



JOE LOMBARDO  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF WELFARE AND SUPPORTIVE SERVICES

RICHARD WHITLEY, MS  
Director

ROBERT THOMPSON  
Administrator

TANF       MEDICAID       SNAP

Date: \_\_\_\_\_  
Case Name: \_\_\_\_\_  
Case ID: \_\_\_\_\_



**AUTHORIZATION:** I authorize you to release to the Division of Welfare and Supportive Services the requested information.

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

**PUBLIC LAW CERTIFICATION**

The individual referenced below has applied to this agency for assistance. Under Public Law, persons are eligible for Medicaid if certain criteria are met. We are requesting information concerning Social Security benefits which is necessary to determine if our client meets Medicaid eligibility under Public Law.

Please provide the information below and return this form to the address above. Your cooperation will help insure integrity and maintain accountability in the administration of public funds in Nevada. The information provided us will be used only in conjunction with the official duties of this department and will be considered confidential.

If our identifying information (name or Social Security Number) does not agree with your records, please indicate the change.

RE: \_\_\_\_\_  
Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Did SSI eligibility terminate?       YES  NO

If YES, month/year of termination.    Month \_\_\_\_\_ Year \_\_\_\_\_

**PICKLE AMENDMENT - PUBLIC LAW 94-566**

What was the gross RSDI benefit amount at the time the client was last **ELIGIBLE FOR**  
and RECEIVED SSI and ENTITLED to RSDI in the same month?    \$ \_\_\_\_\_

**ADULT DISABLED CHILD - PUBLIC LAW 99-643**

Did SSI terminate **SOLELY** due to the eligibility or increase in RSDI benefits as an  
adult disabled child?       YES  NO

What amount, if any, of the current SSA benefit, is adult disabled child benefit?    \$ \_\_\_\_\_



**WIDOW/WIDOWER - PUBLIC LAW 100-203**

Did SSI terminate solely due to the eligibility or increase in widow/widower benefits?  YES  NO

What amount, if any, of the current RSDI benefit, is widow/widower benefits? \$ \_\_\_\_\_

**WIDOWS, WIDOWERS & SURVIVING DIVORCED SPOUSES - PUBLIC LAW 101-508**

Did SSI terminate because the client became eligible for RSDI disability payments due to the **change in disability rules** for this group of claimants?  YES  NO

What amount, if any, of the current RSDI benefits, is for widow, widowers, and surviving divorced spouse benefits? \$ \_\_\_\_\_

---

Signature (SSA Rep)

Print Name

Title

Date

Telephone Number

