

General Information Memorandum

ISD-GI 16-58

TO: ISD Employees

FROM: Sean Pearson, Deputy Secretary, Income Support Division 

RE: Case Documentation in ASPEN

DATE: November 28, 2016

This GI rescinds GI 14-40 August 15, 2014, regarding Case Narratives/Documentation in ASPEN and the Amended version as well, and serves as a guide for mandatory documentation. Cases in ASPEN can be worked statewide and the more detail provided through documentation, the more accurately all staff are able to determine previous actions taken. Case documentation must be entered for all contacts with applicant/recipients, and/or other entities (FDIPR, Institutional Care Facilities) and anytime a case action is taken, i.e., inquiry, change, renewal, application, disposing of a duplicate application, etc. Use of abbreviated words should be limited to ISD acronyms.

Things to Review in ASPEN

- Does the language indicator code match the language of the application?
- Do the race and ethnicity indicator codes match the application?
 - Selecting the options of “Other” and “Unknown” are **NOT** acceptable responses for Race or Ethnicity.
- Review for “Conversion” sources of verification have been reviewed/updated in ASPEN.
- Review correspondence for accuracy.
- Review that the case comments justify the action(s) taken on the case.

If you have any questions regarding this GI, please contact Carolyn Craven, Quality Assessment Bureau at Carolyn.Craven@state.nm.us

Attachment:
Documentation Requirements

Interview Documentation

- **Special Accommodations:** All new applications must begin with a statement regarding any barriers which includes disabilities, hearing impaired, translator necessity, transportation, age, and any other barriers as warranted as well if there are none. Renewal cases should document any newly identified barriers and address any previously identified barriers
- **Voter Registration:** Indicate if the application is marked Yes, No, or blank, and indicate the action taken, i.e., verbal offer or declination and forms mailed
- **Office Indication:** Enter the name of the office in which the worker completing the narrative is housed and the time in which the comment is completed
- **Date of application**
- **Barriers -** All new applications and interviews must begin with a statement regarding any barriers which includes disabilities, hearing impaired, translator necessity, transportation, age, and any other barriers as warranted as well if there are none
- **Interview Mode –** notate Phone Interview (PI), Face to Face (FTF), or postponed
- **Household Composition -** indicate relationship, student status, and tax filing information as needed
- **Enumeration -** document that social security numbers (SSNs) have been verified for eligible recipients and verify that temporary numbers are not in use. The worker must document that a determination of good cause exists and/or disqualify for not providing an SSN
- **Address -** notate mailing and physical, if they are different. Also, notate if the individual states they are homeless
- **Programs applied for/being processed/renewed (COEs)**
- **All Resources-Including value and type**
- **Income- Any/all income must be documented**
- **Earned/Unearned income**
 - Type of previous income
 - Date of termination
 - Employer information
 - Frequency and amount of income
 - Indication of Future earnings
 - Dates of paystubs used
 - Indicative income & calculation used
- **Deductions/Expenses:** shelter, medical, daycare and mileage
- **Specify scans reviewed and discrepancies addressed**
- **Requested verification and how it was obtained**
- **Expedite/Non-expedite (Why? Was agency conference offered?)**
- **Indicate status:** pending, approved, or denied and reason (include HUMAD pending information)
- **Status of EBT card**
- **Rights and Responsibilities (FSP 013/FAP 013)**

Customer Service	<ul style="list-style-type: none"> • Special Accommodations: All new applications must begin with a statement regarding any barriers which includes disabilities, hearing impaired, translator necessity, transportation, age, and any other barriers as warranted as well if there are none. Renewal cases should document any newly identified barriers and address any previously identified barriers • Voter Registration: Indicate if the application is marked Yes, No, or blank, and indicate the action taken, i.e., verbal offer or declination and forms mailed • Office Indication: Enter the name of the office in which the worker completing the narrative is housed and the time in which the comment is completed • Reason for visit or call (specific questions) • Outcome of visit or call (specific responses) • Verifications received (detail)
Processing	<ul style="list-style-type: none"> • Special Accommodations: All new applications must begin with a statement regarding any barriers which includes disabilities, hearing impaired, translator necessity, transportation, age, and any other barriers as warranted as well if there are none. Renewal cases should document any newly identified barriers and address any previously identified barriers • Voter Registration: Indicate if the application is marked Yes, No, or blank, and indicate the action taken, i.e., verbal offer or declination and forms mailed • Office Indication: Enter the name of the office in which the worker completing the narrative is housed and the time in which the comment is completed • Programs applied for/being processed/renewed (COEs) • Indicate status: pending, approved, or denied and reason (include HUMAD pending information) • Specify scans reviewed/discrepancies addressed • Allotment amount, if approved • Denial reason, if denied (ex. SNAP denied, applicant exceeds income limit)

Renewals	<ul style="list-style-type: none"> • Special Accommodations: All new applications must begin with a statement regarding any barriers which includes disabilities, hearing impaired, translator necessity, transportation, age, and any other barriers as warranted as well if there are none. Renewal cases should document any newly identified barriers and address any previously identified barriers • Voter Registration: Indicate if the application is marked Yes, No, or blank, and indicate the action taken, i.e., verbal offer or declination and forms mailed • Office Indication: Enter the name of the office in which the worker completing the narrative is housed and the time in which the comment is completed • Month of Interim Report or Recertification • Interview Mode – notate Phone Interview (PI), Face to Face (FTF), or postponed • Document if administrative renewal was completed for Medicaid • Programs applied for/being processed/renewed (COEs) • Significant changes (Household Comp, Address, Income, Deductions/Expenses, loss of exemption for general work requirement) • Other eligibility criteria/Non-financial • Specify scans reviewed/discrepancies addressed • Indicate status: pending, approved, or denied and reason (include HUMAD pending information) • Rights and Responsibilities (FSP 013/FAP 013)
LiHeap	<ul style="list-style-type: none"> • Application date • Primary heating source • Vendor information • Processed regular/crisis • Approved/Denied-If vendor was contacted
Additional Information, if Applicable	<ul style="list-style-type: none"> • When aware of an applicant who is currently incarcerated it is important to document institutionalization dates. For example, if less/more than 30 days and any action taken on the case • When referrals to local Domestic Violence agencies are provided make sure to document the following: “A referral was given to the applicant/recipient to the local community agency.” • Program Requirement & Status (TANF and E&T/ABAWD) • Reporting requirements, pertinent work requirements, and consequences of failure to comply • General Work Requirements (Work Registrant) and if exempt, why? • Time Limit Rule (ABAWD) and if expedited/waived, why? • School enrollment status • Indicate sanctions and disqualifications that were placed back on case at application • Countable months • GA packet signed and submitted to IRU