



1501-1 Reporting Changes

Supersedes:	TANF 1501-1 (01/01/06)
References:	ARM 37.78.102 and .507
Overview:	<p>GENERAL RULE--All participants are required to report changes in their household circumstances as soon as possible, but within ten (10) days of knowledge of the change, to allow the appropriate action to be taken prior to benefit issuance. <u>Form HCS-260A "TANF/Medicaid Change Report Form" will be provided at the initial interview, when a change is reported, at redetermination, and upon request.</u></p> <p>Participants may report changes at any time and are encouraged to report all changes even if they believe the changes are insignificant.</p> <p>The participant may report changes to either the WoRC Case Manager or the Eligibility Case Manager. Reporting to the WoRC Case Manager is considered a report to the Eligibility Case Manager and fulfills the participant's requirement to report the change.</p> <p>If the participant reports a change to the WoRC Case Manager, the WoRC Case Manager must immediately report the change to the Eligibility Case Manager. The Eligibility Case Manager will evaluate the changes and apply the information appropriately as eligibility is redetermined.</p> <p>If changes are not reported or are not reported timely, correct benefits may be delayed or the assistance unit may be required to repay benefits issued incorrectly.</p> <p><u>All reported/discovered changes must be treated as if made timely (within ten days of knowledge of the change).</u> Allow ten days for worker action and ten days for notice of adverse action to establish which benefit months were possibly overpaid. (TANF1504-1)</p>
WHO IS REQUIRED TO REPORT?	All filing/assistance units, eligible for and/or receiving public assistance benefits, are required to report changes in household circumstances and <u>provide verification of the change(s).</u>
WHAT IS TO BE REPORTED?	<p>The following circumstances must be reported as soon as possible but within ten (10) days of knowledge of the change to assure benefits are issued promptly and correctly:</p> <p>NOTE: Changes may be reported throughout the entire administrative month.</p> <ol style="list-style-type: none">1. Changes in income source or in the amount of gross monthly income;2. Changes in household members;3. Changes in residence and the resulting changes in living arrangements; and

<p>METHODS OF REPORTING CHANGES</p>	<p>4. Changes in resources</p> <p>Participants can report changes by:</p> <ol style="list-style-type: none"> 1. completing, signing and returning the Change Report Form (HCS-260A) to either the OPA or WoRC Office; <p>NOTE: Participants cannot be required to report changes on Form HCS-260A.</p> <ol style="list-style-type: none"> 2. telephoning or writing the county OPA or WoRC Office; 3. writing or telephoning the Eligibility Case Manager or WoRC Case Manager directly, or 4. reporting the change to either the OPA or WoRC Office in person. <p>NOTE: County office staff may also discover information from sources such as anonymous calls/letters, R & R Agencies, SEARCHS, MISTICS, PJUSTICE, etc. When information is discovered, the participant must be given the opportunity to respond before action is taken.</p> <p>The Eligibility Case Manager will evaluate the effect the change may have on all eligibility requirements, non-financial as well as financial.</p>
<p>ACTING ON REPORTED, DISCOVERED CHANGES</p>	<p>The Eligibility Case Manager must take an action on all changes reported to, or discovered by the agency, within ten days of the reported/discovered change, regardless of the timeliness of the report.</p> <p>To take an action on changes reported/discovered can mean any or all of the following actions:</p> <ol style="list-style-type: none"> 1. redetermining eligibility, 2. requesting verification and/or more information, 3. recalculating benefits, 4. taking adverse action (reduction or termination of benefits), 5. establishing an overpayment, 6. issuing a supplement, OR 7. simply documenting in case notes that a change was reported/discovered, evaluated, and no further action was required. <p>Action must be taken promptly and must occur even if processing time frames prevent a correction to benefits prior to actual issuance.</p> <p>Issuance (cutoff) occurs at 5:30 p.m. on the fourth working day from the last calendar day of the month. Any action taken on an authorized case after cutoff will not reflect on eligibility or payment amount for the next benefit month.</p> <p>NOTE: Supplements are issued for all changes reported within the administrative</p>

	month (month prior to the benefit month) upon timely receipt of verification.
VERIFICATION OF THE CHANGE	<p>When a participant reports a change, verification (document or statement from a collateral contact) of that change must be obtained as soon as possible. Specific time periods are stated later in this section according to the outcome of the redetermination of eligibility and/or benefit. If verification is not submitted with the reported change or information is discovered, the participant is informed that they must provide the necessary verification within ten (10) days of the notice date.</p> <p>NOTE: The ‘request for information notice’ cannot be used as a notice of adverse action. If the participant does not respond to the notice and eligibility cannot be determined without that information, a timely notice of the adverse action must be sent (TANF 1503-1).</p>
ADDING A HOUSEHOLD MEMBER	<p>If the household reports that an individual who is a required filing unit member has entered the household, eligibility for the entire household be redetermined. (TANF 201-3)</p> <p>If the new household member is an adult, the household is required to complete an HCS-261A “Adding a New Household Member” form. This form states the information provided may result in termination or reduction of benefits without ten days notice. (TANF 201-3)</p> <p>If the new household member is required to negotiate, sign and comply with a Family Investment Agreement/Employability Plan (FIA/EP), further benefits cannot be issued until this eligibility requirement is met. (TANF 701-1, 701-2).</p> <p>NOTE: If the addition of the new household member requires changing the number of hours that another household member is assigned to WoRC, the Eligibility Case Manager must enter an END DATE for the existing WRC component and enter a new component beginning the first of the next month.</p>
USING CASE NOTES	<p>Always use Case Notes to explain the reported/discovered change and the action taken as a result of the report (even when no action is necessary). (TANF 1507-1)</p> <p>Documentation should include:</p> <ol style="list-style-type: none"> 1. a description of the change, 2. dates the change occurred, 3. date the change was reported/discovered, 4. the verification provided and/or requested, 5. how the change was reported/discovered (by phone, HCS-260A, written note, in person or a third party), and 6. any other pertinent information.
NOTICES ON ACTION TAKEN	<p>When a change that will result in an adverse action is reported on a signed Change Report and enough information to determine ongoing eligibility is provided, the Eligibility Case Manager will use adequate notice to inform the participant of the action (TANF 1503-1). Adequate notice is sufficient because the signed Change Report Form notifies the participant of possible consequences.</p>

	<p>When a change which results in an adverse action is reported by any means other than a signed change report form OR there is not enough information on the signed Change Report to accurately determine ongoing eligibility (e.g, verification/ information must be requested), the Eligibility Case Manager must send a timely notice. (TANF 1503-1)</p>
<p>CHANGES CAUSING INCREASED BENEFITS</p>	<p><u>WITHOUT VERIFICATION:</u> When a reported/discovered change will result in increased benefits, but does not include necessary verification, request verification to be provided within ten days of the Notice. If the verification is not received prior to issuance (cutoff) or <u>the ten-day period extends into the next benefit month</u>, benefits are authorized at the benefit amount previously issued. Do not increase benefits prior to receipt of verification.</p> <p>Within ten days of receipt of verification, redetermine eligibility and benefit amount and issue supplemental benefits. Send appropriate notice of the action taken.</p> <p>If requested verification is not received within the stated time period or the administrative month and correct eligibility and benefit amount cannot be determined without it, benefits are terminated <u>with timely notice</u>. If the verification is received after the time period but within the administrative month and timely notice cannot be provided, benefits are issued at the previous level. No overpayment is calculated. Circumstances and an explanation of why benefits were issued must be documented</p> <p><u>WITH VERIFICATION:</u> When a reported change includes verification, the redetermination of eligibility and benefits should be completed within ten days. If the action cannot be made prior to issuance (cutoff), release the benefit in the same amount previously issued and issue a supplement no later than the 10th of the benefit month. Send appropriate notice.</p>
<p>CHANGES CAUSING DECREASED BENEFITS</p>	<p><u>WITHOUT VERIFICATION:</u> When a reported change, without verification, results in a benefit decrease, <u>benefits are issued</u> if the information alone is sufficient to prospectively determine ongoing eligibility and/or benefits. A notice must be sent requesting the verification to be provided within 10 days. Prior to issuing the second month's benefits (the month following the month after the reported/discovered change), verification must be received.</p> <p>NOTE: If the change is reported/discovered in April, the second month is June</p> <p>If the verification is <u>not received</u> for the second benefit month, eligibility ends. Timely Notice must be sent.</p> <p>If the verification is received prior to release of the second month's benefit, redetermine eligibility and/or benefit amount and continue issuance of the adjusted benefits. Document action taken in case notes.</p>
<p>Date Revised</p>	<p>July 1, 2007</p>