

STATE DEPARTMENT OF SOCIAL
REHABILITATION SERVICES
Integrated Services Delivery
Docking State Office Building
Room 681 - West
Topeka, Kansas 66612

October 1, 2006

To: Regional Directors
Assistant Regional Directors
Economic and Employment Support Program Administrators
Economic and Employment Support Staff
Other Staff

Re: Summary of Changes for Kansas Economic and Employment Support Manual
(KEESM) Revision No. 29, Effective October 1, 2006

PURPOSE, BACKGROUND, and REASON FOR CHANGE

The purpose of this document is to transmit Revision No. 29 of the Kansas Economic and Employment Support Manual effective October 1, 2006.

Adult Protective Services - Minor corrections are being made to section 12000, but no policy changes have been made for this revision. Form [ES-1020](#) has been returned to the forms section.

Child Care - With this revision, the MO child care subtype is being eliminated. Child care will be available under the EM subtype to families formerly served under the MO subtype.

Food Assistance - This revision incorporates the annual adjustments to the Food Stamp Program that are effective October 1 of each year. Increasing are: the standard deduction amounts, the excess shelter deduction; the gross and net income limits; and the maximum allotment amounts. These changes will be processed with rollover in August, effective October 1, 2006. Further information about these changes will be provided prior to rollover in August.

Due to a policy directive from USDA, this revision also implements a change in policy regarding actions to be taken when verification for a shelter change that increases benefits is not provided. Instead of allowing no deduction, the previously verified amount must be allowed.

Several other technical corrections and clarifications applicable to food stamp policy are also being included.

General Assistance - Significant program changes are being made to these sections to reflect new policies and processes for individuals to access and establish eligibility for General Assistance resulting from the implementation of Presumptive Medical Disability Determination. These changes include the elimination of the ES-3151 and the establishment of internal processes for determining if the applicant / recipient will meet the disability eligibility standard for GA.

There are also new procedures outlined for utilizing the advocacy services provided by Kansas Legal Services and additional expectations for the state hospitals utilizing the GA Reintegration process.

Hardship status is now only allowed for those who have an active Social Security application pending or on appeal at the time they reach the 24 month time limit. All other hardship guidelines are being removed.

Medicaid and General Assistance/MediKan - Presumptive Medical Disability - Presumptive Medical Disability (PMD) is a new process to determine disability for both the Medical Assistance and General Assistance/MediKan programs. Although the Social Security determination will continue to take priority, PMD allows an individual to receive Medicaid coverage while the SSA determination is being processed. The same process will be used to determine eligibility for General Assistance and MediKan coverage as well. **The new process is effective September 1, 2006 and a separate policy memo will be issued.**

Federal Medicaid rules require an individual meet Social Security disability criteria in order to receive Medicaid based on disability. For administrative purposes, Kansas has relied on SSA to make the disability determination for many years. This strict limitation has resulted in cases with a final determination pending many months, or even years. Although the MediKan program does provide a limited medical benefit package to those with the lowest incomes through the General Assistance program, it is a funded entirely by state money. This makes the MediKan program costly to maintain and operate.

Effective 09-01-2006, SRS and KHPA will begin making internal disability determinations under the Presumptive Medical Disability Determination process (PMDD). Although the rules to make such decisions are strictly tied to SSA's rules, the internal process is designed to issue a decision much quicker. This will allow those persons with the most severe disabilities to gain earlier access to Medicaid coverage. It will also allow some individuals who would otherwise receive state-funded MediKan to receive Medicaid, allowing the state to obtain additional federal funding and provide a full range of services to the beneficiary.

The PMDD process will also be utilized for the General Assistance program. The current method of determining disability under the GA program is dependent upon the applicant obtaining and submitting a ES-3151 (Statement of Disability). Using the PMDD process for both GA and Medicaid purposes will provide a streamlined process.

Successful Families - Congress reauthorized the Temporary Assistance for Needy Families (TANF) program of 1996 when they passed the Deficit Reduction Act (DRA) of 2005. The DRA provides the intent of Congress with respect to the importance of work in providing TAF recipients the best opportunity for self-sufficiency. In addition, the DRA promotes accountability in reporting accurate and timely data.

Although federal requirements continue to emphasize work, Kansas acknowledges that many of our customers need to focus on barrier removal activities in order to get ready for work. We are still committed to working with the individual on whatever activity best addresses the individual's needs. Sometimes that activity will not meet the federal definition of work.

States assist customers in making the transition to employment. Also, states are expected to meet work participation rates and other critical program requirements in order to maintain full federal funding and avoid penalties. The changes in the DRA will make it challenging for Kansas to meet the federal work participation requirements and will require an increased investment and focus in engaging our customers in self sufficiency efforts.

The work program assessment provides valuable information to identify strengths and address barriers to employment. This revision promotes statewide consistency in the work program assessment process. Additional assessment tools are being incorporated into the KEESM.

Health and Human Services (HHS) regulations ensure uniform and consistent measurement of work participation rates. This includes defining work activities, establishing uniform methods for reporting hours of work, providing guidelines for the types of documentation needed to verify reported hours of work and determining the circumstances in which "child-only" cases should be included in the work participation rates. States are required to establish and maintain work participation verification procedures reviewed by HHS.

This revision includes policy changes and clarifications to implement the provisions of the DRA. This revision also includes several other technical corrections and clarifications applicable to multiple programs.

TAF Assistance - TAF assistance is generally limited to a life-time 60 month limit. Kansas has granted hardship status for certain family groups which would allow them to continue receiving TAF beyond 60 months. The hardship protocol has been revised, to include Limited English Proficiency (LEP) issues and addresses how to close a case appropriately, when the 60 month time limit has been reached and the protocol has not been completed. In addition, TAF families who have received 60 months or more assistance and do not meet the hardship criteria are no longer eligible for assistance when the TAF case closes. In the past, cases were allowed to be reopened if the notice did not specifically state that the case was closed because of the 60 month time limit.

TAF and Food Assistance - In an effort to more fully support agency goals of helping adults reach self-sufficiency, engaging work program participants, using customer-driven practices and the need to simplify our program, the CSE penalty under the TAF program and the work penalty under the TAF and Food Stamp programs have been modified. The minimum two-month time limit for a second and subsequent penalty has been removed. Each penalty will be applied as though it was a first time penalty. Benefits can be reinstated upon cooperation. A new application will not be needed if the cooperation occurs by the end of the month following the effective date of closure and all other eligibility requirements are met. This change in policy will allow staff to serve our customers when the customer is most inclined to fully participate with the work program. For simplification, CSE penalty policy is aligned with the work program penalty policy.

I. ADULT PROTECTIVE SERVICES

A. CHANGES

1. **D.R.C. - Disability Rights Center of Kansas** - In section [12150](#) (Definitions), the D.R.C. definition has been changed to show the correct abbreviation.
2. **Intake Process** - In section [12200](#), item number 7 has been changed to reflect the correct reference, which should be [12210](#) (6), regarding referrals to law enforcement.
3. **Determination of Eligibility** - The note in section [12712](#), item (1), regarding SRS not participating in the filing of the petition when family is involved, has been removed. When seeking guardianships involving family, refer to section [12714](#) (2)(c).

B. CLARIFICATIONS

None

II. CHILD CARE

A. CHANGES

1. **Child Care (CC)** - Section [1114](#) is being modified to remove the MO child care subtype and to renumber the listing of subtypes. Additional wording is being added under the EM subtype to indicate that families formerly served under the MO subtype will be served under the EM subtype.
2. **How to Apply - Applicable to all programs** - In section [1411.1](#), the second NOTE is being modified to remove reference to the MO child care subtype.
3. **Child Care** - Item #5 in section [1413](#) is being modified to remove reference to the MO child care subtype.
4. **Reinstatement of Assistance** - Section [1423](#) is being modified to remove reference to the MO child care subtype.
5. **MO (Food Stamp Only) Child Care** - Information in section [2832](#) is being deleted and the section reserved.
6. **IE EM (Employed Income Eligible) Child Care** - Section [2834](#) is being reformatted and wording added to indicate that families formerly served under the MO child care subtype will now be served under the EM subtype.

B. CLARIFICATION

None

III. FOOD ASSISTANCE

A. CHANGES

1. **Annual Adjustments to the Food Stamp Program Standards** - Effective October 1, 2006, the following appendices are being updated to incorporate the annual federal adjustments to the FSP that increases the standard deduction, excess shelter deduction, and gross and net income limits:
 - Item [F-2](#), Food Stamp Program Standards;
 - Item [F-3](#), Food Stamp Program Benefit Tables; and
 - Item [F-11](#), 130% Income Reporting Chart for Simplified Reporters. (The changes to item F-11 result from the increase in the Gross income limit.)
2. **Standard Deduction** - Section [7222](#) is being modified to increase the standard deduction amounts. The new amounts effective 10-01-06 are:
 - Household size 1-3 = \$134
 - Household size 4 = \$139
 - Household size 5 = \$162
 - Household size 6 or more = \$186
3. **Shelter Costs** - Section [7226](#) is being modified to increase the excess shelter deduction to \$417.

These amounts were entered into the KAECSES-AE system prior to rollover in August 2006 and were processed automatically with rollover. Further information about the implementation of the annual adjustments was provided separately.

4. **Household Composition** - A recent lawsuit filed in another state has resulted in USDA issuing a change in policy regarding household composition. This modification provides that any person who is severely incapacitated and cannot purchase and prepare his or her own food, but who has arranged to have his or her food purchased and prepared separately from those with whom he or she lives can qualify for separate household status. This change is being included in KEESM [4210](#) (2).
5. **Acting on Reported Changes in Shelter Costs** - A recent directive from USDA is requiring Kansas to change policy regarding actions taken after a shelter cost change is reported that results in an increase in benefits and

verification is not provided. In a prior revision it was clarified that if verification was not provided, benefits are to be determined without allowing any shelter costs. That policy matched the policy at application and review. USDA is now saying that instead, benefits must be determined allowing the previously verified or "old" shelter costs. For example, verified rent is \$200 per month. The household moves and reports a rent increase to \$250 a month. Benefits will increase as a result of this reported change. Verification is requested, but not provided. Benefits must be determined allowing the previously verified amount of \$200. Section [9121.2](#) and Appendix Item [T-10](#), Food Stamp Shelter Changes Chart is being modified to incorporate this change.

6. **Interim Report** - The mail date for the interim report was changed in February 2006, from the 20th day of the month to the 25th. The manual in [9122.6](#) has been modified to incorporate this change.

B. CLARIFICATIONS

1. **Households Entitled to Expedited Service** - This section is being clarified due to a recent clarification from USDA. This directive clarified that the interview (either face-to-face or telephone) cannot be waived for purposes of providing expedited service. This clarification is being included in [1415.3](#).
2. **Categorical Eligibility for Food Stamps** - Due to questions from the field, several clarifications to food stamp categorical eligibility policy are being incorporated into this section. These clarifications are included in [2510](#) (1) and (2), the NOTE that follows, and in [2517](#). These clarifications do not change policy. In addition, reference to persons determined ineligible due to a drug-related conviction is being removed in [2514](#). This was inadvertently not removed in the July 2006 revision.
3. **Exemptions from ABAWD Criteria** - Under item (2) of the exemptions, persons medically certified as physically or mentally unfit for employment, the statement regarding VR services is being modified to state that the person does not have to have an Individual Plan of Employment (IPE) to be exempt from the ABAWD criteria. Instead, a person merely has to have been determined eligible for VR services to meet the criteria to be exempt from the ABAWD provisions. In addition, this revision clarifies that GA recipients are exempt from ABAWD criteria. KEESM [2521](#) (2) is being changed to incorporate these clarifications.
4. **Exemptions from Work Requirements** - Due to the PMD changes to KEESM [2313](#), a technical change has been made to [3230](#) (3). To be exempt from food stamp work requirements, non-TAF food stamp recipients claiming to be ill, injured or incapacitated must provide a written doctor's statement to substantiate that they have a medically determined condition which is expected to last at least 30 days which substantially limits employment.

5. **Disqualified Household Members** - At the suggestion of the field, a cross reference to [9122.5](#) is now being included in the section that describes disqualified household members. Disqualified household members are not included when determining the household's size for the purposes of the benefit level or comparing the household's income with income limits. They are, however, included when determining the 130% reporting threshold limit for simplified reporting households. This cross reference is now being included in [4212.3](#). In addition, item 4212.3 (3) is being removed because it refers to persons being ineligible due to a drug-related conviction.
6. **Child Support Deduction** - Item (1) of this section is being modified to clarify that when determining a prospective amount for the child support deduction, the agency shall average at least 3 of the most recent months of child support, taking into account anticipated changes in the legal obligation. This clarification is consistent with policy used to determine child support income. [7225](#) (1) is being modified to incorporate this clarification.
7. **Purchase and Prepare Statement at the Time of Review** - The manual is being clarified to state that at the time of review, either a new FP-1013, or the appropriate section on the application, or the V030, Separate Purchase and Prepare Letter, can be submitted to document a change in household composition/ purchase and prepare arrangements. Previously [9330](#) said that an FP-1013 was required but the intent was that the other forms of documenting separate purchase and prepare arrangements were acceptable. Section [9330](#) is being modified accordingly.

IV. GENERAL ASSISTANCE

A. CHANGES

1. **General Assistance (GA)** - Section [1111](#) (2) removes reference to spousal caregivers as an eligible recipient of General Assistance benefits.
2. **Social Security Disability Advocacy Project** - Section [1724](#) redefines the process that is to be used to access the Kansas Legal Services advocacy contract when a GA recipient elects to utilize KLS in this role. Referrals will now be made solely by the PMDT. Staff will need to send the signed representation agreement to PMDT instead of to KLS. Also defines how KLS will request permission to withdraw and notification guidelines for KLS when they are successful in obtaining SSI/SSDI benefits for the GA consumer.
3. **General Assistance Criteria** - Section [2313](#) establishes new processes for verifying that the consumer has a qualifying disability. Eliminates the ES-3151 and replaces that process with the Presumptive Medical Disability Determination process.

4. **General Assistance Reintegration (GA RN)** - Section [2314](#) identifies additional action that must be taken as part of the discharge planning process that must be taken in order for an individual to be eligible for the GA RN program. Also clarifies that if the individual has already received GA for the 24 month life time limit that they are not eligible for GA RN.
5. **Exempt Resources** - As a result of the implementation of Presumptive disability, the manner in which trusts are handled and the exemptions for Real and Personal Property for General Assistance have been changed to match those for Medical Programs. This has resulted in changes to KEESM [5430](#), [5510](#), [5520](#), [5610](#), and [5620](#).
6. **Hardship Status** - Hardship status is being eliminated except for when a consumer has an active Social Security application pending or on appeal at the time they reach the 24 month time limit. Wording in [2318](#) is being changed to reflect this new policy. All guidelines except for those relating to the handling of a case once Social Security makes a final determination on the consumer's Social Security disability application is being removed from section [2319](#).

B. CLARIFICATIONS

None

V. MEDICAID AND GENERAL ASSISTANCE/MEDIKAN

A. CHANGES

1. **Presumptive Medical Disability** - Under PMD, an internal disability determination will be made in order to determine "early eligibility" for Medicaid. The same basic rules and processes used by SSA will be used under PMD. For Medicaid, the same definition of disability as used by SSA also applies. If the individual is found to meet Medicaid disability criteria, he or she is classified as having a Tier I disability level. The disability criteria for any disability-based Medicaid group are met with the PMD determination. This includes Working Healthy, Nursing Facility/Institutional, HCBS and Medically Needy/Spenddown. All other non-financial and all financial eligibility rules applicable to the Medicaid group are applicable under PMD determination. In short, it is only the disability determination that differs.

Under the PMD process, a Medicaid determination based on SSI-payment criteria will now be applicable. The methodologies, exemptions and disregards applicable to the MS program apply. However, if the countable income is less than the applicable payment rate under SSI, the individual is eligible for Medicaid without a spenddown. This program is called SSI-Related PMD.

Coverage under the PMD determination may be established as long as a final determination of disability has not been made in the past 12 months, unless there has been a change in disability or severity level. A final determination by SSA occurs when the individual has no further rights to a fair hearing under the SSA determination process. This means that coverage under A PMD disability determination may begin while the SSA application is pending. Coverage may continue until the individual exhausts all rights to an SSA appeal.

The PMD process will also be used for the General Assistance/MediKan program. Individuals who are eligible for General Assistance and meet Tier I disability criteria are eligible for Medicaid.

For persons who do not meet Medicaid disability criteria, eligibility under MediKan may exist. A second level of disability, or Tier II, will also be determined by the PMD for all General Assistance applicants. Persons determined to meet Tier II disability criteria are potentially eligible for both General Assistance and MediKan. As a Social Security determination will continue to be required for General Assistance, Medicaid coverage may be established at a later date if the SSA makes a disability finding.

When a final determination is made by Social Security, the case will be adjusted to support the SSA decision.

In order to make the disability determination, a new unit has been established within the Kansas Health Policy Authority, the Presumptive Medical Determination Team (PMDT). The PMDT is responsible for developing the disability case. The process includes completing a telephone consultation with each disability claimant, requesting necessary medical records and scheduling any consultative examinations. Fully developed cases will be sent onto the Disability Review Team (DRT). The DRT is composed of a disability examiner and medical professionals qualified to make a disability determination. KHPA will contract with DDS to provide the DRT. The DRT will then communicate the results of the disability decision back to the PMDT where the results will be provided to the eligibility worker.

The eligibility worker will continue to be responsible for processing both the Medicaid and General Assistance/MediKan cases.

The new process will be applicable for applications received on or after 09-01-2006. Medicaid determinations pending a determination will be eligible for immediate referral to the PMDT for a determination under PMD criteria. Existing General Assistance cases will be determined eligible under the PMD criteria at the next scheduled review.

The PMDT will be the primary entity responsible for fair hearings where the disability decision is at issue. However, the eligibility worker will be responsible for coordinating the development of the agency file for the hearing.

This current referral process with DDS for individuals where SSA will not make a determination due to financial reasons will not be modified with this revision. Individuals must still be determined disabled by DDS to receive Medicaid.

Detailed implementation processes will be provided in a separate implementation memo and in the training material.

A new section [2666](#) has been developed. KEESM [2662](#) and subsections and [1614](#) have also been changed.

2. **Citizenship and Identity Verification** - This revision formally implements a previous policy change exempting Medicare beneficiaries and SSI recipients from the citizenship and identity verification requirements. Previous guidance was released on August 1, 2006.

KEESM [1322.1](#) (5)(b) and [2145](#) are updated with this revision.

B. CLARIFICATIONS

None

VI. SUCCESSFUL FAMILIES

NOTE: The majority of the KEESM [3000](#) section is being rewritten to comply with the intent of Congress in the Deficit Reduction Act. EES staff should review this entire section.

A. CHANGES

1. **Work/Self Sufficiency Requirement** - The July 2006 KEESM Revision Policy change allows drug felons to receive cash and/or food stamp benefits. Due to that policy change, Sections [3100](#) and [3400](#) are being modified to remove drug felons from the list of individuals who are ineligible for work program services. These were inadvertently left out of the July revision. Section [3100](#) is also being modified to remove the reference to requiring work participation after 24 months of assistance.
2. **Engagement** - The DRA emphasizes the need to engage customers early and frequently in efforts to achieve the maximum level of self sufficiency for the family. The new Work Readiness Screening is designed to engage customers and help identify choices. The following KEESM sections address the need to engage customers early and frequently: [3100.1](#) and [3130](#).
3. **TAF Participation** - A work eligible individual is anyone whose participation in work activities contributes to determining whether the family counts in the calculation of the work participation rate. Work eligible individuals are

either:

- An adult who is receiving TANF **except**:
 - an adult providing care for a disabled family member in the home who is not a full time student;
 - an adult participating in tribal work programs;
- OR a non-recipient parent living with a child receiving TANF except:
 - minor parents who are not head of household;
 - minor parents who are not a spouse of the head-of-household;
 - illegal aliens;
 - recipients of SSI (by state option).

This work eligible definition is being incorporated into KEESM [3110.1](#).

This section is also being modified to indicate that SRS Management Regions need to work toward achieving the federal work participation rates.

4. **Food Stamp E&T Participation** - A new section is being added to include the 120 hour per month limitation in FS E&T components and employment. This new section is [3110.2](#).
5. **Work Readiness Screening** - In order to engage customers early and frequently, the Work Readiness Screening is now a condition of eligibility for TAF. The Work Readiness Screening must be completed prior to approval for TAF. Failure to cooperate in the Work Readiness Screening process will result in denial of the application. Failure to complete the Work Readiness Screening form for ongoing TAF mandatory cases will result in a work penalty. This may occur during the implementation phase of this change, from 10/01/06 - 12/31/06, as forms are required for ongoing TAF mandatory cases.

Information regarding these changes is being incorporated in KEESM [2121](#), [3100.1](#) and [3130](#). The new Work Readiness Screening Tool is located in Appendix [E-15](#). Further details will also be provided in the Implementation Memo.

6. **Assessment Process** - The Work Readiness Screening and the Complete Assessment Tool are required tools to gather information.

Several additional modifications in the Assessment Process are being incorporated in this revision to emphasize the importance of the work

program assessment process. The Self-Assessment Form, Appendix [E-6](#) is being modified based on input from the Work Program Assessment Work Group. In order to promote consistency, the Work Program Self - Assessment Form will be used statewide.

The Self- Sufficiency Plan is being incorporated as the last page of the Self-Assessment Form. Instruction is being incorporated regarding the best CASAS tool to use when an individual indicates the inability to read. The Work Program Assessment Protocol is being added in Appendix [E-14](#) to assist EES staff in making referrals based on the work program assessment.

If there are no local resources available, it may not be possible to complete the work program assessment for individuals with limited English proficiency.

KEESM Section [3120](#) and [3130](#) contain these modifications.

7. **Work Component Monitoring and Verification Requirements** - This new section, [3300.1](#), establishes the monitoring and verification requirements for TAF work activities. Kansas is implementing Sample Reporting Methodology for reporting TANF work participation effective October 2006. All work activities must be supervised daily in order to count in the work participation rate. The case record must contain documentation of the actual hours of verified work participation in order to be reported in the TANF Report. Study time is not considered “work” and may only be counted toward meeting the work participation rate if the activity is supervised. This section also contains the excused absence policies for unpaid work components.
8. **Vocational Education/Job Skills Training/Education Directly Related to Employment/Attendance at Secondary School Review and Authorization Guidelines** - KEESM [3300.2](#) contains information on the review and authorization processes for education and training activities. Good and Satisfactory progress is defined as:
 - Attends class as scheduled;
 - Maintains at least a satisfactory GPA (i.e., “C” or 2.0); and
 - Progresses toward completing the course of study in a reasonable documented time frame based on the individual’s situation.
9. **Work Components** - The DRA mandated HHS to provide states with definitions for work components. The following work components are available in Kansas:
 - Unsubsidized Employment
 - Subsidized Private Employment

- Subsidized Public Employment
- Work Experience
- On-the-Job Training
- Supervised Community Service
- Vocational Education
- Job Search/Job Readiness
- Job Skills Training
- Education Related to Employment
- Secondary School Attendance

Sections [3310](#) and [3320](#) have been modified to incorporate information regarding these work components. In addition, Section [3330](#), describes work components that may be appropriate in individual situations but do not count toward meeting the federal work participation requirement.

Some of the components in this section identify partners working with mutual customers. Staff need to work with the client and partner agency to effectively communicate the supervision, verification, and documentation of information.

Work components in the [3330](#) section include:

- Alcohol and Other Drug Assessment and Treatment
- Assessment
- Children and Family Services
- Disability Employment Services
- Early Head Start
- No Appropriate Component
- Mental Health Care
- Orientation, Assessment, Referral, Safely
- Physical Health Care
- Post Secondary Education
- Refugee Employment Services
- Social Security Applicant
- Workforce Investment Act

These sections also contain information about the supervision and documentation requirements for each work component.

10. **Self Employment** - Self-employment hours to count for federal work participation reporting is determined by dividing the self employment income (gross income less business expenses) by the federal minimum wage. This change is being addressed in KEESM [3310.1](#).
11. **Work Experience** - The work site assignment hours will be tied to the household's monthly amount of cash and FS benefits. The [ES-4322](#), Community Service/Work Experience Assignment and Site Report, is now available to report attendance on a work site. This change is being addressed in KEESM [3310.4](#). The Work Experience Reimbursement

Allowance is also being renamed to the Behavior Incentive Allowance (BI).

12. **On-the-Job Training** - The definition for On-the-Job Training is being modified to include Job Retention Case Management. This change is being incorporated in KEESM [3310.5](#).
13. **Supervised Community Service Program** - The definition of Supervised Community Service is being expanded to indicate that the work performed is for the direct benefit of the community under the structure and supervision of public or non profit organizations. The work performed must serve a useful community purpose and be designed to improve the employability of the client. The assignment hours will be tied to the household's monthly amount of cash benefit. The six month limitation on community service assignments is being removed. The [ES-4322](#), Community Service/Work Experience Assignment and Site Report, is now available to report attendance at the community service site. These changes are being incorporated in Section [3310.6](#). In addition, new forms, the Cooperative Community Service Program Agreement , [ES-4105](#) and the Cooperative Community Service Program Agreement Addendum, [ES-4105.1](#), have been developed and are included in the KEESM Forms Section.
14. **Job Skills Training** - The definition of Job Skills Training is being modified to include: literacy instruction; customized training; workshops or groups to enhance life, job seeking and job retention skills. This new definition is being incorporated in KEESM [3320.1](#).
15. **Education Directly Related to Employment** - ABE and ESL activities are being included in the Education Directly Related to Employment definition. This information is being included in KEESM [3320.2](#).
16. **Satisfactory Attendance at Secondary School or in a GED Program** - The definition for this new activity includes GED and high school attendance for teen parents and adults. This component description is in KEESM [3320.3](#).
17. **Work Experience Reimbursement Allowance** - The information regarding the Work Experience Reimbursement Allowance is being replaced by the Behavior Incentive Allowance (BI) in KEESM [3411.2](#) (5).

B. CLARIFICATIONS

1. **Work Participation** - Clarification regarding the work participation requirements for a 2 Adult household versus a 2 Parent household is being included in Section [3110](#). Two Adult households meet the federal work participation requirement with 30 hours per week of actual supervised work participation.

2. **Availability of TAF Support Services/Component/Contracted Employment Services/Employment Services following the Loss of TAF Cash Eligibility** - Following the loss of TAF cash eligibility, policy allows for 12 months of extended:

- TAF Support Service
- Component/Contracted Employment Services
- Employment Services (including case management)

This section is being clarified to indicate that these extended services are available both for the loss of individual and case TAF cash eligibility. Formatting changes are also being incorporated. This clarification is being incorporated in Section [3410](#).

3. **Vehicle Purchase** - A correction is being incorporated in Section [3411.2](#) (1) (c). Prior authorization is required for vehicles with a purchase price of \$5000 or more.

4. **Child Care for FS E&T Participants** - A modification is being incorporated in Section [3422](#). FS E&T participants may utilize IE-EM Child Care. The MO child care subtype is being eliminated.

VII. TAF ASSISTANCE

A. CHANGES

1. **Social Security Disability Advocacy Project** - Effective July 1, 2006 TAF adults are no longer covered under the Kansas Legal Services (KLS) contract for Social Security Disability Advocacy Services. The TAF Employment Service Allocation will fund legal representation and mentoring services through local provider agreements for TAF adults. There is no change in the special procedures for ongoing TAF cases with children who might qualify for SSI. KEESM [1724](#) is being modified to reflect these changes. [The IS-3122 is](#) used to identify children with disabilities who might qualify for SSI. The IM-3123 is being removed from the KEESM as it is now obsolete.
2. **Agency Protocol Prior to Terminating TAF Cash Case Due to the 60 Month Time Limit** - Due to questions from the field, the agency protocol is being modified. Changes include the need to address Limited English Proficiency (LEP) issues within the protocol. This revision is also incorporating instructions on how to close a case when the protocol is not completed and there is non-cooperation with work programs. An EES program administrator or designee must approve those closures. The hardship status criteria is expanded to include Hardship status #5, CFS involvement where there is an open social service plan. These changes are being incorporated in sections [2243](#).

3. **Non-Cooperation When in Hardship Status** - This revision is including that failure to specifically close the case due to the life-time limit will not allow future eligibility unless one of the hardship criteria is met. The only exception to this is if the case was closed because of non-cooperation with Child Support and the customer cures the penalty. These sections also include the changes in the minimum penalty periods. Sections [2243.1](#) and [2243](#) contain these modifications.

B. CLARIFICATIONS

None

VIII. TAF AND FOOD ASSISTANCE

A. CHANGES

1. **Penalties** - The minimum two-month penalty period is removed for 2nd and subsequent penalties for both work program and CSE program non-compliance. The period of ineligibility for failure to meet work program requirements or CSE requirements is until the failure or refusal ceases, without regard to the number of penalties accrued. Guidance is also given on the parameters of establishing cooperation. Sections [3511.2](#), [3512](#), [3520](#), [3521](#), and [3522](#) contain these changes. The Sections [2550](#) and [2560](#) are modified to reflect that the comparable penalties for food stamps are consistent with the new work program penalty period of ineligibility.

B. CLARIFICATIONS

None

FORMS

A. Adult Protective Services

1. Form [ES-1020](#), **Report to State Regulatory Authority from Adult Protective Services Regarding Finding of Abuse, Neglect or Exploitation** has been returned to the forms section. It is the form for notification to regulatory authorities. It was inadvertently obsoleted.

B. Food Assistance

1. **ES-1510.1, Computation of Food Stamp Budget** (Electronic Version) has been modified to incorporate the increased standard deduction and other amounts effective October 1, 2006.
2. **ES-524, Food Stamp Disqualified Recipient Report** - This form, formerly the IM-524, has been revised and updated. The previous 11-97 version is obsolete.

3. [ES-3143](#), **Food Stamp Replacement During Household Disaster** - The definition of a disaster has been modified on the bottom of the form to match the definition of disaster contained in the Appendix.

C. Medicaid and General Assistance/MediKan

1. [ES-3900](#) - **Tell Us If you have a Disability** - Addendum to combined application. Questions identify if the individual has a durational disability that might meet eligibility standards for Presumptive Medical Disability Determination.
2. [ES-3901](#) - **Presumptive Medical Disability Determination Referral Form** - Provides basic information necessary to the PMDT for them to begin processing of potential Presumptive Medical Eligibility.
3. [ES-3902](#) - **Presumptive Medical Disability** - Brochure for consumers explaining the new program and eligibility requirements.
4. [ES-3903](#) - **Presumptive Medical Disability Determination Telephone Consultation Guide** - Guide for consumer outlining information that will be needed when they contact the PMDT for their scheduled Telephone consultation.
5. [ES-3904](#) - **HIPPA Compliant Authorization to Disclose Information to Kansas Health Policy Authority** - Release of information that must be signed by the applicant/recipient to allow KHPA/PMDT to request medical information from medical professionals/facilities.
6. [ES-3905](#) - **General Assistance and MediKan Review Requirements** - Guide to recipient outlining programmatic changes that will impact upon their upcoming GA review.
7. [ES-3906](#) - **Presumptive Medical Disability Determination Notification of Changes and Final decision Form** - Form used by staff to notify PMDT of changes in client information and used by PMDT to notify staff of changes and final decision by DRT.
8. [ES-3907](#) - **Disability Review Team Referral** - Used by PMDT to refer cases that have been developed to the DRT.
9. [ES-3908](#) - **Referral to Kansas Legal Services** - This form has been developed to reflect information needed to make referral of consumer to KLS under new advocacy contract between KHPA and KLS.
10. [IS-3122](#) - **Disability Consultations/Representation Referral to Kansas Legal Services** - This form has been modified to remove General Assistance information.

D. Successful Families

1. The **Cooperative Work Site Agreement Form**, [ES-4104](#), and **Work Experience Program Agreement Addendum**, [ES-4104.1](#), are being revised to be used with Private for Profit employers in addition to Public and Private Non-profit companies. Also note that these forms' designation are being changed from EP to ES.

MISCELLANEOUS FORMS

1. The [OARS Monthly Status Report Form](#) is being updated to enhance communication between EES staff and the OARS Advocate.

APPENDIX (Not previously noted in this Summary)

1. [E-10](#) - **Comparison of TAF and FS E&T Employment Services**, is being updated to reflect policy changes.
2. [E-11](#) - The **Education/Training Assistance Desk Aid**, is being updated to reflect the new policy and manual references.
3. [E-14](#) - **Work Program Assessment Protocol**,
4. [E-16](#) - **The You Need to Know** document is being added to the KEESM. This document provides information about clients' responsibilities.
5. [F-8](#) - **Medicaid and Healthwave Program Standards**, incorporated SSI related PMDT Income Standards.
6. [T-1](#) - **The Components to Meet TAF Work Requirements/Participation Chart**, is being updated to reflect the new work component definitions.
7. [V-1](#) - **EBT System Guide**, is being modified to include the recent change allowing for food stamp benefits to remain active for 12 months after they have been issued. A few other technical corrections have also been included.
8. [X-6](#) - **Definitions of Common Terms**, the definition of disabled for purposes of the Food Stamp Program is being revised due to the 9/1/06 PMD changes. Specifically, item 7 is being modified to state that a Tier 1 presumptive determination of disability qualifies the household as disabled for purposes of the Food Stamp Program. KEESM manual references in this item are also being updated as a result of the PMD changes.

EFFECTIVE DATE

All policies in this revision are effective October 1, 2006, except for the presumptive medical disability process and related GA changes which go into effect September 1, 2006. Additional information will be in the Implementation Memo.

MATERIALS OBSOLETE BY THIS REVISION

Policy Memo 99-10-09 - Applying penalties to Closed cases (Cash and FS) - is being obsoleted with this manual revision. The information contained in this memo is being incorporated into section [3520](#).

EFFECT ON LOCAL STAFF

The changes in this revision will require extensive effort by field staff to implement.

COORDINATION EFFORTS

Within EES, the material in this letter and manual revision has been coordinated with staff in the Economic and Employment Support, the EES Program Administrators, the Implementation Planning Team, the Training Advisory Team, and the Work Program Assessment Work Group. Within SRS, the material has been coordinated with Rehabilitation Services and Health Care Policy.

Sincerely,

Bobbi Mariani, Director
Economic and Employment Support

BM:AM:jmm

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