FAA2.L Referral Source Entry (RESE) : 03 Referred Applications - Overview : C MA Referred Applications : .02 Referral for Other Benefits and DCSS Requirements

## .02 Referral for Other Benefits and DCSS Requirements

Applications may be received from any of the following:

- Baby Arizona
- Behavioral Health Services
- KidsCare
- One-e-App Health-e-Arizona

These applications may include applicants who are required to <u>cooperate with DCSS</u> or who are potentially eligible for other benefits (see <u>Requirements-Benefits</u>).

When screening indicates certain applicants must comply with DCSS requirements, complete the following:

- Approve all eligible applicants.
- After approval, attempt to contact the participant by phone to complete the DCSS requirements. When the participant is employed, and their work hours are known, attempt to contact them outside their work hours.

Advise the participant of the requirement to cooperate with DCSS.

While on the phone, complete the <u>AP screens</u> using the keyas-you-go method.

When the participant cannot be reached by phone, send the <u>C011 notice</u> to the PI. The C011 must inform them to complete either of the following:

Contact the local office by telephone within ten days

Come to the local office within ten days

- When the participant contacts the local office by phone, complete the AP screens using the key-as-you-go method.
- When the participant contacts the local office by coming in, complete the AP screens at the face-to- face interview.
- When telephone contact cannot be made or the participant fails to appear at the local office, stop MA benefits for the mandatory participant allowing for <u>NOAA</u>.

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When screening indicates a participant is potentially eligible for other benefits, complete the following:

- Approve all eligible applicants.
- Ensure the benefits for which the participant may be eligible are not based on a financial eligibility criteria. (See <u>Types of</u> <u>Other Benefits</u>)
- Attempt to contact the participant by telephone to advise them that they must complete the following:

Apply for other benefits

Cooperate to continue receiving MA

Verify they are cooperating within 45 days

- Send the <u>C040 notice</u> to the PI.
- Set an alert on EWAL to allow 45 days for the participant to provide verification.

When verification is not provided, send NOAA and stop benefits for the PI AND the participant who is potentially eligible for other benefits.