

# SRS – KHPA

## Sharing Information

This session provides instructions on how, and what type of information is shared between the SRS Regional office and the HealthWave Clearinghouse.

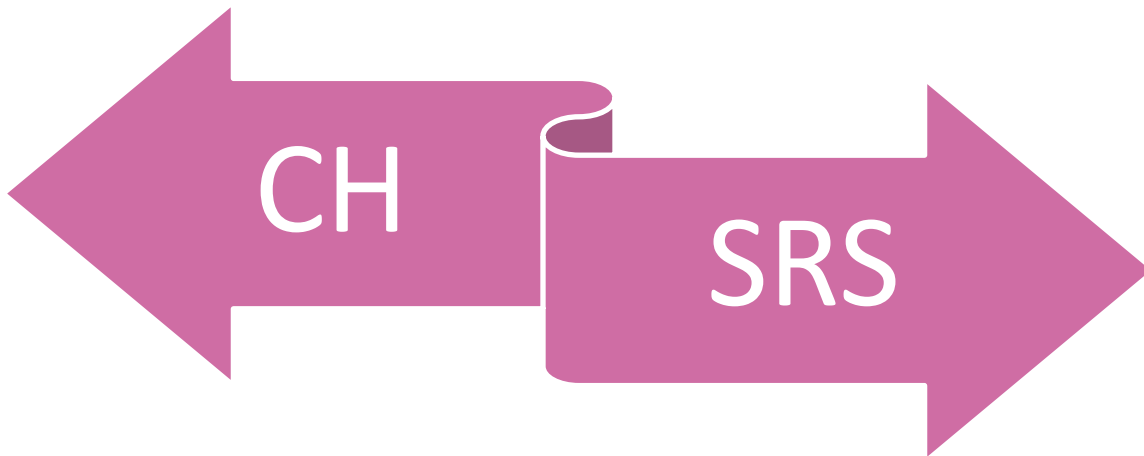
Goals:

- ❖ Explain the change in policy
- ❖ Define the changes the Clearinghouse must share with SRS
- ❖ Define the changes SRS must share with the Clearinghouse
- ❖ Describe the action taken when a SRS consumer shares information with the Clearinghouse

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## Reporting Changes

When a consumer is receiving benefits from both the Clearinghouse and their local SRS office, they are required to report changes to both agencies.



If the consumer has recently provided verification to one of their case workers, and specifically asks the worker to send this information to the other agency, this assistance will be provided.

The Clearinghouse requests income verification when processing a new application.

The applicant reports that she just applied for food stamps and provided this information to her food stamps worker. She asks us if we can get it from her other worker.

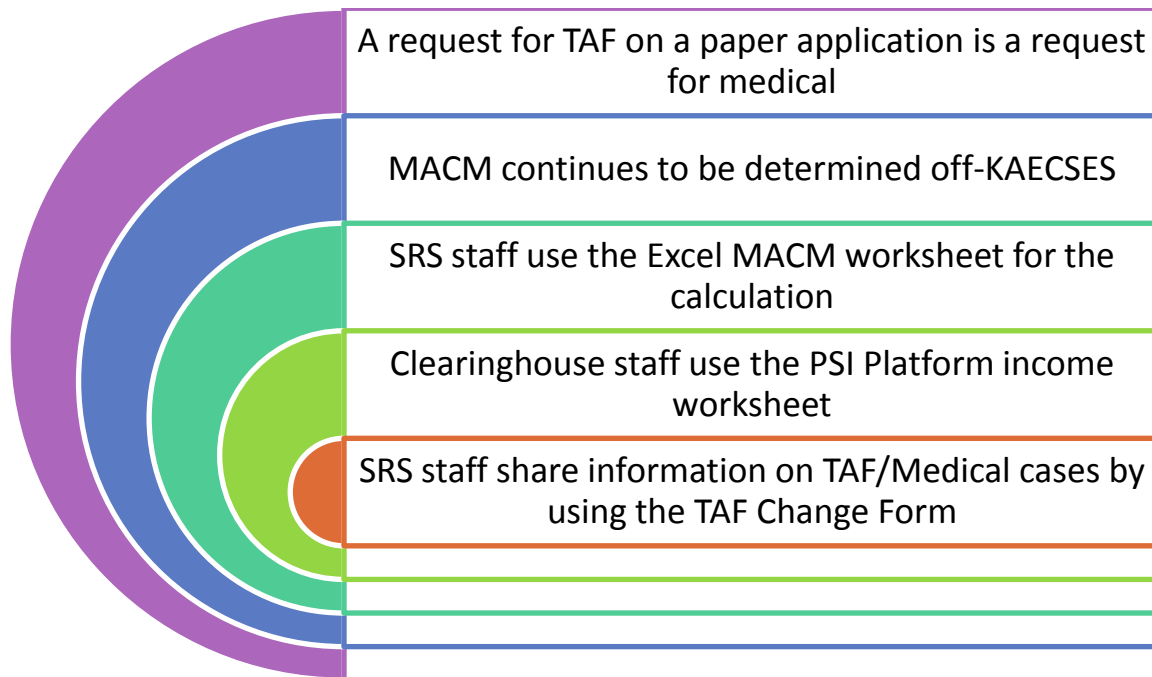
### Medical Changes

Information will continue to be shared between agencies when it is related to medical programs. These will include family medical programs, SOBRA, HCBS, and Foster Care. Notifications from SRS will be received via e-mail to [HW-Info@khpa.ks.gov](mailto:HW-Info@khpa.ks.gov)

### Notification of CSE Cooperation – Noncooperation

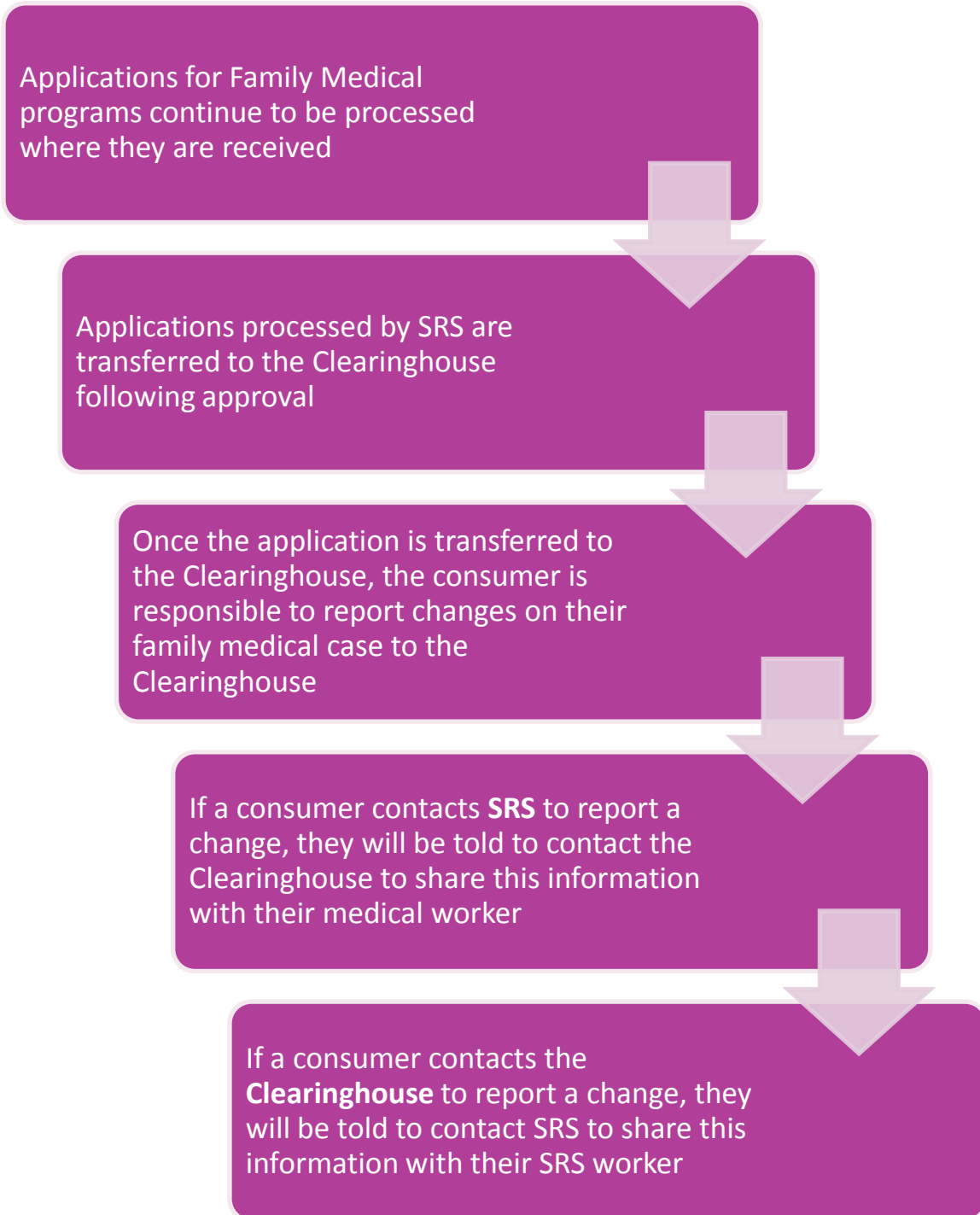
The CSE staff will no longer share information with the Clearinghouse regarding a change in the cooperation status. The PSI Platform will import the alerts that are automatically set on the KAECSES system for this purpose.

If Clearinghouse staff are taking action on a CSE change, it is not necessary to share this information with the SRS staff, as they would have also received the same notification on their case.



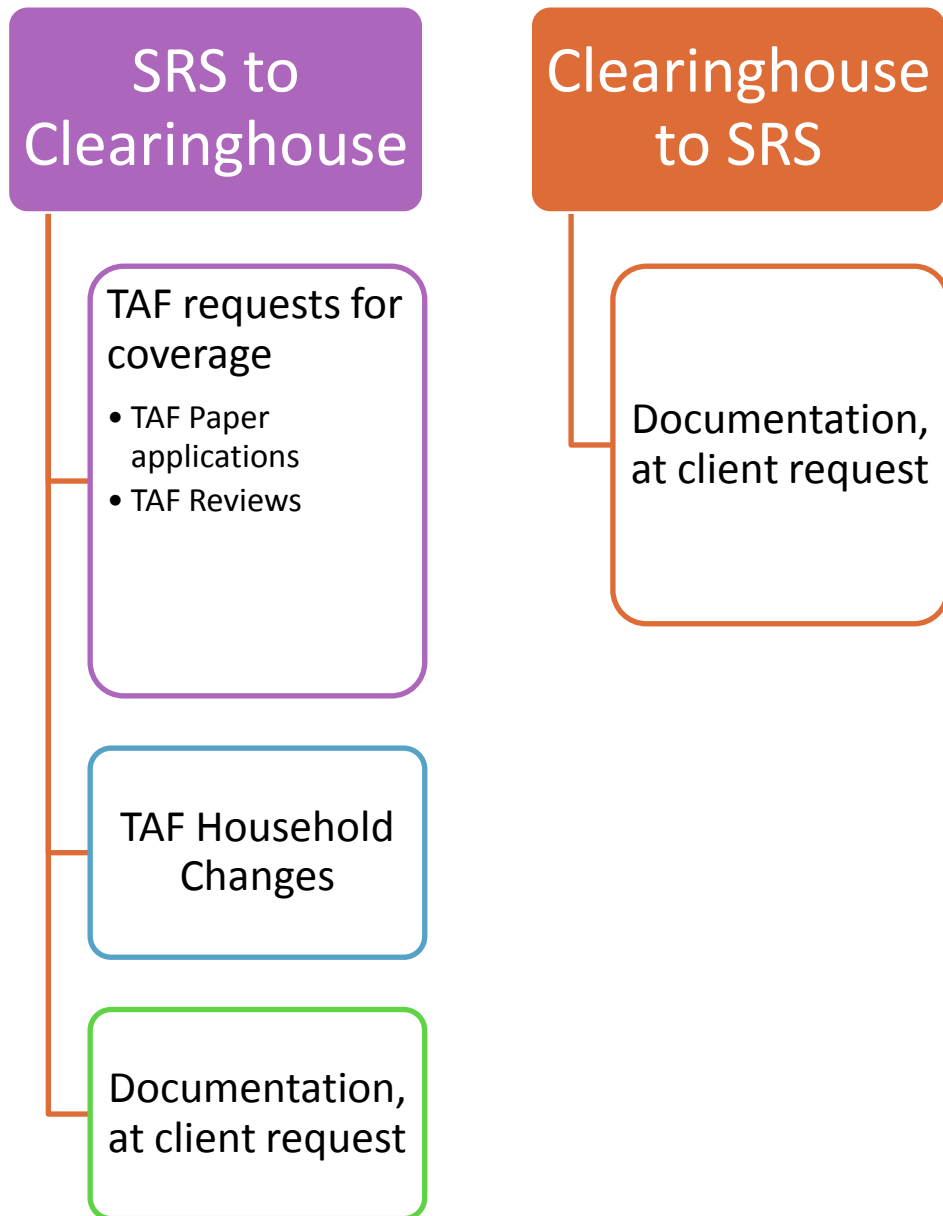
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## Process Overview



## Sharing Information

The following chart outlines what information SRS will be sharing with the Clearinghouse, and what information the Clearinghouse must share with SRS.



### TAF Change Form

The TAF Change Form is found in the KEESM Appendix, as item W-11. This is the form SRS staff will use to share information with the Clearinghouse as outlined above.

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#### TAF Change Form

Use this form to report information that may affect another case maintained in either the field or the Clearinghouse. Use the 'Additional Information' section to include details as needed.

Date  Worker Name

Casehead Name

SRS Case #  CH Case #  County Code

Type of change: (please mark those that apply)

**TAF App (paper)** attach to the app packet       **TAF Review**       **Household Change** add/remove person, birth, death

**Additional Information**

Living Arrange. (S/N)	<input type="checkbox"/>	MACM Household Size	<input type="checkbox"/>	Shelter Group	<input type="checkbox"/> #N/A	No Income Reported	<input type="checkbox"/>
Benefit Month	<input type="text"/>	Wage Earner #1	<input type="text"/>	Wage Earner #2	<input type="text"/>		
Did the wage earner receive MACM in Kansas in 1 of the past 4 months? Enter 0 if no, 1 if yes.		0					
Earned Income							
Work Expense		0		0			
Earnings Less Work Exp		0		0			
Earnings Disregard (40%)		0		0			
Dep Care Expense							
Total Disregards		0		0			
Countable Earnings		0					
Child Support							
Other Unearned Income							
Total Net Income		0					
Payment Standard		#N/A					
Adjusted Need		#N/A					