<table>
<thead>
<tr>
<th>Section</th>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>400</td>
<td>GENERAL INFORMATION</td>
<td>A-1</td>
</tr>
<tr>
<td>400-1</td>
<td>AN OVERVIEW OF THE ADULT PUBLIC ASSISTANCE PROGRAM</td>
<td>A-1</td>
</tr>
<tr>
<td>400-2</td>
<td>PRUDENT PERSON JUDGEMENT</td>
<td>A-3</td>
</tr>
<tr>
<td>400-3</td>
<td>CONFIDENTIALITY AND DISCLOSURE OF INFORMATION</td>
<td>A-4</td>
</tr>
<tr>
<td>400-4</td>
<td>VERIFICATION</td>
<td>A-5</td>
</tr>
<tr>
<td>A.</td>
<td>REQUIREMENT TO PROVIDE NECESSARY VERIFICATION</td>
<td>A-5</td>
</tr>
<tr>
<td>B.</td>
<td>INFORMING THE CLIENT OF REQUIREMENT TO PROVIDE NECESSARY VERIFICATION</td>
<td>A-5</td>
</tr>
<tr>
<td>C.</td>
<td>FAILURE TO PROVIDE NECESSARY VERIFICATION</td>
<td>A-6</td>
</tr>
<tr>
<td>D.</td>
<td>RESPONSIBILITY TO PROVIDE NECESSARY VERIFICATION</td>
<td>A-6</td>
</tr>
<tr>
<td>E.</td>
<td>WHEN VERIFICATION IS NOT NECESSARY</td>
<td>A-6</td>
</tr>
<tr>
<td>400-5</td>
<td>DOCUMENTATION</td>
<td>A-7</td>
</tr>
</tbody>
</table>
This chapter provides a general overview of the Adult Public Assistance (APA) program. It also sets forth certain procedural requirements that case workers must follow when they determine an individual's eligibility for APA.

Alaska's Adult Public Assistance (APA) program was established in Alaska law "to furnish financial assistance as far as practicable to needy aged, blind, and disabled persons, and to help them attain self-support or self-care".

A set of changes to the state statutes enacted in 1982 combined the three formerly distinct Old Age Assistance (OAA), Aid to the Blind (ABL), and Aid to the Permanently and Totally Disabled (APD) programs into today's APA program. The primary purpose of the 1982 statutory changes was to integrate state program policy with that of the federal Supplemental Security Income (SSI) program which was established effective January, 1974 by Title XVI of the Social Security Act. The SSI program is a national, federally funded program which, like APA, provides financial assistance to the needy aged, blind, and disabled. The SSI program is administered by the federal Social Security Administration (SSA).

The intent of the 1982 APA legislation was to establish APA as a state-funded and administered program to supplement the benefits provided by SSI. The SSI and APA programs use basically the same eligibility criteria. Although the two programs differ in administrative procedures and in certain eligibility criteria, the essential difference between SSI and APA is APA's higher standard of need.
The language of the APA statutes commits the State to a policy of cooperation and coordination with the federal government and its agencies in the administration of APA for the residents of Alaska. Most of the other States operate similar, state-funded programs that supplement the benefits of the SSI program. States may opt for federal administration of their supplemental benefits; in these States the Social Security Administration (SSA) determines eligibility and disburses payments for the state supplement as part of the SSI administrative process. States also may opt to have SSA determine Medicaid eligibility for SSI recipients.

Alaska has chosen to administer its own state supplement and to make its own Medicaid eligibility decisions. Even though Alaska administers its own programs, regular and frequent exchanges of information between the State's administering agencies and the SSA are essential to the operation of the APA program. In the interest of efficiency, the State regularly accepts the decisions of the Social Security Administration regarding eligibility and countable income levels for individual cases and applies the decisions to APA cases; to do otherwise would involve an unnecessary duplication of effort.

Before the establishment of the SSI program, the OAA, ABL, and APD programs were administered by the State but were jointly funded by state and federal monies. The APA program is now funded entirely by the State. However, the state's Medicaid Plan includes Medicaid benefits for all recipients of APA. Thus, every APA eligibility decision is also a Medicaid decision that must comply with the requirements of federal Medicaid law and is subject to federal Quality Control (QC) review, along with the potential for fiscal sanctions to the State resulting from findings of ineligibility in the QC review process.

The APA program is administered through the local offices of the Division of Public Assistance (DPA) of the Alaska Department of Health and Social Services (DHSS). DPA, with its staff of case workers, is the agency that determines eligibility and provides APA financial assistance.
Another agency of DHSS, the Division of Medical Assistance (DMA) is responsible for administration of the Medicaid program; however, DPA makes the eligibility decision and authorizes Medicaid benefits to eligible APA recipients. This shared administrative responsibility requires a great degree of coordination and cooperation between the two divisions.

The Division of Public Assistance also cooperates with the Division of Vocational Rehabilitation (DVR) of the Alaska Department of Labor and Workforce Development in the administration of the APA program. DVR evaluates the disability of certain APA applicants and accepts referrals for vocational rehabilitation services.

To fulfill its responsibility to furnish financial assistance to Alaska's needy aged, blind, and disabled, DPA provides information about the APA program and furnishes applications to all individuals who wish to apply. Case workers make decisions on all applications submitted, based on state and federal eligibility criteria. APA benefits are provided in the form of a monthly check that supplements the individual's or couple's monthly income up to the applicable monthly maximum amount provided for under Alaska state law.

This manual is provided as a tool for the case workers who administer the APA program. It provides an explanation of the federal and state policies which apply to the determination of eligibility for the APA program and to the provision of benefits to eligible individuals and couples.

This manual is a broadly written guide to the policy and procedures that apply to the administration of the APA program. It is impossible to anticipate every issue that a case worker will encounter in his or her casework. It is expected that the case worker will, from time to time, encounter circumstances where the manual does not provide enough detail to make a decision on an individual's eligibility.
400-2  **Continued**

Case workers are expected to operate independently and to apply their prudent judgement to the decisions they make in the course of their work. If a case worker is unable to reach a decision on a particular point of eligibility, he or she is expected to consult with his or her supervisor or with the supervisor's designee. In all circumstances, it is important that the decision made, and the reasons for that decision, be documented in the case file in enough detail to allow another worker or a reviewer to understand what was done and why it was done.

Because of the unique relationship between the APA program and the Supplemental Security Income (SSI) program, the APA case worker will sometimes need to know the SSI policy on a particular point of eligibility. The SSI policy manuals are written in much greater detail than this manual. Case workers are, however, discouraged from contacting SSA personnel for policy clarification; the APA Policy Specialist is, in all circumstances, to be used as the contact for clarification of APA policy. Questions from field staff are encouraged and will be dealt with as quickly as possible.

400-3  **CONFIDENTIALITY AND DISCLOSURE OF INFORMATION**

Applicants for, and recipients of, Adult Public Assistance, in order for their eligibility to be determined, must make known to the Division and its case workers many intimate facts about their personal lives. Additionally, APA applicants and recipients are often under extreme financial and personal stresses which could make them particularly vulnerable to exploitation if their situation were known. They are, therefore, in particular need of the protection of privacy and confidentiality.

It is against the law to use or disclose information obtained from Adult Public Assistance households to any person other than the applicant or recipient, with the following exceptions:

1. Persons directly involved in the administration of the APA program;

2. Persons directly involved in the enforcement of the provisions of the APA program;
400-3 Continued

3. Persons directly involved in other state-or federally-funded public assistance programs. Such programs include General Relief Assistance (GRA), Alaska Temporary Assistance Program (ATAP), Food Stamps, Energy Assistance, Medicaid, Supplemental Security Income (SSI), or Bureau of Indian Affairs General Assistance (BIA-GA).

Note: For APA purposes, such programs do not include Unemployment Insurance Benefits (UIB).

Further guidance regarding confidentiality and disclosure requirements may be found in section 100-3 of the Administrative Procedure Manual.

400-4 VERIFICATION

A. REQUIREMENT TO PROVIDE NECESSARY VERIFICATION

An individual must satisfy many eligibility requirements to be determined eligible to receive APA benefits. The client must provide proof that he or she meets each factor of eligibility. The proof offered by the individual may consist of written documents or, if appropriate, the names of collateral contacts who have knowledge of the client's circumstances. The case worker must evaluate the evidence offered and apply prudent judgement in deciding if the evidence shows that the eligibility factor is met. Guidelines for verification of each factor of eligibility are presented in the manual sections that specifically address each factor.

B. INFORMING THE CLIENT OF REQUIREMENT TO PROVIDE NECESSARY VERIFICATION

If a particular factor of eligibility must be verified so that a decision can be made on a client's eligibility for assistance, the case worker shall provide the client with a written notice that states what evidence is needed and gives a reasonable amount of time (at least 10 days) to submit the necessary proof. Whenever possible, the case worker should follow-up a written notice to a blind applicant or recipient with a telephone call.
If the client fails, without good cause, to respond to the notice within the amount of time allowed, eligibility for assistance does not exist. If the client responds to the notice and indicates that he or she is either unable to provide the necessary evidence or unable to understand what is being asked for, the client must be provided with help in understanding the requirement and getting the necessary proof.

C. FAILURE TO PROVIDE NECESSARY VERIFICATION

Eligibility does not exist if an applicant or recipient fails to provide necessary verification or refuses to allow the agency to verify information relevant to his or her eligibility for benefits.

D. RESPONSIBILITY TO PROVIDE NECESSARY VERIFICATION

The client is always responsible for providing whatever verification is necessary to establish his or her own eligibility for benefits. If, however, the case worker can obtain the needed evidence more easily or more quickly than the client, he or she should do so. For example, if a case worker can get information from SSA through the State Data Exchange (SDX), Beneficiary and Earnings Data Exchange (BENDEX), or State Verification Exchange System (SVES), there is no need for the client to provide proof of the same information.

Case workers must also keep in mind that many APA clients are limited in their capacity to understand program eligibility requirements or to take the steps necessary to get required verification, and offer help with the process if necessary. In many circumstances, it is best to encourage the client to contact a social service or advocacy agency or to appoint an authorized representative for help in getting the needed verification.

E. WHEN VERIFICATION IS NOT NECESSARY

It is not necessary to get documents or other evidence to verify that a client is ineligible for assistance if the client provides credible information which shows that he or she does not meet one or more factors of eligibility. If, for example, an individual alleges in an interview or on an application that he or she receives monthly income in excess of the applicable maximum, assistance may be denied based on the client's statement.
400-5 DOCUMENTATION

The case record must show that all relevant eligibility criteria have been considered, and that necessary verification has been obtained. The recording of this information in the case record is known as documentation. The case worker must document every eligibility decision well enough so that a reviewer examining the case record can understand what action was taken on the case and why it was taken. The requirement for documentation applies not only to recording how eligibility was verified, but also to recording how the case worker applied prudent judgement to determine eligibility.