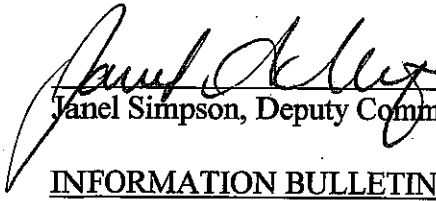


**STATE OF CONNECTICUT**  
 DEPARTMENT OF SOCIAL SERVICES  
**PROGRAM INFORMATION BULLETIN**

  
 Janel Simpson, Deputy Commissioner

November 1, 2015  
 Effective Date

INFORMATION BULLETIN NO: 15-08

PROGRAM: Temporary Family Assistance (TFA)

**SUBJECT:** Determination of exemption from Employment Services participation due to a client's incapacity or caring for an incapacitated household member.

<p><b>Introduction</b></p>	<p>In order to streamline and increase timely TFA case processing, TFA Eligibility staff will now determine if a TFA applicant/recipient is exempt from the Employment Service requirements due to the TFA applicant/recipient's own incapacity or caring for an incapacitated household member. TFA cases will no longer be referred to the Medical and Clinical Consultant Team (MCCT) team for review/evaluation.</p>
<p><b>Overview</b></p>	<p>TFA recipients are required to participate in Jobs First Employment Service (JFES) activities unless they meet one of the exemption criteria listed in UPM 8530.10. Exemptions may be based upon:</p> <ol style="list-style-type: none"> <li>1. their own incapacity; or</li> <li>2. their need to provide care for an incapacitated household member.</li> </ol> <p>Both of these exemptions require medical documentation which will be used to determine if the client meets the exemption criteria and the length of the exemption.</p>
<p><b>Exemptions based upon clients own incapacity.</b></p>	<p>Eligibility staff shall provide the individual with a medical packet which includes forms:</p> <ul style="list-style-type: none"> <li>• W-1461 - Medical Report for Incapacity and,</li> <li>• W-513 - Request for Medical Payment.</li> </ul> <p>If the individual is receiving SSI or SSD based on disability or blindness, then incapacity is established and the medical packet is not necessary.</p> <p>When the form W-1461 is returned, review to determine:</p> <ul style="list-style-type: none"> <li>• the duration of the incapacity indicated by the medical provider.</li> <li>• If the form is completed by an acceptable medical provider. If</li> </ul>

incomplete or unsigned return to the medical provider for completion.

Open for a list of Acceptable Medical Providers

As long as the medical provider indicates that

- the client cannot work part time hours, and
- the inability to work will last more than 30 days, and
- the form is signed by an acceptable medical provider, then the incapacity criterion has been met and the client can be granted an exemption based upon their own incapacity. **Code the WORK screen NI/MR.**

**Exempt less than 30 days.**

If the condition is expected to last "less than 30 days", then the incapacity criteria for a medical exemption has not been met. The client is not exempt from the time limits but is exempt from participation with JFES activities for this 30-day period. Process as a time-limited case, and make the individual a mandatory participant. In addition:

- notify the client that their medical condition does not meet the qualifying conditions for an exemption from the time-limit, and explain that they must be referred to the JFES program.
- schedule an orientation or re-engagement, and update or complete the Service Needs Assessment (SNA), if necessary. The orientation should be scheduled for a date after the 30-day exemption period.

The length of a client's exemption will be based upon the check box that the medical provider selected on the form W-1461 indicating the length of the inability to work. In determining the length of the exemption period, the begin month is the month within which the medical provider signed the form, or the inability to work begin date as noted on form W-1461, whichever is earlier.

**Exempt longer than 30 days.**

If "the inability to work is expected to last" box is checked;

- between 30 days and three months, then you must exempt client for three months,
- three months or more, then you must exempt client for 6 months,
- 6 months or more, then you must exempt client for 12 months,

If you have information indicating a shorter exemption period, then you can adjust the length of the exemption.

**Code work status NI and reason code MR for each applicable month.**

Create a critical work item in ConneCT as reminder to complete the following;

- Send a new medical packet to the client to determine ongoing

<p><b>Medical forms not returned or client found not exempt.</b></p>	<p>incapacity 30 days before the expiration of the exemption period.</p> <p>If the W-1461 is not returned timely, follow the JFES engagement procedures listed below under <i>"Applicant/recipient fails to return medical form at application or redetermination."</i></p> <p>When the W-1461 is returned and the eligibility worker determines that the client is not exempt, follow the JFES engagement procedures listed under <i>"Application/recipient fails to return medical form at application or redetermination."</i></p>
<p><b>Pregnant Women Exemptions</b></p>	<p>Pregnant women, <b><u>at any stage of their pregnancy</u></b>, are required to participate in JFES activities. Pregnancy does not provide for an automatic exemption from the TFA time-limit.</p> <p>An individual who is pregnant and claiming to have a pregnancy related medical condition that prevents them from working <b><i>does not</i></b> have to complete a W-1461. However, they are required to provide a signed statement from an acceptable medical provider that indicates they are unable to work because of a specific medical condition and include the duration of their inability to work.</p>
<p><b>Exemption based upon being responsible for the care of an incapacitated household member.</b></p>	<p>For individuals claiming an exemption based upon caring for an incapacitated household member;</p> <p>Provide the individual with a medical packet which includes forms:</p> <ul style="list-style-type: none"> <li>• W-1074 - Medical Report for Someone Who Needs Care</li> <li>• W-513 - Request for Medical Payment</li> </ul> <p>Receipt of SSI or SSD based on disability or blindness establishes incapacity.</p> <p>During the eligibility interview the worker should inquire/review:</p> <ul style="list-style-type: none"> <li>• if the incapacitated person receives any home or community based services,</li> <li>• if there are other persons who could provide the care,</li> <li>• if the person who needs care is a child and the details regarding school attendance.</li> <li>• types and hours of services provided.</li> </ul> <p>When the W-1074 is returned, review to determine:</p> <ul style="list-style-type: none"> <li>• the duration of the need to care for the incapacitated household member; and</li> <li>• if the form is completed by an acceptable medical provider. If</li> </ul>

<p><b>Medical forms not returned or client found not exempt.</b></p>	<p>the forms are incomplete or unsigned, return to the medical provider for completion.</p> <p style="text-align: center;"><u>Open for a List of Acceptable Medical Providers</u></p> <p>The caregiver can be granted the exemption as long as the interview responses and answers on the W-1074 indicate that the caregiver is responsible for the care of an incapacitated household member and such care is needed and provided at either unpredictable times or on a substantially continuous basis effectively precluding employment.</p> <ul style="list-style-type: none"> <li>• <b>Code the WORK screen NI/CI;</b>  <b>Reminder – Work screen codes NI/IN and NI/MR are only appropriate for a client’s own incapacity and not used for caring for an incapacitated household member. Only use NI/CI.</b></li> </ul> <p>The standard length of exemptions should be six (6) months or one year, depending upon the answers to the interview questions and the medical providers’ responses. In determining the length of the exemption period, the begin month is the month within which the medical provider signed the form.</p> <p>When the case is granted create a critical work item for the following:</p> <ul style="list-style-type: none"> <li>• send a new medical packet to the caregiver who is granted an exemption based upon caring for an incapacitated household member 30 days before the expiration of the exemption period.</li> </ul> <p>When the W-1074 is not returned or the W-1074 is returned and the eligibility worker determines that the client is not needed to provide care, follow the JFES engagement procedures listed below under <i>“Applicant/recipient fails to return medical form at application or redetermination”</i>.</p>
<p><b>Applicant/recipient fails to return medical form at application or redetermination or Applicant/recipient determined mandatory (i.e., not incapacitated)</b></p>	<p>There are several factors that must be considered before taking action to deny or discontinue a case when an individual either fails to return the medical packet within the allotted period of time, or is determined <u>not</u> to be incapacitated, or needed to care for an incapacitated household member. Individuals should not be denied or have their case closed solely for not being incapacitated or caring for an incapacitated household member.</p> <p>When individuals are not determined exempt from participation in JFES and have not reached their twenty-one month time-limit:</p> <ul style="list-style-type: none"> <li>• notify the individual that they do not or no longer meet the qualifying conditions for an exemption from the JFES participation; and</li> <li>• complete or update their SNA when appropriate.</li> </ul>

	<ul style="list-style-type: none"> <li>• refer them to the JFES program.</li> <li>• schedule an orientation or re-engagement; and</li> <li>• make the individual a mandatory participant by updating the cash employment and training status <b>code to MP on the WORK screen.</b></li> </ul> <p>When individuals have exhausted twenty-one 21 months of time limited assistance, the individual must be offered an opportunity to apply for an extension.</p> <ul style="list-style-type: none"> <li>• send the individual an appointment for an extension application interview using the procedures in ConneCT Business practices.</li> <li>• if active recipient does not show for their extension interview, follow the extension application process:</li> <li>• make the individual mandatory by coding the cash employment and training status - <b>code MP on WORK screen</b></li> <li>• allow case to close.</li> <li>• update the narrative.</li> </ul> <p>If an applicant does not show – deny the application for no show for the interview.</p>
<p><b>Case Processing Considerations.</b>  <b>Cases pending return of medical packet.</b></p>	<p><b>New application based upon clients own incapacity –</b></p> <ul style="list-style-type: none"> <li>- should not be granted before receiving medical information.</li> <li>- if there are aggravating circumstances, <b>code the cash employment and training status code MP on the clients WORK screen.</b></li> <li>- if the medical packet is returned and the client is determined to be exempt, <b>update the cash employment and training status code on the WORK screen to NI and reason code to MR.</b> Adjust the TCNT counters retroactively, if necessary.</li> <li>- if the client is determined not to be exempt no action needed.</li> <li>- if client is claiming to be exempt to care for an incapacitated person, follow the above procedure except <b>use the reason code CI.</b></li> </ul> <p><b>New application based upon clients own incapacity– obvious incapacitated client based upon worker observations.</b></p> <ul style="list-style-type: none"> <li>- <b>code the cash employment and training status code to NI and reason code to IN on the WORK screen.</b></li> <li>- when the medical information is returned, if the client is found to be exempt <b>update the reason code to MR on the WORK screen.</b></li> <li>- if client is not determined exempt, <b>update the cash employment and training status code on the WORK screen to MP and remove the exempt code ongoing.</b></li> <li>- if the client is claiming to be exempt to care for an incapacitated</li> </ul>

person, follow the above procedure except *use the reason code CI*.

**Redetermination - client previously exempt.**

- if the client still claims they are exempt due to their own incapacity or caring for an incapacitated household member, *leave the client exempt and code the WORK screen cash employment and training status NI and reason IN (NI/CI for incapacitated household member)*.
- when medical information is returned and the client is determined exempt, *update the WORK screen cash employment and training reason code to MR (leave as CI for incapacitated household member)*.
- if determined not exempt, *update the cash employment and training status code to MP and remove the exempt reason on the WORK screen*. Do not make any retroactive adjustments to the TCNT screen.

**Redetermination – client previously mandatory but now claiming exemption due to their own incapacity or caring for an incapacitated household member.**

- leave the client coded MP on the WORK screen.
- if the client is determined exempt, *update the cash employment and training status code to NI and reasons code to MR (CI for an incapacitated household member)*.
- adjust TCNT counters retroactively, if necessary.
- if the client is determined not exempt, leave the client coded as mandatory.

**RXT's and EXT's –**

- if client claims exemption, do not process the case until the medical information is received.

**General Reminders**

- adjustments are not needed to the TCNT screen if the change makes the client mandatory when they were previously exempt.
- retroactive adjustments are not completed, if the resulting change increments a client's counter.
- if a client has a repeated incapacity condition lasting for two years or longer, please consult with MCCT unit on how to proceed.
- if a client has an incapacity that is expected to last more than 12 months, encourage them to apply for Social Security Disability before their next incapacity review.
- to verify a medical providers license by name or license number click here: [Connecticut Dept. of Public Health license look up](#)

**Policy Reference.**

- Exemptions from Participation: 8530.10
- Exemptions from Time-Limits: 8540.03

DISPOSITION: Retain for future reference.

DISTRIBUTION: CO Field Operations, Fair Hearings Unit, TFA Field Staff, MCCT Unit

RESPONSIBLE UNIT: Economic Security Unit - Telephone 860-424-5540

DATE ISSUED: 26 October 2015

TS