

RESOLUTION NO. 2011-169

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, REPEALING AND REPLACING RESOLUTION 96-153 AND APPROVING THE REVISED POLICIES AND PROCEDURES OF THE ST. JOHNS COUNTY SOCIAL SERVICES MEDICAL ASSISTANCE PROGRAM, DATED 6-1-11 AND AUTHORIZING THE CHAIR OF THE BOARD OF COUNTY COMMISSIONERS TO EXECUTE THE RESOLUTION ON BEHALF OF THE COUNTY

WHEREAS, Section 125.01(1)(e), Florida Statutes, authorizes County to provide health welfare programs for the residents of St. Johns County to the extent not inconsistent with general or special law; and

WHEREAS, County has established a variety of program for providing healthcare services to the uninsured, underinsured and medically indigent residents of the County; and;

WHEREAS, in keeping with the societal, economic and budgetary changes within the community, revisions to the policies of the Medical Assistance Program provided through the County's Social Services Office are needed.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AS FOLLOWS:

Section 1. **Recitals.** The above Recitals are hereby incorporated into the body of this Resolution, and are adopted as Findings of Fact.

Section 2. **Authority.** The Board of County Commissioners hereby approves the terms, provisions, conditions, and requirements of the Revised Policies and Procedures of the Medical Assistance Program of the County's Social Services Office and authorizes the Chair of the Board of County Commissioners of St. Johns County, Florida to execute this approving resolution on behalf of the County.

Section 3. **Repeal of Inconsistent Provisions.** All provisions contained in or associated with any Resolution 96-153, which are deemed inconsistent or in conflict with the provisions set forth above, are hereby repealed to the extent of such inconsistency or conflict and replaced by this Resolution.

Section 4. **Errors and Omissions.** To the extent that there are typographical and/or administrative errors and/or omissions that do not change the tone, tenor, or concept of this Resolution, then this Resolution may be revised without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida, this 21st day of June, 2011.

**BOARD OF COUNTY COMMISSIONERS OF
ST. JOHNS COUNTY, FLORIDA**

Attest:
Cheryl Strickland
Clerk of The Court

By:

By: Pam Halterman
Deputy Clerk

[Signature]
Chair

RENDITION DATE 6/23/11





St. Johns County Board of County Commissioners

Social Services | Health & Human Services Division

ST. JOHNS COUNTY SOCIAL SERVICES DEPARTMENT

Revised Policies and Procedures of the St. Johns County Social Services Medical Assistance Program June 2011

MISSION STATEMENT

The mission of the St. Johns County Department of Social Services is to reduce social and economic dependency by providing a bridge of interim medical and other available services to qualified individuals and families who are residents of St. Johns County. St. Johns County Department of Social Services will address those needs by partnering with other service providers to maximize service delivery and insure the most efficient and effective use of resources by eliminating the duplication of services.

PROGRAM DESCRIPTIONS

OVERVIEW

The Social Services program administers the County's Medical Assistance Program budget, processes the State mandated Medicaid participation bills, provides staff support for the Board of County Commissioners appointed Health and Human Services Advisory Council, and provides information and referral services for low income residents. In addition, the Social Services Department provides eligibility assistance for programs, including those programs offered by the Clerk of Court, County Tax Collector and County Zoning Department for the following:

- Solid Waste Collection/Recycle Assessments Exemption
- Humanitarian Waiver
- Health Care Responsibility Care Act (HCRA) for assistance in paying emergency care at out-of-county hospitals; St. Johns County Social Services must be able to determine if client AND facility are eligible for payment to the facility only as directed in the state-mandated Health Care Responsibility Act (HCRA) guidelines.

HOSPITALS

Flagler Hospital is funded directly by the St. Johns County Board of County Commissioners for inpatient hospitalization. Inpatient facility charges are not covered through the Social Services Department.

SPECIALTY PHYSICIAN SERVICES

When appropriate this program covers Specialty Physicians' services needed in life-threatening critical care situations, primarily in St. Johns County when available.

OUTPATIENT CARE

This program pays for outpatient care including x-rays, MRI's, CT scans, physical therapy, laboratory services, and home health care services.

HEALTH CARE RESPONSIBILITY ACT (HCRA)

County residents who receive services in out-of-county hospitals either through emergency admissions or for services not provided in St. Johns County are covered under the Health Care Responsibility Act (HCRA), a State-mandated program.

PRIMARY CARE

Financial eligibility is determined by the Social Services Department based on the current Federal Poverty Guidelines. Payment amounts for services are based on a sliding fee scale. Picture identification cards are issued after eligibility is determined. The Primary Care identification cards are for limited medical services provided through the County Primary Care Clinic location and are not for major medical services.

MEDICATION

The County contracts with Flagler Community Pharmacy to provide medications to clients of the Social Services Department. This program covers prescriptions issued by physicians. The State of Florida Medicaid formulary has been established and physicians are required to use it when prescribing medications for Social Services clients. Generic drugs are to be used when available. Controlled pain medications are approved after surgery or a procedure and only for 10 to 14 days. The only exceptions are for terminally ill patients.

Prescription Assistance Programs (PAP's): Long term medication may be available through programs offered by pharmaceutical companies. Assistance may be provided with obtaining these medications prescribed by the County Primary Care physicians.

The program also provides assistance to eligible clients who have a prescription for medical supplies and/or equipment rental. This includes, but is not limited to oxygen, CPAP machines, wheelchairs, walkers, etc.

MEDICAID PARTICIPATION

Counties are required under Florida Statutes to participate in the cost of Medicaid Hospital and Nursing Home services provided to County residents. The cost is \$55 per month for each eligible resident of a nursing home. Hospital services require counties to contribute 35% of the cost of care for the 11th through 45th day of hospitalization each year.

GENERAL ASSISTANCE

St. Johns County Social Services provides assistance with rent, utilities, food, emergency life threatening medicines, and transportation when funds are available. Eligibility for these services is based upon need due to a crisis.

INDIGENT DEATHS

Pursuant to Florida Statutes, the St. Johns County Board of County Commissioners is responsible for the disposition of indigent persons who die in St. Johns County. St. Johns County Social Services will pay for the cremation of indigent or unclaimed persons who die in St. Johns County. Local funeral homes are provided vouchers for such services on a rotating basis.

Veterans may be eligible for burial at the National Veterans Cemeteries located in the State of Florida. However, the Veterans Administration (VA) does not provide for the transport and casket of a veteran eligible for burial in a VA cemetery. St. Johns County Social Services will provide a voucher to local funeral homes for the transport, body preparation and casket for a St. Johns County resident veteran when approved for burial at the VA cemetery.

Solid Waste Tax Exemption, Humanitarian Waiver, and EMS Transport Charges Discount or Write-Off Program

Social Services Department provides interviewing, screening, and eligibility determination to applicants requesting assistance for these programs.

Staff Support - Health and Human Services Advisory Council

The Board of County Commissioners established two Advisory Committees in 1988. The Resolution 88-180 and 88-182 which set up these committees stated that the Human Services Department would provide staff support for these two committees. In October, 1995 both committees were dissolved and the Health and Human Services Advisory Council was established by Resolution 95-166.

MEDICAL ASSISTANCE PROGRAM

INTRODUCTION

St. Johns County Social Services Department was created in 1978 and administers the County's assistance program aimed at reducing social and economic dependency and providing **interim** medical and other related services to needy individuals and families who are residents of St. Johns County. Assistance is supplemented with referrals to appropriate local, state, or federal agencies.

Historically, counties are viewed as caring for and supporting needy persons for whom the State has made no special provision. The nature and extent relates realistically to the number of indigent applications and to budgetary availability. Some programs administered by the Department are in response to State statutory requirements for County participation, while others such as outpatient testing, physician services, medication, and hospitalization are non-mandated.

The right to assistance carries with it the definite responsibility for maximum self-support, maximum self-direction, and active participation in plans for rehabilitation. **Refusal by an applicant to cooperate in providing complete, honest and accurate information during the application process; or the refusal to accept and pursue an appropriate referral to another government or private agency will cause the application to be denied.**

On September 10, 1996, the Board of County Commissioners of St. Johns County adopted Resolution 96-153 stating that beginning January 1, 1997, all applicants for and recipients of medical care of non-mandated services will be subject to meet certain income, asset, employment requirements. On July 16, 2002 the resolution was amended by Resolution 2002-136 amending the income level to meet the Federal Poverty Guidelines and limiting the number of eligible inpatient hospitalization days the County will pay. **The St. Johns County Social Services Department has developed a network of provider agencies in order to assure quality health care and early intervention with a goal of reducing per client expenditure.**

GUIDELINES FOR NON-MANDATED SERVICES

The Social Services Department can provide assistance to resident individuals and families who lack the resources to obtain necessary medical or other general assistance. **The funding for these services is discretionary and may be discontinued or reduced at any time. Staff will serve as "navigators" to link clients to other resources or services that may provide direct financial support when available and appropriate.**

- **Self-Improvement:** Financial assistance to clients is supplemented with referrals which are designed to restore individuals to self-sufficient status or to provide referrals to appropriate local, state, or federal agencies.
- **Responsibility:** The right to assistance carries with it the definite responsibility for maximum self-support, maximum self-direction and active participation in plans for rehabilitation and self-sufficiency.
- **Non-Cooperation:** Refusal by an applicant to cooperate in providing complete and accurate information during the application process, or to accept and pursue an appropriate referral from the department to another governmental or private agency may cause the application to be denied.
- **Refusal of Services:** The Social Services Department reserves the right to refuse support to clients who do not comply with plans for rehabilitation and self-sufficiency.
- **Fiscal Year Cap on Outpatient Services:** The Social Services Department reserves the right to limit the amount of payment of outpatient services for eligible clients of the Medical Assistance Program to \$1,500 per County Fiscal Year.
- **Annual Cap on General Assistance Program:** The Social Services Department, under the General Assistance Program, reserves the right to limit assistance to one time assistance within an 18 month period (i.e., one time rental assistance, one time utility assistance, and one time medication assistance within an 18 month period).

MEDICAL ASSISTANCE GUIDELINES

The Department attempts to provide all necessary services to ensure the health of clients; however, there may be some medical or dental services desired by a client (or client's doctor) that cannot be covered. In such cases, staff will attempt to refer clients to other agencies for assistance.

MEDICAL ASSISTANCE GUIDELINES

- **Criminal Activity:** The Social Services Department will not provide assistance for treatment of an injury that took place during the commission of a crime for which the individual seeking services was convicted.
- **Negligent Activities/Behaviors:** The Social Services Department will not provide assistance for an injury due to negligent/high risk activities or behaviors of an applicant for which applicant failed to obtain or maintain health insurance coverage/Personal Injury Protection. Such behaviors/activities include but are not limited to motorcycle, ATV vehicle riding, surfing, skateboarding and/or injuries that took place while intoxicated. Staff will obtain copies of Emergency Room and Physician Reports in an attempt to verify cause of injury.
- **Employment Status:** Applicants who are employed and meet all other eligibility criteria will receive appropriate assistance through Social Services. Applicants who are unemployed will be denied assistance unless they are actively seeking employment and provide documentation that they are making a good faith effort to obtain employment.
- **Pain Management:** The Social Services program is not funded to provide assistance for chronic pain management or for symptoms of unknown etiology or intractable pain.
- **Mental Illness:** Psychiatric evaluation and substance abuse treatment services are provided through the State contracted Mental Health Provider and Substance Abuse Recovery Program.
- **Diagnostic Services:** Social Services may cover the costs of diagnostic services to determine the nature and severity of clients' medical conditions.
- **Crisis Care:** Social Services may cover the costs for life-threatening medical conditions of eligible applicants.
- **Disability Application:** If a diagnosis is given that warrants a client's filing for disability, the client will be required to apply for Social Security Disability. Social Services will not provide further assistance until the client provides proof of SSD/SSI application.
- **Disability Pending:** Social Services will only cover life-threatening conditions of clients who are pending disability determination. Social Services will not cover a medical condition that is non-life-threatening, even if the client has applied for disability for that particular condition.
- **Disability Approved:** When a client is approved for SSI/SSD, he/she is no longer eligible for assistance from Social Services and must apply for Medicaid.
- **Disability Denial:** After November 1, 2007, if a client is denied SSI/SSD by the Determinations Judge, the client will not be eligible for assistance from Social Services (under the disability criteria). As of November 1, 2007, coverage of persons under the next level of SSI/SSD determinations appeal beyond the Determinations Judge decision will end at the time that level of appeal is denied. Upon receipt of the appeal denial, Social Services will issue a 30 day written notice of ending financial responsibility of the client's medical care.
- **Pending Litigation:** If a client has pending litigation due to an injury/illness, the Social Services Department will not assist with any medical care related to the litigation without a letter of protection from the client's attorney. In instances when the client's attorney fails to or refuses to provide a letter of protection for the client's care, the Department Director shall request of the attorney what provision requires the Social Services Department to provide care for a person pending settlement. In cases of unusual circumstances, the Medical Director of Health and Human Services or other designee shall make a final determination.

Medical Assistance Guidelines (Continued):

- **Early Retirement:** Persons who have chosen early retirement prior to Medicare eligibility shall not receive medical assistance unless they are eligible under another category (such as employed or pending disability).
- **College Students:** To be eligible, college students must be employed and be independent residents of St. Johns County. They must not be listed as a dependent on their parents' income tax return or the parents' income will be used to determine eligibility.
- **Transitional Residency:** Applicants living in transitional residences without ever having been a resident in St. Johns County are not eligible for Social Services assistance. Transitional residences include: correction facilities, rehabilitations facilities, nursing homes, hospitals, halfway houses, veteran's domiciles, treatment facilities, and any other non-permanent residential facilities. To be eligible, applicants must be released from a transitional facility and reside independently in St. Johns County.
- **Non-U.S. Residents:** Applicants must present their Permanent Resident Alien Card (Green Card) to be considered eligible for assistance. Individuals in the U.S on a VISA are not considered permanent residents.
- **Permanent Resident Status:** An individual must have Permanent Resident status for least five years from the "Resident Since" date on their card to be considered for eligibility.
- **Eligibility for Other Programs:** Applicants who are eligible for assistance from another agency will be referred and must apply to that agency. If applicants provide documentation that they have applied and been denied by another agency or program, they will be eligible to apply for Social Services assistance.
- **Liability Insurance Claims:** Applicants who have been injured and may be covered by liability insurance will be required to pursue such a claim for medical care/treatment for the injury (i.e., homeowners' coverage, automobile coverage, and business liability coverage, etc.).
- **Veterans:** Individuals who served in the armed forces will be referred to the Veterans' Administration regardless of length of military service. If applicants provide documentation that they have applied and been denied by the VA, they will be eligible to apply for Social Services assistance.
- **Workers' Compensation Claims:** Clients with previous Workers' Comp claims based on the current illness/injury will not be eligible for Social Services assistance and will be referred back to the Workers' Comp insurance company to reopen the case. If a settlement has been received for a Workers' Comp claim, the Social Services Department will not assist with treatment for the condition that was covered under the Workers' Comp claim. Documentation of the settlement and condition covered under the claim will be required of an applicant.

ELIGIBILITY CRITERIA

COUNTY RESIDENCY

Applicants for all types of service provided through St. Johns County must be physically residing in the County and provide verification of residency. Persons are considered County residents when they establish and maintain a living arrangement, outside of an institution, which they, or someone responsible for them, consider to be their home. The length of time a person physically resides in the County will not be a determining factor provided they don't maintain a residence in another County or State. Students who are away from home attending school will be considered residents of the County in which their parents live if they are claimed as dependents by their parents for Income Tax purposes.

Verification of Identity: Applicants are required to provide photo identification when applying for services or proof of application for Florida Identification Card or Florida Drivers License.

Verification of Residence (at least two of the following that lists a current St. Johns County address):

- A. Deed, mortgage, monthly mortgage statement, mortgage payment booklet or residential rental/lease agreement
- B. Utility bills showing address, not more two months old
- C. Florida Voter Registration Card
- D. Educational institution transcript forms for the current school year
- E. Florida Vehicle Registration or Title
- F. Florida Boat Registration or Title (if living on a boat)
- G. Selective Service Card
- H. Current homeowner's insurance policy or bill
- I. Current automobile insurance policy or bill
- J. W2 or 1099 Form
- K. A letter from a homeless shelter, transitional service provider, or half-way house verifying that they receive mail for the client. The letter must be accompanied by the Certification of Address Form
- L. A statement from a parent, legal guardian or other person with whom the applicant lives combined with two other proofs of their residential address (Items A-J above) The letter must be accompanied by the Certification of Address Form

INCOME WITHIN CURRENT FEDERAL POVERTY LEVEL GUIDELINES

Resolution 96-153 and the amended Resolution 2002-136, Section 2, paragraph 4 states "The applicant or other family member seeking or using non mandated County social service programs must demonstrate that they are employed, seeking employment or unemployable due to mental or physical disabilities." Gross income from all sources will be considered in determining income eligibility. Current Federal Poverty Guideline Levels will be used and adjusted according to household size.

Income sources will include:

- Earnings from employment (check stubs or Verification of Income form completed by employer)
- Pensions (Social Security, any type of retirement benefit, annuity, etc.)
- Workmen's Compensation (monthly payments and/or cash settlements)
- Unemployment Compensation
- Any type of welfare benefit (i.e., TANF, etc.)
- Assistance from family or friends with copies of verification of assistance paid on the applicant's behalf
- Child Support
- Alimony
- Self-employment earnings (odd jobs, etc.) with verification of amount paid by customer
- Cash from credit cards or loans

To determine a family unit's gross household income, staff will first need to determine who is in the applicant's family unit. A family unit is defined as one or more persons residing together in the same household, whose needs, income and assets are included in the household budget, excluding roomers and boarders. Household members/family unit include the applicant, legal spouse, partner, dependent children, stepchildren, adopted children, partner's children, and blood relatives under the age of 21, unrelated minor children for whom the individual has legal guardianship or custody, legal guardian or natural parents of minor children, minor siblings.

The only deductions allowable (according to the type of program assistance requested) are:

- A. Medical expenses paid by the client for him/herself
- B. Verified child support payments

COUNTY GUIDELINES ON ASSETS

DEFINITION OF ASSETS

Assets are those possessions that an individual owns. Assets include liquid resources such as checking and savings accounts, savings certificates, bonds, stocks, and non-liquid resources such as: non-homestead property, land, and business equipment (unless self-employed), minus indebtedness. Indebtedness is the amount due to satisfy contract terms against an item to establish ownership. This includes interest over the full term of the contract, but does not include commissions, fees or penalties involved in selling the asset.

In order to be eligible for assistance, the individual or family must not have assets in excess of the maximum standards established in Resolution 96-153 and amended Resolution 2002-136, which is \$2,500.00.

AVAILABILITY OF ASSETS:

Assets are considered as being available when actually available or when the applicant has the legal ability to make such funds available. Assets which are not available due to legal restrictions or factors beyond the applicant's control are considered to be unavailable and will not be counted in determining eligibility, provided such restrictions were not created by the applicant. Determination of the availability of assets which appear unavailable due to legal restrictions must be determined by the County Administrator or designee.

Determination of the availability of assets which appear unavailable due to factors beyond the applicant's control must be reviewed by the Manager of Social Services. If necessary, the case should be forwarded to the County Administrator or designee for final determination.

Determination that converting a non-liquid asset would prevent the applicant from future earnings or would prevent the applicant from obtaining immediate and necessary care must be made by the Manager of Social Services.

TRANSFER OF ASSETS

An applicant must not make an assignment, sale, gift or transfer of assets with the intent of meeting or maintaining eligibility for assistance.

When it is determined that an asset was transferred with the sole intent of meeting or maintaining eligibility, assistance must be denied and an ineligibility period determined by dividing the value of the asset by the Federal Poverty Level for the assistance group. The determination of ineligibility must be based on the intent of the transfer rather than the value received.

Applicant must be asked whether an asset affecting eligibility has been transferred or sold within the 90-day period preceding the date of application or the date(s) for which assistance is being requested. If an applicant has transferred or sold an asset, the staff must request and record detailed information concerning the transaction.

The applicant's statement is usually sufficient to determine the intent of the transfer. When the intent is unclear, the case should be referred for investigation.

When it appears that an asset was sold or transferred in order to meet or maintain eligibility, the case must be referred to the Social Services Manager for review and determination. If necessary, the case may be referred to the County Administrator or his designee for final determination.

The Department has the burden of proof in cases involving this policy. It is therefore essential that the records include detailed information concerning the type of asset transferred, date, to whom, and reason for transfer.

TRANSFER OF ASSETS (Continued):

Applicants have the right to dispose of assets below the asset limit or those not affecting eligibility. However, the net value received from such disposition must be assessed to determine if the value affects eligibility.

A lump sum payment will be divided by the Federal Poverty Guidelines Level determined by the family size. This will determine the number of months the client will be ineligible for assistance through Social Services.

Example:

Mr. Smith, a single man, receives a lump sum payment from Workers Compensation in the amount of \$14,000 on February 1. The current Federal Poverty Level for one in the household is \$1,164 per month. Divide \$14,000 by \$1,164 equals 12 months from the date of receipt of the settlement. Therefore, he will be considered to have an income at Federal Poverty Level (\$1,164) from February until January of the following year.

CONVERSION OF ASSETS

Proceeds from the sale or conversion of an asset are considered assets rather than income, even when cash is received. Documentation/verification of the new asset must be obtained and the proceeds or converted asset must be evaluated to determine whether the new asset affects eligibility.

Examples:

- Applicant cashed a certificate of deposit. The cash is considered an asset.
- Applicant sold an automobile. The cash is considered an asset.
- Applicant cashed a \$300 certificate of deposit and used the cash as a down payment on an automobile. The automobile is not considered an asset. The County has always excluded cars as an asset when someone is employed.

Examples:

- In the case of a married couple with two cars and only one person working, the second car of lesser value would be considered an asset.
- However, if both are employed neither vehicle would be considered an asset.

OWNERSHIP

An applicant whose name is listed as the sole owner of an asset will be considered to have exclusive use or access to the asset. Applicants who claim that they do not have sole access or that they are administering the asset for another person, will be informed that the Department policy does not acknowledge such claims.

An applicant, whose name is listed as the joint owner of an asset, will be considered to have access to the total value of the asset. Applicants, who claim not to have access or to have joint access, must provide verification to substantiate their statements.

Examples:

- Applicant's name is listed as the sole owner of a savings account. Applicant states that his name is only listed as his mother is unable to take care of her financial matters.
- Applicant's name is listed as the joint owner of a checking account. Applicant provides verification that the account belongs to her mother and that her name is only listed for emergency purposes. A study of the applicant's financial management also indicates that she has not accessed the account. Asset will not be considered when determining eligibility.

An unusual situation should be referred to the Social Services Manager for review and recommendation.

ASSETS WHICH AFFECT ELIGIBILITY

The following is a list of those assets which affect eligibility and which must be documented/verified prior to authorizing assistance.

Bank Accounts:

Accounts which are held in a financial institution and are usually paid upon demand; the asset value is the balance in the account on the date of eligibility determination.

- Documentation or verification: Information which lists all owners and account balances.
- Sources of Information: bank statements, contact with financial institution, letter from account holder.

Income Producing Property:

Income producing property may include vehicles, tools, livestock, equipment, machinery and similar goods owned, usually in quantities beyond the customary needs of normal living, and in fact, used by members of an assistance group to produce income for support of the group. This may include income-producing property owned by a recipient who is currently unemployed, but can reasonably be expected to return to work. However, if there is no expectation that the recipient will return to work, at least in that particular field, then the personal property shall be considered as a resource.

Business Equipment:

- Documentation or verification: Information which lists the ownership of property and the type, make, model and age of machinery or equipment.
- Sources of Information: County tax assessor, reputable business dealer.

Cash:

This includes money in possession of an applicant or to which the applicant has access.

- Documentation or verification: Information from the applicant regarding the amount of cash and its location.
- Sources of Information: A notarized statement from applicant is acceptable along with bank documentation when available.

Collections:

This includes gun, coin, stamp, antique, or other collections which are of value.

- Documentation or verification: Written statement from a reputable dealer which outlines the type of collection and its current cash value.
- Sources of Information: Local club or organization, dealer or business.

Individual Investments:

This includes stocks, bonds, certificates of deposit, mutual funds, deferred compensation plans, IRA's, etc.

- Documentation or verification: Information from a financial institution or investment company that is sufficient to establish ownership.
- Sources of information: Information on the current market or cash value may be secured from the bank, Investment Company, newspaper, etc. The source and date of the quotation must be recorded.

Real Estate:

This includes any land, house, mobile home, condominium, or houseboat which is not the homestead. The value is the assessed taxable value minus any indebtedness against the property.

- Documentation or verification: Information which includes the name of the owner, legal description, amount of indebtedness, name of lien holder and assessed value.
- Sources of information: Deed, liens, county records, or contact with lien holder.

ASSETS WHICH DO NOT AFFECT ELIGIBILITY

The following are those assets which do not affect eligibility. Documentation or verification is only required if information appears questionable.

Homestead:

The house, mobile home, condominium or boat, which the applicant owns and in which he/she resides is recognized as homestead property. The composition of homestead property is determined by the County Property Appraiser.

When the applicant permanently leaves the homestead and establishes a residence elsewhere, the homestead becomes an asset regardless of how it is considered for tax purposes. If the home is temporarily unoccupied due to the applicant's illness, casualty loss or natural disaster and the applicant clearly intends to return, the home continues to be considered as homestead.

- Documentation or verification: Information containing the owner's name and the legal description. The applicant must state whether the property is occupied, and if not give a reason.
- Sources of information: Tax statements, deeds, county property records, fire department records, police records, etc.

Life Estate:

Life estate entitles the holder to occupy a property for the remainder of his/her lifetime, to collect rents and profits from the property and make him/her responsible for taxes. Life estates do not entitle the holder to sell the property, but neither can the owner sell the property without the consent of the person who holds the life estate.

- Documentation or verification: Information containing the name of the person holding life estate, the exact name of the owner and the location of the property.
- Sources of Information: Deeds, county property records, legal records, etc.

Real Estate - Inherited Not Probated:

- Documentation or verification: Information concerning the location of the property, names of heirs, name of attorney, status of will or estate.

Sources of information: Attorney for the heirs, Office of the County Probate Judge, Probate Court records, executor of the will, etc.

Grants:

Grants to any undergraduate student for educational purposes which are made or insured under any program or any grant which is made for educational purposes and the sponsor of such grant prevents the use of such funds for maintenance purposes. All resources remaining from student grants if:

- The sponsors of the grant prohibit its use for maintenance purposes.
- The work/study program is administered by the college or university in which the undergraduate student is enrolled.

INSURANCE COVERAGE GUIDELINES

Program services are available for those applicants who do not have health insurance coverage. For those with inadequate insurance coverage, The Social Services Department will not supplement or provide assistance for persons reach the maximum coverage of their insurance.

ELIGIBILITY FOR ASSISTANCE THROUGH ANY OTHER AVAILABLE RESOURCE

- Interviewing staff
- Must review the resource guide to determine possible eligibility for alternative services.
- The applicant must apply for any and all other available resources and will not be eligible for County assistance if an alternative assistance program is available.

ELIGIBILITY DETERMINATION

REQUEST FOR VERIFICATIONS

Last four months of gross income will be requested for Outpatient Services, Specialty Physician Services, and Medication Assistance

Verification of Assets:

Assets are those possessions that an individual owns. Assets include liquid resources such as checking and savings accounts, savings certificates, bonds, stocks, and non-liquid resources such as: non-homestead property, land, and business equipment, minus indebtedness. Indebtedness is the amount due to satisfy contract terms against an item to establish ownership. This includes interest over the full term of the contract, but does not include commissions, fees or penalties involved in selling the asset. In order to be eligible for assistance, the individual or family must not have assets in excess of the maximum standards established in Resolution 96-153 and amended Resolution 2002-136, which is \$2,500.00.

Examples:

- bank statements
- titles
- property tax statements
- vehicle registration and/or titles.
- insurance policies
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UNUSUAL CIRCUMSTANCES:

The Manager of Social Services is to be consulted regarding any unusual cases. The manager will decide what specific information is needed, or circumstances in which standard program requirements may be waived or adjusted.

The Manager will also be consulted in unusual situations to determine eligibility.

DETERMINING ELIGIBILITY

When the applicant forwards information to the Social Services Department, the staff will verify that all requested information has been received, including but limited to:

- Copies of written medical testing orders dated within the past 30 days from interview
- Social Security numbers household members to verify household size.
- Verification of application information given
- Verification of denial through other possible resources, if applicable.

Verification of Assets is compared to the eligible level for the household size.

Verification of Residence is reviewed to make sure the residence is located within St. Johns County.

Insurance policies are reviewed for benefit availability.

Income is averaged for the time period necessary for the type of assistance requested obtaining an average monthly income. Updated income must be put into the computer as received.

For Outpatient Services, Specialty Physician Services, and Medication Assistance

- Staff will average income for four months.
- For Physician's office visit eligibility staff must advise the physician that the applicant may not be eligible for other services at this time. If the physician agrees to accept the patient, staff will document that the physician was advised and understands that the applicant may be eligible only for the office visit or outpatient services at this time and is not totally approved for all types of services.

Any allowable deductions are subtracted from the verified amount to arrive at the adjusted average monthly income for the household.

Income received in lump sums (cash settlements, loans, etc.) are to be divided by the appropriate Family Poverty Level for the number of months to reflect the Family Poverty Level amount. * Excluded are Income Taxes Refunds

The adjusted average monthly income for the applicant is compared to the Family Poverty Level currently in effect for the household size.

Assistance shall be withheld or terminated if it is found that the applicant knowingly withheld or falsified data relevant to the determination of eligibility. Such applications will be referred to the Department Manager. The case may be referred to the County Attorney's office for prosecution.

Staff will review the data and will enter the appropriate case code decision into the computer. (Approval, Conditional Approval, Denial, etc.).

The applicant will be notified of the case decision; if the applicant doesn't agree with the decision, reconsideration can be requested. The final decision will be determined by the Director of Health and Human Services.

If additional information becomes available to the applicant, decisions may also be reconsidered.

APPLICATION PROCESS

The purpose of the Department is to assist eligible County residents in obtaining needed medical services for those individuals or families who are without sufficient funds or resources to secure them. Additionally, the Department will assist applicants by making appropriate referrals to other available community resources that must be utilized.

1. Application for all types of assistance is made at the Social Services Department office located in the County Health and Human Services Center or the Hastings office.
2. Application form is completed and returned to the staff for review.
3. Applicant must provide identification bearing a St. Johns County address at the initial interview prior to signing the notarized "Applicant's Statement, Authorization for Release of Information, Debt Reimbursement Agreement".
4. If application is received from a hospital or other source through the mail, a letter will be sent to the applicant requesting additional information and that an in-person interview is necessary.
5. Applicant is interviewed by Department staff to review completeness of forms. Except in rare cases a face to face interview is required. Staff may need to ask leading questions during this time to ascertain additional information.

SAMPLE QUESTIONS TO ASK:

- 1) If there is no income stated - How do you meet your monthly expenses?
 - 2) Ask specifically about income sources, i.e. child support, odd jobs.
 - 3) What is the medical problem? How long? Previous treatment?
 - 4) If there was an accident - Is there any insurance coverage available? Homeowners? Auto? When and where did accident happen?
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6. Staff will provide the applicant with a Referral Form which includes a written description of all information needed to complete the application process and any other forms to be completed for verification of the applicant's statements.
 7. Staff will advise the applicant of the time limits required to return the requested information and verifications (30 days is allowed--after this period, the case will be closed/denied due to lack of information). It is the responsibility of the applicant to provide all information necessary to determine eligibility for assistance. If the client contacts the office after 30 days, consideration may be given on a case by case basis.
 8. If staff determines at the initial interview that an applicant will obviously not qualify for assistance through the program, the applicant will be informed and will be referred to any other available resource for possible assistance.
 9. When all necessary information has been received by the Social Services Department, staff will set up a file if one has not already been created and will enter the information from the application onto the computer system.
 10. If the application was received from a hospital, a letter will be sent to the patient advising him/her to contact the office within 10 days of the date of the letter. The letter will allow include what documentation is needed to process the application and determine eligibility. Upon review of application and supporting documents, staff will complete a voucher that lists the determination and provide a copy of the voucher to the hospital.
 11. Staff should identify potential Veterans Benefits and refer to the appropriate facility when possible. Proof of ineligibility for VA benefits must be provided before any assistance can be provided by Social Services' Medical Assistance Program.