

60-MONTH REVIEW CHECKLIST

PURPOSE:

- To be completed by the case manager and participant during the 60-month evaluation in the participant's 54th month of receiving Temporary Assistance.
- To use as a checklist for the case manager and participant to establish that all issues have been reviewed.
- To be shared with the review team and/or the Family Support Team to determine if the case should be extended or closed.
- Present to the Designee to assist in the final decision to extend or close a Temporary Assistance case.

NUMBER OF COPIES AND DISTRIBUTION: One copy for the participant and one copy for the case record. Retain the form permanently in the case record.

INSTRUCTIONS FOR COMPLETION: This is a mandatory form to be completed by the case manager for every case in which the participant has reached their 54th month of receipt of Temporary Assistance. An extension or case closing can not occur after 60 months without completing the evaluation and this form.

60-MONTH TIME FRAME REVIEWED: Check this box after the case manager has explained the criteria for receiving Temporary Assistance for 60 months in an individual's lifetime across state lines and has answered all of the participant's questions regarding this criteria.

FAMILY INFORMATION RECORD (IM-309) REVIEWED: Check this box after the IM-309 has been reviewed with the individual. While reviewing the IM-309 the SSCM should also be evaluating for an exemption or extension.

IM-309 CURRENT & UPDATED: Check this box to indicate the IM-309 in the record is current and has updated information. Any changes to the IM-309 will need to be initialed and dated by the participant on the IM-309.

WHAT DO YOU PLAN TO DO AT THE END OF YOUR 60-MONTH LIFETIME LIMIT?: This space will give the participant the opportunity to state plans for their future and how case management can assist them in meeting their goals. It could also lead to further planning that may result in resource referrals.

EXTENSIONS WERE DISCUSSED: Check this box after the case manager has explained all criteria for an extension to the participant.

ELIGIBILITY REVIEWED: Check this box after continued Temporary Assistance eligibility has been determined. **An extension cannot be granted if the individual is ineligible for Temporary Assistance.**

EXPLORED RESOURCES: Check this box after the case manager and the participant have explored all formal and informal resources available to assist the participant to overcome barriers to employment. The Family Information Record-Attachment (IM-309A) is a good tool to use as a checklist of formal resources. Informal resources could include the participant's family, friends, and/or neighbors.

WRITE/UPDATE A PACT (IM-300): Check this box after a PACT has been written or the last PACT in the case record has been updated.

The PACT should include activities the individual will participate in when their case is extended or work activities they will participate in until they reach their 60-month lifetime limit.

UNABLE TO COMPLETE EVALUATION: Check this box after every effort to conduct the face-to-face evaluation has failed. (List all the attempts on the Extension or Closing Summary, IM-360A under the Recommendation Summary.)

DATE: Enter the date the form was completed.

PARTICIPANT'S SIGNATURE: The participant signs (if available) when above factors have been reviewed, discussed, and all of the participant's questions have been answered.

SELF-SUFFICIENCY CASE MANAGER'S SIGNATURE: The case manager signs upon completion of the form.

TEAM MEMBER'S SIGNATURE: Each team member and/or Family Support Team member will sign after the case has been reviewed.