700.1 Eligibility Determination

A. The initial determination of eligibility is not permanent. The local department must redetermine the recipient’s eligibility at regular intervals.

B. Redetermine eligibility at least once a year.

C. Interim changes are changes that occur between redeterminations. If a change or a combination of changes occur that in the judgement of the worker or supervisor warrants a review of the case situation, a full redetermination may be done.

D. An adverse action is a decision to reduce or terminate a PAA grant.

700.2 The Redetermination Process

A. Use redetermination, the procedure for reviewing eligibility, to determine:
   1. Continued eligibility
   2. Changes in grant amount

B. Assign a period of eligibility (redetermination period) when the initial eligibility is determined.

C. Redetermine eligibility annually in most cases.

D. Recertify less than annually if circumstances warrant.

E. The case manager must complete the redetermination process before the certification period ends (because the case automatically closes on CARES) by taking the following steps:
   1. Notifying customers or authorized representatives that determining continued eligibility is required to certify them for a new certification period, and
   2. Providing a redetermination application and all necessary forms, and
   3. Scheduling a new appointment date for an interview, unless waived, if the date set by CARES is not acceptable to the case manager or customer, in time to provide uninterrupted benefits.

F. Follow the procedures for determining initial eligibility with the following exception; do not duplicate documentation for any factors that cannot change such as Social Security numbers and birth certificates.
G. Evaluate all technical and financial eligibility factors, concentrating on those that are more likely to change during certification periods.

H. Verify:
   1. Income
   2. Assets
   3. Questionable information

I. Allow the customer or authorized representative sufficient time to provide required verification prior to the end of the certification period that:
   1. Ensures no break in benefits for an eligible customer occurs, and
   2. Notify an ineligible customer prior to the end of the certification period

   **Note:** The method used in redetermining eligibility is very similar to that used in the application process.

### 700.3 Interim Change

A. An interim change is any change occurring in a recipient’s circumstances between the application and redetermination, or redetermination and redetermination. Such changes are generally related to the eligibility status of the grant.

B. It is the responsibility of the recipient or authorized representative to report any changes in the customer’s allowable needs, income or resources.

C. As much as possible, the case manager should anticipate changes in the recipient’s income and resources.
   1. For example, set an alert for follow-up on cases with recipients whose resources are close to the allowable limit.
   2. Cases with customers who receive pensions or benefits other than Social Security need to be reviewed at the time that those benefits change.

### 700.4 Interim Change Process

A. Customers must report changes that affect eligibility or the amount of the benefit within 10 days of the change.

B. Changes that occur during the assigned period of eligibility (certification period) are interim changes.
C. The customer must report the following changes:
   1. Address
   2. Assets
   3. Unearned income
      a. Benefits started or stopped
      b. Benefits increased or decreased
      c. Lump sums
   4. Earned income
      a. Full-time to part-time or part-time to full-time
      b. New employment
      c. Loss of a job
      d. Changing from one job to another
      e. Rate of pay

   **Note**: Customers must report changes in earned income within 10 days of receiving the first pay that reflects the change. If earnings are for piecework, they must report when the gross amount increases or decreases by more than $100 per month.

D. Customers can report changes in person, by telephone, or by mail.

E. When the change will **increase** the grant, case managers make the effective date the month following the month in which the change occurred.
   1. If the customer reports the change after the month in which it occurred, make the grant increase effective the month following the month it is reported.
   2. Supplemental grants are needed only when the case manager is not able to make the change effective for the following month.
   3. Do not give a supplement for the month in which the change is reported.

F. When the change will **decrease** the grant, the effective date of the grant change is:
   1. The month following the month in which the change occurred, but
2. No later than the second subsequent month following the month in which the change occurred.

   **Note:** This delay occurs when the adverse action notice period expires during the month following the month the change occurred.

3. Customers must report changes in earned income within 10 days of receiving the first pay that reflects the change.

4. If earnings are for piecework, they must report when the gross amount increases or decreases by more than $100 per month.

G. An overpayment is calculated when:

1. The customer does not report a change timely;

2. The local department does not act on the change in a timely manner, or

3. The local department's decision was upheld on appeal and the customer received benefits pending the appeal decision.

J. Treat a case transfer as an interim change.

**700.5  Anticipated Changes**

A. Create a 745 Alert when changes that affect eligibility or the benefit amount are anticipated.

B. Contact the customer to confirm that the anticipated change actually occurred before taking action.

C. When changes in a recipient’s circumstances are brought to the attention of the local department by other responsible sources, such as social service workers, hospital, or care providers, the department requests that the recipient or authorized representative verifies the change.

D. Since changes in the circumstances of SSI recipients are periodically reported by the Social Security Administration via SDX or SVES systems, these changes need to be reviewed by the case manager to determine whether an interim change has occurred.
700.6 Adverse Action

A. Any negative action taken on an application or an active assistance unit is an adverse action; these are:

1. Denial of an application for assistance because:
   a. Eligibility requirements were not met;
   b. Requested verifications are not received;
   c. The applicant dies; or
   d. The applicant withdraws the request for assistance.

2. Reduction in benefits because:
   a. The countable income of the assistance unit increases;
   b. An assistance unit member begins to receive new countable income (Supplemental Security Benefits, Social Security Benefits, Unemployment Benefits, etc.);
   c. Social security number was not provided; or
   d. An assistance unit member dies.

3. Closing of benefits because:
   a. Requested verifications are not received;
   b. Case eligibility no longer exists;
   c. Income minus deductions is higher than the cost of care;
   d. Assets are over the allowable limit;
   e. The customer requests cancellation of the case;
   f. The customer moves to another state; or
   g. The customer dies.

B. Notify the applicant or customer, in writing, when adverse action is anticipated.

C. Adverse action is effective the 1st day of the month following the month in which the adverse action period of 10 days expires, unless the adverse action period is waived by the customer.
700.7 Adequate and Timely Notice

A. Notify the customer, during the application, recertification, or interim change process, that:

1. An eligibility factor needs to be verified or clarified.
2. Requested proofs must be received in the local department by the date noted in the notice.

B. If the customer fails to respond, send the customer adequate and timely notice which includes the following:

1. The date the notice is sent;
2. A statement of the intended action;
3. The effective date of the intended action;
4. The reason for the intended action;
5. The Code of Maryland Regulations (COMAR) which supports the intended action;
6. The rights of the customer; and
7. Appeals information, include:
   a. DHR/FIA 334 form, Request for Hearing
   b. A return envelope, and
   c. The circumstances under which assistance can continue, through the end of the reconsideration period, without interruption or reduction.

C. Mail the notice at least 10 days before the date of the intended action (timely notice).

D. When benefits continue pending the decision of the appeal hearing, do not allow benefits to continue beyond the end of the redetermination due date.

E. Note: The application of an individual who has filed for a fair hearing must be denied pending the hearing because no benefits have been issued.
F. The CARES system automatically cancels the case effective the 1st day of the month after the adverse action period ends, when adequate and timely notice has been given.

G. Exceptions

1. Under certain circumstances it is not necessary to give the applicant or customer **timely notice**. These exceptions are when:
   a. There is confirmation that the recipient has died.
   b. The applicant or customer provides the local department with a clearly written and signed statement requesting denial of an application request or the closing of an active case and waives the adverse action period on the active case.
   c. The customer has been advised of a grant benefit reduction or closing of the case, waives their right to the 10 days adverse action period, and provides the local department with a clearly written and signed statement of the understanding.
   d. Mail sent to the applicant or customer is returned to the local department by the Post Office with indication that the individual has moved and left no forwarding address.
      **Note:** The local department must make attempts to locate the individual by telephone, through social services if an active service case exists, etc., and note the outcome in the case record.
   e. There is confirmation that the household member is permanently residing in another state.
   f. When the agency has factual information the recipient was admitted to a public institution.
   g. When the customer has signed an Interim Reimbursement Authorization form, DHR/FIA 340, waiving his right to advance notice of adverse action and is in receipt of his SSI benefit check.
   h. When the count of an adverse action period begins in one month and expires in the next month, the intended action is effective the 3rd month.

2. Customers must report changes in earned income within 10 days of receiving the first pay that reflects the change.

3. If earnings are for piecework, they must report when the gross amount increases or decreases by more than $100 per month.