
From: Fitzjarrald, Ellie
Sent: Thursday, January 03, 2002 4:36 PM
To: ALL DPA Statewide Staff
Cc: Sturrock, Kathy; DMA POLicy
Subject: 60-Month Update

**This is a Broadcast to all DPA Staff & Case Management Service Providers
from the 60-Month Project Team**

As most of you know the 60-month clock is ticking and we are working on a number of strategies around this issue. This broadcast is to let you know about a time limit notice that is being mailed to families today, and other 60-month work in the mill.

- **Time Limit Notice.** We are mailing the X082 “Important Time Limit Notice” today to all Temporary Assistance families who have received 36 or more months of assistance and who live in non-exempt communities. This notice informs families about the number of months they have used and the number of months of assistance they have left.

We will send this notice on a quarterly basis, with the next mailing in March. Clients may call and ask questions about the information in the notice. Guidelines for responding to these types of inquiries were broadcast on December 11, 2001 to assist you in responding. Please review this information and if you have questions please email Field Services at dpafield@health.state.ak.us.

- **EIS Enhancements.** Work is in progress to replace the EIS PRAW screen with a new time limit screen. The new time limit screen will track months as well as information about any extensions to the time limit. Monthly caseload reports are being developed that will list the number of months used. In addition, we are working on EIS notices to notify families of case review staffings and extension decisions.
- **PRAW Project.** Tammy Allam, who is working on the Special QA Project to review months of assistance coded on the PRAW screen, is now reviewing records for families who have used over 24 months of assistance and that have at least a three-month difference between the PRAW counter and the number of months benefits were paid on EIS. When corrections are needed Tammy works with the EIS Help DESK to make the adjustment to the PRAW counter and documents the correction with a case note (CANO) entry. Many thanks go to Tammy Allam, Rocky Grimes, and our EIS Help Desk crew for their efforts on the PRAW screen project. As of mid-September, nearly 800 cases have been reviewed with approximately 450 corrections completed.

Please remember to review months of assistance information while processing Temporary Assistance applications and reviews, and completing case staffings. Send needed corrections to the EIS Help Desk using the procedures described in the July 19, 2001 broadcast to staff.

- **Temporary Assistance Manual.** We are also in the process of updating the Temporary Assistance manual to incorporate the Time Limit Extension Criteria and the Case Review Staffing Procedures we issued in October. Feedback from staff using these materials was positive and helpful. Thanks to everyone who has commented!

Keep up the great work! We will keep you informed as we move forward.

-----Original Message-----

From: DPA Policy
Sent: Monday, December 10, 2001 2:23 PM
To: ALL DPA Statewide Staff
Subject: New Temporary Assistance "Incap" Policies
Importance: High

**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 <<mailto: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>. 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.

From: DPA Policy
Sent: Friday, October 19, 2001 3:40 PM
To: ALL DPA Statewide Staff
Cc: Sturrock, Kathy
Subject: Draft 60-Month Time Limit Extension Criteria Guidance

**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.

STATE OF ALASKA

TONY KNOWLES, GOVERNOR

DEPARTMENT of HEALTH and SOCIAL SERVICES

DIVISION of PUBLIC ASSISTANCE

P.O. BOX 110640
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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 to 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.

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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.

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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.

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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.

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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.

From: DPA Policy
Sent: Friday, October 19, 2001 9:27 AM
To: ALL DPA Statewide Staff
Subject: ProBudgeting Processing Details

**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 <<mailto:dpapolicy@health.state.ak.us>> for Temporary Assistance and APA questions, or Joan Chase at joan_chase@health.state.ak.us <mailto:joan_chase@health.state.ak.us> for Food Stamp questions.

From: DPA Policy
Sent: Friday, October 19, 2001 9:32 AM
To: ALL DPA Statewide Staff
Subject: Working Beyond Current System Month

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

Working Beyond Current System Month

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 <<mailto:dpapolicy@health.state.ak.us>> for Temporary Assistance and APA questions, or Joan Chase at joan_chase@health.state.ak.us <mailto: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.