

DEPARTMENT OF HUMAN SERVICES FAMILY INVESTMENT ADMINISTRATION	TEMPORARY DISABILITY ASSISTANCE PROGRAM MANUAL	
ELIGIBILITY DETERMINATION	Section 202	COMAR 07.03.05.04

202.1 Need

A. To be eligible for TDAP benefits, an individual must demonstrate financial need.

Need exists when:

1. Resources do not exceed \$1,500; and
2. Income does not exceed the allowable amount.

B. Available resources and income are calculated on a current monthly basis.

C. The current monthly allowable benefit for fiscal year 2020 amount is \$ 215.

- 74 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2021;
- 78 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2022;
- 82 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2023;
- 86 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2024;
- 90 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2025;
- 94 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2026;
- 100 percent of the monthly allowable benefit for a one-person household receiving Temporary Cash Assistance in fiscal year 2027 and in each year thereafter.

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202.2 Requirements

A. Eligibility Decision

1. The local department shall make the decision on the application within the regulations for processing and timeliness according to COMAR 07.03.01. (See Section 100).
2. Conduct an interview with the individual at the time of application as detailed in Section 201.
3. Verify all factors of:
 - a) Impairment,
 - b) Resources, and
 - c) Income

B. Period of Eligibility

1. The local department determines the period of eligibility from the estimated duration of the disability on the completed medical report (DHS/FIA 500).
2. The eligibility period may be less than the estimated recovery time indicated on the medical report (DHS/FIA 500); and
3. The eligibility period may not exceed the estimated recovery time shown on the medical report.

C. Eligibility Determinations

1. When the individual has submitted all verifications by the 30th day:
 - a) Deny the application when the DHS/FIA 500 indicates a disability of less than 3 months.
 - b) Certify TDAP benefits for no more than **9** months in a 36-month period (TDAP Type 1) when the DHS/FIA 500 indicates an inability to work for at least 3 months but less than 12 months, and will not result in death.
 - c) Certify TDAP benefits for 12 months (TDAP Type 2) when the DHS/FIA 500 indicates an inability to work for 12 or more months, or if less than 12 months when the cause of the disability will result in death and the customer's **SSI claim status has been verified**.
 - Enter disability codes and IAR date of completion on the DEM2 screen, and
 - Enter Application Status codes for SSA (SI) and DEAP (DE) on the UINC screen.

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2. When verifications are not received by the 30th day:
 - a) On the MISC screen, enter “**CD**”, for customer delay in the Delay Reason field;
 - b) Send a DHS/FIA 1052 requesting outstanding verifications and inform the customer their application will be denied if verification is not received; and
 - c) Allow the customer up to 60 days from date of application to return verifications.
3. When verifications are received by the 60th day,
 - a) Certify TDAP benefits for no more than **9** months in a 36-month period (TDAP Type 1) when the DHS/FIA 500 indicates a disability from working for at least 3 months but less than 12 months, and will not result in death.
 - b) Certify TDAP benefits for 12 months (TDAP Type 2) when the DHS/FIA 500 indicates a disability from working for 12 or more months, or if less than 12 months will result in death and the customer’s **SSI claim status has been verified.**

Reminder: Assist TDAP customers to apply for MA on the Maryland Health Connection.

D. Social Security Requirements for TDAP Type 2 customers

1. TDAP customers who have a disability which lasts 12 months or more or is expected to result in death must file for Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits with the Social Security Administration.
2. When the customer is unable to file a claim with SSA by the 60th day but has an appointment to file, and the customer has all other verifications including the DHS/FIA 500 indicating a disability from working for 12 or more months or if less than 12 months will result in death:
 - a) Enter the disability dates and IAR date on the DEM2 screen and have them complete the DHS/FIA 340 IAR form (if needed);
 - b) Certify the customer for 12 months;
 - c) Set a 745 alert to follow up with the customer after their appointment with SSA to ensure that the customer has filed for SSI, and
 - d) If the customer has not filed a SSI claim with Social Security, send a notice of adverse action and close the case.

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202.3 Redetermination of Eligibility

At redetermination, if the customer meets all technical and financial eligibility requirements and:

- Has a pending SSI/SSDI application that has not been withdrawn or denied;
 - No new DHS/FIA 500 medical report form or medical re-examination is required when the customer has applied for and continues to pursue Social Security disability benefits
- The TDAP case remains open until a final SSI/SSDI decision is made.
- Do not complete another DHS/FIA 340 IAR form.

Reminder: A redetermination cannot be initiated on a TDAP Type 1 case.