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ACTIVE MILITARY DUTY - The term “active military duty” applies to individuals in current full-time service in the Army, Navy, Air Force, Marine Corps, or Coast Guard. Members of the National Guard are not included in this definition.

ADULT DAY HEALTH CARE – Non-residential medically supervised services for individuals with physical or mental impairment who need health maintenance and restorative services to enhance their ability to remain in the community.

AFFIDAVIT – A written statement of facts made voluntarily and under oath.

AID TO DEPENDENT CHILDREN (ADC) – Also known as Aid to Families with Dependent Children (AFDC). It is the pre-TANF federally funded entitlement program which provided cash assistance to eligible needy families that include a minor child deprived of parental support or care because of the death, incapacity, continued absence of either parent, or the unemployment/underemployment of the parent who is the principal wage earner; and the caretaker relative of such child. This program was replaced by the Family Assistance program. Medicaid continues to have ties to AFDC. Medicaid eligibility under the Low Income Families program can be no more restrictive than eligibility under AFDC as it existed on 7/16/96. Medicaid also includes a group of individuals who meet the categorical requirements of AFDC but exceed the financial standards of AFDC.

AID TO DEPENDENT CHILDREN (ADC) - RELATED - A medically needy category for children and their caretaker relatives.

ALIEN - An alien is a person who was not born in this country and who is not a naturalized citizen.

ANNUITIES - An annuity is an investment vehicle whereby an individual establishes a right to receive fixed for periodic payments, either for life or a term of years.

APPLICATION - An action by which a person indicates, in writing on the State-prescribed form, his/her desire either to receive assistance and/or care or to have his/her eligibility considered by a local social services official.

ASSESSMENT - A review by the local social services district of the total countable resources of a couple, and/or the income of a couple and family members as of the date of the request for assessment or at the time of application for Medicaid. This includes the review and documentation of the total value of the couple's countable resources, a determination of the community spouse resource allowance, community spouse monthly income allowance, and/or family member allowance(s), and the methods of computing these allowances.

ASSET - Includes all income and resources of an individual, and of the individual's spouse, including income or resources to which the individual or the individual's spouse is entitled but which are not received because of action by: the individual or the individual's spouse; a person with legal authority to act in place of or on behalf of the individual or the individual's spouse; a person acting at the direction or upon the

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request of the individual or the individual's spouse; or by a court or administrative body with legal authority to act in place of or on behalf of the individual or the individual's spouse or at the direction or upon the request of the individual or the individual's spouse.

ASSET PROTECTION – The total asset protection or dollar-for-dollar protection from Medicaid resource spenddown requirements available under the Medicaid Extended Coverage feature of Partnership plans. NOTE: When the term “asset” is used by the Partnership (e.g., in promotional materials, e-learning, etc.) it only includes a resource. It does not include income.

ASSISTED LIVING PROGRAM (ALP) - Program that serves individuals who are medically eligible for nursing home placement, yet who are not in need of the highly structured, medicalized environment of a nursing facility and whose needs could be met in a less restrictive and lower cost residential setting.

BATTERED - The term “battered” applies to an individual based on the fact that s/he was battered, abused or subjected to extreme cruelty, in the U.S., by a U.S. citizen or lawful permanent resident spouse or parent and who has an approved or pending petition/application (I-130, I-360) with USCIS that has been granted, or has been found prima facie eligible for relief under the Violence Against Women Act of 1994 (P.L. 103-322) and/or has credible proof of abuse/battery.

BLIND – “Blind” has the same definition given to such term in Section 1614 (a) (2) of the Social Security Act.

BLINDNESS - The total lack of vision or residual vision being no better than 20/200 or less in the better eye with a corrective lens or restriction of the visual fields or other factors which affect the usefulness of vision.

BREAST AND CERVICAL CANCER – The Breast and/or Cervical Cancer Treatment Program (BCCTP), now a part of the Medicaid Cancer Treatment Program (MCTP), provides full Medicaid coverage to individuals who meet the established criteria to qualify for the Centers for Disease Control and Prevention (CDC) screening under the National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

BUDGETING - The process which is used to determine the value of a client's income and as appropriate, resources and whether or not they are below the allowable exemption levels.

BURIAL TRUSTS - Irrevocable pre-need funeral agreements with a funeral director or other entity to meet the expenses associated with burial for Medicaid applicants/recipients and certain family members of the A/R. The agreement can include burial spaces as well as the services of the funeral director. Burial spaces are conventional gravesites, crypts, vaults, mausoleums, caskets, urns or other repositories which are customarily and traditionally used for the remains of the deceased persons, plus the cost of opening and closing a grave.

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CASH VALUE OF LIFE INSURANCE - Amount which the insurer will pay upon cancellation of the policy before death or maturity. This value usually increases with the age of the policy.

CERTIFIED HOME HEALTH AGENCY (CHHA) – Provides nursing services, home health aide services, medical supplies, equipment and appliances and at least one of the following services: physical therapy, speech/language pathology, occupational therapy, social work services and nutritional services.

CHILD - For Medicaid purposes, a person under the age of 21 unless otherwise specified.

CHILD ASSISTANCE PROGRAM (CAP) – The CAP program, originally a demonstration program, is now available in any social services district that requests to participate in the program and receives Office of Temporary and Disability Assistance (OTDA) approval. The CAP program provides a cash benefit and supportive services program designed to foster the federal and State welfare reform goals of work and self-sufficiency. Some of the key program features are an intensive case management component, and enhanced earnings disregard and potential Transitional Medicaid eligibility, and an eligibility threshold designed to reduce recidivism.

CHILD HEALTH PLUS - The federal Balanced Budget Act (BBA) of 1997 (Public Law 105-33) created the State Children's Health Insurance Program as Title XXI of the Social Security Act (known as Child Health Plus in New York State). Child Health Plus is not a Medicaid (Title XIX) Program.

CHILD SUPPORT – The legal obligation of a non-custodial parent to contribute to the economic maintenance of his/her child; the payments under that obligation.

CHILD SUPPORT ENFORCEMENT - Obtaining payment of a child support or medical support obligation through administrative or judicial means.

CHRONIC CARE BUDGETING - A budgeting procedure used for individuals who are in permanent absence status. Chronic care budgeting begins on the first day of the calendar month following the month in which the A/R is determined to be in permanent absence status.

CITIZEN - A person who was born in the United States or who has been naturalized.

COLORECTAL AND PROSTATE CANCER TREATMENT PROGRAM - A part of the Medicaid Cancer Treatment Program. The Medicaid Cancer Treatment Program for Colorectal and/or Prostate Cancer provides full Medicaid coverage for individuals who are screened and/or diagnosed by the Cancer Services Program Partnerships (CSPP) or a CSPP provider and meet established criteria.

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COMMUNITY-BASED LONG-TERM CARE SERVICES – Community-based long-term care services include: adult day health care (medical model); limited licensed home care; certified home health agency service, hospice in the community; hospice residence program; personal care services; personal emergency response services; private duty nursing; Consumer Directed Personal Assistance Program; Assisted Living Program, managed long-term care in the community; residential treatment facility; and non-waiver services in a home and community-based waiver program.

COMMUNITY SPOUSE - A person who is the spouse of an institutionalized person, and who is residing in the community and not expected to receive home and community-based services provided pursuant to a waiver under Section 1915(c) of the Social Security Act for at least 30 consecutive days.

COMMUNITY SPOUSE MONTHLY INCOME ALLOWANCE - The amount by which the minimum monthly maintenance needs allowance for the community spouse exceeds the otherwise available monthly income of the community spouse, unless a greater amount is established pursuant to a fair hearing or a court order for support of the community spouse.

COMPREHENSIVE MEDICAID CASE MANAGEMENT - A process which assists selected Medicaid eligible individuals to access necessary medical, social, psychosocial, educational, financial and other services in accordance with goals contained in a written case management plan mutually agreed upon by the case manager and the client. State initiatives are: AIDS Institute Case Management; Office of Mental Health Supportive Case Management and Intensive Case Management; Office for People with Developmental Disabilities Case Management; Early Intervention Case Management; and School Supportive Health Services Program Case Management. Local Initiatives: Teen Age Services Act (TASA) Case Management; CONNECT; Onondaga County Case Management; and Neighborhood Based Alliance Case Management.

CONSUMER DIRECTED PERSONAL ASSISTANCE (CDPAP) - A program that enables Medicaid recipients, who are eligible for home care services, and who accept responsibility, to have greater flexibility and freedom of choice in obtaining needed services.

CONTIGUOUS PROPERTY - Land adjoining the homestead, which is not an integral part of the homestead and can be separately, liquidated.

CONTINUOUS PERIOD OF INSTITUTIONALIZATION - At least 30 consecutive days of care in a medical institution and/or nursing facility, or at least 30 consecutive days of receipt of home and community-based waiver services or a combination of institutional and home and community-based waiver services for at least 30 consecutive days. A continuous period is presumed to cease upon discharge from the medical institution/facility or discontinuance of home and community-based waiver services unless the individual returns to care within 30 days or there is adequate medical documentation that s/he will return to care within 30 days.

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COUNTABLE RESOURCES - Available resources which are not disregarded.

CUSTODIAL PARENT - Person with primary physical custody as granted by valid agreement between the parties or by court order or decree and with whom the child lives; may be parent, other relative, or someone else.

CUSTODY ORDER - Legal determination that establishes with whom a child shall live.

DEFAULT JUDGMENT - Decision made by the court when the defendant fails to respond.

DEFAULT ORDER - A child support order issued when the non-custodial parent fails to appear in court after having received a summons.

DELINQUENT SUPPORT- Also referred to as ARREARS - Support not paid on time or in full.

DEPARTMENT OF HOMELAND SECURITY (DHS) - The [Homeland Security Act of 2002](#) transferred INS functions to the new Department of Homeland Security (DHS). Immigration enforcement functions were placed within the Directorate of Border and Transportation Security (BTS), either directly, or under Customs and Border Protection (CBP) (which includes the Border Patrol and INS Inspections) or Immigration and Customs Enforcement (ICE) (which includes the enforcement and investigation components of INS such as Investigations, Intelligence, Detention and Removals).

DISABLED – “Disabled” has the same meaning given to such term in Section 1614 (a) (3) of the Social Security Act, which states that an individual shall be considered to be disabled if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months.

DISABILITY - The inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or has lasted or can be expected to last for a continuous period of not less than 12 months.

DISABILITY REVIEW TEAM – Responsible to review the medical and vocational information to determine whether an individual meets the SSI definition of disabled and can be categorized as SSI-related. The State or local disability review team consists of a physician or psychological consultant, and another person who is qualified to interpret and evaluate medical reports to determine the individual's capacity to perform work activities.

DISREGARDS OF INCOME - Income that is not considered in determining eligibility for Medicaid.

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DOLLAR-FOR-DOLLAR ASSET PROTECTION (DDAP) – The amount of assets that is disregarded, up to the amount paid in benefits after using the Dollar-for-Dollar 50 or Dollar-for-Dollar 100 Asset plan, in determining a qualified Partnership policyholder’s eligibility for Medicaid Extended Coverage.

DRUG AND ALCOHOL SCREENING - All adults and heads of household applying for temporary assistance are screened for drug and alcohol abuse. A positive screening results in an assessment of the individual by a certified drug/alcohol counselor. If a treatment program is indicated as a result of the assessment, the individual is referred to the appropriate credentialed substance abuse treatment program. The Drug and Alcohol requirements do not apply to the Medicaid program.

EARNED INCOME DISREGARDS (EID) - Earned income disregards are the allowable deductions and exclusions subtracted from the gross earnings. The resulting amount, or net income, is applied against the household’s need. EIDs vary in amount and type, depending on the category of the applicant and the program applied for.

EARNED INCOME TAX CREDIT (EITC) – The EITC is a special refundable tax benefit offered by the federal government. The credit is for working families and individuals who earn low or moderate incomes. The credit has several important purposes: to reduce the tax burden on these workers, to supplement wages, and to make work more attractive than welfare.

EMERGENCY ASSISTANCE FOR ADULTS (EAA) – EAA is a Temporary Assistance program that provides financial assistance to meet emergency needs of adults who are eligible for SSI.

EMERGENCY ASSISTANCE TO FAMILIES (EAF) – EAF provides assistance for families with children to deal with crisis situations threatening the family and meet emergent needs resulting from a sudden occurrence or set of circumstances demanding immediate attention.

EMERGENCY MEDICAL CONDITION - The term “emergency medical condition” means a medical condition (including emergency labor and delivery) manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in:

- placing the person’s health in serious jeopardy;
- serious impairment to bodily functions; or
- serious dysfunction of any bodily organ or part.

Care and services related to an organ transplant procedure are not included in this definition.

EMERGENCY SAFETY NET ASSISTANCE (ESNA) – ESNA is a Temporary Assistance program that provides financial assistance to meet emergency needs of adults without minor children.

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EMERGENCY SHELTER GRANTS PROGRAM (ESGP) – The purpose of the ESGP is to help improve the quality and quantity of emergency shelters for the homeless, help meet the cost of operating such shelters, provide essential social services to the homeless and avoid an initial occurrence of homelessness through the provision of preventive services.

ENFORCEMENT – Obtaining payment of a child support or medical support obligation through administrative or judicial means.

ESTATE - (1) all of a decedent's real and personal property and other assets passing under the terms of a valid will or by intestacy; and (2) any other real and personal property and other assets in which the decedent had any legal title or interest at the time of death, including such assets conveyed to a survivor, heir, or assign of the decedent through joint tenancy, tenancy in common, survivorship, life estate, living trust or other arrangement, to the extent of the decedent's interest in the property immediately prior to death.

EXCESS (SURPLUS) RESOURCES - Available resources that are in excess of the resource exemption level.

EXPECTED TO REMAIN - Available medical evidence/documentation indicates a reasonable expectation that a person will remain in an institution/facility, receive home and community-based waiver services or a combination of institutional and community-based waiver services for at least 30 consecutive days, even though the person may not actually receive such services for at least 30 days.

FAIR HEARING – Fair Hearing means a formal procedure provided by the Office of Administrative Hearings, upon a request made by an applicant or recipient, to determine whether an action taken or failure to act by a local district was correct.

FAIR MARKET VALUE – “Fair market value” (FMV) means the estimate of the value of an asset if sold at the prevailing price at the time it was actually transferred. Fair market value of real property or other assets may be established by means of an appraisal by a real estate broker or other qualified dealer or appraiser.

FAMILY HEALTH PLUS (FHPlus or FHP) – FHPlus provides a comprehensive health insurance to low-income adults who have income or assets above the current Medicaid levels, and who do not have other health insurance coverage.

FAMILY HEALTH PLUS PREMIUM ASSISTANCE PROGRAM (FHP-PAP) - This program is available to A/Rs who have access to cost-effective employer sponsored health insurance and who are otherwise eligible for Family Health Plus. Such individuals have health services available to them including: payment of the recipient's share of the premium, co-insurance, any deductible amount and the cost-sharing obligations for the A/R's employer-sponsored health insurance that exceed the amount of the person's FHPlus co-payment obligations.

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FAMILY ASSISTANCE (FA) – FA provides cash assistance to eligible needy families that include a minor child living with a parent(s) or caretaker relative. It is operated under the federal TANF rules. Under FA, eligible adults are limited to receiving benefits for a total of 60 months in their lifetime, including months of TANF-funded assistance granted in other states. Once this limit is reached, the adult and all members of his or her household are ineligible to receive any more FA benefits. FA recipients receive Medicaid under the categorical group Low Income Families (LIF). FA and LIF financial eligibility is generally equivalent. There is no time limit for Medicaid.

FAMILY MEMBER ALLOWANCE (FMA) FOR EACH FAMILY MEMBER - An amount equal to one-third of the amount by which the applicable percent of one-twelfth of the annual federal poverty line for a family of two exceeds the amount of the family member's otherwise available income. (See **REFERENCE SPOUSAL IMPOVERISHMENT FAMILY MEMBER ALLOWANCE** for the current maximum family allowance per family member.) A family member is a minor child, dependent child, dependent parent or dependent sibling of the institutionalized spouse or community spouse. The family member must be residing with the community spouse and have over 50% of his/her maintenance needs met by the community spouse and/or the institutionalized spouse.

FAMILY PLANNING BENEFIT PROGRAM (FPBP) - The FPBP provides Medicaid reimbursement for family planning services on a fee-for-service basis. Federal financial participation for such services is 90 percent in accordance with Section 1903(a)(5) of the Social Security Act. There is no local cost for services provided under the FPBP.

FAMILY TYPE HOME FOR ADULTS - An adult care facility established and operated for the purpose of providing long-term residential care and personal care, and/or supervision to four or fewer adult persons unrelated to the operator.

FEDERAL PARENT LOCATOR SERVICE (FPLS) – A service operated by the federal Office of Child Support Enforcement to help the States locate parents in order to obtain child support payments; also used in cases of parental kidnapping related to custody and visitation determinations; FPLS obtains address and employer information from federal agencies.

FEDERALLY-ASSISTED FOSTER CARE – A program, funded in part by the federal government, under which a child is raised in a household by someone other than his or her own parent.

FINDING – A formal determination by a court, or administrative process that has legal standing.

FOOD ASSISTANCE PROGRAM (FAP) – A state program that provides food assistance to some individuals who are ineligible for federal food stamps due to their alien status.

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FOOD STAMPS (FS) – A federally mandated program with the purpose of reducing hunger and malnutrition by supplementing the food purchasing power of eligible low income individuals.

FULL FAITH AND CREDIT – Doctrine under which a State must honor an order or judgment entered in another State.

GARNISHMENT - A notice, issued through legal action, ordering attachment of personal property or income to guarantee payment of a debt.

GOOD CAUSE – An acceptable reason given by a client for refusing to cooperate in establishing paternity or establishing and enforcing child support.

GRANT DIVERSION – The use of funds that would otherwise be used to provide a welfare grant to a household to pay an employer for hiring the public assistance recipient. Grant Diversion is one method of funding a subsidized employment position (See definition of Subsidized Employment).

GUARDIAN – An individual vested with the legal authority, and charged with the duty, of taking care of the person and/or managing the property and financial affairs and rights of another person who is considered incapable of administering his or her own affairs.

HEARING – A court proceeding during which the facts of a case are heard and a decision regarding the case can be made.

HEARING EXAMINER – An attorney employed by the local Family Court who can hear and make decisions in child support cases.

HOME AND COMMUNITY-BASED WAIVER SERVICES - Services provided pursuant to a waiver under Section 1915(c) of the Social Security Act. New York State has obtained several such waivers:

- Long Term Home Health Care Program;
- Home and Community Based Services (HCBS) Waiver;
- Nursing Home Transition and Diversion (NHTD) Waiver;
- Office of Mental Health (OMH) Home and Community Based Services Waiver (HCBS) For Children and Adolescents With Serious Emotional Disturbance (SED); and
- Traumatic Brain Injury (TBI) Waiver.

Under these waivers, specialized services may be provided, in addition to the regular State Plan services. The general intent is to avoid institutionalization.

HOME ENERGY ASSISTANCE PROGRAM (HEAP) – A DTA federally funded program that provides emergency and non-emergency energy assistance.

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HOME RELIEF (HR) – Home Relief is the pre-welfare reform state and locally funded cash assistance program. It provided benefits to eligible needy single and childless couples. This program was replaced by the Safety Net Assistance program.

HOMELESS - Any individual or family that is undomiciled, has no permanent address, has no regular nighttime residence, resides in a place not designed for or ordinarily used as a regular sleeping accommodation for human beings, resides in a homeless shelter, resides in a residential program for victims of domestic violence, or resides in a hotel/motel on a temporary basis.

HOMELESS HOUSING AND ASSISTANCE PROGRAM (HHAP) - The HHAP provides capital grants and loans to not-for-profit corporations, charitable and religious organizations, municipalities and public corporations to acquire, construct or rehabilitate housing for persons who are not domiciled and are unable to secure adequate housing without special assistance.

HOMELESSNESS INTERVENTION PROGRAM (HIP) - The intent of the Homeless Intervention Program is to allow more flexibility in the provision of services previously provided through the Homeless Rehousing Assistance Program (HRAP) and the Homelessness Prevention Program (HPP). HIP issues grants to eligible local social services districts and/or not-for-profit corporations that provide services to single individuals and/or families who are homeless or at risk of being homeless.

HOSPICE – A coordinated and supportive program for terminally ill persons and their families. care focuses on easing symptoms rather than treating disease. The patient and his or her family receive physical, psychological, social and spiritual support and care. Hospice may be provided in the community, in a nursing home, in a hospital or in a Hospice Residence Program.

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA) - The purpose of the HOPWA program is to provide strategies for meeting the housing and support services needs of low-income persons with AIDS and HIV-related diseases.

IMMEDIATE WAGE WITHHOLDING - Automatic deductions from income which start as soon as the agreement or order for support is established (see wage withholding).

IMMIGRANT - The term “immigrant” means any person who is not a citizen or national of the United States.

INCOME – “Income” has the same meaning given to such term in Section 1612 of the Social Security Act, and includes both earned and unearned income, with certain exceptions, as defined in such section.

INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER (ITIN) – The Individual Taxpayer Identification Number (ITIN) is a tax processing number received from the Internal Revenue Service and is not considered an equivalent to an SSN.

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INSTITUTIONALIZED SPOUSE - is a person who is:

- (a) in a medical institution or nursing facility and is expected to remain in such a medical institution or nursing facility for at least 30 consecutive days; or
- (b) in receipt of home and community-based waiver services, and expected to receive such services for at least 30 consecutive days; or
- (c) receiving institutional or non-institutional services under a Program of All-Inclusive Care for the Elderly (PACE); or
- (d) in a medical institution/nursing facility or in receipt of home and community-based waiver services, and expected to receive a combination of institutional services and home and community-based waiver services for at least 30 consecutive days;

AND

- (e) is married to a person who is not described in items (a) through (d).

INTERMEDIATE CARE FACILITY FOR THE MENTALLY RETARDED -

“Intermediate care facility for the mentally retarded” means a facility certified under Article Sixteen of the Mental Hygiene Law and which has a valid agreement with the Department for providing intermediate care facility services and receiving payment under Title XIX of the Social Security Act.

JURISDICTION - Legal authority which a court has over particular persons, certain types of cases, and in a defined geographical area.

KINGAP - Kinship Guardian Assistance Program – The Kinship Guardian Assistance Program (KinGAP) is designed to provide a monthly payment and other benefits to qualified relative guardians of foster children who have been discharge from foster care. Medicaid coverage is provided to children in receipt of KinGAP payments as long as the child is a citizen or is in satisfactory immigration status. Children receiving KinGAP are eligible for Medicaid regardless of income or resources. The LDSS making the KinGAP payments is the district of fiscal responsibility.

LEGAL FATHER - A man who is recognized by law as the male parent.

LEGALLY RESPONSIBLE RELATIVE (LRR) - A relative who, by law, is responsible for the support and care of another person. In New York State, spouses are responsible for each other and parents are responsible for their children under 21.

LIEN - A claim upon property to prevent sale or transfer until a debt is satisfied.

LIFE ESTATE - A life estate is limited interest in real property

LIFE INSURANCE - A contract between the owner of a policy and an insurance company whereby the company agrees, in return for periodic premium payments, to pay a specified sum of money to the beneficiary upon the death of the insured.

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LIMITED LICENSED HOME CARE AGENCY - Provides hourly nursing care and homemaker, housekeeper, personal-care attendant and other health and social services.

LONG-TERM CARE INSURANCE – Insurance available through private companies as a means for individuals to pay for needed care and protect themselves against the high cost of long-term care.

LOOK-BACK PERIOD – For transfers made on or after February 8, 2006, the “look-back period” means the sixty-month period immediately preceding the date that an institutionalized individual is both institutionalized and has applied for Medicaid.

LOW INCOME FAMILIES (LIF) - A category consisting of families with children, children under 21 who are not living with a caretaker relative, applying caretaker relatives (includes adult cases only) and pregnant women. Most Family Assistance recipients will meet the LIF requirements.

LUMP SUM PAYMENTS - Deferred or delayed payments such as benefit awards, bonuses, year end profit sharing, retroactive pay increases and severance pay.

MANAGED LONG TERM CARE PROGRAM (MLTC) - provides health and long-term care services to adults with chronic illness or disabilities to better address their needs and to prevent or delay nursing home placement.

MANAGED LONG TERM CARE IN AN NURSING HOME – Case managed health and long term care to adults with chronic illness or disabilities to better address their needs while in a nursing home.

MEDICAID - A program to assist low-income persons in attaining and paying for medical care. Local Departments of Social Services administer the program, under the oversight of the Department of Health, Office of Health Insurance Programs (OHIP).

MEDICAID BUY-IN FOR WORKING PEOPLE WITH DISABILITIES - Sections 62-69 of Chapter 1 of the Laws of 2002 established a new Medicaid Buy-In Program to extend Medicaid coverage to working disabled applicants/recipients (A/Rs) who have net incomes at or below 250% of the Federal Poverty Level (FPL) and non-exempt resources. (See **REFERENCE INCOME/RESOURCE LEVEL**)

MEDICAID CANCER TREATMENT PROGRAM (MCTP) - The Medicaid Cancer Treatment Program for Breast and/or Cervical Cancer provides full Medicaid coverage to individuals who meet the established criteria to qualify for the Centers for Disease Control and Prevention (CDC) screening under the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The Medicaid Cancer Treatment Program for Colorectal and/or Prostate Cancer provides full Medicaid coverage for individuals who are screened and/or diagnosed by the Cancer Services Program Partnerships (CSPP) or a CSPP provider and meet established criteria.

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MEDICAID EXTENDED COVERAGE (MEC) – Medicaid that is available to a qualified Partnership participant who has met the minimum duration requirement under his/her policy. For Total Asset Protection plans, income is considered in determining Medicaid eligibility but resources are exempt. For Dollar-for Dollar Asset Protection plans, income and unprotected resources are considered in determining Medicaid eligibility.

In the case of Total Asset Protection plans, no liens or recoveries will be pursued for correctly paid Medicaid payments made on behalf of qualified Partnership policyholders. In the case of a Dollar-for-Dollar Asset Protection plan participant, the amount of any lien or recovery against the participant's estate will be reduced by the amount of asset protection provided to the participant as a qualified Partnership policyholder.

MEDICAL INSTITUTIONS - Hospitals, nursing facilities, intermediate care facilities (ICFs), residential treatment facilities (RTFs), small residential units (SRUs), and room and board situations eligible for reimbursement under Title XIX of the Social Security Act.

MEDICAID INCOME STANDARDS - The Medicaid Income Standard is used to determine eligibility for Singles Childless Couples (SCC) and Low Income Family (LIF) categories.

MEDICAL SUPPORT - Any medical, dental, optical, prescription drug, health care services, or other health care benefits made available to a child through a legally responsible relative. Medical support can also be cash payments pursuant to a court order.

MEDICALLY NEEDY - An individual who is not eligible for or in receipt of SSI or LIF, but who has insufficient income and, as appropriate resources to meet the cost of his/her necessary medical and remedial care and services as determined by State standards. Such A/Rs must meet the categorical requirements for SSI or ADC.

MEDICATION GRANT PROGRAM - Section 15 of Kendra's Law authorizes the Commissioner of the Office of Mental Health (OMH) to provide grants to counties and New York City (NYC) for the Medication Grant Program (MGP). The MGP provides for medication and other services necessary to prescribe and administer medication to treat individuals with mental illness while a decision is being made on their application for Medicaid.

MEDICARE SAVINGS PROGRAM (MSP) - Certain A/Rs who receive Medicare may be eligible for Medicaid to pay the Medicare premium, coinsurance and deductible amounts. There are four groups that are eligible for payment or part-payment of Medicare premiums, coinsurance and deductibles: Qualified Medicare Beneficiaries (QMBs), Specified Low-Income Medicare Beneficiaries (SLIMBs), Qualified Disabled and Working Individuals (QDWIs), and Qualifying Individuals – (QI).

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MINIMUM MONTHLY MAINTENANCE NEEDS ALLOWANCE (MMMNA) - An amount equal to \$1,500 (effective October 1, 1989) as increased annually by the same percentage as the percentage increase in the federal Consumer Price Index. (See **REFERENCE** MINIMUM MONTHLY MAINTENANCE NEEDS ALLOWANCE for the current MMMNA dollar amount.)

MODIFICATION PETITION - A formal written application to a court requesting a change in an existing child support order.

MONEY JUDGMENT - A court order requiring a non-custodial parent to pay a sum of child support to the custodial parent or to the LDSS.

MORTGAGE - A pledge of a particular property for the payment of a debt or the performance of some other obligation within a prescribed time period.

NYS PARTNERSHIP PLAN - New York State has been granted a time-limited waiver pursuant to Section 1115 of the Social Security Act that provides federal matching funds for most eligibles, regardless of the category under which they receive Medicaid.

NATIVE AMERICAN BORN IN CANADA - A Native American born in Canada may freely enter and reside in the United States and is considered to be lawfully admitted for permanent residence if he or she is of at least one-half Native American Indian blood. As such, he or she is a qualified immigrant. This does not include a non-citizen spouse or child of such Native American or a non-citizen whose membership in a Native American Indian tribe or family is created by adoption, unless such person is at least 50 percent Native American Indian blood.

NEW YORK STATE PARTNERSHIP FOR LONG-TERM CARE (NYSPLTC) – Long-term care insurance policies which are approved under the Partnership program by the New York State Insurance Department. The NYSPLTC program combines private long-term care insurance and Medicaid Extended Coverage to assist New Yorkers in covering the cost of long-term care. The Partnership requires that participating insurers provide benefit coverage, operational activities, and oversight that may not be applicable to long-term care insurance products sold outside the Partnership. Qualified Partnership policyholders have their Medicaid Extended Coverage eligibility determined based on income while all or a portion of their resources are exempt., depending on the type of plan purchased. Consumers who own long-term care insurance policies that are not Partnership-approved policies do not have their resources exempted in a Medicaid eligibility determination. Partnership policies can be identified by the Partnership logo which appears on all materials related to the Partnership program.

NON-ASSIGNABLE – “Non-assignable” is a term that applies to a plan, annuity, or other arrangement (whether qualified or not qualified under Part I of Subchapter D of Chapter 1 of Subtitle A of the Internal Revenue Code) that qualifies for the marital deduction but for Section 2056 (d) (1) (A), and does not allow the policyholder to assign or transfer the policy to a third party.

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NON CITIZEN U.S. NATIONAL - A “national” is a person, who is not a U.S. citizen, but who owes permanent allegiance to the United States and may enter and work in the U.S. without restriction. A “national” who is otherwise qualified may be naturalized, if he becomes a resident of any state and completes the applicable requirements. Examples of nationals are: (1) persons born in American Samoa and Swain’s Island after December 24, 1952; and (2) residents of the Northern Mariana Islands who did not elect to become U.S. citizens.

NON-CUSTODIAL PARENT - The parent who does not live with or have physical custody of the child but is legally responsible for providing financial and medical support.

NON-IMMIGRANT - A “non-immigrant” is an individual who has been granted a status that allows him or her to remain in the U.S. temporarily for a specific purpose. Most non-immigrant categories require as a condition of the status that the individual have the intent of returning to a residence abroad.

NON-PROBATE – Non-probate assets include jointly owned financial institution accounts, jointly held real property, life estate interests, interest in certain trusts and annuities regardless of whether there is a named beneficiary or right of survivorship.

NURSING FACILITY - A facility that holds a current operating certificate issued by the State Health Department and meets the federal requirements for extended care facilities under Title XVIII of the Social Security Act and those for a nursing home under Title XIX of the Social Security Act.

NURSING FACILITY SERVICES – “Nursing facility services” means nursing care and health related services provided in a nursing facility; a level of care provided in a hospital which is equivalent to the care which is provided in a nursing facility; and care, services or supplies provided pursuant to a waiver under subsection (c) or (d) of Section 1915 of the Social Security Act.

NURSING HOME CARE – Care in a residential health care facility providing 24-hour skilled nursing supervision for patients requiring rehabilitative or custodial care. Nursing home level of care may be provided to a patient in a hospital when a nursing home bed is unavailable (must be eligible for all Medicaid covered services).

ORDER – Legal direction of a court.

ORDER OF FILIATION - A court order stating that a certain man is the father of a certain child.

OTHERWISE AVAILABLE INCOME - Income that is available to a community spouse or family member. In determining otherwise available income the following deductions, if applicable, are made: actual incapacitated adult/child care expenses, court-ordered support payments and health insurance premiums. In addition, German, Austrian and Netherlands reparation payments are disregarded in

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determining the otherwise available income of a community spouse or family member.

PACE - Program of All Inclusive Care for the Elderly - Institutional or non-institutional services provided under a PACE demonstration waiver program (as defined in Section 1934 of the Federal Social Security Act) or under a PACE program under section 1934 or 1894 of the Federal Social Security Act.

PARENT - A child's birth father or birth mother; adoptive father or adoptive mother; or putative father who has acknowledged paternity.

PARENT LOCATOR SERVICE - A computerized information service which the child support enforcement program uses to locate non-custodial parents through State and federal records for the purpose of establishing paternity and establishing and enforcing child support.

PARTICIPATING CONSUMER - An individual who has signed the Partnership Consumer Participation Agreement and has purchased long-term care coverage pursuant to a Partnership approved policy/certificate from a participating insurer.

PARTICIPATING INSURER - An insurance company offering policy/certificate coverage, approved under the New York State Insurance Department Regulation 144 (11 NYCRR 39) that signs the Insurer Participation Agreement. Insurers must submit products proposed for sale as Partnership for Long-Term Care policies for review and approval by the New York State Department of Insurance in order to be approved as a participating insurer.

PATERNITY - Legal determination of fatherhood.

PATERNITY HEARING - A proceeding to examine the facts regarding legal fatherhood for a child.

PATERNITY PETITION - A formal written application to a court requesting judicial action to determine legal fatherhood of a specific man for a specific child.

PERMANENT ABSENCE STATUS - When an individual is not expected to return home, or the individual is an institutionalized spouse. Permanent absence status will be presumed to exist for persons who are not institutionalized spouses if:

- (a) a person enters a nursing or intermediate care facility;
- (b) a person is initially admitted to acute care in a hospital and is then transferred to an alternate level of care, pending placement in a nursing facility; or
- (c) a person remains in acute care in a hospital for more than six calendar months.

Adequate medical evidence may overcome these presumptions.

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PERSONAL CARE SERVICES – Provide assistance with personal hygiene, dressing, feeding and incidental household services essential to the provision of home health services when prescribed by the attending physician.

PERSONAL EMERGENCY RESPONSE SERVICES (PERS) – An electronic device which enable high-risk patients to secure help in the event of an emergency.

PERSONAL NEEDS ALLOWANCE (PNA) - PNA is the amount that is set aside to meet the personal needs for persons who: are residing in a medical institution and are in permanent absence status; or have a community spouse and are in receipt of home and community-based waiver services.

PETITION - A formal written application to a court requesting judicial action on a particular matter.

PETITIONER - One who files a petition.

PRE-ADD ALLOWANCE - The monthly Public Assistance allowance that is intended to cover the costs of food, clothing, incidentals and utility bills.

PRESUMPTION OF PATERNITY - A rule of law under which evidence of a man's paternity (e.g., voluntary acknowledgment, genetic test results) creates a presumption that the husband is the father of his wife's child. A rebuttable presumption can be overcome by evidence that the man is not the father, but it shifts the burden of proof to the father to disprove paternity.

PRESUMPTIVE ELIGIBILITY - Presumptive eligibility is Medicaid coverage provided to certain applicants who reasonably appear to meet all of the criteria, financial and non-financial, pending the completion of the full eligibility determination.

PRIVATE DUTY NURSING – Nursing services at home from Registered Nurses (RNs) or Licensed Practical Nurses (LPNs), in accordance with physician orders which may be beyond the scope of care, or unavailable, from certified home care agencies.

PRIVATE PROPRIETARY HOME FOR ADULTS - An adult care facility which is operated for compensation and profit, established for the purpose of providing long term residential care, room, board, housekeeping, and supervision to five or more adults unrelated to the operator.

PROBABILITY OF PATERNITY - The probability that the alleged father is the biological father of the child as indicated by genetic test results.

PRUCOL (Permanently Residing Under Color Of Law) - Any immigrant who is permanently residing in the United States with the knowledge and permission or acquiescence of the United States Citizenship and Immigration Services (USCIS) (formerly the Immigration and Naturalization Services [INS]) and whose departure from the United States the USCIS does not contemplate enforcing.

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PUBLIC ASSISTANCE STANDARD OF NEED – Prior to April 2008 pursuant to a court order in *Atchison v. Berger* (76 ADM-17), Medicaid eligibility for Federally-related MA-Only individuals and families (persons under 21, over 65 and adults between 21 and 65 who are ADC or SSI related, and legally responsible relatives of MA-Only A/Rs who are determined able to contribute to the cost of care of their dependent relatives) was computed by comparing net available income to the Medically Needy Income Level or the PA Standard of Need, whichever was greater. The Public Assistance Standard of Need is an amount of money against which the income of an A/R is compared in order to determine eligibility for Public Assistance. The PA Standard is comprised of six separate items including the Pre-Add, the Home Energy Allowance, the Supplemental Home Energy Allowance, the Shelter Allowance, the Fuel for Heating Allowance and other Additional Allowances (including allowances for home delivered meals, a fifty dollar pregnancy allowance, a restaurant allowance, a special restaurant allowance, the cost of water, hotel or motel rates, and room and board where applicable) whose value must be added together to arrive at a needs level. At this time, the Public Assistance Standard of Need is not used when determining eligibility for Medicaid or Family Health Plus. In determining eligibility for LIF and ADC the net income of the A/R, after all appropriate disregards have been deducted, is compared to the Medically Needy Income Level or the Medicaid Standard (and MBL Living Arrangement chart as appropriate) whichever is most beneficial.

PUBLIC HOME - An adult care facility or a residential health care facility operated by a social services district.

PUBLIC INSTITUTION - An institution that is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.

PUTATIVE FATHER - Man alleged to be the biological father of a child.

QUALIFIED ALIEN - An alien who:

- has been lawfully admitted for permanent residence under the Immigration and Nationality Act (INA);
- has been granted asylum under Section 208 of the INA;
- has been admitted to the United States as a refugee under Section 207 of the INA (including Amerasian immigrants admitted under the provisions of Public Law 100-202);
- has been paroled into the United States under Section 212(d)(5) of the INA for a period of at least one year;
- has had deportation withheld under Section 243(h) or 241(b)(3) of the INA;
- is a Cuban and Haitian entrant (as defined in Section 501(e) of the Refugee Education Assistance Act of 1980);
- has been granted conditional entry pursuant to Section 203(a)(7) of the INA; or
- has been determined by the social services district to be in need of Medicaid as a result of being battered or subject to extreme cruelty in the United

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States by a spouse or a parent, or by a member of the spouse's or parent's family residing in the same household as the alien.

QUALIFIED - For the purposes of the MARG, the term "qualified" has the same meaning as the term "qualified alien", as used in the federal PRWORA (Welfare Reform). Qualifieds are individuals who usually live and work in the United States with the permission of the USCIS.

QUALIFIED ENTITY - Presumptive eligibility is a means of immediately providing Medicaid covered care and services to children under the age of 19. A Qualified Entity (QE), under a signed MOU with the State Department of Health, is used to perform a preliminary assessment of the child's eligibility based upon guidelines established by the Department.

QUALIFIED PARTNERSHIP POLICYHOLDER (QPP) - A participating consumer who has met the minimum benefit duration requirement of his or her New York State Partnership for Long-Term Care insurance policy and qualified to apply for Medicaid Extended Coverage under the Partnership.

REAL PROPERTY - Houses, condominiums, buildings and land including mineral, water and air rights.

RECIPIENT - An individual in receipt of Medicaid benefits.

REFUGEE CASH ASSISTANCE (RCA) - RCA is targeted to newly arriving refugees during their first eight months after entry into the United States and to those who are determined to be eligible for cash assistance but not eligible for Family Assistance.

REFUGEE MEDICAL ASSISTANCE (RMA) - RMA is targeted to newly arriving refugees during their first eight months after entry into the United States and to those who are determined to be ineligible for Medicaid, but meet certain requirements.

REFUGEE SOCIAL SERVICES PROGRAM (RSSP) - The RSSP assists documented refugees and their families in their transition to a new life in this Country. The Refugee Social Services Program provides job preparation training and job placement for refugees, asylees, Cuban and Haitian entrants and certain Amerasian immigrants.

RESIDENCE FOR ADULTS - An adult care facility established and operated for the purpose of providing long term residential care, room, board, housekeeping, case management activities and supervision to 5 or more adults, unrelated to the operator, who are unable or substantially unable to live independently.

RESIDENCES FOR SURVIVORS OF VIOLENCE PROGRAM (RSVP) - This transitional housing program is for victims of domestic violence. The initiative is exclusively targeted to New York City, as the demand for transitional housing for victims of domestic violence far exceeds the available supply there. The program is

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administered in accordance with Homeless Housing assistance Program (HHAP) procedures.

RESIDENTIAL HEALTH CARE FACILITY (RHCF) - A nursing home established and operated pursuant to Article 28 of the Public Health Law.

RESIDENTIAL TREATMENT FACILITY (RTF) - A medical facility certified by the State Office of Mental Health (OMH) which provides for long term psychiatric care for persons 21 years of age and younger.

RESOURCE - Property of all kinds including real and personal, tangible and intangible.

RESOURCE LEVEL - Allowable dollar amounts which an SSI-related A/R is permitted to have in reserve and still be eligible for Medicaid.

RESPONDENT - One who answers a petition.

SAFETY NET ASSISTANCE (SNA) - SNA is a State and locally funded program that provides cash assistance to eligible individuals, couples and families that are not eligible for family assistance. Generally, SNA can be provided for a maximum of two years in a lifetime. After that, if eligibility continues, SNA will be provided in non-cash form, such as two-party check or a voucher. In addition, non-cash SNA is provided for families of persons who are unable to work due to the abuse of drugs or alcohol or for refusing drug/alcohol screening, assessment or treatment.

The Medicaid eligibility category which most closely resembles SNA is Singles and Childless Couples (S/CC). It is for individuals ages 21 through 64 who are not certified blind or certified disabled or pregnant and do not have a minor dependent child living with them.

SATISFACTORY IMMIGRATION STATUS - The term "satisfactory immigration status" is defined as an immigration status that does not make the individual ineligible for benefits under the applicable program. All qualified immigrants and PRUCOL immigrants are individuals said to be in satisfactory immigration status, as are citizens, Native Americans and nationals. The only groups excluded are undocumented immigrants and temporary non-immigrants.

SIGNIFICANT FINANCIAL DISTRESS - Exceptional expenses that the community spouse cannot be expected to meet from the monthly maintenance needs allowance amounts or from amounts held in resources. Such expenses may be of a recurring nature or represent major one time costs. They may include, but are not limited to: recurring or extraordinary non-covered medical expenses of the community spouse or family members; amounts to preserve, maintain or make major repairs on the homestead; and amounts necessary to preserve an income-producing asset.

SINGLES/CHILDLESS COUPLES (S/CC) - Single individuals or members of childless married couples who are (1) at least age 21, but not yet 65; (2) not certified

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blind or certified disabled; (3) not pregnant; and (4) not caretaker relatives of children under age 21.

SPECIAL NON-IMMIGRANT - Some categories of “special” non-immigrant statuses allow the status (visa) holder to work in the United States and eventually adjust to lawful permanent residence status. These categories allow the individual to apply for adjustment to Lawful Permanent Resident (LPR) status after he or she has had the non-immigrant status for a period of time.

SPENDDOWN - The use of medical expenses to reduce available net income and as appropriate, resources in excess of the medically needy income/resource levels. Spenddown is only available to A/Rs whose eligibility is determined under the NYS medically needy income/resources levels. The A/R must submit paid or incurred bills equal to or greater than the amount of any excess. The A/R may also pay the amount of the excess income to the local district (Pay-In).

SPOUSE - A person married to an A/R (not a common law relationship). This includes married persons who are separated, but not divorced. This definition also applies to individuals of the same sex who are married.

SSI-RELATED - A medically needy Medicaid category for the aged, certified blind or certified disabled.

STATE INCOME STANDARDS - The State Income Standards are the standards used in determining the financial eligibility of families for childcare services. The State Income Standards are established each year using the federal poverty level for family size of four as a base, adjusted by family size scale.

STATE PARENT LOCATOR SERVICE (SPLS) - A service operated by the State Child Support Enforcement Agencies to locate non-custodial parents to establish paternity, and establish and enforce child support obligations.

STATUTE OF LIMITATIONS - The period during which someone can be held liable for an action or a debt - statutes of limitations for collecting child support vary from State to State.

STAY - An order by a court that suspends all or some of the proceedings in a case.

STEPPARENT - A person who is not a child’s birth or adoptive parent, but is married to the child’s birth or adoptive parent.

SUBSIDIZED EMPLOYMENT - Subsidized employment occurs when an employer receives a subsidy in exchange for hiring a public assistance recipient. The subsidy payment may offset the employer’s costs of providing wages, fringe benefits or training or for other purposes. Funds used to subsidize a position may include welfare funds, such as those made available through grant diversion, or other funding sources. Subsidized employment is a public assistance work activity. (See definition of Grant Diversion)

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SUMMONS - The notice used to inform all parties of a court proceeding.

SUPPLANT - To replace current spending with another funding source.

SUPPLEMENTAL SECURITY INCOME (SSI) - A federally supported and administered benefit program for eligible individuals or couples who are 65 or over, or who, regardless of age are certified blind or certified disabled.

SUPPORT COLLECTION UNIT – The part of the child support enforcement program responsible for administration, collection, monitoring, and disbursement of support payments.

SUPPORT ENFORCEMENT- The processes by which a court order to provide cash/medical support can be legally enforced using judicial and/or administrative means.

SUPPORT HEARING – A proceeding to examine the facts regarding financial support for a child.

SUPPORT OBLIGATION – The amount a non-custodial parent is ordered to pay for child support.

SUPPORT ORDER – A court order establishing a child support obligation may include cash and/or medical support.

SUPPORT PETITION – A formal written application to a court requesting judicial action on a matter of child support.

TAX-QUALIFIED LONG-TERM CARE INSURANCE CONTRACT- A long-term care insurance policy that provides favorable federal tax treatment for premiums and benefits paid by the policy. These policies must conform to the requirements of the federal Health Insurance Portability and Accountability Act of 1996 in order to have favorable tax status. Long-term care insurance policies that are approved as tax-qualified by the New York State Insurance Department also are provided favorable tax treatment by New York State.

TEMPORARY ABSENCE - A time when a person is absent from his/her permanent residence and is expected to return. Reasons for temporary absence may include employment, hospitalization, military service, vacation, education or visits. A period of temporary absence will be presumed to exist if:

- (a) the person is not an institutionalized spouse and returns to his/her permanent residence in the month in which s/he left or the following month;
- (b) a person without a community spouse is in an acute care hospital for six calendar months or less;

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- (c) a person with a community spouse is expected to be in an acute care hospital for less than 30 consecutive days; or
- (d) a person with a community spouse is expected to receive home and community-based services provided pursuant to a waiver under Section 1915(c) of the Social Security Act for less than 30 consecutive days.

The presumptions set forth in (a) and (b) may be overcome by adequate evidence. Adequate medical evidence is required to overcome the presumptions set forth in (c) and (d).

TEMPORARY ASSISTANCE (TA) – TA is the “cash” assistance component of welfare. In New York State, temporary assistance includes Family Assistance, Safety Net Assistance, Emergency Assistance for Families, Emergency Safety Net Assistance and Emergency Assistance for Adults. TA is often referred to as “public assistance”.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) – Commonly used in reference to the federal assistance program which a state operates. It is the Block Grant that was established under the Personal Responsibility and Work Opportunity Reconciliation Act under which states operate a federally funded program to assist families with children. TANF funds are used for supportive services and federal benefits.

TEMPORARY NON-IMMIGRANT - A temporary non-immigrant is an immigrant who has been allowed to enter the United States for a specific purpose and for a limited period of time. There are more than two dozen non-immigrant categories, each of which has specific requirements concerning the purpose of the individual’s stay in the U.S. Examples include tourists, students, and visitors on business or pleasure.

TEMPORARY PROTECTED STATUS (TPS) - “Temporary Protected Status” is granted to individuals who are physically present in the U.S. and who are from certain countries designated by the U.S. attorney general as unsafe to accept their return. Individuals granted TPS are authorized to remain in the U.S. for a specific, limited period.

TITLE IV-E - Title IV, Part E of the Social Security Act describes federal payments for foster care and adoption assistance. Title IV-E foster care reimbursement is provided for children who would have been categorically and financially eligible for the former ADC program in public assistance. Title IV-E Adoption Assistance reimbursement is provided for special needs children who would have been eligible under either the former ADC program of public assistance or who are eligible for SSI at the time the adoption petition is filed. Children who are Title IV-E eligible are automatically eligible for Medicaid. Children who are not IV-E eligible are categorically and are automatically eligible for Medicaid. Usually eligibility is based on a household of one. If the non-IV-E child is pregnant, the usual Medicaid rules apply.

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TITLE XIX - That portion of the federal Social Security Act which authorizes a joint federal/state Medicaid program.

TOTAL ASSET PROTECTION (TAP) – Disregard of all qualifying Partnership policyholder’s assets in determining his or her eligibility for Medicaid Extended Coverage, after the policyholder has used the required amount of benefits under a Total Asset 50 or Total Asset 100 insurance policy.

TRANSFER OF ASSETS - A voluntary assignment of property for less than the fair market value of the property.

TRUST FUNDS - Fund held by one party (the trustee) for the benefit of a person (beneficiary) or group of persons. These funds are not owned by the beneficiary but are usually under the control of a trustee who must carry out the stipulated conditions for payments specified in the trust.

UNCOMPENSATED VALUE – “Uncompensated value” means the difference between the fair market value at the time of transfer (less any outstanding loans, mortgages, or other encumbrances on the asset) and the amount received for the asset. If the client’s resources are below the appropriate Medicaid resource level, the amount by which the Medicaid resource level exceeds the client’s resources must be deducted from the uncompensated value of the transfer. Likewise, amounts specified in the Department regulations for burial funds, but not for burial space items, also must be deducted.

UNDERGRADUATE – A student who has not received a bachelor’s degree.

UNDOCUMENTED IMMIGRANT - Undocumented individuals are immigrants who do not have the permission or acquiescence of the United States Citizenship and Immigration Services (USCIS) to remain in the United States. They may have entered the United States legally but have violated the terms of their status, e.g., over-stayed a visa, or they may have entered without documents.

UNITED STATES CITIZEN: For the purposes of qualifying as a United States citizen, the United States includes the 50 states, the District of Columbia, Puerto Rico, Guam, U.S. Virgin Islands and the Northern Mariana Islands. Nationals from American Samoa or Swain’s Island are also regarded as United States citizens for the purpose of Medicaid eligibility.

UNITED STATES CITIZENSHIP AND IMMIGRATION SERVICES (USCIS) - On March 1, 2003, service and benefit functions of the U.S. Immigration and Naturalization Service (INS) transitioned into the Department of Homeland Security (DHS) as the U.S. Citizenship and Immigration Services (USCIS). The USCIS is responsible for the administration of immigration and naturalization adjudication functions and establishing immigration services, policies and priorities. These functions include:

- adjudication of immigrant visa petitions;

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- adjudication of naturalization petitions;
- adjudication of asylum and refugee applications;
- adjudications performed at the service centers, and all other adjudications performed by the INS.

VETERAN - The term veteran means a person who served in the active military, naval or air service of the United States who fulfilled the minimum active duty service requirements and was honorably discharged or released, not on account of immigration status.

VICTIMS OF A SEVERE FORM OF TRAFFICKING: A “victim of a severe form of trafficking” is defined as anyone who:

1. has been subjected to a “severe form of trafficking in persons” which is defined as “sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud or coercion for the purpose of subsection (a)(1)(A) or (a)(1)(B), peonage, debt bondage, or slavery; and
2. has not attained the age of 18 years or who is the subject of a certification issued by the federal government pursuant to Section 107(b)(1)(E) of the Victims of Trafficking and Violence Protection Act of 2000 (P.L. 106-386).

VOLUNTARY ACKNOWLEDGEMENT OF PATERNITY – An acknowledgement by both parents, that the man is the father of a child, provided in writing on a form. This acknowledgement establishes paternity of the child without a court hearing.

WAGE SUBSIDY – A payment made to a public or private employer to subsidize an employee’s wage or fringe benefits. A wage subsidy may be offered as an incentive for an employer to hire a welfare recipient. Funds used to provide wage subsidies may be made available through diversion of the public assistance grant or other funds.

WAGE WITHHOLDING – Procedure by which automatic deductions are made from wage or income to pay some debt such as child support; may be voluntary or involuntary.

WINDFALLS - One-time payments such as inheritances, court ordered settlements, lottery winnings and gifts.