

2. An application on behalf of a deceased person may be made by an interested person who attests to the correctness of the eligibility information on behalf of the deceased.

(6) **PROVIDING CORRECT AND TRUTHFUL INFORMATION.** The applicant, recipient, or person described in sub. (7) acting on behalf of the applicant or recipient is responsible for providing to the agency, the department or its delegated agent, full, correct and truthful information necessary for eligibility determination or redetermination and for disclosing assets which the agency determines may affect the applicant's or recipient's eligibility, including but not limited to health insurance policies or other health care plans and claims or courses of action against other parties on the part of the applicant or recipient. Changes in income, assets or other circumstances which may affect eligibility shall be reported to the agency within 10 days of the change.

(7) **SIGNING THE APPLICATION.** Each application form shall be signed by the applicant or the applicant's caretaker relative, under s. HSS 201.03 (5), legal guardian or authorized representative. The application shall be signed in the presence of an agency representative except when an institution superintendent makes application for public assistance on behalf of a resident pursuant to s. 49.13 (1), Stats. The signatures of 2 witnesses are required when the application is signed with a mark.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

**HSS 102.02 Refusal to provide information.** If a person refuses to provide information necessary for the determination of eligibility, all persons whose eligibility depends upon the withheld information shall be denied eligibility.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

**HSS 102.03 Verification of information.** (1) An application for MA shall be denied when the applicant or recipient is able to produce required verifications but refuses or fails to do so. If the applicant or recipient is not able to produce verifications, or requires assistance to do so, the agency may not deny assistance but shall proceed immediately to verify the data elements.

(2) The agency shall verify those data elements deemed appropriate under the circumstances of the case history for an applicant who has been convicted of public assistance-related fraud, is repaying aid pursuant to an agreement with the district attorney's office, or is known to have provided erroneous information on a previous application which resulted in an incorrect issuance of assistance.

(3) The following items shall be verified when applicable:

(a) Income;

(b) Pregnancy, including a pregnancy which is the basis of nonfinancial eligibility under s. HSS 103.03 (1) (b) 1;

(c) Incapacitation which is the basis of nonfinancial eligibility, unless incapacitation is presumed to exist according to s. HSS 103.03 (1) (e);

(d) Social security number;

(e) Age;

## HSS 102

- (f) Citizenship or alien status;
- (g) Disability, blindness, or both;
- (h) Assets; and
- (i) Residence.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

**HSS 102.04 Eligibility determination.** (1) **DECISION DATE.** As soon as possible but not later than 30 days from the date the agency receives a signed application completed to the best of the applicant's ability, the agency shall conduct a personal interview with the applicant and shall determine the applicant's eligibility for MA. If a delay in processing the application occurs because of a delay in securing necessary information, the agency shall notify the applicant in writing that there is a delay in processing the application, specify the reason for the delay, and inform the applicant of his or her right to appeal the delay under ss. 49.45 (5) and 49.50 (8), Stats. If medical examination reports are needed to determine disability or blindness, the agency shall make the disability decision no later than 60 days from the date the agency receives the signed application.

(2) **NOTICE OF DECISION.** The agency shall send timely and adequate notice to applicants and recipients to indicate that MA has been authorized or that it has been reduced, denied or terminated. In this subsection, "timely" means in accordance with s. 49.19 (13), Stats., and "adequate notice" means a written notice that contains a statement of the action taken, the reasons for and specific regulations supporting the action, and an explanation of the individual's right under ss. 49.45 (5) and 49.50 (8), Stats., to request a hearing and the circumstances under which aid will be continued if a hearing is requested.

(3) **REVIEW OF ELIGIBILITY.** A recipient's eligibility shall be redetermined:

(a) When information previously obtained by the agency concerning anticipated changes in the individual's situation indicates the need for redetermination;

(b) Promptly after a report is obtained which indicates a change in the individual's circumstances that may affect eligibility;

(c) Within 6 months after the date initial eligibility is determined for AFDC-related persons;

(d) Within 365 days after the date eligibility was last determined for SSI-related persons except that when a person is determined to be permanently disabled no further determination shall be made of that disability unless the agency becomes aware of information that would affect the determination of permanent disability; and

(e) At any time the agency has a reasonable basis for believing that a recipient is no longer eligible for MA.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

**HSS 102.05 Fraud.** When the agency director or a designee has reason to believe that fraud has been committed by an applicant or recipient, or Register, June, 1990, No. 414

by the representative of an applicant or a recipient, the case shall be referred to the district attorney.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.