



**Early Learning  
Coalition**  
OF PINELLAS COUNTY

<b>DEPARTMENT: Eligibility</b>	<b>SUBJECT: Procedures for “Review Notification Process”</b>
<b>REVISED: 10-21</b>	<b>AUTHORIZATION APPROVAL: Manager, Family Services</b>

**Summary:** A Purpose for Care Review date is entered in EFS MOD under the current assignment if an action is needed by ELC or by the parent/guardian prior to the end of the Current Authorization period.

**Review Reasons:**

1. BG1 referral expiration
2. Self-Employment
3. Fee Waivers
4. COVID Waivers
5. School - Full time student or combination of school and work hours
6. Re-establishment periods due to loss of purpose for care (employment, maternity leave, etc.)

**Review Completion Guidelines:**

A Review Notice is required to be sent via EFS Mod and the parent/guardian will be contacted via telephone, within 30 days prior to the end of Review Period.

In order to stay in compliance with OEL guidelines, submitted documentation found in the submitted queue must be Updated, Rejected or Termed within 10 days from the submitted date.

Providers need to be notified of impending term within 7 to 5 days prior to the expiration of the Review Period.

If client does not meet eligibility guidelines or roll to an alternate program, the eligibility must be termed the day after the last day of care set in the Review Period.

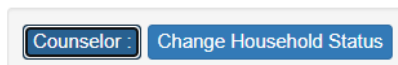
- Please note: If a client receives a valid referral within 10 days of termination, the client may be reinstated with private pay days with signatures on file within the last year.

## Review Notification Process

1. Review History Notes for required/applicable documents:
  - a. Updated BG1 referral
  - b. Meet BG8 guidelines (Proof of Residency, proof of age and citizenship for children in care, proof of age for children not in care, Valid photo ID, purpose for care)
  - c. Tax Return for self-employment
  - d. School Verification
2. Determine date of review listed in *Purpose for Care Review Date* in current assignment.
3. Notice to client must be sent no less than 14 days, no more than 45 days of *Purpose for Care Review Date*.

\*Best practice is to send within 30 days of expiration date

4. Call client and advise of documents needed and review date deadline.
5. Set the review period:
  - a. Change the Household Status by clicking on Change Household Status button on the top left of the file.



- b. **New Status:** Pending Update
- c. **Review Period:** Click box
- d. **Child Selection:** Click on all children under review
- e. **Review Period Start Date:** Date of Processing
- f. **Review Period End Date:** Last Day of Reestablishment Period
- g. **Comments:** LDC 01-01-XX, list the documents needed to satisfy review, spoke to client advised of documents needed and review date deadline.
- h. Save.

**Change Household Eligibility Status**

<b>Current Status</b>	<input type="text" value="Active"/>
<b>New Status*</b>	<input type="text" value="Pending Update"/>
<b>Review Period</b>	<input checked="" type="checkbox"/>
<b>Child Selection*</b>	<input checked="" type="checkbox"/> jane doe II
<b>Review Period Start Date*</b>	<input type="text" value="10/01/2021"/>
<b>Review Period End Date*</b>	<input type="text" value="11/01/2021"/>
<b>Comments*</b>	<div style="border: 1px solid #ccc; padding: 5px; min-height: 100px;">LDC 11/1/21, client will need to submit a FT purpose for care, spoke to client and advised of documents needed and review date deadline.</div>

6. Within 7 to 5 days prior the expiration date, call the provider and advise of last day of care. Use TELEPHONE CALL case note and include the name of the provider, whom you spoke with, and the child(ren) under review.

7. If the client has not satisfied the review, term the enrollment and eligibility the day after the last day of care.
8. Enter Case Note:
  - a. **Description:** Miscellaneous
  - b. **Custom Code Type:** Parent
  - c. **Custom Code:** TERM
  - d. **Note:** Indicate the last day of care, the reason for the termination, and that file was inactivated or individual child(ren) were termed as applicable.
  - e. **Save.**

Add Case Note

**Description** \*

Miscellaneous

**Custom Code Type**      **Custom Code**

Parent

TERM

**Note**

LDC 11/1/21, client did not submit proof of FT purpose for care, file was inactivated.

Save
Cancel

9. Un-assign Counselor:
  - a. Click on Counselor on the top left of the record.

Eligibility Verification
Active

Counselor

Change Household Status

- b. **Counselor:** Assign Counselor
- c. Assign.

✎ Assign Eligibility Counselor
✕

Assign Counselor to:  
 jane doe II **DOB:** 01/02/2013

**Counselor** \*

Assign Counselor

**Note**

You have 500 characters remaining.

Assign
Cancel

**Note:** The information listed in these guidelines are not all inclusive and staff are responsible for ensuring that all applicable rules, policies and procedures are adhered to in the execution of their duties and responsibilities as it relates to their position. These guidelines can be modified and exceptions may be made upon justification within program policy and with management approval. This procedure will be reviewed periodically or as needed for updates or revisions as approved by management.