

Date: December 18, 2015 **Texas Works Bulletin Number: #16-05**

To: Eligibility Services – Regional Directors
Program Managers
Eligibility Services Supervisors
Regional Attorneys
Hearings Officers

From: Stephanie Stephens, Director
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State Office 2115

Subjects: All Programs

1. Affordable Care Act (ACA)—Counting Self-Employment Correctly

SNAP

2. Supplemental Nutrition Assistance Program (SNAP) Eligibility for Residents of Institutions
3. SNAP Eligibility for Individuals with Felony Drug Convictions

Medical Programs

4. ACA—Updates to Modified Adjusted Gross Income (MAGI) Household Composition
5. ACA—Update to Administrative Renewals Correspondence
6. ACA—Eligibility of a Spouse for Parent and Caretaker Relatives Medicaid
7. Medically Needy with Spend Down Deeming Newborns
8. Transitional Medicaid—Adding Spousal Support to Type Program (TP) 20
9. Medicaid for Breast and Cervical Cancer (MBCC)

Bulletins are sent to supervisors and other regional managers. Supervisors must share this information with all Texas Works staff. Please ensure that copies are provided to staff that do not have access to e-mail. If you have any questions regarding the policy information in this bulletin, follow regional procedures. Active bulletins are posted on the Texas Works Handbook (TWH) website at <http://www.dads.state.tx.us/handbooks/TexasWorks/>.

1. Affordable Care Act (ACA)—Counting Self-Employment Correctly

Background

The Affordable Care Act (ACA) required states to align self-employment expenses for Medicaid programs with those recognized by the Internal Revenue Service (IRS). Federal requirements provide flexibility to align self-employment expenses for Medicaid programs, SNAP, and TANF, with some exceptions.

Current Policy

Self-Employment Expenses

All Programs

For all programs, allowable costs of producing self-employment income include:

- Labor;
- Sales tax;
- Stock;
- Raw materials;
- Rent;
- Insurance premiums;
- Utilities;
- Repairs that maintain income-producing property;
- Supplies;
- Fuel;
- Linen service;
- Property tax;
- Interest from business loans on income-producing property;
- Identifiable costs of seed and fertilizer;
- Payments on the principal of loans for income-producing property;
- Capital asset purchases, such as real property, equipment, machinery and other durable goods (items expected to last for at least 12 months);
- Capital asset improvements; and
- Allowable transportation costs.

Non-allowable costs of producing self-employment income include:

- Travel to and from the place of business;
- Net loss that occurred in a previous period;
- Work-related expenses, such as federal, state and local income taxes, and retirement contributions;
- Depreciation;
- Costs not related to the self-employment; and
- Costs related to producing income gained from illegal activities, such as prostitution and the sale of illegal drugs.

Note: Currently, advisors must enter net self-employment income in TIERS after the self-employment expenses described in Texas Works Handbook (TWH) A-1323.4.5, Allowable Costs of Producing Income, are subtracted from gross self-employment income.

Verification of Self-Employment Expenses

All Programs

Acceptable verification for self-employment expenses include self-employment business records, receipts, or if there is no other form of verification available, Form H1049, Client's Statement of Self-Employment Income. Advisors must document why Form H1049 was the only source of verification if no other form of verification is available.

Self-Employment Hours Worked

TANF and SNAP

The Employment Services Program (ESP), described in TWH A-1820, Employment Services Programs (ESP) Procedures, consists of two programs, Choices for TANF individuals and Employment and Training (E&T) for SNAP individuals. Recipients must participate in these programs unless exempt. If a nonexempt member does not comply, he or she may be subject to a penalty that may result in a full-family sanction for TANF and a denial or disqualification for SNAP. The number of hours an individual is self-employed is considered when determining the appropriate work registration code for SNAP Employment and Training (E&T) and Choices. An individual who is self-employed is assigned:

- SNAP E&T work registration Code P, Meets SNAP full-time employment requirement, if they work at least 30 hours a week or are receiving earnings equal to 30 hours a week multiplied by the federal minimum wage. If the individual's self-employment income is not enough to qualify for this work registration code, staff must verify that the individual works at least 30 hours a week (TWH A-1822.1, E&T Exemptions).
- Choices work registration Code P, Meets TANF full time employment requirement, if they work at least 30 hours per week and are receiving earnings of at least \$700 per month (TWH A-1821.2, Choices Participation).

SNAP

A self-employed student may qualify for SNAP if the student works an average of 20 hours a week and earns at least the federal minimum hourly wage.

Note: Hours for self-employment are not captured in the system and are not considered accurately for SNAP E&T and Choices work registration codes or self-employed students.

Verification of Self-Employment Hours Worked

SNAP

For an individual who is self-employed to meet the SNAP full-time employment requirement, the advisor must verify that an individual works at least 30 hours a week if the individual's income is less than 30 hours a week multiplied by the federal minimum wage.

TANF and MAGI Programs

Verification for self-employment hours worked is not required.

New Policy

All Programs

The self-employment expense policy aligns for all programs. However, there are certain self-employment expense types that are not allowed for SNAP. Allowable self-employment expenses are based on costs that can be deducted from federal income taxes according to the IRS Schedule C (Form 1040). Self-employment expenses must be both ordinary and necessary.

- An ordinary expense is one that is common and accepted in the client’s type of self-employment industry.
- A necessary expense is one that is helpful and appropriate for the self-employment trade or business. An expense does not have to be indispensable (essential) to be considered necessary.

Allowable and Non-Allowable Self-Employment Expenses by Program

Expense Types	TANF and MAGI Programs	SNAP
Advertising	Allow	Allow
Car and truck expenses	Allow	Allow
Commissions and fees	Allow	Allow
Contract labor	Allow	Allow
Costs not related to the self-employment	Non-allowed	Non-allowed
Costs related to producing income gained from illegal activities, such as prostitution and the sale of illegal drugs	Non-allowed	Non-allowed
Depletion	Allow	Non-allowed
Depreciation	Allow	Non-allowed
Employee benefit programs	Allow	Allow
Insurance	Allow	Allow
Interest	Allow	Allow
Legal and professional services	Allow	Allow
Net loss that occurred in a previous period	Non-allowed	Non-allowed
Office expense	Allow	Allow
Pension and profit-sharing plans	Allow	Allow
Rent or lease	Allow	Allow
Repairs and maintenance	Allow	Allow
Supplies	Allow	Allow
Taxes and licenses	Allow	Allow
Travel, meals, and entertainment	Allow	Non-allowed
Travel to and from place of business	Non-allowed	Non-allowed
Utilities	Allow	Allow
Wages	Allow	Allow

Other expenses	Allow	Allow
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Verification of Self-Employment Expenses

All Programs

IRS Schedule C, Form 1040 – Profit or Loss from Business is an acceptable form of verification for self-employment expenses for all programs. All other allowable verifications for self-employment expenses described in TWH A –1370, Verification Requirements, continue to be acceptable verification.

Self-Employment Hours Worked

TANF and SNAP

The policy for self-employment hours worked remains the same.

Note: Hours for self-employment will be captured in the system and will be considered accurately for the ESP.

Verification of Self-Employment Hours Worked

TANF and SNAP

Self-employed clients must provide verification of hours worked.

Acceptable forms of self-employment hours worked include:

- Business records and receipts:
- Checks;
- Tax records;
- A statement from a knowledgeable source; and
- Acceptable verification for self-employment income described in TWH A-1370, Verification Requirements, except for the Form H1049 and client statement.

TANF

For a self-employed individual to be assigned the Choices work registration Code P, hours worked must be verified.

If verification is not provided by the due date, the individual does not meet the Choices work registration Code P.

SNAP

If a self-employed individual is to be assigned the SNAP E&T work registration Code P because they work 30 hours or more, hours worked must be verified. If verification is not provided by the due date, the individual will not be assigned the SNAP E&T work registration Code P.

Student's Average Weekly Hours Worked is greater than or equal to 20 hours and is not verified, advisors must request verification of self-employment hours worked. If the student does not provide verification by the due date, the student will be denied for failure to provide and is considered an ineligible student.

MAGI Programs

Verification for self-employment hours worked continues to not be required. Clients who are requesting health care coverage without SNAP or TANF must not be pended for verification of hours worked.

Forms

Form H1049, Client's Statement of Self-Employment Income, has been split into an English-only and Spanish-only version. Clients will receive an English or Spanish version of the Form H1049 based on their preferred notice language selection.

A new question has been added for clients to enter the number of hours they work each week on Form H1049. To promote self-service, information about clients uploading the Form H1049 through YourTexasBenefits.com and the Your Texas Benefits mobile app was also added.



1049_EN.pdf



1049_SP.pdf

Automation

Self-Employment Details Page

Self-Employment Expenses

On the Self-Employment Details page, a new mandatory question has been added to capture whether the client has an IRS Schedule C Form – Profit or Loss from Business.

Summary Details Payments Expenses Schedule C

Change Password Logout Help

Self Employment - Details ? Q STOP D ?

Case Name: user,Test Case #: 1000000001 Case Mode: Change Action Case Status: Approved

TAX SENSITIVE INFORMATION

Reset Cancel Add Previous Next

Individual Information

Name: Individual # :

Dates

Effective Begin Date: mm / dd / yyyy End Date: mm / dd / yyyy

Reported On: 12 / 23 / 2013 Date Client Became Aware: 12 / 23 / 2013

Verification Received On: 12 / 23 / 2013

Earned Income

Self Employment Type:

Self-Employment Start Date: mm / dd / yyyy Self-Employment End Date: mm / dd / yyyy

Number of months covered by self employment: 0 Expected End Date: mm / dd / yyyy

Do you have Payments/Expenses from Individual's Schedule C form? Tax Year: 2014

Is self employment type legal?

Business Name/ Description:

Verification:

Is income accessible? Reason not accessible:

Is self employment the individual's annual means of self support? NO

If advisors answer *Yes* to the question *Do you have Payments/Expenses from individual's Schedule C form?* they will be required to enter the tax year and will be directed to a new Schedule C page to enter the client's self-employment income and expenses.

If the advisor selects Yes when the field was previously blank, the advisor will be directed to the new Schedule C page.

If the advisor selects Yes when No was previously selected and the client has no existing active payment or expense records, the advisor will be directed to the Schedule C page.

If the advisor selects Yes when No was previously selected and the client has existing active payments or expense records, a pop-up message is displayed. This message advises advisors that there are existing payments and expenses in the *Self Employment* LUW, and a new record will be created if the Schedule C page is used. The pop-up message asks the advisor if they would like TIERS to auto-create a new record.

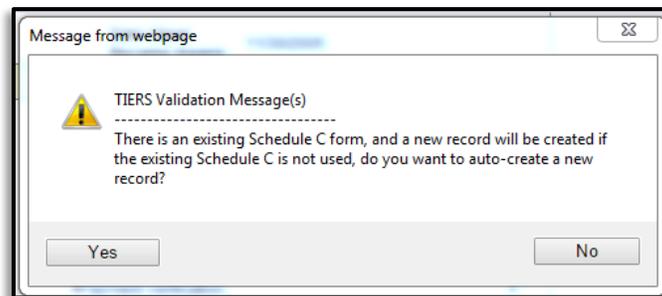
1. **If the advisor selects No to the pop-up message**, the message closes and the new Schedule C question is reset to *No*.

2. **If the advisor selects Yes to the pop-up message**, the existing self-employment record is end dated with the last day of the previous month and a new self-employment record is created.
 - a. The Self Employment – Details page of the new record is pre-populated with the values from the existing record. The effective begin date defaults to the first day of the current month.
 - b. TIERS creates case comments to indicate that an existing self-employment record was automatically closed.



If the advisor selects No when the field was previously blank, the advisor will be directed to the Self Employment Payments and Expenses LUW.

If the advisor selects No when Yes was previously selected, a pop-up message is displayed advising the advisor that there is an existing Schedule C form, and a new record will be created if the existing Schedule C is not used. The pop-up message asks the advisor if they would like TIERS to auto-create a new record.



1. **If the advisor selects No to the pop-up message**, the message closes and the new Schedule C question is reset to Yes.
2. **If the advisor selects Yes to the pop-up message**, the existing self-employment record is end dated with the last day of the previous month and a new self-employment record is created.
 - a. The Self Employment – Details page of the new record is pre-populated with the values from the existing record. The effective begin date will default to the first day of the current month.
 - b. TIERS creates case comments to indicate that an existing self-employment record was automatically closed.

Self-Employment Hours Worked

A new field is added to the Self-Employment Details page to collect information on the average weekly hours worked for self-employed individuals. The Form H1049 now collects the hours worked by self-employed individuals.

The Self-Employment Details page will be pre-populated with values from the existing record of the Self Employment LUW and the effective date will default to the first day of the current month.

Three new fields are included on the Self-Employment Details page to collect the weekly hours worked for self-employed individuals:

- Average Weekly Hours Worked,
- Average Hours Worked Verification, and
- Average Hours Worked Verification Received Date.



The screenshot shows a form titled "Hours worked" with three new fields highlighted by a red border. The first field is "Average Weekly Hours Worked" with an empty input box. The second field is "Average Hours Worked Verification" with a dropdown menu. The third field is "Average Hours Worked Verification Received Date" with a date picker set to 05 / 20 / 2015.

SNAP

The new *Average Hours Worked* field allows TIERS to correctly:

- Assign the E&T exemption to self-employed individuals who are working 30 or more hours per week and have provided acceptable verification; and
- Determine whether self-employed students are eligible for SNAP benefits when they meet the student eligibility requirements of working an average of 20 hours a week and earning at least the federal minimum hourly wage.
- Assign the E&T exemption to half-time students caring for a child under 6 years of age.

Note: Contingency Processing Method (CPM) E&T Exemption for Full-Time Self-Employed Individuals (#334579) will be retired and should no longer be used by staff.

The new *Average Hours Worked* field will also allow TIERS to correctly determine if self-employed students are eligible for SNAP benefits when they meet the student eligibility requirements of being employed for pay an average of 20 hours a week. If the student's *Average Weekly Hours Worked* is greater than or equal to 20 hours and is not verified, TIERS pends the individual for verification of self-employment hours worked. If the individual does not provide verification by the due date, the individual will be denied for failure to provide. The student would then be considered an ineligible student.

The new *Average Hours Worked* field will allow TIERS to correctly determine if self-employed students are eligible for SNAP benefits when they meet the student eligibility requirement of being a half-time student caring for a child under 6. TIERS will also restore SNAP benefits for existing EDGs when they meet the requirement of being a half-time student caring for a child under 6.

Note: The Contingency Processing Method (CPM) Student Eligibility Criteria Based on Average Work Hours (#96330) will be retired and should no longer be used by staff.

Other Updates

Some of the other changes to the Self-Employment Details page that advisors will see include:

- The projection period section is removed.
- The *Start Date* field is now the *Self Employment Start Date* field.
- The *End Date* field is now the *Self-Employment End Date* field.
- The *Description* field is now the *Business Name/Description* field.

Self-Employment Expenses Page

Changes to the Self-Employment Expenses page include:

- The drop-down options in the Expense Type field are updated to align with the expenses on IRS Schedule C. Below is a complete list of the new drop-down options.
 - Advertising
 - Car and truck expenses
 - Commissions and fees
 - Contract labor
 - Depletion
 - Depreciation
 - Employee benefit programs
 - Insurance
 - Interest
 - Legal and professional services
 - Net loss from a previous period
 - Office expense
 - Other expenses
 - Pension and profit-sharing plans
 - Rent or lease
 - Repairs and maintenance
 - Supplies
 - Taxes and licenses
 - Travel, meals, and entertainment
 - Travel to and from place of business
 - Utilities
 - Wages
- There is no longer a *Non Allowable Expense* field on the Self Employment Expense page. Advisors enter all reported expenses and TIERS allows a deduction only for those that are allowable expenses by program.

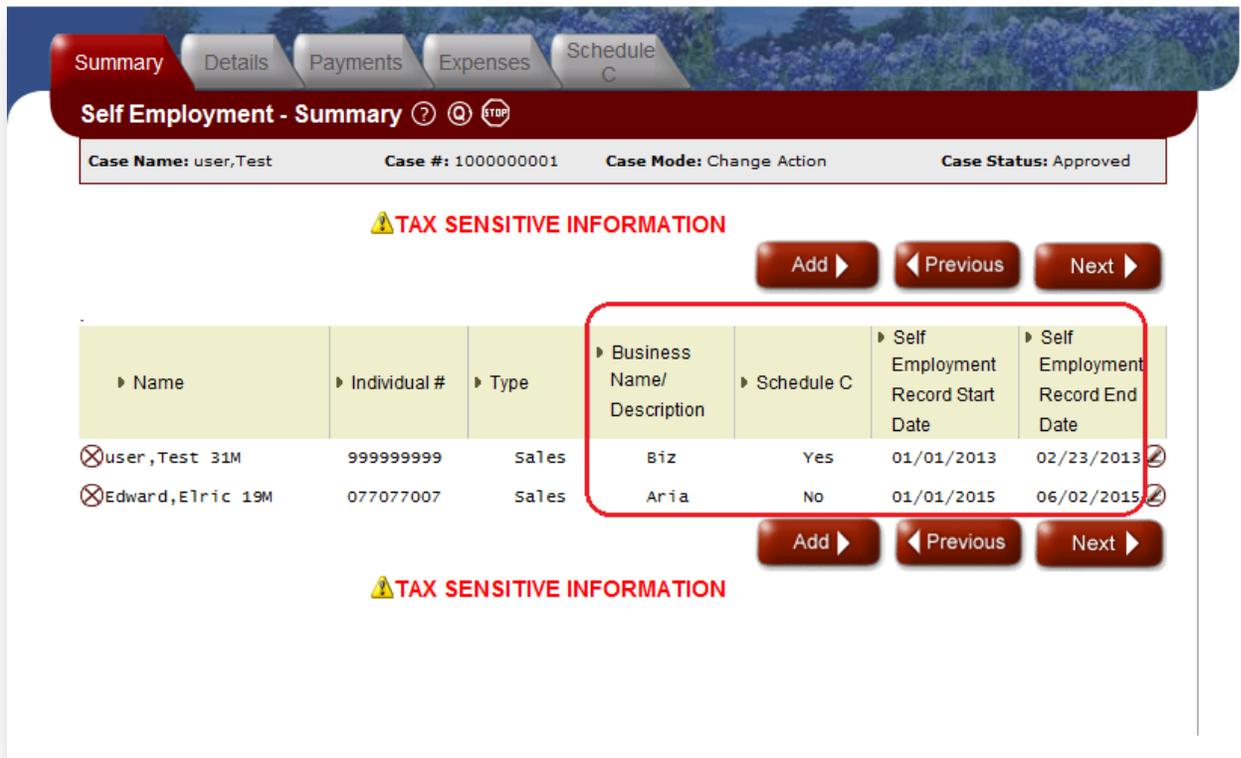
For each expense type selected, the advisor must select the corresponding frequency of that expense. Below is a complete list of the frequency drop-down options.

- Irregular more often than monthly
- Annually
- Semi-Annually
- Semi-Monthly
- Monthly
- Irregular less often than monthly
- Bi-Weekly
- Quarterly
- Weekly

Summary Page

The following column header fields are included on the Self Employment Summary page:

- Name
- Individual number
- Type
- Business Name/Description
- Schedule C
- Self-Employment Record Start Date
- Self-Employment Record End Date



Schedule C Page

A new Schedule C page is added to the Self-Employment LUW. If staff select Yes when answering the new mandatory Schedule C question on the Self Employment Details page, (*Will payments and expenses be entered from the individual's Schedule C?*), TIERS automatically directs the advisor to the Schedule C page.

The amount on the IRS Schedule C is an annual expense amount (expenses for a year). Advisors must enter the amount from the IRS Schedule C into the applicable fields on the Schedule C page. TIERS will calculate a monthly expense amount automatically.

When the Schedule C page is completed, TIERS creates one expense record for each expense type with an expense amount value.

Summary Details Payments Expenses **Schedule C**

Self Employment - Schedule-C ? Q STOP D P

Case Name: User,Test Case #: 1000000001 Case Mode: Change Action Case Status: Approved

TAX SENSITIVE INFORMATION

Reset Cancel Previous Next

Individual Information

Name: User,Test 32M Individual #: 600594345 Updated Date: 04/17/2006

Dates

Effective Begin Date: 11/01/2005 End Date:
Reported On: 11/30/2005 Date Client Became Aware: 11/30/2005

Payment / Expense Details

Self-Employment Type: Construction/Repair Work

Pay/ Exp Report Date: mm / dd / yyyy Pay/ Exp Discovery Date: mm / dd / yyyy

Tax Year: 2014 Gross Payment Amount: \$

Pay / Exp Verification Received Date: mm / dd / yyyy

Expense details			
Expense types	Amount	Expense types	Amount
8 Advertising:	\$	20 rent or lease	\$
9 Car and truck expenses	\$	21 Repairs and maintenance	\$
10 Comissions and fees	\$	22 Supplies	\$
11 Contract labor	\$	23 Taxes and licenses	\$
12 Depletion	\$	24 Travel, meals, and entertainment (a) travel (b) deductible means and entertainment (do not include travel to and from place of business)	\$
13 Depreciation and section 179 expense deduction	\$	25 Utilities (do not include unless these expenses can be identified as necessary for the business separately)	\$
14 Employee benefit programs (other than line 19)	\$	26 Wages (for employees not living in the home)	\$
15 Insurance (other than helath)	\$	27 Other Expenses	\$
16 Interest (a) Mortgage (paid to banks, etc.) (b) Other	\$		
17 Legal and professional services	\$		
18 Office expense	\$		
19 Pension and profit-sharing plans	\$		

Other Expenses Description:

Effective Date

Changes to policy are effective December 19, 2015.

Handbook

The handbook will be updated with the July 2016 Revision.

Training

Self-Employment income and expenses will be presented as part of web-based training: Updates to Self-Employment LUW.

2. Supplemental Nutrition Assistance Program (SNAP) Eligibility for Residents of Institutions

Background

A review of policies regarding residents of institutions was completed and, as a result, policy is changing when determining SNAP eligibility in order to align with federal law.

Current Policy

SNAP

Individuals who reside in an institution that provides more than half of their meals are not eligible for SNAP unless the individual resides in one of the following exempt facilities:

- State licensed or state certified drug and alcohol treatment centers (B-441, Residents of Drug and Alcohol Treatment (D&A) Facilities);
- Family violence shelters (B-451, Eligibility Requirements);
- Homeless shelters (A-116.2, Applications from Residents of a Homeless Shelter); or
- State certified group living arrangements for elderly or disabled individuals (B-442, Residents of Group Living Arrangement (GLA) Facilities).

Regardless of whether or not the facility provides them with the majority of their meals, residents in drug and alcohol treatment facilities are only eligible to receive SNAP benefits under these special provisions.

Individuals residing in a **drug and alcohol treatment facility** are eligible to receive SNAP benefits if the facility is:

- certified as a retailer by the Food and Nutrition Service (FNS) to accept SNAP benefits; or
- a private, nonprofit organization or institution, or a publicly operated community mental health center licensed by the Texas Department of State Health Services (DSHS) to operate a chemical dependency treatment facility or recognized by DSHS as a drug and alcohol rehabilitation program.

Individuals residing in a **family violence shelter** are eligible to receive SNAP benefits if the institution is:

- certified as a retailer by the Food and Nutrition Service (FNS) to accept SNAP benefits;
- publicly operated; or
- a private nonprofit residential facility.

Individuals residing in a **homeless shelter** are eligible to receive SNAP if the shelter is:

- certified as a retailer by the Food and Nutrition Service (FNS) to accept SNAP benefits; or
- a public or private nonprofit shelter for the homeless.

Individuals residing in a **group living arrangement** are eligible to receive SNAP benefits if the facility is:

- certified as a retailer by the Food and Nutrition Service (FNS) to accept SNAP benefits; or
- a nonprofit, certified by a state agency as required by Section 1616(e) of the Social Security Act.

New Policy

SNAP

Individuals residing in an exempt institution that meets one of the definitions listed above remain eligible for SNAP benefits regardless of the number of meals the facility provides.

For individuals residing in institutions that do not meet the definition to be an exempt drug and alcohol treatment facility, homeless shelter, family violence shelter, or group living arrangement listed above, staff must determine SNAP eligibility based on whether the facility provides more than half of the individual's meals as specified in TWH A-232.1, #5, Institutional Residents. Individuals offered less than half of their meals from these institutions are potentially eligible to receive SNAP benefits.

Automation

This change in policy does not require automation changes.

Effective Date

Changes to policy are effective with the release of this bulletin.

Handbook

The Texas Works Handbook will be updated with the April 2016 revision.

Training

Training is not required.

3. SNAP Eligibility for Individuals with Felony Drug Convictions

Background

Senate Bill (SB) 200, 84th Legislature, Regular Session, 2015 removes the Supplemental Nutrition Assistance Program (SNAP) permanent disqualification for individuals with felony drug convictions that occurred after August 22, 1996. In addition, it requires new penalties for individuals with felony drug convictions occurring on or after September 1, 2015.

Current Policy

SNAP

Individuals are no longer permanently disqualified from receiving SNAP benefits if they are convicted of a felony drug offense (not deferred adjudication) in Texas or another state for the possession, use, or distribution of a controlled substance as of September 1, 2015.

New Policy

SNAP

An individual with a felony drug conviction that occurred on or after September 1, 2015:

- incurs a two-year SNAP disqualification penalty if the individual violates a condition of parole or community supervision, or
- incurs a permanent disqualification if the individual has a subsequent felony drug conviction **while** receiving SNAP.

This new policy applies to:

- SNAP, SNAP-Combined Application Project (CAP), and SNAP-Supplemental Security Income (SSI); and
- Felony drug convictions on or after September 1, 2015 regardless of when the offense was committed.

Felony drug conviction data is available through Data Broker. Staff must continue to address felony drug convictions during the interview when the conviction data is available through Data Broker or when the individual indicates they have been convicted of a felony offense involving drugs on the:

- Application (Form H1010, Your Texas Works Application for Assistance, Section K, Other facts Numbers 3 and 4;
- Form H1010-R, Your Texas Works Benefits: Renewal Form, Page 2, Other facts); or
- When this information is disclosed during the interview.

Staff must continue to accept the individual's statement of their felony conviction date in Texas or another state to apply the new policy even if the information is not shown in Data Broker.

At application, redetermination, and change, staff must enter in Texas Integrated Eligibility Redesign System (TIERS) all felony drug convictions that occurred on or after September 1, 2015 on the **Individual Demographics – Conviction/Rehabilitation** page.

Two-year Disqualification

Disqualify individuals with a felony drug conviction on or after September 1, 2015, who do not comply with the conditions of their parole or community supervision (probation) from receiving SNAP for two years.

- For applications, the disqualification will begin the first of the month in which the individual applied for SNAP.
- For redeterminations and changes, the two-year disqualification period begins the first of the month after adverse action expires.

There are no good cause reasons for noncompliance and the individual cannot regain eligibility for SNAP prior to the end of the two-year disqualification. Once the two-year disqualification period expires, the individual is potentially eligible for SNAP.

Permanent Disqualification

Individuals are permanently disqualified from SNAP if they have a felony drug conviction on or after September 1, 2015 and they then incur a subsequent felony drug conviction while receiving SNAP benefits. When an individual incurs subsequent felony drug convictions, staff

must review all previous SNAP certification periods in order to determine if the individual was receiving SNAP benefits when the subsequent conviction occurred.

Note: Regardless if the individual was receiving SNAP benefits, the first felony drug conviction occurring on or after September 1, 2015 is considered when determining a permanent disqualification.

There are no good cause reasons for noncompliance and the individual cannot regain eligibility for SNAP once the disqualification is imposed.

- For applications, the permanent disqualification begins the first of the month in which the individual applied for SNAP.
- For redeterminations and changes, the permanent disqualification begins the first of the month after adverse action expires.

Budgeting

Staff must follow Texas Works Handbook (TWH) A-1362.4, SNAP-Budgeting for Persons Disqualified for Intentional Program Violations, SNAP Employment Services Noncompliance, Felony Drug Convictions or Being a Fugitive. When determining eligibility for the household, count all of the income of the disqualified individual.

Verification

Staff must verify whether the individual is complying with the conditions of their parole and community supervision related to a felony drug conviction occurring on or after September 1, 2015, at each application, redetermination, and when adding a new individual with a felony drug conviction at a change.

Staff must use the new Form H1806, Parole/Community Supervision Report, to obtain the individual's signed statement of compliance or noncompliance with the conditions of parole or community supervision. Form H1806 is currently the only acceptable verification for compliance of parole or community supervision.

Exception: If the individual does not provide the completed Form H1806 by the due date, staff must deny the SNAP eligibility determination group (EDG) for failure to provide.

If the completed Form H1806 is returned and indicates that the individual is:

- complying with parole or community supervision, no additional action is needed by staff.
- not in compliance with the conditions of parole or community supervision, staff must impose the appropriate disqualification.

SNAP-CAP

The Social Security Administration monitors eligibility for SSI individuals. SSI is denied and SNAP-CAP is terminated when an individual does not comply with their parole or community supervision. Staff will not pend for compliance with parole or community supervision when processing applications, redeterminations or changes for SNAP-CAP. Since staff are not

required to verify compliance with parole or community supervision, staff must not impose a two-year disqualification for SNAP-CAP individuals.

Staff must continue to follow TWH B-475.2.1 Identifying Intentional Program Violations (IPVs) and Felony Drug Convictions policy for SNAP-CAP to determine potential permanent disqualifications.

Examples

An individual has a...	then the individual is...
felony drug conviction on July 5, 2010 and another on August 17, 2013,	<p>potentially eligible for SNAP.</p> <p>July 5, 2010 and August 17, 2013 are felony drug convictions prior to September 1, 2015. Individuals are no longer disqualified from SNAP eligibility due to felony drug convictions effective September 1, 2015.</p>
felony drug conviction on December 23, 2015, and Form H1806 verifies noncompliance with the conditions of parole or community supervision,	<p>disqualified from SNAP for two years.</p> <p>The individual has a felony drug conviction December 23, 2015 and did not comply with parole or community supervision after September 1, 2015.</p>
felony drug conviction on September 17, 2015, and receives another felony drug conviction on October 19, 2016, while the individual received SNAP benefits,	<p>permanently disqualified from receiving SNAP benefits.</p> <p>A permanent disqualification is applied since the individual received a felony drug conviction on September 17, 2015 and, while receiving SNAP benefits, received a subsequent felony drug conviction on October 19, 2015.</p>
felony drug conviction on October 21, 2015, and a second felony drug conviction August 17, 2016, but was not receiving SNAP benefits,	<p>potentially eligible for SNAP if verification of compliance with conditions of parole or community supervision is provided using Form H1806.</p> <p>The permanent disqualification does not apply since the individual was not receiving SNAP benefits on August 17, 2016 when the second felony drug conviction occurred.</p>
felony drug conviction on September 27, 2012, and receives another felony drug conviction on November 12, 2015, while receiving SNAP benefits,	<p>potentially eligible for SNAP if verification of compliance with conditions of parole or community supervision is provided using Form H1806.</p> <p>The felony drug conviction on September 27, 2012 does not count since it was not on or after September 1, 2015. November 12, 2015 is not considered a subsequent felony drug conviction, even though the individual was</p>

	receiving SNAP benefits.
felony drug convictions on January 18, 2016, June 21, 2017, and May 23, 2018. The individual did not receive SNAP June 21, 2017 but was receiving SNAP January 18, 2016 and May 23, 2018,	permanently disqualified from SNAP benefits. The individual's felony drug convictions are all on or after September 1, 2015. The individual incurred a subsequent felony drug conviction, while receiving SNAP benefits, on May 23, 2018 causing a permanent disqualification.

Staff must make referrals to the Office of Inspector General (OIG) if the individual disputes the information in Data Broker. Follow existing processes in TWH A-232.2, Disqualified Persons, #2, Individuals with a felony conviction. Referrals should only be made to OIG for SNAP when the felony drug conviction in dispute is on or after September 1, 2015.

Note: Temporary Assistance for Needy Families (TANF) policy for felony drug conviction disqualifications is not changing. Individuals with a felony drug conviction on or after April 1, 2002, are disqualified from receiving TANF.

Forms

New form H1806, Parole/Community Supervision Report, is included with this bulletin. Form H1806 will also be available in TIERS and TWH.



H1806_EN_1.pdf



H1806_SP_1.pdf

Automation

Changes to TIERS will be implemented with Release 95, December 19, 2015.

After system changes are deployed staff will no longer use the [Felony Drug Conviction Contingency Processing Method \(CPM\)](#), CPM #598061 SNAP Eligibility for Individuals with a Felony Drug Conviction (FDC) when processing applications, redeterminations, or changes for individuals with a felony drug conviction. Additionally, the TIERS Job Aid, "Felony Drug Conviction Disqualification Determination" will be available to staff upon implementation of Release 95. Broadcasts will be available to staff notifying them of the CPM retirement and issuance of the TIERS Job Aid.

Effective Date

Changes to policy are effective December 19, 2015 for applications, redeterminations, and changes (to add individuals with a felony drug conviction) disposed on or after the effective date.

Handbook

The Texas Works Handbook will be updated with the April 2016 revision.

Training

A web-based training (WBT) on the new policy and TIERS functionality will be available

on the Program Area Learning Management System (PALMS) at: <http://palms.hhsc.state.tx.us>. From the PALMS Home page, navigate to Courses> My Courses> TW> TW WBTs > and then choose **SNAP Felony Drug Conviction Changes** to take the required course. Estimated completion time for the course is **45 minutes**.

4. ACA—Updates to Modified Adjusted Gross Income (MAGI) Household Composition

Background

The ACA required that an individual's household composition be determined using MAGI rules.

An individual's MAGI household composition is based on their:

- Tax status,
- Tax relationships,
- Living arrangements, and
- Family relationships.

Current Policy

MAGI Programs

Tax Status and Tax Relationships

A tax status is based on the individual's self-declaration for what they plan to report on their federal income tax return for the taxable year in which Medicaid or Children's Health Insurance Program (CHIP) eligibility is requested. An individual must be designated as one of the following:

- A taxpayer;
- A tax dependent; or
- A non-taxpayer/non-tax dependent.

Individuals have a tax relationship to one another if they:

- Plan to file a joint federal income tax return;
- Are the taxpayer who plans to claim specific tax dependent(s); or
- Are a tax dependent of a specific taxpayer.

Individuals do not have a tax relationship to anyone if they:

- Do not plan to file a federal income tax return;
- Are not the taxpayer planning to claim the specified tax dependent(s); or
- Are not a tax dependent of a specified taxpayer.

When an individual reports that they are unmarried and intend to file a joint tax return, the individual's MAGI household composition is determined using a tax status of taxpayer filing jointly. For the purposes of MAGI household composition, they are considered to be filing jointly with someone to whom they are not married.

Inclusion of the Needs of the Unborn in the MAGI Household Composition

For certain Medicaid MAGI programs and CHIP-Perinatal (TA 85), unborn children are included in the MAGI household composition of:

- A pregnant woman; and
- Any child under age 19 whose MAGI household composition includes a pregnant woman certified on Medicaid.

Note: Unborn children are not included in the MAGI household composition for CHIP (TA 84).

New Policy

MAGI Programs

Tax Status and Tax Relationships

When an individual submits an application or renewal that indicates that they are unmarried and intend to file a joint tax return, the individual is considered a taxpayer filing separately for the purposes of MAGI household composition. An individual who is unmarried will not be designated as a taxpayer filing jointly.

For active cases that include unmarried individuals with a tax status of taxpayer filing jointly, the tax status must be updated to filing separately. Advisors must update the individual's tax status when the client is pended for other information during the following actions:

- During a Periodic Income Check (PIC) described in Texas Works Handbook (TWH) B-637, Periodic Income Checks;
- When retesting eligibility described in TWH A-2342.1, Retesting Eligibility; and
- During an Administrative Renewal described in TWH B-122.4, Medical Program Administrative Renewals.

For cases that are not pended for other information during these actions, the tax status will not be updated.

Notes:

- Policy regarding self-declaration of tax status is not changing. Clients are still allowed to report their tax status and advisors will derive MAGI household composition based on the information provided.
- Consistent with current policy:
 - For a MAGI-only application, a relationship and tax status of unmarried and intending to file jointly is not an indication that the individual is currently married or that there is a discrepancy in the individual's marital status.
 - For integrated applications that include Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF), a relationship and tax status of unmarried and intending to file jointly should be treated as a case clue if marital status is questionable.

- In both cases, if the client provides a tax document with an indication of marital status that is inconsistent with the marital status that was reported on an application, the discrepancy in the marital status must be resolved.

Inclusion of the Needs of the Unborn in the MAGI Household Composition

This policy applies to the following MAGI programs:

- TP07 and TP20, Transitional Medicaid;
- TP08, Parents and Caretaker Relatives Medicaid;
- TA31, TP32, TP33, TP34, TP35, TP36, Emergency Medicaid;
- TP40, Pregnant Women Medicaid;
- TP43, Children Under Age One;
- TP44, Children Ages 6-18;
- TP48, Children Ages 1-5;
- TP56 Medically Needy with Spend Down;
- TP70, Medicaid for Transitioning Foster Care Youth; and
- TA85, CHIP-P.

When the MAGI household composition of an individual includes a pregnant woman, the number of unborn children expected must also be included in their MAGI household composition regardless of whether the pregnant woman is certified on Medicaid.

Note: Unborn children will continue to:

- Be included in the MAGI household composition of the pregnant woman; and
- Not be included in the MAGI household composition for CHIP (TA 84).

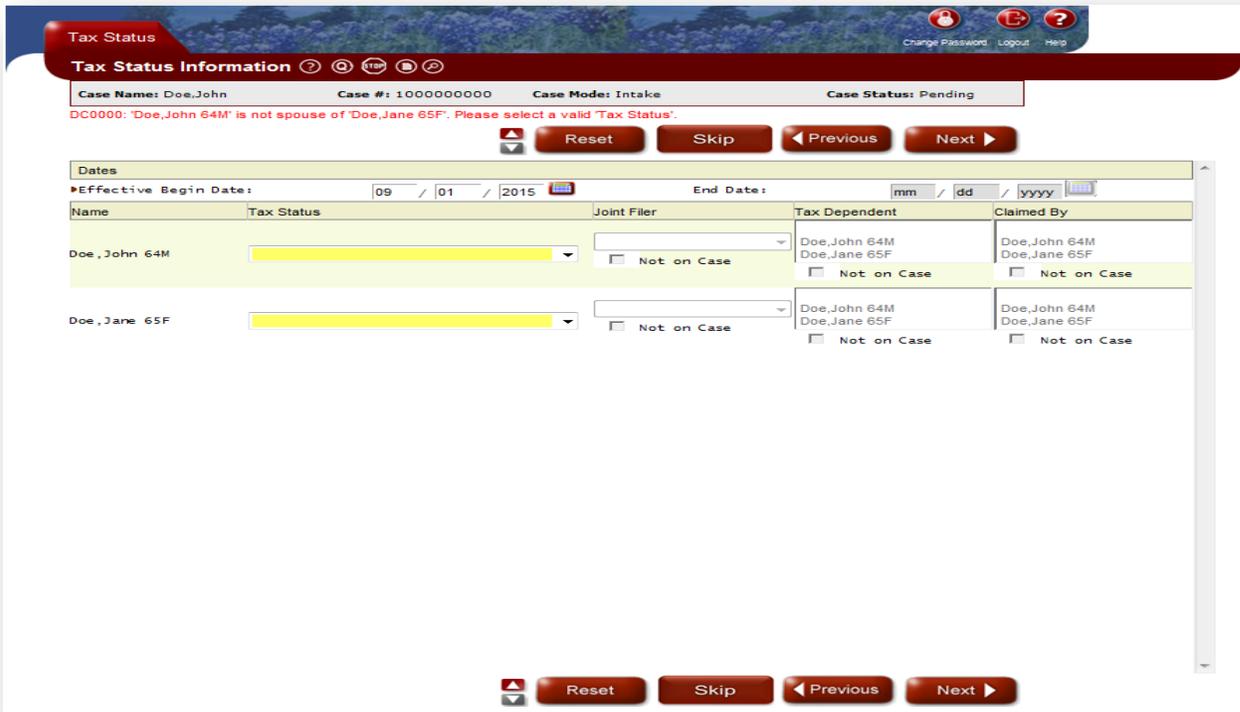
Automation

Tax Status and Tax Relationships

TIERS will no longer allow advisors to select a tax status of *Filing Jointly* for individuals listed as unrelated in the Relationship LUW.

For application or renewals processed by an advisor, TIERS displays an error message if *Filing Jointly* is selected in the *Tax Status* LUW for individuals listed as unrelated in the *Relationship* LUW. Advisors must select a valid tax status for the individual.

Advisors will continue to be able to pend for the information of a spouse that is not on the case. When an individual does not have a spouse in the *Relationship* LUW, the tax status drop-down in the *Tax Status* LUW allows advisors to select a tax status of *Taxpayer Filing Jointly* and to select the *Not on Case* checkbox to pend for the information of a spouse.



Tax Status

Tax Status Information

Case Name: Doe, John Case #: 1000000000 Case Mode: Intake Case Status: Pending

DC0000: 'Doe, John 64M' is not spouse of 'Doe, Jane 65F'. Please select a valid 'Tax Status'.

Reset Skip Previous Next

Dates

Effective Begin Date: 09 / 01 / 2015 End Date: mm / dd / yyyy

Name	Tax Status	Joint Filer	Tax Dependent	Claimed By
Doe, John 64M		<input type="checkbox"/> Not on Case	Doe, John 64M Doe, Jane 65F <input type="checkbox"/> Not on Case	Doe, John 64M Doe, Jane 65F <input type="checkbox"/> Not on Case
Doe, Jane 65F		<input type="checkbox"/> Not on Case	Doe, John 64M Doe, Jane 65F <input type="checkbox"/> Not on Case	Doe, John 64M Doe, Jane 65F <input type="checkbox"/> Not on Case

Reset Skip Previous Next

If an individual indicates on an application or renewal that they are unmarried but plan to file jointly, advisors should select taxpayer filing separately in the *Tax Status* LUW for the purposes of MAGI household composition.

For active cases that include unrelated individuals with a tax status of *Taxpayer Filing Jointly*, TIERS will Other Pend these EDGs if at least one of the unrelated individuals is a part of the MAGI budget group and the EDG is already pended for additional information during:

- PIC;
- Retesting eligibility; and
- Administrative Renewals.

TIERS will not Other Pend for any other mass update.

If an active MAGI EDG is Other Pended for tax status, advisors should select *Taxpayer Filing Separately* for the purposes of MAGI household composition.

Inclusion of the Needs of the Unborn in the MAGI Household Composition

For the applicable MAGI programs, TIERS includes the needs of unborn children in the MAGI household composition of an individual when a pregnant woman is a mandatory member of the household.

Effective Date

Changes to policy are effective December 19, 2015.

Handbook

The handbook will be updated with the July 2016 Revision.

Training

Training on updates to the MAGI household composition policy will be presented in an instructor-led course titled “Course 95-1 MAGI Household Composition.”

5. ACA—Update to Administrative Renewals Correspondence

Background

The ACA required states to modify the renewal process for MAGI Texas Works (TW) Medicaid programs, the Children’s Health Insurance Program (CHIP), and Medicaid for the Elderly and People with Disabilities (MEPD). An individual is now only required to complete and return a renewal form when HHSC cannot complete the renewal process based on existing information available in TIERS and information available through electronic data sources (ELDS). The new redetermination process is called the administrative renewal process.

Current Policy

TP 08, TP 43, TP 44, TP 48, TP 70, TA 82, and TA 84

There is no policy regarding administrative renewal correspondence when the review due date for an individual is aligned with another individual receiving coverage in the same medical type program when the following scenarios occur after the automated renewal process has been initiated by requesting electronic data sources (ELDS):

- A new individual is added to a case; or
- An individual is transferred to another medical type program.

New Policy

TP 08, TP 43, TP 44, TP 48, TP 70, TA 82, and TA 84

When a new individual is added to a case or an existing individual is transferred to a different medical type program, their review due date may be aligned with the review due date of another individual in the same medical type program on the case. If the review due dates are aligned after the system has initiated the automated renewal process by requesting ELDS, the new individual or the individual who was transferred to a different type program will be sent the following forms:

- H1830R, Texas Works Renewal Notice; and
- H1010R, Your Texas Works Benefits - Renewal Form.

Effective Date

Changes to policy are effective December 19, 2015.

Handbook

The handbook will be updated with the July 2016 Revision.

Training

Training on updates to the Administrative Renewals Correspondence policy will be presented in a web-based course titled “R95 ACA-Additional ACA Updates for TW.”

6. ACA—Eligibility of a Spouse for Parents and Caretaker Relatives Medicaid

Background

The ACA required states to provide Medicaid to the spouse of a parent or caretaker relative if the spouse is living with the parent or caretaker relative and has a MAGI household income at or below the MAGI income standard.

Current Policy

TP 08

In order to qualify for Parents and Caretaker Relatives Medicaid, an individual must be a relative of a dependent child. The caretaker must be a:

- parent,
- stepparent,
- sibling,
- step-sibling,
- grandparent,
- uncle or aunt,
- nephew or niece,
- first cousin, or
- first cousin once removed.

Prior to the ACA, when a child lived with both legal parents, both parents could have been eligible for Medicaid. The parent who was not the caretaker was considered the second parent. When a caretaker of a dependent child was not a parent, their spouse was not eligible for Medicaid.

New Policy

TP 08

The current policy is updated to clarify that the spouse of a parent or caretaker relative caring for a dependent child receiving Medicaid may also receive health care coverage through Medicaid if they:

- Request Medicaid on an application, renewal, or as a change;

- Live with and are married to the parent or caretaker relative; and
- Have a MAGI household income at or below the MAGI income standard and meet the other eligibility requirements for Parents and Caretaker Relatives Medicaid, such as citizenship or alien status.

Example: A grandfather is the caretaker of his granddaughter. The grandfather applies for Medicaid for himself, his granddaughter, and his spouse who lives with him. If the granddaughter is eligible for Medicaid, both the grandfather and his spouse may be eligible for Parents and Caretaker Relatives Medicaid.

Automation

TIERS functionality will allow the certification of both the parent or caretaker relative and their spouse, if eligible for Parents and Caretaker Relatives Medicaid.

Effective Date

Changes to policy are effective December 19, 2015.

Handbook

The handbook will be updated with the July 2016 Revision.

Training

Training on updates to the Parents and Caretaker Relatives Medicaid policy will be presented in an instructor-led course titled "Course 95-1 MAGI Household Composition."

7. Medically Needy with Spend Down Deeming Newborns

Background

The Affordable Care Act (ACA) provided clarification that newborns, whose mothers received Medically Needy with Spend Down (MNSD) (TP 56) or Emergency MNSD (TP 32) for the birth month are eligible for 12 months of Medicaid Newborn Children (TP 45) coverage.

Current Policy

TP 56 and TP 32

Currently, a newborn is eligible for Medicaid for the same period of time that the mother received coverage for MNSD (TP 56) or Emergency MNSD (TP 32). If the newborn's mother receives TP 56 coverage both the mother and newborn receive medical coverage for the birth month and the two months after the birth month. When the child's mother receives TP 32, the child is eligible for medical coverage for the month in which the mother met spend down (TWH A-825).

New Policy

TP 56 and TP 32

Newborns born to mothers who are determined eligible for TP 56 or TP 32 for the birth month and meet their spend down are eligible for TP 45 from the date of birth through the end of the month of the child's first birthday.

An applicant meets spend down by submitting or having the provider submit medical bills to the Clearinghouse. The Clearinghouse determines when the individual meets spend down and notifies the Texas Integrated Eligibility Redesign System (TIERS) via an interface.

A new field in TIERS informs staff when the child's mother has met spend down. See screenshot below.

The screenshot displays the TIERS EDG Search/Summary interface. At the top, there are tabs for 'Search/Summary' and 'Details'. Below the tabs, the EDG # is 999999999 and the EDG Name is TestL, TestM. The 'EDG Search Criteria' section shows the EDG # as 999999999 and a checkbox for 'Show Inactive EDGs'. The 'EDG Summary Information' section is divided into two columns. The left column includes fields for Program (Medicaid), Owner Employee # (TAA001), Certified Adults (0), MAGI (Yes), and Last Disposition Date (03/11/2014). The right column includes Case # (100000000), EDG Name (TestL, TestM 36M), Status (Approved), Case Mail Code (1209), Certified Children (1), Type (MA - MN w/Spend Down), Reason (Eligibility approved;), Action Effective Date (03/01/2014), and Special Review Due Date. A red box highlights the 'Renewal Status' field, which is currently empty. The 'EDG Address Information' section at the bottom provides mailing and residence addresses, home and work phone numbers, and temporary address information.

Once the child's mother meets spend down, TIERS automatically creates the TP 45 eligibility determination group (EDG).

If the child's mother applies for Medicaid for the newborn prior to the mother meeting spend down, staff test the newborn child for Medicaid for Children Under 1 (TP 43). If the newborn child is not eligible for Medicaid, TIERS test the newborn child for Children's Health Insurance Program (CHIP) (TA 84). If the birth mother meets spend down after the newborn child is certified for TP 43 or TA 84, TIERS denies the TP 43 or TA 84 prospectively. The newborn child is provided TP 45 coverage from the date of birth, if applicable, up to the date the TP 43/TA 84 coverage started and following the end date of the TP 43/TA 84. Coverage ends at the end of the month the child turns age one.

Example: A newborn is born on June 15, 2016. Mom applies in August 2016 for Medicaid for herself to cover her labor and delivery and postpartum medical expenses and Medicaid for her

newborn. However, she does not indicate a request for prior coverage for the newborn child. Mom is determined financially eligible for TP56 for the months of June, July and August 2016 and her newborn is determined eligible for CHIP effective October 1, 2016.

On September 23, 2016, TIERS receives information that the mother met spend down. TIERS denies the CHIP coverage prospectively, effective October 31, 2016, and provides TP45 from the child's birth date, June 15, 2016, to September 30, 2016 and November 1, 2016 to June 30, 2017.

Automation

Automation changes will occur with TIERS Release 95, December 19, 2015.

Effective Date

This policy is effective January 1, 2016.

Handbook

The Texas Works handbook will be updated with the April 2016 revisions.

Training

There are no training requirements.

8. Transitional Medicaid—Adding Spousal Support to Type Program (TP) 20

Background

Federal regulations provide that a Medicaid recipient is eligible for four months of transitional coverage if the recipient's Medicaid is denied because of the receipt of child support or spousal support.

Under the Affordable Care Act (ACA), child support is exempt when determining eligibility for Modified Adjusted Gross Income (MAGI) Medicaid types of assistance (TOAs). However, spousal support (also known as alimony) continues to be a countable source of income.

Current Policy

TP 20

Texas Works (TW) Bulletin #14-05, Federally Required Changes for Medicaid and CHIP, released on December 31, 2013, notified staff that TP 20, Medical Assistance (MA) – Child Support Transitional, would continue for individuals denied TP 08, MA - Parents and Caretaker Relatives, because of new or increased spousal support. Spouses of the parent or caretaker relative, and the associated dependent children, also transition to TP 20. Each individual is certified on separate TP 20 eligibility determination groups (EDGs).

New or increased alimony/spousal support will trigger a move to TP 20 for an individual and their dependent children and spouse (if applicable) if any of the following cause the individual to be ineligible for TP 08:

- the new or increased alimony/spousal support alone;
- the new or increased alimony/spousal support when added to other stable income; or
- the new or increased alimony/spousal support when combined with other changes in income, but the other changes by themselves are not enough to cause the individual to be ineligible.

The certification period is four months following the last month of TP 08 eligibility.

When new or increased alimony/spousal support causes a certified parent or caretaker relative on TP 08 to be ineligible for TP 08, the first month of TP 20 eligibility is the month the change is effective when the change is reported and acted on timely.

Individuals may receive less than four months of eligibility if the change in alimony/spousal support is not reported or acted upon timely.

Automation

Effective January 1, 2016, the TOA name for TP 20 is changing from MA - Child Support Transitional to MA - Alimony/Spousal Support Transitional for each TP 20 EDG certified on or after January 1, 2016. TP 20 EDGs certified prior to January 1, 2016, retain the TOA name MA - Child Support Transitional.

Each parent or caretaker relative and each dependent child will continue to be certified on a separate TP 20 EDG.

Alimony will be displayed as Alimony/Spousal Support in TIERS, State Portal, and the Self-Service Portal when used as a type of income or type of expense.

TIERS will be acquiring Office of Attorney General (OAG) Alimony/Spousal Support income information through electronic data sources (ELDS) via Data Broker. TIERS will run Reasonable Compatibility (RC) to compare client-reported alimony/spousal support income information to what has been acquired through ELDS. TIERS will use the dates that current spousal support and spousal support arrears payments are received or paid in ELDS to determine the frequency of payments. TIERS can set the frequency up to semi-annually. If TIERS cannot determine the frequency, the ELDS record will be stored with the frequency of "Irregular". The advisor makes the decision on whether to include the income. If included, the worker then chooses the frequency.

If the RC process results in:

- *Pass* because both the client-reported and ELDS alimony/spousal support income are below the income limit for TP 08, the client will remain on TP 08 if they meet all other TP 08 eligibility criteria.
- *Needs Information or Process Failure* because the ELDS alimony/spousal support is above the TP 08 limit but the client reported alimony/spousal support is below the limit or if the frequency of payments is irregular:
 - At Periodic Income Check (PIC), TIERS will pend the TP 08 EDG and generate Form H1020, Request for Information or Action, requesting client verification of alimony/spousal support.

- At application or renewal and if the advisor cannot clear the discrepancy during the interview, the advisor must pend the client for verification of alimony/spousal support.

If the client provides verification of the alimony/spousal support by the due date, the advisor processes the information as a change and RC will run again.

If the client fails to provide verification of the alimony/spousal support by the due date and the only verification not received is for alimony/spousal support, TIERS will test for TP 20 eligibility.

OAG Alimony/Spousal Support income information acquired through ELDS will pre-populate in certain fields in the TIERS Data Collection pages.

Effective Date

This policy is effective January 1, 2016.

Handbook

The handbook will be updated with the April 2016 Revision.

Training

Training for TW Advisors and TW Supervisors will be presented in the web-based course titled "Course 95-5 - ACA Transitional Medicaid Adding Spousal Support to TP 20".

9. Medicaid for Breast and Cervical Cancer (MBCC)

Background

To qualify for MBCC, a woman cannot be eligible for another type of Medicaid. A woman's MBCC-Presumptive or MBCC coverage is denied if she is determined eligible for another type of medical assistance. If the other type of Medicaid is denied, she may qualify for MBCC without going through the screening process if she still requires treatment for breast or cervical cancer.

Current Policy and Process

TA 66 and TA 67

A woman under age 65 who previously received MBCC Presumptive or MBCC and is denied due to receipt of another type of Medicaid for a reason other than death, unable to locate, or a move out of state may reapply for MBCC using a Form H2340, Medicaid for Breast and Cervical Cancer Renewal, if she still requires treatment for breast or cervical cancer.

The woman may reapply without having to go through the screening process regardless of when she was diagnosed or when her active treatment was last verified. She must return the Form H2340 and Form H1551, Treatment Verification, for her eligibility for MBCC to be reconsidered. TIERS automatically generates a packet containing these forms along with the Form H1833, Cover Letter - Other Medicaid Ending, or Form H1834, Cover Letter -Other Medicaid Denied.

New Policy and Process

TA 66 and TA 67

In order for a woman to reapply for MBCC without having to go through the screening process, the woman must have been diagnosed with breast or cervical cancer or her active treatment for breast or cervical cancer must have been verified within the last 12 months. If more than 12 months have passed since her diagnosis or active treatment verification, the woman must go through a Breast and Cervical Cancer Services (BCCS) contractor to be screened and reapply for MBCC.

A woman may locate a BCCS contractor in her area at <http://txclinics.dshs.texas.gov/chcl/>.

Forms

The following forms are revised to include verbiage informing the woman that she must reapply for MBCC through a BCCS contractor if more than 12 months have passed since her diagnosis or her active treatment was verified:

- Form H1833, Cover Letter - Other Medicaid Ending, and
- Form H1834, Other Medicaid Denied.

The letters provide information on where to locate a BCCS contractor. Additionally, the names of the forms have been updated to the following:

- Form H1833, Your Medicaid benefits are ending – cover letter, and
- Form H1834, Your Medicaid benefits have ended – cover letter.



H1833.docx



H1834.docx

Two new letters have been created:

- Form H1833-L, Your Medicaid benefits are ending, and
- Form H1834-L, Your Medicaid benefits have ended.



H1833-L.docx



H1834-L.docx

These letters inform the woman that if she still requires treatment for breast or cervical cancer, she must reapply through a BCCS contractor since 12 months or more have passed since her diagnosis date or active treatment verification. TIERS generates Form H1833-L when the woman's certification period for the other type of Medicaid assistance is ending within the next two months. TIERS generates Form H1834-L when the other type of Medicaid is denied due to a reason other than death, unable to locate, or a move out of state.

Formatting and text on Form H1551, Treatment Verification, is updated for clarity and ease of the physician completing the form.



H1551.doc.docx

Automation

TIERS has been updated to support the policy change.

Effective Date

Changes to policy are effective December 19, 2015.

Handbook

The handbook will be updated with the April 2016 Revision.

Training

Training for Texas Works Clerks and Texas Works Advisors will be presented in the web-based course titled "Overview of Changes to 3038P, CHIP, FFCC, and MBCC."