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**Glossary**

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**DEFINITIONS: A**

**Able-Bodied Adult without Dependent Children (ABAWD):** An individual who receives food stamps, does not have a dependent child in the assistance group (AG) and is subject to a three-month limit unless meeting a 20-hour per week work requirement.

**Administrative Disqualification Hearings:** Hearings conducted by Office of Appeal Hearings when DCF has sufficient documentary evidence to prove an individual has intentionally committed one or more program violations, but the violations and/or case facts do not warrant criminal prosecution.

**Adoption Subsidy:** Title IV-E and Non-Title IV-E benefits for Child In Care (CIC) adopted children with special needs. Only Medicaid benefits are provided through FLORIDA.

**Adult Family Care Homes (AFCHs):** State approved residences that provide (for a period exceeding 24 hours) housing, food and appropriate care for one to five adults as a surrogate family. Adult family care home residents must be assessed by the Adult Services counselor as needing normal/minimal or moderate level of care and require minimal supervision or protective oversight to prevent institutionalization.

**Adult Living Facility (ALF):** A state licensed group living facility or residence for adults that provides housing, food service, and personal services for special need individuals who would otherwise be institutionalized because they cannot maintain themselves independently.

**Advance Payments of the Premium Tax Credit (APTC):** Tax credits provided to an eligible individual enrolled in a qualified health plan through the Federally Facilitated Marketplace (FFM).

**Adverse Action:** Action taken to reduce or terminate benefits.

**Affordable Care Act (ACA):** The Patient Protection and Affordable Care Act of 2010 (Pub. L. 111-148), as amended by the Health Care and Education Reconciliation Act of 2010 (Pub. L. 111-152), as amended by the Three Percent Withholding Repeal and Job Creation Act (Pub. L. 112-56).

**Aged:** Descriptive of an individual age 65 or older.

**Agency for Health Care Administration (AHCA):** Florida department responsible for administering health care programs; DCF determines eligibility for the Agency.

**Aid and Attendance:** A special Veterans Administration allowance most often paid to persons in a nursing home who require the constant assistance of another person to help with personal needs.

**Aid to Families with Dependent Children (AFDC):** The Title IV-A Program that provided cash assistance to needy families with dependent children or pregnant women in their ninth month or third trimester prior to the implementation of the Temporary Cash Assistance Program (TCA) in 1996.

**Allocation of Income:** The process to allow a portion of the institutionalized individual's income to be set aside to meet the needs of specific dependents in the community.

**Applicant:** An individual, who directly, or through an authorized or designated representative, submits a signed and dated application, completes an interactive interview when required and chooses to apply for benefits.

**Application:** A telephonic, paper or web-based document which, when signed, dated and submitted, serves as official notice that an individual wishes to receive assistance.

**Application Process:** The process of determining eligibility or ineligibility for available benefits. It begins with the date of application and ends with the determination of ineligibility or the authorization of benefits.

**Appropriate Placement:** Placement in the program or facility certified to provide the type and level of care that the Department has determined the individual requires.

**Assets:** Certain holdings, cash or property with a value that must be evaluated during the eligibility determination (also referred to as resources).

**Assistance Group (AG):** All individuals within the standard filing unit (SFU) who are potentially eligible for benefits or services.

**Authorized Representative:** (for food stamps) An adult non-household member authorized to act on behalf of the household to make application for benefits.

**Automated Community Connection to Economic Self-Sufficiency (ACCESS):** Program Office in the Department of Children and Families (DCF) that determines eligibility for food stamps, Temporary Cash Assistance (TCA) and Medicaid.

**Auxiliary Payments:** Benefits provided to the individual for any situation that requires an issuance other than recurring benefits.

**DEFINITIONS: B**

**Beneficiary and Earnings Data Exchange (BENDEX):** A data exchange source (federal match) that provides benefit information on SSA recipients and updates as changes occur.

**Beneficiary and Earnings Exchange Record (BEERS):** A data exchange source (federal match) that provides income information reported to the Social Security Administration (SSA).

**Benefit:** The total value of food and temporary cash assistance an AG is authorized to receive each month.

**Benefit Representative:** An individual designated to obtain and use food stamps for the AG.

**Blindness:** Central visual acuity of 20/200 or less in the better eye with the use of correcting lens, or a limitation in the field of vision of the better eye such that the widest diameter of the visual field subtends an angle no greater than 20 degrees.

**Boarders:** Individuals residing in a household and paying reasonable compensation to other persons in the household for meals and lodging. Boarders are ineligible to participate in the Food Stamp Program. Mandatory members of an AG cannot be boarders.

**Boarding House:** An establishment licensed as a commercial enterprise to offer meals and lodging for compensation. In counties without licensing requirements, a boarding house is a commercial establishment that offers meals and lodging for compensation with the intention of making a profit.

**Burial Space:** A casket, urn, gravesite, burial plot, crypt, mausoleum, niche or other repository customarily and traditionally used for a deceased person's bodily remains.

**DEFINITIONS: C**

**Caretaker Relative:** A relative of a dependent child by blood, adoption, or marriage with whom the child is living, who assumes primary responsibility for the child's care (as may, but is not required to, be indicated by claiming the child as tax dependent for Federal income tax purposes. The relative may include the child's father, mother, grandfather, grandmother, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, aunt, first cousin, nephew, or niece, as well as the spouse of such parent or relative, even after the marriage is terminated by death or divorce.

**Categorical Eligibility:** Meeting the technical requirements and the income and asset limits for TCA, SSI, or receiving or authorized to receive services through Healthy Families Florida. This term does not apply to the Medically Needy Program.

**Child:** (For food stamps) An individual under the age of 22. (For TCA) An unmarried individual under the age of 18, or 19 and a full-time student in high school or its equivalent in a vocational or technical school. (For Medicaid) An unmarried individual under the age of 21.

**Child In Care (CIC):** A DCF assistance program to provide benefits for children removed from the care of their parents. Included are Title IV-E and Non-Title IV-E Foster Care, Adoption Subsidy, Emergency Shelter and Non-Title IV-E Delinquency and Independent Living Programs. Only the Medicaid benefits are provided through the FLORIDA system.

**Child Support Enforcement (CSE):** Program required by Title IV-D of the Social Security Act and administered by the Department of Revenue to provide services that include location of the absent parent, establishment of paternity, establishment of medical and financial support obligations; and enforcement, modification and collection of the obligations.

**Children's Health Insurance Program (CHIP):** Premium health insurance coverage for children under age 19; may also be referred to as Florida KidCare.

**Collateral Contact:** A source other than the applicant/recipient the Department uses to confirm the accuracy of the information an applicant/recipient provides; it may be verbal by telephone or personal contact or in written form.

**Communal Dining:** Preparation and serving of meals for elderly individuals, or for Supplemental Security Income (SSI) participating individuals and their spouses in a public or private nonprofit establishment, approved by Food and Nutrition Service (FNS).

**Community Spouse:** The non-institutionalized spouse (of a married couple) who continues to live in the community when one spouse is in (or seeking) institutional care.

**Complete Eligibility Review:** Process of obtaining the facts of the individual's situation and assessing the individual's continued eligibility on all factors.

**Comprehensive Assessment and Review for Long-Term Care Services(CARES):** The Department of Elder Affairs unit responsible for establishing levels of institutional care criteria, assessing each individual's physical and mental condition, and assigning a level of care which indicates an appropriate placement to meet the individual's needs.

**Continuing Care Retirement Community (CCRC):** Retirement facilities providing a resident with a range of flexible services, including shelter and health care in return for an entrance fee and periodic monthly payments, also known as life-care communities. Individuals contract for specific services and may shift between independent living, an assisted living facility or a nursing facility as health care needs change. The contract sets forth the agreements between the CCRC

and the resident, defines the services and care provided by the facility and the conditions under which the entrance fee may be refunded.

**Convenience Bank Account:** An account with funds owned by one person even though the account is in the name of two or more people.

**Cost of Care:** The Department-established rate a facility may collect for services to an individual.

**Cost of Living Adjustment (COLA):** An across-the-board increase in benefits authorized by a state or federal agency. The increase could affect the AG's eligibility for benefits.

**Countable Income:** The amount of income considered in determining eligibility and/or benefits.

**Coverage Group:** A classification under which one or more individuals may be eligible for benefits.

**Cuban/Haitian Entrant:** Non-citizen granted Cuban/Haitian entrant status by United States Citizenship and Immigration Services (USCIS) or Cuba or Haiti nationals who meet any status identified under 501 (e) of the Refugee Education Assistance Act of 1980.

**DEFINITIONS: D**

**Date of Application:** Date the Department or authorized community partner site receives the signed and dated application from the customer.

**Date of Eligibility:** The day of the month the individual's eligibility for any benefit begins.

**Deduction:**

**Deemed Income:** The amount of income considered to be available from one individual to another, such as sponsor to noncitizen, spouse to spouse, parent to teen parent or pregnant child, or parent to child.

**Deeming:** Counting a portion of one individual's income and sometimes assets as available to another individual even if the income and assets are not actually available, based upon the assumption of a "legal obligation" of the first individual to the second.

**Deeming Budget:** The calculation performed to determine the amount of income considered available to an individual from another individual.

**Deficit:** The total countable income that is equal to or less than the Medically Needy Income Level (MNIL).

**Demographic Information:** Basic identifying information for an individual, such as name, Social Security Number, date of birth, sex and nationality.

**Denial:** Non-approval of requested benefits (also referred to as rejected).

**Department of Children and Families: (DCF or Department):** The state agency that determines eligibility for food stamps, TCA, and Medicaid and other services to eligible needy families.

**Department of Economic Opportunity (DEO):** The designated state agency to provide employment/employment training services to the public and work activities for work-eligible food stamp and TANF cash assistance recipients through Regional Workforce Boards and the One Stop System.

**Department of Juvenile Justice (DJJ):** The state agency that handles the delinquency population and submits an application for Medicaid for the Child In Care case.

**Dependent:** Refer to tax dependent

**Deprived Child:** (For TCA) A child in a family where one or both parents are absent, incapacitated, deceased or meet the unemployed/underemployed parent criteria.

**Designated Representative:** (for Family and SSI-Related Medicaid)The individual who is self-designated or has been designated by the individual applying for or receiving assistance to act on the individual's behalf in the application/eligibility review process.

**Diary Date:** The review date set by the Social Security Administration for Social Security Disability cases (Title II and Title XVI).

**Disabled:** (For SSI) Having an inability to engage in any substantial activity due to a medically determinable physical or mental impairment which has lasted or is expected to last for a period of at least 12 consecutive months or which is expected to result in death.

**Disqualified Individual:** Any individual who is unable to receive benefits on their own behalf due to the Department finding that they committed an intentional program violation, who is a fleeing felon, is convicted of drug trafficking or failed to meet work requirements.

**Disregards:** The deduction from gross income as part of the eligibility determination process.

**Drug Addiction or Alcoholic Treatment and Rehabilitation Program:** Any drug addiction or alcoholic treatment and rehabilitation program conducted by a private nonprofit organization or institution, or a publicly operated community mental health center that meets the definition for receiving funds under Part B of Title XIX of the Public Health Service Act, even if it does not receive funding through Part B of Title XIX.

**DEFINITIONS: E**

**Elderly:** (For food stamps) An individual who is 60 years of age or older or who will be age 60 by the last day of the month.

**Election Statement:** The written statement signed by the individual or his representative electing Hospice care services with a particular Hospice provider and waiving rights to other Medicaid services.

**Electronic Benefits Transfer (EBT):** An automated payment delivery system for distribution of government payments and services.

**Electronic Benefits Transfer Card (Benefit Security® Card):** A magnetic stripe debit card used to issue food stamps, TCA and refugee assistance the Department.

**Eligible Couple:** (for SSI-Related Medicaid) A married couple each of whom meets the criteria for Medicaid eligibility.

**Eligible Individual:** An individual who has met all eligibility requirements.

**Eligibility Budget:** The calculation performed to determine financial eligibility for cash assistance, food assistance, or Medicaid benefits.

**Eligibility Review:** A review of some or all factors of eligibility at specific intervals.

**Eligibility Test:** The process of measuring the individual's total income against the appropriate income standard to determine if the individual meets the income eligibility criteria.

**Emergency Medical Assistance to Ineligible Noncitizens:** A special Medicaid coverage group (for emergency medical conditions only) for noncitizens who do not meet the requirement for citizenship/non-citizenship status.

**Enrolled Individual:** An individual who meets the Medically Needy technical and asset requirements, but has income in excess of the Medically Needy income level and, therefore, has a share of cost.

**Ex Parte:** An exploration of Medicaid eligibility under another Medicaid coverage group when an individual is no longer eligible under their current Medicaid coverage group.

**Extended Coverage:** A four-month extension of Medicaid benefits for individuals who lose eligibility for Medicaid as a result of an increase in or receipt of spousal support.

**DEFINITIONS: F**

**Fair Market Value:** The amount of cash received by selling or converting an asset when both parties (a willing seller and a willing buyer) have sufficient information about market conditions and comparable properties.

**Family Planning Services:** A range of reproductive health services, including preconception counseling, pregnancy tests, screening and treatment of sexually transmitted infections, and contraceptive supplies for women ages 14 through 55 who are no longer eligible to receive full Medicaid coverage.

**Federal Benefit Rate:** The standard SSI benefit rate to be applied for any SSI individual in a given situation.

**Federally Facilitated Marketplace:** The Marketplace assists individuals and small employers in comparing and purchasing qualified health plans. Individuals applying for health insurance through the Marketplace will have their eligibility for Medicaid and/or the Children's Health Insurance Program (CHIP) assessed. Individuals who appear to be eligible for these programs will have their Information routed to DCF or Florida KidCare.

**Federal Data Services Hub:** A database that stores individuals' data from various federal and state sources and will be used for matching to facilitate eligibility determination for health coverage programs.

**Florida Online Recipient Integrated Data Access System (FLORIDA):** The DCF automated system that supports eligibility determination for public assistance.

**Fluctuating Medical Expense:** (for SSI-Related Medicaid) A medical expense the individual expects to incur at least once during a projection period, but not on a monthly basis.

**Food and Nutrition Service (FNS):** An agency of the United States Department of Agriculture which administers federal nutrition assistance programs.

**Food Stamp Benefit:** The total value an AG is authorized to receive during each month.

**Food Stamp Program:** The federal Supplemental Nutrition Assistance Program (SNAP) administered by the Food and Nutrition Service of the United States Department of Agriculture as it is known and applies to Florida.

**Foster Care (FC):** Twenty-four-hour substitute care for children removed by the courts and placed away from their parents or guardians and for whom the State agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and preadoptive homes.

**Food Stamp Act:** The Food Stamp Act of 1977 (Public Law 95-113), including any subsequent amendments.

**DEFINITIONS: G**

**General Equivalency Diploma (GED):** A certificate equivalent to a high school diploma received after passing a standardized test. Also refers to the classes that prepare the individual for the test.

**Gross Income Limit:** A table of standards based on family size that shows the highest monthly gross and/or food stamp benefit adjusted net income a household may have and be eligible for the Food Stamp Program. The income maximums do not apply to categorically eligible households only. The net income maximum applies to elderly or disabled households.

**Group Living Arrangement:** A public or private nonprofit residential setting for no more than 16 residents certified by the Mental Health Program Office under regulations issued under Section 1616(e) of the Social Security Act. To be eligible for food assistance, a resident of such a group living arrangement must be blind or disabled and receiving benefits under Title II or Title XVI of the Social Security Act.

**Guardian:** A legal representative appointed by the court to act on behalf of a minor or legally incompetent adult.

**Guardianship Assistance Program (GAP):** a program that provides payment and Medicaid for the care of a child by relatives or non-relative who have assumed legal guardianship.

**DEFINITIONS: H**

**Hearing:** A procedure whereby any household may appeal a DCF decision or action that affects the AG.

**Hearing Officer:** An impartial individual who conducts hearings.

**Hearing Request:** A clear expression, oral or written, by the individual, household or its representative that it wishes to appeal a DCF decision or present its case to a higher authority.

**Home and Community Based Services (HCBS):** Special coverage groups that provide Medicaid eligibility and benefits to elderly or disabled people who would otherwise be ineligible.

**Home Care for the Elderly (HCE) or Home Care for Disabled Adults (HCDA):** Department benefit assistance programs encouraging care for the elderly or disabled at home as an alternative to institutional or nursing home care. The Department of Elder Affairs administers HCE and the Adult Services units of the Department of Children and Families administers HCDA.

**HCE/HCDA Adult:** An individual age 60 or older or disabled, who meets the eligibility requirements for State Funded Programs and who, without the home care basic and specialized services, would require placement in an institution or nursing home within a reasonable time period, not to exceed two years.

**Homeless Individual:** An individual who lacks a fixed and regular nighttime residence or an individual whose primary nighttime residence is a supervised shelter designed to provide temporary accommodations (such as a welfare hotel or congregate shelter); a halfway house or similar institution that provides temporary residence for individuals intended to be institutionalized; a temporary accommodation in the residence of another individual (limited to 90 days for food assistance); or a place not designed for, or ordinarily used, as a regular sleeping accommodation for human beings (a hallway, a bus station, a lobby, or similar places).

**Homeless Meal Provider:** A public or private nonprofit establishment (for example, soup kitchen, temporary shelter), approved by the Department and FNS, to feed homeless individuals.

**Homestead:** Any shelter or principal place of residence (for individual and family) and surrounding property not separated from the residence by intervening property owned by others in which the individual has an ownership interest.

**Hospice:** A Medicaid Program that provides special services for terminally ill individuals.

**Housebound Benefits:** A special Veterans Administration allowance for disabled individuals who are housebound.

**Household:** (For food stamps) A household is made up of one of the following (1) an individual living alone, (2) an individual living with others but purchase food and prepare meals apart from others, (3) a group of individuals who live together and purchases food and prepares meals together for consumption; (For TCA) A family consisting of a minor child, parent, or caretaker relative who live in the same house or living unit and whose resources, income and needs (except for ineligible noncitizens or sanctioned individuals) are included when determining eligibility for the benefit; (For Family Medicaid) The group of individuals who are included in the tax filing group for the tax year in which eligibility is being determined, or for individuals who do not file taxes, the household is the person being tested for eligibility and if living with the person being tested, their spouse, their biological, adopted, and step children less than 19 or 19 and 20 if in school full time. If the person being tested is a child, the household includes their parents

(biological, adopted and step) and any siblings (biological, adopted, and step) if the sibling is less than 19 or 19 and 20 if in school full time.

**DEFINITIONS: I**

**Incapacitated:** A term to describe individuals whose illness or disability affects their ability to care for their children or perform employment and training activities.

**Income:** Monies received by individuals.

**Income and Eligibility Verification System (IEVS):** An automated system that compares applicant/recipient data with income and eligibility data provided by various state and federal agencies.

**Income Maximum:** A table of standards based on family size that shows the highest monthly gross and/or food stamp benefit adjusted net income a household may have and be eligible for the Food Stamp Program. The income maximums do not apply to categorically eligible household only. The net income maximum applies to elderly or disabled households that do not meet the gross income limit.

**Incompetent:** A person's inability to function normally (functional) or a person's level of ability or condition as declared by a court (legal).

**Individual:** The person whose eligibility is being determined.

**Infant:** A child under the age of one year.

**Initial Month:** The first month a food stamp household is eligible following any period of nonparticipation. Initial month for migrant or seasonal farm workers is the first month of eligibility following more than one month of nonparticipation.

**Institution:** An establishment that provides professional services beyond meals and day-to-day living needs for the Institutional Care Program. For the Food Stamp Program, the residential facility provides 50 percent or more of meals as part of their normal service.

**Institution of Higher Education:** A college or university offering a planned curriculum that will result in a degree for the enrollee. Additionally, students enrolled in trade and vocational school courses that require a high school diploma or equivalency certificate would be considered as enrolled in an institution of higher education.

**Institutional Care Program (ICP):** A program that makes institutional benefits such as institutional vendor payment and payment of Medicare coinsurance for skilled nursing care available to Medicaid-eligible individuals.

**Institutional Care Program Income Standard:** The maximum monthly income level used in determining eligibility for ICP.

**Institutional Vendor Payment:** The amount of payment made by Medicaid to the facility for eligible individuals.

**Insurance Affordability Program:** The three insurance affordability programs (IAPs) are: Advance Payment Tax Credit (APTC) program, Medicaid, Children's Health Insurance Program (CHIP/KidCare) An application from one program is considered an application for all programs. All programs must use the same methodology to calculate an individual's income and family size.

**Intact Family:** A pregnant woman living with her husband or the father of her unborn child if she is not married to someone else, or a man and a woman who may or may not be married to each other, and their mutual child(ren), all living together.

**Intentional Program Violation (IPV):** A recipient's action to provide false or misleading information; misrepresent, conceal or withhold facts ; or commit any act that constitutes a violation of the Food Stamp Act, regulation or state statute in order to become eligible for public benefits.

**Irregular Income:** Income, earned or unearned, that is unpredictable and of unanticipated frequency.

**DEFINITIONS: L**

**Learnfare:** The technical requirement for school age children to attend school and for participants with a school age child to attend conferences with school officials during each grading period.

**Level of Care:** The level of nursing home care that an individual needs.

**Liquid Assets:** Assets that are cash or assets that are payable in cash on demand.

**Live-In Attendants:** Individuals who reside in a household to provide medical, housekeeping, child care or similar personal services. These individuals may apply for food assistance on their own behalf, or they may be included as AG members at the request of the payee or authorized representative.

**Long Term Care:** Maintenance care or care expected to last for a continuous period of time.

**DEFINITIONS: M**

**Married Couple:** Two individuals who are considered married according to SSI policy.

**Mass Change:** A change in tables/data/policy that may affect the entire or a significant portion of the caseload.

**Medicaid:** A state administered federal program of medical assistance that is available to groups of specific individuals based on financial need as defined in policy.

**Medicaid Cap (ICP Income Limit):** The amount set by Title XIX Federal Medicaid regulations as the maximum income limit (300 percent of the current SSI Federal Benefit Rate) the state may use in determining eligibility for the Institutional Care Program.

**Medicaid Compensable Bills:** Medical expenses that are eligible to be paid by Medicaid.

**Medicaid Non-Compensable Bills:** Medical expenses that cannot be paid by Medicaid.

**Medicaid Providers:** Hospitals, nursing homes, public health units, or other entities providing services to individuals who may need assistance in paying for medical services.

**Medically Needy (MN):** A Medicaid Program that covers Family and SSI-Related persons who would be eligible under a categorical coverage group except that they have too much income.

**Medicare:** A federal insurance program that covers hospitalization, medical care and drugs for aged and disabled individuals who have sufficient work history.

**Medicare Coinsurance:** The amount Medicare determines the individual owes to the facility for those days for which Medicare makes partial payment.

**Minor:** An individual under age 18 for Food Stamp Program benefits, TCA and Medicaid, whose disability of non-age has not been removed and who is unmarried.

**Modified Adjusted Gross Income (MAGI):** Modified Adjusted Gross Income is based on Internal Revenue Service tax rules and is the adjusted gross income, plus any tax exempt interest and foreign investments excluded from adjusted gross income.

**Mutual Child/Mutual Unborn:** Reference to having both legal parents in the home, or having mother and father in the home.

**DEFINITIONS: N**

**Needs Allowance:** The dollar amount protected from an individual's income before the remainder becomes available for payment of cost of institutional care.

**No Touch** – "No Touch" workflow for Medicaid eligibility applications. If all necessary verification is available at the time an applicant submits an application for medical assistance, the application will be automatically processed as Medicaid eligible and will require no handling by staff.

**Noncitizen:** An individual who is not a citizen of the United States.

**Non-Filer:** An Individual who neither files a tax return nor is claimed as a tax dependent.

**Non-fluctuating Medical Expense:** A medical expense expected to be incurred by the individual on a monthly basis.

**Nonliquid Assets:** Resources that cannot be readily converted to cash.

**Non-Relative Caregiver Program:** A program where a child has been adjudicated dependent and placed by the Department with an adult who has assumed the primary responsibility of caring for a minor child who is not related to the child or is outside the degree of relationship.

**Non-SFU Members:** Individuals residing with an SFU who are not considered SFU members in determining the household's food stamp eligibility or benefits.

**DEFINITIONS: O**

**One-Time Medical Expense:** An expense incurred only once or very infrequently (no more than annually).

**Optional State Supplemental Program (OSS):** A state funded direct assistance program to provide supplemental income for community based care to prevent placement into, or to remove an individual from, an institution or nursing home.

**Outside of the Household (OOTH):** An OOTH is a tax dependent who is living outside of the household. Individuals who are tax dependent and living outside of the household (OOTH) will not have an option to select benefits as part of the application. The system will allow customers to define tax relationships between individuals on the application, including those individuals who are living outside of the household.

**Overissuance/Overpayment:** The amount by which benefits issued to an AG exceeds the amount it is eligible to receive.

**DEFINITIONS: P**

**Parent:** The natural, legal or adoptive father or mother of a child. (For Family Related Medicaid, include the step-parent.)

**Partial Eligibility Review:** The review or processing of one or more anticipated or reported changes that may or may not result in a change in benefits; the process of examining the individual's situation with respect to continued eligibility on one or more, but not all, factors of eligibility.

**Patient Responsibility:** The amount of income the Department determines the individual must pay toward their cost of care.

**Payee:** The individual named to receive the AG benefits and who normally has primary decision-making responsibility for the AG.

**Personal Needs Allowance (PNA):** The portion of the individual's income protected to meet the individual's personal needs while in an institution.

**Posthumous Benefit:** A determination of eligibility after an individual dies for a benefit period prior to the time of his death.

**Postpartum:** The 12-month period of Medicaid eligibility following the end of a pregnancy regardless of the termination reason (delivery, miscarriage, etc.).

**Power of Attorney:** A legal document used for one person to designate another to act on his behalf.

**Presumptive Eligibility for Newborns (PENS):** A Medicaid determination of eligibility for children less than one year of age who are living with their mother who was eligible for Medicaid at time of birth.

**Presumptive Eligibility for Pregnant Women (PEPW):** A determination of eligibility for limited Medicaid coverage for a pregnant woman completed by a Qualified Designated Provider based upon the applicant's statement of income. It does not cover inpatient hospital costs.

**Pretax income exclusions:** Income taken from a customer's gross earnings before taxes are withheld.

**Primary Information Person (PIP):** The individual responsible for reporting any information on the SFU that may affect eligibility for benefits.

**Prospective Budgeting:** The method of basing eligibility and monthly payment on what the Department anticipates the SFU's composition, income and circumstances will be for that month.

**Protected Medicaid:** A Medicaid coverage groups that ensure or protect ongoing Medicaid coverage for certain groups of individuals who lost eligibility for SSI payments and for whom Congress enacted special Medicaid continuation provisions.

**Protection of Income:** Allowing the institutionalized individual to retain income and not have it applied to the cost of care.

**Public Assistance (PA) Food Stamp AG:** Food stamp AGs with all members receiving income from either TCA or a combination of TCA and SSI.

**DEFINITIONS: Q**

**Qualified Medicare Beneficiaries (QMB):** A Medicaid Program that pays the Medicare Part A and B premium and Medicare coinsurance and deductibles for certain individuals.

**Qualified Noncitizen:** A category of noncitizens who meet at least one of the sections of the Immigration and Nationality Act such as Lawful Permanent Residents, Asylees, Parolees, Cuban and Haitian Entrants, Battered Spouse or Abused Child, Victims of Human Trafficking, etc.

**Quality Control:** An administrative system for measuring the accuracy of state eligibility and benefit determinations.

**DEFINITIONS: R**

**Recipient:** An individual who has been determined eligible and is receiving benefits.

**Recurring Medical Expenses:** Expenses for medical services or items (including health insurance premiums) that occur monthly, or that occur sporadically, such as every other month or every two months, during a projection period.

**Recurring Month:** The first on-going month of eligibility following the month of application.

**Reenrollment:** The process of authorizing a 12-month enrollment period to individuals who are currently enrolled and continue to meet the Medically Needy asset limitation and all technical eligibility criteria. It also refers to an action that must occur every 12 months to continue Medically Needy enrollment.

**Refugee:** A noncitizen who fled his country due to persecution or a well-founded fear of persecution. If identified by USCIS as being a refugee, he may meet eligibility criteria for Food Stamps, TCA, Medicaid, or RAP, depending on specific program criteria.

**Refugee Assistance Program (RAP):** An assistance program designed to aid needy refugees and their families.

**Regional Workforce Board (RWB) Contracted Provider:** (For food stamps and TCA) Personnel working for RWB providers to develop and monitor work activities for participants, usually through One Stop Centers.

**Related Child:** (For TCA) A child related by blood, marriage or adoption.

**Relative Caregiver Program:** (For TCA) A program where a child has been adjudicated dependent and placed by the Department with an adult who has assumed the primary responsibility of caring for a minor child who is related by blood, marriage or adoption to the parent or step-parent of the child.

**Residents of Institutions:** Individuals for whom an institution provides the majority of their meals as part of the institution's normal service and the institution has not been authorized to accept food assistance. Residents of institutions are generally not eligible for food assistance.

**Responsible SFU Member:** A household member capable of representing the AG by providing sufficient and accurate information concerning SFU circumstances, regardless of age.

**Retirement Survivors Disability Insurance (RSDI):** A program that provides monthly Social Security benefits to qualified individuals who are retired or disabled; it is administered by the Social Security Administration.

**Retroactive Medicaid:** The provision that allows a person to apply for Medicaid for any of the three months prior to the month of application, for Medicaid, even if the application was denied. This includes SSI applications.

**Review Period:** The established period of specific calendar months during which the AG is eligible to receive benefits.

**Roomers:** Individuals to whom a SFU furnishes lodging, but not meals, for compensation. These individuals may apply for food assistance on their own behalf.

**DEFINITIONS: S**

**“S” Corporations:** A subset of close or closely held corporations; the income is generally reported to the Internal Revenue Service together with the SFU’s other income.

**Sanction:** A penalty imposed due to noncooperation in obtaining child support benefits, or a penalty for noncooperation with FSET, TCA, or RAP work requirements.

**Share of Cost (SOC):** The amount of the SFU’s income that exceeds the MNIL: it represents the amount of allowable medical expenses that an SFU must incur before the AG can be entitled to Medicaid for the remainder of the month.

**Special Low-Income Medicare Beneficiary (SLMB) Program:** A Medicaid program to pay the Medicare Part B premium for certain disabled or aged individuals.

**Spouse** (as defined in Section 741.212(3), F.S.): A member of a legal union (marriage) between one man and one woman as husband and wife.

**SSI-DA Ex Parte:** An exploration of Medicaid eligibility under another Medicaid coverage group when an individual is no longer eligible under the current Medicaid coverage group due to loss of SSI direct assistance (cash) benefits.

**SSI Eligible Couple:** A married couple, both of whom are aged, blind or disabled living together (or who have not been living apart for six months or more), and who meet SSI requirements, including consideration of combined income, assets and need.

**Standard Filing Unit (SFU):** All individuals whose income and/or assets, and sometimes needs, are considered in the determination of eligibility for a category of assistance.

**State Data Exchange (SDX):** A government data interchange mechanism used to provide and/or verify applicant and recipient information from the Social Security Administration.

**Stepparent:** The unrelated spouse of a child’s parent.

**Student:** An individual enrolled at least half-time as defined by the institution, in any recognized K-12 school, training program or institution of higher education.

**Substantiate:** To establish the accuracy of information by obtaining consistent, supporting verbal or written information from the individual.

**Supplemental Security Income (SSI):** A direct assistance program of monthly cash payments based on aged, blindness or disability and need administered by the Social Security Administration. In Florida, individuals eligible for SSI are automatically eligible for Medicaid benefits.

**Surplus Income:** The amount of total countable income that exceeds income limits.

**DEFINITIONS: T**

**Tax Dependent:** An individual for whom another individual claims a deduction for a personal exemption on their tax return.

**Tax Filing Group:** The individuals who intend to file a federal tax return and includes any other persons who are claimed as dependents on the tax filers' return.

**Teen Parent:** (for TCA) An individual who is unmarried and under 18, or 19 if a full-time student or the equivalent, and has a child of their own or is pregnant.

**Temporary Cash Assistance (TCA):** The state's program that provides cash assistance to eligible needy families with dependent children.

**Third Party Payment:** Any payment made by an individual (other than the individual), entity, or company for medical services recognized by DCF in the individual's cost of care.

**Three Tier Payment Standards:** The three levels of cash assistance based on the AG's size and the amount of the shelter obligation.

**Title XIX:** Chapter of the Social Security Act that covers Grants to States for Medical Assistance Programs (Medicaid).

**Transitional Coverage:** An extension of Medicaid benefits for up to 12 months to individuals whose MFAM terminated due to earned income; i.e., increase/onset of earnings.

**DEFINITIONS: U**

**Underissuance/Underpayment:** The difference between the amount of benefits the AG is eligible to receive and the amount the AG actually received.

**Unemployment Compensation Benefits (UCB):** Cash benefits and other services made available to individuals who recently held a job or are currently underemployed.

**United States Citizenship and Immigration Services (USCIS):** The government agency that oversees lawful immigration to the United States.

**Unmarried:** An individual who is single, never married or whose marriage was annulled.

**Unmet Allocation:** Income exclusion in SSI budgeting to allow for the parent's responsibility for supporting children who are not blind or disabled.

**Unreimbursed Medical Expense (UME):** A term used by the Veterans Administration for medical expenses allowable as a deduction in computing pension amounts.

**DEFINITIONS: V-W**

**Vocational Rehabilitation (VR):** A division of Department of Education that provides rehabilitation, training and job placement assistance to disabled individuals.

**Workforce Investment Act (WIA):** A U.S. Department of Labor funded program that provides funds to train low income individuals and help place them in jobs.

**Work Registration:** A process by which all nonexempt AG adults applying for food stamps or cash are registered for work.