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| POLICY TRANSMITTAL NO. 09-59        | DATE: DECEMBER 1, 2009  |
| FAMILY SUPPORT SERVICES<br>DIVISION | DEPARTMENT OF HUMAN SERVICES<br>OFFICE OF LEGISLATIVE RELATIONS AND<br>POLICY |

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TO: ALL OFFICES

SUBJECT: MANUAL MATERIAL

OAC 340:65-3-1; 65-3-6; and 65-3-6.1.

EXPLANATION:

OAC 340:65-3-1 Instructions to staff (ITS) is revised to remove information about what to do at review when the Oklahoma Department of Human Services (OKDHS) is unable to match the Social Security number with the Social Security Administration for a person 14 years of age and older as lawful status must be verified at application.

In OAC 340:65-3-6, an additional ITS bullet #4 is added in the rule. ITS #4 addresses the call center's telephone number for direct deposit.

OAC 340:65-3-6.1 ITS is revised to: (1) clarify information about the client videos; (2) advise staff to change authorized representatives immediately when requested by the client; and (3) add procedures OKDHS follows when staff becomes aware that the electronic benefit transfer card is being misused.

Original signed on 11-30-09

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Mary Stalnaker, Director  
Family Support Services Division

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Office of Legislative Relations and Policy

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WF # 09-AA (NAP)

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## **INSTRUCTIONS FOR FILING MANUAL MATERIAL**

OAC is the acronym for Oklahoma Administrative Code. If OAC appears before a number on an Appendix or before a Section in text, it means the Appendix or text contains rules or administrative law. Lengthy internal policies and procedures have the same Chapter number as the OAC Chapter to which they pertain following an "OKDHS" number, such as personnel policy at OKDHS:2-1 and personnel rules at OAC 340:2-1. The "340" is the Title number that designates OKDHS as the rulemaking agency; the "2" specifies the Chapter number; and the "1" specifies the Subchapter number.

The chronological order for filing manual material is: (1) OAC 340 by designated Chapter and Subchapter number; (2) if applicable, OKDHS numbered text for the designated Chapter and Subchapter; and (3) all OAC Appendices with the designated Chapter number. For example, the order for filing personnel policy is OAC 340:2-1, OKDHS:2-1, and OAC 340:2 Appendices behind all Chapter 2 manual material. Any questions or assistance with filing manual material will be addressed by contacting Policy Management Unit staff at 405-521-4326.

### **REMOVE**

340:65-3-1

340:65-3-6

340:65-3-6.1

### **INSERT**

340:65-3-1, pages 1-14, revised 12-1-09

340:65-3-6, pages 1-6, revised 6-1-09

340:65-3-6.1, pages 1-7, revised 12-1-09

**340:65-3-1. Determination of eligibility**

Revised 6-1-09

(a) **Eligibility determination.** The determination of eligibility is a continuous process that begins with an application. It includes the final disposition of the application and all subsequent activities related to determining continuing eligibility. ■ 1 The applicant has the right and the responsibility to participate in the eligibility determination and is relied on as the first source of information.

(1) In instances when it is difficult for the applicant to complete the application, someone acting on the applicant's behalf such as an authorized representative or a person with power-of-attorney may complete the application for all programs except Temporary Assistance for Needy Families (TANF). ■ 2

(2) When someone other than the applicant applies on behalf of the applicant, he or she must bring a signed statement from the applicant giving this person permission to act on behalf of the applicant or the applicant must have designated this person as his or her authorized representative on the signed application. ■ 3 The SoonerCare (Medicaid) programs allows others to apply for the applicant without a written designation.

(b) **Application forms.** Application forms used include:

(1) Form 08MP001E, Request for Benefits, Form 08MP002E, Eligibility Information for Benefits, and Form 08MP003E, Responsibilities and Signature for Benefits, to apply for:

(A) food benefits;

(B) State Supplemental Payment (SSP);

(C) Supplemental Security Income-Disabled Children's Program (SSI-DCP);

(D) TANF;

(E) SoonerCare (Medicaid) benefits. Form SC-1, SoonerCare Health Benefits Application, may be used instead for pregnant women and families with children; or

(F) child care benefits; or

(2) computer-generated Form 08LH001E, Application for Low Income Home Energy Assistance (Heating), or Form 08LH002E, Application for Low Income Home Energy Assistance – Walk-In, to apply for Low Income Home Energy Assistance Program (LIHEAP).

(c) **Signature requirements.** The applicant, guardian, or someone acting on the applicant's behalf such as an authorized representative or a person with power-of-attorney must sign the application form. TANF applications must be signed by the applicant. If the applicant is living with his or her spouse, both must sign the application form. ■ 4 The applicant may voluntarily withdraw the request for benefits or services either before or after signing the application form. An applicant who is:

(1) eligible for Medicare signs the application using the name on his or her Medicare Health Insurance Benefits (HIB) card; or ■ 5

(2) not eligible for Medicare signs the application using the name shown on his or her Social Security card.

(d) **Interview requirements.** Whether an interview is required varies depending on the program.

(1) Prior to approval for benefits, the applicant must complete a face-to-face interview for the: ■ 2

(A) Supplemental Nutrition Assistance Program (SNAP). Exceptions are found at OAC 340:50-3-2(b); or

(B) TANF Program.

(2) A telephone or face-to-face interview is required for the:

(A) Child Care Program;

(B) SSP Program;

(C) SoonerCare (Medicaid) long-term care programs such as Advantage Waiver, nursing home care, or personal care; or

(D) SoonerCare (Medicaid) programs that categorically relate to the aged, blind, and disabled population such as Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), Qualified Disabled and Working Individuals (QDWI), or Qualified Medicare Beneficiary Plus (QMBP).

(3) An interview is not required prior to approval for SoonerCare (Medicaid) for pregnant women and families with children or LIHEAP benefits.

(e) **Worker responsibilities.** The worker is responsible for: ■ 6

(1) advising the applicant during the application process of the:

(A) Oklahoma Department of Human Services (OKDHS) responsibility for reaching a decision and notifying the applicant of eligibility or ineligibility within the appropriate time limits; ■ 7

(B) applicant's right to request a fair hearing per OAC 340:2-5, either orally or in writing, and be represented at the hearing by any person the applicant chooses. A hearing may be requested when there is a:

(i) delay beyond the established time limits for determining eligibility per OAC 340:65-3-5; or ■ 8

(ii) disagreement with any action taken on the case;

(C) applicant's legal responsibility for reporting all facts pertinent to eligibility;

(D) types of changes the applicant must report within ten calendar days;

(E) penalty for failure to report changes;

(F) information needed to establish eligibility. When requesting information or verification from the applicant, the worker uses Form 08AD092E, Client Contact and Information Request, and gives the applicant at least ten calendar days to respond to the request per OAC 340:65-3-2.1;

(G) assistance provided by OKDHS in establishing eligibility;

(H) permission the applicant gives OKDHS to obtain information from sources other than the applicant by signing the application; and

(I) requirement that the applicant must cooperate with state and federal officials if the applicant's case is selected for a Quality Control review;

(2) collecting information necessary for determining the applicant's initial and continuing eligibility. Information considered verified upon receipt if that information

is not questionable or inconsistent with known facts, and the provider of the information is the primary source of the information, is the:

(A) applicant's statement concerning:

- (i) residency;
- (ii) relationship;
- (iii) age;
- (iv) living in the home of a relative payee;
- (v) minor parent living in the home of a relative;
- (vi) Social Security number (SSN);
- (vii) non-liquid resources;
- (viii) household members;
- (ix) school attendance; and
- (x) third party insurance;

(B) unearned income information obtained through:

- (i) Beneficiary and Earnings Data Exchange System (BENDEX), from the Social Security Administration (SSA);
- (ii) Supplemental Security Income (SSI)/State Data Exchange System (SDX), from SSA;
- (iii) Unemployment Insurance Benefits (UIB), from the Oklahoma Employment Security Commission (OESC); and
- (iv) workers' compensation documents from Workers' Compensation Court; and

(C) alien status information obtained through Systematic Alien Verification for Entitlements (SAVE), from the United States Citizenship and Immigration Services (USCIS);

- (3) contacting other persons who may be able to help in establishing eligibility if the applicant is unable to participate in the eligibility determination because of physical or mental disability, inability to speak English, or other difficulties;
- (4) recognizing expressed or implied needs;
- (5) determining whether there is a need for crisis intervention;
- (6) making appropriate referrals;
- (7) ensuring all of the applicant's social services needs are addressed and met; and
- (8) denying the application if sufficient facts are available to substantiate ineligibility.

■ 9

(f) **Requirement for SSN.** ■ 10 A verifiable SSN or application for a SSN is required for every person whose needs are included for food benefits, SSP, SSI-DCP, or TANF benefits. The requirement for a verifiable SSN also applies to all persons whose needs are included for SoonerCare (Medicaid) benefits, except newborn children deemed eligible and aliens who are residing in the United States (U.S.) unlawfully. ■ 11

(1) The worker accepts the applicant's statement to document the SSN unless the information is inconsistent or there are other facts or observations which cause the worker to question the statement. ■ 12

(A) Persons for whom a SSN is required but not available must be referred to the appropriate SSA office for SSN enumeration.

(i) The worker uses Form 08AD101E, SSN Enumeration Referral, to refer persons to the SSA office for a SSN application.

(ii) The return of Form 08AD101E to the human services center (HSC) validates the application(s) or indicates which persons have not provided SSA appropriate original evidence of age, identity, and citizenship. ■ 13

(B) Parents of newborns who participate in Enumeration at Birth (EAB) receive from hospital personnel Form SSA-2853-OP3, Message From Social Security. This receipt form is verification the newborn was enumerated at birth.

(2) The worker denies the application or does not include the person for benefits if the person fails or refuses to furnish or to apply for a SSN.

(A) For TANF purposes, the person's needs are included; however, a 25% payment standard reduction penalty is imposed until an application for or a SSN is provided. ■ 14

(B) For food benefit and SoonerCare (Medicaid) purposes, only the needs of the person for whom a SSN is not provided or applied for are not included. ■ 15

(g) **Citizenship requirement.** All persons who are applying for state or federal public benefits such as child care, food benefits, LIHEAP, SoonerCare (Medicaid), SSP, or TANF must declare whether they are residing in the U.S. lawfully. Initially, the applicant must declare the citizenship or alien status for each household member applying for such benefits on the application form. ■ 16 Citizenship and alien status for persons applying for SoonerCare (Medicaid) benefits is determined using specific program requirements found at OAC 317:35-5-25. The following citizenship requirements are pursuant to Section 71 of Title 56 and Section 20j of Title 74 of the Oklahoma Statutes. Form 08MP022E, Declaration of Citizenship Status, is completed to declare the citizenship or alien status of additional household members who request benefits after certification. ■ 17 The application form and Form 08MP022E contain a statement advising the applicant that fraudulent claims of citizenship or lawful alien status are reported to the U.S. Attorney and may be subject to criminal prosecution.

(1) When the applicant declares that some or all of the household members applying for benefits are aliens, the worker must follow the SAVE procedures described at OAC 340:65-3-4 to determine if the documents provided to verify legal alien status are valid.

(2) The worker also must follow specific program policy regarding citizenship and alien status requirements to determine benefit eligibility found at:

(A) OAC 340:40-7-5 for child care;

(B) OAC 340:50-5-67 for food benefits; ■ 18

(C) OAC 340:20-1-8, OAC 340:20-1-10, and OAC 340:50-5-67 for LIHEAP;

(D) OAC 317:35-5-25 for SSP; and

(E) OAC 340:10-15-1 for TANF.

(3) Lawful status in the U.S. is considered verified if each person applying for benefits has furnished a SSN or Form 08AD101E from SSA indicating that the person has completed the application to apply for a SSN. OKDHS then through an

automated data exchange transaction attempts to match SSN data exchange information with SSA. ■ 19

(4) When OKDHS is unable to match the SSN with SSA for a person 14 years of age or older who is applying for benefits, that person must sign and have notarized Form 08MP005E, Citizenship Affidavit, attesting to his or her U.S. citizenship or alien status unless lawful status has been verified by a U.S. birth certificate, U.S. passport, or a Certificate of Naturalization. Documents acceptable as verification of citizenship for SoonerCare (Medicaid) described at OAC 317:35-5-25 are also acceptable as verification of lawful status. ■ 20

(5) When the person fails or refuses to sign and have notarized Form 08MP005E, benefits are denied or closed for that person. ■ 21

(6) When the worker finds that a person who signed Form 08MP005E attesting to U.S. citizenship or legal alien status made a false claim:

(A) the worker sends to Family Support Services Division (FSSD) any applicable evidence and a memo that includes:

- (i) the benefits the person fraudulently applied for or obtained;
- (ii) the time frame benefits were received; and
- (iii) how the worker knows the claim was false;

(B) FSSD staff in consultation with Legal Division staff review the memo and any evidence provided by the worker; and

(C) when FSSD and Legal Division staff determine the person made a false claim, a complaint is filed with the U.S. Attorney for the applicable district based upon the venue in which the affidavit was executed.

## **INSTRUCTIONS TO STAFF 340:65-3-1**

### **Revised 12-1-09**

- 1. (a) Except for children in the Oklahoma Department of Human Services (OKDHS) or tribal custody whose cases remain in the county of jurisdiction, applicants may apply for and/or receive services in a human services center (HSC) of their choice.**

**(b) The extent to which eligibility is determined during the application process varies according to the capabilities of the applicant and the amount of verification that must be supplied.**

**(c) If the applicant does not have the kinds and sources of information that are acceptable as a basis for establishing eligibility, the worker discusses with the applicant where information may be obtained and an agreement is reached regarding responsibility for further action.**

- 2. (a) The role of the authorized representative is defined in Supplemental Nutrition Assistance Program (SNAP) rules at OAC 340:50-3-1 and in Child Care Subsidy Program rules at OAC 340:40-3-1.**

**(b) Due to the Temporary Assistance for Needy Family (TANF) Program requirement to assess barriers to employment and service needs of the family, the applicant must complete the application. The worker makes a home visit if it is difficult for the applicant to come to the HSC.**

**(c) Once the applicant has been approved for food benefits, the recertification interview may be completed face-to-face or over the telephone.**

- 3. (a) For the Child Care Subsidy Program, if this is not possible due to the severe incapacitation of the parent, the other person must provide proof of the parent's inability to apply per OAC 340:40-3-1(a)(3)(E).**

**(b) For SNAP, any responsible household member can apply or designate an authorized representative. If children are living with someone else while the parent is temporarily out of the home, the responsible person they are living with applies based on his or her own eligibility.**

- 4. (a) A signature submitted on Form 08MP001E, Request for Benefits, Form 08MP003E, Responsibilities and Signature for Benefits, or Form 08MA005E, Notification of Needed Medical Services, through e-mail or a fax machine is acceptable to establish a request or application date for the Child Care, SNAP, SoonerCare (Medicaid), and TANF Programs.**

**(b) A signature submitted through an imaged document by e-mail or a fax machine is acceptable on an initial application for the Child Care, SNAP, SoonerCare (Medicaid), or TANF Programs if there is an access issue for an applicant to apply for benefits in person. When an application is e-mailed or**

faxed and the applicant comes to the office for an interview, the worker obtains an original signature during the interview.

5. In rare situations, an applicant's name may not match with records used to establish Medicare buy-in and/or data exchange.

- (1) For initial applications, if an applicant has Medicare, using the name on the Medicare Health Insurance Benefits (HIB) card facilitates matching Medicare records and completing Medicare buy-in activities if the application is approved. If the applicant does not receive Medicare, the worker uses the name on the Social Security card.

- (2) Once the Medicare buy-in is established, if the worker later determines that the case name does not match the HIB card, it is not necessary for the worker to change the case name to match the HIB card. Instead, the worker may report to the State Buy-in Coordinator in Family Support Services Division (FSSD) any discrepancies between the name shown on Family Assistance/Client Services (FACS) and the name used for Medicare purposes.

6. The worker is also responsible for:

- (1) explaining the availability of child care and other OKDHS services such as Early and Periodic Screening, Diagnosis and Treatment (EPSDT), and child support enforcement services which may help the applicant achieve the expected outcomes of self-support and self-sufficiency;

- (2) giving applicants with children applying for SoonerCare (Medicaid) or cash assistance for a child under 21 years of age the OKDHS Pub. No. 87-36, Early and Periodic Screening, Diagnosis and Treatment (EPSDT) and the OKDHS Pub. No. 91-25, Child Support Enforcement Handbook; and

- (3) giving applicants applying for SoonerCare (Medicaid) and a State Supplemental Payment (SSP) for a child under 18 years of age OKDHS Pub. No. 86-150, Supplemental Security Income (SSI)-Disabled Children's Program.

7. The worker is responsible for determining the month and effective date of the applicant's eligibility or ineligibility. Computer-generated notices are issued based on the reason for the case action. In case of the applicant's death or

commitment to a mental health facility, the worker completes a hand-written notice.

8. See OAC 340:2-5 for fair hearing information.
9. Refer to OAC 340:2-5 and OAC 340:65-3-7.
10. The worker informs the person that the Social Security number (SSN) of each person whose needs are included for benefits is used for matching with data from the Social Security Administration (SSA) on benefits and wages, Oklahoma Employment Security Commission on unemployment benefits and wages, Internal Revenue Services on unearned income, records from Workers' Compensation Court, and other agencies.
11. (a) A SSN is not required for illegal aliens who are eligible for SoonerCare (Medicaid) emergency services described in OAC 317:35-5-25(a)(3) and (4).  
  
(b) There is no SSN requirement for a newborn child deemed eligible for SoonerCare (Medicaid). See OAC 317:35-6-60(4)(B) for additional information on a newborn child deemed eligible.  
  
(c) See OAC 340:40-7-4 for child care benefits.
12. (a) When there are facts or observations which cause the worker to question the statement of an applicant who is applying for or receiving TANF, food benefits, or SoonerCare (Medicaid) benefits, the worker is required only to verify the SSN is valid and that the name and SSN given by the applicant appear on the document used for verification. The worker verifies the SSN by checking the applicant's Social Security card, award letter, W-2 form, or other record that contains the applicant's name and SSN. Documentation in other public assistance case records or the data exchange files may be used. The source of the documentation is entered in FACS Case Notes.  
  
(1) When an initial document used to verify the name and SSN appears to be false or altered, the worker requests a secondary verification document.  
  
(A) If the applicant's name and SSN are the same in both documents, the information is accepted and, if all other factors of eligibility are met, the applicant's needs may be included for benefits.

- (B) Further verification may be required if a discrepancy message is received because the SSN cannot be verified through the SSN enumeration process.**
- (C) See additional information at the OKDHS InfoNet FSSD Information Privacy and Security Enumeration Process Web site.**
- (2) The worker takes appropriate action as described in paragraph (3) of this Instruction when the applicant:**
- (A) does not provide the initial or secondary verification document;**
  - (B) provides secondary documentation that appears to be false or altered; or**
  - (C) states he or she is using a name and/or SSN that is not his or hers.**
- (3) When the applicant meets any of the conditions described in paragraph (2) of this Instruction, the worker:**
- (A) applies a 25% program penalty to the TANF benefits in accordance with OAC 340:10-12-1;**
  - (B) determines the applicant ineligible for food benefits in accordance with OAC 340:50-5-68; and**
  - (C) determines the applicant ineligible for SoonerCare (Medicaid) in accordance with OAC 317:35-5-27.**
- (b) When the applicant's citizenship status is in question, see (f) of this Section and OAC 340:65-3-4(5).**
- 13. (a) To make the referral to SSA for a SSN, the worker uses Form 08AD092E, Client Contact and Information Request, giving the applicant at least ten calendar days to provide proof of applying for a SSN, and Form 08AD101E, SSN Enumeration Referral. The SSA does not assign a SSN to an alien who does not have authorization from the United States Citizenship and Immigration Services (USCIS) to work in the United States unless the alien has a valid non-work reason for needing a SSN. The SSN requirement for receiving benefits or services is a valid non-work reason. When making a**

referral to SSA for a SSN, the worker indicates the alien status on Form 08AD101E.

(1) When the applicant fails to return Form 08AD101E, no further referral is necessary. Appropriate action is taken.

(2) When Form 08AD101E is returned to the HSC, it shows whether SSA accepted the SSN application.

(A) If SSA accepted the SSN application, a Social Security card is usually issued within two weeks if the person is younger than one year. It may take up to 14 weeks to issue an original Social Security card for a person who is age one or older. The worker tells the applicant to notify the worker when the Social Security card is received so the SSN may be recorded in the case record.

(B) If SSA did not accept the applicant's SSN application because the applicant:

(i) was unable to provide the required evidence, the worker makes every effort to assist the applicant in obtaining the evidence; or

(ii) failed to cooperate or was not eligible for a SSN, the person's needs are not included for benefits.

(b) Case Worker Activity (CWA) Report 21 lists the names of recipients who are age one or older, have received benefits for at least 60 days, and have no SSN shown on FACS. Children younger than one year of age who have no SSN shown on FACS are listed on the CWA report after receiving benefits for six months.

(1) The worker must contact recipients listed on the CWA report to determine whether a number has been received.

(2) If the number has not been received, a second request is made to have the SSN returned within ten calendar days.

(3) If the SSN is not received in ten calendar days, the worker takes appropriate negative action.

- (4) Initial referrals using Forms 08AD092E and 08AD101E are made for children who were not required to provide a SSN or proof of a SSN application at certification.
14. See OAC 340:10-3-57(g) for TANF benefit reduction as a result of program violation.
15. (a) There is no SSN requirement for a newborn child deemed eligible for SoonerCare (Medicaid). See OAC 317:35-6-60.
- (b) For food benefits, when it is determined that failure to provide or apply for a SSN is due to non-cooperation, refer to OAC 340:50-5-68.
16. It is the worker's responsibility to advise the applicant that only the household members applying for benefits must declare whether they are residing in the U.S. lawfully. If the applicant does not wish to state whether other persons living in the household are in the U.S. lawfully, he or she is not required to do so in order to receive benefits for the household members applying for benefits. The worker must still determine whether the income and resources of the excluded household members must be considered using specific program policy. Persons who must be considered household members are found at:
- (1) OAC 340:40-7-6 for the Child Care Subsidy Program;
  - (2) OAC 340:50-5-1 for the SNAP Program;
  - (3) OAC 340:20-1-10 for the Low Income Home Energy Assistance Program (LIHEAP);
  - (4) OAC 340:15-1-5 for the SSP Program;
  - (5) OAC 317:35-6-36 and OAC 317:35-7-37 for SoonerCare (Medicaid) Programs for pregnant women and families with children;
  - (6) OAC 317:35-7-36 for SoonerCare (Medicaid) Programs for persons categorically related to the aged, blind, or disabled; and
  - (7) OAC 340:10-3-56 for TANF.

- 17. Form 08MP022E, Declaration of Citizenship Status, must be completed by the payee for the additional household member prior to benefits being added regardless of the person's age. For persons 14 years of age and older, a data match with SSA must occur or they must meet requirements at (g)(4) of this Section prior to approving the person for benefits.**
- 18. Only the identity of the applicant must be verified prior to the issue of expedited services per OAC 340:50-11-5. All reasonable efforts are made to verify other eligibility factors prior to issuance of benefits if they can be made**
- 19. See (e)(2) and Instructions to staff (ITS) # 6 through 11 of this Section and OAC 340:65-3-4(4)(A) and ITS # 9 for information about SSN enumeration and the penalty for not furnishing a verifiable SSN.**
- 20.(a) Notary services must be made available at the HSC office.**
- (b) When the worker is unable to match the SSN for a person under 14 years of age, benefits may be approved when allowed by the program. See (f) and ITS # 12 in this Section for further information.**
- (c) Benefits are not issued for persons 14 years of age and older until lawful status is verified.**
- 21. When benefits for the entire household must be denied or closed, the worker uses the reason code of 31 or 40 from OKDHS Appendix U, Reasons for Negative Case Actions. When the worker is denying or removing one or more persons from the benefits, the worker goes to the Household Tab in the Family Assistance/Client Services (FACS) Interview Notebook and removes the person from the benefit using the reason "failed or refused to provide proof of citizenship."**

**340:65-3-6. Payment method for TANF and SSP benefits**

Revised 6-1-09

(a) When an applicant applies for Temporary Assistance for Needy Families (TANF) or State Supplemental Payment (SSP) benefits, the worker advises the applicant that these benefits are issued on a debit card. ■ 1

(1) When a debit card has not previously been issued to the applicant, it is issued when benefits are placed in application status or after benefits are approved. ■ 2  
When a debit card has previously been issued to the applicant, a new one is not sent. It is activated once benefits are approved. ■ 3

(2) Once the client receives the debit card, he or she must call the customer service telephone number located on the back of the debit card to activate the card and choose a personal identification number (PIN). ■ 4

(3) The client may choose another person to be a secondary cardholder for the benefits. The client must either contact the customer service telephone number located on the back of the debit card to request this or print the alternate cardholder request form from the [www.eppicard.com](http://www.eppicard.com) Web site. The client and the secondary cardholder must complete and sign the form and return it to the address on the form before a debit card is issued to the secondary cardholder. After the secondary cardholder receives the debit card, he or she must choose a PIN number before accessing benefits.

(4) When the client advises the Oklahoma Department of Human Services (OKDHS) staff that he or she never received the debit card, the worker checks to see if was returned as undeliverable. ■ 5

(5) There are certain fees a client may be charged when using a debit card. A list of fees can be found at [www.eppicard.com](http://www.eppicard.com). The client is sent information about fees when a debit card is first issued. The client can access account and transaction information on-line at [www.eppicard.com](http://www.eppicard.com) free of charge at any time.

(6) If the client fails to activate his or her debit card within 90 calendar days, the benefits are expunged and the contractor returns any funds loaded on a debit card to OKDHS. These funds may be reloaded on the client's debit card if he or she pins the debit card and requests from OKDHS reissuance within 365 days of the date of issuance. ■ 6

(b) When the client prefers to receive benefits through direct deposit, he or she must call

the contractor's call center telephone number to request direct deposit. ■ 4 The contractor's staff mails or faxes a direct deposit form to the client to complete and return before benefits can be issued by direct deposit. The client can also obtain a direct deposit form by going to the [www.eppicard.com](http://www.eppicard.com) Web site and printing it off.

(1) The client must complete the direct deposit form, provide a voided check or a savings account deposit slip, and return them to the address on the form.

(2) Once the form is completed and account information confirmed, the contractor has five working days to enter direct deposit information in the system.

(3) Benefits are changed to direct deposit for the next payment due after direct deposit information is entered in the system.

(4) Funds cannot be transferred from a debit card to direct deposit.

(c) The client's cash benefit is deposited in the client's checking or savings account on the first banking day of each month or loaded on the client's debit card on the first day of each month.

(1) The funds are available for withdrawal after deposit.

(2) After the monthly benefit is deposited in the client's account or loaded on the debit card, OKDHS is not responsible if someone other than the payee withdraws the funds. Banking regulations govern withdrawals.

(3) Clients are encouraged to be prudent about giving withdrawal privileges or debit card access to other people.

(d) The client may switch from direct deposit to the debit card or from the debit card to direct deposit by calling the contractor's call center to request the change and following directions given by the contractor's staff.

(e) When problems occur with direct deposit or debit card deposits, procedures for dealing with these problems are detailed in (1) through (5) of this subsection.

(1) When direct deposit cannot be accomplished for a benefit, the contractor's staff attempts to contact the client to obtain current banking information. When the client fails to provide current information or five days elapse without contact, the contractor converts the payment method to a debit card. If the client wishes to receive direct deposit again, the client must complete a new direct deposit form and provide current account information.

(2) If a client reports that a deposit was not made to his or her account or loaded on the debit card, the client reports this to the contractor's call center. The contractor handles any communication with banking institutions or MasterCard and then contacts the client regarding resolution.

(3) Payments may be made by direct deposit or debit card after the death of the payee.

(A) When a payment is made after the death of the payee for which the payee is not eligible, an overpayment may be established against the estate. ■ 7

(B) If there are unused benefits on the debit card at the time of death for which the client was entitled and someone contacts OKDHS to request these benefits, he or she is advised to contact the customer service number located on the back of the client's debit card for assistance. ■ 4

(4) When a cash benefit is closed, the closure action automatically closes out direct deposit or debit card payments.

(A) When the client's cash benefit is closed due to transfer of eligibility to another TANF or SSP case, direct deposit or debit card deposit is automatically transferred to the new case provided the client number of the payee in the closed and new case is the same. ■ 2

(B) When the client's cash benefit is closed and he or she later reapplies and is approved with the same client number, the previously chosen payment method is used to issue the cash benefit. The client must call the contractor's call center to change the payment method.

(5) When the payee for the cash benefit changes for any reason, he or she is assigned a new client number and a debit card is issued if one has not previously been issued for the new client number. The client must call the contractor's call center to set up direct deposit if he or she prefers that payment method. ■ 4 The new payee does not have access to benefits issued prior to the payee change.

## **INSTRUCTIONS TO STAFF 340:65-3-6**

**Revised 6-1-09**

- 1. (a) When the person receiving State Supplemental Payment (SSP) benefits is under age 18 and has a legal or natural guardian, the worker codes the case to show that the parent or guardian is the payee instead of the child. This allows**

the debit card to issue in the name of the legal or natural guardian. In order to do this, the worker must choose in the Household tab of the Family Assistance/Client Services (FACS) Interview Notebook:

- (1) "applicant or recipient with guardian, conservator, or substitute payee" in the "relationship to payee" field for the child;
- (2) "applicant, recipient payee, or head of household" in the "relationship to payee" field for the parent or guardian; and
- (3) "income/resources are not considered for benefit computation" in the "status" field for the parent or guardian.

(b) When the person coded as the payee on the Temporary Assistance for Needy Families (TANF) benefits is a minor, the minor must be shown as payee for the benefits so the minor's lifetime limit of 60 months receipt of TANF can be tracked. When there is a substitute payee, the worker enters in the Family Assistance/Client Services (FACS) Interview Notebook Case Information tab the name of the substitute payee in the "guardian, substitute payee, conservator, authorized representative, other" field and "substitute payee" in the "responsible person, or extra address" field. The substitute payee is the secondary cardholder for the TANF benefits.

2. (a) When the client has never been issued a debit card but has been issued a client number because of previous receipt of TANF, SSP, or another Oklahoma Department of Human Services (OKDHS) benefit, a debit card is mailed when benefits are in application status.

(1) The client number is the primary unique identifier used for case numbers assigned by OKDHS. This includes case numbers assigned for TANF, SSP, and child support payments issued by the Oklahoma Child Support Services (OCSS).

(2) The client number may also be called the Client ID (CID), Department Client Number (DCN), or the Recipient ID (RID). If more than one client number is issued for the same person, the worker opens a Remedy ticket to the Family Support Services Division (FSSD) Help Desk to request help in collapsing the numbers to one client number.

(3) The worker checks whether the client number is the same by entering CMC space case number. The client number is also on the first page of the

person's EF screen.

(b) When the applicant has never received benefits before, a client number is not assigned until after benefits are certified. In this instance, a debit card is not mailed until after benefits are approved.

(c) When the debit card is mailed to the client, the contractor, Affiliated Computer Services (ACS), also includes three other collateral documents that are produced by ACS. They are Form ACS-OK-103 "Oklahoma MasterCard Card Terms of Use," Form ACS-OK-M01, "Enjoy the Benefits of Your New Oklahoma Debit MasterCard," and Form ACS-OK-104, "Your Oklahoma Debit MasterCard Card." These forms can be viewed online at [www.eppicard.com](http://www.eppicard.com).

3 (a) If the client no longer has the previously issued debit card, he or she must call ACS Customer Call Center to request a new card at 1-888-401-9843.

(b) The client may receive one free replacement card per calendar year. If the free replacement has already been issued, the client is charged \$4 for the card replacement.

4. The ACS Customer Call Center number is 1-888-401-9843.

5. (a) The worker checks to see if a debit card returned by entering BN space the case number. If there is an "EW" benefit and the "type issuance" field shows "CR," this means that the client's debit card and payment were returned to OKDHS or the money was expunged from the debit card.

(b) If the card was returned and the client's address has changed, the worker updates the client's address. This action causes the debit card to be reissued to the new address.

(c) If the address has not changed, the client must call ACS to report a lost or stolen card. ACS must then reissue the debit card.

6. After the client pins his or her debit card, the worker contacts FSSD Help Desk or Temporary Assistance for Needy Families (TANF) Section staff by e-mail to request that benefits be reloaded on the client's debit card. The worker documents in FACS Case Notes why the client states he or she did not pin the debit card.

7. The worker codes the case to show the client's date of death. The system then

**automatically statuses the cardholder as deceased. This allows the Finance Division Electronic Payment Systems (EPS) Unit to formally request ACS expunge any money left in the debit card account that was issued after the client's death and return it to OKDHS. An overpayment is not written even if it is not possible to expunge the benefit.**

**340:65-3-6.1. Electronic Benefits Transfer**

Revised 6-1-08

Food and child care benefits are delivered by a statewide Electronic Benefits Transfer (EBT) system. ■ 1

**INSTRUCTIONS TO STAFF 340:65-3-6.1**Revised 12-1-09**1. (a) Electronic benefits transfer (EBT).**

(1) EBT provides an electronic method to deliver benefits to clients eligible for food and child care benefits. The EBT system credits benefits to the client's food benefit account. It is also a time and attendance tracking and provider payment system for clients receiving child care benefits. EBT provides access to these benefits through the use of a debit card called Access Oklahoma and a personal identification number (PIN).

(2) The county director or designee orders Access Oklahoma cards by calling Affiliated Computer Services (ACS) at 405-947-2743 or 405-947-2700. Cards are sent Federal Express two-day delivery. In emergencies the cards are sent by overnight mail.

(3) All cards must be kept in a secure location. The designated EBT specialist completes Form 10EB001E, Daily Card Count, and Form 10EB002E, Daily Card Issuance Report, each day. These forms are kept for audit and review purposes for a period of three years.

(b) Training. EBT training is provided to clients and designated authorized representatives through the use of OKDHS Access Oklahoma Client Training Videos DVD 2007. The Supplemental Nutrition Assistance Program (SNAP) and the Child Care Subsidy Program have different training videos on the same digital versatile disc (DVD). When the client is applying for both programs, he or she must view both DVD videos. The DVD videos are available in English, Spanish, and open-caption English. The county director or designee orders the DVD videos from the Finance Division Electronic Payment Systems (EPS) Unit.

(1) Effective training is the best defense against repeated card

replacements. County directors are encouraged to monitor EBT training to determine its effectiveness.

(2) Finance Division EPS staff are available to visit human services centers (HSC) to assist in training new EBT specialists in the use of the Administrative Terminal (AT) system. HSC training of clients may be conducted by any staff member familiar with EBT.

(A) If a client has a particular problem with using his or her EBT card appropriately, such as when the client's EBT card number is continually entered manually, the client may be asked to view the video again. See OAC 340:40-10-3 when a client receiving child care benefits misuses an EBT card.

(B) An authorized representative may be designated by the client in writing for the food or child care benefits on the application or review form or by signing a statement to this effect.

(C) To review or enter information concerning an additional card holder, refer to the EBTU transaction by viewing M space EBTU. An authorized representative or additional card holder attends training and is issued his or her own card.

(c) Access Oklahoma card. The EBT specialist issues an Access Oklahoma card to the person whose name appears on the card after the EBT specialist verifies the identity of that person. Government-issued identification with a photograph is best but not required as any method used to identify a person for program purposes is acceptable. The person selects his or her own PIN when an initial or replacement card is issued.

(1) The EBT specialist issues an initial EBT card for food or child care benefits after these benefits are placed in application status and the client views the EBT video. There is no requirement to view the EBT video again unless the client is having problems using the EBT card appropriately or the EBT video has been revised since the last time the client was approved for benefits.

(2) The EBT specialist issues an initial EBT card for an authorized representative after the worker completes the EBTU transaction and the authorized representative views the EBT video.

**(3) Since providers are not paid until the worker approves the application for child care benefits, authorizations must be completed in a timely manner. Child care providers have the right to decline serving children receiving Oklahoma Department of Human Services (OKDHS) child care benefits until an approval is received.**

**(4) The person whose name appears on the EBT card must be the person who requests a replacement card. OKDHS staff must issue a replacement card within two business days of the client's request. The two business day time frame starts after the client requests card cancellation and asks HSC staff to issue another card. Replacement cards may take up to one hour before they are activated.**

**(A) When the EBT card is lost, stolen, or destroyed, the client must go to the local HSC to obtain a replacement card. The EBT specialist only gives the replacement card to the person whose name appears on the EBT card.**

**(B) When the EBT card is stolen, it is recommended that the client calls ACS Customer Call Center at 1-888-328-6551 to cancel the EBT card before going to the HSC to request a replacement card. When the client goes to the HSC first, the EBT specialist cancels the EBT card through the AT before issuing a new EBT card. When the client calls ACS first, in addition to cancelling the EBT card, ACS staff records:**

**(i) the reason and circumstances for the request for cancellation and the exact date and time the call is received. This provides a tracking mechanism for any disputes which could arise if the client claims that benefits were taken from the account after the card was reported stolen; and**

**(ii) what information the client provided to identify himself or herself. The client is frequently asked about the last place he or she used the card, the amount of the purchase, and where he or she usually shops. This further documents the report and assists law enforcement officials in efforts to determine if EBT card trafficking is involved.**

**(C) When the client requests a new authorized representative for food benefits, the worker or EBT specialist immediately deactivates the current authorized representative's EBT card using transaction EBTU.**

**Immediate card cancellation helps avoid misuse of the client's food benefits by the current authorized representative.**

**(D)** For child care benefits, the EBT specialist cancels and replaces the EBT card for the client or authorized representative. If the authorized representative has been deactivated on EBTU, the client must designate an authorized representative in writing again before the EBT specialist issues a replacement card.

**(E)** The county director may require a client receiving food benefits, except a client who returns an unusable card, to view the training video again before the EBT specialist issues a replacement card.

**(i)** Cards that are demagnetized or in an unusable condition are replaced the day the cards are returned to the HSC.

**(ii)** Cards reported as demagnetized or unusable that are not returned to the HSC are replaced within two business days.

**(F)** When the client requests a replacement card but leaves prior to receiving the printed card and does not return before the end of the business day, the EBT specialist destroys and logs the card that same day on Form 10EB002E. A new card is issued when the client returns to the HSC.

**(d) Misuse of EBT card. When OKDHS becomes aware that the client or the authorized representative is misusing his or her EBT card, the EBT card may be cancelled by EPS Unit staff in the Finance Division.**

**(1) Misuse of the EBT card for child care subsidy benefits may occur when the client or authorized representative gives his or her EBT card to another person, such as the child care provider, to swipe attendance or the client knowingly swipes incorrect attendance dates and times. See OAC 340:40-10-3 for child care procedures.**

**(2) Misuse of the EBT card for food benefits occurs when the client's EBT card number is continually entered manually. The Finance Division EPS Unit receives a report showing when this occurs. When the Finance Division EPS Unit receives this report, staff in the unit:**

**(A) notifies the client by letter that the client's EBT card is being**

**deactivated within 30 calendar days because only manually entered transactions are being used. The letter advises the client to obtain a new EBT card from the HSC and watch the training video prior to reissuance of the EBT card; and**

**(B) deactivates the EBT card 30 calendar days from the date the letter is sent to the client unless the client has obtained a new EBT card.**

**(e) Food benefit issuance. Regular roll food benefits are issued on the 1st day of the month.**

**(1) OKDHS sends emergency food benefits to ACS on-line when the case is certified.**

**(2) OKDHS sends regular roll benefits to ACS after deadline each month.**

**(3) Benefits for cases certified during the 1-1 period between deadline and the first of the following month are sent the night of certification for the month of certification. Benefits for the next month are not sent until the night of the first working day of the month.**

**(4) When benefits are sent to ACS, the status block on the BN screen changes from T to Z. Refer to the BN transaction by entering M space BN. When benefits are posted by ACS, the status block changes to P.**

**(f) Payee change. When the payee changes on a case, the worker determines whether to give the new payee access to the current account balance before the change is made.**

**(1) When the new payee needs access to the balance in the food benefit account, he or she must be shown as the authorized representative first on the Family Assistance/Client Services (FACS) system and then on the EBTU screen.**

**(2) A card must be issued to the authorized representative. FACS is then updated to show the new payee.**

**(3) Once the old benefits are depleted, the new payee is removed as the authorized representative and another card is issued.**

**(4) As soon as an authorized representative is removed from FACS, his or her card is deactivated automatically.**

**(5) A payee removed from a case is able to access past benefits in the EBT account that have not been used as long as his or her card is active.**

**(g) Food benefits not used within the last 90 calendar days. Food benefits which have not been used within the last 90 calendar days are considered stale benefits. The client may have access to these benefits for 365 days from the issuance date of the benefits.**

**(h) Expunged benefits. OKDHS expunges food benefits that have not been accessed by the household within 365 days. Expunged benefits may be reloaded if requested within 365 days of the date of issuance. Request for reloading is made by contacting the FSSD Supplemental Nutrition Assistance Program (SNAP) Section.**

**(1) If an account needs to be reactivated, the local HSC EBT specialist must contact the Finance Division EPS Unit.**

**(2) The worker updates FACS Case Notes to explain why benefits were not used when originally issued.**

**(i) Out-of-state moves. The Access Oklahoma card may be used to access food benefits in most states. Most major retailers accept the Access Oklahoma card.**

**(1) If a client notifies the worker he or she is moving or has moved to another state, the worker informs the client to use the Access Oklahoma card in Oklahoma before leaving the state or contact the state agency where he or she has moved to locate a retailer that will accept the Access Oklahoma card.**

**(2) The worker may contact the Finance Division EPS Unit to assist the household in locating a retailer that accepts the Access Oklahoma card.**

**(j) Separation of duties. Federal regulations require a separation of duties between persons who certify benefits, issue EBT cards, and have access to the EBT AT. This protects employees from any appearance of inappropriate conduct in benefit issuance.**

**(1) If the HSC does not have sufficient staff to maintain a separation of duties for these tasks, the Finance Division EPS Unit may provide Off-Site EBT specialists (OSS) to assist in card issuance.**

**(2) To implement this process, the county director must contact the Finance Division EPS Unit director to make the request.**

**(3) The county director is notified of the approval decision. A description of responsibilities and instructions for the EBT specialists and OSS is provided along with the name and phone number of the OSS assigned. EBT specialists:**

**(A) continue to train clients, authorized representatives, and additional card holders;**

**(B) operate the EBT AT with inquiry only access;**

**(C) maintain card inventory records;**

**(D) operate the embosser; and**

**(E) assist in PIN selection.**

**(k) Timely reporting of changes. The worker must explain to clients the necessity of reporting timely changes of address and shelter expense so the correct amount of benefits are issued. In addition to updating computer fields when a change of address or shelter expense is reported, the worker must also update the FACS Case Notes to record reported changes to ensure the provision of services to clients and case accuracy.**