



# March 2012 On Target

## March '12 Contributors

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## Aligning Medical and SNAP Program End-Dates Q&A

In the MAA, MAF, OPC, OP6, OPU and CHIP programs, redeterminations may be done early if it is at the time of a SNAP recertification. This allows the medical program 12-month end date to match the client's SNAP 12-month certification end date.

**Question:** *My client's SNAP certification ended on 12/30/11, and they reapplied on 01/03/12. They have ongoing medical benefits. Can I redetermine medical eligibility and align the program end-dates?*

**Answer:** No. In this example the budget month for both programs would be January. The SNAP certification period would be 01/01/12 - 12/31/12 and the new medical eligibility period would be 2/1/12-1/31/13. The resulting program end-dates are not aligned. This is not a scenario when the medical could be redetermined.

Redetermining medical to align with SNAP is only an option at SNAP *recertification*. Since the client's SNAP filing date is after their SNAP certification ended it's no longer considered a recertification.

**Question:** *My client is reapplying for SNAP in the last month of their certification period, and I want to process an early redetermination for medical to align the end-dates. But, their income has gone up enough to increase the premium amount. Should I still do it?*

**Answer:** Yes, even if it increases the client's premium amount, an early redetermination for the sake of end-date alignment is an option. Timely notice of this change is not required.

**Follow-up question:** *I spoke with my client before I processed the redetermination, and they expressed that they're afraid they could not afford an increased premium yet, and it may cause economic hardship. Since I already started the process, do I have to process the redetermination?*

**Answer:** The decision to redetermine the medical program case is up to the worker. The worker may choose not to redetermine the medical companion case when establishing a 12-month SNAP certification. If you've already narrated that you were redetermining the medical benefits, make sure to narrate clearly why it was not completed.

**Question:** *I want to process an early redetermination of medical benefits, but my client has past-due premiums. What should I do?*

**Answer:** When a case is being redetermined to align medical and SNAP eligibility periods and there are past due premiums, take the following steps:

- Pend for payment of past due premiums
- If premiums are not paid by pend due date allow the current medical eligibility period for everyone on the case to remain as is.
- If premiums are paid by pend due date update everyone on the case with a new 12 month eligibility period.

**Note:** *If a client is pended for any information necessary to process a medical redetermination, and does not respond, do not close OPC, OP6, CHP, or OPU medical benefits.*

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## (continued from page 1) Aligning Medical and SNAP Program End-Dates Q & A

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**Question:** *I am processing an early medical redetermination to align the end-date with SNAP. The household's current income would put the OHP-OPU adults over the income limit. Should I still redetermine benefits?*

**Answer:** No. If the new redetermination decision results in ineligibility, allow the ongoing OPC, OP6, CHIP and OPU certifications to remain as-is.

**Note:** *If the new redetermination decision results in ineligibility for MAA/MAF program recipients, workers will need to act on the new information and convert to the appropriate program or close.*

**Question:** *I am processing an early medical redetermination to align the end-date with SNAP. Based on budget month income, the children would move from the OHP-OPC program to OHP-CHP. Would this be a reduction in benefits?*

**Answer:** No, this is not a reduction in benefits as OPC and CHP are both Plus level benefits. If clients are eligible for the same or a higher level of benefits, new MAA, OPC, OP6, and CHIP 12-month eligibility periods may be established.

**Question:** *My client is reapplying for SNAP in February, 2012. His medical benefits were just redetermined two months ago, and his current program end date is December, 2012. Is it too soon for me to redetermine medical benefits again?*

**Answer:** It's not too soon! You can redetermine medical benefits to align with SNAP when you are recertifying a SNAP case. There is no minimum or maximum requirement regarding the amount of time the client has been in their current eligibility period.



**Question:** *My client reapplied for medical benefits in the last month of her eligibility period. Her SNAP benefits do not expire for another 7 months. Can I just redetermine her medical benefits for a 7 month eligibility period to align with the SNAP end-date?*

**Answer:** No. The decision to align the certification periods is based on the date of the SNAP recertification. When a client is recertifying their SNAP benefits the medical can be redetermined at the same time. The result is a new 12-month period for medical which aligns with the recertified SNAP case. Medical benefits cannot be given less than a 12-month eligibility period when a redetermination is processed.

SSP Medical Analysts

### JPI Saves the Day!

Job Participation Incentive (JPI) was launched as a primary strategy for boosting our TANF participation rate. JPI provides eligible families another \$10 per month in food benefits. We must enroll 20,000 families in JPI by September 2012 to potentially avoid penalties from the federal government for not meeting TANF participation rate requirements in 2007.

To move us closer to the goal, a new team was put in place called the JPI Statewide Enrollment Team (JSET). Instead of sending all cases on the JPI Potential Eligible list and JPI Alert list back to the field for review, the JSET team reviews and codes the majority of cases on these statewide lists.

**BUT, we still need YOU!** Screening for JPI eligibility and coding those that qualify into JPI need to be a daily priority in SSP.

1. Screen new clients for JPI when determining SNAP eligibility. When JPI eligible, be sure to code the case with JPI on **both** the **FS** and **CM** screens.
  - If the coding is not on **both** screens, the case will **NOT** be counted toward our TANF participation rate.
2. Screen and recheck JPI eligibility at recertification and interim change report periods.
  - Again, be sure coding is updated on **both** **FS** and **CM** screens either to remove the case from JPI or to enroll the case in JPI.

Your attention to JPI is **appreciated** and **critical** for protecting our TANF program from federal penalties!

For more information please see the following resources:

**SS-IM-12-007** (<http://www.dhs.state.or.us/policy/selfsufficiency/publications/ss-im-12-007.pdf>) regarding the Statewide project.

**JPI Staff Tools Page** (<https://inside.dhsoha.state.or.us/dhs/ss-program-changes-11-13/ssp-home/ssp-articles/1836-snap-stipend.html>)

**JPI Online Training** (from Learning Center search for JPI or course C02955)

Jeremy Steele, Field Services Analyst

**Question?** What date should you use for the first JPI issuance?

**Answer:**

- Ben MO-YR: should ALWAYS be the month eligibility began.
- The amount of the issuance should depend on how many months are needed from JPI eligibility month to month of data entry.

**Example A:** If you are coding a case in March that cleared JPI eligibility in March, then '0312' should be your 'Ben MO-YR:' entry and \$10 EN issuance should be made. April JPI issuance will issue automatically.

**Example B:** If you are starting a case in March 2012 but client cleared eligibility for JPI based on January 2012 information then '0112' should be your 'Ben MO-YR:' entry and \$30 EN issuance should be made (this covers the Jan, Feb, and Mar benefit period).



*Jeremy Steele, Field Services Analyst*

### **Update: How do SSP and OHA get information on child support cases that are restricted from view because of a safety issue?**

In the February 2012 On Target, we provided information on how to get information on child support cases coded claim of risk (COR), good cause for noncooperation with support (GC) or Address Confidentiality Program (ACP). We recently learned that the person who requested the COR, GC or ACP has the option to authorize DCS to release information to DHS or OHA. For updated information, please see italicized text below.

To get information on these cases, workers can:

- When a case is coded COR or ACP, have the client complete and sign the MSC 2099 authorizing the access and use the CSP website. (Information on cases coded GC is not available on the CSP website.)
- Contact the DCS worker, branch office or appropriate DCS point person.

*Note: DCS cannot give DHS or OHA information about the person on the child support case who requested the COR, GC or ACP unless the person who requested the safety option authorizes the DCS worker to release information to DHS or OHA. DHS or OHA may ask the person who requested the safety option to contact DCS to authorize DCS to release information. Authorization may be done over the phone as long as DCS can verify the caller is the person who requested the safety option.*

When the person who requested the safety option has not authorized DCS to release information to DHS or OHA, DCS can still give DHS or OHA information, including payment information, when it is not about the person on the child support case who requested COR, GC or ACP. (For example, TANF recipient Cindy has COR on her child support case. DHS contacts DCS to find out how much support Cindy has received. DCS tells DHS they cannot give DHS this information because Cindy asked for COR. DHS then asks how much support the obligor on this case paid to DCS. DCS tells DHS the obligor paid \$110 last month and the \$60 of this payment was applied to the state account. (The "state account" means the amount of a payment that was kept by the state.) The DHS worker knows, then, that last month Cindy received \$50 of the \$110 payment.)

- Ask the client to provide the information that is needed.
- Remember: DHS and OHA do not need to have an authorization for release of information completed to get information about a client from a DCS worker. An authorization is needed only when DHS or OHA is accessing the CSP website for client information.



*Amy Sevdy, TANF Analyst*



# February 2012 Targeted SNAP Reviews 100% Accuracy Honor Roll

0310 Canby SPD	1513 Medford SSO	2311 Ontario SPD
0913 LaPine SPD	1611 Prineville SPD	2701 Dallas SSP
1211 John Day SPD	1702 Cave Junction SSP	2711 Dallas ADS
1301 Burns SSP	1802 Lakeview SSP	3004 Milton-Freewater SSP
1404 Refugee Branch	1911 Woodburn ADS	3102 Enterprise SSP
1406 Teen Parent SSP	2111 Toledo ADS	3111 LaGrande SPD
1505 Rogue Family Center	2201 Albany SSP	3211 Florence ADS

## 90% or Better

98.00 D4 Processing Center	2203	94.74 St. Johns SSP	2601	90.91 North Clackamas SSP	0303
97.14 Corvallis SSP	0201	94.12 Bend SPD	0911	90.00 Astoria SSP	0401
96.43 Lebanon SSP	2202	94.00 South Salem SSP	2401	90.00 Metro Processing Ctr	1403
96.00 SE Portland ADS	1418	93.33 Baker City SPD	0111	90.00 West Eugene SSP	2002
96.00 Portland Mid-Area ADS	3515	93.33 Warrenton ADS	0411	90.00 Cottage Grove SSP	2003
96.00 East Multnomah ADS	3518	93.33 Hermiston SPD	3013	90.00 Newport SSP	2101
95.56 Eugene LCOG ADS	2011	92.00 Hillsboro SPD	3411	90.00 Santiam Center	2404
95.00 Integrated Services SSP	0702	91.30 Beaverton SPD	3417	90.00 Florence SSP	3201
95.00 Pendleton SSP	3001			90.00 Tigard SSP	3403

## Get Those Primes Merged

Duplicate prime numbers continue to present problems and can affect our client's ability to access care. Due to changes in some systems including MMIS and OR-Kids, the process of merging primes has changed!

The Client Maintenance Unit (CMU) will merge all medical primes. Your two options are:

- Contact the Service Desk to merge the two prime numbers (a ticket will be created and sent to CMU). OR...
- Contact CMU directly: Phone: 503-378-4369, Fax: 503-373-0357 or email: MAINTENANCE Client (client.maintenance@state.or.us)

Remember, if there are open medical benefits on both prime numbers, eligibility needs to be closed on one of the primes before they can be merged.

More good news! Check out the new [MSC 0148](#) form. There is a new "button" at the top of the pdf form, "Submit email." You will now be able to complete the form, click the button, and an email with your 148 form attached will automatically go to CMU.

*Client Maintenance Unit*

## Time Saving Tips from Client Maintenance

Using WEBM, FIND to Locate Clients: To prevent duplicate primes and erroneous information WEBM, FIND should always be used before setting up or adding anyone to a CM or SNAP case. Workers should WEBM, FIND:

1. The client's social security number
2. The client's First and Last Name. If they have two last names search for both sets, for example:
  - o Joshua Jackson Smith - Search Jackson Smith and Smith Jackson, or
  - o Search without the space in the person's name. i.e.: JacksonSmith

This will save you an enormous amount of time in the long-run.





# February 2012 Targeted Medical Reviews 100% Accuracy Honor Roll

0201	Corvallis SSP	1404	Refugee Branch	2801	NE Portland SSP
0701	Alberta SSP	1502	South Valley SSP	3001	Pendleton SSP
0702	Integrated Services SSP	1503	D8 Processing Center	3003	Hermiston SSP
0903	LaPine SSP	1602	Madras SSP	3004	Milton-Freewater SSP
1002	South Umpqua Center	1603	Warm Springs SSP	3005	Boardman SSP
1102	Gateway Center	1802	Lakeview SSP	3102	Enterprise SSP
1201	John Day SSP	2003	Cottage Grove SSP	3201	Florence SSP
1301	Burns SSP	2203	D4 Processing Center	3302	Hood River SSP
1402	New Market Theater	2301	Ontario SSP	3403	Tigard SSP

## 90% or Better

96.55	Springfield SSP	1101	93.33	Newport SSP	2101	90.00	Grants Pass SSP	1701
96.55	Klamath Falls SSP	1801	93.33	Dallas SSP	2701	90.00	Cave Junction SSP	1702
96.43	McKenzie Center	2001	93.10	North Clackamas SSP	0303	90.00	Lebanon SSP	2202
95.83	Gresham SSP	3502	92.86	West Eugene SSP	2002	90.00	Santiam Center	2404
95.45	Woodburn SSP	1901	92.00	SE Portland SSP	1401	90.00	St. Johns SSP	2601
95.00	Medford SSP	1501	91.18	Oregon City SSP	0302	90.00	The Dalles SSP	3301
94.44	Keizer SSP	2405	91.18	North Salem SSP	2402	90.00	Hillsboro SSP	3402

## Ideas for using the New TANF / EBT Out of State Usage Report

Have too many reports already?? Read on. I think you'll like what you hear.

The TANF / EBT Out of State Usage Report is a new report created by the Office of Business Intelligence. Yes, that is the real name of the restructured data unit. To earn their title, OBI is working hard to cross-reference and refine data so that we can get maximum benefit from a minimum investment of time.

The TANF report referenced here is a prime example. Branches will be looking over a carefully screened, handful of cases where TANF clients have been using their EBT cards out of state consistently for over two months. The goal is to re-engage the client if possible or close the case promptly if the client has moved.

The TANF unit has also come up with some suggestions for handling this report. (Policy does not enable staff to close a TANF case merely because the individual is using their EBT card in another state.)

- Attempt a home visit to the residence of record in Oregon
- Send an appointment letter requesting an in-person meeting
- If there are school aged children, contact the school to see if the children are attending
- Call the other state in question to see if benefits are being received in that state as well
- If the client is in a current JOBS plan (or should be), start the re-engagement process!



Thanks to Lisa Buss (TANF Analyst), Carole Cole and her OBI Team and Dave Flock (D15 Program Manager) for their involvement in the TANF reports initiative and for input to this article!!

*Matthew Bogart, Program Accuracy Manager*