

Date Revised: August 1, 2024

To: Ramsey County DWP/MFIP-Employment Services Staff

From: Workforce Solutions Integrated Planning Manager

Subject: Family Stabilization Services (FSS) Guidance

Purpose: The FSS guidance provides information on documentation and forms to help determine eligibility for FSS and how to work with FSS families.

BACKGROUND:

Medical Opinion Forms (MOF) are used to gather professional or medically informed views about a participant's or their dependents' health condition and the resulting ability of a participant to engage in work activities. Information on the MOF is then used to assist employment service (ES) providers and participants to develop employment plans (EP) and determine the most appropriate employment readiness activities. In addition to FSS, the MOF is used to determine whether or not a participant is likely to benefit from the Diversionary Work Program (DWP), to qualify for an MFIP extension or to provide good cause documentation. Refer to the [Department of Human Services \(DHS\) MFIP ES manual](#) sections *Family Stabilization Services (FSS)* and *Extensions* for more details.

Participants must provide DHS approved [verification by qualified professionals](#). If the participant does not provide his/her own documentation, then employment services provider must use one of the listed Medical Opinion form(s). All forms should first be reviewed by the participant and must include the participant's signature authorizing the ES provider to release their personal information. Signature for release of information is valid for one year.

ES providers requesting *new* or updated diagnostic information after one year, must first obtain a new participant signature for release of information. ES providers must keep track of the "date of appointment for re-evaluation of the condition" listed on each of the Medical Opinion form(s) and should follow up with the participants and their medical providers after the listed diagnosis renewal date in order to maintain status updates. Additionally, EPs should be reviewed every 6 months and be renewed no less than every 12 months. EPs should include activities that reflect the maximum possible number of employment or employment-readiness hours the health professional indicated is within the participant's capacity, based on their current diagnosis and condition.

FSS Categories

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| • Illness, injury, or incapacity (more than 30 days) | • Learning Disability |
| • Needed in the home to care for an ill or incapacitated family member | • Unemployable |
| • Special medical criteria | • Family Violence Waiver |
| • Developmental Disability | • Applying for SSI or RSDI |
| • Mental Illness | • In the country 12 months or less |
| • IQ Below 80 | • Age 60 or older |

POLICY AND GUIDELINES

A. General Guidelines: Forms for FSS eligible participants: The forms below are used to request medical information from qualified professionals to document a participant's (or his/her dependents') mental and/or physical conditions and limitations on employment. Select forms based on condition for qualified professional to complete:

1. [Request for Medical Information Cover Sheet](#) - *This cover letter accompanies with the following form(s):*
 - a. [Request for Medical Opinion - Family Member](#): This form is to be completed for the participant's dependent, or for being needed in the home to care for another family member.
 - b. [Request for Medical Opinion - Participant](#): This form is to be completed for the participant's own mental and/or physical health conditions.
 - c. [Request for Medical Opinion - Severe Emotional Disturbance \(SED\)](#): This form is to determine if a dependent in the home has an SED diagnosis.
 - d. [Request for Medical Opinion - Serious and Persistent Mental Illness \(SPMI\)](#): This form is to determine whether or not an SPMI diagnosis is present.
 - e. [Temporarily Unemployable Participant](#): This form is used by a qualified professional to document other significant issues that may affect the participant's ability to obtain and retain employment.
 - f. **Other Acceptable documents:** Individualized Educational Plan IEP (SED Child), Doctor's Note and/or Psychological Evaluations, DV Documentations (for DV Waiver).

B. Procedures:

1. FAS and ES have a shared responsibility in identifying potential FSS criteria and assisting the participant in securing documentation to verify eligibility. Explain potential FSS eligibility to participant.
2. Once known from participant, provide the appropriate MOF to the participant or request other acceptable supporting documentation from participant. Allow at least 10 working days to receive supporting documentation from participant.
3. Complete [FSS Eligibility Screening Form](#) and attach supporting documentation, submit to Manager/Supervisor for review and approval.
4. Once approved, submit Status Update form to FAS, include start and end date. See [FAS Coding Tips for Employment Services](#). Note: include all categories that qualify a participant for FSS. MAXIS follows a hierarchy to determine which FSS code will be used.
Option 1: <https://mnbenefits.mn.gov/> **Option 2:** Fax – (651)266-3930
5. Upload all documentations to WF1 EDS.
6. Complete an assessment of strengths, barriers, and special circumstances that impact, or may impact

progress toward EP goals (ex: SSTs/EM).

7. Identify services, supports, education, training, and accommodations needed to address barriers and enable meeting personal and family obligations.
8. Develop an EP with participant, utilize the supporting documentation to address long-term self-sufficiency and include an appropriate employment goal; include activities and hours of participation as appropriate. Ensure FSS plan types and EP correlates to the participants FSS category in WF1.
9. At minimum, complete monthly follow-up, case note and assist families in accessing the identified services and supports when necessary. Case notes about medical information should contain only the minimum necessary information: rarely include an actual diagnosis and use general language when writing case notes. Ex: "Medical condition present. See case file" or "medical condition restricts activities. See case file."
10. Monitor progress, track participation hours in WF1 and help the participant in any way that makes sense to document activities. Ex: Monthly activity log, phone call, virtual meeting, email, case notes by EC. If participant is receiving chemical dependency treatment, mental health treatment or rehabilitation services, a monthly activity log is required.
11. Set a schedule for periodic review of the EP (at least every 6 months) and modify the plan as appropriate. Request a new MOF once the previous one expires to assess the participant's ability to work. Create a new plan at minimum every 12 months even if there are no changes.
12. Provide ongoing resources and support to participants.
13. When participants no longer meet the criteria for FSS track, they return to regular MFIP. Notify the FAS when information is available.
14. Create an employment plan for the participant returning to regular MFIP that fits that participant's needs and circumstances.

C. Summary of Pre-Sanction Policy: Before a sanction can be imposed.

1. Ensure that the [Family Stabilization Sanction Checklist](#) is followed/completed
 - a. Review the most recent employment plan and all case file materials.
 - b. Invite the participant to a face-to-face meeting.
 - c. Schedule a home visit.
 - d. Request a release of information to obtain a current assessment by a behavioral health or medical professional.
 - e. Obtain a current assessment by a behavioral health or medical professional.

Note: For FSS participants with a Family Violence Waiver. Refer to Family Violence

