctuation in benefits most families experience under prior-month budgeting.</td>
</tr>
<tr>
<td>45.425</td>
<td>Best Estimate of Income</td>
<td>Estimate of income is based on actual expected receipt.</td>
<td></td>
</tr>
<tr>
<td>Code</td>
<td>Topic</td>
<td>Description</td>
<td>Notes</td>
</tr>
<tr>
<td>--------</td>
<td>-------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>45.380</td>
<td>Exempt Income</td>
<td>Exempts gifts up to $30 in a three-month period; no exclusion for charitable contributions from private non-profit organizations</td>
<td>Gifts will be counted as income if they can be anticipated. Up to $300 in charitable contributions from private non-profit organizations are exempt.</td>
</tr>
<tr>
<td>45.430</td>
<td>Suspension</td>
<td>A family must submit a new application if they are ineligible in the month after they apply.</td>
<td>Expands the suspension policy to allow suspension of the month following an application. This eliminates the need for the family to file another application to receive benefits.</td>
</tr>
<tr>
<td>45.475</td>
<td>Child Student Earned Income</td>
<td>Exempts or counts the earnings of a dependent child's based on source, number of months earnings have been received, etc.</td>
<td>Exempts all earned income of dependent child who is enrolled in school at least half-time. This aligns Temporary Assistance and Food Stamp policy.</td>
</tr>
<tr>
<td>45.480</td>
<td>Earned Income Deductions</td>
<td>Specifies the deductions that are allowed from earned income for determining eligibility and benefits.</td>
<td>Adds a new income deduction for child support payments. This deduction will be allowed from earned or unearned income. This policy encourages parents to provide needed support for their children who don't live with them. It will also align Temporary Assistance and Food Stamp policy</td>
</tr>
<tr>
<td>45.525</td>
<td>Determining Payments</td>
<td>Defines the two-parent families that are subject to the seasonal benefit reduction.</td>
<td>To conform to a recent change in law, this policy adds the exemption for families who are caring for a child with a disability.</td>
</tr>
<tr>
<td>45.529</td>
<td>Standard Utility Allowance</td>
<td>Provides amounts of regional heating and non-heating standards</td>
<td>Update heating and utility standards to reflect average costs for these expenses in each region. This information was obtained by a statewide survey of fuel and utility costs that was conducted earlier this year. The Food Stamp program will use the same standards.</td>
</tr>
<tr>
<td>45.530</td>
<td>Allowable Utility Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>45.535</td>
<td>Excess Averaging</td>
<td>Non-recurring lump sum payments are counted as income for extended periods of time, regardless of how the money is used or if the money is actually available for that entire period of time.</td>
<td>Non-recurring lump sum payments will be exempt as income and treated as a resource in month of receipt. Families may still be ineligible for a period of time if they retain the money, but the new policy will be more responsive to the actual circumstances of the family. The new policy also aligns Temporary Assistance and Food Stamp policy with regard to treatment of these payments.</td>
</tr>
<tr>
<td>45.565</td>
<td>Correction of Underpayment</td>
<td>Supplemental payments are made without regard to cause of underpayment</td>
<td>Supplemental payments will not be issue when the underpayment is caused by an individual's failure to timely report a change, without good cause.</td>
</tr>
</tbody>
</table>
| 45.570 | Collection of Overpayment | Agency pursues collection of any overpayment, regardless of amount or cause.  
Restricts collection of overpayments from former recipients to situations where a voluntary repayment agreement has been signed and the amount due is more than $1,000. | Removes requirement for current and former recipients to repay agency-caused overpayments totaling less than $100;  
Allows pursuit of collections from former recipients even if no voluntary repayment agreement is in place, and for amounts less than $1,000 |
BROADCAST TO DPA STAFF AND SERVICE PROVIDERS
from POLICY AND PROGRAM DEVELOPMENT

This message provides notice of a change in child care policy. As some of you have noticed, the new child care daily rates are high in comparison to the monthly enrollment rate. A child who is on an attendance authorization will exceed the monthly enrollment rate once they attend child care for 17 days.

CURRENT POLICY
DPA’s current policy is to pay the monthly enrollment rate or the attendance rate, whichever is lower.

ISSUES REGARDING CURRENT POLICY
• DPA’s policy differs from the Department of Education and Early Development’s (EED) policy, which is to pay the attendance rate for the number of days in care, even if the rate exceeds the enrollment rate. It is very difficult for child care providers to operate under two different policies, one of which will pay them more for providing the same amount of care.
• Providers who take children on an attendance basis have no assurance how much they will be paid since they don’t know how often the children will be in care. It makes sense that these providers get paid more on a daily basis than the enrollment rate allows.
• In some areas of the state, it is very difficult to find providers who will take children on an attendance basis. Allowing providers higher attendance rates may encourage them to be more willing to accept children on an attendance basis.

NEW POLICY
In an effort to be consistent with EED policies and practices, and to encourage child care providers to accept children on an attendance basis when needed, we are rescinding the policy of paying the lower of the attendance rate or the enrollment rate for attendance authorizations. Effective July 1, staff should pay the attendance rate for the number of days in care. We will be evaluating the effects of the high daily rates on both the DPA and EED systems over the next few months.

Please remember that it is the responsibility of DPA staff and case managers to determine the type of authorization to issue. Providers may not mandate attendance authorizations for children in full-time care.

WHAT DOES THIS MEAN FOR YOU?
1. issue enrollment authorizations whenever possible
2. review payments on attendance authorizations. If we are paying high attendance bills and the client is consistently using over 17 days of child care, issue an enrollment authorization
3. document any problems you may experience due to the new rate structure and forward them to your Assistant Regional Manager or to Mary Lorence
4. staff paying the child care bills will need to override the monthly enrollment limit (not the state maximum amount), manually calculate the payment rate, and enter the amount in the system

Assistant Regional Managers, please share this information with our service providers. If you have questions about this policy, please contact Mary Lorence at 465-3329 or at <mailto:Mary_Lorence@health.state.ak.us>. Thank you for your continued work and patience in implementing changes to the child care system.
Broadcast to All DPA Staff & DPA Service Providers
From System Operations and the Policy and Program Development Team

60-Month Update and Changes to the PRAW Screen

As our first Temporary Assistance families near their 60-month limit, it is essential that information about months of assistance on EIS is accurate and that families approaching the time limit are receiving the services they need. To help us accomplish this, several initiatives are underway:

Rapid Response Team
The Policy and Program Development Team has identified about 30 families that, according to existing EIS information, will reach the 60-month time limit between October 2001 and June 2002. The Regional Managers will work with staff in their regions to review the number of months of assistance these families have used and ensure that they are referred to services they need to achieve self-sufficiency. Policy and Program Development will be working closely with field staff to notify these families of the end of their 60 months of assistance and determine if they qualify for an extension to the time limit under existing policy and regulations.

PRAW Screen Changes
Beginning June 30, 2001, the MTHS USED field on the PRAW (Previous Aid / Work Incentives) screen will be hard-coded. EIS will no longer allow case workers to manually change this information. Instead, the field can only be changed by the EIS Help Desk. If a caseworker determines that the number of months recorded on the PRAW screen is inaccurate, the case worker must:

- Document the reason for the inaccuracy on the family’s CANO (Case Notes) screen; and
- Send an e-mail request to the EIS Help Desk to correct the number of months on the PRAW screen. The request must give the individual’s name and EIS case number, and the date of the corresponding CANO entry. The Help Desk will confirm that there is a supporting entry on the CANO screen and correct the number of months recorded on the PRAW screen.

Long-Term Planning
In addition to the two initiatives described above, we are planning a special project to review the months of assistance counted for targeted cases and are continuing to work on policies and procedures to address proposed changes to the 60-month timelimit extension criteria. The new policies and procedures will take effect prior to July 2002 and will provide additional guidance and clarification for the large number of families who will begin to reach the timelimit then. In the meantime, a change to the 60-month timelimit section of the Temporary Assistance manual will be issued to update the guidance for allowing extensions to the timelimit under existing regulations.

If you have any system-related questions, please contact the Help Desk at EISHelp@health.state.ak.us. If you have any policy questions, contact the Policy and Program Development Team at DPAPolicy@health.state.ak.us.

Assistant Regional Managers, please share this information with our service providers.
Social Security recently learned about an error in the calculation of the cost-of-living allowance for the last two years. As a result, Social Security and SSI benefits will go up in August. The amount of the increase is small. For example most SSI payments will increase by only $1.00. The State Verification Exchange System and the Bendex interface are already showing the higher Social Security benefit amounts.

We are still gathering information and researching how best to implement this change. In the interim, please do not use the higher (corrected) Social Security benefit amount in determining eligibility and payment calculations for any public assistance program. Further guidance will be provided on this change soon.

If you any questions about this broadcast, please contact the Policy and Program Development Team at DPAPOLICY@health.state.ak.us.
From the Policy and Program Development Team

Letter from the Director
Annual Review Process for APA Recipients Who Receive SSI

Yesterday, we issued a broadcast announcing the automation of the annual review process for Adult Public Assistance (APA) recipients who receive Supplemental Security Income (SSI). The new review process no longer requires APA/SSI recipients to submit a review application each year. Although the new process will not be fully automated until July, we stopped sending APA review applications to APA/SSI recipients even earlier. Last Friday, a letter from the Director was mailed to APA/SSI recipients to advise them of this change. Since APA staff may receive questions about the letter from APA recipients, the text of the letter is shown below:

Dear APA Recipient:

Good News! We have simplified the annual review process for many Adult Public Assistance (APA) recipients. Beginning April 2001, you no longer need to complete an annual APA review form if you:

- Receive federal Supplemental Security Income (SSI) benefits; and
- Continue to meet the APA program’s Alaska residency requirements.

Alaska’s APA program is designed to supplement federal SSI benefits. People who are eligible for SSI benefits are automatically eligible for APA benefits. Instead of requiring an annual review form, we will simply check to see if you are eligible for SSI benefits and are still an Alaska resident.

This change only affects APA recipients who receive SSI benefits. If you do not receive SSI benefits, you will still need to complete an APA review form each year in order to remain eligible.

Sincerely,

Jim Nordlund
Director of Public Assistance
The Division, in partnership with the UAA Institute on Circumpolar Health Studies (ICHS) and the UAA School of Social Work, is about to begin our second study of the Temporary Assistance Program. Our first study, the “leavers study,” provided information on families who have left the Temporary Assistance Program (results of the leavers study are available on the ICHS web page at <http://www.ichs.uaa.alaska.edu/ichs/TAreport.html>). This phase of work will study long-term recipients of Temporary Assistance - those who have received benefits for 40 months or longer. The study will help us understand the nature of employment barriers experienced by these families so that we can continue to develop services to assist them in becoming self-sufficient.

Part of the study data will be captured through a client survey. The survey has approximately 100 questions designed to collect information on barriers to employment. In June and July, approximately 800 families from around the state will be contacted by phone from Craciun Research Group, a subcontractor of ICHS. The interviewer will explain the purpose of the survey, inform them of their rights to have the information kept confidential, and obtain their consent to be interviewed.

A letter notifying long-term recipient families of the upcoming survey was mailed earlier this week (a copy is attached to this broadcast). You may receive phone calls from clients who have questions or concerns about responding to our survey. Please reassure them that they are participating in a legitimate research project, and that their responses are very important. Let them know that their status in the Temporary Assistance program will not be affected by their participation, and that their responses will be kept confidential.

**Note to Assistance Regional Managers:** Please share this information with our case management community service providers.

Thanks very much. Your help will promote a good response to our survey.

If you have questions, please contact Angela Salerno at 465-3200.

**********************************************************************************
Dear Alaskan:

I'm writing to let you know that a representative of Craciun Research Group will be calling you soon to ask you to be interviewed by telephone and offer you $25.00 for your time. The interview will take about 30 minutes to complete. The Alaska Division of Public Assistance has authorized this survey and your participation is very important. Your participation is completely voluntary.

The Division of Public Assistance has asked the University of Alaska Anchorage Institute for Circumpolar Health Studies to conduct a study to find out how people who have been on Temporary Assistance for 40 or more months are doing and what might be done to help them become self-sufficient. As part of the study, the University has hired the Craciun Research Group to conduct a survey of 800 families who have been receiving Temporary Assistance benefits. You are one of the people selected to be interviewed. The information we gather from you and the other families will be very valuable as the state and the federal government consider ways to better serve Temporary Assistance families.

Your name, address, telephone numbers and other personal information from your Public Assistance case record are confidential. Public Assistance has provided this information to the University to conduct this study on their behalf. All information we and Craciun Research collect during the survey is also confidential and will be used only for research purposes. The University and Craciun Research will not release information that is specifically identified with you or anyone else in your family to the Division of Public Assistance or anyone else. If you participate in the survey, you can be assured that your personal information will be kept in confidence and closely guarded. Please read the back of this page for complete information about your consent to be interviewed and your right to privacy.

An interviewer from Craciun Research will be calling you sometime before the end of July to interview you on the telephone. The interview takes about 30 minutes. The interviewer will speak you personally- other members of your household will not be included. Your privacy is very important to us. Please tell the interviewer if you want to be interviewed at a particular time or at a different telephone number than the one at which we first contact you and we will schedule a time and place convenient to you. We will mail you a check for $25.00 after the interview is completed.

If you have any questions or concerns, please call Curt Lomas, project manager at the Institute for Circumpolar Health Studies, at (907) 786-6514.

Sincerely,

Brian L. Saylor, Ph.D.
Director

Friday, June 08, 2001 10:38 AM Long-Term Recipient Study
**Confidentiality:** The information that we collect during this interview is confidential. Every surveyor or other researcher who might see the information you provide has signed a written agreement to keep your information confidential and use it only for purposes of this study.

We will use the information you give us, along with information we collect from many other families, in our study of the Alaska Temporary Assistance program. However, we will not give your name to the Division of Public Assistance or anyone outside of our working group, none of the information you give us will be identified as having come from you, and we will not tell the State who we paid to participate in this study.

You do need to know, however, that we may be required by law to report to the Department of Health and Social Services anything you tell us that indicates that you or someone else may have broken laws about child abuse. We may be required to report possible elder abuse to the Department of Administration. These agencies may then investigate the reported information.

**Voluntary Participation:** Your participation in the interview is strictly voluntary. You may refuse to answer any question the interviewer asks you. You may decide to stop the interview at any time. You will not lose any benefits or services if you refuse to participate or decide to stop. Your participation in the interview implies that your participation is voluntary.

**Risks:** Your answers to the interview questions and any other information that you give us will have no effect on the benefits that you have received in the past or will receive in the future from the State of Alaska or the Division of Public Assistance.

During the survey, we will be asking you personal questions about the characteristics of you and your family. We will be asking about jobs, income, personal health and welfare, individual and family problems, housing, transportation, employment opportunities, and your opinions about the Alaska Temporary Assistance Program. You may occasionally feel uncomfortable in answering some of these questions. Beyond that possible discomfort, there are no known risks to you if you participate in this study. If you experience discomfort, you may stop the interview or refuse to answer the question or questions you are uncomfortable with or ask to be interviewed at a different place or time when you would feel more comfortable. If you are afraid that someone you do not want to hear your answers might overhear them, please let the interviewer know so we can make arrangements to protect your privacy.

**Benefits of Participation:** The information that you and many other Temporary Assistance recipients provide during this statewide survey will help the Division of Public Assistance and other government officials better understand how Alaska’s Welfare-to-Work programs and policies are working and help them identify ways to make them work better. We expect that what we learn from this survey will be of great benefit to the people in Alaska, particularly to low-income families who may need Temporary Assistance. The information will also be provided to federal officials who are considering changes to the welfare reform law and may help them make better decisions about changes in the law.

**Contact Information:** If you want any more information about the study, or would like to talk with someone about it, please contact Curt Lomas at the University of Alaska at 786-6514 or Angela Salerno at the Division of Public Assistance at 465-3200.
BROADCAST TO ALL DPA STAFF AND DPA CASE MANAGEMENT SERVICE PROVIDERS
FROM THE POLICY AND PROGRAM DEVELOPMENT TEAM

Summer is here and that means more employment opportunities for Alaska Temporary Assistance recipients. It also means that for July, August, and September, benefits for most two-parent families will be reduced by 50 percent.

New Policy

Legislation passed this year that changes our two-parent seasonal benefit reduction policy. Beginning July 1, 2001, two-parent families may be exempt from the seasonal benefit reduction if one parent is needed in the home to care for a child with a disability who requires 24-hour care. A physician or other licensed medical professional must certify the child’s disability and the need for 24-hour care.

Informing Families

We mailed two letters informing two-parent families of the upcoming seasonal benefit reduction: a letter from Director Jim Nordlund on May 21st and EIS notice X067 on May 29th. Both letters encourage families to contact their case worker for additional help in finding work. These letters also market the array of services we have available to help support employment opportunities.

The X067 notice also advises families of the new policy exemption and instructs the family to contact their case worker if they think this exemption applies to them. In some cases, a family may have already provided the necessary medical evidence. In others, the information may still be needed. If a family contacts you about this new provision, please advise them about the need for medical certification.

EIS Processing

Once the necessary medical information is provided, and it’s determined that an exemption from the seasonal reduction is appropriate, enter a “Y” in the SEASONAL OVR (Override) field on the AFPD screen to stop the seasonal benefit reduction from occurring.

FLSA Reminder

The Seasonal Benefit Reduction may affect two-parent families in Community Work Experience (CWE) placements. CWE generally does not meet the federal requirements for a training activity; therefore, participants in CWE activities are subject to federal Fair Labor Standards Act (FLSA) compensation requirements. Case managers should review CWE placements to ensure compliance with FLSA by checking to see that the hours of CWE activity do not exceed the family's monthly Temporary Assistance benefit divided by federal minimum wage ($5.15). More information about this policy is included in the May 1999 Community Work Experience Guide.
If you have any questions or need additional information about these policies, please e-mail the Policy and Program Development Team at DPA Policy. Assistant Regional Managers, please share this information with our service providers.

Jim Steele  
Public Assistance Analyst  
Alaska Division of Public Assistance
From: DPA Policy
Sent: Wednesday, March 28, 2001 3:43 PM
To: ALL DPA Statewide Staff
Subject: Annual APA Reviews for SSI Recipients

Broadcast to all Adult Public Assistance Staff from Systems Operations and the Policy and Program Development Team

IMPORTANT MESSAGE

As a result of last year’s Business Analysis and Process Design Conference, field staff representatives made several suggestions for streamlining the operation of the Adult Public Assistance (APA) program. One of these suggestions was to streamline the annual APA reviews for SSI recipients. SSI recipients make up about 60 percent of our statewide APA caseload. Our goal is to fully automate the annual APA review process for those APA recipients who also receive SSI benefits. Essentially, this means the Eligibility Information System (EIS) will automatically check for Alaska residency and SSI recipient status, and re-certify the APA/SSI recipient for another year. Non-SSI recipients will continue to have their annual APA reviews processed the same as before.

Part of the necessary programming has now been completed. That is, for APA/SSI recipients whose EIS review period ends April 2001 or later, EIS will no longer mail APA Review Due notices and APA review applications to APA recipients who receive SSI benefits. However, programming to automatically check Alaska residency and SSI recipient status, and re-certify the APA/SSI recipient for another year has not yet been completed. Until the new APA review process for SSI recipients is fully automated, we have established some interim procedures to reduce paperwork and alleviate your APA workload as much as possible.

Interim Procedures:

• Since you will no longer receive a review application from APA/SSI recipients, it is essential to review your monthly caseload report, CR001, at the beginning of the month to identify those APA/SSI cases that need to be reviewed and reauthorized for another year. The first month this must be done is April 2001.

• When reviewing the case, you will only be required to confirm the individual’s Alaska residency and SSI recipient status through the use of the SVES interface or other available information. If the APA recipient meets these two criteria, APA benefits may be approved for another year.

• If the case is not reviewed and reauthorized in a timely manner, an EIS alert will be generated at the end of the month because a review application was not registered on EIS. This alert should also be used to identify APA/SSI cases that need to be reviewed and processed.

• Because SSI recipients are not required to submit an annual review application, it is no longer necessary to send them an EIS notice (i.e., P802) to advise them that their APA review has been completed.

If you have any questions regarding these interim procedures please contact Jim Steele by phone at (907) 465-3201, or by e-mail at Jim_Steele@health.state.ak.us.
Change #1 to the PASS I Child Care Manual was recently distributed statewide. If you have not received your copy, please contact Camille Falsaas, Policy and Program Development Unit, at 465-5840, or e-mail her at Camille_Fulsaas@health.state.ak.us.

A number of new policies and clarifications are covered in this manual change. Please review it carefully.

Contact Mary Lorence at 465-3329 or Mary_Lorence@health.state.ak.us if you have questions relating to this manual change or any other child care policy.
Broadcast to All DPA Staff - January 28, 2000

From the Policy and Program Development Team and Systems Operations

Subject: Temporary Assistance Time Limits

As we move through the 30th month of the Temporary Assistance Program, we are developing additional intensive strategies to address families with 24+ months of assistance. One of these strategies is to start sending regular notices to these families telling them how many months of Temporary Assistance they have used and how many they have left. We expect this will motivate families to work harder on their self-sufficiency steps and, for some (about 3% statewide), it will be a reminder that, despite being penalized, their time clock is ticking.

Next week we will mail an automated notice, X082, to open Temporary Assistance households living in communities that are not exempt from the 60-month time limit. This notice will be mailed to all families who have received at least 24 months of assistance. The number of months used for this notice is being read from the “MTHS USED” field on the PRAW screen. The X082 will be used on an ongoing basis to reinforce the time limit message. For your information, a copy of this notice is attached to this message.

Please send policy questions to the Policy and Program Development Team at dpapolicy@health.state.ak.us or by SYSM at HPAPOLY. Send EIS-related questions to Systems Operations Help Desk at EISHelp@health.state.ak.us or to the DPA EIS Helpdesk listed on the global address list.
TEMPORARY ASSISTANCE BENEFITS LIMIT

DEAR (Primary Information Person)

** IMPORTANT NOTICE ABOUT YOUR TIME LIMIT **

There is a lifetime limit on how long you and your family can receive benefits from Temporary Assistance (ATAP). The limit is five years, or a total of 60 months.

So far, your family has received XX month(s) of Temporary Assistance.

This means your family can only get money from Temporary Assistance for another XX month(s).

Because of this time limit, it is important for you to think ahead about using your remaining months wisely.

We can help. We have services to help you find and keep a job or, if you’re working now, to help you increase your wages or get a better job.

Please contact me or your case manager if you have any questions or if you need information about how we can help you get off of Assistance.

** USE YOUR REMAINING MONTHS CAREFULLY! **
As a follow-up to the information on Native Dividends issued January 17 by Staff Development and Training, we would like staff to observe these guidelines when processing the CIRI payments for Temporary Assistance and APA cases in retrospective budgeting.

First, receipt of these dividends should not affect the individual's case until the benefit month corresponding to the budget month when the payment was received. For example, dividends received in December would affect the case beginning in February and dividends received in January would affect the case in March.

If you encounter a case that was closed a month earlier than these guidelines provide, please reopen the case and redetermine eligibility without considering the CIRI dividend. For example, a client received and reported the payment in January and the case was closed for February as prospectively over resource because of the CIRI dividend. The case should be reopened and eligibility for February redetermined without considering the resources associated with the CIRI distribution. If the household is expected to exceed the resource limit in the month of March, then the TA or APA case should be closed with timely notice of adverse action.

Second, because of the size of CIRI's distribution, we would like staff to be proactive in establishing how the money was used and what the client's current resource situation is. Please take the time to contact the client and develop the spend-down information we need to correctly determine resource eligibility.
At long last, and by popular demand, the Policy and Program Development Team presents changes and enhancements to policies covering supportive services and good cause for voluntary separation from employment. These changes:

1. Add new supportive services for car insurance, emergency shelter, and youth enrichment activities;

2. Remove the caps for all supportive services except remedial medical and relocation;

3. Significantly increase the maximum payment amounts for remedial medical and relocation, and;

4. Provide good cause for voluntary job quit or reduction of hours when these actions are considered essential to furthering family self-sufficiency.

The change in supportive services policy is intended to provide you with greater flexibility in supporting client participation in approved work activities. Initially, we planned to add legal assistance as a supportive service and to allow the purchase of high-risk (SR-22) auto insurance. However, due to concerns about liability, additional research is needed before these services can be offered.

You have all done an excellent job determining the need for supportive services and guaranteeing that the supportive services you authorize assist families to achieve self-sufficiency. Continue to use your prudent judgement when determining a customer’s need for supportive services as you coach clients to:

- Use personal resources (such as the PFD) to meet self-sufficiency goals;
- Be cost conscious and use comparison shopping when selecting vendors for supportive services;
- Identify and access community resources that can help them remain self-reliant when they no longer receive assistance.

The attached document describes the policy changes and provides guidance on implementing them. These changes will be incorporated into a future Temporary Assistance manual change. In the interim, please insert the attached document into the appropriate sections of your Temporary Assistance manual.

Any questions regarding these changes to Temporary Assistance policies should be directed to the DPA Policy mailbox at dpapolicy@health.state.ak.us.
Subject: Deductions for child support payments by Temporary Assistance families.

Child support payments made by a member of a Temporary Assistance household will now be allowed as a deduction from income when calculating Temporary Assistance eligibility and benefit amounts. This policy is effective with determinations made on or after January 3, 2001 for February benefits. This new deduction will be based on information entered on the DEMH screen, as is currently done for the Food Stamp Program.

We have instituted this policy because we recognize that support paid for children who do not live in the home is a factor in a family's ability to become self-sufficient. We hope to encourage the families we work with to recognize both the obligation to provide regular support to all their children, and that this obligation must be included in their plans to become self-supporting.

To be allowed, payments must be made by a member of the assistance unit. Child support payments made by members of the economic unit (stepparents, deemed parents, and alien sponsors) are accounted for in the deeming process.

NOTE: If a Temporary Assistance case is auto-authorized, you will have to manually authorize February benefits in order for the child support payment to be correctly deducted from the income. These cases can then be re-set to auto-authorize for future benefit months.

This policy change will be included in a future revision of Temporary Assistance manual section 780-1. If you have any questions, please contact the Help Desk at DPA EIS Helpdesk or EISHelpdesk@health.state.ak.us or the Policy & Program Development Team at 465-3347 or email dpapolicy@health.state.ak.us.
Each year, Temporary Assistance need standards are adjusted at the same rate as the Cost of Living Increase in SSI benefits. This increase in the need standards is effective January 1, 2001 and triggers the following changes in the Alaska Temporary Assistance Program.

- The amount of the ratable reduction increases to 19.85%, paying 80.15% of need. This keeps the maximum Temporary Assistance payments at the same levels;

- The maximum shelter allowances increase; and

- The EIS Income Standards Table and ratable reduction calculations are updated.

Recipients with income may receive an increase in benefits. Case workers should send notice W700 to recipients whose benefits increase because of the change in the need standards.

In order to implement these changes on EIS, auto-authorization is turned off for the benefit month of January. All Temporary Assistance cases must be manually authorized for January 2001.

The new need standards and shelter allowances are listed at the bottom of this broadcast. These changes will be included in Temporary Assistance manual change # 3, which will be distributed in December.

Please direct policy questions to the Policy and Program Development Team at dpapolicy@health.state.ak.us. Direct EIS-related questions to Systems Operations at EISHelp@health.state.ak.us
NEED STANDARDS EFFECTIVE JANUARY 1, 2001:

Basic Adult-Included Standards

Assistance Unit Size

<table>
<thead>
<tr>
<th>One Caretaker</th>
<th>Two Parents (both able to work)</th>
<th>Need Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>3</td>
<td>1,028</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>1,156</td>
</tr>
<tr>
<td>4</td>
<td>5</td>
<td>1,284</td>
</tr>
<tr>
<td>5</td>
<td>6</td>
<td>1,412</td>
</tr>
<tr>
<td>6</td>
<td>7</td>
<td>1,540</td>
</tr>
<tr>
<td>7</td>
<td>8</td>
<td>1,668</td>
</tr>
<tr>
<td>8</td>
<td>9</td>
<td>1,796</td>
</tr>
<tr>
<td>Each Additional</td>
<td></td>
<td>128</td>
</tr>
</tbody>
</table>

Two Parents, One Physically/Mentally Unable to Work (Incapacity Cases)

<table>
<thead>
<tr>
<th>Assistance Unit Size</th>
<th>Need Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>1,156</td>
</tr>
<tr>
<td>4</td>
<td>1,284</td>
</tr>
<tr>
<td>5</td>
<td>1,412</td>
</tr>
<tr>
<td>6</td>
<td>1,540</td>
</tr>
<tr>
<td>7</td>
<td>1,668</td>
</tr>
<tr>
<td>8</td>
<td>1,796</td>
</tr>
<tr>
<td>Each Additional</td>
<td>128</td>
</tr>
</tbody>
</table>

Child-Only Standards

<table>
<thead>
<tr>
<th>Assistance Unit Size</th>
<th>Need Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>564</td>
</tr>
<tr>
<td>2</td>
<td>692</td>
</tr>
<tr>
<td>3</td>
<td>820</td>
</tr>
<tr>
<td>4</td>
<td>948</td>
</tr>
<tr>
<td>5</td>
<td>1,076</td>
</tr>
<tr>
<td>6</td>
<td>1,204</td>
</tr>
<tr>
<td>7</td>
<td>1,332</td>
</tr>
<tr>
<td>8</td>
<td>1,460</td>
</tr>
<tr>
<td>Each Additional</td>
<td>128</td>
</tr>
</tbody>
</table>

Pregnant Woman Standard

643
### 2000 Shelter Allowances

<table>
<thead>
<tr>
<th>Assistance Unit Size</th>
<th>Need Standard</th>
<th>Shelter Allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>AI 01</td>
<td>643</td>
<td>192</td>
</tr>
<tr>
<td>AI 02</td>
<td>1,028</td>
<td>308</td>
</tr>
<tr>
<td>AI 03</td>
<td>1,156</td>
<td>346</td>
</tr>
<tr>
<td>AI 04</td>
<td>1,284</td>
<td>385</td>
</tr>
<tr>
<td>AI 05</td>
<td>1,412</td>
<td>423</td>
</tr>
<tr>
<td>AI 06</td>
<td>1,540</td>
<td>462</td>
</tr>
<tr>
<td>AI 07</td>
<td>1,668</td>
<td>500</td>
</tr>
<tr>
<td>AI 08</td>
<td>1,796</td>
<td>538</td>
</tr>
<tr>
<td>Each Add’l</td>
<td>128</td>
<td>38</td>
</tr>
</tbody>
</table>
Broadcast to all DPA Staff and Service Provider Case Managers

from the Policy and Program Development Team and Field Services

This broadcast clarifies case management services available for Cook Inlet Region, Incorporated, (CIRI) shareholders whose Temporary Assistance cases will close as a result of the receiving the large dividend payments that CIRI will start distributing to their shareholders on December 28, 2000.

This unexpected windfall provides a unique opportunity for families to use the dividend in making progress toward self-sufficiency and in preserving months of assistance for the future. Therefore, post-temporary assistance (Post-TA) case management services will be made available for families whose Temporary Assistance case closes because of receipt of the CIRI dividend. Post-TA case management will be offered for up to six months following case closure. Families should be encouraged to use this money in ways to help them achieve self-sufficiency such as, paying off debts, purchasing reliable transportation, securing stable housing, and pursuing training and education necessary to promote job retention and advancement. The sudden influx of a large lump sum payment often has the potential to create unanticipated stress. We want to assist in alleviating these situations from occurring and work toward a positive outcome for families by continuing case management services.

Post-TA case management services are voluntary and families are not subject to the conditions of the FSSP in effect prior to case closure. Services should focus on supportive counseling and coaching that assists them to make informed decisions on the use of personal resources to support self-sufficiency objectives and to meet basic needs. These services should compliment those CIRI is promoting, such as financial planning seminars. As always, the availability of personal resources should be carefully considered prior to the authorization of any supportive services.

Because some families may need our agency’s help in the future, case managers should consult with DPA eligibility technicians to discuss the impacts of proposed plans for using the dividends on eligibility for assistance programs.

During the next few weeks, please contact families you know will be receiving the dividend to discuss their plans for pursuing self-sufficiency goals and tell them about the availability of Post-TA case management services.

**Assistant Regional Managers** - Please ensure that this broadcast is distributed to service provider case managers.

Please submit any questions regarding this guidance to the DPA policy mailbox.
** IMPORTANT NOTICE ABOUT YOUR TIME LIMIT **

There is a lifetime limit on how long you and your family can receive benefits from Temporary Assistance (ATAP). The limit is five years, or a total of 60 months.

So far, your family has received XX month(s) of Temporary Assistance.

This means your family can only get money from Temporary Assistance for another XX month(s).

Because of this time limit, it is important for you to think ahead about using your remaining months wisely.

We can help. We have services to help you find and keep a job or, if you’re working now, to help you increase your wages or get a better job.

Please contact me or your case manager if you have any questions or if you need information about how we can help you get off of Assistance.

** USE YOUR REMAINING MONTHS CAREFULLY! **
Here’s a preview of next year’s changes to APA and SSI income standards. As they do every year, the APA and SSI Need and Payment standards will increase on January 1, 2001. These increases are the result of the 3.5 percent Cost of Living Allowance (COLA) increase granted to recipients of SSI beginning January 1, 2001.

SSA benefits will also increase by 3.5 percent beginning January 1, 2001. The APA mass change job will automatically adjust the APA standards and increase the amounts of SSI and SSA income by the COLA increase. It will also recalculate grants for most APA cases.

The APA Manual will include the new 2001 standards in December.

Please direct APA policy questions to the Policy and Program Development Team by e-mail to the DPA Policy mailbox at dpapolicy@health.state.ak.us. Direct EIS-related questions to the DPA EIS Helpdesk at EISHelpdesk@health.state.ak.us.

The new standards are as follows:

### APA Need and Maximum Payment Standards

<table>
<thead>
<tr>
<th>Need</th>
<th>Max. Pymt.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual, Independent Living</td>
<td>$984</td>
</tr>
<tr>
<td>Individual, In Another’s Household</td>
<td>814</td>
</tr>
<tr>
<td>Couple, One Elig, Independent Living</td>
<td>1184</td>
</tr>
<tr>
<td>Couple, One Elig, In Another’s Household</td>
<td>935</td>
</tr>
<tr>
<td>Couple, Both Elig, Independent Living</td>
<td>1459</td>
</tr>
<tr>
<td>Couple, Both Elig, In Another’s Household</td>
<td>1212</td>
</tr>
<tr>
<td>Nursing Home Personal Needs</td>
<td>74</td>
</tr>
<tr>
<td>Nursing Home 300% Eligibility Standard</td>
<td>1590</td>
</tr>
</tbody>
</table>

### SSI Income Standards

- Individual, Independent Living: $530.00
- Individual, In Another’s Household: 353.34
- Couple, Both Elig, Independent Living: 796.00
- Couple, Both Elig, In Another’s Household: 530.67