
APPLICATION AND REDETERMINATION PROCESS

REDETERMINATIONS

**C. SSI
REDETERMINATIONS**

Individuals terminated from SSI due to income and/or resources are issued an SSI Termination Notice (Section B) and an SSI Redetermination Form, DOM-300B, by the fiscal agent upon receipt of the SDX notification of termination. This form is to be completed and returned to the appropriate Regional Office if the client desires continued Medicaid and is eligible under one of the coverage groups described in the SSI Termination Notice. SSI clients who are terminated from SSI and receive this form do not require an in-person interview but all necessary factors of eligibility must be verified; i.e., disability, residency, utilization of other benefits, etc. Needed information must be requested in writing to the client including DOM-TPL Form 406, Third Party Liability Information, since this form is not part of the SSI Redetermination Form issued by the fiscal agent with the SSI Termination Notice.