



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Transitional Assistance
600 Washington Street • Boston, MA 02111


DEVAL L. PATRICK
Governor

TIMOTHY P. MURRAY
Lieutenant Governor

JUDYANN BIGBY, M.D.
Secretary

JULIA E. KEHOE
Commissioner

Field Operations Memo 2007- 57
Date: October 26, 2007

To: Transitional Assistance Office Staff
From:  John Augeri, Assistant Commissioner for Field Operations
Re: Returned Mail Procedural Changes

Overview

This Field Operations Memo explains changes to how AU Managers are to process client mail returned to the TAOs. These revisions are designed to minimize confusion for clients, avoid unnecessary termination of benefits to clients residing in Massachusetts, and eliminate unnecessary work for AU Managers.

The procedures outlined in this memo do not apply to Food Stamp Transitional Benefits Alternative (TBA) and Food Stamp Universal Semi-Annual Reporting (USR) AUs.

Procedural Changes

When client mail is returned to the TAO, prior to closing the case, the AU Manager must:

- call the client if a phone number is available in the case record, and leave a message if the client has an answering machine. If there is no client response within three days, one follow-up call should be made.

Note: If the client's phone number is not available, the AU Manager should contact the individual listed in the Assisting Person section of the RFA, if any, and ask that individual to relay the information to the client. Each call should be documented on the BEACON Narratives Tab;

**Procedural
Changes (cont.)**

- if contact is successful and the client has not moved, inform the client that his/her name must be on the mailbox to ensure delivery, and confirm that the spelling of the name is correct. In cases of mailbox tampering or frequent misdirected mail, discuss the option of whether a Post Office Box would provide an acceptable solution.
- if telephone contact is successful and the client has moved, mail a VC-1 to the new address following current procedures for requesting verifications;
 - once verification is received, update BEACON with the client's new address
NOTE: if the address is temporary, be sure to update BEACON with the appropriate mailing address.
 - if the client has moved out of state, close the case following current procedures.

IMPORTANT: If the client has a heightened level of security (Social Security Number appears in red on BEACON), do not contact the client by phone.

If the AU Manager is unsuccessful in reaching the client by phone or through third-party contact, resend the returned mail, accompanied by a completed 'Notice of Returned Mail' (Attachment A) asking the client to contact the AU Manager to resolve the problem. Place a copy of the returned mail in the case record.

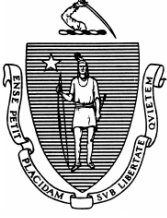
The 'Notice of Returned Mail' has been added to Online Forms in Policy Online. The notice tells the client to contact his or her AU Manager, provides contact information, a timeframe for response (within five days), and advises the client of the potential loss of benefits if contact is not established within the timeframe.

If the second mailing to the client is also returned, close the case. On the AU Composition Results window, select the Reason Category of "Residency" and the closing reason "Whereabouts Unknown." Selecting this reason will ensure that the client receives a 10-day advance closing notice.

If the client responds before the termination of benefits is effective, remove the pending closing transaction and issue a VC-1 requiring verification of the address. If the client fails to supply verification within the 10-day time-frame and does not report difficulty, the AU Manager should initiate the case closing on the AU Composition Results window by selecting the Reason Category of "Noncooperation" and the closing reason of "Fail to Submit the Required Verifications."

Questions

If you have any questions, please have your Hotline designee call the Policy Hotline at 617-348-8478.



Massachusetts Department of Transitional Assistance

Notice of Returned Mail

Name _____

Address _____

City/State/ZIP _____

Dear _____,

Enclosed with this notice is mail that has been returned to the Department of Transitional Assistance (DTA) as undeliverable.

Please contact your worker: _____
(Worker Name)

at _____ by _____
(Phone Number) (Date)

to resolve this problem.

Your benefits may stop if you do not contact your worker by the date shown above.

You will receive a separate notice if your benefits are going to stop.