

## 23.4 THE CASE MAINTENANCE PROCESS

### A. CLOSURES

A M-WIN recipient may be determined ineligible prior to the end of the 6-month eligibility period if the individual:

- Moves out of state;
- Dies;
- Reaches age 65;
- Becomes eligible for SSI;
- Was approved for M-WIN in error and is not currently eligible;
- Becomes an inmate of a public institution;
- Is determined no longer disabled by SSA or MRT;
- Becomes over asset;
- Terminates employment voluntarily or employment is no longer competitive. See Section 23.2,C;
- Fails to meet the requirements in Section 23.4,C when determined unable to maintain employment – involuntary;
- Fails to pay a due enrollment fee or premium payment(s);

**NOTE:** The enrollment fee must be paid each time the individual loses coverage under this program for any reason. This includes, but is not limited to, non-payment of the monthly premium, failure to complete the redetermination of eligibility or voluntary disenrollment.

- Voluntarily disenrolls.

When the AG is closed for any reason, including voluntary disenrollment, advance notice is required, unless waived by the client. Any notice must inform the client of the last month for which a premium is due. The M-WIN contact Worker must notify the contract agency of the termination and the effective date of closure, i. e., last month for which the premium is due.

### B. CHANGE IN INCOME AND DEDUCTIONS

A change in income and/or deductions between redeterminations does not result in ineligibility for the coverage group and an income change is not used to increase the premium amount. However, the premium amount may be decreased, based upon a reported income change. See Section 23.2,D.

**NOTE:** RSDI COLAs are disregarded in determining income eligibility until the new FPL limits become effective.

### C. REDETERMINATION OF DISABILITY

The Department cannot determine that an individual who participates in the program is no longer disabled solely due to his employment or earned income

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**Medicaid Work Incentive**

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including self-employment; therefore, at the time of the 6-month redetermination the Worker must insure that the disability requirement continues to be met for the new period of eligibility. The individual must be a current RSDI recipient or there must be a valid MRT decision which extends into the new eligibility period. MRT reevaluations will be completed at the time specified by MRT.

**EXAMPLE:** At redetermination in January 2004 for a new eligibility period to begin February 2004, the Worker discovers that the last MRT evaluation covers the period from April 2003 through March 2004. Because part of the new eligibility period through March 2004 is covered by a MRT evaluation, the disability requirement is met.

**EXAMPLE:** At redetermination, the Worker discovers that the individual's RSDI was stopped. A MRT referral must be made to establish disability, but the completion of the redetermination is not delayed.

**NOTE:** When the information is submitted to MRT for the reevaluation of disability, an evaluation for Medically-Improved eligibility must be requested at the same time. If the individual is determined no longer disabled, he is evaluated automatically as Medically-Improved.

**D. UNABLE TO MAINTAIN EMPLOYMENT - INVOLUNTARY**

Only individuals who originally received benefits under the M-WIN coverage group may remain eligible for M-WIN during periods of involuntary unemployment. Involuntary unemployment includes, but is not limited to, a layoff or a temporary leave due to health problems. Coverage under this provision may be continued from the date of the loss of employment for up to 6 months. These 6 months need not be consecutive.

At reapplication, this individual, if otherwise eligible for M-WIN except for continued unemployment, may be approved for an additional 6 months.

**EXAMPLE:** Randi Stollings is approved for M-WIN for August 1 through January 31. In October she loses her job because her employer cannot hold her position open while she is off due to surgery. She notifies her Worker within 30 days of the loss of her employment, verifies enrollment at DRS and requests continued coverage. The Worker leaves her M-WIN open and documents 3 months continued coverage under the unable to maintain employment – involuntary provision.

In order to continue M-WIN when the recipient does not meet competitive employment requirements, the individual must meet the specific criteria below. The individual must:

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- Submit a written request for continued coverage to the local DHHR office within 30 days of the date he becomes unemployed. The request may be submitted by an authorized representative; and
- Maintain a connection to the workforce during his continued Medicaid eligibility period. He meets this requirement by:
  - Enrolling in a state or federal vocational rehabilitation program; or
  - Enrolling in or registering with the Office of Workforce Development; i.e., BEP;
  - Participating in a transition from school-to-work program; or
  - Participating with an approved provider of employment services. The approved Employment Network (EN) providers are found at [www.yourtickettowork.com](http://www.yourtickettowork.com); or
  - Providing documentation from his employer that the individual is on a temporary involuntary leave.
- Continue to be otherwise eligible for M-WIN by not meeting a closure reason in Item A.

At reapplication, this individual, if otherwise eligible for M-WIN except for continued unemployment, he is approved for an additional 6 months.

If the recipient loses employment and does not meet the requirements above or has already received 12 months of continued M-WIN coverage for this reason, he must be evaluated for any other coverage groups for which he may qualify. Coverage under this group is stopped.

#### E. IMPROVEMENT IN MEDICAL CONDITION - MEDICALLY-IMPROVED GROUP

**NOTE:** Only individuals who originally received benefits under the M-WIN coverage group may receive this coverage as medically-improved. The medical determination is made by MRT.

An M-WIN recipient who experiences an improvement in his medical condition remains eligible for coverage if he:

- Meets all other program eligibility requirements.

#### F. CHANGE OF ADDRESS

The contract agency must be notified of all address changes.