2. ADC/Medical Assistance SOC Case: A case in which there is sufficient income to meet daily maintenance needs and a portion of the unit's medical needs but not all. The case is opened for medical assistance with no payment for medical services made until the SOC is obligated.

ADC Parent: Wherever the term Parent, Father, or Mother is used, it includes biological, adoptive, and stepparents.

ADC Payee: A parent, other specified relative (see 468 NAC 2-006.02), or a legally appointed guardian or conservator who exercises the responsibility for the care and control of the child(ren) and to whom the assistance payment for the child(ren) is made.

Adequate Notice: Notice of case action which includes a statement of what action(s) the worker intends to take, the reason(s) for the intended action(s), and the specific manual reference(s) that supports or the change in federal or state law that requires the action(s), (see also 468 NAC 1-009.03A1).

Applicant: An individual who applies for assistance.

Application: The action by which the individual indicates ~~in writing~~ the desire to receive assistance by submission of an application.

Application Date: For new and reopened cases, the date a properly signed application is received. When adding a program to a properly signed application, this is the date that the new program is requested.

Application Signature: Applications may be signed in writing or by electronic signature.

Application Submission: Applications may be submitted in person, by mail, by fax or by electronic transmission.

Approval/Rejection Date: The date that the new or reopened case is determined eligible or rejected by the local office.

Arrearage: Unpaid child/spousal support which is due according to a court order.

Assignment: The legal transfer of an individual's right to benefits to the Nebraska Department of Health and Human Services. This includes child/spousal support and third party medical.

Basic Education: Education which provides participants with the minimal literacy and computational skills required for occupational training and/or job performance.

Budget Month(s): The calendar month(s) for which the worker uses verification and information on income, resources, and household composition of the unit to compute the amount of the assistance.

Budgetary Need: The amount the client is eligible for before adjustments for over and underpayments and $10 minimum payment.

Request: An action by which an individual's desire to receive assistance is made known to the local office. A request may be made by telephone, letter, fax, electronic transmission or in ~~an interview~~ person.

Request Date: The date the client requests assistance. For reopened cases, this is the date of the new request. For program changes, this is the request date for the new program (see 468 NAC 1-009.01).

Retroactive Eligibility for MA: The date of eligibility beginning no earlier than the first day of the third month before the month of request if the following conditions were met:

1. Eligibility was determined and a budget computed separately for each of the three months;
2. A medical need existed; and
3. Eligibility requirements were met at some time during each month.

Retroactive Payment: Any payment made during the current month but for a prior month.

Specified Relative: A relative with whom a dependent child may live and receive assistance. See 468 NAC 2-006.02 for the list of specified relatives.

Spousal Support: Alimony or maintenance support for a spouse or former spouse.

Standard of Need: The initial income test in ADC “gap” budgeting against which net earned income is measured (see 468 NAC 3-000).

1-009 Application Processing

1-009.01 Request: A request for assistance may be made in ~~an interview~~ person, by letter, ~~or by~~ telephone, fax, or electronic submission and may be made by the applicant, his/her guardian or conservator, an individual acting under a duly executed power of attorney (see 468 NAC 1-004), or another person authorized to act for the applicant. The worker must record the request date on the application. If an interview cannot be scheduled within 14 days from the date of request, the application must be mailed promptly or the client must be informed of the electronic application.

A request is terminated:

1. When a properly signed application is received. When adding a program to the application, the date of request is also the application date;
2. When the applicant or his/her representative notifies the worker of withdrawal; or
3. After 30 days if the worker has heard nothing further from the applicant or his/her representative. However, the worker may continue to hold a request pending if there is reason to believe the applicant intends to complete his/her application.

1-009.01A Presumptive Eligibility (PE) for Unborn:

The application date for a woman who applies for presumptive eligibility on behalf of her unborn child is the date that the qualified provider determines her eligibility for assistance (see 468 NAC 4-001.01D). The presumptive eligibility form is an application for medical assistance and also serves as verification for pregnancy. Upon receiving the presumptive eligibility form, the worker opens the PE case on N-FOCUS and it remains open until a determination of eligibility for medical assistance is made. The prescribed application is incorporated into the appendix of these rules.

An unborn child may receive only one period of presumptive eligibility in a 12-month period.

{Effective 5/8/05}

1-009.02 Application: A request becomes an application when a properly signed application is received. The prescribed application is incorporated into the Public Assistance Forms Manual. When adding a program to the application, the date of request on the application is also the application date. A properly signed application contains:

1. Name;
2. Address; and
3. Proper signature, as defined by the appropriate program.

An application may be signed by an individual for himself/herself or by the applicant's guardian, conservator, or an individual acting under a duly executed power of attorney. If the application is for medical benefits only, the client's relative or another individual acting on the client's behalf may sign the application.

An application for medical benefits only may be taken on behalf of a deceased person. If there is no one to represent the deceased person, the administrator of the estate may sign the application. The eligibility requirements must have been met at the time medical services were rendered.

1-009.02A Alterations: The application, when completed and signed by the client or his/her representative, constitutes his/her own statement in regard to eligibility. If the worker adds information received from a client to a properly signed application, the worker must date the information and:

1. ~~Request that the client initial the change, if the client is present~~Note the information received from the client; or
2. If the information is not received from the client, i~~I~~dentify the source of the information~~, if the client is not present~~.

~~If a substantial amount of information is added during the face-to- face interview, the worker may request that the client sign and date the application again.~~

The worker may ~~alter~~ add information to an ~~initial~~ application up to the date of approval or completed redetermination. ~~An application form for a redetermination may be altered up to the date the redetermination has been completed.~~

1-009.02B Prompt Action on Applications: The worker must act with reasonable promptness on all applications for assistance. The worker must make a determination of eligibility on an application within 45 days from the date of the request. If circumstances beyond the control of the worker prevent action within 45 days, the worker must record the reason for the delay in the case record. The worker must send a Notice of Action informing the applicant of the reason for the delay.

1-009.02C Medical Assistance (MA) Application with Share of Cost: An application for medical assistance for an individual with a share of cost who has a medical need may be approved with no medical payments authorized until the applicant has met his/her obligation.

1-009.02D Application with Excess Resources: An application for assistance for an individual who has excess resources may be held pending until the resources are reduced (see 468 NAC 2-008.10 for eligibility for payment and 468 NAC 4-006.04 for medical eligibility dates).

1-009.02E Place of Application: The local office that ~~services~~ serves the county where the individual resides is responsible for taking the application. Applications may be taken in the local office, in the applicant's home, or another place that is convenient for the applicant. If the client has a guardian, conservator, or other representative, the local office in the county where the representative resides may take the application.

Any individual may apply for medical assistance with a designated outreach provider who has contracted with the Department to process Medicaid applications at their location.
{Effective 10/1/97}

1-009.02F Withdrawals: The applicant may voluntarily withdraw an application. If the applicant verbally withdraws the application, the worker must request a written statement of withdrawal. The worker must make note of the withdrawal in the case record and give written confirmation of withdrawal to the applicant on a Notice of Action.

If the applicant does not provide written confirmation of the withdrawal within 30 days from the application date, the worker must reject the application. The worker must send a Notice of Action to the applicant notifying him/her of the rejection.

1-009.02G Authorization for Investigation: For some sources the worker asks the client to sign a Release of Information when it appears that information given is incorrect, when the client is unable to furnish the necessary information, or for sample quality control verification. A copy of the authorization for release of information from the Application for Assistance may be used if the source will accept it.

1-009.02H New Application: A new application is required after one calendar month of ineligibility. If eligible, children must receive a new period of six months' continuous eligibility (see 468 NAC 4-001.01H).

1-009.03 Notice of Action: The worker must send adequate notice on a Notice of Action to notify the client of any action affecting his/her assistance case. The Notice of Action must be sent to the last-reported address. If the form is inadvertently sent to the wrong address, the worker must send a new form, allowing the client ten days from the date the corrected form is sent (if adequate and timely notice is required.