
**DEPARTMENT
POLICY****FIP, RCA and SDA Only**

The certified group must be in financial need to receive benefits. Need is determined to exist when budgetable income is less than the payment standard established by the department. Program, living arrangement, grantee status and certified group size are variables that affect the payment standard.

DEFINITIONS

The **eligibility determination group (EDG)** means those persons living together whose information is needed to determine eligibility for assistance; see BEM 210 for FIP, BEM 215 for RCA and BEM 214 for SDA.

The **certified group (CG)** means those persons in the cash EDG who meet all non-financial eligibility factors.

Exception: Otherwise eligible persons who are serving an immunization penalty are included in the FIP CG.

**PAYMENT
STANDARD**

The payment standard is the maximum benefit amount that can be received by the CG. Income is subtracted from the payment standard to determine the grant amount; see BEM 518. The grant amount is for shelter, heat, utilities, clothing, food and items for personal care. It is not to be used to purchase lottery tickets, alcohol or tobacco. It is also not to be used for gambling, illegal activities, massage parlors, spas, tattoo shops, bail-bond agencies, adult entertainment, cruise ships or other nonessential items. Determine the correct payment standard based on the program, certified group size, and living arrangement (SDA) or grantee status (FIP/RCA).

See Adjustment to Payment Standard in this item for groups containing a member who is serving an immunization penalty.

FIP/RCA payment standards are found in RFT 210. For SDA groups, use RFT 225 or RFT 235.

LIVING ARRANGEMENT

SDA Only

Special Living Arrangement (SLA) groups live in a:

- Home for the aged.
- Adult foster care home.
- Hospital.
- Long-term care facility.
- Substance abuse treatment center.
- County infirmary (domiciliary or personal care only).

All other SDA groups are considered to be in **Independent Living**.

GRANTEE STATUS

FIP/RCA Only

Eligible Grantee

Bridges uses the eligible grantee payment standard for both of the following:

- The grantee is a member of the CG (EDG participation status of eligible adult).
- The group is participating in the Kinship Care Pilot.

Remember that a grantee disqualified due to alien status, IPV, convicted of two or more drug-related felonies, etc. has an EDG participation status of disqualified adult and therefore receives the eligible grantee payment standard.

Ineligible Grantee

Bridges uses the ineligible grantee payment standard when the grantee is not a member of the CG. This grantee status includes grantees who are any of the following:

- SSI recipients.
- Non-parent caretakers who are not eligible for cash assistance or choose not to request cash assistance.
- Unrelated caretakers who receive FIP based solely on the presence of a child placed in the home by children's services.

- Recipients of Children's Services Independent Living Stipend.

Certified Group Size

Bridges uses policy in BEM 210, BEM 215, BEM 214 and RFT 210 to determine CG size and the correct payment standard.

Adjustments to Payment Standard

FIP Only

Bridges reduces the CG's payment standard by \$25 if one or more eligible children in the group is subject to an immunization penalty; see BEM 202.

CHANGES IN NEED

Changes in need occur when there are changes in:

- Certified group size.
- Living arrangement.
- Grantee status.

Note: For changes in income, see BEM 518.

Change Reported Timely

For changes reported timely (within 10 days), Bridges will reflect the change the first month that begins at least 10 days after the change is reported if administratively possible. Depending on the timing of the reported change and timely notice requirements, some benefits will be adjusted in the first month after the change is reported; others in the second month after the change is reported.

Exceptions:

- Member additions resulting in a grant increase will affect the month after the month the change occurred.
- For SDA recipients exiting an SLA facility, Bridges will increase the client benefit effective in the month following the month of exit, provided the client is eligible for SDA at the Independent Living rate; see BEM 616.

Change NOT Reported Timely

Bridges will reflect changes reported late as follows:

- For member additions resulting in a grant increase, reflect the change in the month after the month the change is reported.
- For changes **other than** member additions resulting in a grant increase, reflect the change no later than the first month that begins at least 10 days after the change is reported.
- For changes resulting in a grant decrease, Bridges determines when the change would have been effective had the client reported timely and DHS had acted timely. Initiate recoupment as appropriate; see BAM 700.

Note: Bridges will authorize payment to **SDA-SLA providers** for the time care was provided, regardless if a change was reported timely by the client, but no earlier than ten days prior to the date of application. Do **not** authorize payment for the date of discharge; see BAM 430.

Examples

Example 1: On March 5, the group reports that a member joined the group on February 26 (member add reported timely). The change results in a grant increase which you process on March 19 to affect April benefits. Authorize a supplement for March. (Must affect month after change occurred.)

Example 2: On July 24, the group reports that a member left the group on July 17. (Reported timely.) The change results in a grant decrease which you process on July 28 to affect September benefits. (Affect second month after change is reported due to timely notice requirements.)

Example 3: On December 7, you first learn that a member left the home on September 14. You determine that a benefit reduction should have been effective in November. Affect the grant decrease as soon as possible and initiate recoupment for overissuances beginning with November benefits.

Example 4: On October 8, the group reports that a member joined the group on August 23. (Reported late.) The change results in a grant increase which you process on October 13 to affect

November benefits. October benefits are **not** increased. (Affect month after change is reported.)

**VERIFICATION
REQUIREMENTS**

Verification of need is **not** required.

LEGAL BASE**FIP**

Social Security Act, Title IV-A
MCL 400.57 a (3)
R400.3109,.3118

RCA

45 CFR 400.66

SDA

Annual DHS Appropriations Act