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TO: Income Maintenance Supervisors
Income Maintenance Lead Workers
Income Maintenance Staff
W-2 Agencies
Workforce Development Boards
Job Center Leads and Managers
Training Staff
Child Care Coordinators

FROM: Amy Mendel-Clemens, Chief
Technical Assistance and Training Section
Bureau of Enrollment Management
Division of Health Care Access and
Accountability

Janice Peters, Director
Bureau of Wisconsin Works
Division of Family Supports

BEM/DFS OPERATIONS MEMO					
No:	08-48				
DATE:	10/24/08				
FS	<input checked="" type="checkbox"/>	MA	<input checked="" type="checkbox"/>	BC+	<input checked="" type="checkbox"/>
SC	<input type="checkbox"/>	CTS	<input checked="" type="checkbox"/>	FSET	<input type="checkbox"/>
CC	<input checked="" type="checkbox"/>	W-2	<input checked="" type="checkbox"/>	EA	<input type="checkbox"/>
CF	<input type="checkbox"/>	JAL	<input type="checkbox"/>	JC	<input type="checkbox"/>
RAP	<input type="checkbox"/>	WIA	<input type="checkbox"/>	Other	<input type="checkbox"/> *
				EP	
PRIORITY: HIGH					

SUBJECT: Appointment Letters

CROSS REFERENCE: Operations Memo 08-31

EFFECTIVE DATE: October 31, 2008

PURPOSE: This memo explains changes to Client Scheduling codes and appointment letters.

BACKGROUND:

In August 2008, we issued new policy regarding the waiver of the face to face interview requirement for FoodShare. At that time, we made changes to the Appointment Letters issued from Client Scheduling. The feedback we have been receiving from local agencies is that workers and customers are confused about whether or not the appointment is a phone appointment or a face to face appointment. Based on this feedback, we have made further changes which include adding new letters and Client Scheduling activity codes.

CURRENT POLICY:

The policy implemented with Operations Memo 08-31 is not changing:

Telephone interviews will be allowed for all FS and CC applications and reviews unless a face-to-face interview is requested by the customer. Telephone interviews are not allowed for W-2.

For Child Care purposes, telephone interviews are optional for each local agency unless the customer requests one.

For FoodShare purposes, because of Federal reporting requirements, hardship reasons must still be collected and documented at the initial application.

CARES

Three new appointment activity codes with corresponding new scheduling letters have been added to the Client Scheduling sub-system. Combined with 3 existing activity codes, there are now face to face appointment letters and separate phone appointment letters. The following activity codes and corresponding letters will be effective October 31, 2008.

IF	Intake at the Agency	IP	Intake by Phone
EO	Review at the Agency	RP	Review by Phone
IR	Missed Appt. at the Agency	MP	Missed Appt. by Phone

Copies of the new letters and the "Verification Items" referenced in the letters are attached.

The customer's phone number from the appropriate CWW page will be entered in the phone appointment letters. For an intake appointment, the phone number will come from the Client Registration Additional Data page. For Review appointments, the phone number will come from the General Case Information page. If a preferred contact method is requested by the customer, the corresponding phone number will be used for the interview. This will give the customer an opportunity to ensure that the agency has their most current phone number for the phone interview.

These codes should not be used for W-2.

ATTACHMENTS

IF – Intake at Agency/ Client Scheduling letter - CSL1
 IP – Intake by phone/Client Scheduling letter - CSLP (new)
 IR – Missed Appt at the Agency/Client Scheduling letter - CSL3
 MP – Missed Interview by Phone/Client Scheduling letter - CSLQ (new)
 EO – Review at the Agency/Client Scheduling letter CSLD
 RP – Review by Phone/Client Scheduling letter - CSLO (new)
 Verification Items

CONTACTS

BEM CARES Information & Problem Resolution Center

*Program Categories – FS – FoodShare, MA – Medicaid, BC+ – BadgerCare Plus, SC – Senior Care, CTS – Caretaker Supplement, CC – Child Care, W-2 – Wisconsin Works, FSET – FoodShare Employment and Training, CF – Children First, EA – Emergency Assistance, JAL – Job Access Loan, JC - Job Center Programs, RAP – Refugee Assistance Program, WIA – Workforce Investment Act, Other EP – Other Employment Programs.

DHFS/DHCAA/BEM/AMC

IF – Intake at Agency/ Client Scheduling letter - CSL1

Our records show that you contacted our agency and requested FoodShare, health care, Caretaker Supplement, Child Care and/or W-2. An appointment for you to come to the office has been scheduled for:

Date:
Time:
Location:

Please call the number at the top of this letter, if:

- You need to change this appointment date or time, or
- You prefer to do your interview by telephone (W-2 interviews cannot be done by telephone).

Note: If you should miss this interview, you MUST call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your eligibility for assistance.

You must provide certain items as proof of your answers. The section below entitled "Verification Items" lists examples of what is needed. You should try to bring as many of the items you have to your interview.

Certain proof, if already provided, such as citizenship and identity, will not need to be provided again. If you are having trouble getting any of the items you need, call the number listed above and ask for help.

If you are only requesting Medicaid and/or BadgerCare Plus, you can apply by mail. To do this, you must complete the application/review packet. You can get this form: Online at dhs.wisconsin.gov/em/customerhelp, by calling 1-800-362-3002 or by calling the telephone number listed above.

Everyone who gets assistance must report certain changes. For most programs, your notices will give you the monthly income limit for your family size for reporting changes in income and will include other reporting rules.

You have the right to request a fair hearing (or for W-2, a Fact Finding), if your assistance is denied, reduced or ended, or you do not agree with the amount, and you think the local agency made a mistake.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

IP – Intake by phone/Client Scheduling letter CSLP (new)

Our records show that you contacted our agency and requested FoodShare, health care, Caretaker Supplement and/or Child Care. A telephone appointment has been scheduled for you on:

Date:

Time:

We will call you at the above date and time at <Telephone Number >. You will be called within 15 minutes of your appointment time.

Please call us at the telephone number at the top of this letter, if:

- Your telephone number has changed,
- You need to change this telephone appointment date or time, or
- You want to do your interview in person at the office.

Note: If you should miss this interview, you MUST call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your eligibility for assistance.

Even though your interview is by telephone, you must still provide certain items as proof of your answers. After your interview, the worker will send you a letter that lists the items you will need to send back to complete your application. The letter will also explain how and where to send this required proof. The section below entitled "Verification Items" lists examples of what is needed.

Certain proof, if already provided, such as citizenship and identity, will not need to be provided again. If you are having trouble getting any of the items you need, call the number listed above and ask for help.

If you are only applying for Medicaid and/or BadgerCare Plus, applications can be done by mail. To do this, you must complete the application/review packet. You can get this form: Online at dhs.wisconsin.gov/em/customerhelp, by calling 1-800-362-3002 or by calling the telephone number at the top of this letter.

Everyone who gets benefits must report certain changes. Your notices will give you the monthly income limit for your family size for reporting income changes and will include other reporting rules.

You have the right to request a fair hearing, if your assistance is denied, reduced or ended, or you do not agree with the amount, and you think the local agency made a mistake.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

IR – Missed Appt at the Agency/Client Scheduling letter CSL3

Our records show that we sent you an appointment to apply for FoodShare, health care, Child Care and/or W-2. Since you were not able to come to the office for that appointment, a second appointment has been scheduled for you on:

Date:

Time:

Location:

Please call the number listed above, if:

- You need to change this appointment date or time,
- You prefer to do your interview by telephone (W-2 interviews can not be done by telephone) or
- You need help getting the proof needed.

Note: If you should miss this interview, you **MUST** call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your eligibility for assistance.

Everyone who gets benefits must report certain changes. For most programs, your notices will give you the monthly income limit for your family size for reporting income changes and will include other reporting rules.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

MP – Missed Interview by Phone/Client Scheduling letter CSLQ (new)

Our records show that we sent you a telephone appointment to apply for FoodShare, health care, Caretaker Supplement and/or Child Care. Since you missed your appointment, a second telephone appointment has been scheduled for you on:

Date:

Time:

We will call you at the above date and time at <Telephone Number>. You will be called within 15 minutes of your appointment time.

Please call us at the telephone number at the top of this letter, if:

- Your telephone number has changed,
- You need to change this appointment date or time, or
- You want to do your interview in person

Note: If you should miss this interview, you **MUST** call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your eligibility for assistance.

Everyone who gets benefits must report certain changes. Your notices will give you the monthly income limit for your family size for reporting income changes and will include other reporting rules.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

EO – Review at the Agency/Client Scheduling letter CSLD

Your FoodShare, health care, Caretaker Supplement, Child Care and/or W-2 case is due to be reviewed. The purpose of this review is to see if you can continue to receive assistance. An appointment for you to come to the office has been scheduled on:

Date:

Time:

Location:

Please call the number at the top of this letter, if:

- You need to change this appointment date or time, or
- You prefer to do your interview by telephone (W-2 interviews cannot be done by telephone).

Note: If you should miss this interview, you **MUST** call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your continued eligibility for assistance.

You must provide certain items as proof of your answers. The section below entitled "Verification Items" lists examples of what is needed. You should try to bring as many of the items you have to your interview.

Certain proof, if already provided, such as citizenship and identity will not need to be provided again. If you are having trouble getting any of the items you need, call the number listed above and ask for help.

If you are only enrolled in Medicaid and/or BadgerCare Plus, reviews can be done by mail. To do this, you must complete the application/review packet. You can get this form: Online at dhs.wisconsin.gov/em/customerhelp, by calling 1-800-362-3002 or by calling the telephone number at the top of this letter.

Please Note: If you do not complete your review and provide required proof on time, your assistance will end.

Everyone who gets benefits must report certain changes. For most programs, your notices will give you the monthly income limit for your family size for reporting income changes and will include other reporting rules.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

RP – Review by Phone/Client Scheduling letter CSLO (new)

Your FoodShare, health care, Caretaker Supplement and/or Child Care case is due to be reviewed. The purpose of this review is to see if you can continue to receive assistance. A telephone appointment has been scheduled for you on:

Date:
Time:

We will call you at the above date and time at <Telephone Number>. You will be called within 15 minutes of your appointment time.

Please call us at the telephone number at the top of this letter, if:

- Your telephone number has changed;
- You need to be called at a different number;
- You need to change this telephone appointment date or time; or
- You want to do your review in person

Note: If you should miss this interview, you **MUST** call the number listed at the top of the letter to make another appointment. If we do not have an interview with you, we cannot determine your continued eligibility for assistance.

Even though your review is by telephone, you must still provide certain items as proof of your answers. After your review, the worker will send you a letter that lists the items you will need to send back to complete your review. The letter will also explain how and where to send this required proof. The section below entitled "Verification Items" lists examples of what is needed.

Certain proof, if already provided, such as citizenship and identity, will not need to be provided again. If you are having trouble getting any of the items you need, call the number listed above and ask for help.

If you are enrolled only in Medicaid and/or BadgerCare Plus, reviews can be done by mail. To do this, you must complete the application/review packet. You can get this form: Online at dhs.wisconsin.gov/em/customerhelp, by calling 1-800-362-3002 or by calling the telephone number at the top of this letter.

Please Note: If you do not complete your review, and provide required proof on time, your benefits will end.

Everyone who gets benefits must report certain changes. Your notices will give you the monthly income limit for your family size for reporting income changes and will include other reporting rules.

You have the right to ask for reasonable accommodations to take part in assistance programs for a disability-related reason, or the right to ask for interpreters or translators in order to take part in assistance programs.

***** Verification Items *****

Eligibility for Wisconsin Works (W-2); Child Care Assistance (CC); FoodShare Wisconsin (FS); Elderly, Blind or Disabled Medicaid (EBD), BadgerCare Plus (BC+) and Caretaker Supplement (CTS) cannot be determined until you give proof of certain required information. Suggestions for ways to show proof and which programs require that proof are listed below. If you have an appointment at the agency, please bring as many items on the list as you can to your interview. If your appointment is by phone, you will be sent a list of the items following the appointment. Tell us what items you are not able to get so we can help you get them. Depending on your situation, you may be asked to give proof of items not listed below. Your worker will send you a list of other proof that is needed. If you do not cooperate in giving us the information or proof we need, your application may be denied or your benefits ended.

School Enrollment or Other Status (W-2, FS, CTS):

- Letter from school; report card; diploma; GED certificate; high school equivalency diploma

Monthly Rent or House Payment (EBD, FS):

- Current rent receipt with landlord's name and phone number on it; lease or mortgage papers; real estate property tax statement; homeowner's insurance statement

Monthly Utility Expenses (EBD, FS):

- Current utility and phone bills; statement from utility company

Savings and Checking Accounts (EBD, W-2), including Certificates of Deposit, Retirement Accounts (including IRA and KEOGH accounts), Stocks or Bonds:

- Current credit union or bank statements

Insurance Policies (EBD, W-2):

- Life insurance policy and the insurance company's statement on the policy's current cash value

Burial Assets (EBD):

- Burial trust agreements; contract or deed for vault, casket or plot; statement showing current value

Trust Funds (EBD, CC, W-2):

- Trust agreement; court order

Other Savings or Investments (EBD, W-2):

- Statement from stockbroker; copy of bonds; current bank, credit union or savings and loan statement

Real Estate (EBD, W-2):

- Deeds or titles; real estate receipts; tax records; statement of current value from local business

Vehicles (EBD, W-2) - cars, trucks, boats, and other motorized vehicles:

- Car title or registration; written statement from car dealer; loan papers; sales receipt; State Div. of Motor Vehicle statement

Earned Income (EBD, BC+, FS, CTS, W-2, CC):

- All check stubs received in the last 30 days; signed statement from employer that includes gross earnings and pay dates expected in the next 30 days; Employer Verification of Earnings form

Self-Employment Income (EBD, BC+, FS, CTS, W-2, CC):

- Most recent income tax returns (including Schedules SE, F, or C)

Child Care Expenses (FS):

- Signed statement from the child care provider; receipts; and/or bills

Student Loans, Grants, Scholarships and Fellowships (EBD, CC):

- Financial aid award letter; receipt from the financial aid office showing date aid received and amount

Unearned Income (EBD, BC+, FS, CTS, W-2, CC) Unemployment Insurance, Disability Insurance, Social Security, Retirement, Veteran's Benefits, Military Allotments:

- Award letter; copy of last check

Child Support (EBD, BC+, FS, CTS)- received or paid in a state other than Wisconsin:

- Court order; payment record from other state

Pregnancy (BC+):

- Statement from doctor with estimated due date

Property (EBD, CTS) - Land, Stocks, Bonds, Cash, Vehicles, etc. sold, traded, transferred or given away in the last 36 months:

- Deeds; sales agreement; contract; title; dated and signed sales slip