



Date: February 14, 2019

DMS Operations Memo 19-07

Amendment 1: March 1, 2019

Amendment 2: May 31, 2019

To: Income Maintenance Supervisors
Income Maintenance Lead Workers
Income Maintenance Staff

Affected Programs:	
<input type="checkbox"/> BadgerCare Plus	<input type="checkbox"/> Caretaker Supplement
<input type="checkbox"/> FoodShare	<input type="checkbox"/> FoodShare Employment and Training
<input checked="" type="checkbox"/> Medicaid	
<input type="checkbox"/> SeniorCare	

From: Rebecca McAtee, Bureau Director
Bureau of Enrollment Policy and Systems
Division of Medicaid Services

Reasonable Compatibility for Assets for Medicaid

CROSS REFERENCE

- Operations Memo [18-14](#)
- Medicaid Eligibility Handbook, [Chapter 16 Assets](#), [Section 20.3 Mandatory Verification Items](#), and [Section 20.10 Verification Resources](#)
- Process Help, [Section 50.4 Asset Verification System \(AVS\)](#)

EFFECTIVE DATE

March 2, 2019
Amendment 2 effective June 22, 2019

PURPOSE

This operations memo announces a change to the asset verification policy for people applying for or enrolled in Medicaid for the Elderly, Blind, or Disabled (EBD Medicaid) including Medicaid Purchase Plan (MAPP), Medicare Savings Programs (MSP), and long-term care programs. For the purposes of this memo, long-term care eligibility includes institutional Medicaid and home and community-based waiver programs. The change will entail the use of a “reasonable compatibility” test to determine whether an income maintenance (IM) agency must request proof of assets from the applicant or member rather than relying solely on asset information returned by the asset verification system (AVS). This memo also announces changes to CARES to accommodate the change in policy.

BACKGROUND

When the federally required AVS for Medicaid was implemented in June 2018 (see [Operations Memo 18-14](#)), agencies were directed to use AVS-returned information as verification of assets, even if this information would result in a termination or denial.

To comply with recent guidance received from the Centers for Medicare & Medicaid Services, CARES will be enhanced to apply a reasonable compatibility test when determining asset eligibility for EBD Medicaid. With this enhancement, Wisconsin's AVS will comply with federal requirements to:

- Use information from a data exchange instead of requesting verification from individuals whenever possible.
- Never deny or terminate eligibility based on information from a data exchange.

OVERVIEW OF CHANGES TO WORKER PROCESS

- **AVS and Self-Reported Asset Amounts:** The Liquid Assets page will be updated so that workers will track AVS-returned asset amounts separately from asset amounts reported and/or verified by individuals.
- **Balance Date:** When an individual submits verification for a liquid asset, IM workers and financial employment planners (FEPs) will be required to record the balance date reflected in the verification document on the Liquid Assets page if the individual is requesting health care or MSP.
- **Verification Codes:** When processing an AVS response, workers will now select **DE – Data Exchange** for the self-reported amount verification only when the Self-Reported Amount is identical to the AVS Amount. If the two amounts are different (even by one cent), the worker should select **Q?** for the Self-Reported Amount verification, unless the individual provided a bank statement or other proof of the asset that can be used as verification because it reflects a more recent balance than the AVS-returned balance. After eligibility is run, a reasonable compatibility test will be applied to determine if self-reported assets and AVS-returned assets result in the same eligibility outcome. If they do, no further verification will be requested. If the individual appears to be ineligible based on information from AVS, then verification must be requested.
- **Burial Assets and Annuities:** Because a reasonable compatibility test cannot be applied to burial assets and annuities, workers should no longer use the AVS response for burial assets and annuities as verification. Information returned from AVS for these assets will be informational only. Workers should request additional information and/or verification for burial assets and annuities when appropriate.
- **Liquid Asset Change Reports:** To ensure that reasonable compatibility tests are based on recent information from AVS, CARES will now automatically initiate AVS requests for unverified, member-reported changes in liquid asset amounts and newly reported liquid assets during the certification period. As with applications and program adds, workers will receive AVS alerts to prompt them to take the needed actions on the case.

POLICY

Effective March 2, 2019, the reasonable compatibility test will be used in the asset eligibility determination for EBD Medicaid. This policy change does not alter other program requirements for which assets must be verified or how assets are counted for program eligibility. See the Medicaid Eligibility Handbook, [Section 16.1 Assets Introduction](#), for more information.

As defined in federal regulations, information from an electronic data source (in this case, AVS) is reasonably compatible if it results in the same eligibility outcome as self-reported information.

- If the individual reports assets that are above a given asset limit, the self-reported asset information will be used to deny or terminate health care benefits, regardless of what the outcome would be from using AVS information. Verification is not required.

- If both AVS and the self-reported information put the individual’s total countable assets below a given asset limit, the two data sources are considered to be reasonably compatible and further verification may not be requested or required.
- If AVS puts the individual’s total countable assets above a given asset limit, but the self-reported information puts his or her total countable assets below that same limit, the two data sources are not reasonably compatible and further verification is required as a condition of eligibility.

DETERMINATION OF REASONABLE COMPATIBILITY

The reasonable compatibility test will be performed during the eligibility determination for EBD Medicaid if there is an AVS-returned amount for at least one unverified AVS-liquid asset-type. To determine reasonable compatibility, CARES will perform the following calculations:

Calculation	Description
1: Total Countable Assets (Self-Reported)	Sum of all the self-reported amounts for all countable assets. If the self-reported countable assets are over the asset limit, eligibility will fail right away and no reasonable compatibility test will be performed.
2: Total Countable Assets (AVS and/or Self-Reported)	Sum of the following: <ul style="list-style-type: none"> • All verified, countable asset amounts. • For all countable AVS liquid assets, if an AVS amount was returned for an asset and that asset has not been verified, the higher of the AVS-returned or the unverified self-reported amounts. • All unverified, self-reported countable asset amounts with no AVS match, including non-AVS assets. • All countable AVS-assets liquid assets for which an AVS amount is listed that were not reported.

CARES will compare the results of calculations 1 and 2 to determine reasonable compatibility.

- **If reasonably compatible**, verification of the AVS-matched asset amounts will not be requested, and eligibility will not pend for verification of these assets, even when there is a ?, Q?, WN, NV, or QV in the verification field. If otherwise eligible, the individual will receive a Notice of Decision listing the self-reported asset amounts. If eligibility is pending for other assets, a Verification Checklist will be sent.
- **If not reasonably compatible**, a Verification Checklist will be sent to the individual to request verification for all assets for which the individual has not already provided verification. If the individual does not provide the requested verification by the due date, eligibility will be denied or terminated for lack of verification.

Note: When there is an MSP request in addition to a request for EBD Medicaid, an additional, separate reasonable compatibility determination will be performed for MSP. In situations where the assets are reasonably compatible for MSP but exceed the asset limit for other programs, the individual may enroll in MSP without being required to provide further verification of assets for that program.

If an individual is applying for health care and has also requested MAPP, the reasonable compatibility test may provide different results based on the EBD Medicaid and MAPP asset limits. Because CARES considers these two programs to be part of the same health care request, the reasonable compatibility test

will be performed using the MAPP asset limits only if the individual is found ineligible for EBD Medicaid because of excess assets or failure to provide verification of assets. This means an individual can still be eligible for MAPP based on the reasonable compatibility test for assets, even if they failed to submit verification of assets as required for EBD Medicaid (see Example 2 below).

If the worker is running with dates and an AVS amount is entered for a given asset, the reasonable compatibility test will be performed as long as the eligibility month is June 2018 or later.

The following examples show various results of the reasonable compatibility test.

Example 1: Lauren applies for EBD Medicaid and reports the following asset amount, without providing verification:

A. Savings account: \$5

AVS returns the following information and the worker processes the information as shown:

- Savings account: \$200 | Match with A
- Undisclosed checking account: \$800 | Add as new information

Reasonable Compatibility Determination

- EBD Medicaid Asset Limit: \$2,000
- 1. Total Countable Assets (Self-Reported): \$5
- 2. Total Countable Assets (AVS and/or Self-Reported Data Sources): $\$200 + \$800 = \$1,000$
- Result: **Reasonably Compatible**, because the sum of both calculations is less than the asset limit.

No further verification is requested from Lauren. A Notice of Decision is sent, listing only the self-reported amount.

Example 2: Mike applies for EBD Medicaid with a MAPP request and reports the following asset amounts, without providing verification:

A. Checking account: \$500

B. Savings account: \$700

C. Savings bond: \$300 (non-AVS asset)

AVS returns the following information and the worker processes the information as shown:

- Checking account: \$800 | Match with A
- Savings account: \$400 | Match with B
- Undisclosed checking account: \$900 | Add as new information

Reasonable Compatibility Determination for EBD Medicaid

- EBD Medicaid Asset Limit: \$2,000
- 1. Total Countable Assets (Self-Reported): $\$500 + \$700 + \$300 = \$1,500$
- 2. Total Countable Assets (AVS and/or Self-Reported Data Sources): $\$800 + \$700 + \$900 + \$300 = \$2,700$
- Result: **Not Reasonably Compatible**, because the sum of countable assets from data sources is above the EBD Medicaid asset limit.

In this case, the \$700 savings account amount is used when calculating the total countable assets based on data sources, as it is the higher of the self-reported and AVS-returned information. A Verification Checklist is sent to Mike. All self-reported assets and the undisclosed checking account returned by AVS are included in the Proof Needed section.

If Mike provides verification of his assets and is found to be over the \$2,000 asset limit for EBD Medicaid, CARES will then consider his MAPP eligibility without a reasonable compatibility test because all assets have been verified. If he meets all financial and nonfinancial rules for MAPP, his MAPP eligibility will be approved.

However, if Mike provides verification of his savings bond (the non-AVS asset) but fails to verify his checking and savings accounts, CARES will consider his MAPP eligibility using a reasonable compatibility test based on the MAPP asset limit.

Reasonable Compatibility Determination for MAPP

- MAPP Asset Limit: \$15,000
- 1. Total Countable Assets (Self-Reported): $\$500 + \$700 + \$300 = \$1,500$
- 2. Total Countable Assets (AVS and/or Self-Reported): $\$800 + \$700 + \$900 + \$300 = \$2,700$
- Result: **Reasonably Compatible**, because the sum of countable assets from data sources is below the MAPP asset limit.

No further verification is requested from Mike. A Notice of Decision is sent, listing only the self-reported amounts.

Example 3: Tasha applies for EBD Medicaid and MSP and reports the following asset amounts, without providing verification:

- A. Checking account: \$1,000
- B. Savings account: \$500

AVS returns the following information and the worker processes the information as shown:

- Checking account: \$2,000 | Match with A
- Savings account: \$2,500 | Match with B

Reasonable Compatibility Determination for EBD Medicaid

- EBD Medicaid Asset Limit: \$2,000
- 1. Total Countable Assets (Self-Reported): $\$1,000 + \$500 = \$1,500$
- 2. Total Countable Assets (AVS and/or Self-Reported Data Sources): $\$2,000 + \$2,500 = \$4,500$
- Result: **Not Reasonably Compatible for EBD Medicaid** because the sum of countable assets from data sources is above the EBD Medicaid asset limit.

Reasonable Compatibility Determination for MSP

- MSP Asset Limit: \$7,730
- 1. Total Countable Assets (Self-Reported): $\$1,000 + \$500 = \$1,500$
- 2. Total Countable Assets (AVS and/or Self-Reported Data Sources): $\$2,000 + \$2,500 = \$4,500$
- Result: **Reasonably Compatible for MSP** because the sum of countable assets from data sources is below the MSP asset limit.

A Verification Checklist is sent to Tasha to request verification of the checking and savings account for EBD Medicaid. However, if Tasha does not return verification of these accounts, she will remain eligible for MSP.

CARES

The enhancements described in this section will be implemented in CARES Worker Web (CWW) on March 2, 2019, and the reasonable compatibility test will be applied to any eligibility determinations made after this date.

CHANGES TO LIQUID ASSETS PAGE

The Liquid Assets page will be enhanced to allow for separate tracking of self-reported and AVS-returned asset amounts.

A new **AVS Amount** field will be added to the Liquid Assets page ~~and will only be updateable for AVS asset types~~. When the worker adds or matches AVS information while processing the AVS response on the AVS Asset Match page, this field will be populated automatically with the amount returned from AVS for the balance month that was matched or added. If there is a backdate request, the worker must manually update the AVS Amount field with information received from AVS for each month of the backdate request. If AVS does not return a match for an asset, this field should remain blank.

The name of the current Asset Amount field will be changed to **Self-Reported Amount** to distinguish it from the AVS Amount.

Figure 1 Liquid Assets Page

A new **Balance Date** field will be added in association with the Self-Reported Amount field. This field will be enabled only if there is a request for health care or MSP. The Balance Date field will be required for both IM workers and FEPs if there is a request for health care or MSP on the case, the individual has provided proof of the asset amount, and a valid verification code has been selected for the Self-Reported

Amount verification. Workers must enter the balance date reflected on the verification provided. When verification is provided for a backdate request, the worker will enter a new begin month for each month of the backdate request and record the appropriate balance date for each month.

Example 4: Tonya provides a bank statement that was issued by her bank on February 5, 2020. The statement shows the transaction history for the month of January 2020, from January 1-31. The worker should enter a balance date of **01/31/2020**, even though the statement date is 02/05/2020.

Example 5: James prints out and submits the transaction history from his online banking account on March 14, 2019. The worker should enter a balance date of **03/14/2019**.

The Balance Date field is intended to help the worker determine whether the self-reported asset information or AVS-returned asset information is more current. If the verification provided by the individual is more current, the worker must record the verification type provided, and that asset will be considered verified.

If the AVS information is more current, then the worker must select **Q?** for the Self-Reported Amount verification and blank out the date listed in the Balance Date field. The Q? must be used so that a reasonable compatibility test will be performed during the eligibility determination and, if not reasonably compatible, the verification request will be in the Proof Needed section of the Verification Checklist. As a reminder, AVS information is always from the first minute of the first day of a given month.

Example 6: Jack has a renewal due December 31, 2019. In preparation for the upcoming renewal, CARES requests AVS information on the second Saturday of October 2019. When Jack completes his renewal in ACCESS, he submits a printout of the transaction history from his online banking with a balance date of November 30, 2019. While processing the renewal, the worker matches the AVS response to Jack's existing liquid asset. The worker enters the balance amount shown on Jack's printout and enters **11/30/2019** as the balance date. The worker selects the appropriate verification code for the asset amount and type, because Jack's printout is more current than the AVS information for the account. When the worker runs eligibility, no reasonable compatibility test is performed.

Example 7: Mabel applies for MSP on April 15, 2019, and provides a bank statement that shows her account balance as of March 20, 2019. AVS returns balance information for the filing month of April with a different balance than the bank statement Mabel provided. Because the AVS information is more recent than Mabel's bank statement, the worker selects **Q?** for the asset amount verification. The reasonable compatibility test is performed when the worker runs eligibility. The countable assets are determined to be reasonably compatible for MSP, and no further verification is requested from Mabel.

Example 8: Jane applies for health care in February 2020 and provides a bank statement with a balance date of January 31, 2020, as verification for her checking account. AVS returns results that reflect the checking account balance as of the first minute of February 1, 2020. In this situation, the worker should consider the bank statement to be as recent as the AVS information. The worker uses Jane's printout as verification of the self-reported amount. No reasonable compatibility test will be performed.

DATA CONVERSION

When CWW is updated on March 2, 2019, the following conversions will occur:

- For all liquid assets with a valid verification code for amount verification, the Balance Date will be populated with **3/2/19**.
- For the most current sequence of any AVS liquid asset type in which the amount verification code is DE, the AVS Amount will be populated with the value currently in the “Amount” field.
- Any existing, **non-AVS liquid asset type** sequences with DE as the verification code for the Self-Reported Amount (formerly labeled Asset Amount), will be updated to **CV-Conversion** for the amount verification, which will then be blanked out at the next health care renewal. A page-level comment describing the change will be added. This conversion is needed because the DE verification code can only be used in situations where the Self-Reported Amount and AVS Amount are exactly the same, but the AVS Amount field will be disabled for non-AVS liquid asset types.

CHANGES TO ASSET SUMMARY PAGE

On the Asset Summary page, in the “Liquid Assets” section, the Amount field label will be changed to Self-Reported Amount to be consistent with the field name on the Liquid Assets page.

Row	Individual	Begin Month	End Month	Last Updated	Delete Reason	Seq	Account #	Type	Self-Reported Amount
	67F PP	01/2019		01/14/2019		2		SAVINGS ACCOUNT	\$0.00
	67F PP	01/2019		01/14/2019		1		CHECKING ACCOUNT	\$300.00

Figure 2 Asset Summary Page

CHANGES TO AVS ASSET MATCH PAGE

On the AVS Asset Match page, in the “Liquid Asset Case Information” section, the Amount field label will be changed to Self-Reported Amount to be consistent with the field name on the Liquid Assets page.

Request Date	Individual	From	To	Response Due Date	Status	Requested by
01/14/2019	67F PP	09/2018	12/2018	01/14/2019	Response Received	CARES

Row	Institution Name	Account Number	Account Type	Begin Month	End Month	Self-Reported Amount	Last Updated	Seq
A	US BANK	7777	CHECKING ACCOUNT	01/2019		\$300.00	01/14/2019	1
B	BANK OF AMERICA	3344	SAVINGS ACCOUNT	01/2019		\$150.00	01/14/2019	3

Figure 3 AVS Asset Match Page

CHANGES TO WORKER PROCESSING OF AVS RESPONSE

When the worker processes an AVS response on the AVS Asset Match page, the AVS amount will be populated automatically on the Liquid Assets page. The fields will be populated differently depending on whether the worker matches the AVS-returned asset information with an existing asset sequence or adds it as a new asset sequence.

AVS RESPONSE MATCHED WITH EXISTING SEQUENCE

If the worker matches the AVS response with an existing liquid asset, the Liquid Assets page will be scheduled with an AVS conflict panel for additional worker actions. The AVS-returned asset amount will be populated automatically in the AVS Amount field when the worker reaches the asset page. The worker will complete any conflict panel actions and click **Update**.

Verifying Asset Amount

- If the self-reported amount **exactly matches** the AVS amount, the worker should select **DE** for the Self-Reported Amount verification. (CWW will only allow the worker to select **DE** if the two amounts are the same.)
- Workers may also select **DE** if the individual has reported that an account is closed and AVS reports a zero balance for that account.
- For all unequal matches, the worker should select **Q?** for the Self-Reported Amount verification if the individual has not provided more recent verification of the asset.

Verifying Asset Type

- When matching a new AVS response with an existing asset sequence, the worker should not update the verification code for a previously verified asset type. CWW will now allow workers to select **?** or **Q?** for the asset amount verification without updating ~~the~~ **an** existing **valid verification for** asset type **verification**.
- If the asset type was previously reported and unverified, the worker should select **DE** for the asset type verification.

Note: If a value has been entered in the AVS Amount field, workers must use **Q?** for the asset amount verification so that the asset is listed in the Proof Needed section of the Verification Checklist. Selecting **?** would cause the asset to appear in the FYI section of the Verification Checklist, indicating that the agency is checking its data sources, which is not appropriate because AVS has already returned a value.

Liquid Assets Cancel Reset

The following events have occurred:

- AE286: There are no conflicts with the client reported information.
- AE281: Existing case information is displayed on this page.

Completed 0 of 2

Effective Period

* Begin Month: 01 / 2019 End Month: MM / YYYY Last Updated: 01/14/2019

Delete Reason:

Additional Information

* Individual: 67F PP Sequence: 3

* Type: SA - SAVINGS ACCOUNT * Verification: BS - BANK STATEMENT

* Jointly Owned? N - No * Available? Y - Yes

* Burial? N - No

* Self-Reported Amount: \$ 150 . 00 * Verification: Q? - QUESTIONABLE NOT YET VERIFIE

Balance Date: 12 / 20 / 2018

AVS Amount: \$ 152 . 00

Independence account information

Figure 4 Liquid Assets Page: AVS Response Matched with Existing Asset Information

AVS RESPONSE ADDED AS NEW SEQUENCE

On the AVS Asset Match page, if the worker selects the option to add a new sequence, a new sequence of the Liquid Assets page will be scheduled for the AVS liquid asset information to be completed.

- The AVS Amount will be populated with the asset amount from AVS.
- The Self-Reported Amount will be populated with a value of \$0.
- The Self-Reported Amount Verification will be populated with Q?.
- The Type Verification will be populated with DE.

Figure 5 Liquid Assets Page: AVS Response Added as New Information

MANUALLY ENTERING THE AVS “PLEASE REVIEW” RESPONSE:

After June 22, 2019, when AVS returns a value for a liquid asset and “Please Review” is displayed in the “What would you like to do?” field on the AVS Asset Match page, workers will be able enter the AVS amount manually on the Liquid Assets page so the asset can be included in the reasonable compatibility test.

When manually updating or adding a liquid asset sequence based on AVS information:

- Enter the AVS-returned amount in the AVS Amount field.
- If the asset was previously unreported, enter \$0 in the Self-Reported Amount field and select Q? for the Self-Reported Amount verification.
- For existing assets, select Q? for the Self-Reported Amount verification unless it is exactly the same as the AVS Amount. If the amounts are identical, select DE.
- Select DE for the Type verification unless the asset type has already been verified.

AVS RESPONSE RECEIVED FOR NON-AVS LIQUID ASSET TYPE

CWW does not include non-AVS liquid asset types (for example, IRAs) in the reasonable compatibility test. However, AVS information can still be used to verify a liquid asset that is not an AVS liquid asset type in CWW, as long as the amount received from AVS matches the Self Reported amount exactly.

When the AVS information and the Self-Reported Amount match exactly for a non-AVS liquid asset type, the worker will take the following actions:

- Update the Asset Type Verification to DE.
- Update the Self Reported Amount Verification to **OW-Other Acceptable Written Statement.**
- Enter a page level comment to indicate that AVS information was received for the asset.

LIQUID ASSETS PAGE CONFLICT PANEL

When AVS information is matched from the AVS Asset Match page, neither the self-reported nor AVS-returned asset amounts will be displayed on the Liquid Assets page conflict panel. Instead, the AVS-returned value will be populated automatically in the AVS Amount field of the Liquid Assets page.

Liquid Assets					Cancel <input type="checkbox"/>	Reset
The following conflicts have occurred.						
Select either CARES or Client Reported Information						
	Field	<input type="radio"/>	CARES Information	<input type="radio"/>	AVS Reported Information	
1	Begin Month	<input type="radio"/>	12/2018	<input checked="" type="radio"/>	01/2019	
2	Account Number	<input type="radio"/>	<BLANK>	<input checked="" type="radio"/>	7777	
3	Name	<input type="radio"/>	<BLANK>	<input checked="" type="radio"/>	US BANK	
						Update

Figure 6 Conflict Panel: AVS and Case Information

If there is no conflicting information between the existing CARES information and the AVS response, the conflict panel will not be displayed at all.

In instances where both the self-reported information from ACCESS and the AVS-returned information are available, the conflict panel will continue to be in read-only mode for any conflicting ACCESS or AVS information, and the Update button will continue to be disabled. The AVS-returned value will be populated automatically in the AVS Amount field of the Liquid Assets page. The worker will have to update the other conflicting fields on the Liquid Assets page manually.

REASONABLE COMPATIBILITY TEST

The reasonable compatibility test described in the policy section of this memo will be performed during the eligibility determination (online and batch) for EBD Medicaid if there is a value listed in the AVS Amount field on at least one AVS liquid asset type sequence, and one of the following verification codes is entered for the asset amount on that sequence:

- ? - NOT YET VERIFIED
- Q? - QUESTIONABLE NOT YET VERIFIED
- WN - NOT VERIFIED W-2 OR CHILDCARE
- QV - QUESTIONABLE NOT VERIFIED
- NV - NOT VERIFIED

Eligibility rules will be applied to evaluate the outcome of the nonfinancial, income, asset, and reasonable compatibility tests to determine whether to send out a Verification Checklist.

Note: When verification of assets is requested from the individual, this verification request will be displayed on the Verification Checklist page, the Pending and Not Verified Information page, and in ACCESS (desktop and mobile).

CHANGES TO ASSETS DETERMINATION SUMMARY PAGE

On the Assets Determination Summary page, a new “Reasonable Compatibility Results” section will display information about the reasonable compatibility determination, when available.

Assets Determination Summary Cancel

Assistance Group Overview

Assistance Group: **MS - SSI RELATED MA FOR AGED, BLIND AND DISABLED (CAT NDY)** Sequence: **1**

Benefit Begin Date: **03/01/2019** Benefit End Date:

Determination Date: **01/28/2019**

Results

Assistance Group Status: **P - PEND** Eligibility Status: **PENDING**

Assets Eligibility Determination Results: **PENDING** FoodShare Categorically Eligible: **No**

Counted Assets

Vehicle Assets:	\$	—
Liquid Assets:	+	450.00
Real Property Assets:	+	—
Personal Property Assets:	+	—
Life Insurance Assets:	+	—
Lump Sum Assets:	+	—
Burial Assets:	+	—
Deemed Assets:	+	— <input type="button" value="⊕"/>
Assets Allocated Out:	—	—
Assets Allocated In:	+	—
Total Counted Assets:	\$	450.00
Asset Limit:	\$	2,000.00 <input type="button" value="⌵"/>
Overage Amount:	\$	—

Reasonable Compatibility Results

Asset Limit:	\$ 2,000.00
Total Countable Assets (Self-Reported):	\$ 450.00
Total Countable Assets (AVS and/or Self-Reported):	\$ 652.00
Test Results:	Reasonably Compatible

Assistance Group: **MS - SSI RELATED MA FOR AGED, BLIN** Sequence: Updated on or before: MM/DD/YYYY

Figure 7 Reasonable Compatibility Results on Assets Determination Summary page

The following fields will be displayed in the new section:

- **Asset Limit:** Asset limit for the selected Assistance Group, used to perform the reasonable compatibility test.
- **Total Countable Assets (Self-Reported):** Total asset amount from the reported assets calculation.
- **Total Countable Assets (AVS and/or Self-Reported):** Total asset amount from the data sources calculation.
- **Test Results:** Result of the reasonable compatibility test (Reasonably Compatible or Not Reasonably Compatible)

As a reminder, distinct reasonable compatibility tests will be performed for EBD Medicaid (including MAPP and long-term care) and MSP. Workers may see different test results on the Assets Determination Summary page for these two programs.

CLEARING THE AVS AMOUNT FOR RENEWALS

To prevent outdated AVS amounts from being used in the reasonable compatibility test during renewals, the AVS Amount field and other information on the Liquid Assets page will be cleared as follows:

During the **health care renewal** driver flow, CWW will automatically clear the following fields:

- AVS Amount
- Balance Date
- Verification code for Self-Reported Amount

If a new AVS response is being added or matched on the AVS Asset Match page at the same time as part of the health care renewal driver flow, the new AVS amount will be populated in the AVS Amount field.

During the **W-2 renewal** driver flow, CWW will automatically clear the following fields:

- Balance Date
- Verification code for Self-Reported Amount

For all programs, the reported amount, account type, and account type verification will be retained during renewal.

For nonrenewal scenarios, such as reapplication or a change report, the Self-Reported Amount, Balance Date, and AVS Amount fields will not be cleared automatically. When processing a reapplication or change report, the worker must update the verification codes appropriately and manually clear the Balance Date and AVS Amount fields.

AUTOMATIC AVS REQUESTS FOR REPORTED CHANGES TO LIQUID ASSETS

CWW will automatically initiate an AVS request if a case is open and ongoing or closing at the end of the month for EBD Medicaid and the worker adds or updates a self-reported asset amount on the Liquid Assets Page and the amount is not yet verified (?/Q?/WN). AVS will request asset information for the current month and the two months prior to the current month. However, if the change is recorded between the second Saturday of the 10th month of the certification period and the end of the certification period, a request will not be sent automatically. This is because a request has already been sent as part of the renewal process.

Note: AVS requests will not be triggered by changes to the Burial Assets page or the Life Insurance Assets page.

CONTACTS

BEPS CARES Information and Problem Resolution Center

DHS/DMS/BEPS/AA and JN