A Referral for Other Benefits Requirements

REVISION 27 (12/01/13 – 01/31/14)

Determine whether any participants are potentially eligible for any of the types of other benefits.

CA EXCEPTION

Participants MUST apply for and accept any other CASH benefits for which they may be eligible, EXCEPT SSI.

NA EXCEPTION

Referral for other benefits is not a requirement.

WARNING

Participants are not required to apply for NEEDS BASED benefits such as CA, SSI or any other benefits that count the applicant's income and resources in the eligibility determination.

When determined potentially eligible, refer the following participants:

- The adult participants who are required to apply for themselves.
- The financially responsible participant who is required to apply on behalf of children.

When any participants are potentially eligible for other benefits, refer as follows:

- Complete a Referral for Other Benefits (FA-009) form with applicable information.
- Give the completed form to the PI for referring any potentially eligible participants for benefits.

EXCEPTION

Do NOT use the Referral for Other Benefits (FA-009) form to refer participants to apply for UI benefits.

Use the Information Request and Pending Information Agreement (FA-077) form or the <u>A011 notice</u> to request the participant apply for

UI. Claims for UI benefits must be completed by telephone or online. (See Filing for UI Benefits)

Review HOSC to verify that the participant has applied for UI benefits.

In order for eligibility to be approved, the participant must provide proof of compliance with the referral for other benefits.

When the participant who is potentially eligible for other benefits fails to comply by the timely approval date, determine whether good cause for noncompliance exists.

Good cause can be established for the following reasons:

- The participant was unable to apply due to illness, injury, or incapacitation.
- The participant had previously applied and had been denied for a reason that has not changed.

NOTE When the PI cannot provide proof of the denial, have the participant sign the Authority to Release Information (FA-059) form. Send the signed FA-059 to the agency that denied the application for other benefits, requesting proof of the denial.

When good cause for noncompliance is established, document CADO or the CADO Extension Form (CEF) with the reason for good cause. Approve the CA or MA case.

When good cause for noncompliance is not established, complete the following:

• For CA, deny or stop CA by keying the PB Denial or Closure Reason Code on AFED.