Regulate 'y A Form	Analysi	S 's space for use by IRRC
(1) Agency Department of Public We Office of Income Ma Bureau of Policy Division of Planning, Policy Clari.,	aintenance & Spec. Prog. Deve	lop.
(2) I.D. Number (Governor's Office Use $14 - 42.5$	e)	IRRC Number: 186
(3) Short Title Enumeration		
(4) PA Code Cite	(5) Agency Contac	ts & Telephone Numbers
55 Pa. Code Chapter 155	Primary Contac Secondary Con	t: Edward J. Zogby 772-7829 tact:
(6) Type of Rulemaking (check one)	[(7) Is a	120-Day Emergency Certification A
X Proposed Rulemaking Final Order Adopting Regulation Final Order, Proposed Rulemaking On		No By the Attorney General By the Governor
amends 55 Pa. Code 155.1 to provide comply with Federal Enumeration requ I. Enumeration is mandated by Fec CFR §435.910, 42 CFR §435.920, and 2. The Department has no discretion 3. The rescission does not affect w	iled regulation requi that applicants for an irements. deral statute, 42 U.S. 45 CFR §205.52. onary power in settin that applicants and r ind medical assistance e Federal regulations recipients are require hapter 155 will be re	rements of Chapter 155, Enumeration and recipients of assistance benefits m C. §1320b-7, and regulations found and or revising Enumeration requirement ecipients are required to do. The applicants and recipients. Existing applicable to Food Stamp applicant red to be enumerated as mandated b
(9) State the statutory authority for the	regulation and any r	elevant state or federa! court decision
45 Pa. C.S. §727		

Regulatory Analysis FC n

(10) Is the regulation mandated by any federal or state law or court order, or federal regulation? If yes, cite the specific law, case or regulation, and any deadlines for action.

Yes. Enumeration is mandated by Federal statute, 42 U.S.C. §1320b-7, and regulations found in 42 CFR §435.910, 42 CFR §435.920, and 45 CFR §205.52. In addition, Section 432.2(b)(3) of the Public Welfare Code requires applicants/recipients for benefit programs funded by State funds to verify or apply for a Social Security number.

(11) Explain the compelling public interest that justifies the regulation. What is the problem it addresses?

Program regulations that are promulgated and codified by the Federal Government do not need to be repeated in the Pa. Code. Adoption by reference of the Federal regulations as found in the CFR would simplify the administration of Enumeration in the Cash and Medical Assistance Programs.

(12) State the public health, safety, environmental or general welfare risks associated with nonregulation.

Not applicable.

(13) Describe who will benefit from the regulation. (Quantify the benefits as completely as possible and approximate the number of people who will benefit.)

The proposed changes to Chapter 155 will not change Enumeration requirements which currently exist. These changes will simplify the administration of Enumeration as follows:

1. There will be no need to revise the 55 Pa. Code with every revision of the Federal regulations.

2. County Assistance Offices (CAOs) will be able to respond more quickly to any Federal regulation changes.

3. CAOs will be provided with program requirements in a more useable format.

Steve Lossey
Regulatory Analysis Form
(14) Describe who will be adversely affected by the regulation. (Quantify the adverse effects as completely as possible and approximate the number of people who will be adversely affected.)
The proposed changes to Chapter 155 will not change Enumeration requirements which currently exist. Therefore, no persons or organizations will be adversely affected by this change.
(15) List the persons, groups or entities that will be required to comply with the regulation.
(Approximate the number of people who will be required to comply.)
Applicants/recipients of State and Federal benefits (cash and medical assistance) will continue to be required to secure a Social Security Number as they do currently.
(16) Describe the communications with and input from the public in the development and drafting of the regulation. List the persons and/or groups who were involved, if applicable.
The Department plans to publish the regulation as proposed rulemaking with a 30-day comment period. In addition, drafts of this regulation were sent to representatives of community legal services and the Income Maintenance Advisory Committee for review.
(17) Provide a specific estimate of the costs and/or savings to the regulated community associated with
compliance, including any legal, accounting or consulting procedures which may be required.
There will be no costs or savings incurred by regulated communities.

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Regulatory Analysis Form (18) Provide a specific estimate of the costs and/or savings to local governments associated with compliance, including any legal, accounting or consulting procedures which may be required. There will be no costs or savings incurred by local governments. (19) Provide a specific estimate of the costs and/or savings to state government associated with the implementation of the regulation, including any legal, accounting, or consulting procedures which may be required. There will be no costs or savings incurred by State government. . .

	RA	dulatory	Analysis F	orm	•	
(20) In the table below, pr	ovide an estimate o	f the fiscal saving	s and costs asso	ciated with implen		
for the regulated com	munity, łocał governi		overnment for the Its in Thousands		five subsequent	years.
	Current FY Year	FY +1 Year	FY +2 Year	FY +3 Year	FY +4 Year	FY +5 Year
SAVINGS:						
Regulated Community	\$0	\$0	\$0	\$0	\$0	\$(
Local Government	\$0	\$0	\$0	\$0	\$0	\$0
State Government	\$0	\$0	\$0	\$0	\$0	\$(
Total Savings	\$0	\$0	\$0	\$0	\$0	\$0
COSTS:						
Regulated Community	\$0	\$0	\$0	\$0	\$0	\$(
Local Government	\$0	\$0	\$0	\$0	\$0	\$0
State Government	\$0	\$0	\$0	\$0	\$0	\$(
Total Savings	\$0	\$0	\$0	\$0	\$0	\$(
REVENUE LOSSES:						البرايي الفاعد المقاضيات
Regulated Community	\$0	\$0	\$0	\$0	\$0	\$0
Local Government	\$0	\$0	\$0	\$0	\$0	\$0
State Government	\$0	\$0	\$0	\$0	\$0	\$0
Total Savings	\$0	\$0	\$0	\$0	\$0	\$0

(20a) Explain how the estimates listed above were derived.

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	Regulatory A	nalvsis Form	}	- 1))
0b) Provide the past three years				V
	(Dollar Amounts	in Thousands)		
Program	FY -3	FY -2	FY -1	Current FY
Cash Grants	\$0	\$0	\$0	S
······				·
 Using the cost-benefit information adverse effects and costs. 	ion provided above, explain	how the benefits of the	regulation outweigh	the
		-		
N/A				
2) Describe the nonregulatory alt	amatives considered and the	costs associated with	those alternatives	
		cosis associated with	uluse alternauves.	
Provide the reasons for their di	smissal.			
Nonregulatory alterna	tives are not being (considered becau	se Enumeration	requirement
is Federally mandated				•
is redefaily mandaled	•			
23) Describe alternative regulatory	schemes considered and the	e costs associated with	h those schemes.	
 23) Describe alternative regulatory Provide the reasons for their displayers 		e costs associated with	h those schemes.	
		e costs associated with	n those schemes.	
		e costs associated wit	h those schemes.	
Provide the reasons for their d	smissal.			55 Do 40
Provide the reasons for their dinative	smissal. is to maintain the E	numeration requi	rement in the .	
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	e any provisions that are more stringent than federal standards? If yes, iden ions and the compelling Pennsylvania interest that demands stronger regula	
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Not to our	knowledge.	
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(25) How doe	s this regulation compare with those of other states? Will the regulation p	ut
	at a competitive disadvantage with other states?	
All states	are governed by Federal regulations to implement the same Enumeration re	quir
		-
	regulation affect existing or proposed regulations of the promulgating agen	су о
state agencies?	If yes, explain and provide specific citations.	
No.		
	public hearings or informational meetings be scheduled? Please provide the	he d
times, and loca	ations, if available.	
No. The l	Department plans to publish the regulation as proposed rulemaking with a 3	30-da
public commen	nt period.	

Regulatory Analysis FC n

(28) Will the regulation change existing reporting, record keeping, or other paperwork requirements? Describe the changes and attach copies of forms or reports which will be required as a result of implementation, if available.

The amendment to this chapter eliminates the need to revise State regulations every time a change in Federal regulations occur.

(29) Please list any special provisions which have been developed to meet the particular needs of affected groups or persons including, but not limited to, minorities, elderly, small businesses, and farmers.

No such provisions are needed. The Enumeration requirement is Federally mandated.

(30) What is the anticipated effective date of the regulation; the date by which compliance with the regulation will be required; and the date by which any required permits, licenses or other approvals must be obtained?

None. There is no anticipated effective date for this amendment. This regulation should be adopted as soon as practical. This proposed rule makes no substantive changes to Enumeration requirements which are already in effect.

(31) Provide the schedule for continual review of the regulation.

Administration of the regulations is evaluated through the Department's Quality Control and Corrective Action agencies. These agencies are in turn monitored by the Family Support Administration of the U.S. Department of Health and Human Services.

(1) Agency Department of Public We	elfare		•
Office of Income Ma Bureau of Policy			
Division of Planning, Policy Clari.,		g. Develop.	
(2) I.D. Number (Governor's Office Use	e)		
14-425			IRRC Number:
(3) Short Title			
Enumeration			
(4) PA Code Cite	(5) Agency	Contacts & Te	ephone Numbers
55 Pa. Code Chapter 155	Primary	Contact: Edwa	
	Seconda	ary Contact:	772-7829
(6) Type of Rulemaking (check one)	<u> </u>	(7) Is a 120-D	ay Emergency Certification A
X Proposed Rulemaking		X No	
Final Order Adopting Regulation	- :401		Attorney General
	nitted	Yes: By the A Yes: By the C	
Final Order Adopting Regulation		Yes: By the	Governor
Final Order Adopting Regulation Final Order, Proposed Rulemaking On (8) Briefly explain the regulation in clear This proposed rule deletes the deta	ar and nonted	Yes: By the c chnical languag	Governor e. of Chapter 155, Enumeratio
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Regulatory Analysis FC n

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Regulatory Analysis Form
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There will be no costs or savings incurred by regulated communities.
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	Reg	ulatory A	nalysis For	m	
18) Provide a specific any legal accounting		and/or savings to	local governments		ompliance, including
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I nere will be no cost	ts or savings incurred	by local governn	ients.		
the regulation, inclu	uding any legal, accor	unting, or consult	ing procedures whic		
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20) In the table below, pr for the regulated com	ovide an estimate o	f the fiscal saving ment, and state g	s and costs asso	ciated with implen a current year and		
	Current FY	FY +1	FY +2	FY +3	FY +4	FY +5
	Year	Year	Year	Year	Year	Year
SAVINGS:						
Regulated Community	\$0	\$0	\$0	\$0	\$0	\$0
Local Government	\$0	\$0	\$0	\$0	\$0	\$0
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REVENUE LOSSES:						
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Local Government	\$0	\$0	\$0	\$0	\$0	\$0
State Government	\$0	\$0	\$0	\$0	\$0	\$0
Total Savings	\$0	\$0	\$0	\$0	\$0	\$0

(20a) Explain how the estimates listed above were derived.

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	Regulatory A	V		
20b) Provide the past three years e	-	rams affected by the n s in Thousands)	egulation.	
Program	FY -3	FY -2	FY -1	Current FY
ash Grants	\$0	\$ 0	\$0	\$0
		· · ·		
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 Using the cost-benefit informati adverse effects and costs. 	on provided above, explain	how the benefits of th	e regulation outweig	h the
N/A		-		
NA				
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Provide the reasons for their dis	smissal.			
Nonregulatory alternat	ives are not heing	considered here	use Enumeration	n requirement
is Federally mandated.		CONSIDELED DECA	de pudmetatio	n rederemene
23) Describe alternative regulatory	schemes considered and th	ne costs associated w	ith those schemes.	
Provide the reasons for their dis	smissal.			
The only alternative i	is to maintain the H	Enumeration requ	irement in the	55 Pa. Code.
The alternative was re			al complexity,	costs, and
time upon the administ	ration of the progr	am.		

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Not to	our knowledge.
(25) Hov	w does this regulation compare with those of other states? Will the regulation put
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	I the regulation affect existing or proposed regulations of the promulgating agency or o
state ager	Cles (II ves. explain and provide specific cushons
	cies? If yes, explain and provide specific citations.
No.	
No.	
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No.	
(27) Wil	l any public hearings or informational meetings be scheduled? Please provide the date d locations, if available.
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Regulatory Analysis Ft. m

(28) Will the regulation change existing reporting, record keeping, or other paperwork requirements? Describe the changes and attach copies of forms or reports which will be required as a result of implementation, if available.

The amendment to this chapter eliminates the need to revise State regulations every time a change in Federal regulations occur.

(29) Please list any special provisions which have been developed to meet the particular needs of affected groups or persons including, but not limited to, minorities, elderly, small businesses, and farmers.

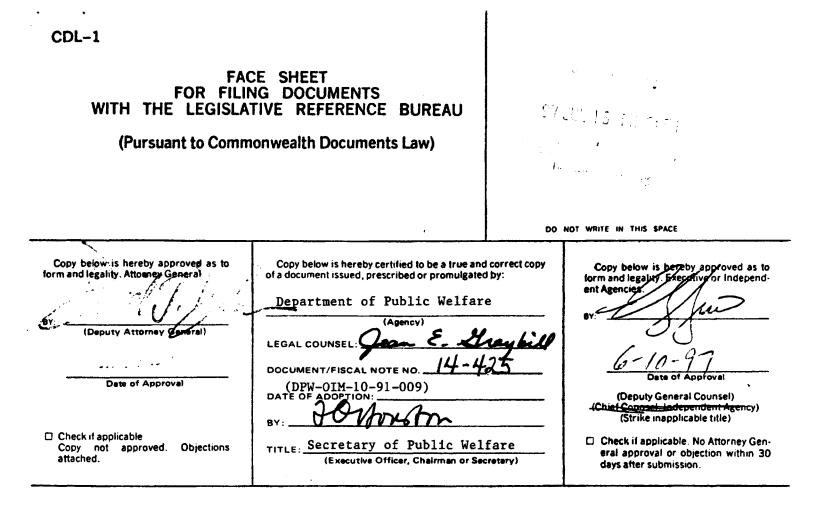
No such provisions are needed. The Enumeration requirement is Federally mandated.

(30) What is the anticipated effective date of the regulation; the date by which compliance with the regulation will be required; and the date by which any required permits, licenses or other approvals must be obtained?

None. There is no anticipated effective date for this amendment. This regulation should be adopted as soon as practical. This proposed rule makes no substantive changes to Enumeration requirements which are already in effect.

(31) Provide the schedule for continual review of the regulation.

Administration of the regulations is evaluated through the Department's Quality Control and Corrective Action agencies. These agencies are in turn monitored by the Family Support Administration of the U.S. Department of Health and Human Services.



NOTICE OF PROPOSED RULEMAKING DEPARTMENT OF PUBLIC WELFARE OFFICE OF INCOME MAINTENANCE Bureau of Policy

[55 Pa. Code Chapter 155] Enumeration

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Notice is hereby given that the Department of Public Welfare, under the authority of Sections 201(2) and 403(b) of the Public Welfare Code, Act of June 13, 1967 (P.L. 31, No. 21)(62 P.S. **\$\$**201(2) and 403(b)) proposes to delete the regulations in Annex A and adopt the amendments as set forth in Annex B.

Purpose

The Department proposes to rescind regulations in 55 Pa. Code Chapter 155, Enumeration, which delineate the enumeration requirements in detail. We are replacing it with a regulation which provides that applicants for and recipients of assistance benefits must comply with Federal enumeration requirements. Federal regulations require that applicants and recipients of Medical Assistance, Food Stamps and Aid to Families with Dependent Children (AFDC) must, as a condition of eligibility, disclose or apply for a Social Security Number (SSN). Federal statutes and regulations relating to enumeration are applicable to all programs in which Federal funding is received (e.g., Medical Assistance, Food Stamps, and AFDC). Further, Section 432.2(b)(3) of the Public Welfare Code, 62 P.S. \$432.2(b)(3) requires that applicants or recipients of State-funded programs also provide SSNs. As a practical matter, the Department has adopted the same practice for State funded programs as for those in which Federal funding is received.

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Background

42 U.S.C. §1320b-7, added to the Social Security Act by Section 2651 of the Deficit Reduction Act of 1984 (P.L. 98-369), provides the authority by which the Department requires all persons applying for or receiving AFDC, Medical Assistance Nonmoney Payment (NMP), and Medical Assistance Medically Needy Only (MNO) to disclose or make application for an SSN. Federal enumeration requirements for the Food Stamp Program are adopted by reference at 55 Pa. Code §501.1 and are not included in Chapter 155. Section 432.2(b)(3) of the Public Welfare Code, as amended, further provides the authority by which the Department requires that persons applying for or receiving General Assistance (GA), State Blind Pension (SBP), or MNO in a related category must disclose or make application for SSNs. In addition, the Federal regulations require the Department to verify all SSNs with the Social Security Administration (SSA).

Need for the Regulation

This regulation will enable the Department to use, by reference, the Enumeration regulations in the Code of Federal Regulations. It will also facilitate the issuance of instructional material to CAOs for the operation of the program. This eliminates any need for the Department to promulgate its own regulations to implement a new change in Federal regulations.

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Requirements

42 U.S.C. \$1320b-7, Section 1137 of the Social Security Act, requires applicants and recipients to provide their Social Security Number or apply for one if they do not have a number.

This proposed rule makes no substantive changes to enumeration requirements already in effect and accordingly will have no additional impact on applicants for or recipients of public assistance programs.

Section 155.1 of the proposed rules sets forth the Department's intention to be governed by Federal regulations through reference.

Affected Persons and Organizations

The proposed changes to Chapter 155 will not change enumeration requirements which currently exist.

Accomplishments/Benefits

The proposed changes to Chapter 155 will ensure immediate compliance with Federal regulation changes and simplify administration of the program by eliminating the need to constantly revise the 55 Pa. Code to reflect changes in Federal regulations.

Fiscal Impact

The regulation will have no fiscal impact on State or local government or private entities.

Paperwork Requirements

The proposed changes to Chapter 155 will reduce paperwork requirements associated with administration of the program by eliminating the need to revise the 55 Pa. Code to reflect any changes in Federal regulations.

Effective Date

The regulation will become effective upon publication in the <u>Pennsylvania Bulletin</u> as final rulemaking.

Sunset Date

A sunset date is not applicable. The Department continuously reviews the Enumeration regulations through the Federally monitored Quality Control process. Also, the Department of Health and Human Services' staff conducts audits periodically on specific aspects of the Enumeration Program.

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Public Comment Period

Interested persons are invited to submit written comments, suggestions, or objections regarding the proposed regulations to the Department of Public Welfare, Mrs. Patricia H. O'Neal, Director, Bureau of Policy, Room 431, Health and Welfare Building, P.O. Box 2675, Harrisburg, Pennsylvania, 17105, telephone number (717) 787-4081, within 30 days after the date of publication of this Notice in the <u>Pennsylvania Bulletin</u>. All comments received within 30 calendar days will be reviewed and considered in the preparation of the final regulations. Comments received after the 30day comment period will be considered for any subsequent revisions of these regulations.

Regulatory Review Act

Under §5(a) of the Regulatory Review Act, the Act of June 30, 1989 (P.L. 73, No. 19)(71 P.S., §745.1 - 745.15), the agency submitted a copy of this proposed regulation on $\int 4 \frac{1}{4} \frac{1}{$

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If the Commission has any objections to any portion of the proposed regulation, it will notify the agency by Aug. 25, 1447. Such notification shall specify the regulatory review criteria which have not been met by that portion. The Act specifies detailed procedures for review, prior to final publication of the regulation, of objections raised by the agency, the General Assembly and the Governor.

cc: Legislative Reference Bureau

Ch. 155

ENUMERATION

55 § 155.1

CHAPTER 155. ENUMERATION

GENERAL PROVISIONS

Sec. 155.1. Policy.

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155.3. Requirements.

155.5. Requirements

155.4. Procedures.

ENUMERATION PROVISIONS FOR AFDC

155.41. Policy.

155.44. AFDC enumeration procedures.

ENUMERATION PROVISIONS FOR GA

155.61. Policy.

155.64. Procedures.

ENUMERATION PROVISIONS FOR MA FOR CATEGORICALLY NEEDY

155.74. Procedures.

ENUMERATION PROVISIONS FOR MA FOR THE MEDICALLY NEEDY

155.84. MA enumeration procedures.

Cross References

This chapter cited in 55 Pa. Code § 140.21 (relating to conditions of eligibility); 55 Pa. Code § 140.221 (relating to conditions of eligibility); 55 Pa. Code § 140.421 (relating to conditions of eligibility); 55 Pa. Code § 141.71 (relating to policy); 55 Pa. Code § 167.43 (relating to requirements); and 55 Pa. Code § 168.11 (relating to general requirements).

GENERAL PROVISIONS

§ 155.1. Policy.

(a) Applicants for and recipients of assistance will be required, as a condition of eligibility, to disclose or apply for a Social Security Number. This requirement will apply regardless of the age of the person. There are some differences between Federal programs and GA and SBP regarding the process of obtaining the number which are explained in the appropriate sections of this chapter.

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55 § 155.3 PUBLIC ASSISTANCE MANUAL

(b) The goal of enumeration is to establish one Social Security Number for each individual applicant and to assure that the individual receiving the card is, in actuality, the person described on the application.

Cross References

This section cited in 55 Pa. Code § 155.74 (relating to procedures).

§ 155.3. Requirements.

(a) General. The following actions are required when requesting the client or applicant to disclose or apply for a Social Security Number:

(1) Inform the client or applicant that while disclosure is not mandatory, it is a condition of eligibility for AFDC, GA or SBP.

(2) Inform the client or applicant that disclosure for AFDC is required by the Social Security Amendments of 1972, Pub. L. 92-603, 86 Stat. 1329 (42 U.S.C.A. §§ 602 and 603) and for GA and SBP it is required by State regulations.

(3) Inform the client or applicant that the Social Security Number will be used for the purposes of identification and verification.

(b) Verification. Age, identity and citizenship of every person must be verified. The verification must be on the basis of documentary evidence.

Cross References

This section cited in 55 Pa. Code § 155.74 (relating to procedures).

§ 155.4. Procedures.

(a) Securing applications. Applications will be secured as follows:

(1) At the point of application, the CAO worker will ask for the Social Security Number (SSN) of an individual for whom application is being made.

(i) If the applicant, or a member of the family group, can provide the SSN, by showing a Social Security Card, the Number will be recorded on the PA/MA application form, and an SSN application for the applicable individual will not be completed.

(ii) If an SSN Card cannot be provided, an SS-5 form will be completed. If the individual has an SSN and remembers it, the number will be recorded on the PA/MA form and entered on the SSN application form in Item 10.

(iii) An SSN application shall be signed by the applicant or, in situations of a child or incompetent person, by the parent or guardian. In these instances, relationship, such as John Smith, Father, will be indicated.

(2) The only situation when the CAO worker may sign for the applicant is if the Department serves as guardian for the individual.

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(3) If the individual is unable to sign his name, the individual shall sign by an "X." Immediately following the "X," the CAO worker will enter "Signed by Mark," and sign the CAO's own name and title as "witness." Forms "Signed by Mark" shall be witnessed by two persons.

(4) If the individual refuses to sign the application for an SSN, the worker should explain to the individual that application for an SSN is an eligibility factor. If the applicant or recipient persists in the refusal to apply for an SSN, he, or an individual in the grant group who does not have an SSN and who refuses to obtain one, will be determined to be ineligible for Cash Assistance (C, CU) or NMP.

(5) The caretaker/relative of a newborn child does not have to apply for an SSN prior to authorization of benefits for the child subject to § 133.23(b)(4) (relating to requirements).

(b) Recording information in case record. Information in case records will be recorded as follows:

(1) Recording of verification of identifying information. Data verification will be entered on the reverse side of the Form PA 21 as follows:

(i) Correct date of birth or age. This will be entered under the heading of "Age." The corresponding line number of the individual from the front of the Form PA 21 will be shown. The date the information was verified and specific information as to how it was verified will be entered.

(ii) Identity. This will be entered under the heading of "Pennsylvania Residence." The corresponding line number of the individual from the front of the Form PA 21 will be shown. The date the information was verified and specific information as to how it was verified will be entered.

(iii) United States citizenship or lawful alien status. This will be entered under the heading of "Citizenship of Foreign Born Persons." The corresponding line number from the front of the Form PA 21 will be shown. The date the information was verified and specific information as to how it was verified will be entered.

(2) Recording of SSN data. Form PA 408 (Verification of Social Security Number) recording the following information will be inserted in the case record:

(i) The line number of the individual from the Form PA 21.

(ii) The date the SS-5 was submitted.

(iii) The SSN of the individual when it is received.

(iv) The date the SSN was verified.

(v) How the SSN was verified.

(165931) No. 211 Jun. 92

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35 § 155.41 PUBLIC ASSISTANCE MANUAL

Source

The provisions of this § 155.4 amended February 7, 1992, effective upon publication and apply retroactively to February 1, 1990, 22 Pa.B. 590. Immediately preceding text appears at serial pages (153042) and (108771) to (108772).

Cross References

This section cited in 55 Pa. Code § 155.74 (relating to procedures).

ENUMERATION PROVISIONS FOR AFDC

§ 155.41. Policy.

In compliance with Federal law, an applicant for and recipient of AFDC cash assistance and nonmoney payment must have a Social Security Number which must be made a part of the case record.

§ 155.44. AFDC enumeration procedures.

(a) Submitting applications. Completed applications for a Social Security Number for AFDC clients will be sent on a daily basis to DPW, Bureau of Data Processing, Post Office Box 2675, Harrisburg, Pennsylvania 17120. The mailings must be in envelopes labelled "Welfare Enumeration" in the lower left corner. BDP will forward the applications to the Social Security Administration which will, in turn, return the Social Security card to the applicant.

(b) Verification of data. The county worker must substantiate identifying information by evidence establishing the following:

(1) Correct date of birth and age. Reference should be made to Appendix B of this chapter.

(2) Identity.

(3) United States citizenship or lawful alien status. Reference should be made to Chapter 149 (relating to citizenship and alienage).

ENUMERATION PROVISIONS FOR GA

§ 155.61. Policy.

Persons applying for or receiving GA are required to have a Social Security Number for purposes of identification and verification.

§ 155.64. Procedures.

(a) Securing numbers for applicants and recipients of GA (D, PD and TD) and SBP (Does not include TB Cases). Procedures for securing numbers for applicants and recipients of GA and SBP are as follows:

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(1) The County or District Office will complete a Form SS-5 for a person eligible for GA and SBP who does not have or is unsure of their Social Security Number and submit the completed Form SS-5 for these categories to the Local District Office of the Social Security Administration.

(2) A strict control of those SBP and GA cases on which an SS-5 form must be maintained by the County/District Assistance Office, and a Form PA 409 (Enumeration Clerical Control Sheet) must be completed. Reference should be made to Sample 2. Any individual grant group or GA or SBP individual grant group who does not have an SSN and who refuses to obtain one will be determined to be ineligible for cash assistance.

(b) SSN feedback to County Assistance Offices on GA and SBP cases. Procedures for SSN feedbacks to County Assistance Offices on GA and SBP cases are as follows:

(1) When a number has been assigned to an individual or individuals in the GA or SBP category, an SSN card will be mailed directly to the applicant at the address shown on the Form SS-5.

(2) It will be the responsibility of the County or District Assistance Office to inform individuals in the GA or SBP categories to immediately provide the County Office with the Social Security Number upon receipt of the SSN card, and to establish controls for appropriate follow-up with the client if the number is not reported within a reasonable period of time.

(c) Verification of data. The county worker must substantiate with evidence the following identifying information:

(1) Correct date of birth and age.

(2) Identity.

(3) United States Citizenship or lawful alien status. Reference should be made to Chapter 149 (relating to citizenship and alienage).

Cross References

This section cited in 55 Pa. Code § 155.74 (relating to procedures); and 55 Pa. Code § 155.84 (relating to MA enumeration procedures).

ENUMERATION PROVISIONS FOR MA FOR THE CATEGORICALLY NEEDY

§ 155.74. Procedures.

Provisions of §§ 155.1, 155.3, 155.4 and 155.64 (relating to policy; requirements; and procedures) will apply to Categorically Needy applicants or recipients.

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55 § 155.84 PUBLIC ASSISTANCE MANUAL

ENUMERATION PROVISIONS FOR MA FOR THE MEDICALLY NEEDY

§ 155.84. MA enumeration procedures.

(a) General. The procedures of § 155.64 (relating to procedures) will apply for MA (Medically Needy) clients. This will include verification of data.

(b) Consent statement. It will be necessary to obtain a consent statement, in duplicate, from each individual, other than the TD category, for whom an SSN application is completed for MA (MNO), giving a copy to the individual and retaining the original in the case record. Do not The statement will not be sent with the Form SS-5. The parent, guardian, foster parent, or other responsible person may sign the statement for a child. Following is a sample of Form PA 296 (Social Security Number Consent Statement), the consent form to be used:

ENUMERATION ENUMERATION PROVISIONS FOR MA FOR THE MEDICALLY NEEDY

Social Security Number Consent Statement "I understand that providing my Social Security Number to the State Agency or the State government lawfully charged with administering the Medical Assistance Program, of the Social Services Act is voluntary. The only use of the Social Security Number to be made to the State Agency is the

administration of the Medical Assistance Program, with no disclosures of such Social Security Number for any other purpose." "I hereby consent to be issued a Social Security Number by the Social Security Administration and to have my Social Security Number released for the aforementioned purposes only."

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(Signature)

DEPARTMENT OF PUBLIC WELFARE

(Date)

PA 296 - 8/75

(165934) No. 211 Jun. 92

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Pt. II

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ENUMERATION

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APPENDIX A. [Reserved]

Source

The provisions of this Appendix A reserved July 11, 1986, effective July 12, 1986, 16 Pa.B. 2524. Immediately preceding text appears at serial pages (29102) to (29107) and (29722).

APPENDIX B. [Reserved]

Source

The provisions of this Appendix B reserved July 11, 1986, effective July 12, 1986, 16 Pa.B. 2524. Immediately preceding text appears at serial pages (29108) to (29110).

APPENDIX C. [Reserved]

Source

The provisions of this Appendix C reserved July 11, 1986, effective July 12, 1986, 16 Pa.B. 2524. Immediately preceding text appears at serial pages (29112), (29725), (29113) to (29118) and (29726).

APPENDIX D. [Reserved]

Source

The provisions of this Appendix D reserved July 11, 1986, effective July 12, 1986, 16 Pa.B. 2524. Immediately preceding text appears at serial pages (29727) to (29728).

APPENDIX E. [Reserved]

Source

The provisions of this Appendix E reserved July 11, 1986, effective July 12, 1986, 16 Pa.B. 2524. Immediately preceding text appears at serial pages (29763) and (29119) to (29120).

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ANNEX B

TITLE 55. PUBLIC WELFARE

PART II. PUBLIC ASSISTANCE MANUAL

Subpart C. ELIGIBILITY REQUIREMENTS

CHAPTER 155. ENUMERATION

155.1. GENERAL PROVISIONS.

APPLICANTS FOR AND RECIPIENTS OF CASH OR MEDICAL ASSISTANCE BENEFITS ARE REQUIRED TO DISCLOSE OR APPLY FOR A SOCIAL SECURITY NUMBER (SSN) AS REQUIRED BY FEDERAL REGULATIONS FOUND AT 42 CFR §435.910, 42 CFR §435.920, AND 45 CFR §205.52 AND SECTION 432.2(b)(3) OF THE PUBLIC WELFARE CODE . ENUMERATION (DISCLOSURE OF OR APPLICATION FOR AN SSN) IS ALSO REQUIRED BY PERSONS APPLYING FOR OR RECEIVING GENERAL ASSISTANCE OR STATE BLIND PENSION IN ACCORDANCE WITH SECTION 432.2(b)(3) OF THE PUBLIC WELFARE CODE, 62 P.S. §432.2(b)(3). THE FEDERAL REGULATIONS AND STATE STATUTE AS CITED ARE INCORPORATED BY REFERENCE.

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TRANSMITTAL SHEET FOR REGULATIONS SUBJECT TO THE **REGULATORY REVIEW ACT**

I.D. NUMBER: 14-425

SUBJECT: ENUMERATION

AGENCY: DEPARTMENT OF PUBLIC WELFARE

TYPE OF REGULATION

Х **Proposed Regulation**

Final Regulation

Final Regulation with Notice of Proposed Rulemaking Omitted

120-day Emergency Certification of the Attorney General

120-day Emergency Certification of the Governor

DATE **SIGNATURE** S

FILING OF REGULATION

ct til 15 (C)

SENATE COMMITTEE ON PUBLIC HEALTH & WELFARE

HOUSE COMMITTEE ON **HEALTH & WELFARE**

DESIGNATION

INDEPENDENT REGULATORY **REVIEW COMMISSION**

ATTORNEY GENERAL

<u>1/16/97</u>

Maya Daig

July 2, 1997

LEGISLATIVE REFERENCE BUREAU