

B ABAWD Exemptions and Tracking



Verification

System interfaces and the [case file\(g\)](#) must be reviewed before verification is requested. No additional verification is needed when AZTECS interface or HEAplus hubs have verified the information.

The participant has the primary responsibility for providing verification. (See [Participant Responsibilities – Providing Verification](#) for additional policy.)

Participant statement verification can be used, unless questionable.

When the exemption is questionable, examples of acceptable verification that can be used include, and are not limited to, **any** of the following:

- ABAWD Homeless

Proof of homelessness includes, and is not limited to, a written statement or collateral contact completed by an individual aware of the participant's circumstances.

- ABAWD Veteran

Proof of veteran status includes, and is not limited to, **any** of the following:

- Service department records, such as a DD Form 214.
- Certificate of Release or Discharge from Active Duty, original Certificate of Discharge.
- Report of Transfer or Discharge, Military ID Card indicating service in the armed forces.
- Correspondence or contact from the Department of Veteran Affairs including benefit payment or award letter.
- Veteran Affairs ID Card.
- Correspondence or contact from the Department of Veteran Affairs indicating service in the Armed Forces.
- Driver's license indicating veteran status.

- Foster Care Youth

Proof of foster care youth includes, and is not limited to, **any** of the following:

- Data sharing with other state or federal agencies.
- Collateral contact to other social service workers or agencies, such as the agency administering the foster care program or Medicaid.
- A written statement from or collateral contact completed with an individual aware of the participant's circumstances.

- ABAWD Exemption for Pregnancy or Unfit for Work

When pregnancy or unfitness for work is not obvious or is questionable, document or collateral contact verification is needed. Verification can include, and is not limited to, **any** of the following:

- Insurance or police reports supporting the claim.
- The Verification of Unfitness for Work for Adults (FAA-1533A) form.
- The Verify Unfit for Work for Adults (A024) notice.
- When not questionable, a written statement from, or collateral contact completed with an individual aware of the participant's circumstances.
- A written statement or collateral contact completed by a [medically qualified source\(g\)](#) that must include **all** of the following:

The condition, circumstance, illness or disability that impedes the participants ability to participate in employment or work.

The projected duration of the condition, circumstance, illness or disability.

When the duration for the condition, circumstance, illness or disability cannot be determined at the present time, includes an indication of re-examination and reevaluation.

- Proof of receipt of temporary or permanent disability benefits from governmental or private sources including, and not limited to, **one** of the following:

VA disability benefits

Workers Compensation

SSI (or pending application for SSI)

State-issued temporary or permanent disability benefits

Participation in a Vocational Rehabilitation program

Social Security Disability benefits

Maternity leave or disability leave pay from an employer