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APPROVING AN S-CD NEW APPLICATION OR REAPPLICATION  
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**EIS 2265 - APPROVING AN S-CD NEW APPLICATION OR REAPPLICATION**  
**REVISED 08/01/04 - CHANGE NO. 01-05**

**I. GENERAL INFORMATION**

- A. Use the following instructions to complete the DSS-8125, Eligibility Information System Data Sheet.

NOTE: FOR KEYING INSTRUCTIONS, SEE [EIS 4900 - DATA ENTRY APPENDIX B . DSS-8124 \(KEYING AN APPLICATION\)](#)

- B. Use the current DSS-8124I Application Turnaround to determine what information has previously been entered for the applicants. This information is retained by the system and brought forward at application approval. For this reason, most of the information entered on the DSS-8124 does not need to be re-entered when the application is approved. These fields are noted below.
- C. You may use the Application Turnaround to make allowable corrections before keying the DSS-8125 for approval or you may make the corrections on the DSS-8125 at approval. Some corrections must be made on the Name Change screen.
- If there is a change of payee, see [EIS 2052 - MAKING CHANGES TO SA APPLICATIONS.](#)
- D. A DMA-5022 is required when authorizing more than two prior month payments.
- E. New applications and reapplications are dispositioned exactly the same way unless you are approving a reapplication against an ongoing case. If this is true, old case termination data is required.

**II. COMPLETING THE DSS-8125**

If a numeric field requires less digits than spaces available, precede with zeroes.

**A. CASE IDENTIFYING INFORMATION**

1. Enter the CASEHEAD/PAYEE NAME at the top of the form for filing purposes.
2. Enter the COUNTY NAME.
3. Do not enter the CASE ID. The CASE ID is brought forward from the application and may not be changed.
4. Enter your WORKER NUMBER.
5. Enter your COUNTY NUMBER.
6. Enter the COUNTY CASE NUMBER.
7. Enter the DISTRICT NUMBER.
8. Do not enter COUNTY REASSIGNMENT NEW COUNTY or EFFECTIVE DATE.

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II. A. (CONT'D)

9. Enter "S" "CD" for AID PROGRAM/CATEGORY.
10. Do not enter CASEHEAD/PAYEE NAME. Make all changes to the casehead/payee on the Name Change screen.
11. Enter ADDRESS LINE 1 if different than indicated on the Application Turnaround. See the Mailing Address Appendix to determine the correct abbreviations.
12. Enter ADDRESS LINE 2 if different than indicated on the Application Turnaround, and if ADDRESS LINE 1 is entered. See the Mailing Address Appendix to determine the correct abbreviations.
13. Enter the CITY, STATE, and ZIP CODE if different than indicated on the Application Turnaround. See the Mailing Address Appendix to determine the correct abbreviations.
14. Enter the casehead/payee's three-digit area code and seven-digit PHONE NUMBER if applicable.
15. Enter a VERIFICATION INDICATOR to indicate if all eligibility factors have been verified.

"Y" = YES      "N" = NO

16. Enter a SUBSTITUTE PAYEE CODE and NAME if a substitute payee has been appointed to the case. See the Codes Appendix to determine the appropriate substitute payee code.
17. Do not enter a CHANGE CODE.
18. Enter "Y" in NOTICE OVERRIDE if you wish to override the automated notice.

Always override the automated notice when:

- a. You approve an application and authorize benefits on the DMA-5022. If all benefits are authorized on the DSS-8125, an automated notice can be produced.
- b. You approve an application but the assistance unit is not eligible for one or more month's benefits. If the assistance unit is eligible for benefits beginning the month after application but ineligible for the month of application, an automated notice can be produced.
- c. You approve an application with an approval code created for "Other".

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II. (CONT'D)

**B. APPLICATION DATA**

1. Enter the APPLICATION NUMBER from the Application Turnaround.
2. Enter the ONGOING DISPOSITION REASON and DATE. See the Codes Appendix to determine the appropriate disposition reason code.
  - a. The ONGOING DISPOSITION DATE must be the application date or later.
  - b. The ONGOING DISPOSITION DATE must be before or the same as the current calendar date.
3. Do not enter RETRO DISPOSITION REASON and DATE.

**C. CASE TERMINATION DATA**

1. Enter the CASE TERMINATION REASON and DATE if the application is to be approved and terminated on the same DSS-8125 (Open/Shut). See the Codes Appendix to determine the appropriate termination reason code.
  - a. The CASE TERMINATION DATE must be the last day of the month.
  - b. The CASE TERMINATION DATE must be before the ongoing month but not before the month of application.
  - c. If the application is disposed of in terminated status, retroactive checks are produced from the MONTHLY PAYMENT EFFECTIVE DATE through the CASE TERMINATION DATE.

**NOTE: DO NOT ENTER A PAYMENT REVIEW FROM AND THRU DATE IF YOU ARE APPROVING AN APPLICATION IN TERMINATED STATUS.**

2. If you are approving a reapplication against an active case, enter the OLD CASE TERMINATION REASON and DATE to terminate the case against which you are making application. See the Codes Appendix, to determine the appropriate termination reason code.

**D. PAYMENT DATA**

1. Enter the PAYMENT REVIEW PERIOD FROM and THRU dates for all cases except those approved in terminated status.
  - a. The PAYMENT REVIEW PERIOD must be 12 months.
  - b. The FROM date must not be before the month of application.
  - c. The THRU date must not be before the FROM date.

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**II. D (CONT'D)**

2. Enter the MONTHLY PAYMENT AMOUNT as a whole dollar amount.
  - a. The AMOUNT must be the MAINTENANCE AMOUNT, minus the TOTAL COUNTABLE INCOME, minus GRANT RECOUPMENT.
  - b. The system does not check the calculation when the application is approved in terminated status (open/shut.)  
  
If the applicant is eligible for only one month, enter the check amount in the MONTHLY PAYMENT AMOUNT field.
3. Do not enter MONTHLY PAYMENT TYPE. The system enters a "1".
4. Enter the MONTHLY PAYMENT EFFECTIVE DATE. This date must not be before the month of application or after the ongoing month.
5. PRIOR MONTH PAYMENT 1 AMOUNT and DATE and PRIOR MONTH PAYMENT 2 AMOUNT and DATE.

If you are approving an application which requires a check for a different amount than the ongoing monthly payment amount, use the prior month payment block(s). The DSS-8125 has room for two prior month payments. If more than two prior month payments are needed, use a DMA-5022. See EIS 2268 DMA-5022 Instructions for Application Approvals, for instructions on completing the DMA-5022.

It is important that these fields are completed in date order (oldest first). Enter the first two prior month checks on the DSS-8125 and any additional months on the DMA-5022.

- a. Prior month payments must be before the PAYMENT EFFECTIVE DATE and cannot be before the month of application.
- b. PRIOR MONTH PAYMENT 2 PAYMENT DATE and AMOUNT cannot be entered unless PRIOR MONTH PAYMENT 1 is entered.
- c. PRIOR MONTH PAYMENT 2 must be after the PRIOR MONTH PAYMENT 1 DATE.

**E. DO NOT ENTER MEDICAID DATA.**

**F. EARNED INCOME (IF ZERO, LEAVE BLANK)**

1. Enter the GROSS EARNED INCOME. The amount must be dollars and cents.
2. Enter the WORK EXPENSES. The amount must be dollars and cents.
3. Do not enter CHILD/ADULT CARE.
4. Enter the DISREGARD. The amount must be dollars and cents.
5. Enter the NET EARNED INCOME. The amount must be dollars and cents.

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II. F (CONT'D)

6. Enter GRANT RECOUPMENT if a reduction in the assistance check is made to repay an overpayment.
  - a. Enter the CODE. See the Codes Appendix to determine the appropriate grant recoupment code.
  - b. Enter the AMOUNT in whole dollars.
  - c. Enter the END DATE. The END DATE must not be before the ongoing month. A special message is printed on the Case Management Report one month before the month the grant recoupment amount must be changed or removed from the case.

G. UNEARNED INCOME (IF ZERO, LEAVE BLANK)

1. Do not enter SSI AMOUNT.
2. Enter the RSDI AMOUNT.
  - a. This amount must be a whole dollar amount. Zeroes must be entered in the cents column.
  - b. This amount must be less than or the same as the TOTAL NET UNEARNED INCOME.
  - c. If entered, an RSDI CLAIM NUMBER is required for at least one individual on the case.
3. Enter the OTHER UNEARNED INCOME
  - a. The amount must be dollars and cents.
  - b. The income must be included in the TOTAL NET UNEARNED INCOME.
4. Enter the TOTAL NET UNEARNED INCOME.
  - a. The amount must be dollars and cents.
  - b. The amount must be more than or the same as the RSDI AMOUNT, if RSDI AMOUNT is entered.
  - c. TOTAL COUNTABLE MONTHLY INCOME must also be entered.

H. NEEDS

1. Enter the MAINTENANCE AMOUNT. The amount must be a whole dollar amount. Zeroes must be entered in the cents column.
2. Do not enter AMBULATION CAPACITY.
3. Do not enter DOMICILIARY RATE.
4. Enter the TOTAL COUNTABLE MONTHLY INCOME. IF ZERO, LEAVE BLANK. If entered, the amount must be dollars and cents. TOTAL NET UNEARNED INCOME must be entered.

I. SPECIAL DATA

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**II. I (CONT'D)**

1. Enter a FOOD STAMP NUMBER for each case receiving Food Stamps if not previously entered on the DSS-8124 or the Application Turnaround.
2. Do not enter STEPPARENT INDICATOR.
3. Do not enter GRANDFATHER STATUS CODE or DATE.
4. Do not enter SSI STATUS. The system enters an "N".
5. Mark "YES" or "NO" for VA PAYMENT.
6. Enter SPECIAL REVIEW TYPE and DATE if needed. Not allowed if CASE TERMINATION REASON and DATE are entered.
  - a. See the Codes Appendix to determine the appropriate special review code and date.
  - b. The DATE must not be before the ongoing month.
7. Do not enter JOBS/WORK REQUIREMENT SAVINGS REASON and AMOUNT.
8. Do not enter SPECIAL USE CODE and DATA.

**J. DO NOT ENTER SPECIAL COVERAGE GROUP DATA (INCLUDING SPECIAL NEEDS).**

**K. SUPPLEMENTAL NOTICE INFORMATION**

The following three data elements have been added to the DSS-8125 Data Entry screen. Only one is applicable to S-CD. A recommended form in which to enter the information can be found at the end of this section. This form should be attached to your DSS-8125 when submitting to Data Entry for keying.

1. Enter the AUTHORIZED REPRESENTATIVE'S NAME and ADDRESS if an authorized representative has been appointed to the case. An automated notice will be produced for both the payee and the authorized representative.
2. Do not enter SECONDARY NOTICE CODE.
3. Do not enter NOTICE TEXT.

**L. INDIVIDUAL DATA**

1. The INDIVIDUAL ID, NAME, SOCIAL SECURITY NUMBER, DATE OF BIRTH, and SEX are brought forward from the 8124. Any corrections to this information must be done on the Name Change screen. Remember that individuals must be age 18 through 64.

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II. L. 1. (CONT'D)

NOTE: When changing the date of birth on the Name Change Screen, and there is a DSS-8125 pending for an action other than a termination, you must first delete the pending DSS-8125 before the date of birth can be changed. If you attempt to change the date of birth before deleting the DSS-8125, EIS displays the error message: TO MAKE CHANGE ON DOB, YOU MUST DELETE 8125 FORM. Keying the DSS-8125 after the date of birth change ensures the action processes through the appropriate age edits in EIS.

2. Enter INDIVIDUAL TERMINATION DATE to:
  - a. Approve and terminate an individual on the same DSS-8125.
  - b. Delete an ineligible individual from the application. The INDIVIDUAL TERMINATION DATE is the date of application.
  - c. The INDIVIDUAL TERMINATION DATE must not be entered if this is the only individual on the application. See CASE TERMINATION DATA.
  - d. The INDIVIDUAL TERMINATION DATE must not be entered if the DATE OF DEATH is entered for the individual.
3. Do enter CASE STATUS CODE. The systems generates an "R".
4. Enter the RSDI CLAIM NUMBER if the individual receives Social Security benefits or has Medicare coverage.
5. Enter a "Y" or "N" in MEDICARE A to indicate whether or not the individual has Medicare A. If "Y" is entered, the RSDI CLAIM NUMBER must also be entered.
6. Enter a "Y" or "N" in MEDICARE B to indicate whether or not the individual has Medicare B. If "Y" is entered, the RSDI CLAIM NUMBER must also be entered.
7. Do not enter a FAMILY STATUS CODE. The system generates an "A".
8. Enter a LIVING ARRANGEMENT CODE. See the [Codes Appendix](#) to determine the appropriate living arrangement code.
9. Enter a SPECIAL REPORT CODE if needed. See the [Codes Appendix](#) to determine the appropriate special report code.
10. Do not enter WORK REGISTRATION code.
11. Enter SPECIAL USE CODE and DATA if needed. See the [Codes Appendix](#) to determine the appropriate special use code and dates.
12. Do not enter a REFUGEE STATUS CODE or U. S. ENTRY DATE.
13. Enter DATE OF DEATH if the individual is deceased.
  - a. If DATE OF DEATH is entered for the only individual on the case, CASE TERMINATION REASON and DATE must also be entered.
  - b. The DATE OF DEATH must be:

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**II. L. (CONT'D)**

- (1) Before or the same as the CASE TERMINATION DATE;
- (2) Before or the same as the current date; and
- (3) The date of application or later.

**NOTE: DO NOT ENTER AN INDIVIDUAL TERMINATION DATE IF DATE OF DEATH IS ENTERED.**

14. Enter the RELATIONSHIP TO PAYEE code. See [Codes Appendix](#) to determine the appropriate code.
15. Do not enter JOBS/WORK REQUIREMENT SAVINGS REASON and AMOUNT.
16. Do not enter WORK EXPERIENCE.
17. Do not enter GROSS EARNED INCOME.
18. Do not enter WORK EXPENSES.
19. Do not enter CHILD/ADULT CARE.
20. Do not enter NET EARNED INCOME.
21. Do not enter EDUCATIONAL LEVEL.
22. Do not enter type and date of EDUCATION provided.
23. Enter "N" FOR ISSUE CARD.
24. Do not enter COMMUNITY CARE OF NORTH CAROLINA (CCNC) provider or exempt number.
25. If there is more than one individual on the case, use the DSS-8126, Continuation Sheet, to report the additional information.

**M. SIGNATURES AND DATE**

1. Enter the DATE COMPLETED.
2. Sign the DSS-8125 in the WORKER'S SIGNATURE field.
3. The county director or his designee must sign the form in the DIRECTOR'S SIGNATURE field.

**III. SUBMIT THE DSS-8125, DSS-8126 AND SUPPLEMENTAL NOTICE INFORMATION FORM TO DATA ENTRY FOR KEYING.**

**IV. OUTPUTS**

When the DSS-8125 has processed successfully, the following are received:

**A. BENEFITS ISSUED**

1. Money

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**IV. A. 1. (CONT'D)**

- a. PRIOR MONTH checks are produced for the months and amounts indicated in the PRIOR MONTH PAYMENT fields on the DSS-8125. These checks are produced the night the approval form processes and are mailed to the recipient the next working day.
- b. Checks are also produced for the period of time beginning with the MONTHLY PAYMENT EFFECTIVE DATE through the current calendar month. These checks are produced the night the approval form processes and are mailed to the recipient the next working day.
- c. For approvals processed between the fourth worknight from the end of the month and the end of the month, a separate check is produced for the next calendar month. This check is mailed the last working day of the month.

**NOTE: DO NOT ISSUE COUNTY CHECKS FOR SPECIAL ASSISTANCE. ALL CHECKS MUST BE STATE ISSUED.**

2. Medicaid

A Medicaid card is not produced by EIS.

**B. CASE PROFILE**

A Case Profile is produced the night the approval processes and is mailed to the county the following workday.

**C. CASEWORKER SUPERVISOR REPORT**

The application approval is reported on the Caseworker Supervisor Report. The number of approvals completed is determined from the WORKER NUMBER.

**V. AUTOMATIC NOTICES**

- A. An automated notice ([DSS-8108A](#)) is produced for each S-CD approval the night the DSS-8125 processes in the system unless "Y" is entered for "NOTICE OVERRIDE".
- B. The DISPOSITION REASON CODE entered on the DSS-8125 determines the text of the notice.
- C. The system calculates the 60th calendar day for the notice.
- D. The date of the automated notice is the next state workday after the DSS-8125 processes. This is the date the notice is mailed to the recipient. A copy of the notice is not mailed to the county.
- E. A Notice Register Report is produced each night and is mailed to the county the following workday. This report lists vital information related to all automated notices produced for that day. See EIS [http://info.dhhs.state.nc.us/olm/manuals/dma/eis/man/Eis2304.htm#10\\_269](http://info.dhhs.state.nc.us/olm/manuals/dma/eis/man/Eis2304.htm#10_269) 2304 for more information regarding the Notice Register Report.