

Commonwealth of Massachusetts

Executive Office of Health and Human Services Department of Transitional Assistance

600 Washington Street • Boston MA 02111

Joseph Gallant Secretary Claire McIntire Commissioner

Field Operations Memo 97-7 February 1, 1997

To:

Local Office Staff

From:

Joyce Sampson

Re:

Automated Mailing of Expired TAFDC Disability Supplements

Introduction

PACES will begin doing an automated mailing of Disability Supplements to TAFDC recipients whose disability duration period will expire the following month.

On or about the third week of February and each month thereafter, PACES will automatically select the cases with a disability duration period due to expire the following month. The month the disability duration period is due to expire is indicated by a code in block 40 of the PACES TD.

The following will be mailed to recipients selected by PACES:

a cover letter,

a Disability Supplement, and

a multilingual notice.

Note:

The cover letter advises the recipient that he or she must complete the Disability Supplement and return it to the local office within 10 days. In the case of a two-parent family the cover letter is addressed to the case head. The case head may or may not be the individual claiming the disability.

Within 10 days of the mailing, the recipient claiming the disability must provide a completed Disability Supplement and contact the local office regarding any changes in circumstances.

Completed Supplement

Before the Disability Supplement is submitted to the Disability Review Unit (DRU) for review, the worker is responsible for reviewing the Disability Supplement for completion. If the recipient has difficulty completing the Disability Supplement, the worker must offer his or her assistance. While all questions are to be answered, there are certain areas to pay close attention to before filing a copy of the Disability Supplement in the case record and submitting the original to the DRU liaison.

- The individual claiming the disability must provide a signature and date in the appropriate area of the Disability Supplement to confirm the authenticity of the information reported. His or her address, social security number and date of birth must also be provided.
- The complete name, address, and telephone number of each physician treating a particular illness must be identified in the appropriate area of the supplement. If more than two physicians are identified, make sure the appropriate section is completed for each physician.
- For each physician's name listed, a separate release of information must be signed and dated by the individual. If more than two physicians are identified, additional copies of the appropriate page must be made. The medical release date must be current or the DRU will not be able to obtain medical records with the release. The individual who is claiming the disability must sign the release unless it is signed by a person who has power of attorney and a copy of the power of attorney is attached.
- Information on the Disability Supplement must be current. Resubmission of a previously approved Disability Supplement is not acceptable.
- The section describing the disabled recipient's impairment must be completed.

Completed Supplement continued

Once the DRU liaison has checked the Disability Supplement for completeness, he or she mails it to:

United Health Care Corp. P.O. Box 5112 Westborough, MA. 01581

Any Disability Supplement that is determined incomplete by the Disability Review Unit will be returned to the local office worker with a copy forwarded to Central Office.

Two Parent Reminder

In a two-parent family, if both parents are disabled and a DRU determination is required for both parents, the EP code must reflect the disability duration of the case head. Keep a tickler file to track the disability duration of the adult dependent. You must send the adult dependent a Disability Supplement and the appropriate cover letter one month prior to the month in which the disability duration period will expire.

In a two-parent family if both parents are disabled but only one requires a DRU determination (i.e., the other parent is on SSI), then the EP Code must reflect the disability duration period of the parent subject to DRU review and you do not have to keep a tickler file on this case.

Control Listing

Local Offices will receive two copies of the TAFDC Expired Supplement Listing which lists each case included in the automated mailing. One copy is for the assistant director for control purposes; the other is for workers to review.

Single Parent: Failure to Return Supplement When a Disability Supplement is not returned by the prescribed date or properly completed, the worker must schedule an appointment with the disabled recipient.

If the Disability Supplement is subsequently completed, forward the information to the DRU liaison who will send the Disability Supplement to the address listed above. Single
Parent:
Failure to
Return
Supplement
continued

If the recipient states that he or she is no longer disabled and chooses not to complete the Disability Supplement, explain to the recipient that the case status will change to nonexempt (unless he or she meets one of the other exempt reasons) and the case is subject to the rules concerning the reduced need and payment standards and time-limited benefits. Change the PACES TD to the appropriate program code and action reason.

Single
Parent:
Failure to
Respond to
Appointment

If the recipient does not respond to the appointment request and does not subsequently complete the Disability Supplement, his or her status must be changed to nonexempt and the case is subject to the rules concerning the reduced need and payment standards and time-limited benefits. Change the PACES TD to the appropriate program code and action reason.

Two Parent: Failure to Return Supplement When a Disability Supplement is not returned by the prescribed date, or it is not properly completed, the worker must schedule an appointment with the disabled recipient and the case head.

If the Disability Supplement is subsequently completed by the appropriate recipient, forward the information to the DRU liaison who will send the Disability Supplement to the address above.

Cases in which the deprivation factor is not affected:

If the recipient claiming the disability is not a parent who establishes the deprivation factor of incapacity and states that he or she is no longer disabled and chooses not to complete the Disability Supplement, his or her status must change to nonexempt, unless he or she meets one of the other exemptions. If the recipient's exemption status changes, review the case status and make any appropriate changes to the program code and action reason.

Cases in which the deprivation factor is affected:

If the recipient claiming the disability is also the person who establishes the deprivation factor of incapacity and states that he or she is no longer incapacitated and chooses not to complete the Disability Supplement, review the case and determine

Two Parents: Failure to Return Supplement continued whether another deprivation factor exists in the case. If so, obtain the appropriate verifications and make the appropriate changes to the case and the PACES TD. If a deprivation factor no longer exists, close the case for action reason 35.

Two Parents: Failure to Respond to Appointment Cases in which the deprivation factor is not affected: If the recipient claiming the disability is not the person who establishes the deprivation factor of incapacity and does not appear for the scheduled appointment, the case status must be nonexempt. Make any appropriate changes to the program code and action reason.

Cases in which the deprivation factor is affected: If the recipient claiming the disability is the person who establishes the deprivation factor of incapacity and does not appear for the scheduled appointment, close the case for failure to provide a completed Disability Supplement (action reason 97), unless the case record indicates that the other parent can establish a deprivation factor for the household. (For example, the other parent is on SSI.)

Questions

If you have any questions, please have your Hotline designee call the Policy Hotline at (617) 348-8478.