



MEMORANDUM

DATE: December 20, 2012

TO: All Eligibility Staff

FROM: Char Ervin, PAPO
Systems Operations

SUBJECT: EIS PROCEDURE 2012-1 (Replaces EIS Procedure 1996-2)
INTERIM ASSISTANCE TO APA CONVERSION

INTRODUCTION

Interim Assistance (IA) was established as a special subcategory of Adult Public Assistance (APA) in order to provide for the basic needs of APA applicants who must concurrently apply for the SSI program. These applicants are not eligible for full APA until they become eligible for SSI. Interim Assistance provides a source of monthly income during the period of time when SSI eligibility is being determined.

Interim Assistance payments end when Social Security makes its final SSI eligibility decision and notifies the applicant.

This EIS procedure describes how to convert the ongoing IA case to an APA case in EIS.

When completing the IA to APA conversion in EIS, refer to the APA Policy manual for specific information regarding: Initial Month Benefits, Interim Assistance, Converting Interim Assistance to Regular Adult Public Assistance, and Retroactive APA Benefit Calculations.

PROCEDURE TO CONVERT IA TO REGULAR APA

1. Determine (a) which months the recipient is eligible for ME and (b) if the recipient is eligible for retroactive APA and/or ME benefits.

If eligible for retroactive APA benefits, you will need to manually compute the supplemental APA payments. The manual computation will aid in the conversion. *Do not authorize any supplemental benefits at this time.*

See pages 5 and 6 of this procedure for information on retroactive APA and/or ME benefits.

2. Add the ME program to the first month the recipient is eligible. On the Application Maintenance (APMA) screen, enter the ME program and the corresponding ME program subtype OA, AD or AB.

APMA	APPLICATION MAINTENANCE	121012 14:24
		WORKER
CASE NAME: SOUSA , JOHN P	CASE NUMBER: 00041476	
OFFICE: 084	UNIT: 2	CASELOAD: 02 - DPA TEAM
PROGRAM INVOLVEMENT: IA AD	ME AD	
APP RECEIVED DATE : 050112	50112	
BENEFIT START DATE : 050112		
EXPEDITED SERVICE :		
PROGRAM STATUS : OP		
QUICK PEND DUE DATE:		
TA TYPE APPLIED FOR:		
PROGRAM INVOLVEMENT:		
APP RECEIVED DATE :		
BENEFIT START DATE :		
EXPEDITED SERVICE :		
PROGRAM STATUS :		
QUICK PEND DUE DATE:		
TA TYPE APPLIED FOR:		
		NEXT-->

- Go to the Setup Participations (SEPA) screen and code the recipient's participation IN.

Note: Never change the IA participation to "OU" for a month in which there are paid IA benefits.

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EIS SEPA                      SETUP PARTICIPATIONS                      121112 09:50
                                WORKER
CASE NAME: SOUSA , JOHN P      CASE NUMBER: 00041476 MONTH: 0512
                                START          START          START
START
  NAME  REL  PGM PART  DAY  PGM PART  DAY  PGM PART  DAY  PGM PART  DAY
01 JOHN  S  PI    ME AD IN  1  IA AD IN  1
                                MORE CLIENTS:          NEXT-->
    
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- <Enter> through the EIS screens. If necessary complete any changes to the recipient's information. For example: address changes (ADDR), unearned income changes (UNIN), etc.
- On the Medical Reference (MERE) screen enter the MED SUBTYPE, ELIG CODE and HIC NUMBER if the recipient has one.

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EIS MERE                      MEDICAL REFERENCE                      121112 10:10
                                WORKER
CASE NAME: SOUSA , JOHN P      CASE NO: 00041476      MONTH: 0512
POST MED START MONTH:
  NAME  REL  MED  ELIG  WAI PRIMARY  POSSIBLE  DATE OF
  NAME  REL  SUBTYPE  CODE  EPSDT PHS VER  CARE  HIC NUMBER  TPL-TPR  DEATH
01 JOHN  S  PI    SI    20    N          612391007A
                                RESOURCE INFO?(Y): Y  MORE CLIENTS:          NEXT-->
    
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- Press <Enter> to go to the Medical Resource Information (MERI) screen to enter any third party liability (TPR) and/or medical insurance carrier (MRC) information and codes.

Example of partial MERI screen:

EIS	MERI	MEDICAL RESOURCE INFORMATION						121112	10:19
CASE NAME: SOUSA , JOHN P		CASE NO : 00041476				WORKER			
CLIENT: SOUSA , JOHN P		REL: PI		CLIENT NO: 0600091075					
	START	END	CODE	TYPE	POLICY NUM	GROUP NUM	A/P NAME	APID DEL	
TPR1									
TPR2									
TPR3									
TPR4									
MCR1									
MCR2									
MCR3									
MCR4									
CLIENT:					REL:		CLIENT NO:		
	START	END	CODE	TYPE	POLICY NUM	GROUP NUM	A/P NAME	APID DEL	
TPR1									
TPR2									
MORE CLIENTS:							NEXT-->	APMM	

- From the MERE or MERI screen, use NEXT→ and enter APMM to access the APA Method Medicaid Only Authorization screen to authorize the ME.

Note: If you do not use the NEXT→ function for accessing the APMM screen, the system will take you to the APA Authorization (APAS) screen which will show the paid IA benefit. You will not be able to authorize any benefit from the APAS screen and must <PF9> out, then NEXT→ APMM

- After authorizing the first ME benefit month on the APMM screen, initialize and authorize the ME only benefits for each month of eligibility up through the current system benefit month.

Note: If there is a month the recipient is not eligible for ME, close the ME case for the month(s) of ineligibility. When the recipient is again eligible for ME, add the ME back using the APMA screen. The ME application and benefit start dates would be the date the recipient is again eligible for ME. Be sure to review and if necessary update the MERE screen information.

- Initialize into the month after the last IA benefit was issued. Close the IA program using the APAS screen. In the DENIAL/CLOSURE REASON: field enter the code DD (Determined Disabled) or AO (IA Closure Due to APA Opening).

10. Add the APA (OA, AD, or AB) to the ME case using the APMA screen.

The APA programs *application received date* is the date the original APA application was received. This date is the same for the ME and IA application received dates.

The APA *benefit start date* is the first day of the month in which regular APA benefits will begin. This should always be the month after the last IA benefit was paid.

On the SEPA screen code the recipient IN for APA.

Note: Do not change the IA participation to OU.

11. Authorize the first month of APA benefits on the APAS. Enter the APA/ME program's review date in the APAS screen's REVIEW DUE DATE: field.
12. If necessary, initialize and authorize the APA/ME into the current benefit month.
13. Send the appropriate notice advising the recipient the IA ends and APA begins.

Other APA and ME eligibility which may need to be authorized:

A recipient may be eligible for APA supplemental benefits. Please note that the benefit start date for supplemental APA benefits may be different than the IA benefit start date. Refer to the APA Policy manual regarding retroactive APA benefit calculations.

If the recipient is eligible for ***APA supplemental benefits***, these benefits can be authorized by going to the Setup Over or Underpayments Menu (SEOO) and selecting Function 6 to authorize supplemental benefits on the Underpayment Authorization (UNAU) screen. The following are entry fields for the UNAU screen (example below):

1. Action (ACT CODE) field enter A (add)
2. ERROR MONTH field enter the month and year (MMYY) of the first supplemental payment is due
3. UNDERPAY AMT AUTH field enter the total of the combined supplemental for all months
4. PAYMENT REASON field enter AG – Agency Payment Error
5. PROGRAM SUBTYPE field enter either OA, AD or AB
6. AUTH PCN field enter your PCN to authorize the underpayment

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UNAU                                UNDERPAYMENT AUTHORIZATION                                121112 10:33
                                                                WORKER
CASE NAME:      SOUSA , JOHN P                                CASE NUMBER: 00041476
PROGRAM TYPE:  IA

  GA  ACT  ERROR  UNDERPAY  RECOUP  PAYMENT  BENEFIT  PAYMENT  NEED  PROGRAM  AUTH
NUM  CODE  MONTH  AMT  AUTH  AMOUNT  AMOUNT  ISSUANCE  REASON  TYPE  SUBTYPE  PCN
-----
  A   MMY  0.00                                AG                XX   XXXX

----- GA PAYEE/VENDOR 01 -----
-
LAST NAME:      FIRST NAME:      MI:
ADDR:           CITY:           PHONE:
STATE:        ZIP:           REF:
----- GA PAYEE/VENDOR 02 -----
-
LAST NAME:      FIRST NAME:      MI:
ADDR:           CITY:           PHONE:
STATE:        ZIP:           REF:
MORE UNDERPAYMENTS (Y/N)                                NEXT-->
    
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If the recipient requested **prior month retroactive ME benefits** and is determined eligible, the ME benefits can be authorized using the Application Entry Menu (APEM) screen.

Note: It is important to authorize the retroactive ME in a reverse sequential order. If this is not done, you will receive a Spider/Bug.

For example, if the recipient's ME eligibility began May 2012, and retroactive ME was requested for the months of February thru April, the correct reverse sequential order to authorize these months is: April, March and February.

1. On the APEM screen select Function 3 Establish Retro Month Medicaid, and enter the case number and month/year of retroactive ME to be established.

Press <Enter> and a warning edit CE501-W Eligible Months Only May Be Entered – Press Enter to Confirm appears. If the month/year entered are correct, press <Enter> to establish the retroactive ME month.

2. Check the benefit month's MERE screen and enter the appropriate codes.
3. After coding the MERE screen, NEXT→ to the APMM screen and authorize the retroactive ME benefit month.
4. Repeat the above steps for each month the recipient is eligible for retroactive ME.