Running With Dates

By Paul Unger & Jackie DeLaRosa

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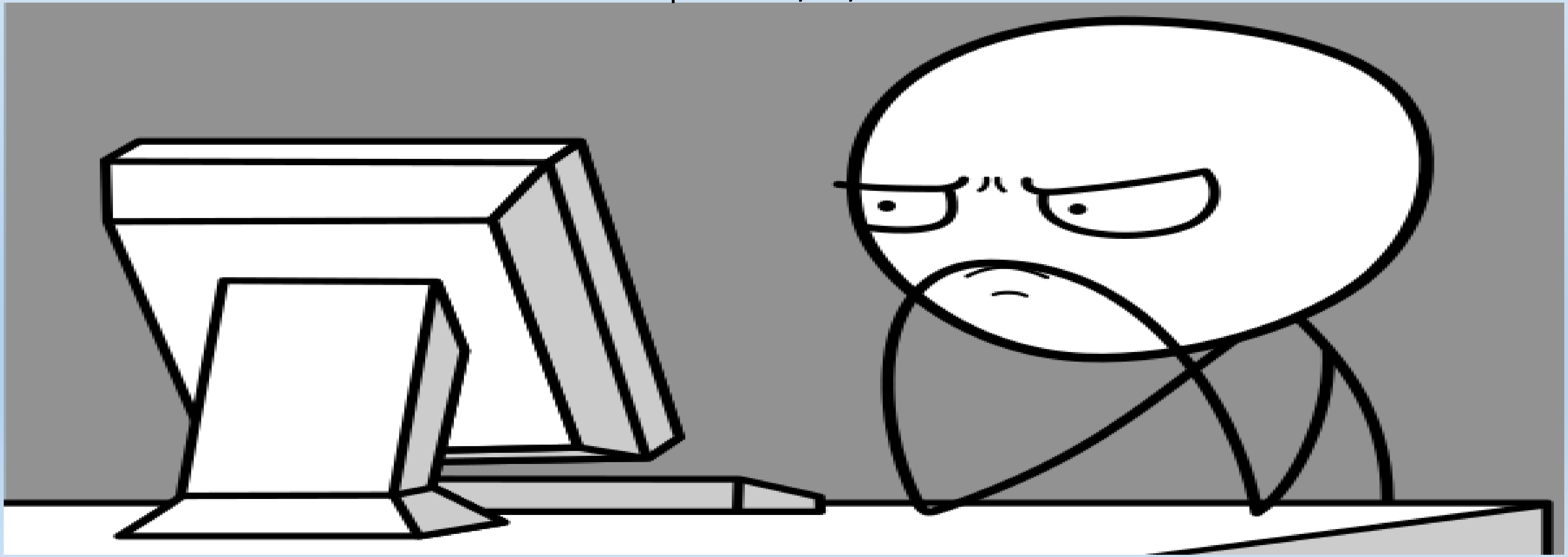

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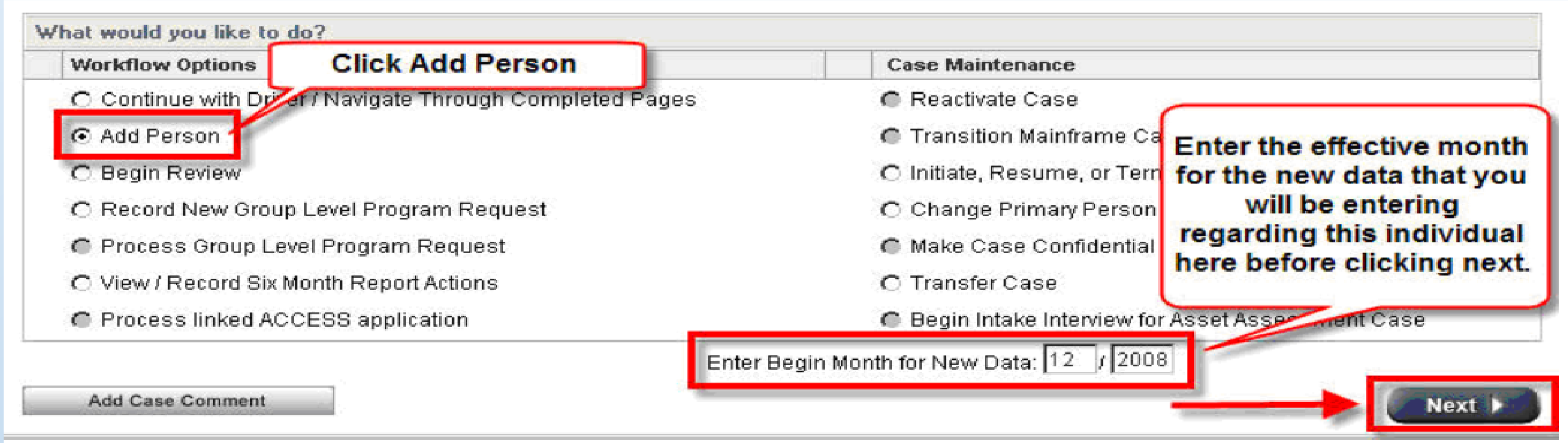
WHEN DO I RUN WITH DATES???

It is imperative to run with dates in CARES only when absolutely necessary. There are various circumstances that require you to run a case with dates. Some of the most common uses in running with dates are:

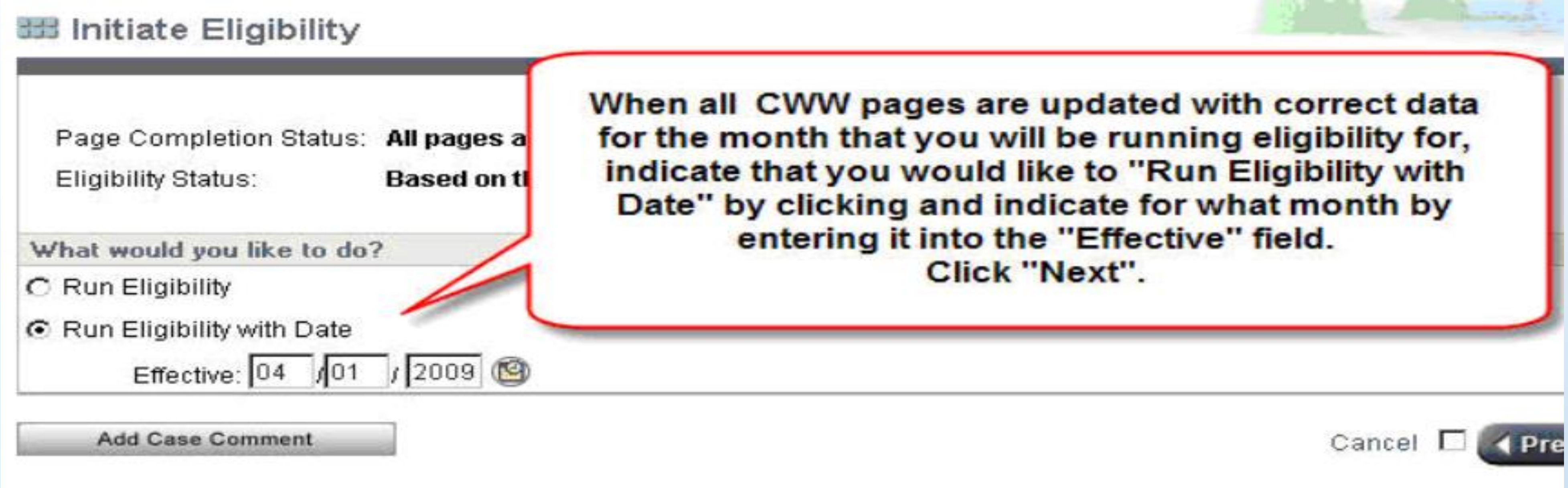
- Newborn/Person Add
- Recalculation of Benefits: Auxiliaries
- CTS Backdating Eligibility
- Medical: Late premiums, decreased premiums, person adds

Newborn/Person Add

- Using the “Add Person” work flow option from the Case Summary page initiates the driver flow. You can also enter the birth month of the baby into the Begin Month for New Data field at the bottom of the page before clicking next.



- Select the Add Person option from the Case Summary screen. You may also go directly to the Household Members screen and click  to add a person.
- Enter the new person’s name and complete the details, and CARES will begin a driver flow.
- Be sure to update ALL of the begin dates on program request screens (either baby’s DOB, date a person moved in or day person add is reported, if more than ten days after the event). Please do not change the FS request date if there is a pending application for that program.
- After the Gateposts and Summary pages are complete, finish adding any other applicable information such as employment (for person adds) and Absent Parent pages for children/newborns.

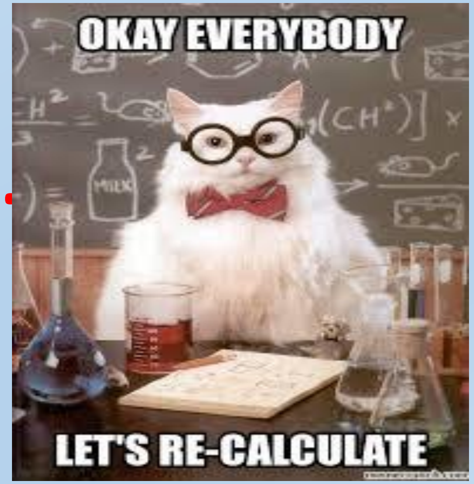


- Initiating Eligibility - for both newborn & person adds, you will want to select “Run Eligibility” and run recurring eligibility first (without dates) and confirm. Then run with dates working backwards to baby’s birth month or the month after the person was reported in the household.
- Check your results – making sure all months from birth to ongoing are open - MAGB for CENS, MAGC for non CENS
- Run the recurring month one more time to leave the case current.

Recalculation of Benefits: Auxiliaries

When a change in circumstances occurs that entitles a FoodShare group to an additional monthly benefit, an auxiliary or supplement may be necessary. If you can determine that the change should be impacting a benefit month that has already been issued or confirmed, you may run the case with dates and CARES will calculate the increase.

Remember, we never supplement current month. Always the month after the report is made, if verification is timely.



Example (change – FS supplement)

Kristen reports a rent increase on March 25th. The increase is extremely high and the worker finds the amount questionable. The case is pended for the verification due April 14th. The verification is not received so the expense is not allowed.

The verification is then received on April 28th. The worker should run the case with May 1st dates as Kristen would be eligible for a supplement beginning the month following the verified amount since the verification was not received timely.

Confirming the benefit for a month that has already been issued (or after AA in current month) will not issue FS. You will need to complete an auxiliary to issue the FoodShare benefit.

Example (newborn add- FS only case)

Baby Justin is born March 24th and this is reported March 29th. The supplement is effective April 1st. You can run the case with April 1st date to determine the correct amount of FoodShare for April since this benefit was already confirmed. You would then issue the auxiliary.

Example (person add)

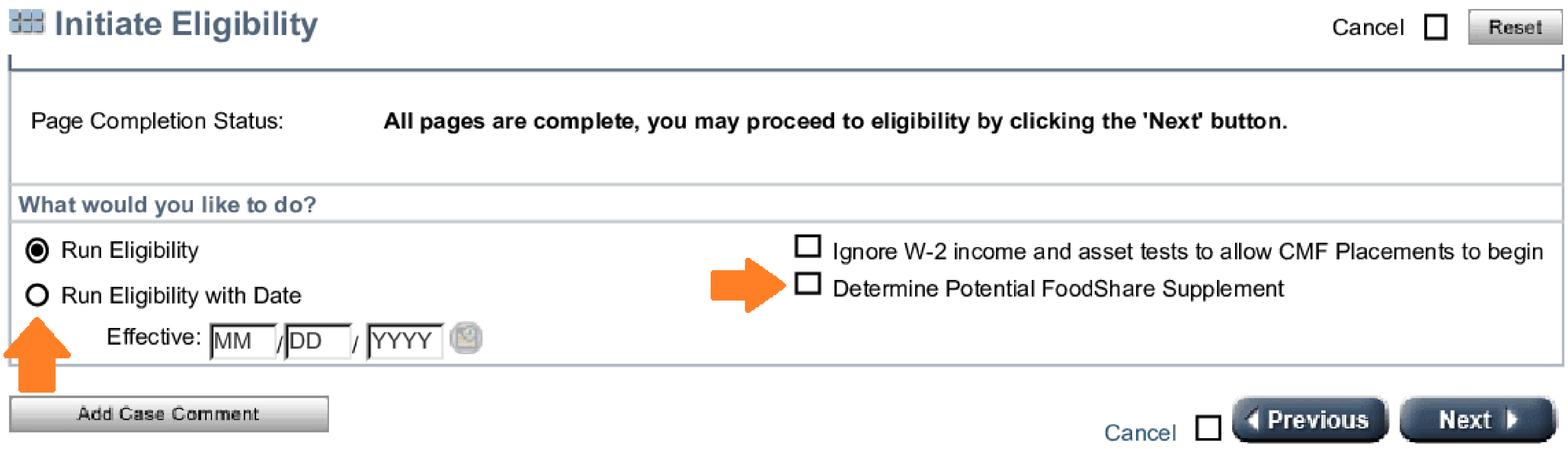
Ruby has an open FS case and reports on May 30th that her brother Jack moved in back on April 15th. Ruby would not be eligible for a supplement until June 1st because the change was reported at the end of May. You could run the case with a June 1st date to determine the amount of the supplement and then enter the auxiliary.

Issuing Auxiliaries

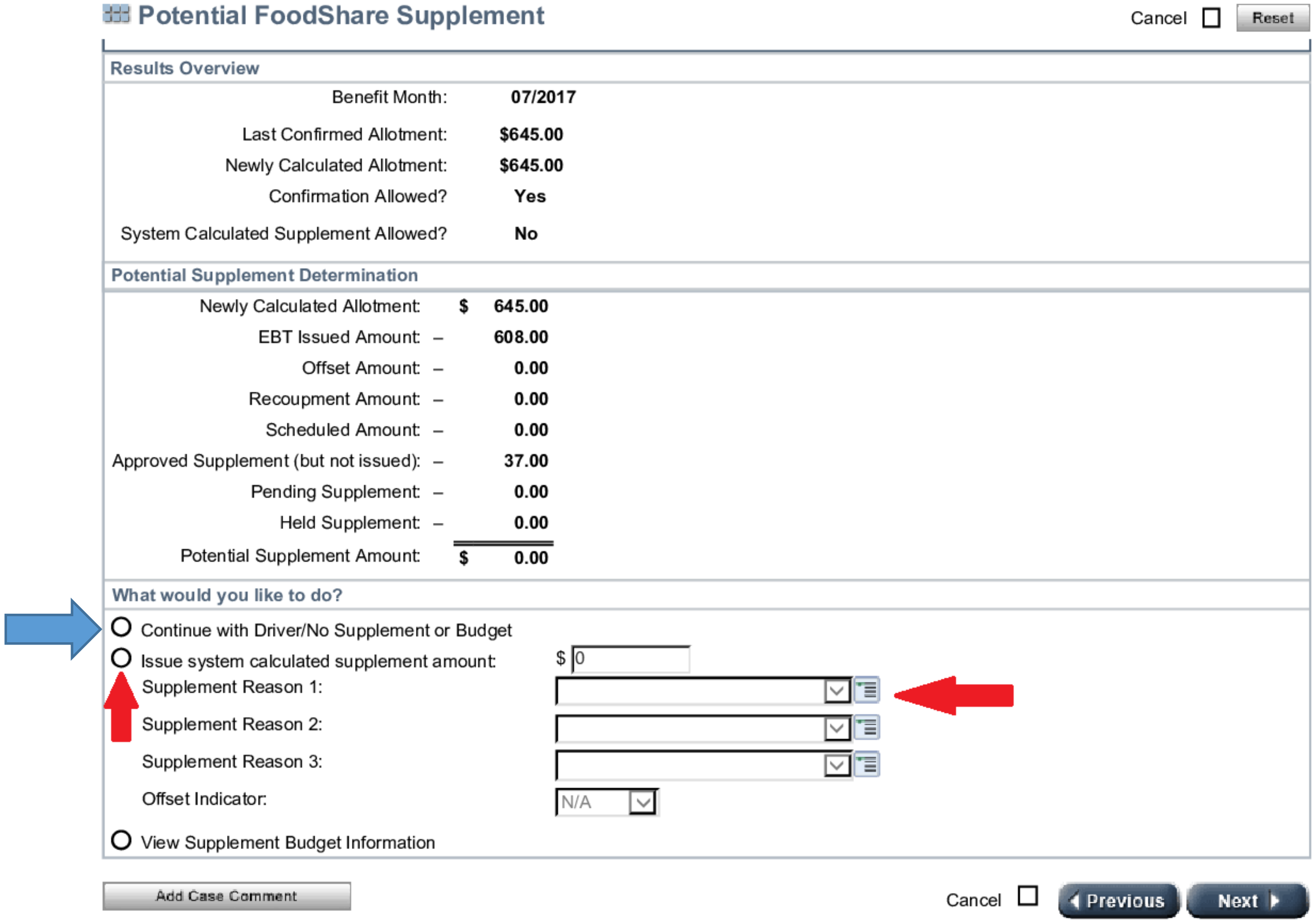
- Go to the Initiate Eligibility screen in CARES.
- Click Run Eligibility with Date and enter the effective month for the auxiliary.
- Check the Determine Potential FoodShare Supplement box.
- Hit enter or next…be sure to review the budget screen when you see it!
- You will see the Potential FoodShare Supplement screen. It will show the proposed amount of the auxiliary.
- If the amount is correct, Click Issue system calculated Supplement amount.
- Click the drop down for Supplement Reason 1 and choose the best code. You may use up to three.
- When complete, confirm the benefit. Confirm only the program for which you were determining eligibility.

- If your security clearance if less the 50, you will need the supplement approved by a lead worker or supervisor.
- IMPORTANT – if there is a FS overpayment on a case, auxiliaries for person adds and changes are applied to the overpayment. An easy way to determine if there is an overpayment is to look for the CLAIM INDICATOR marked Y on the Potential FoodShare Supplement screen. If there is, enter a Y in the “Offset Indicator” field: clicking yes on the Potential FoodShare Supplement screen will apply all of the supplement to the overpayment. If CARES determines that the supplement is greater than the amount owed, it will apply only the amount due, and issue the rest to the client.
- One can use the FoodShare Supplement Issuance screen if one desires to issue part of the supplement to the client and offset a portion. The worker will need to create this screen twice, once for the offset and one for the amount that will go to the client.

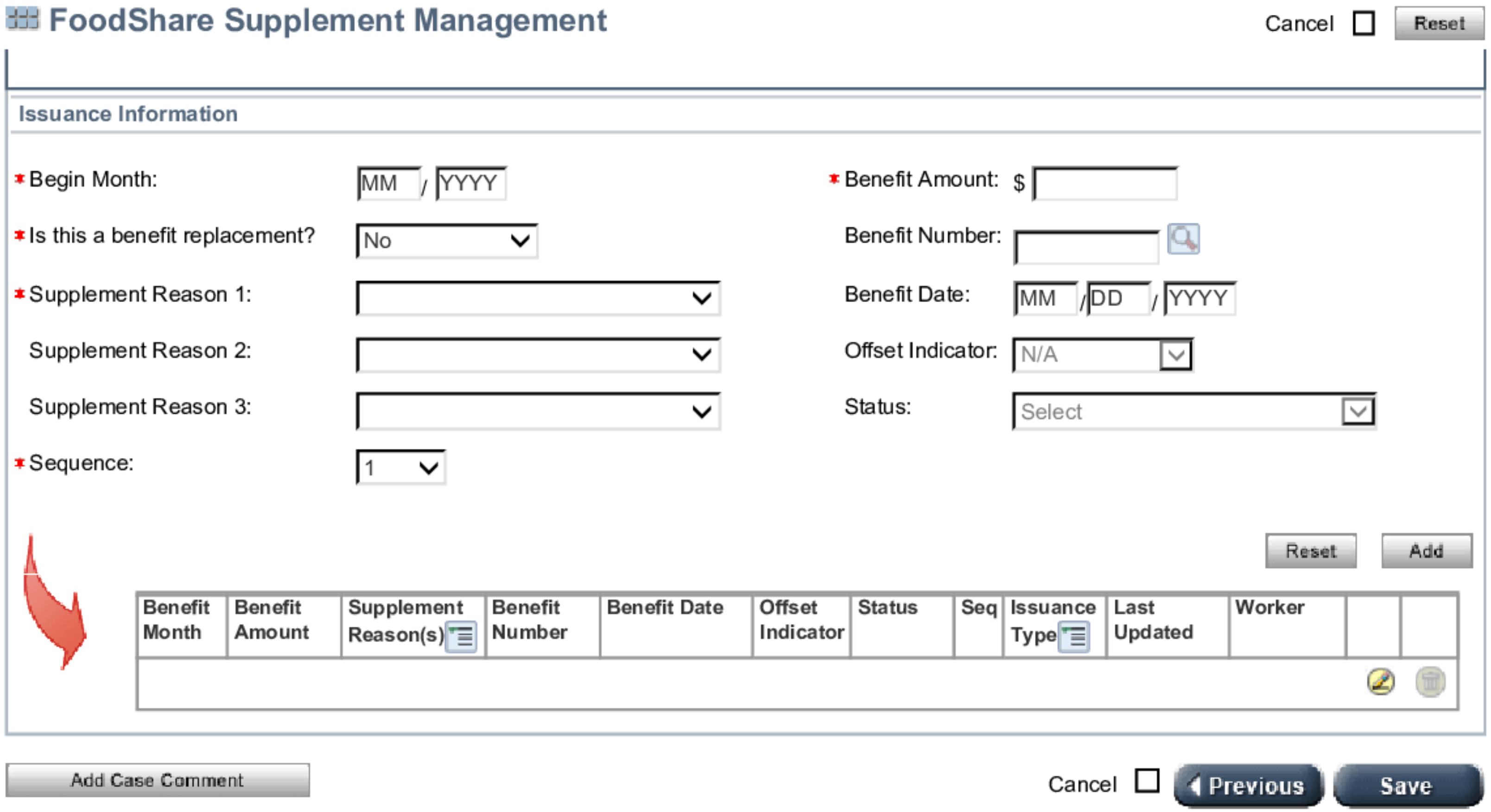
Click the Run eligibility with Date button, enter the date, and then check the Determine Potential FoodShare Supplement box.



If CARES determines the correct amount, hit the Issue system calculated supplement amount button and select the supplement reason(s). If you don't like the determination, Click the Continue with Driver/No supplement or Budget button.



If you wish to issue an auxiliary manually, you may use the screen below. FoodShare supplement codes are to the right. After you complete the details, select add. Always remember to notify your lead worker or supervisor for approval if your security clearance is less then a 50.



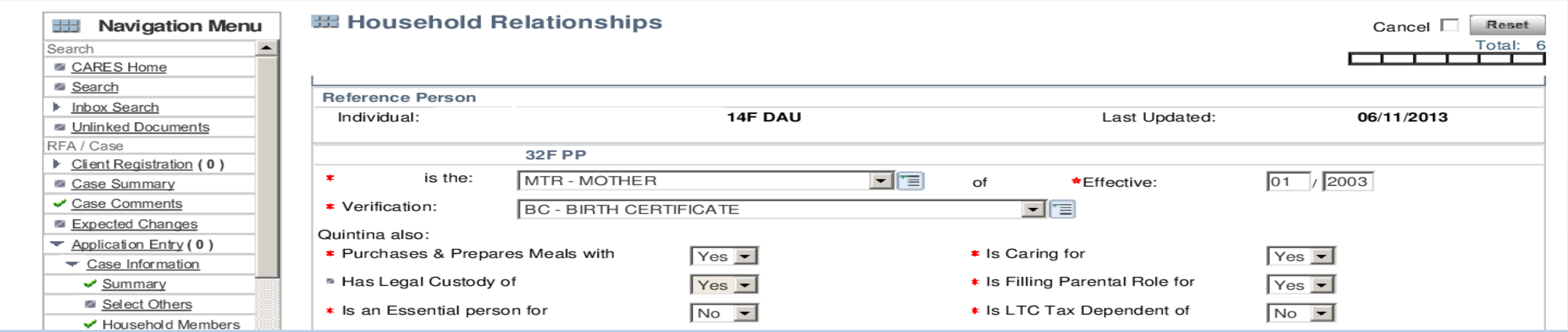
FoodShare Supplement Codes	
905	Replace Destroyed Food
906	Replace Erroneous Allotment
909	System Error
925	Person Add
928	Back Payment per Fair Hearing
929	Restore Prior to Hearing
934	Net Income Decrease
935	Restore Lost Benefits; Open
936	Restore Lost Benefits; Closed
938	Manual Issuance of Benefit
954	EBT Benefit Replacement

Running with Dates: CTS Backdating Eligibility

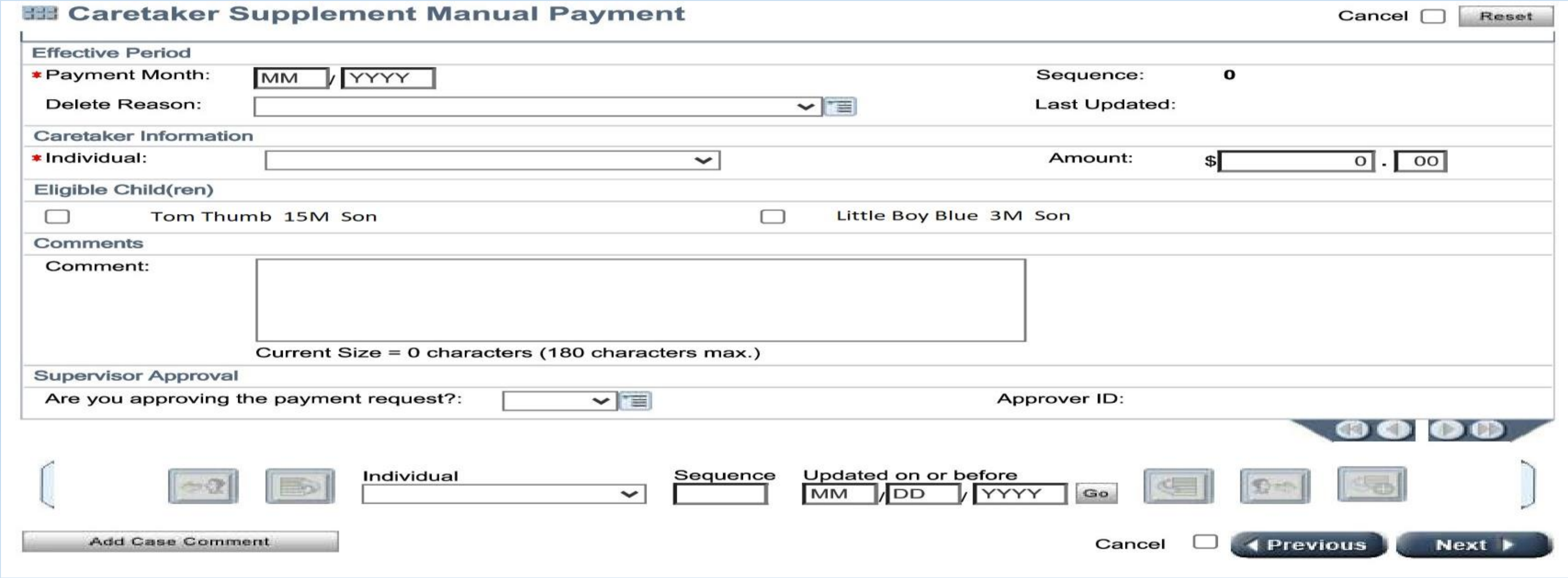
There are situations where we may have to make a CTS payment for past months.

- If a child was not correctly included in the grant.
- Late reviews - A CTS review is completed more than 1 month past the review month (there is a 1 month grace period with no interruption).
- The parent is awarded SSI eligibility for a month or more prior to current eligibility.
- If a child that the SSI parent is caring for is added to the case after Adverse Action - note both “Caring For” and “Filling Parental Role” must be selected on HH relationships page.

Follow the driver flow through and confirm the case. Watch the number of people in the group. If the individual that you added to the case is CTS eligible, your grant size should increase. If it does not increase, check the non-financial result on the Eligibility Summary screen. If it does not show a failure code, go back and check your household relationships and see if the person is coded as caring for and filling a parental role.



- After confirming the recurring month, run eligibility with dates, beginning with the month prior to the month you just ran. After confirming CTS only, you may need to do that for other, earlier months.
- Once completed, you will need to complete a retroactive Caretaker Supplement payment found in CARES at the Caretaker Supplement Manual Payment page. This worksheet will also remind you to complete screen ACMP in the mainframe. You will need one screen for each month you are paying.
- Remember that the addition of a parent who is not receiving SSI may reduce the grant or close it. (CTS Handbook 3.3-Exceptional Eligibility)



Running with Dates: CTS Child Add

Example 4

Michelle is receiving CTS for her three children. On May 3, she calls her worker to report that her fourth child has returned home from foster care. The worker must run eligibility with dates for the month of May to establish eligibility for the child. A manual payment is processed to supplement the May payment.

The worker must then run eligibility normally (without dates) for the recurring month to determine ongoing CTS eligibility for all the children.

Running with Dates: CTS Late Reviews

- Normally, one will not need to run with dates for a late CTS review since there is a 1 month grace period. If renewal is completed in the month after it is due, simply leave your request date as it was, run the review and CARES should go back and reopen CTS at of the date it ended. You will not need to complete the retroactive CTS process.
- If you need to run with dates, start with the recurring date, and work backwards. In this situation, you will need to complete the retroactive CTS form, ACMP and case comments.

Running with Dates: CTS and Retroactive SSI

- There are situations where a client is awarded SSI to a month earlier than the present month.

- Workers can begin CTS eligibility with the award month <u>IF</u> the client has had an open case for the entire period.

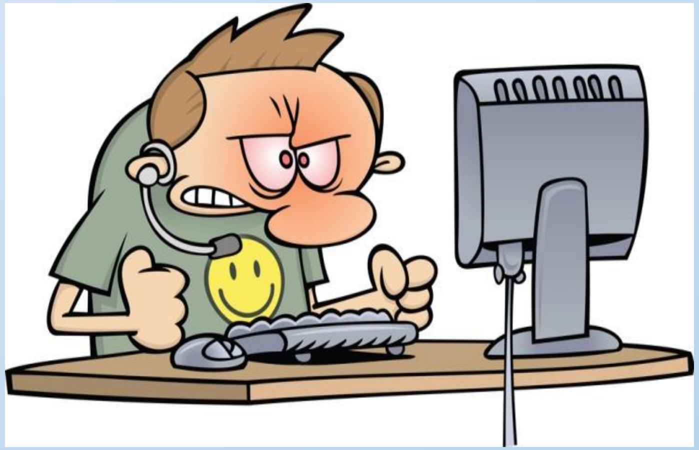
- For a new CTS request, if possible, set the request date for the month SSI began. This may not work if it was more than nine months ago.

- In the above situation, set the request date to the earliest possible date to get as many months open at one time as you can. You will not need to complete the retroactive CTS process.

- Run with dates for any other months, working backwards, complete the Retroactive CTS worksheet and mainframe screen ACMP.

- Ascertain in ForwardHealth that the client was awarded State SSI in those months.

Running with Dates: Premiums



It is very rare that we should be processing premium payments. All payments are supposed to be sent to the state.

BadgerCare premiums, while technically still owed, due not have consequences if not paid. The program will remain open if a client misses a payment.

MAPP premiums should also go to the state. If a client's MAPP has closed, and they come in to make a payment, we can accept it if they have an urgent need, such as a prescription. You may sometimes need to run with dates to open their case in CARES. We may have to collect multiple months premiums to do so.

- First, enter the payment to CARES on the Intake and Arrears Premium Info or the Premium Payment Tracking page (under Premium/RRP Info line on your menu).
- You may not need to run with dates.
- However, if the case was denied or closed, you may need to run with dates. Please start with the oldest month and work forward. After you are done, please run the recurring month.
- If the client is requesting certification immediately, go to ForwardHealth and enter a manual certification.
- If they are new to ForwardHealth, we will not be able to enter a manual certification.

- If CARES does not allow you to confirm a prior month, you will need to do a manual certification (with a premium based status code).
- If you receive a late premium at your agency and you cannot confirm the next month’s premium, complete the premium section on page 2 of the Manual certification (F10110).
- You will also need to send a manual positive notice for any months where manual certifications were completed.

Running with Dates: Decreased Premiums

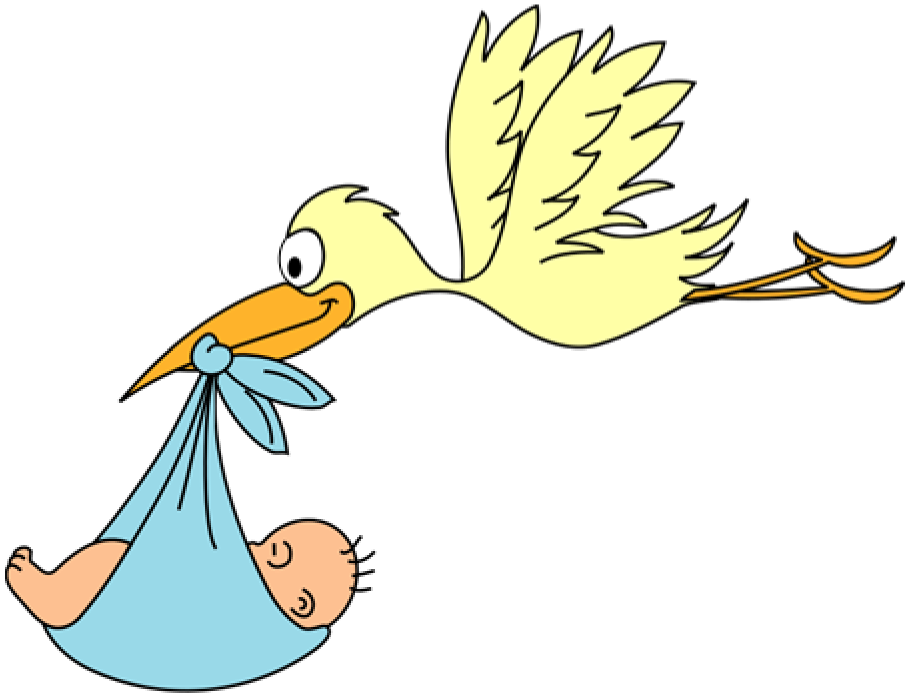
- When a change is reported resulting in a lower premium, it is effective during the month the change occurred if reported within ten days, or in the month of the report.

For example, if a person reports their EI decreased, update the EI page date (to the month of the report), pend the case. If verification is received timely, run the case immediately beginning the month of the report. Then run ongoing months. Review the new premium amounts to ensure the change is effective the month it was reported (if verified timely).

- They may not be eligible for a premium reduction if their verification was received late (in the following month).

Healthcare Running with Dates: Person/Newborn Adds

- After adding baby, run eligibility (without dates) and confirm, then run with dates (working backwards) to baby's birth month, confirming each month. Then run again without dates & confirm.
- After adding a person, run recurring month first (without dates), working backwards to current month and then run ongoing again.



ChildCare

Workers must run eligibility with dates after adverse action to confirm Child Care closures for the next consecutive month for the following specific reasons:

- Any instance of Child Support non-cooperation;
- When the parent no longer resides in Wisconsin;
- When there are no eligible children in the household; or
- When the required verification was not returned within the seven (7) business day time frame from the date the Notice of Verification Needed was mailed.

- When any of these above reasons occur, the agency worker must use the following process to close the Child Care AG for the next consecutive month when running eligibility after adverse action to prevent EBT CSAW benefits from being loaded onto the CC EBT card in error:
- STEP 1: Worker must run without dates for recurring months and confirm.
- STEP 2: Worker must change the Child Care request on the Child Care Request page in CWW back to “Yes” (leaving the dates as they appear).
- STEP 3: Worker must run with dates (using the begin date of the first day of the next consecutive month) to close the Child Care AG for the next consecutive month.
- NOTE: If the agency worker accidentally runs for recurring and forgets to change the Child Care request to “Yes,” then when the agency worker runs with dates to confirm the Child Care closure for the next consecutive month, Child Care will fail for “054” reason code and the agency worker will not be able to confirm the Child Care AG closed. To fix this, the agency worker will need to change the Child Care request to “Yes” and then run with dates again to confirm the Child Care closure for the next consecutive month for the correct closure reason.

- The following screenshot shows a situation in which the worker ran with dates to close a ChildCare case after cutoff.
- When on the Confirmed Assistance Group Eligibility History screen, hit the Show Invalid button.
- You will see a history of all confirmations.
- On this case, January 2017 passed at cutoff.
- The worker ran with dates for January to close the case on December 27.
- Verification came in later and the case passed.

https://prd.cares.wisconsin.gov/ - CARES Worker Web - Confirmed Assistance Group Eligibility Hi - Internet Explorer

CARES Worker Web PRODUCTION

User ID: XDA681 User Name: P UNGER Quick Select : CASE/RFA Help Logout

Primary Person : KIMBERLY OLSON 34F PP Case: 0135625505 Status: Open Mode: Ongoing 06/13/2018

Action Items (1) Documents (0) Discrepancies (0) Work Items (0)

Navigation Menu

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Confirmed Assistance Group Eligibility History

Case Information

Assistance Group: CC - CHILD CARE Sequence: 1

Benefit Details Hide Invalid

1 of 2 Pages

Benefit Begin Date	Benefit End Date	Date Confirmed	Eligibility Status-Non Financial	Eligibility Status-Asset	Eligibility Status-Income	Benefit Amount	Net Change Amount	Reasons	Updated By	Override
07/01/2018		05/29/2018	PASS		PASS				XDAD38	
07/01/2018	06/30/2018	05/29/2018	PASS		PASS				XDAD38	
06/01/2018	06/30/2018	05/29/2018	PASS		PASS				XDAD38	
06/01/2018	05/31/2018	05/10/2018	PASS		FAIL			016	XDA744	
06/01/2018	05/31/2018	05/09/2018	PASS		PASS				XDAD41	
06/01/2018	05/31/2018	04/23/2018	PASS		PASS				XDAD31	
06/01/2018	05/31/2018	04/20/2018	PASS		FAIL			016	XDAB91	
06/01/2018	05/31/2018	04/19/2018	FAIL		PEND			054	XDAB17	
05/01/2018	05/31/2018	03/28/2018	PASS		PASS				XDAB70	
05/01/2018	04/30/2018	03/28/2018	PASS		PASS				XDAB70	
04/01/2018	04/30/2018	03/28/2018	PASS		PASS				XDAB70	
04/01/2018	03/31/2018	03/09/2018	PEND		FAIL			016	XDAB17	
03/01/2018	03/31/2018	02/13/2018	PASS		PASS				XDAD38	
03/01/2018	02/28/2018	02/03/2018	PASS		PASS				CARES	
02/01/2018	02/28/2018	01/02/2018	PASS		PASS				XDAD26	
02/01/2018	01/31/2018	01/02/2018	PASS		PASS				XDAD26	
02/01/2018	01/31/2018	12/29/2017	PASS		PASS				XDAB17	
02/01/2018	01/31/2018	12/21/2017	FAIL		PEND			257	XDAB17	
01/01/2018	01/31/2018	01/02/2018	PASS		PASS				XDAD26	
01/01/2018	12/31/2017	12/27/2017	FAIL		FAIL			112 257	XDA997	
01/01/2018	12/31/2017	11/22/2017	PASS		PASS				XDAB66	
01/01/2018	12/31/2017	11/22/2017	PASS		PASS				XDAB66	

100%

Closure Reason Codes: The following closure reason codes will close a Child Care AG when an agency worker is running with dates after adverse action to confirm a Child Care closure for the next consecutive month: Other closure codes will not allow you to confirm the closure, in those circumstances the worker will need to go into EBT CSAW and end the current authorization for the last day of the current month.

Reason Code	Short Description
005	Failed to cooperate with the Child Support agency
050	Primary person does not reside or intend to reside in WI
112	Did not verify answers
211	You have failed to cooperate with child support
212	You have failed to cooperate a 2nd time with child support
213	You have failed 3 times to cooperate with child support
238	The Primary person does not reside in Wisconsin
250	There is no eligible child in the home
263	Failed three times to cooperate with child support
267	There is no eligible adult caring for an eligible child
352	The target is not in a qualifying living arrangement
354	The minor is no longer under the care of the PP/PP spouse
366	PP/PP spouse no longer filling a parental role for target
370	There is no minor in the Assistance Group

THINGS TO REMEMBER:

- When running with dates, it is important to ensure that the begin months and budget pages are reviewed for accuracy before confirming to make sure the correct income and expenses are listed for the months you are looking at.
- Confirming FoodShare benefits while running with dates will NEVER issue the benefit, you must issue an auxiliary.
- When you run with dates and confirm, notices are generated. Best practice is to only confirm the benefits you are trying to update. Confirming changes to other programs may generate incorrect notices of eligibility for those other programs. Remember to suppress any incorrect notices generated as a result of running with dates.

Continued:

- Running and confirming with dates for CTS also does not issue a payment. The worker will need to complete the "Authorization for Retroactive Caretaker Supplement" form that is in 5.3 of The Caretaker Supplement Handbook.
- When creating a retroactive CTS payment, the worker needs to complete screen ACMP in the CARES mainframe.
- If you are processing an application that is more than thirty days old, make certain that CARES is running benefits back to the application date. If not, contact the PRT for assistance. These cases can be fixed without running with dates.