NC Division of Aging and Adult Services CHANGE NO. 04-10

DATE: August 30, 2010

Manual: State/County Special Assistance

Subject: Special Assistance Program Manual Updates

To: County Directors of Social Services

Effective: September 1, 2010

I. BACKGROUND

The Special Assistance for the Blind Program (SAB) is being consolidated with the State/County Special Assistance for Adults (SA) Program. The SAB Program, formerly administered by the Division of Services for the Blind, will now be administered by the Division of Aging and Adult Services effective September 1, 2010. This change was enacted by the North Carolina General Assembly in Session Law 2010-31 (Senate Bill 897), which was ratified on June 30, 2010. This policy change incorporates SAB policy with SA policy. SA payments can be made to individuals of *any age* who are legally blind and meet other SA eligibility criteria. The consolidated SA Program name has been statutorily changed from State/County Special Assistance for Adults to State/County Special Assistance to accommodate the addition of individuals under the age of 18.

Significant changes have been made to SA-3210, Income, to provide additional instructions and background information to work with applicants and recipients (a/rs) who have income less than the SSI Federal Benefit Rate (FBR).

The Eligibility Information System (EIS) now accommodates the entry of authorized representative information enabling the system to send automatic notices to the authorized representative in addition to the a/r. This was addressed in DAAS Administrative Letter 10-14. Applicable policy sections now state in the introduction that all references to the a/r also apply to the a/r's authorized representative.

II. CONTENT AND IMPLEMENTATION OF CHANGE

Reissued manual sections listed below are effective September 1, 2010.

- A. These changes affect all policy sections. Unless noted in B.-K. below, the policy section has been replaced with these changes only.
 - 1. Statutory program name change to State/County Special Assistance (dropping the "for Adults").

- 2. The term "SA adult care home (ACH)" has been replaced with "SA facility".
- 3. When instructing the county to send a notice of approval the form has been changed from the DSS-8108 to the DMA-5002. The DMA-5002 addresses SA and SA/IH. However, if a DSS-8108 has been used in the past this will not be considered an error as long as the action taken is clearly stated and the reason for the action is correctly referenced to SA policy.

B. SA-3000 Acronyms and Definitions

- 1. <u>SA-3000 I</u>: Added the acronym for medical care special (MCS).
- SA-3000 I: Changed the acronym SA/ACH (State/County Special Assistance for Adults) to S/C SA (State/County Special Assistance.)
- 3. <u>SA-3000 II</u>: Updated the definition for ambulation capacity codes to include "E" for exempt, and "M" for medical care special.
- 4. SA-3000 II: Added the definition for authorized representative.
- 5. <u>SA-3000 II</u>: Updated the definition of the Division of Services for the Blind.
- 6. <u>SA-3000 II</u>: Updated the definition of domiciliary or adult care home level to include assisted living.
- 7. SA-3000 II: Clarified the definition of earned income disregard.
- 8. SA-3000 II: Clarified the definition of economic unit.
- 9. <u>SA-3000 II</u>: Added "assisted living facility" to the definition of the FL-2.
- 10. <u>SA-3000 II</u>: Added the definition for medical care special ambulation capacity code "M".
- 11. SA-3000 II: Revised the definition for SAD.
- 12. <u>SA-3000 II</u>: Replaced "adult care home" with "assisted living" in the definition of Special Assistance In-Home and State/County Special Assistance.
- 13. <u>SA-3000 II</u>: Added the word "applicant" to the definition of special care unit (SCU).

C. SA-3100 Eligibility Requirements

- SA-3100 II: Added eligibility requirements to include persons of any age who are legally blind. Reorganized the section removing the part listing eligible facilities. Eligible facilities are now listed in III.
- 2. <u>SA-3100 II. A. 2</u>: Added that a/rs who are legally blind and under age 65 may be SA eligible.
- 3. <u>SA-3100 III</u>: Added specialized community residential centers to this list to accommodate children who are legally blind and under age 18 residing in these facilities.
- 4. <u>SA-3100 IV</u>: Renamed the section "Valid FL-2 Requirement" and consolidated FL-2 material from SA-3110 Application Process, and SA-3320 Redetermination of Eligibility, making this the primary source for FL-2 instructions. Replaced the word "current" with "valid" in reference to the FL-2/MR-2 throughout the section.
- 5. <u>SA-3100 IV. A</u>: Changed the policy requiring the FL-2/MR-2 for all applications to be dated no more than 90 days prior to the application date. Policy now allows FL-2?MR-2 to be dated no more than 12 months prior to the application processing deadline when an applicant already resides in an SA facility prior to the date of the SA application and has a valid FL-2/MR-2.
- 6. <u>SA-3100 IV. B</u>: Provided instructions for use of a tickler file to better track FL-2 due dates during the payment review period for ongoing cases.
- 7. SA-3100 V. B. 4: Explains that if under age 18 the a/r must have established that he/she is legally blind and must reside in a specialized community residential center. It also explains that a child is eligible to receive SA in a specialized community residential center only until he/she turns 18. At age 18, he/she may be eligible for SA in an adult care home or other adult SA facility if he/she continues to meet all other SA requirements.

D. SA-3110 Application Process

1. <u>SA-3110 I. A.</u>: Added a disclaimer to state that throughout SA Policy any references to the a/r also always apply to the a/r's legally authorized representative.

- 2. <u>SA-3110 I. A 2 and 2. a. h</u>: Added the definition of a legally authorized representative that can be identified in EIS by the new authorized representative codes. Provided the list of legally authorized representatives and the corresponding EIS codes. Provided an example of the authorized representative hierarchy.
- 3. <u>SA-3110 IV. H. and J:</u> Removed detailed instructions regarding completion of the FL-2/MR-2 and linked to the new consolidated instructions in SA-3100.
- 4. <u>SA-3110 V. B.2.a:</u> Added instructions for certain situations when applicant has been denied SSI/RSDI and the appeal time frame has lapsed.
- 5. <u>SA-3110 V. B.2.b</u>: Added instructions on when to require the applicant to appeal the SSI/RSDI denial when the SSI/RSDI appeal time frame has not lapsed.
- 6. <u>SA-3110 V. B.2.b:</u> Added a note to clarify that SA does not pend applications during the SSI/RSDI appeal process.
- 7. <u>SA-3110 VI. B. FL-2/MR-2 Requirements</u>: Removed detailed instructions regarding FL-2/MR-2 and linked to the new consolidated instructions in SA-3100.
- 8. <u>SA-3110 VIII. D. 5</u>: Added instructions for when a determination of legal blindness is needed because SSI will not make the determination.
- 9. <u>SA-3110 XIII. A</u>: Added clarification that a/rs must not be required to travel to the county of residence to place an SA application.

E. SA-3120 EIS Instructions for SA

- 1. <u>SA-3120 II</u>: This is a new section explaining the purpose of the authorized representative screen, listing the allowable types of authorized representative, and the corresponding EIS codes. An example of the authorized representative hierarchy order is provided.
- 2. SA-3120 III. A: Updated the SA Basic rate to \$1,182.
- 3. <u>SA-3120 III. C. 5</u>: Added instructions for computing the new variable maintenance amount for "M" recipients with medical care special expenses. A link has been added to the new <u>DAAS-8190S</u>, <u>Attachment A</u> and <u>DAAS-8190NS</u>, <u>Attachment A</u>, Ambulation Code "M" Cases Verification of Eligibility/Budget form.

- SA-3120 IV. D: Added Code 57 for specialized community residential centers. These are referred to as mental health facilities.
- 5. <u>SA-3120 VI. C</u>: Added ambulation capacity code "M" description.
- 6. <u>SA-3120 VIII. A. and B</u>: Added ambulation capacity code "E" and "M" to instructions regarding when a case may or may not be transferred from one ambulation type to another.
- 7. <u>SA-3120 VIII. A. and B</u>: Added instructions to use the DB/PML screen to request replacement Medicaid cards and a link to EIS-3105.

F. SA-3200 Resources

<u>SA-3200 I. B.4.b.2</u>: Clarifies that the base period can be no later than the last month of the current payment review period during which the redetermination process is initiated.

G. SA-3210 Income

This change revamps the entire format of SA-3210 by adding new sections and adding to and revising existing sections. These major changes are found in I-IX. The changes provide additional information, clarification and instructions for identifying and working with a/r's with incomes less than the FBR.

- SA-3210 II: Provides background on how SSI determines the SSI payment eligibility and amount; clarifies when SSI applies a \$20 income exclusion; explains why cases appear on CSDW FBR Screening Report.
- 2. <u>SA-3210 IV and V</u>: Updates the list of commonly occurring situations when income is less than the FBR, and the instructions on each situation, including situations involving married couples, ownership of life insurance with face value/cash value making a/r's ineligible for SSI, 1619, SSI/SSA recoupment situations, and living arrangement issues.
- 3. <u>SA-3210 VI</u>: Provides detailed instruction on working with a/rs with income less than the FBR. This section provides new guidance on working with a/r's with SSI/RSDI recoupment, special instructions are updated for married couples not receiving the individual FBR.

- 4. <u>SA-3210 VI. E. 5</u>: Clarifies that if a married individual(s) living with his/her spouse applies for SA/IH and the couple's total countable monthly income (TCMI) is at or above the SSI couple FBR, do not require the applicant to apply for the individual SSI FBR.
- 5. <u>SA-3210 X. E. 1.c.Example 2</u>: Changed recoupment example from 10% of SSI to \$10.
- 6. <u>SA-3210 X. E. 2. Example 1</u>: Added clarification regarding the \$20 exclusion and how to key in EIS.
- 7. <u>SA-3210 X. E. 2. Example 2</u>: Added an example of a SSI Income and VA needs based pension and no earned income
- 8. <u>SA-3210 XII. C.13</u>: Provides detailed explanation of Veteran's benefits and which specific Veteran's benefits are/are not subject to a \$20 general exclusion.

H. SA-3220 Budgeting Principles

- SA-3220 II. D. 2: This is a new section with an explanation of the "M" variable maintenance amount and includes budget examples for "M" cases. A link has been added to the new DAAS-8190S Attachment A or DAAS-8190NS, Attachment A, Ambulation Code "M" Cases Verification of Eligibility/Budget form.
- 2. <u>SA-3220 II. E. 5</u>: Added an explanation of the income limits and payment for ambulation capacity code "E" recipients.
- 3. <u>SA-3220 II. E. 6</u>: Added an explanation of income limits for ambulation capacity code "M" recipients.
- 4. <u>SA-3220 III. B</u>: Added budget examples for "E" and "M" cases, and a note regarding loss of "E" status if the SA case is terminated.

I. SA-3230 Age

- 1. <u>SA-3230 A</u>: Reformatted and removed the requirement for the a/r to be at least age 18.
- 2. <u>SA-3230 A. 2</u>: Removed the requirement that the a/r must be at least age 18. Added that a/rs under age 18 must have legal blindness established.
- 3. <u>SA-3230 A. 2</u>: Added a note to explain that a child is eligible to receive SA in a specialized community residential center only until

he/she turns 18. At age 18, he/she may be eligible for SA in an adult care home or other adult SA facility if he/she continues to meet all other SA requirements.

J. SA-3250 Residence

- 1. <u>SA-3250 II, A. 6. b. (2)</u>: The list of all the State facilities that fall under G.S 122C-181 has been updated.
- 2. <u>SA-3250 II. B. 2. b. (1)</u>: Explains the county of residence for a child under age 18 who is in the custody of the county DSS.
- 3. <u>SA-3250 II. B. 2. b. (2)</u>: Explains the county of residence for an adult who turns 18 and becomes the ward of a county DSS when guardianship is established.

K. SA-3320 Redetermination of Eligibility

- 1. <u>SA-3320 II. A</u>: Added that the FL-2/MR-2 must be placed in the eligibility file, and can be signed by a physician assistant, or nurse practitioner in addition to a physician. Provided a link to SA-3100 for complete instructions on the FL-2/MR-2.
- 2. <u>SA-3320 II. B</u>: Removed detailed instructions regarding the FL-2/MR-2 Added a link to SA-3100 for a list of SCU diagnoses.
- 3. SA-3320 II. C: Replaced "current" with "new valid" FL-2/MR-2.
- 4. <u>SA-3320 IV</u>: Added this section to instruct IMCs to request verification of the MCS expenses for "M" recipients prior to the redetermination interview via the DMA-5097, and lists acceptable verifications. A link is provided to <u>SA-3320 Figure 1</u>, MCS Medical Expense Form. Instructions are provided on how to compute the monthly MCS expense.

III. DAAS ADMINISTRATIVE LETTERS OBSOLETED BY THIS POLICY

DAAS Administrative Letter 09-21, Reduction in the Special Assistance Adult Care Home (SA/ACH) Basic Rate and Maintenance Amount for Ambulation Capacity Code "E" Cases.

IV. MAINTENANCE OF MANUAL

- A. The following manual sections are reissued to reflect only changes noted in II. A. above:
 - 1. SA-3205 Transfer of Resources
 - 2. SA-3240 Citizenship and Identity
 - 3. SA-3300 Administration of Checks and Payments
 - 4. SA-3310 Changes in Situation
 - 5. SA-3400 Automated Inquiry and Match Process
 - 6. SA-3410 Recipient Fraud
 - 7. Appendix C Special Assistance to the Certain Disabled
- B. The following manual sections are reissued to reflect the mandated requirements listed in II. B.- K. above:
 - 1. SA-3000 Acronyms and Definitions
 - 2. SA-3100 Eligibility Requirements
 - 3. SA-3110 Application Process
 - 4. SA-3120 EIS Instructions for SA
 - 5. SA-3200 Resources
 - 6. SA-3210 Income
 - 7. <u>SA-3210 Figure 1</u>, Referral to SSA for Waiver or Reduction of Overpayment Recoupment
 - 8. SA-3220 Budgeting Principles
 - 9. SA-3230 Age
 - 10. SA-3250 Residence
 - 11. SA-3320 Redetermination of Eligibility
 - 12. DAAS-8190S Attachment A
 - 13. DAAS-8190NS, Attachment A
 - 14. SA-3320 Figure 1, MCS Medical Expense Form

If you have any questions regarding this information, please contact your <u>Adult Programs Representative</u>.

Sincerely,

Suzanne P. Merrill, Chief Adult Services Section

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