

WISCONSIN DEPARTMENT OF HEALTH SERVICES
Division of Medicaid Services
1 W. Wilson St.
Madison WI 53703

To: CTS Users

From: Jori Mundy, Bureau Director
Bureau of Eligibility and Enrollment Policy

Re: **CTS Release 22-01**

Release Date: 04/04/2022

Effective Date: 04/04/2022

EFFECTIVE DATE	The following policy additions or changes are effective 04/04/2022 unless otherwise noted. Underlined text denotes new text. Text with a strike through it denotes deleted text.
POLICY UPDATES	
2.6.2 Changes	Updated reference links due to removal of Notices policy from Income Maintenance Manual.
4.5 Notices	Section rewritten and expanded due to removal of Notices policy from Income Maintenance Manual. (No change in CTS policy.).

2.6.2 Changes

Changes that occur between the filing date and the confirmation date should be used in the initial eligibility determination.

~~For changes that occur after the confirmation date, follow the adequate and timely notice requirements outlined in Income Maintenance Manual SECTION 3.2 ADVERSE ACTION AND APPEAL RIGHTS.~~

For changes causing a negative action that occur after the confirmation date, members have the right to adequate and timely notices following adverse action rules (see Section 4.5.3 Notice of Adverse Action).

4.5 Notices

~~Any SSI parent who applies for CTS must be notified about the status of his or her application (approved, denied, or pending the receipt of additional information), in writing, within 30 days of application for benefits. Ten days notice must be given to SSI parents when any action or event occurs that will adversely affect their ongoing CTS benefits. These notices must cite applicable statute, include reason for any adverse action, and state the benefit month and amount granted. Notices must also identify the responsible local agency worker, provide contact information, and identify appeal rights and mechanisms.~~

~~Generally, the CARES system will electronically produce and mail notices appropriate to each activity (i.e., eligibility, review, verification required, change in benefits). Workers can view these system-generated notices by logging into the CARES system. However, when a worker has undertaken a manual eligibility determination or made a case change for CTS, notices must be created manually also. Manual notices must contain all of the elements required included in CARES system-generated notices.~~

4.5.1 Notice Requirements

All applicants and members must be provided timely and adequate written notice of any decision affecting their eligibility, including an approval, denial, or termination of eligibility, or a change in benefits. Applicants and members must receive written notice of:

- The decision on an application or renewal.
- Any action to discontinue a member's eligibility or benefits.
- Any action that changes the amount of benefits.

4.5.2 Application Notice

Any SSI parent who applies for CTS must be provided notice about the status of his or her application (approved, denied, or pending the receipt of additional information), in writing, within 30 days of application for benefits

4.5.2.1 Notice of Approval

Any notice of approval of CTS eligibility must include:

- The effective date of eligibility
- The circumstances under which the individual must report, and procedures for reporting, any changes that may affect the individual's eligibility
- Basic information on the benefit amount and which individuals are eligible
- An explanation of the right to a fair hearing and how to request one

4.5.2.2 Notice of Denial

Any notice of denial of CTS eligibility for an individual or the household must include:

- The month(s) which were denied and in which individuals were determined ineligible
- The reason(s) for the denial, including citations of the law or policy that supports the action
- An explanation of the right to a fair hearing and how to request one
- The telephone number and the name and address of the agency to contact for more information

4.5.3 Notice of Adverse Action

An adverse action is when the IM agency makes a change that will stop or reduce benefits. Members have the right to adequate and timely notice of an adverse action.

4.5.3.1 Adequate Notice of Adverse Action

To be considered adequate, an adverse action notice must include the following:

- A statement describing the intended action
- The reason(s) for the intended action, including a citation of the law, regulation, rule, or policy that supports or requires the action
- An explanation of the right to a fair hearing and how to request one
- A statement on the availability of free legal representation
- A statement that if a hearing is requested before the action's effective date, benefits will continue until the hearing decision is made
- The latest date a member can appeal
- A statement that the member may have to repay any benefits continued during the appeal if the hearing decision isn't in their favor, or they abandon or withdraw the hearing request
- The telephone number and the name and address of the agency to contact for more information

4.5.3.2 Timely Notice of Adverse Action

To be considered timely, a notice of an adverse action must be mailed or sent electronically at least 10 days before the effective date of any intended adverse action, unless one or more of the following circumstances apply:

- Factual information confirms a recipient or payee's death, and there's no relative to take his/her place as primary person
- A clear, written statement initiated and signed by the member is submitted stating they no longer wish to receive benefits
- The member is receiving SSI benefits from another state

4.5.4 Notice of Positive Action

A positive action is when the IM agency makes a change that will begin eligibility for someone or increase their benefits. Members have the right to adequate notice of a positive action.

To be considered adequate, a positive notice must include the following:

- A statement describing the intended action
- Basic information on the benefit amount and which individuals are eligible
- An explanation of the right to a fair hearing and how to request one
- A statement on the availability of free legal representation
- The telephone number and the name and address of the agency to contact for more information