

CAF Self-Sufficiency Programs

Authorized Signature

Number: SS-IM-09-020

Issue Date: 6/15/2009

Topic: CAF Self-Sufficiency Programs Administrative Rules Advance Copy (including some Seniors and People with Disabilities programs)

Transmitting (check the box that best applies):

- New Policy
 Policy Change
 Policy Clarification
 Executive Letter
 Administrative Rule
 Manual Update
 Other: _____

Applies to (check all that apply):

- All DHS employees
 County Mental Health Directors
 Area Agencies on Aging
 Health Services
 Children, Adults and Families
 Seniors and People with Disabilities
 County DD Program Managers
 Other (please specify):

Policy/Rule Title:	Various Self-Sufficiency and Seniors and People with Disabilities programs Administrative Rules		
Policy/Rule Number(s):	Various (see below)	Release No:	
Effective Date:	July 1, 2009 (unless otherwise noted)	Expiration:	N/A
References:			
Web Address:	Advance Copy of Rules		

Discussion/Interpretation:

OAR 461-001-0000 about the definitions for Chapter 461 is being amended to state the definition of an electronic application and clarify when an individual in a nursing facility is considered to be in a non-standard living arrangement.

OAR 461-001-0030 about the definitions used in the Oregon Supplemental Income Program (OSIP) and Oregon Supplemental Income Program Medical (OSIPM) programs for long-term care and waived clients is being amended to restate the definition of "eligible dependent".

OAR 461-110-0530 about financial group composition in all of the Department's programs, OAR 461-160-0550 about deductions taken from a client's income when determining adjusted income for clients not receiving Supplemental Security Income (SSI) benefits and living in the community with no children present in the household group (the individuals who live together with or without benefit of a dwelling) in the Oregon Supplemental Income Program (OSIP) and Oregon Supplemental Income Program Medical (OSIPM) programs, and OAR 461-160-0551 about deductions taken from a client's income when determining adjusted income for clients not receiving Supplemental Security Income (SSI) benefits and living in the community with children present in the household group in the OSIP and OSIPM programs are being amended to state correctly which filing group (the individuals from the household group whose circumstances are considered in the eligibility determination process) members are included in the financial group (filing group members whose income and resources count in determining eligibility and benefits) in the OSIP program for clients in standard and nonstandard living arrangements and in the OSIPM program for clients in a standard living arrangement when there is an ineligible spouse included in the filing group. OAR 461-110-0530 also is being amended to

state, for clients in the OSIPM program in a standard living arrangement, that the spouse of the client is considered to be in the financial group for resource determination even if not included in the financial group for income determination. OAR 461-160-0550 also is being amended to remove an unnecessary definition of the term "ineligible".

OAR 461-110-0630 about need group (the individuals whose basic and special needs are used in determining eligibility and benefit level) composition in the Department's programs is being amended to remove references regarding an ineligible spouse's income and clarify need group composition in the Oregon Supplemental Income Program (OSIP) and the Oregon Supplemental Income Program Medical (OSIPM) programs.

OAR 461-115-0050 about when an application to the Department is complete and when a new application is needed is being amended to state when an electronic application is complete and that in the Oregon Supplemental Income Program Medical (OSIPM) program a new application is not required when the client's case closed in the previous month due to failure to pay the cost of care for long term care services or the participant fee for the Employed Persons with Disabilities subprogram unless the Department determines that an application is required.

OAR 461-135-0075 about exceptions to the eligibility limitation period of 60 months in the Temporary Assistance for Needy Families (TANF) program is being amended to add an exemption for months beginning July 1, 2008 in which the individual receiving the grant is experiencing an economic hardship.

OAR 461-135-0415 about the requirement for a client to make a copayment to the day care provider or other satisfactory arrangements with the day care provider in the Employment Related Day Care (ERDC) program is being amended to state clearly who the Department considers as the primary provider.

OAR 461-135-1110 about the eligibility of students enrolled in higher education for the OHP-OPU (Oregon Health Plan coverage for adults who qualify under the 100 percent income standard) program is being amended to add the expected family contribution level, at which some students enrolled in higher education become ineligible for OHP-OPU, for the 2009-2010 school year while removing the information about the 2007-2008 school year.

OAR 461-145-0380 about the treatment of a client's pension and retirement plans is being amended to specify requirements regarding the election of monthly or periodic payments from the plans for clients in the Oregon Supplemental Income Program (OSIP), Oregon Supplemental Income Program Medical (OSIPM), and Qualified Medicare Beneficiary (QMB) programs to comply with federal law. This rule also is being amended to exclude certain annuities purchased by clients with funds from a pension or retirement plan from the definition of pension and retirement plans for clients in the OSIP, OSIPM, and QMB programs.

OAR 461-150-0020 about the use of prospective eligibility and budgeting (the process of calculating the benefit level) for all Department administered Chapter 461 programs is being amended to state that in all programs except the Oregon Health Plan (OHP) program, prospective budgeting is used for annualized income and prorated educational income, remove language about how overpayments are calculated when actual income exceeds anticipated income, clarify the rule language, and add cross references to other rules where terms are defined.

OAR 461-150-0030 about the use of retrospective eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits) and budgeting (the process of calculating the benefit level) is being amended to state that retrospective eligibility and budgeting is used in all programs except Employer Related Day Care and the Oregon Health Plan.

OAR 461-150-0042 about the eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits) and budgeting (the process of calculating the benefit level) methods utilized in the Emergency Assistance program is being amended to include cross-references to other rules for defined terms and to follow Department grammar conventions.

OAR 461-150-0047 about the treatment of income for cases assigned to the simplified reporting system (SRS) is being repealed. The rule's relevant provisions are being relocated to OAR 461-150-0060 and amended to state how different types of income are budgeted.

OAR 461-150-0049 about the use of prospective eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits) and budgeting (the process of calculating the benefit level) in the Employment Related Day Care (ERDC) program is being repealed. The rule's relevant provisions are being relocated to OAR 461-150-0060 and amended to restate how varying types of income are classified and how future income is anticipated.

OAR 461-150-0050 about when the Department uses prospective or retrospective eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits) and budgeting (the process of calculating the benefit level) in the General Assistance (GA), General Assistance Medical (GAM), Oregon Supplemental Income Program (OSIP), Oregon Supplemental Income Program Medical (OSIPM), and Qualified Medicare Beneficiaries (QMB) programs is being amended to state that in ongoing benefit months prospective eligibility and budgeting are used when certain types of income can be anticipated and that in all programs, except the OSIP-EPD and OSIPM-EPD programs, retrospective eligibility and budgeting are used for ongoing months for cases with varying income, non-standard living arrangements, a retrospective liability determination, and the anticipated income varies in a manner making the client periodically ineligible for benefits. This rule also is being amended to clarify language and add cross references to other rules for defined terms.

OAR 461-150-0055 about the budget month (the calendar month from which nonfinancial and financial information is used to determine eligibility and benefit level for the payment month) and countable income in the Oregon Health Plan (OHP) program is being amended to state the budget month for a client reapplying for an OHP program and no longer eligible for his or her current OHP program is the last month of his or her current eligibility period. This rule is also being amended to restate that for an individual joining an OHP program filing group (the individuals from the household group whose circumstances are considered in the eligibility determination process), the budget month is the month in which the individual requests medical benefits. This rule also is being amended to clarify language and add cross references to other rules for defined terms.

OAR 461-150-0060 about the use of prospective or retrospective eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits) and budgeting (the process of calculating the benefit level) in the Employment Related Day Care (ERDC), Food Stamp (FS), Medical Assistance Assumed (MAA), Medical Assistance Family (MAF), Refugee Assistance (REF), Refugee Assistance Medical (REFM), and Temporary Assistance for Needy Families (TANF) programs is being amended to state how and when the Department determines use of prospective or retrospective eligibility and budgeting in those programs and to incorporate the relevant provisions from OAR 461-150-0047 and 461-150-0049 into this rule. This rule is also being amended to state how the Department handles income in the initial month in the FS program for cases assigned to various reporting systems. This rule is also being amended to state that the initial month is included when budgeting income for the ERDC program and in the ERDC program income for the fifth month of the FS certification period is used to determine the income for the seventh and following months in the certification period.

OAR 461-150-0070 about the prospective budgeting of a client's stable income is being amended to state that the rule's provisions do not apply to the Oregon Health Plan (OHP) program, restate how the anticipated future monthly income for a financial group (the filing group members whose income and resources count in determining eligibility and benefits) is calculated based on how frequently the client is paid, and restate that in the Food Stamp (FS) program stable income received less often than monthly is treated as periodic income (income received on a regular basis less often than monthly). This rule also is being amended to clarify language and add cross references to other rules for defined terms.

OAR 461-150-0080 about the prospective budgeting (the process of calculating the benefit level) of variable earned or unearned income for all clients, except those in the Oregon Health Plan program and those assigned to the monthly reporting system, is being amended to restate how variable income is treated in the prospective eligibility (the decision as to whether an individual qualifies, under financial and nonfinancial requirements, to

receive program benefits) and budgeting processes. This rule is also being amended to clarify language and add cross references to other rules for defined terms.

OAR 461-150-0090 about converting contracted and self-employment income to an annualized amount in the prospective budgeting (the process of calculating the benefit level) process is being amended to state that this rule does not apply to the Oregon Health Plan (OHP) and Refugee Assistance Medical (REFM) programs, what constitutes self-employment income, how contract income is treated, and how contract income is converted into an annualized amount.

OAR 461-150-0100 about the use of prospective budgeting (the process of calculating the benefit level) for the initial month of benefits for a destitute filing group in the Food Stamp (FS) program is being amended to clarify language and add cross references to other rules for defined terms.

OAR 461-155-0190 about the income and payment (benefit amount) standards in the Food Stamp (FS) program is being amended to reflect increases in the Food Stamp Payment Standards (Thrifty Food Plan). The increases were made effective April 1, 2009 via temporary rule to comply with the passage of the federal American Recovery and Reinvestment Act of 2009, and this amendment makes the temporary rule changes filed April 1, 2009 permanent.

OAR 461-155-0250 about the income and payment standards in the Oregon Supplemental Income Program (OSIP) and Oregon Supplemental Income Program Medical (OSIPM) programs is being amended to make permanent a temporary rule change adopted on March 1, 2009, reflecting the annual change in the adjusted income standard based on the federal poverty level for the OSIP-Employed Persons with Disabilities (OSIP-EPD) and OSIPM- Employed Persons with Disabilities (OSIPM-EPD) programs. This rule is also being amended to remove current rule language related to annual standards so that that language will not need to be amended each year when the program standards change.

OAR 461-155-0290 about the income standards in the Qualified Medicare Beneficiaries - Basic (QMB-BAS) program, OAR 461-155-0291 about the income standards in the Qualified Medicare Beneficiaries - Disabled Worker (QMB-DW) program, and OAR 461-155-0295 about the income standards in the Qualified Medicare Beneficiaries - Specified Limited Medicare Beneficiary (QMB-SMB) and Qualified Medicare Beneficiaries - Qualified Individuals (QMB-SMF) programs are being amended to reflect the annual changes in the income standards based on changes to the federal poverty level. These amended rules will make permanent the temporary rule changes adopted effective April 1, 2009.

OAR 461-155-0660 about how an accommodation allowance for a special need is determined for clients in the Oregon Supplemental Income Program (OSIP, assistance to seniors and people with disabilities) and Oregon Supplemental Income Program Medical (OSIPM) programs receiving in-home long-term care services is being amended to replace the term "original purchase money mortgage" with the term "property agreement", define the term "property agreement", and clarify how to calculate the special need allowance amount.

OAR 461-160-0300 about use of income to determine eligibility and benefits and OAR 461-170-0150 about the anticipating with periodic review reporting system for clients in the Employment Related Day Care (ERDC) program are being amended to make technical and grammatical changes only and correctly cross-reference the relevant administrative rule. OAR 461-160-0300 is also being amended to replace the term "Division" with "Department".

OAR 461-160-0620 about the standards used to calculate how much of the client's income can be diverted to a community spouse for clients in the Oregon Supplemental Income Program Medical (OSIPM) receiving long-term care or waived services is being amended to reflect the annual federal increase in the minimum maintenance need and shelter standards.

OAR 461-165-0010 about the legal status under Oregon law of benefit payments made in programs covered by Chapter 461 administrative rules, OAR 461-165-0130 about when the Department may send benefit payments out of state, OAR 461-165-0140 about the endorsement of benefit checks and the survivorship of benefits when the recipient passes away, OAR 461-195-0501 about definitions for overpayments and intentional program violations, and OAR 461-195-0621 about intentional program violations and the penalties

and liabilities for overpayments are being amended to remove language about and references to Food Stamp (FS) program coupons. OAR 461-165-0010 also is being amended to state how long FS program benefits issued by Electronic Benefit Transfer (EBT) card remain available for client use and when unused benefits on an EBT card are expunged (made no longer available for client use). OAR 461-165-0130 also is being amended to state that the Department does not send FS program benefits to a client outside the state of Oregon.

OAR 461-165-0060 about the minimum benefit amount provided to eligible clients in the Food Stamp (FS) program is being amended to indicate that when the FS benefit allotment for a benefit group (the individuals who receive benefits) would be less than ten dollars a month the benefit group is not eligible to receive benefits in the initial month of benefits. This rule also is being amended to make the temporary changes effective April 1, 2009 permanent.

OAR 461-193-0650 about countable income for the Refugee Case Services Project is being repealed as the topic is now covered in another administrative rule in this division of rules.

OAR 461-195-0521 about methods for calculating overpayments (benefits paid to a client in error which the client needs to repay to the Department) is being amended to state that the difference in the Food Stamp program between the Thrifty Food Plan benefit amount put into place as of April 1, 2009 in response to passage of the federal American Recovery and Reinvestment Act of 2009 and the Thrifty Food Plan benefit amount in effect on March 31, 2009 is not included when calculating overpayment amounts. These changes were made in the temporary rule filed effective April 1, 2009 and this rule is also being amended to make the temporary rule changes filed April 1, 2009 permanent. This rule is also being amended to state when a Post-TANF program grant credit is allowed against an overpayment caused by reported earned income in the Temporary Assistance to Needy Families (TANF) program. This rule is also being amended to state when an overpayment in the prospective budgeting (the process of calculating the benefit level) process is a client error overpayment. This rule is also being amended to state that when an overpayment in the General Assistance (GA), Oregon Supplemental Income Program (OSIP), Refugee Assistance (REF), State Family Pre-SSI/SSDI (SFPSS), or TANF programs is due to Department error there is no corresponding medical program overpayment if the client had been eligible for medical benefits under certain other programs.

Implementation/Transition Instructions: N/A

Training/Communication Plan: N/A

Local/Branch Action Required: Review changes with staff who determine eligibility.

Central Office Action Required: N/A

Field/Stakeholder review: Yes No

If yes, reviewed by: Most of these rules were reviewed by the CAF Office of Self-Sufficiency Programs Rules Advisory Committee

Filing Instructions:

The filing instructions will be available with July's CAF Administrative Rules Manual release.

If you have any questions about a policy, contact:

Contact(s):	See the Contact List in the Family Services Manual (section C of the Introduction chapter) for the appropriate analyst to contact with policy questions (http://www.dhs.state.or.us/policy/selfsufficiency/em_firstpage.htm).		
Phone:		Fax:	
E-mail:			