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100.1 - LEGAL BASE - Virginia's Temporary Assistance for Needy Families (TANF) Program is based on Title IV-A of the Social Security Act as amended by the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, the TANF State Plan, and on the Code of Virginia, Sections **63.2-602** through **63.2-619**. PRWORA allows states to establish program requirements in any manner which will reasonably accomplish the purpose of TANF.* The purpose of TANF is to:**

- provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;
- end the dependence of needy parents on government benefits by promoting job preparation, work, and marriage;
- prevent and reduce the incidence of out-of-wedlock pregnancies; and
- encourage the formation and maintenance of two-parent families.

State and federal law establishes the right of any individual:

- to apply for financial assistance;
- to have his eligibility for such assistance determined promptly and in conformity with law and established policy;
- if found eligible, to receive assistance promptly and in the amount determined according to established policy; and
- to appeal to the Commissioner of Social Services, if he is dissatisfied with the decision of the local department on his case.

100.2 - Administration - Title **63.2** of the Code of Virginia mandates a local department of social services in every political subdivision of the State, or combination thereof, and specifies the duties and responsibilities of the local social services board and superintendent/director, as well as the methods of discharging these responsibilities.

The law also defines the general and specific duties and responsibilities of the State Department of Social Services in relation to supervision of the local social services program.

Within the framework of the statutes and the regulations of the State Board of Social Services, local boards of social services carry responsibility for the administration of social services programs in their respective localities. The State Department of Social Services carries responsibility for supervision of local programs, consultative assistance to localities in the implementation of programs, and monitoring and evaluation to assure that the intent of the law and regulations is fulfilled on a statewide basis.

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* Social Security Act, Sec. 404(a)(1)
** Social Security Act, Sec. 401(a)

In addition, the State Department of Social Services carries direct responsibility for locating and securing support from responsible persons for children receiving TANF and, on application, providing this same service to non-welfare clients.

100.3 - FUNDING - The funding for the TANF Program is accommodated through a federal block grant and from State funds authorized by the General Assembly of Virginia.

101.1 - NONDISCRIMINATION - **Federal law and the Virginia Human Rights Act, Virginia Code §2.2-2632 et seq., bar discrimination on the basis of age, race, sex, disability, religious creed, national origin, and political belief. The following civil rights laws apply in TANF:**

1. **The Age Discrimination Act of 1975, 42 U.S.C. §6101 et seq.**
2. **Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794**
3. **The Americans with Disabilities Act of 1990, 42 U.S.C. §12101 et seq.**
4. **Title VI of the Civil Rights Act of 1964, 42 U.S.C. §2000d et seq.**

Virginia has established procedures for ensuring fair and equitable treatment of applicants and recipients of public assistance. The local department of social services must assure that no person shall, on the grounds of age, race, color, sex, disability, religious creed, national origin, or political belief be subjected to discrimination.

A. <u>Key Principles</u> - Compliance with these laws assures that equal opportunity for persons with disabilities to benefit from all aspects of public assistance programs, including access to the proper support services to enable such individuals to work and to keep their families healthy, safe and intact. There are two key principles underlying the bar on discrimination against people with disabilities:

1. **<u>Individualized treatment</u>. "Individualized treatment" requires that individuals with disabilities be treated on a case-by-case basis consistent with facts and objective evidence. Individuals with disabilities may not be treated on the basis of generalizations and stereotypes.**

2. **<u>Effective And Meaningful Opportunity</u>. "Effective and meaningful opportunity" means that individuals must be afforded meaningful access to the TANF program so that individuals with disabilities benefit from and have meaningful access to TANF to the same extent as individuals who do not have disabilities.**

B. Legal Requirements - In order to implement these two principles, the following legal requirements must be met:

- Ensure equal access through the provision of appropriate services to people with disabilities.
- Modify policies, practices and procedures to provide such equal access.
- Adopt non-discriminatory methods of administration in the program.

C. Applicability To All Staff, Contractors, Vendors At The State And Local Levels - In compliance with the federal laws, Virginia does not discriminate against people with disabilities in its TANF program. This policy applies to all Department of Social Services staff at both the state and local levels. It also applies to those agencies and entities with which we contract for services. State and county agencies must ensure that contractors and vendors do not subject recipients to discrimination.

D. Definition Of A Person With A Disability - Federal law protects individuals with a "disability" and defines that term to mean a person who has a physical or mental impairment that substantially limits one or more of the major life activities of that individual, a person who has a record of such an impairment, or a person who is being regarded as having such an impairment.

E. Complaint Procedures – Individuals who believe that they have been discriminated against on the basis of disability have the right to file a grievance under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act (Section 504) with the state TANF Manager. The grievance must be resolved promptly.

Individuals who believe they have been discriminated against on the basis of disability (including failure to provide reasonable accommodations), race, national origin (including the failure to provide access to services to people with limited English proficiency) can also file a complaint with the Office of Civil Rights at the U.S. Department of Health and Human Services. Complaints must be filed within 180 days after the discrimination occurred. The complaint should include the same information listed in Part A above. To file a complaint, write to:

HHS Office for Civil Rights
Suite 372
Public Ledger Building
150 S. Independence Mall West
Philadelphia, PA 19106-3499
Hotline: 1-800-368-1019
TDD: 215-861-4440

F. Responsibility To Share Information Between Staff And Contractors - If one section of DSS determines that a person has a disability, then the staff must share that information with the other staff, as appropriate.

The case record must include clear references to a person's disabilities, along with a description of the reasonable modifications that agency staff have determined are needed to address the person's disability and services and supports the agency will provide to assist the individual and family.

G. Staff Authority To Make Reasonable Modifications - It is the responsibility of the worker to consider whether a person may have a disability, and how a person's disability may affect the person's ability to comply with rules, fill out forms, attend appointments, etc. If it is determined that a person has a disability that affects her ability to comply with program rules or procedures, the worker has the authority to make reasonable modifications to program rules, requirements and procedures to ensure that the person with a disability receives full and meaningful access to TANF programs and services.

Evidence of disability of a recipient or a household member in need of the recipient's care, including any indications that the person may have a disability, and all requests for reasonable accommodations shall be documented in the case file.

H. Examples Of Accommodations

Ms. A comes in to apply for TANF. She has a learning disability and is unable to complete the application. As a reasonable accommodation, staff assists her to complete the application.

Ms. B is not able to come to the office due to the nature of her disability. Staff arranges to obtain the information by phone.

Ms. C missed repeated appointments. It is determined that she has a mental illness preventing her from organizing information and keeping track of appointments. The staff phones her on the morning of an appointment to help her to remember to keep the appointment.

101.2 - COMPLAINT PROCEDURES - Any person who believes that he has been subjected to discrimination on the basis of race, color, national origin, sex, age, religion, political affiliation, or handicap has a right to file a complaint. Such a complaint may be filed also by a representative of the person allegedly discriminated against. Procedures below are to be followed:

A. When the alleged discriminatory practice is on the part of the local department or its staff, the complaint is to be made in writing to the local welfare board not later than 180 days from the date of the alleged discrimination. A complaint may also be filed with the Commissioner of the Virginia Department of Social Services, or with the Region III Office of Civil Rights. The written complaint must include:

1. The name of the person or persons felt to have been treated unfairly.

2. The date and nature of the treatment received.

3. The names of other persons, if any, who were present when this action allegedly occurred.

4. Any other pertinent facts related to the complaint.

5. The date the complaint is made.

6. The signature of the person making the complaint.

B. Each complaint received is to be investigated and corrective action taken if appropriate.

C. If the person making the complaint requests a hearing before the local board, the request is to be granted and reasonable notice of the hearing given by the agency to those persons whose participation is necessary in a review of the questions raised in the complaint.

D. Following the hearing, the local board will give the complainant a statement of the findings, and if the complaint is justified, a statement as to what corrective action will be taken.

E. If the complainant is not satisfied with the findings of the local board, he may write within 30 days of the date of receipt of the board findings to the State Department of **Social Services**.

F. The State Department of **Social Services** will make an investigation of the circumstances and advise the complainant in writing of its findings and of any action to be taken by the local department.

State staff in the regional offices have responsibility for reviewing and supervising local methods of handling complaints.

101.3 - RECORDS, REPORTS AND REVIEWS - The local department is to maintain in its administrative file a record of each complaint, including the complainant's statement and a file of the investigations, findings and action taken. If there has been a hearing before the local board, the record should include a copy of the board's statement to the complainant.

From time to time, other reports may be required by the State Department of **Social Services** to assure compliance with the Civil Rights laws.

The practices of a local department with respect to compliance are subject to review by a representative of both the State and federal agencies.

102.1 DEFINITION - "Intentional Program Violation (IPV)" means any action by an individual for the purpose of: 1) establishing or maintaining the family's eligibility for Temporary Assistance for Needy Families (TANF)* (diversionary and ongoing assistance) or Virginia Initiative for Employment not Welfare (VIEW); or 2) increasing or preventing a reduction in the amount of the grant; or 3) establishing eligibility for VIEW supportive or transitional services.** For an IPV to exist, the action by the individual must be: 1) an intentionally false or misleading statement or misrepresentation; 2) concealment or withholding of facts; or 3) any act intended to mislead, misrepresent, conceal or withhold facts or propound a falsity.*** Whoever obtains or attempts to obtain, or aids or abets any person in obtaining, by means of a willful statement or representation, or by impersonation, or other fraudulent device, assistance or benefits from TANF and other programs designated under rules and regulations of the State Board of Social Services is committing an IPV.

In determining whether an IPV exists, the worker must determine that a disability of the individual was not the cause of the person's actions, such that the person did not have the intent to make a false or misleading statement or misrepresentation. In such cases, an IPV cannot be found. Instead, the local agency will work with the individual to ensure that a similar problem does not arise in the future. This may require that the agency put in place steps to assist the individual to provide the worker with the needed information on a timely basis.

102.2 RESPONSIBILITIES OF LOCAL DEPARTMENTS - The local agency has the following responsibilities in relation to IPV:

A. During the TANF application and VIEW assessment the agency must ensure and document that a clear and full explanation is given to the applicant/recipient of the eligibility requirements for the type of assistance and services being requested or received; of his responsibility to give complete and accurate information related to his eligibility and to report promptly and fully any changes in his circumstances; and of the provisions of the law with respect to knowingly giving false information or deliberately withholding information which would affect his eligibility for assistance or the amount thereof. The worker must explain fully to the recipient what types of changes in his circumstances would have an effect on the grant and services provided. At TANF application, the agency must explain IPV to the applicant/recipient and explain the Notice of Intentional Program Violation Penalties. This form may be found on the local agency DSS Intranet site (www.localagency.dss.state.va.us). A copy is to be given to the applicant/recipient and a copy is filed in the eligibility record. The assistance unit must report all required changes within 10 calendar days from the date the unit knows of the change but is reported timely if reported by the tenth of the following month.

B. The local agency must conduct an investigation of an allegation that an individual committed an intentional program violation, regardless of the TANF payment or VIEW Program status. A determination as to whether an IPV has occurred must be based on careful consideration of the

* 45 CFR 235.112
** 2002 Acts of Assembly, Item 362
*** Code of Virginia 63.2-522

circumstances. A determination must be made that there has been a deliberate misrepresentation on the part of the applicant/recipient. Consideration should be given to: (1) whether the incorrect or unreported information was, in fact, known to the applicant/recipient and (2) whether the applicant/recipient understood the eligibility and reporting requirements.

C. The local agency is required to proceed against any individual alleged to have committed an intentional program violation by referring the matter to the appropriate authorities for criminal action in a federal or state court or through an administrative disqualification hearing (ADH).

An individual may be charged with an IPV even if the application was denied. An overpayment does not have to exist for there to be a determination of an IPV. Individuals may be charged with an IPV for VIEW even if supportive or transitional services have not yet been received. For a VIEW IPV the agency is not to terminate future supportive or transitional services if those services are needed to assist the client to maintain employment.

The local agency may refer a case for prosecution or initiate an ADH regardless of the current eligibility of the individual.

D. The local agency must coordinate its actions with any corresponding actions being taken against the individual under the Food Stamp Program if the factual issues involved arise out of the same or related circumstances.

E. The forms listed below must be used in the IPV process. The forms and instructions for their use may be accessed from the Local Agency DSS Intranet site (www.localagency.dss.state.va.us/).

1. Notice of Intentional Program Violation (032-03-721)

2. Waiver of Administrative Disqualification Hearing (032-03-722)

3. Referral for Administrative Disqualification Hearing (032-03-725)

4. Advance Notice of Administrative Disqualification Hearing (032-03-724)

5. Administrative Disqualification Hearing Decision (032-03-723)

6. Notice of Disqualification for Intentional Program Violation (032-03-052)

F. The local agency shall confer with the appropriate local legal authorities to determine the types of cases accepted for prosecution and cases of alleged IPV will be referred for prosecution in accordance with the agreement established between the legal authority and the local

agency. This agreement shall include information on how and under what circumstances cases will be accepted for possible prosecution and any other criteria set by the prosecutor for accepting cases for prosecution, such as a minimum amount of overpayment which resulted from the IPV. The local agency is to refer for prosecution those individuals as agreed to with the Commonwealth’s Attorney.

102.3 IPV DISQUALIFICATION PENALTIES - An individual found to have committed an IPV by a court of appropriate jurisdiction, pursuant to an administrative disqualification hearing (ADH), or waiving his right to an administrative disqualification hearing is subject to IPV penalty periods of six months for the first offense, twelve months for the second offense, or permanently for the third offense. Notice of the disqualification penalties for IPV is included in the Application for Benefits (032-03-824).

If found to have committed an IPV pursuant to an ADH, and at some later point it is determined that the individual had a disability that interfered with his or her ability to file accurate and timely information, or with his or her capacity to have the intent to defraud or otherwise provide improper information to the state, or has limited English proficiency that impaired his or her ability to provide accurate and timely information, the worker must lift the IPV and prospectively reinstate benefits.

NOTE: No individual can be disqualified for a TANF IPV that was committed prior to December 1, 1992 or an IPV committed in the VIEW Program prior to April 1, 2003. IPV's committed prior to this date can be referred for prosecution; however, no disqualification period can be imposed if found guilty. Additionally, the ADH process is not applicable to IPV's committed prior to December 1, 1992.

A. Only the individual found guilty of committing an IPV shall be disqualified. The local agency shall not take the individual's needs into account when determining the assistance unit's need and the amount of assistance. However, if the individual is a parent, any income of the disqualified parent must be considered available to the assistance unit. (See Section 305.4) NOTE: When an IPV occurs and the Waiver of Administration Disqualification Hearing (032-03-722) is signed while the application is pending, the disqualified individual's needs are excluded when determining a diversionary assistance payment.

B. The period of disqualification must begin no later than the second month following the month of the court's decision of guilty, the date the waiver notice is received by the local agency, or the date the Administrative Disqualification Hearings Decision Notice is issued by the hearing officer. If the individual is not eligible for TANF at the time the disqualification is to begin, the period must be postponed until the individual applies for and is determined eligible for benefits. The disqualification period must run uninterrupted until it expires.

The disqualification penalty must be in addition to, and cannot be substituted for, any other sanctions or penalties which may be imposed by the court for the same offense. The disqualification penalty cannot substitute for other sanctions under the TANF program.

Any period for which a disqualification period is imposed will remain in effect, without possibility of an administrative stay, unless and until the finding upon which the penalty was based is subsequently reversed by a court of appropriate jurisdiction, **or the disqualification period was imposed by an ADH and it is determined that the individual had a disability that prevented the filing of accurate and timely information or with his or her capacity to have the intent to defraud or otherwise provide improper information to the state, or has limited English proficiency that prevented providing accurate and timely information, then lift the IPV and reinstate benefits prospectively.** In no event shall the duration of the period for which such penalty is imposed be subject to review in a fair hearing.

C. An individual convicted in state or federal court of fraudulently misrepresenting his address to receive benefits in two or more states is ineligible to receive TANF for 10 years. Benefits refer to TANF, Medicaid, and Food Stamps. The 10 year period begins on the date the individual is convicted.*

102.4 ADMINISTRATIVE DISQUALIFICATION HEARINGS (ADH) - An administrative disqualification hearing is an impartial review by a hearing officer of an individual's actions involving an alleged IPV for the purpose of rendering a decision of guilty or not guilty of committing an IPV.**

In order to request an ADH, the local agency shall ensure that a pre-hearing investigation has occurred and that the evidence supports the charge of intentional program violation. There must be clear and convincing evidence which demonstrates the individual committed or intended to commit a TANF, or

* Code of Virginia 63.2-522
** 45 CFR 235.113

VIEW IPV. Examples of evidence include but are not limited to:

A. Written verification of unreported income received by the individual; or

B. Verification that the individual understood the reporting responsibility by his signature on the application/redetermination form or another form for this purpose.

C. An application/redetermination form or change form submitted during the period the IPV is alleged to have occurred which omits the information in question; or

D. Documented contacts with the individual during the period the IPV is alleged to have occurred in which the individual failed to report the information in question.

E. Verification that information on a voucher or check for gas or check to a vendor was altered. Example: changing money amounts, purpose, date or signature; or

F. Verification that the client received other services provided by the agency and sold them to another individual; or

G. Verification that items were obtained under false pretenses. Example: receiving assistance to obtain an automobile and giving it to another person.

If a case is referred for an ADH, it shall not be simultaneously referred for prosecution. Cases dismissed in court or individuals acquitted by the court cannot be referred for an ADH.

102.5 NOTIFICATION OF IPV - Prior to requesting an ADH by the State Hearing authority, the local agency shall provide the form, Notice of Intentional Program Violation, to the individual alleged to have committed the program violation advising the individual of the alleged IPV. In addition, the individual must be informed he can waive his right to an administrative disqualification hearing by signing the Waiver of Administrative Disqualification Hearing form and returning this form to the local agency within 10 days.

The notice must advise the person that reasonable accommodations are available in order to participate in the hearing. It must also inform the person that if the person has a disability or limited English proficiency that could have impaired the person’s ability to provide accurate and timely information, the person should provide this information to the eligibility worker and the hearing officer, as this information could have an impact on the decision about whether there is an IPV.

If there is an indication of a disability or that the person has limited English proficiency that prevented providing accurate and timely information or the capacity to have the intent to defraud or otherwise provide improper information, but the staff has determined to proceed with the IPV because there is compelling evidence of intent to violate the requirements, then it

will not be appropriate to accept a waiver of hearing from the individual and the request for a hearing must be forwarded to the State Hearing authority.

If a signed waiver is received, an ADH is not scheduled and the disqualification period is imposed in accordance with policy at Section 102.3. A copy of the signed waiver is to be sent, for federal reporting purposes, to:

Manager, Appeals and Fair Hearings
Virginia Department of Social Services
730 East Broad Street
Richmond, VA 23219-1849

102.6 REFERRAL FOR AN ADH - If a signed waiver is not received within 10 days, the local agency shall request an ADH be scheduled by submitting form, Referral for Administrative Disqualification Hearing, to the State Hearing authority. The form must include the following information:

A. Identifying information
B. Summary of the allegation(s)
C. Summary of the evidence
D. Copies of documents supporting the allegation(s)

The referral is to be signed and dated by the supervisor or local agency director.

A fair hearing and an ADH may be combined into a single hearing if the factual issues arise out of the same or related circumstances provided that the individual receives prior notice of the consolidation.

102.7 SCHEDULING THE ADH - Upon receipt of the request for an ADH, the State Hearing authority will forward the request to the appropriate Regional Hearing Officer.

102.8 ADVANCE NOTICE OF ADH - The hearing officer will schedule a date for the ADH and provide written notice to the individual suspected of committing an IPV at least 30 days in advance of the date the ADH has been scheduled. The form, Advance Notification of Administrative Disqualification Hearing, is used for this purpose.

102.9 TIME AND PLACE OF THE ADH - The time and place of the ADH shall be arranged so that the hearing is accessible to the individual suspected of committing an IPV. The individual may request a postponement of the ADH if the request for postponement is made at least 10 days in advance of the date of the scheduled hearing. The ADH shall not be postponed for more than a total of 30 days and the State Hearing authority may limit the postponement to one.

102.10 FAILURE OF INDIVIDUAL TO APPEAR AT THE ADH - The ADH can be held even if the individual fails to appear. The individual has 10 days from the date of the scheduled ADH to present reasons indicating good cause for failure to appear. No notice to the individual is required when failure to appear occurs.

Even though the individual is not represented, the hearing officer must carefully consider the evidence and determine if an IPV was committed based on clear and convincing evidence. If the individual is found to have committed an IPV but a hearing officer later determines there was good cause for not appearing, the previous decision is no longer valid and a new ADH must be conducted. The hearing officer who conducted the original hearing may conduct the new hearing. The good cause decision must be entered into the hearing record by the hearing officer.

102.11 PARTICIPATION WHILE AWAITING A HEARING - A pending ADH shall not affect the individual's right to participate in the TANF/VIEW program. The local agency may not disqualify an individual until the hearing officer finds that the individual has committed an IPV. This does not preclude, however, the local agency from reducing, suspending or terminating assistance for other reasons.

102.12 CONDUCT OF THE ADH - The hearing officer presides and conducts the hearing informally. Technical rules of evidence are not required. The hearing may be conducted via a teleconference or a telephone hearing.

A. Attendance at the ADH

The ADH is attended by persons directly concerned with the issue. This normally means a representative of the local agency and the individual alleged to have committed the IPV.

B. Responsibilities and Duties of the Hearing Officer

The hearing officer shall:

1. Identify those present for the record.

2. Advise the individual that he may refuse to answer questions during the hearing and that anything said or signed by the individual concerning the charge(s) may be used against him in a court of law. **If the person is not represented and has been determined to have a disability or limited English proficiency that could affect his or her ability to represent him or herself, then the hearing officer must direct the local agency to assist the person in identifying a representative.**

3. Explain the purpose of the ADH, the procedure, how and by whom a decision will be reached and communicated, and the option of either the individual or the local agency to request review of the hearing officer’s decision by the Commissioner’s appeals review panel..

4. Consider all relevant issues. Even if the household is not present, the hearing officer is to carefully consider the evidence and determine if an IPV was committed.

5. Request, receive and make part of the record all evidence determined necessary to render a decision.

6. Regulate the conduct and course of the hearing consistent with due process to insure an orderly hearing.

7. Advise the local agency to obtain medical assessment at local expense if the hearing officer considers it necessary.

C. Rights of Individual

The individual alleged to have committed an IPV must be given adequate opportunity to:

1. Examine all documents and records to be used at the ADH at a reasonable time prior to the ADH as well as during the ADH. The contents of the case file, including the application form and documents of verification used by the local agency to establish the alleged IPV, shall be made available.

2. Present his own case or with the aid of an authorized representative.

3. Bring witnesses.

4. Establish all pertinent facts and circumstances.

5. Question or refute any testimony or evidence, including the opportunity to confront and cross-examine witnesses.

6. Advance arguments without any undue influence.

As the individual may not be familiar with the rules of order, it may be necessary to make particular efforts to arrive at the facts of the case in a way that makes the individual feel most at ease.

The individual may refuse to answer questions during the hearing.

D. Responsibilities and Duties of Local Agency

The local agency representative is responsible for presenting the agency's case at the ADH. The agency representative has the same rights as the individual as listed in Section 102.12 C.

102.13 NOTIFICATION OF ADH DECISION - The hearing officer is responsible for rendering a decision based on clear and convincing evidence. The decision shall be based on evidence and other material presented at the hearing. The hearing officer must substantiate his decision by identifying supporting evidence and applicable regulations.

Following the ADH, the hearing officer shall prepare a written report of the hearing which shall include findings, conclusions, decisions and appropriate recommendations. The decision shall specify the reasons for the decision, identify the supporting evidence, identify pertinent TANF regulations and respond to reasoned arguments made by the individual or representative.

The hearing officer must notify the individual of the decision within 90 days of the date of the Advance Notice of ADH. The Administrative Disqualification Hearing Decision Form shall accompany the findings. The individual shall be informed of his right to request the Commissioner's appeals review panel review of the decision within 10 days of the date of the notice. If the individual is found guilty of an IPV, the decision shall advise the individual that disqualification will occur.

If the individual did not appear at the hearing and the hearing officer determines that an IPV was committed, the hearing officer will delay notification of the decision until 10 days after the date of the hearing to allow the individual time to present good cause for failing to appear. No notice to the individual is required when failure to appear occurs.

The determination of an IPV by the hearing officer cannot be reversed by a subsequent fair hearing.

The individual is entitled to seek relief in a court of appropriate jurisdiction. The period of disqualification may be subject to stay by a court of appropriate jurisdiction or other injunctive remedy.

The amount of the overpayment subject to repayment may be appealed by a fair hearing, provided that the individual did not request a fair hearing for that reason which was consolidated with the ADH.

102.14 IMPLEMENTATION OF THE HEARING DECISION - Upon receipt of the notice of a decision from the hearing officer finding the individual guilty of an IPV, the local agency must inform the individual of the disqualification by sending the Notice of Disqualification for Intentional Program Violation Form. **A copy of the decision will be placed in the TANF and/or VIEW case record.** The notice shall inform the individual of the reason for the disqualification and the date the disqualification shall take effect or that the disqualification will be postponed until the individual reapplies and is determined eligible for benefits if the **TANF** case has been terminated **or closed**. Additionally, this notice must advise the individual of the amount of benefits the assistance unit will receive. The individual must be disqualified in accordance with policy located at Section 102.3. The Advance Notice of Proposed Action must also be sent to serve notice of the reduction or termination of benefits.

If the individual is found not guilty of committing an IPV, no disqualification is imposed and any overpayment is handled as a nonfraud recovery.

103.1 - PURPOSE OF SAFEGUARDING OF INFORMATION AND SCOPE OF REGULATIONS - Mutual trust and confidence between client and worker are basic to an effective program of assistance and services. The client has a responsibility to provide the information which the agency needs to determine eligibility for assistance or to provide services. At the same time, the client has a right to expect that information given to the agency will be kept confidential and made use of only as needed in the administration of the public welfare program.

The regulations governing the confidential treatment of case information for the TANF program administered at the local agency level can be found in the Department of Social Services Administration Manual, Volume I, Chapter A. Disclosure of information and retention requirements regarding all match reports received through the Income Eligibility Verification System (IEVS), including Internal Revenue Service (IRS) data, can be found in the IEVS User Guide, Chapter C.

103.2 - EXCHANGE OF INFORMATION WITH LAW ENFORCEMENT AGENCIES - The agency must provide upon request to a Federal, state, or local law enforcement officer the address of a current recipient who is a fugitive felon or is in violation of a condition of probation or parole.*

A. The current address may be given to the officer who furnishes the name of the recipient and notifies the agency that the recipient:

   1. is a convicted felon fleeing prosecution, custody or confinement or in violation of a condition of Federal, State or local probation or parole; or

   2. has information that is necessary for the officer to conduct their official duties; and

   3. the location or apprehension of the recipient is within the officer's official duties.

B. The record must be documented carefully regarding the release of the address. Documentation must include:

   1. The name, badge number and law enforcement affiliation of the officer; and

   2. a written request for the address. The form "Request for the Address of a TANF Recipient" located in the forms drawer may be used for this purpose.

103.3 - RELEASE OF INFORMATION REGARDING PAST RECEIPT OF BENEFITS BY ALIENS* - Section 212(a)(4) of the Immigration and Nationality Act allows the denial of entry into the U.S. of any alien determined likely to become a public charge. If the Immigration and Naturalization Service, the Department of State, or an immigration judge requests information regarding past receipt of AFDC or TANF benefits for the purpose of evaluating public charge risk, the local agency must deny the request unless they have the written consent of the alien.

* Public Law 104-193

103.4 - RELEASE OF INFORMATION TO THE **U.S. CITIZENSHIP AND** IMMIGRATION SERVICES (**USCIS**) REGARDING ILLEGAL ALIENS* - If a representative of the INS requests information regarding an individual who the local agency knows is unlawfully in the U.S., the local agency must furnish the **USCIS** with identifying information. This information is limited to the name, address, and Social Security Number of the individual. This information will be reported to **USCIS** by a local department of social services only upon request by a **USCIS** representative.

For the local agency to know an individual is unlawfully in the U.S., the individual must have presented as part of the application or renewal process a Final Order of Deportation issued by **USCIS** or the Executive Office of Immigration Review. For purposes of informing **USCIS** of illegal aliens, only a Final Order of Deportation is sufficient proof of illegal status.

* Public Law 104-193, Section 404

104.1 PURPOSE AND SCOPE OF APPEAL PROCESS - The Temporary Assistance for Needy Families State Plan and the Code of Virginia, Sections **63.2-117 - 63.2-119**, as amended, provide the opportunity for a "fair hearing" to individuals affected by the administration of the public assistance programs.

The statute establishes the right of any individual to appeal and receive a fair hearing before the State agency (a) because his claim for assistance is denied, or is not acted upon with reasonable promptness; or (b) because he is aggrieved by any other agency action affecting his entitlement to or receipt of assistance, or by agency policy as it affects his situation.

The regulations contained herein are applicable to appeals in the TANF Program. These provisions do not apply to appeals related to the Medical Assistance Program, which is administered by the **Department of Medical Assistance Services**, except that, when an appeal in relation to Medicaid is requested on the basis of eligibility, the local agency responsible for the determination of eligibility for medical assistance shall participate in the hearing before the **Department of Medical Assistance Services**.

104.2 ROLE OF THE COMMISSIONER OF SOCIAL SERVICES - Sections **63.2-517** through **63.2-519** of the Code of Virginia vest the Commissioner of Social Services with ultimate authority and responsibility for fulfillment of the provisions of the appeal process. The State Board, as authorized by Section **63.2-217** of the Code of Virginia, establishes policies and procedures to implement the appeal process in accordance with applicable laws and regulations.

The Commissioner may delegate to duly qualified hearing officers the authority to make decisions in any appeal case. The Commissioner shall establish an appeals review panel to review hearing decisions upon the request of either the applicant or the local board. The panel's responsibilities are to determine if any changes are needed in the conduct of future hearings, or to policy and procedures related to the issue of the appeal, and periodically report its findings to the Commissioner.

104.3 PRELIMINARY DEFINITIONS -

A. Assistance - This term, for purposes of this Section, refers to financial assistance in the TANF program.

B. Claimant - A person who files an appeal of some aspect of his entitlement to assistance.

C. State Hearing Authority - A comprehensive term used to designate the State Agency decision-maker in appeal cases; as such, it includes the **Commissioner** and duly qualified hearing officers, including the **Hearings Manager,** of the State Department of Social Services, in whom the **Commissioner** has reposed full authority to make binding decisions in appeal cases in the name of the State Hearing Authority.

D. Hearing Officer - An impartial representative of the State Agency to whom appeals are duly assigned and by whom they are heard. He must not have been involved in any way with the agency action on appeal. The hearing officer is empowered with the authority specified herein to conduct and control hearings and to decide appeal cases.

E. **Hearings Manager** - An individual who determines, promulgates and assures compliance with internal procedures, including processes for maintaining the **Commisioner's** review of fair hearings, necessary for an effective State fair hearing system. This individual also provides supervision and training to hearing officers and can hold hearings and render decisions for the **Commissioner** of Social Services.

F. State Agency - This term, for purposes of this Chapter, refers to the Central Office and to the **five** Regional Offices of the State Department of Social Services. It is the responsibility of the State Agency to assure that appeal provisions are correctly administered, that decisions in appeal cases are consistent with established public assistance policies, and that such decisions are given prompt effect.

G. Date of Hearing Decision - The Date of the letter conveying the hearing officer's decision. This date should be the same as the postmark. If it is not and the recipients of the letter can verify that it is different, applicable time frames will be extended.

105.1 NOTIFICATION OF RIGHT TO APPEAL -

A. Every applicant for and recipient of assistance shall be informed in writing, at the time of application and at the time of any action, proposed or taken, affecting his claim, of the circumstances under which he has a right to a fair hearing of the method by which he may obtain a hearing, and of the right to be represented by others or to represent himself.* This is accomplished by giving each applicant the booklet, Virginia Social Services Benefit Programs, describing the assistance program(s) for which he is applying and fair hearing procedures at the time assistance is first requested. For recipients this is accomplished when the recipient receives a written notice at the time of any action, proposed or taken, affecting his claim.

In addition to the use of written material, the local agency worker has the responsibility of informing the client orally of the right to appeal to the State agency if he is dissatisfied with any actions of the local board or Superintendent or failure to act in relation to his eligibility or the amount of assistance. **The local agency must inform clients orally that if they have a disability that limits their ability to file an appeal, they are entitled to help from the local agency in filing the appeal.**

B. Local agencies have an affirmative duty to provide information and referral services to help claimants make use of any legal services available in the community for representation in appeal hearings.

C. In addition to advising applicants and recipients about the right of appeal and the hearing procedures, other interested persons and organizations are to be advised verbally and by use of the leaflets as indicated.

D. All applicants and recipients must be informed of their right to request an appeal either orally or in writing.**

105.2 FAIR HEARINGS

A. Opportunity for a Local Agency Conference -

The recipient must be offered an opportunity, at the time the Notice to Client of Action or the Advance Notice of Proposed Action is issued, to request such an agency conference at which he must receive an explanation of the proposed action and must have an opportunity to present any information on which his disagreement with such action is based. At the conference the recipient may be represented by an authorized representative, such as legal counsel, relative, or friend.

Upon receipt of a request for such a conference, the local department must schedule the conference within 10 working days.

The recipient's failure to request a local agency conference or failure to appear at a scheduled conference has no effect upon his right of

* 45 CFR 205.10(a)(3)
** 22 VAC 40-295-110

appeal to the State agency within 30 days or upon his right to continued assistance if he appeals prior to the effective date of the proposed change, as specified in Subsection B.

Note: If the recipient did not receive an advance written Notice of Proposed Action or the notice received was not adequate, or due to disability-related reasons, the appeal was not filed within 30 days of the action, at the recipient's request financial assistance must be reinstated retroactively to the date of agency action and continued during the appeal process.

The local agency conference may or may not result in a change in the agency decision regarding action.

If the agency decision is not to take action or to take action different from that indicated on the advance notice, the recipient must be so advised by use of the Advance Notice of Proposed Action. Provisions of Subsection B again apply.

If the recipient is not satisfied with the agency action following the conference and wishes to request a fair hearing before the State agency, the local agency must give him the opportunity and, if necessary, provide assistance in filing an appeal. If an appeal is filed prior to the effective date of the change or within two days following the date of the conference, and validated by the hearing officer, assistance must be continued in the original amount until the hearing decision, unless there is a written request to refuse the continuation of assistance pending a decision.

If an appeal is not filed prior to the effective date of the change or within two days of the date of the conference, an appeal will still be valid if filed within the 30-day time limit; however, assistance will be adjusted in accordance with the proposed action.

B. Special Provisions with Respect to Termination or Decrease in Amount of Assistance

1. Advance Notice of Proposed Action - The Goldberg v. Kelly decision of the United States Supreme Court requires that in cases of any proposed reduction, termination, or suspension of assistance payments, written advance notice of the proposed action must be mailed to the recipient at least 10 days before the action is taken. In this context, "action" refers to the date of issuance of the reduced assistance check, or in cases of termination or suspension, failure to issue the check on the regular mailing date. In the computation of the 10 days the date the advance notice is postmarked shall not be included.

2. Provisions Regarding Continuation of Assistance – If a conference is requested within 10 days of receipt of the Advance Notice of Proposed Action, the proposed action will not be taken until a decision is made at the conference. If a hearing request is

received prior to the effective date of any proposed reduction in benefits or within two days following the date of the conference, assistance must be continued in the original amount without interruption until a hearing decision is rendered but is subject to recovery by the agency if its action is sustained. (Refer to 106.1 E) However, assistance will not be continued in the original amount if the recipient submits, in writing, a statement indicating his/her desire to refuse such assistance. When continuation of assistance in the original amount is declined by the recipient and the hearing decision is in the recipient's favor, the agency will correct the underpayment(s).

Note: A TANF recipient may receive match payments during the appeal process provided the case remains open. Receipt of TANF match payments is contingent upon collection of current child support by DCSE two months prior to the month a payment is issued. If the decision of the agency is upheld, only the TANF benefit amount is an overpayment.

In the event the hearing decision is adverse to the recipient, the method of collection is that prescribed for recoupment and recovery of overpayments set forth at Section 503.8.*

The requirement for filing an appeal or requesting a local agency conference is met if the request for a conference is made within 10 days of receipt of the Advance Notice of Proposed Action or a fair hearing request is received by the State or local agency, or postmarked, by the effective date of the change. The same time frame for filing an appeal applies in situations where the assistance unit is homeless and it is agreed that all notices will be available to the client at the local agency.

Upon notification by the hearing officer, the agency shall inform the claimant in writing that assistance is being continued in the same amount pending the hearing decision unless there are subsequent changes in the claimant's situation. (Refer to 106.1 E)

The following procedures are established to assure that assistance is continued without interruption in every case where a recipient has filed a valid appeal prior to the effective date of the proposed change:

If the effective date for checks occurs more than 10 days but within 15 days of the date on which the Advance Notice of Proposed Action is mailed (excluding the date of postmark) and

A. The proposed action is to terminate or suspend assistance, the assistance check is not mailed but must be available for same day issuance in the event an appeal is filed or a conference is requested within the 10-day advance notice period.

* 45 CFR 233.20(a)(13)

B. In cases of proposed action to reduce assistance, a check in the reduced amount is issued, but the difference between the reduced amount and the prior amount must be available for same day issuance in the event a timely appeal is filed or a conference is requested.

The 15-day period is provided to allow time for mail delivery and possible weekend or holiday delays in the event an appeal is filed or a conference requested toward the end of the advance notice period.

Note: If the recipient, because of agency error, did not receive advance written notice of the proposed action, or the notice received was not adequate, and an appeal is filed within 30 days of the action, financial assistance must be reinstated retroactively to the date of agency action and continued during the appeal process.

C. Administrative Disqualification Hearings (ADH) - Refer to Sections 102.4-102.14 for ADH requirements and procedures.

105.3 REQUEST PROCEDURES -

A. A fair hearing may be requested by an expressed indication by a claimant or by a person acting as his authorized representative (such as a relative, friend or attorney), to the effect that he wishes the opportunity to present his case to a higher authority because of dissatisfaction with its treatment by a local agency. **An appeal may be requested orally or in writing.***

The right to make such a request is not to be limited or interfered with in any way. If a household makes an oral request for a hearing, the local agency must complete the procedures necessary to start the hearing process. The Notice of Appeal form must be made available to the household to facilitate appeal requests; however, completion of this form by the household is not required if a clear expression for a hearing has been made by some other method. Local agencies must help the claimant submit and process the request, and prepare the case, if needed. Information and referral services must be provided to help claimants make sure of any legal services available in the community that can provide legal representation at the hearing.

The freedom to appeal must not be prejudiced or limited in any way; local agency emphasis must be on helping the claimant to submit his request and on assisting in preparing his case, if necessary.

Although appeals to the State agency will normally be by use of the Appeal to the State Department of Social Services form, a written request to the State agency by a claimant or his authorized representative, clearly indicating the wish to present his case to a higher authority will be considered a fair hearing request.

B. An opportunity for a hearing shall be granted, upon such request made within the time limitation specified in Section **105.4** (below), to:

1. Any applicant whose claim for assistance is denied or not acted upon within the time standard specified for processing an application; or

2. Any recipient who is aggrieved by any agency action affecting his entitlement to or receipt of assistance or by agency denial of, or delay over 30 days in responding to, a request for adjustment in payment.

The applicant or recipient may also appeal the local agency's interpretation of law or policy as well as the equity and reasonableness of policies promulgated under the law, when the claimant is aggrieved by their application in his situation.

A hearing will not be granted, however, when either State or federal law requires automatic grant adjustments for classes of recipients unless the reason for an individual appeal is incorrect grant computation.*

105.4 TIME LIMITS FOR REQUESTING HEARING -

A. An appeal from any local agency action must be made within 30 days following receipt by claimant of written Notice to Client of Action informing him of the action on his case, or of written Advance Notice of Proposed Action informing him of the agency's intention to take such action.

B. An appeal based on the failure of a local agency to accept an application or to act within the specified time limit on the application or written request for a change in the amount, kind, or conditions of assistance must be made within 30 days following such failure to accept the application or to take timely action thereon.

C. The requirement of filing within the time limit is met if the request for appeal is received in the state or local agency, or postmarked, by the end of the 31st day following the date of the agency's notice unless the claimant can provide proof that he/she was given fewer than 30 days to make a request for hearing. acceptability of the proof rests with the state hearing authority.

D. If more than 30 days have elapsed in filing the appeal, the State agency may, in the interests of justice, grant an extension of the time period.

* 45 CFR 205.10(a)(5)

106.1 PROCESSING OF APPEAL -

A. The appeal request, upon receipt **by the Hearings Manager** in the State Central Office, is forwarded to the regional hearing officer for validation. The hearing officer will acknowledge the request by letter to the claimant with a copy to his representative, if known, and to the local agency against which the appeal is lodged.

B. The local agency shall prepare a Summary of Facts in the case to be forwarded to the hearing officer no fewer than 7 days prior to the hearing. A general outline of this summary follows, although the content may vary to fit the particular case situation. All statements made should be factual and phrased in a way not objectionable to claimant.

The Summary of Facts includes the following:

1. Identifying Information

   Name of local agency
   Name, address, and case number of claimant
   Persons included in payment
   Name, birthdate, relationship to claimant
   Other persons in household
   Name, relationship

2. Date of Request and Reason for Appeal - (Quoting claimant's own words in requesting hearing)

3. Statement of Agency Action

   a. Give a brief, factual statement of the reason for agency action, or failure to act, nature and date of agency action. If claimant requested local agency conference, include the date and result of conference. If agency error, negligence, or administrative breakdown was involved, say so.

   b. Under the heading "agency policy," give citation and quotation from the **TANF** Manual of the policy statement on which agency action was based.

   c. If the amount of assistance is in question, give detailed breakdown of the claimant's budget as it appears on the assistance plan with whatever explanation may be necessary.

   d. If the issue appealed is noncooperation with DCSE, give a detailed explanation of the events, dates, and the reason for the noncooperation finding.

4. State whether assistance is continuing in the original amount during appeal process.

5. The Summary is to be signed and dated by the superintendent. The local agency will retain a copy of the Summary which is the official document for presentation of its case at the hearing.

C. If upon receipt of the Summary, the hearing officer decides the information which has been submitted is unclear or inadequate, additional information will be requested of the local agency.

D. The local agency shall mail to the claimant or his representative, at a reasonable time prior to the date of the hearing, a copy of the Summary and any other documents and records which are to be used at the hearing.

If OTHER EVIDENCE pertinent to the hearing IS received by the local agency or there are changes in the situation following transmittal of the Summary, copies of the NEW EVIDENCE and a written statement of the changes shall be mailed in advance of the hearing to the hearing officer, THE CLAIMANT AND THE CLAIMANT'S REPRESENTATIVE, IF ANY. IF THE AGENCY MAILS (i.e., POSTMARKS) ANY OTHER SUCH EVIDENCE WITHIN FEWER THAN SEVEN (7) CALENDAR DAYS BEFORE THE SCHEDULED HEARING, THE HEARING OFFICER SHALL RESCHEDULE THE HEARING UPON REQUEST.

E. During the period from the filing of an appeal to receipt of decision by the State Hearing Authority, the local agency continues to be administratively responsible for the case on appeal. This responsibility includes appropriate adjustment in eligibility status or payment necessitated by change in claimant's situation, his income, change in composition of assistance unit, or change for any other reason. In the case where assistance is being continued during the appeal process, however, assistance must not be reduced below the amount being received at the time of receipt of advance notice of proposed action. Exception: If a change in circumstances occurs during the appeal process, advance notice is sent. If the claimant fails to appeal such proposed additional change, assistance may be adjusted with respect to this change in circumstances.* Any such change shall be reported to the hearing officer for consideration of possible effect on the decision.

106.2 FAIR HEARING PROCEDURES -

A. A single group hearing may be held by the State Agency in response to several individual requests, provided there is only one common issue involved. In ADC, the common issue must be one of State or federal law or policy or changes in State or federal law.** If the claimants request a group hearing on an issue specified in this section, the request shall be granted.

In all group hearings, all policies and procedures governing hearings must be followed. Thus, each individual claimant shall be permitted to present his own case or be represented by his authorized representative.

* 45 CFR 205.10(a)(6)(i)(B)
** 45 CFR 205.10(a)(5)(iv)

B. The hearing will be conducted at a time, date, and place convenient to the claimant(s) and adequate preliminary written notice will be given. The hearing may be conducted via a telephone hearing or a teleconference if the applicant or recipient agrees.* The claimant will be requested to advise the local agency immediately if the scheduled date or place is inconvenient for him, but, without such notification it is assumed the arrangement are convenient.

The local agency is responsible for assuring that the claimant has transportation to the hearing if he is unable to make his own arrangements.

When a claimant, for good cause, indicates that the scheduled date is not convenient, the hearing date may be extended. Reasons for extending the hearing date shall include, but not be limited to, illness **or a disability** of the claimant **or of a child or other member of the claimant's household for which the individual is responsible for care, which prevents the individual from participating on the scheduled date**, temporary absence from the locality, unavailability of claimant's legal counsel or witnesses. The State Agency will determine whether the provision of extension is being abused and reserves the right to set a date beyond which the hearing officer will not be delayed.

C. The hearing is to be conducted in an informal atmosphere, and every effort will be made to arrive at the facts of the case in a way most conducive to putting the claimant at ease. It is the hearing officer's responsibility to assure that this is done, and he may, within his discretion, designate those persons who may attend the hearing or the particular portion of the hearing they may attend. He has full authority to recess the hearing or to continue it to another date in the interest of fairness.

D. Specific Hearing Procedures

1. Identification of those present for the record.

2. Opening statement by the hearing officer explaining the hearing's purpose, procedure to be followed, how and by whom a decision may be made and communicated to claimant and local agency, and the option of either party, if decision is made by the hearing officer, to request review of said decision by the Commissioner's appeals review panel.

*45 CFR 205.10(a)(2)

3. The claimant and/or his representative shall have the opportunity to:

   a. examine all documents and records which are used at the hearing;

   b. present the case or have it presented by legal counsel or other person;

   c. bring witnesses;

   d. establish pertinent facts and advance arguments;

   e. question or refute any testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses;

   f. introduce evidence regardless of whether such evidence was available to the agency worker at the time of the agency's decision.

4. The local agency will have the opportunity to clarify or modify its statements contained in the Summary and to question claimant, his representative or witnesses on the salient issue(s).

5. Evidence admissible at the hearing shall be limited to data having a bearing on the issue(s) on appeal. Such issues include those given by claimant at the time of his appeal and those given by the local agency as a basis for its action or inaction under appeal. No other evidence or issues shall be considered.

6. If the claimant was required by policy to produce documentation or verification of eligibility criteria and the agency acts upon the question of eligibility where the claimant has failed to produce such documentation or verification, the agency shall not be reversed upon the basis of such documentation or verification being produced by the claimant at the hearing and the claimant must reapply to have the evidence considered unless the agency:

   a. Was responsible for securing the evidence or information, but did not.

   b. Should not have acted without the evidence or information, or

   c. Placed a demand on the claimant for evidence or information that was beyond the capacity of the claimant to provide.

Approval of a reapplication shall not be retroactive to the prior reduction, denial or termination of assistance.

E. When the issue on appeal is of a medical nature (e.g., concerning a diagnosis, an examining physician's report, or a VR Disability Determination Unit decision), the hearing officer may request a medical assessment by some one other than the person(s) involved in making the original examination. Such an assessment will be obtained at local agency

expense from a source satisfactory to claimant and will be made a part of the hearing record.

F. Prior to the hearing, any material from the eligibility case record must be made available, upon written request, to claimant and/or his representative. The service case record shall not be introduced at the hearing; except that any material pertinent to the issue on appeal shall also be available, upon request, to claimant and/or his representative prior to the hearing. It is within the discretion of the hearing officer to designate what is pertinent to an issue on appeal and admissible as evidence during the hearing, including the entire case record if appropriate. **However, where an appellant claims that his disability, or that of a household member for whom the claimant is responsible for care was the reason the individual was unable to comply with a program rule, information concerning the individual or family member's disability in the appellant's case must be considered pertinent to the hearing, and must be considered by the hearing officer.**

Where an individual raises his disability, or that of a household member for whom the claimant is responsible for care, as the reason for non-compliance with a program rule, and the individual did not bring documentation to the hearing in support of this position, the hearing officer should offer the individual a reasonable amount of time to obtain documentation supporting this claim. If the individual is unrepresented at the hearing or represented by a lay person and the individual is unable to obtain verification, the hearing officer must direct the local agency to assist the individual in getting such documentation.

G. If, during the hearing process, need for adjustment in eligibility or payment status in favor of claimant becomes evident, reconsideration or modification of the former decision will be made by the local agency.

For instance, new information may be presented, there may occur clarification of policy, or need for mathematical correction in computations. If such adjustment is satisfactory to claimant, he has the choice either of withdrawing his appeal or of having a formal decision by the State Hearing Authority.

With respect to financial assistance, if such reconsideration or modification requires corrective action for prior months, payments are to be made by the local agency retroactively to the date the incorrect action on appeal became effective.

106.3 DECISION ON APPEAL -

A. The hearing officer, following the hearing, prepares a written report of the substance of the hearing embodying his findings, conclusions, decision, and appropriate recommendations.

B. The decision on appeal will be made by the hearing officer by whom the case was heard.

C. The decision of the hearing officer shall be based exclusively on evidence and other material introduced at the hearing, except when medical information is requested or other essential information is needed, and the official report of the substance of the hearing, together with all papers filed in the proceeding, and the findings and conclusions of the hearing officer. This constitutes the exclusive record for decision and such record shall be available to claimant or his representative at any reasonable time at the State Regional Office serving the local agency.

D. The decision of the hearing officer, by virtue of the Commissioner of Social Services' delegation, shall be final and binding when tendered in writing to claimant and local agency, and shall be given positive effect regardless of whether review by the Commissioner has been requested.

If the claimant is found eligible for corrective payments, these will be made retroactively to the date the incorrect agency action on appeal became effective. The local agency will assure that administrative action to implement the fair hearing decision is taken no later than the 10th working day following the date on the hearing officer's letter conveying the decision, which is the date the decision is mailed.

E. The decision of the hearing officer shall be rendered within 60 days following the date the appeal request is received in the Central Office. An exception to this is when the claimant or his/her representative requests an extension or otherwise occasions a delay, not to exceed 30 days. In this case, as many days are added to the 60-day time limit as necessitated by such delay. The hearing officer will determine whether the provision for extension or delay is being abused, and reserves the right to set a date beyond which the hearing and decision will not be further delayed. This constitutes prompt and definitive administrative action and, for these purposes, the date of decision of the hearing officer is considered in relation to meeting the time requirement, and is unaffected by any subsequent request for review by claimant, his representative, or local agency to Commissioner of Social Services.

F. Any applicant or recipient aggrieved by a final agency action shall have the right to judicial review of such action pursuant to the provisions of the Administrative Process Act (Section **2.2-4000** et seq.). The hearing decision will include information on filing for a judicial review.

G. If the action of the local agency is overturned as a result of a judicial review, the local agency must take action immediately as specified in the court decision.

106.4 REVIEW OF HEARING OFFICER'S DECISION -

A. At the time the hearing officer's written decision is rendered, the claimant, his representative and the local agency shall be given written notice of their right to request review of the hearing officer's decision by the Commissioner. A request for review from a local agency must be submitted by the director or his/her designee who is on file with the Hearings Manager.

A request must be made in writing to:

Commissioner, Department of Social Services
Appeals & Fair Hearings Bureau
730 East Broad Street
Richmond, VA 23219-1849

B. A timely request for review of a hearing decision by the Commissioner must be received in the Central Office, or postmarked, no later than the 12th calendar day following the date of the hearing officer's decision. The request will include a statement of arguments objecting to the hearing officer's decision. New evidence shall not be submitted since it will not be considered by the Commissioner in reviewing the claimant's concerns. A copy of the request and arguments for review must be sent to the other party to the appeal and their representative at the same time it is submitted to Central Office for review by the Commissioner. Such other party must have any counter arguments in Central Office, or postmarked, within seven (7) calendar days of the date of the initiating party's request for review. Only those counter arguments received in Central Office, or postmarked, within seven (7) calendar days will be considered by the Commissioner in the review.

C. When such request is submitted as prescribed, the Commissioner will review the decision and confirm or modify the original decision. The claimant, the claimant's representative, the hearing officer and local agency will be notified in writing of the result of the review.

D. The hearing officer, within a reasonable time, may consider any decision if there is new evidence that the original decision was not a valid one. In this regard, the hearing officer's decision is also subject to review by the Hearings Manager.

E. When the decision of the Commissioner is adverse to the claimant, all available administrative remedies have been exhausted.

106.5 DISPOSITION OF APPEALS OTHER THAN BY HEARING DECISION -

Every valid appeal shall be disposed of by written decision except in the following instances:

A. An appeal may be withdrawn in writing by claimant or his representative acting in his behalf.

B. An appeal may be abandoned by the claimant. An appeal is considered abandoned if neither the claimant nor his representative appears at the time and place scheduled for the hearing without good cause. When claimant or his representative fails to appear, the hearing officer will write to claimant giving him an opportunity to explain why he did not appear. If there was a reasonable basis for the failure to appear, the hearing officer will arrange another bearing date.

C. Death of claimant in a one-member assistance unit constitutes abandonment of an appeal.

Such disposition of an appeal must be entered in the case record.

106.6 AVAILABILITY OF HEARING DECISIONS -

Appeal decisions shall be available for inspection and copying, provided identifying names, addresses of individuals in the specific case, and other members of the public, are kept confidential.

Request for the Address of a TANF Recipient

I am requesting the address of _____
(Name of TANF Recipient)

The person whose address is requested.

- ☐ **is a convicted felon fleeing prosecution, custody or confinement;**
- ☐ **is in violation of a condition of Federal, State or local probation or parole; or**
- ☐ **has information that is necessary for me to conduct my official duties.**

Request made by _____ Badge# _____
(Name of officer)

of _____On _____
(Name of Agency) (Date)

AGENCY USE ONLY

Address furnished by _____
(Name of Worker)

on _____ FIPS: _____
(Date)

12/10/96

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201.1 ELIGIBILITY FACTORS

A. A child will be categorically eligible for TANF if he meets the following requirements:

1. Is under the age of 18 years* or if 18 but not yet 19 is enrolled and attending a secondary school or vocational/technical school of secondary equivalency, and is expected to complete the high school or vocational/technical program prior to or in the month he attains age 19.

2. Is living in the home of a parent or a certain specified relative (201.5) or is in foster care under certain conditions.

3. Is a resident of Virginia.* (201.6)

4. Is a citizen of the United States or an eligible alien.** (201.7)

5. The family is in need of financial assistance.* (305)

   Exception: A child who meets all of the above requirements may be ineligible for assistance due to the family cap provision. See Section 201.12.

B. To be eligible, a child who meets the requirements above, a parent, or a caretaker-relative other than the parent must meet the following conditions:

1. Provide a social security number or proof of application for an SSN.

2. Participate, as required, in the Virginia Initiative for Employment Not Welfare Program unless otherwise exempt.*** (901.2)

3. Provide, or have provided on his behalf, a written declaration of citizenship or alien status.**** (201.7)

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* Code of Virginia, Section **63.2-602**
** Public Law 104-193
*** Code of Virginia, Section **63.2-608**
**** Social Security Act, Section 1137(d)(1)(A)

4. Comply with the compulsory school attendance requirement if he is a child or minor parent.* (201.3)

5. Cooperate in identifying the parents of a child, establishing paternity, and obtaining support unless he is a child. (201.10)**

C. The parent or caretaker/relative shall be eligible for AFDC unless one of the exceptions specified in 302.6.D. **or E.** is applicable. Eligibility of the caretaker/relative may exist even though:

1. The only eligible child in the home **receives** SSI. The SSI child must meet all of the eligibility criteria listed in 201.1.A. **and B. (school attendance)** for the caretaker to be determined eligible for AFDC.

2. The only eligible child in the home **receives** an adoption assistance payment. Even though the child who receives an adoption assistance payment may not be eligible to have his needs included in the AFDC grant amount, **he** is **deemed** eligible for AFDC for purposes of qualifying the caretaker-relative for AFDC.*** (Refer to 302.6.C.6.)

3. The only eligible child in the home **receives** a federal, state, or local foster care maintenance payment. Even though the child who receives a foster care maintenance payment is not eligible to have his needs included in the AFDC grant amount, **he** is **deemed** eligible for AFDC for the purpose of qualifying the caretaker-relative for AFDC.**** (Refer to 201.5.B. regarding ineligibility of the natural parent or other caretaker-relative to receive AFDC for this child in his prior home.)

*** Code of Virginia, Section 63.1-105**
** Code of Virginia, Section 63.1-105.1
*** ACF, Region III, IM 93-6
**** ACF-AT-94-5

D. IMMUNIZATIONS - All applicants and recipients for TANF must supply verification that all otherwise eligible children have received the immunizations required by the Code of Virginia.* The agency must inform applicants of the immunization requirement at initial application and must inform recipients on 7/1/95 on their first scheduled redetermination after 7/1/95. The immunization schedule is established by the State Board of Health.

1. ACTION AT FIRST REDETERMINATION OR TWELVE MONTHS AFTER NOTIFICATION - By the first redetermination or twelve months, whichever is later after being informed of the immunization requirement, the recipient must provide the following or the worker must reduce the TANF grant:

   a. Verification that the child has received all immunizations appropriate to his age;

   b. Verification that the child has received at least one dose of each of the required immunizations as appropriate for the child's age and that the child's physician or the local health department has prepared a plan for completing the immunizations. The plan needs only to indicate when future immunizations are due; or

   c. Verification that the child is exempt.

2. ACTION AT SECOND REDETERMINATION AFTER NOTIFICATION - At the second redetermination and subsequent redeterminations after being informed of these requirements, the recipient must provide verification of compliance with the immunization schedule or the plan prepared by the physician or health department, until the child has received all required immunizations. Failure to provide the necessary verifications shall result in a grant reduction.

3. ADDING A CHILD TO THE ASSISTANCE UNIT AND TRANSFERS- When a child is added to the assistance unit, the eligibility worker must advise the parent/caretaker of the immunization requirement. The parent/caretaker shall be allowed at least twelve months to provide verification that the child has met the immunization requirement. As verification of immunizations is only required at redetermination, sanctions shall not be imposed for such a child until the first redetermination occurring at least six months after the child is added.

   Example: On February 1, Ms. I reports a new child, Tom, in the assistance unit. The worker advises Ms. I of the immunization requirement for Tom. On April 15, Ms. I has a redetermination interview. No immunization verification is required for Tom. At the next redetermination in **March**, Ms. I fails to provide verification of Tom's immunizations. The grant is reduced for **April**.

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* 45 Code of Virginia, 63.2-603

For cases that are transferred, the receiving agency must ensure that the recipient has been notified of the immunization requirement. If no notification has occurred, the eligibility worker must advise the recipient of the immunization requirement. The receiving agency shall not impose an immunization sanction unless the transferring locality initiated the sanction or the receiving locality's redetermination occurs at least six months after notification of the requirement.

4. VERIFICATION - Workers should attempt to use the AFDC Childhood Immunization Certification form whenever possible to verify receipt of immunizations. Physicians or medical personnel should complete this form indicating that the child is age appropriately immunized, medically exempt, or in the process of being brought up to date.

If the client provides another form of verification that does not clearly indicate whether or not the child has the required immunizations, the worker should seek assistance by contacting the locality's Immunization Action Plan coordinator at the Health Department, or by calling the Bureau of Immunization hotline at 1-800-568-1929.

5. EXEMPTIONS - If the eligible child meets any one of the following criteria, he is exempt from immunization verification requirements:

a. The child is enrolled in school (public school, private or parochial school, or Head Start classes operated by the school division), or has been enrolled in school up to grade six;

b. The child is enrolled in a licensed family day home or a licensed child day center;

c. The parent of the child objects on the grounds that the administration of immunizing agents conflicts with his religious tenets or practices; or

d. The parent or guardian of the child presents a statement from a physician licensed to practice medicine in Virginia which states that the physical condition of the child is such that the administration of one or more of the required immunizing agents could be detrimental to the health of the child.

(1) If a child is exempt from meeting the immunization requirements under part d. above, then the caretaker/relative shall provide the local department of social services with a plan developed by the child's physician or the local health department for completing the immunizations.

(2) The caretaker/relative must verify compliance with the plan for completing the immunizations at subsequent redeterminations of eligibility for AFDC until the child has received all required immunizations. If a child is not in compliance with the plan for completing immunizations, the worker must reduce the AFDC grant.

6. AFDC GRANT REDUCTION - The worker must reduce the AFDC grant for failure to comply with the immunization requirement. However, the worker must first identify and remove any barriers to accessing immunizations over which the agency has control before imposing a sanction.

Failure to comply with the immunization requirement shall result in a reduction of the monthly AFDC amount by:

a. Fifty dollars for one child who fails to meet the immunization requirement; and

b. Twenty-five dollars for each additional child who fails to meet the immunization requirement.

c. The worker must impose this reduction until the caretaker/-relative provides verification to the local department of social services that the child is in compliance with the immunization requirement. Upon receipt of verification that a child has received all required verifications, the worker must take action to end the grant reduction by the month following the month in which the verification was received, if administratively possible.

Example: Ms. I is approved for AFDC in January and is notified of the immunization requirement at that time. At the redetermination in June, Ms. I has not obtained any immunizations for her three children, John, Tom, and Mike. The grant is reduced for July by $100 ($50+$25+$25). In August she provides verification that John has received all immunizations. The grant reduction is changed to $75 ($50+$25) for September. In October, Ms. I provides verification that Mike is immunized. The grant reduction is changed to $50 for November. In December, Ms. I provides verification that Tom has received required immunizations. The grant reduction is removed for January.

d. If this reduction results in an AFDC amount of zero, the local agency must consider the assistance unit AFDC recipients with no payment. The case will remain open for Medicaid purposes.

7. AGENCY RESPONSIBILITIES - The local agency has the responsibility of:

a. Providing assistance to the AFDC recipient in obtaining verification from providers if necessary and administratively feasible. (Note: The Code of Virginia Section 32.1-46 states "A physician or local health department administering a vaccine required by this sections shall provide to the person who presents the child for immunizations a certificate which shall state the diseases for which the child has been immunized, the numbers of doses given, the dates when administered and any further immunizations indicated.")

b. Notifying applicants and recipients of the immunization requirements.

E. An individual convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance is ineligible to receive TANF. The applicant must state, in writing, whether he or any other required member of the assistance unit has been convicted of such a crime. This restriction shall not apply if the conviction is for conduct occurring on or before August 22, 1996.*

F. An individual is ineligible if he is:
1. fleeing to avoid prosecution or custody for a felony under the laws of the place from which the individual flees; (Note: To be considered “fleeing” an individual must have knowledge of an outstanding warrant. An individual must have an opportunity to document that he has fulfilled the requirements of the warrant) or
2. fleeing to avoid confinement after conviction for a felony under the laws of the place from which the individual flees; or
3. in violation of a condition of probation or parole imposed under federal or state law.*

G. SIXTY (60) MONTH LIMIT ON RECEIPT OF TANF - An assistance unit that includes an adult who has received 60 months of assistance under TANF as defined below, is not eligible for assistance.* "An assistance unit that includes an adult" means an assistance unit where the adult's needs are included in the grant or a case where the adult's needs are not included in the grant but the adult is required to participate in VIEW. (See 901.2.) The 60 months of TANF eligibility is an accumulated period of time.

An assistance unit in which a parent becomes disabled after receipt of 60 months of TANF is not eligible for TANF.

A month in which an individual received TANF benefits in another state counts toward the 60-month limit. If an applicant states on the application for TANF benefits that he received assistance in another state, the eligibility worker must verify any TANF months to be counted by contacting the appropriate state and recording those months in the ADAPT system. Note: The effective date for TANF implementation will vary from state to state. When contacting other states to verify the number of months already accrued, the worker should request the number of months counted by that state toward the 60-month limit. If contacted by another state, the worker should provide the number of months countable under Virginia’s TANF program since February 1, 1997. The following website identifies each state’s contact person: http://dpaweb.hss.state.ak.us/training/map/mapHTML.htm.

The following months of receipt of TANF in Virginia do not count toward the 60 month limit:

1) Months in which no time is accrued on the assistance unit’s VIEW clock, including months that a client is in inactive status on the first of the month;
2) Months of receipt of Aid to Families with Dependent Children (AFDC). Thus, months of financial assistance received in Virginia prior to February 1, 1997 do not count;
3) Any months that an individual receives assistance as a minor child (not a caretaker);

4) Months during which the adult lived on an Indian reservation or in an Alaskan Native village if, during the month;
   (a) at least 1,000 individuals were living on the reservation or in the village; and
   (b) at least 50 per cent of the adults living on the reservation or in the village were unemployed;

5) Months in which the case was a "control" case. (Petersburg, Portsmouth, Prince William, Wise, and Lynchburg were research sites for the VIP evaluation. Cases in these localities were assigned a research or control status.)

Example 1: Client moved to Virginia 7/10/00 and subsequently applied for TANF. She indicated receipt of TANF in North Carolina approximately six months prior to this application. EW contacts the local agency in North Carolina and verifies that client received TANF there from February 1999 through January 2000. The EW will add February 1999 through January 2000 to the 60-month clock **because these months are on the client's federal 60-month clock in that state.**

Example 2: Client is participating in VIEW and her clock has run from April 1999 through July 2000. On July 8, 2000 the VIEW worker placed the client in inactive status. ESW places the client back in active status on August 22, 2000. July will count as a month in the 24-month limit. August will not count because of the inactive status on the first of the month. The count will resume with the month of September.

Example 3: Client and her three children received 60 months of TANF, with the March 1, 2003 payment. The TANF case was closed effective March 31, 2003. On April 12, 2003 the client was incarcerated and her three children moved in the grandmother's household. The grandmother needed financial assistance and applied for TANF on May 1, 2003. The TANF application for the three children was approved on June 14, 2003. The children are eligible because they now live with an adult who is not included in the grant and does not have a 60-month clock. If the grandmother becomes financially needy, applies for herself, **and volunteers for VIEW,** the 60-month clock will begin to accrue.

Example 4: Client and her two children have received 60 months on her 60-month clock as the result of federal clock months from another state and/or VIEW months in Virginia. As long as the children remain in the home with this client, this family of three have reached their lifetime limit of TANF and will not be eligible again.

Example 5: The children in example #4 leave the client's home and go to live with their father. The father has not been on TANF or has been a TANF/VIEW recipient, but has less than 60-months on his clock. The father and children can receive TANF until he has reached his 60-month time limit.

Example 6: The children in example #4 leave the client's home and go to live with their grandmother. Grandmother is not in the assistance unit. She can receive TANF for the grandchildren.

Example 7: The children in example #4 leave the client's home and go to live with an aunt. The aunt applies for assistance and is in need and is included in the assistance unit as caretaker. She is found eligible to receive TANF for herself and the children. If the aunt volunteers for VIEW, her 60-month clock will accrue until she reaches the 60-month limit.

Example 8: Client receives TANF for herself and three children. The client has cycled in and out of TANF/VIEW and reaches her 24-month and 60-month limits. If the children go to live with their father or any specified relative, no one can receive TANF for the children during the two year period of ineligibility due to the VIEW limit.

201.2 AGE - The month, day, and year of the child's birth must be established and evidence thereof entered in the eligibility case record, except that, pending the securing of such evidence, assistance must not be denied an otherwise eligible child who is obviously under 12.

If the day and month cannot be established, July 1 is assumed to be the birthdate.

Continuing Eligibility*- The child is eligible until he reaches the age of 18. He is eligible for the month in which his 18th birthday falls if he has not attained the specified age on the first day of that month.

An 18 year old child may be eligible if enrolled in a secondary school or vocational/technical school of secondary equivalency if he is expected to complete the high school or vocational/technical program prior to or in the same month as his 19th birthday. The program is considered completed on the last day of final exams or, if exams are not required, the last day of

* 45 CFR 233.39(B)(ii)

scheduled classes. The child will be eligible for the month in which completion of the school program occurs; however, eligibility cannot be extended past that month. The case record must be well documented in this area.

201.3 SCHOOL ATTENDANCE* - To be eligible for assistance, children in the assistance unit under age 18, including minor parents, must comply with the compulsory school attendance requirement. A child will be considered as meeting this requirement until such time as the local department of social services receives notification that he is truant. A child who is 18 years old meets the school attendance requirement, regardless of actual attendance, as long as he is enrolled and expected to complete high school or an equivalent program as stated in Section 201.2 above.

A. Definition of Truancy - Truancy is defined as noncompliance with State compulsory school attendance requirements as determined by the local school division.**

Local school boards may set additional rules deemed necessary to carry out the intent of the compulsory attendance laws. Such rules may also be applied by the local school division in identifying children who are truant.

B. Notification of Truancy - When the local school division determines that a child receiving TANF is truant, it will notify the local department of social services.

School divisions will identify truant TANF recipients using one of the following methods:

1. State Department of Social Services provides all local school divisions with a list of all individuals ages five through 17. This information is e-mailed to a designated contact person in each school division monthly.

2. The local department of social services and local school division may develop an alternate method (local option) for identifying TANF children who are truant, provided the method is mutually acceptable.

Note: If the agency receives notification from a source other than the school, such as the applicant/recipient, the agency must verify truancy through the school.

C. Notifying the Applicant/Recipient of Truancy - The local department of social services must do the following when notified by the school of truancy:

Notify the caretaker, in writing, of the truancy of a member of the assistance unit. Exception: When the caretaker is a minor parent whose TANF payments are made to a protective payee, the notice must be sent to the protective payee.

* Code of Virginia, Section 63.2-606
** Code of Virginia, Sections 22.1-254 et seq.

The notice must include the following:

1. that the truant recipient is in jeopardy of losing eligibility for TANF benefits;

2. that the caretaker must contact the local department within five working days of the notice to cooperate in developing a plan to achieve compliance with compulsory school attendance laws; and

3. that failure to contact the local department may result in the truant recipient's ineligibility for TANF due to noncooperation.

Note: The "Advance Notice of Proposed Action" form must not be used to meet this notification requirement.

D. Development of and Cooperation with the Plan - If the caretaker contacts the agency, the agency is to work with him to establish a plan to resolve the child's truancy and to bring him into compliance with school attendance laws.

Each local agency and local school division shall mutually develop a model plan which the agency must follow in developing individual case plans. The model plan shall allow the school and local agency flexibility in fitting the plan to the truant child's situation. The model plan must include the following:

1. a determination of the reason for non-attendance;

2. a time frame for achieving compliance;

3. a schedule of events which the caretaker agrees to complete; and

4. what performance constitutes compliance.

The worker and caretaker, in consultation with the school, shall mutually develop the individual case plan in accordance with the agency model. At the time the plan is developed, the worker must explain to the caretaker that failure to follow the plan will result in removal of the truant child due to noncooperation. The plan must be in writing, with a copy given to the caretaker and a copy filed in the case record. Once implemented, the agency must verify that the caretaker is cooperating with the plan. The truant individual meets the school attendance requirement during this time provided the caretaker continues to cooperate in meeting plan requirements.

The local agency must determine what agency staff will be responsible for establishing individual case plans and for verifying cooperation with the plans. The local agency must monitor individual case plans to assure consistent application of the above guidelines.

E. Failure to Establish or Cooperate with the Plan -

1. If no response is received to the written notice within five working days as specified in Section 201.3 C, the local department must do the following:

   a. make reasonable efforts to personally contact the applicant/recipient. This may include a direct telephone contact or a face-to-face contact to explain the requirement to develop a plan to return the child to school and the result of not cooperating with the requirement. The case record must be documented as to the agency's attempts to contact the applicant/recipient; and

   b. if, after reasonable efforts, the local department is unable to make personal contact, the local department must mail an "Advance Notice of Proposed Action" to the caretaker advising him that the truant child will be ineligible for AFDC benefits if the caretaker fails to contact the agency to develop a plan to return the child to school.

2. If the caretaker responds to the written notice specified in Section 201.3 C or to the personal contact, but fails to cooperate in developing or complying with the plan, the agency must take action effective the next month, if administratively possible, to remove the truant recipient from the grant due to noncooperation.

The child's failure or refusal to cooperate with the plan is considered noncooperation by the caretaker, as the caretaker is responsible for the child's actions.

F. Reinstatement Following Noncooperation in Establishing or Following the Plan - The child's needs are to be reinstated once the agency has verified that the caretaker is again cooperating. If noncooperation occurred in relation to development of the plan, development of the plan must be completed for cooperation to exist. If noncooperation occurred in following the plan once developed, the caretaker must demonstrate her cooperation before the child's needs can be reinstated. The child's needs must be added to the grant effective the month following the month in which cooperation occurs. If the caretaker contacts the agency prior to the actual removal of the child and cooperates in developing the plan, the child's needs will not be removed from the grant.

G. Truant Applicants - During the application process, if the assistance unit member is truant, the local department must do the following:

1. notify the applicant of the requirements listed in Section 201.3 C;

2. allow the applicant an opportunity to comply with the school attendance requirement during the **30**-day processing period by either enrolling the child or by cooperating with the agency in establishing a plan for compliance; and

3. notify the applicant of the child's eligibility or ineligibility on the "Notice of Action" form when action is taken on the application.

H. Notification of Court Conviction and Subsequent Reinstatement - If the agency receives notification that a court has found a member of the assistance unit guilty of a violation of compulsory school attendance laws, the eligibility worker must remove the truant recipient from the grant effective the following month, if administratively possible.
The child will remain ineligible until the caretaker notifies the local agency, and the agency verifies through the school division, that the child is no longer truant. The child's needs must be added to the grant effective the month following the month in which compliance was achieved.

I. Children in Job Corps - The Job Corps Program is an alternative education program which meets compulsory school attendance requirements. A child who is in the Job Corps is considered to be in compliance with school attendance requirements without regard to actual attendance records.

J. Compulsory School Attendance Requirements Applicable to SSI Children - The school attendance requirement applies to an SSI child only when the SSI child is the only eligible child in the assistance unit. In such cases, the eligibility of the case is based upon the child's meeting AFDC eligibility requirements, including school attendance. The requirement does not apply to other SSI children in the home.
If the SSI child who is the only eligible child does not meet the school attendance requirement, the case is ineligible.

K. <u>Children Excused by the Local School Board</u>* - Children may be excused from school attendance by the local school board.

1. Children excused for the reasons below are not truant and no further action is required:

a. children who are home schooled or tutored by someone other than the parent;

b. children whose parents are conscientiously opposed to attendance at school for religious reasons;

c. children whose parents are opposed to attendance at school for health or safety reasons; and

d. children age five who will not reach their sixth birthday until after September 30 of the school year, whose parent or guardian notifies the school board that he does not wish the child to attend school until the following year because the child is not mentally, physically, or emotionally prepared to attend school.

2. The agency must explore the availability of alternate programs for children excused for the following reasons:

a. children in violation of school board policies, including weapons, alcohol or drugs charges, or intentional injury to another person; and

b. children who cannot benefit from education at the school.

If a program is located in which the child can participate, a plan must be developed. If no program is available or appropriate, the child is not truant and must not have his needs removed from the grant.

*** Code of Virginia, Section 22.1-257**

201.4 DEPRIVATION OF PARENTAL SUPPORT OR CARE - Repealed effective July 1, 1999.

201.5 LIVING ARRANGEMENTS - The child must be living with a parent or other specified relative (Subsection A., below) in a residence maintained as a home (Subsection B., below) by one or more such relatives. For TANF-UP, both natural or adoptive parents of at least one child must be living in the home. (Refer to 701.2.)

Exception: Under certain prescribed conditions, an otherwise eligible child may receive TANF while in foster care, as provided in the Title IV-E Eligibility Manual and Subsection B., below, such as during a trial visit.

A. Specified Relatives - The relative with whom the child is living, who is designated as the caretaker, must be a relative by blood, marriage, or adoption. Relationships by marriage exist even after the marriage has been terminated by death or divorce.

Neither severance of parental rights nor adoption is considered to terminate the relationship to biological relatives. Therefore, biological relatives may receive assistance for someone who has been adopted, when there is no other relative by adoption in the home to receive assistance on the individual's behalf. However, this provision does not require individuals who have been adopted to be included in the assistance unit of the biological relative and his/her children.

Example 1: Jane Doe had two children who were adopted by Jane's parents. Jane's parents died leaving their adopted children in the care of Jane. Jane is considered a biological relative for TANF purposes and can receive assistance for the two children, however, they are not to be included in the same assistance unit as any other children Jane may have since she has no legal responsibility for these children.

Example 2: Mary Smith's child, Michael, was adopted by a family friend. When Michael's adoptive parent died, there was no other relative to care for him. Michael went to live with Mary. Since Mary and Michael are biologically related, she can receive assistance for him. However, Michael is not to be included in the same assistance unit as any other children Mary may have.

Documentation of how each child is related to the caretaker must be secured for each relationship that links the child to the caretaker, using methods in Procedures Section I D.1.

B. Living in a Home* - A home is the family setting maintained or in the process of being established by the specified relative, as evidenced by the presence of the child. A home exists even though the child or relative is temporarily absent from the customary family setting. The relative may be absent for reasons such as hospitalization, education or training, a vacation, or a visit. A parent that is absent from the home due to active duty in the uniformed services is considered living in the home. The child may be absent as long as the absence does not exceed 60 consecutive days, unless good cause exists. Additionally, a home may exist in situations where the assistance unit lacks a fixed home address or is otherwise considered homeless.

1. A child that has been, or is expected by the caretaker to be, absent from the home for a period of 60 consecutive days is ineligible for TANF. Exception: If the child is absent for longer than 60 consecutive days, the child may retain eligibility if good cause for the absence exists, such as hospitalization, education or training, a vacation, or a visit.

   Note: The child can be eligible in another assistance unit.

2. The caretaker must report to the local agency after it becomes clear to the caretaker that the minor child will be absent from the home for 60 consecutive days. (Refer to Section 401.2.B.2.a.3.)

3. If the caretaker fails to report the change within the required time frame as described above, the caretaker is ineligible. The caretaker will remain ineligible until the child returns to the home or there is a break in assistance.

C. Living with a Specified Relative for a Part of Each Month - Examples of this include joint custody situations in which the child is with the TANF applicant/recipient one night a week, weekends only, every other week, informal arrangements made by the child's parents, or a vacation or visit to the applicant/recipient's home. The "living with" evaluation requires an evaluation of both presence in the home and responsibility for care and control of the child while in the home.

The "living with" determination is made by the local department of social services (LDSS) on a case-by-case basis using information obtained from individuals outside the home:

- **about the child's entry into the client's home;**
- **extent of responsibilities the applicant/recipient will exercise while the child is in the home; and**
- **the applicant/recipient's responsibility to maintain a home and meet the basic day-to-day needs of the child should be included in the evaluation.**

The number of days per month the child will be in the home is not, by itself, a determinant of the "living with" status. Because each situation is different, TANF policy does not require the child to be in the home for a set number of days per month to be eligible. However, the number of days the child is in the home is a factor to be considered in reaching a final decision.

Individuals who should be contacted to determine the living arrangements and responsibilities of the applicant/recipient for the child include, but are not limited to:

- **The parent or other individual with whom the child previously resided, or in the case of shared custody, the alternate parent or caretaker with whom the child will reside during the portion of the month the child is not in the client's home;**

- **Other individuals, such as family members or friends, who are knowledgeable of the child's circumstances; and**

- **Other agencies or entities, such as the school the child attends or will attend, the child's day care provider, physician, service provider, or other individual who knows the family or maintains information identifying emergency contact persons.**

The evaluation should also include an evaluation of the applicant/recipient's authority to act in emergencies, e.g., a medical emergency. In situations where the parents have joint custody, the agency should examine the court order to better understand the responsibilities of each parent. The "living with" evaluation is also important because of the impact it can have on the parent who will be obligated to repay the debt to the state for assistance received by the assistance unit.

The LDSS should apply the "prudent person rule" (i.e, the worker must determine what is reasonable based on experience, knowledge of the program, logic.) in reaching a decision. Not all situations where the child is in the home for a portion of the month will meet the "living with" requirement. The worker must document the case record as to his findings and the decision made to include or exclude the child from the assistance unit. It is very important that the LDSS complete a thorough evaluation of the circumstances of the change in the child's residence and the caretaker's responsibility for the child. The decision made by the LDSS will be subject to review if a fair hearing is requested.

A child living with his parent(s) may be eligible for TANF even though custody is held by the social services department, if all other eligibility factors for TANF are met. When living with a relative of a specified degree other than a parent, a child will be eligible for TANF if he/she is not eligible for AFDC-FC and all other factors for TANF eligibility are met. Refer to AFDC-FC Manual, Section 202.3.A. If eligible for AFDC-FC, the child is not eligible for TANF.

It should be noted that for TANF eligibility purposes a child can only have one home, as defined above in this section. Therefore, if the caretaker/ relative qualifies for TANF because of the presence in the home of a child who receives a foster care maintenance payment, the child cannot also be considered to be "temporarily absent" from his or her prior home with a parent or other caretaker/relative, thereby also qualifying such relative for a TANF payment.

The case record must be documented relative to the local agency's finding that the child is living in the home.

A child may not be denied TANF, either initially or subsequently, on the basis that the home is considered "unsuitable" because of conditions existing in the home, unless provision is otherwise made for his adequate care and assistance.* If such conditions appear to exist, referral for protective services must be made.

C. Minor Parent Residency Requirement ** - A minor parent is an individual under 18 years of age who is the natural parent of the child. A minor parent and the dependent child in her care must reside in the home maintained by her parent or person standing in loco parentis, unless she meets an exception. ("In loco parentis" means a specified relative (see 201.5A) the legal guardian of a minor child, or a person 21 years of age or older who is standing in place of the parent.) Minor applicants must be informed about the residency requirement at the time of application. If the minor cannot make arrangements to live in the home of a parent or person standing in loco parentis within the standard 45 day processing time, and does not meet an exception, then the worker must deny the application.

The priority order for living arrangements of all minor parents is the following: with a parent, with a specified relative, with a legal guardian, or with a person 21 years of age or older who is standing in place of the parent. If the minor parent does not reside with her parent, the local agency shall consider this priority order by encouraging the minor to move, when a more appropriate placement is found in a higher priority level. If the minor parent does not live with her parent(s) and the local agency determines that living with the parent(s) is more appropriate, the worker must make reasonable efforts to advise the parent(s) of their legal responsibility for the minor parent.

Example 1: Sue is a minor parent living with her daughter in the home of her grandmother. Sue states she does not like her mother's rules. Sue's grandmother does not make Sue attend school and does not impose a curfew. Sue's mother provides appropriate supervision. The agency encourages Sue to move in with her mother to receive TANF, and sends a letter to Sue's mother advising her of her legal responsibility for Sue.

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* 45 CFR 233.90(b)
** Section 63.1-105.6, Code of Virginia

1. Exceptions - The minor parent residency requirement shall not apply if one of the following situations exists:

   a. The minor parent is married;

   b. The minor parent has no parent or person standing in loco parentis who is living;

   c. The minor parent has no parent or person standing in loco parentis whose whereabouts are known; or

   d. The physical or emotional health or safety of the minor parent or his dependent child would be jeopardized if the minor parent and dependent lived in the same residence with the minor parent's parent or person standing in loco parentis. Such a claim shall be corroborated by clear and convincing evidence from court, medical, criminal, child protective services, psychological or law enforcement records.

   If the minor parent meets an exception, then AFDC is to be approved (if otherwise eligible).

2. Locating Adult-Supervised Living Arrangements - If the minor parent meets an exception b through d above and no parent or person standing in loco parentis is available, the local department of social services must assist the minor parent in locating an adult-supervised supportive living arrangement. This is to be done by determining, with the minor parent, why she does not live with a parent or person standing in loco parentis and what her needs are. The local agency must attempt to find an appropriate adult-supervised supportive living arrangement such as, but not limited to, a group home.

   When an appropriate adult-supervised supportive living arrangement is located, the minor parent and child shall be required to live there to continue receiving AFDC. The worker must give the minor parent 30 days advance notice to move. If the minor parent fails or refuses to move to the adult-supervised living arrangement in the 30 day time period, the worker must close the case.

   Example: Maybelle is a teen parent who moved in with her grandmother after her parents died. When Maybelle's grandmother died, she did not know where any other relatives lived, and now lives alone with her child. The agency approved the case for AFDC and began the search to locate an adult-supervised living arrangement.

3. Protective Payment - When a minor parent and her dependent child are required to live with the minor parent's parent or person standing in loco parentis, then **TANF** must be paid in the form of a protective payment to the parent or person standing in loco parentis. (See 502.7).

201.6 RESIDENCE - Federal regulations* require that a child be considered a resident of the state in which he is living, other than on a temporary basis, regardless of the reason for which he entered the state or the residence of his parents. A caretaker is a resident of the state in which he is living even though he may be homeless or may have entered the state seeking employment or with a job commitment as long as he, or the child, is not receiving assistance from another state. Temporary absence from the state, with subsequent return to the state or intent to return does not affect eligibility.

Residence must be verified except in unusual cases, such as homeless assistance units, migrant farm worker assistance units or assistance units newly arrived in a locality, where verification of residence cannot reasonably be accomplished. Verification of residence should be accomplished to the extent possible in conjunction with the verification of other TANF information. If verification cannot be accomplished in conjunction with the verification of other information the worker can use a collateral contact or other readily available documentary evidence, such as statements from migrant service agencies, letters from the people with whom the assistance unit is staying, hotel check-in receipts, day care enrollment forms and health clinic records for the family. Any document or collateral contact which reasonably establishes the applicant/recipient's residence must be accepted and no requirement for a specific type of verification may be imposed.

Continuing Eligibility - If a person receiving **TANF** moves to make his home in another state, eligibility for **TANF** in Virginia no longer exists.

* 45 CFR 233.40

201.7 CITIZENSHIP AND ALIENAGE - Federal law* requires anyone whose needs are considered in determining the amount of assistance for TANF to be a citizen of the United States or an eligible alien.

A. Citizenship/Alienage Status

1. Citizenship - An individual is a U.S. citizen if he is:

   a. born in the United States, regardless of the citizenship of his parents; or

   b. born outside the United States of U.S. citizen parents (the mother if born out of wedlock); or

   c. born outside the United States of alien parents and has been naturalized as a U.S. citizen. A child born outside the United States of alien parents automatically becomes a citizen after birth if his parents (the mother if born out of wedlock) are naturalized before he becomes 16 years of age.

2. Alienage - An alien must be a qualified alien as defined below or meet the exception in d.3) below. If the alien does not meet the definition of a qualified alien or the exception, he does not meet the alienage requirement. If he meets the definition of a qualified alien, he must then be evaluated in accordance with b., c., and d.1) and d.2) below, depending on the date he entered the U.S.

   a. "Qualified alien" is defined as:

      1) an alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA);

      2) an alien granted asylum under Section 208 of the INA;

      3) a refugee admitted to the U.S. under Section 207 of the INA, or an alien who is admitted to the U.S. as an Amerasian immigrant pursuant to section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act of 1988 (as contained in section 101(e) of Public Law 100-202 and amended by the 9th proviso under MIGRATION AND REFUGEE ASSISTANCE in title II of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1989, Public Law 100-461, as amended),** **or an alien who is a victim of human trafficking.**

      4) an alien paroled into the U.S. under Section 212(d)(5) of the INA for a period of at least one year;

      5) an alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or section 241(b)(3) of the INA (as amended by section 305(a) of division C of Public Law 104-208);**

* Public Law 104-193
** Public Law 105-33

6) an alien granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980;

7) an alien, and/or alien parent of battered children and/or an alien child of a battered parent who is battered or subjected to extreme cruelty while in the U.S. as defined in Procedures Section I.F.**2**;* or

8) an alien who is a Cuban or Haitian entrant as defined in section 501(e) of the Refugee Education Assistance Act of 1980.*

Note: The State assists qualified aliens to the full extent permitted by federal law.**

b. If the qualified alien entered the U.S. prior to August 22, 1996, he is an eligible alien for TANF purposes.

c. If the qualified alien entered the U.S. on or after August 22, 1996, he is ineligible for assistance for five years from the date of entry, unless he is:

1) an alien granted asylum under section 208 of the INA;

2) an alien admitted to the U.S. as a refugee under section 207 of the INA, or an alien admitted as an Amerasian immigrant pursuant to section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act of 1988 (as contained in section 101(e) of Public Law 100-202 and amended by the 9th proviso under MIGRATION AND REFUGEE ASSISTANCE in title II of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1989, Public Law 100-461, as amended);*

3) an alien whose deportation is being withheld under Section 243(h) of the INA (as in effect immediately before the effective date of section 307 of division C of Public Law 104-208) or section 241(b)(3) of the INA (as amended by section 305(a) of division C of Public Law 104-208); or

4) an alien who is a Cuban-Haitian entrant as defined in section 501(e) of the Refugee Education Assistance Act of 1980.*

d. Exception for Veterans and **Persons on Active Duty and Their** Relatives - An alien lawfully residing in the state (not here illegally) meets the alienage requirement regardless of the date of entry into the U.S., provided he is:

1) a qualified alien and is a veteran discharged honorably and not on account of alienage and who has served a minimum of 24 months or the period for which the person was called to

* Public Law 105-33
** 1997 Acts of Assembly

active duty. "Veteran" also includes persons who served in the Philippine Commonwealth Army during World War II or as Philippine Scouts following the war;*

2) a qualified alien and is on active duty (other than active duty for training) in the Armed Forces of the United States; or

3) the spouse or unmarried dependent child of an individual (not deceased) described in 1) or 2) above, or the surviving spouse of an individual (deceased) described in 1) or 2) above, provided the surviving spouse has not remarried and was married to the deceased veteran:

(a) before the end of a 15-year period following the end of the period of military service in which the injury or disease causing the death of the veteran was incurred or aggravated; or

(b) for one year or more; or

(c) any period of time if a child was born of the marriage or was born to them before the marriage.*

The spouse or unmarried dependent child is not required to be a qualified alien.

3. Verification of immigration status is required at application, redetermination, and as individuals are added, using **U.S. Citizenship and Immigration Services (USCIS)** documents provided by the alien **or, if the individual is a victim of human trafficking, using documentation from the federal Office of Refugee Resettlement.** If an applicant/recipient's alien status changes or an individual who was an alien becomes a U.S. citizen, his eligibility for assistance must be evaluated under the new status unless otherwise stated in policy or procedures. See Procedures Section I to determine alien status and eligibility.

If an alien presents expired documents as evidence of his immigration status, refer the alien to the local **USCIS** office to obtain documentation of status. In unusual cases involving aliens who have physical or mental disabilities that limit their ability to obtain or provide the required evidence, the worker should make every effort to assist the individual to obtain the required evidence. If the alien can provide an alien registration number, the worker should file a Form G-845 and Supplement, along with the alien registration number and a copy of any expired **USCIS** document presented with the local **USCIS** office to verify status.

B. Sponsored Aliens

Aliens may be sponsored by either an individual or an agency/organization. Sponsorship satisfies a requirement of the **USCIS** that an individual petitioning to come to the U.S. is not likely to become a "public charge."

* Public Law 105-33

1. Agency/Organization Sponsor - If sponsored by an agency/organization, eligibility for TANF does not exist for the first three years of U.S. residence unless the agency/organization no longer exists or is financially unable to provide support.

   Certain Soviet Jewish refugees have been admitted to the United States under a Memorandum of Understanding (MOU) between the U.S. Department of State and two private Jewish agencies, the Council of Jewish Aid and the Hebrew Immigrant Aid Society. The MOU states that the sponsoring agency will ensure that these refugees do not require cash, medical or food stamp assistance for two years after their admission to the U.S. Refugees admitted under MOU will possess **USCIS** Arrival-Departure Records (I-94) which contain the following statement:

   "This refugee is sponsored by the Hebrew Immigrant Aid Society and (name of local Jewish organization). Private resources are available. If assistance is sought, please call (name of local Jewish agency) at (phone number)."

   The sponsorship statement is to be regarded by the worker as a lead that other income and resources may be available to meet the refugee's needs. The sponsoring agency must be contacted to determine the actual availability of any income and/or resources and use such verified information in the determination of the unit's eligibility. It is not, however, appropriate to deny an application for assistance solely on the basis of the sponsorship statement on the refugee's I-94.

2. Individual Sponsor - Individuals who petition **USCIS** to become a sponsor of an alien must execute an affidavit of support. In some situations, an alien may be sponsored by more than one individual. Refer to Section 305.4.D. regarding sponsor deeming requirements.

C. Declaration of Citizenship or Alien Status

As a condition of eligibility, all TANF applicants/recipients shall provide, or have provided on their behalf, a signed statement attesting, under penalty of perjury, to their citizenship or alien status.* An applicant/recipient age 18 or older must sign the declaration for all assistance unit members. In the absence of an adult in the assistance unit, the applicant will sign for all unit members.

The declaration is to be obtained at the time of application or when a new member is requested/required to be in the unit. Exception: A written declaration on behalf of a newborn should be obtained at the time the child is requested/required to be included in the assistance unit. The

* Social Security Act, Section 1137(d)(1)

written declaration must be provided by the next eligibility determination if not obtained at the time the child is added to the assistance unit. Verification of the newborn's citizenship or alien status cannot be postponed until the next eligibility determination.

The declaration requirement is met when the applicant/recipient completes and signs the "Application for Benefits" or "Eligibility Review - Part A" form, as applicable.

Any member for whom the citizenship or alien status declaration requirement has not been met:

1. shall not be included in the assistance unit;

2. if required to be in the assistance unit, the income and resources of the person will be considered available to the assistance unit as indicated in Sections 303.3.E. and F. and 305.4.E.1.e.

D. Systematic Alien Verification for Entitlements (SAVE) Program

1. The Immigration Reform and Control Act of 1986 (IRCA), requires the verification of the immigration status of aliens applying for certain types of benefits, including TANF. **Local agencies should not use the SAVE system to confirm the status of human trafficking victims since their status is verified by the federal Office of Refugee Resettlement.**

2. Aliens, **except victims of human trafficking,** must submit documentation of their immigration status before eligibility can be determined. (Refer to Procedures, Section I.F.2. which outlines the categories of eligible aliens.) Once documentation has been provided, the agency must determine the validity of the documentation by comparing the alien information with current immigration records maintained by **USCIS**. This is accomplished through the Systematic Alien Verification for Entitlements (SAVE) Program and is intended to prevent the issuance of benefits to ineligible aliens.* SAVE verification must be initiated prior to case approval or action to add a person.

   Verification is obtained through two processes:

   a. Primary verification - a direct access to **USCIS** files via telephone or personal computer;

   b. Secondary verification – a manual procedure completed in addition to primary verification via the Document Verification Request, Form G-845, and Document Verification Request Supplement, G-845 Supplement. (Refer to Appendix V to Section 201, pages 3 – 6.) Certain situations may arise where it may not be possible to access primary verification and secondary verification must be accessed or additional information is needed that can only be obtained through the secondary procedure. These situations are addressed in Section 201.7.D.4.

* Public Law 99-603, Section 121

Once verification has been obtained through SAVE, aliens with permanent resident status will no longer be subject to the SAVE process. Aliens with temporary or conditional status will be subject to SAVE when their temporary status expires.

3. Primary Verification

Primary verification is the automated method of accessing the Alien Status Verification Index (ASVI), the **USCIS** database. The automated access to ASVI must be attempted before attempting the manual, paper-trail method of secondary verification. However, there are some specific instances when the secondary method must be used without attempting to access the **USCIS** database. These reasons are listed in the Secondary Verification section.

SAVE is accessible through the seven, eight, or nine-digit Alien Registration Number (A-Number) which should be displayed on the alien's **USCIS** documents. SAVE is accessible either directly through the local agency or through regional office contact.

A total of nine digits must always be used when keying the A-Number to access the **USCIS** database. A zero is to be substituted for the letter "A" in eight-digit A-Numbers, and two zeros must precede a seven-digit number. When the A-Number is nine digits, omit the "A" and enter the nine-digit number.

Information obtained through SAVE must be compared with the original immigration document. If discrepancies are noted, the secondary verification process must be initiated. No negative action may be taken on the basis of the automated verification only.

4. Secondary Verification

In some instances verification of the alien status may not be completed through the automated/primary system. Secondary verification will be required in the following situations:

a. Primary verification generates the message "Institute Secondary Verification" or "No File Found;"

b. Discrepancies are revealed when comparing primary verification to the original immigration document or the primary verification does not clearly indicate whether the individual is a qualified alien;

c. Immigration documents have no Alien Registration Number (A-Number) or documents presented are not identified in Procedures, Section I.F.2;

d. Immigration documents contain an A-Number in the A60 000 000 or A80 000 000 series;

e. The document presented is a **USCIS** fee receipt;

f. The document presented is a foreign passport and/or I-94 that is endorsed "Processed for I-551, Temporary Evidence of Lawful Permanent Residence," and the passport and/or I-94 is over one year old.

g. Any of the items presented as documentation appears to be counterfeit or altered.

h. The document presented is a **USCIS** receipt indicating the alien has applied for a replacement document for one of the qualified alien statuses.

i. Additional information is needed regarding sponsorship status, including whether the affidavit of support executed is a "213A" affidavit and the name and address of the sponsor(s).

j. Documentation is needed to substantiate status as a victim of abuse.

k. Documentation is needed to verify U.S. citizenship.

l. The documents presented are expired and the alien has a physical or mental disability that precludes obtaining new documents from the local **USCIS** office.

5. Secondary Verification Procedures

a. Once the requirement to obtain secondary verification is determined, the agency must initiate the request within 10 work days. Complete the top portion of the **USCIS** Form G-845, Document Verification Request and the Document Verification Request Supplement (G-845 Supplement). Separate forms must be completed for each alien. A copy of the forms is included in Appendix V, pages 3 - 6, to Section 201. Note: The G-845 Supplement may only be used in conjunction with the Form G-845, not separately.

b. Staple readable copies (front and back) of original immigration documents to the upper left corner of Form G-845. Copies of other documents used to make the initial alien status determination must also be submitted. Other documentation could include marriage records or court documents that indicate the identity or immigration status of the holder.

c. Retain a copy of the completed G-845 and G-845 Supplement in the case record. Mail the G-845 and G-845 Supplement to the appropriate **USCIS** office, indicating “Attention: Immigration Status Verifier” on the envelope.

USCIS
4420 North Fairfax Dr. (or)
Arlington, VA 22203

USCIS
Norfolk Commerce Park
5280 Henneman Drive
Norfolk, VA 23513

Refer to the listing of localities in Appendix V to Section 201, pages 1 and 2 to determine the appropriate office. Do not send bulk mailings.

d. While awaiting the secondary verification from **USCIS**, do not take any negative action against the case or individual on the basis of alien status.

e. Upon receipt of the G-845 and G-845 Supplement, compare the information with the case record. If eligibility of the alien is confirmed, the verification from **USCIS** must be filed in the case record with the current application. Timely notice must be given to delete the individual from the TANF assistance unit if verification proves an individual's ineligibility. Additionally, if the secondary verification reveals the individual is not an eligible alien, an overpayment has occurred which must be recouped/recovered per 503.8.

201.8 SOCIAL SECURITY ACCOUNT NUMBER (SSN) - As a condition of eligibility, each applicant is required to provide an SSN or show proof of application for a Social Security number for each person for whom assistance is requested. An applicant must meet this condition prior to approval of the case. Only those members of the assistance unit who have met this condition are to be approved for TANF. The agency must refer each applicant/recipient who does not have an SSN or cannot provide proof of application for an SSN to the Social Security Administration (SSA) District Office. The agency must also discuss with the applicant the types of evidence of age, identity, and U.S. citizenship or alien status documents which the SSA will require prior to issuing an SSN.

A. Obtaining a Social Security Number - For those individuals who provide SSNs prior to approval or at any other time the agency shall record the SSN in ADAPT and the State Verification and Exchange System (SVES) according to **201.8 E**. The agency, however shall not delay approval of an otherwise eligible assistance unit solely to verify a social security number even if the **30** day processing period has not expired. As soon as all other steps necessary to approve an application are completed except for verification of the social security number the agency shall approve the application.

For those individuals who do not have an SSN, who do not know if they have a number, are unable to find a number and therefore cannot provide a number, or whose number appears to be questionable, the agency will direct the assistance unit to submit form SS-5, Application for Social Security Number to the Social Security Administration (SSA). The agency must advise the assistance unit where to file the application for an SSN and discuss what evidence the assistance unit will need to obtain a SSN.

Evidence needed includes a U.S. public record of birth established before age five or other verification of birth, such as religious records whose validity is not questionable, or hospital records, if they can be verified by the SSA. While religious and hospital records will entitle the individual to an SSN, further proof of birth is required by the SSA to establish eligibility for Social Security benefits.

The agency shall advise the assistance unit that proof of the application for an SSN from SSA will be required prior to approval and suggest that the assistance unit member asks the SSA for proof of the application for an SSN. SSA has a form SSA-5028, Receipt for Application for a Social Security Number for this purpose. Local agencies may also devise their own form for this purpose; however, these must receive the approval of the Regional TANF Specialist.

B. Assistance to Newborns - For each infant added to an active case, the recipient must begin the process of obtaining a SSN. The SSN does not have to be provided prior to adding the infant to the assistance unit. If the assistance unit is unable to provide proof of application for the number for a newborn when the child is first added to the case, the caretaker must provide the number or proof of application at its next renewal or within six months, whichever is later. If the assistance unit is unable to provide the number or proof of application within the time allowed, the agency must determine if good cause provisions exist.

C. Failure to Comply - In instances where the recipient refuses to furnish an SSN or application for an SSN for anyone for whom assistance is requested or received, assistance is terminated for that individual. To determine if the recipient is refusing to provide the needed information, the recipient must be given the opportunity to cooperate, and must clearly demonstrate that he/she will not obtain the necessary information.

D. Determining Good Cause - In determining if good cause exists for failure to comply with the requirements to provide an SSN, the local agency must consider information from the assistance unit and SSA. The agency must verify and evaluate the recipient's circumstances to determine if there is good cause for the recipient not correcting either agency or SSA records by the next renewal of eligibility. Good cause for failing to apply for a number includes documentary evidence or collateral information that the assistance unit has made every effort to supply SSA with the necessary information to complete an application for an SSN. Good cause does not include delays due to illness, lack of transportation or temporary absences, because SSA makes provisions for mailing in applications for SSNs. If an assistance unit can show good cause why an application for an SSN has not been completed, the member in question shall be allowed to be included for one month in addition to the month of renewal for TANF. Good cause for failure to apply must be shown monthly thereafter in order for such an assistance unit member to continue to be eligible.

If the assistance unit is unable to obtain the documents required by SSA in order to apply for an SSN, the eligibility worker shall assist the individual in obtaining these documents.

The case record must be thoroughly documented to indicate the agency's determination of good cause for the recipients not providing the requested information concerning an SSN. Assistance will not be terminated for any individual if good cause is determined to exist for that individual. If good cause is not established, only the assistance for the individual not providing needed information will be terminated.

E. SSN Verification and Documentation

The local agency shall verify the SSNs reported by the assistance unit by submitting them to the Social Security Administration (SSA) through **the State Verification and Exchange System (SVES).**

When the **SVES inquiry** indicates that SSA is unable to verify the SSN provided by the client, the EW must recontact the assistance unit to determine if the information the assistance unit provided is correct and obtain the correct information as appropriate. Entering the corrected data into ADAPT will result in another match being initiated with SSA to verify the SSN.

If the information the agency has is correct, but the information SSA has is incorrect, the assistance unit must be notified that it must appear at the SSA office to provide them with the necessary information such as a change of name due to marriage.

If the assistance unit refuses to provide the necessary information that would allow the verification of an SSN, the individual shall be determined ineligible. For a determination of refusal to be made, the assistance unit must be able to cooperate, but clearly demonstrate that it will not take actions that it can take.

Once the worker determines that the assistance unit must provide information or documentation to either the agency or the SSA the assistance unit must complete such action prior to the next renewal or show good cause why it was unable to do so.

If an assistance unit claims it cannot cooperate for reasons beyond its control, the worker must substantiate the assistance unit's inability to cooperate. For example, an assistance unit may claim it cannot verify a name change because official records were destroyed in a fire. The worker must verify this to the point that he/she is satisfied the claim is accurate, i.e., documentation of the name change no longer exists. In these cases, an SSN match cannot be accomplished since SSA records cannot be corrected without the missing documentation. If the worker verifies that the assistance unit is unable to cooperate in the verification of the SSN, the individual shall not be terminated. The case file must adequately document the assistance unit's inability to cooperate.

If the worker is unable to substantiate the assistance unit's claim that it cannot cooperate, the individual shall be found to have refused to cooperate and shall be terminated.

F. Ending Ineligibility

Once a person has been removed from the assistance unit for refusal or failure to provide an SSN, the ineligible member must provide an SSN before eligibility can be established.

201.9 ASSIGNMENT OF RIGHTS - Federal regulations* require, as a condition of eligibility, that each applicant for or recipient of AFDC assign to the State any rights to support from any other person as the applicant or recipient may have. This assignment is also applicable to any support the applicant or recipient was due but was not paid and which has accrued at the time of assignment. The assignment is applicable to all support rights the applicant or recipient may have in his own behalf or in behalf of any other family member for whom assistance is requested.

State law** provides for an automatic assignment by receipt of public assistance. This law states that "by accepting public assistance for or on behalf of a child or children, the applicant/recipient is deemed to have made an assignment...." This requirement should be thoroughly explained to the applicant/recipient along with the penalties for failure to cooperate in forwarding any support received after receipt of public assistance.

201.10 COOPERATION IN OBTAINING SUPPORT

As a condition of eligibility, each applicant/recipient of AFDC must cooperate with the Division of Child Support Enforcement **(DCSE)** or local department of social services,******* unless good cause for refusing to do so is determined to exist,****** in:**

identifying and locating the parent of a child for whom aid is claimed,

establishing the paternity of a child born out of wedlock for whom aid is claimed;

obtaining support payments for the applicant or recipient and for a child for whom aid is claimed; and

obtaining any other payments or property due the applicant or recipient or the child.

When a minor parent who receives assistance for her child is included in the same assistance unit with her parent and/or minor siblings, the minor parent is required to meet the cooperation requirements and provide information about the absent parent of her child to the same extent as if she were receiving assistance in her own right.

A. **<u>COOPERATION DEFINED</u> - Cooperation means all of the following actions necessary for the identification and location of noncustodial parents (including putative fathers) and the establishment and collection of child support:**

1. Providing identifying information on the noncustodial parent of a child for whom aid is requested.

* 45 CFR 232.11(a) ** Code of Virginia, Section 63.1-273
*** 45 CFR 232.12(a)
**** 45 CFR 232.40

a. **Name of Parent**

1) **The applicant or recipient must** provide**, under penalty of perjury,** the first and last name **of the individual against whom paternity or an obligation to provide support is sought to be established, modified, or enforced**.

2) If the applicant/recipient is not certain of the child's paternity, he must **identify all** individuals with whom the mother had sexual intercourse who may be the father. **The "List of Putative Fathers" form must be completed by the applicant/recipient, listing the individuals who may be the father in rank order of their probability of being the father.**

a) **The applicant/recipient must designate, in writing, the two men most likely to be the father. If the two putative fathers designated are excluded from paternity as a result of the genetic testing, the applicant/recipient will be considered as not cooperating and the agency will impose a sanction until paternity has been established for the child.**

b) **If an applicant/recipient has named only one putative father, and subsequent genetic testing determines that this individual is not the father, the applicant/-recipient must be given an opportunity to provide another name for the putative father. The applicant/-recipient is considered to be cooperating with the identification requirement if she provides the name of another individual(s) with whom the mother had sexual intercourse who may be the father. If the second man named is excluded from paternity through genetic testing, the applicant/recipient will be considered as not cooperating and the agency will impose a sanction until paternity has been established for the child.**

c) **If the blood test determines that an individual named is not the father and the applicant/recipient maintains there are no other men who could be the father, the applicant/recipient must be advised of her right to meet with the DCSE worker and have her case reviewed. DCSE will review the case and offer the applicant/recipient an opportunity to view the photograph of the individual tested. If the individual in the photograph is not the man named by the applicant/recipient, DCSE will initiate action to administer another test to the appropriate parties. If the individual in the photograph is the man named by the applicant/-recipient, DCSE may refer the matter to the court if the applicant/recipient insists that he is the father. During that time, the applicant/recipient will be considered to be cooperating.**

3) If the mother was married at the time of the child's birth but names a putative father, the man to whom she was married must be considered the father for purposes of this requirement until DCSE has determined that he is not the father or DNA testing has excluded him as the father.

b. Additional Information to Identify the Noncustodial Parent - For each noncustodial parent referred to DCSE, the applicant/-recipient must provide, under penalty of perjury, additional informational items including, at a minimum, three of the following:

1) social security number;
2) race;
3) date of birth;
4) place of birth;
5) telephone number;
6) address;
7) schools attended;
8) occupation;
9) employer;
10) driver's license number;
11) make and model of motor vehicle;
12) motor vehicle license plate number;
13) places of social contact;
14) banking institutions utilized;
15) names, addresses, or telephone numbers of parents, friends, or relatives; or
16) other information that the agency determines is likely to lead to the establishment of paternity.

c. Exceptions to the Requirement to Provide Identifying Information on the Noncustodial Parent - In the four following situations, cooperation exists even though identifying information required in 201.10 A.1.a. and/or b. is not provided and no sanction is to be imposed. A referral must be made to DCSE even though the required identifying information is not provided. The determination as to whether one of the following exceptions exists must be evaluated by the eligibility worker and documented thoroughly in the case record. If the applicant/recipient informs the DCSE worker that one of the following situations exists, the DCSE worker will notify the eligibility worker who will evaluate the claim and make a determination. The applicant/recipient is considered to be cooperating while the claim is pending.

1) Caretaker Relative Other than the Parent - The relative other than the parent maintains that he does not know the identity of the child's parent and has no way to help identify the parent. The applicant/recipient must be advised that he is **still** expected to **comply with requirements in Section** 201.10.A.2-5 **and that failure or refusal to do so** can result in a sanction or closing of

of the case. He must also be advised that knowingly providing false information can constitute a criminal violation.

2) Mental Incapacity - The applicant/recipient claims that she cannot provide identifying information due to a mental incapacity. The applicant/recipient must provide competent medical evidence that she suffers from a mental incapacity and as a direct result of that incapacity is unable to provide the required identifying information about the father. The local agency must assist the applicant/recipient in obtaining the medical evidence, if requested.

The local agency must evaluate the medical evidence submitted in order to determine whether the evidence clearly shows that the applicant/recipient:

(a) suffers from a mental incapacity and

(b) is unable to provide the required identifying information as a direct result of that incapacity.

A "Substantiation of Mental Incapacity" form must be completed to document the agency's finding. Review and approval by the supervisor is also required. Pending a determination, cooperation is deemed to exist.

The "Substantiation of Mental Incapacity" form can be accessed from the VDSS Intranet, under TANF Eligibility Forms or by clicking this link: http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms/eligibility.cgi.

Substance abuse, intoxication, or other conditions of the applicant/recipient's own making do not constitute mental incapacity under this exception.

3) Undocumented Rape* - If the applicant/recipient alleges that the child was conceived as a result of rape but good cause cannot be established due to lack of acceptable evidence as required under good cause per Section 201.10 D, the local agency must determine whether the applicant/recipient is cooperating.

In making this determination, the local department must obtain a sworn statement from the applicant/recipient. In addition, the local department should consider all of the information available to it and to the applicant/recipient as to whether the child was conceived as a result of rape, and in most instances should require evidence in addition to the sworn statement of the applicant/recipient, which may include the following:

a) records from social workers, counselors, or rape crisis centers;

* Code of Virginia, Section 63.2-602.B.3

b) sworn statements from individuals, including neighbors, clergymen, social workers, and medical professionals; or

c) other information that is deemed appropriate by the local agency.

In addition, the local agency may determine that it is appropriate for the applicant/recipient to file a police report regarding the alleged rape and/or to agree to submit to blood testing for herself and child for matching with DNA databases.

When the applicant/recipient's sworn statement is determined to be sufficient to verify rape, the case must be thoroughly documented as to basis for the determination. Review and approval by the supervisor is required.

4) <u>Child Born Prior to May 1, 1996</u> - The parent applicant or recipient of a child born prior to May 1, 1996 must provide identifying information on the noncustodial parent of the child when aid is requested for the child, or attest to the lack of information, under penalty of perjury.

2. Appearing at an office of the local department of social services or the Division of Child Support Enforcement, as requested, to provide:

   a. verbal or written information, or

   b. documentary evidence known to, possessed by, or reasonably obtainable by the applicant/recipient about the noncustodial parent.

3. Appearing as a witness at judicial or administrative hearings or proceedings.

4. Appearing for a scheduled appointment to have blood drawn to establish paternity.

5. Paying to DCSE any money directly received from the noncustodial parent after approval of the AFDC case.

Note: If a problem is identified that interferes with the recipient's ability to cooperate, such as, lack of transportation, hospitalization, etc., the local agency must assist the applicant/recipient, if requested.

B. ACTION TO BE TAKEN UPON DETERMINATION OF NONCOOPERATION - Noncooperation may occur with respect to an individual's failure to cooperate with either the local department of social services or DCSE.

1. Noncooperation exists in the following circumstances. The applicant/recipient:

   a. failed to provide identifying information, including the first and last name of the father or of all individuals who may be the father of the child(ren), and at a minimum three additional informational items to identify the parent, and none of the exceptions in Section 201.10 A.1.c. is applicable; or

   b. failed to respond to two consecutive requests to provide information; or

   c. missed two consecutive scheduled appointments (other than blood test and court appearance) and did not contact the worker to reschedule them; or

   d. failed to appear in court for a scheduled paternity, establishment of support, or enforcement hearing and did not contact DCSE to reschedule (one occurrence); or

   e. missed a scheduled appointment for a blood test and did not contact DCSE to reschedule (one occurrence); or

f. does not name another individual who may be the father after the only man named as the putative father is excluded; or

g. the putative fathers designated as numbers 1 and 2 on the "IV-A/IV-D 501 Supplement" form are excluded from paternity as a result of blood tests; or

h. otherwise fails to comply with the requirements in Section 201.10 A.

2. The finding of noncooperation must be documented in the case record.

a. Noncooperation must be due to one of the reasons listed in 1.a. - h. above.

b. If noncooperation was determined by DCSE, the DCSE worker will update the noncooperation indicator in the IV-A/IV-D Interface and follow-up with written notification to the eligibility worker on the "Cooperation/Noncooperation Notification" form, substantiating the noncooperation. Detailed information is to be maintained in the DCSE case record to document the noncooperation and must be made available, upon request, if the sanction resulting from the noncooperation finding is appealed. If the action is appealed, the eligibility worker must contact the DCSE worker to inform him that an appeal has been filed and to request the supporting documentation required to be included in the appeal summary. The DCSE worker will attend the hearing or participate in a telephonic hearing to testify as to the applicant/recipient's failure to cooperate.

3. The local agency must impose the appropriate sanction for noncooperation as soon as administratively possible, as follows:

Send an advance notice advising the recipient that the agency will sanction him. The sanction imposed must be determined in accordance with Section 201.10.C. below and must be effective the following month, if administratively possible.

a. The notice must explain that his needs will be added back to the grant once he cooperates with DCSE. DCSE will be notified of the sanction through the computer systems interface by entering the appropriate VACIS delete reason or closure code.

b. If the sanction is due to failure to redirect support, the agency must also explain that the support, minus the $50 disregard, will count as income to the assistance unit.

C. SANCTIONS FOR NONCOOPERATION - Failure to cooperate, absent good cause or an exception to identification requirements, will result in the following action:

1. Noncooperation During First Six Months of Receipt of Assistance - When the applicant/recipient or a minor parent fails to cooperate during the first six months of receipt of assistance, the worker shall:

a. Exclude the caretaker's needs from the grant, **reducing the grant by the amount of the caretaker's needs or by 25 percent, whichever is greater,** effective the month following noncompliance, if administratively possible.* **Procedures for calculating the amount of the reduction are as follows:**

1) If the caretaker's needs are currently included on the grant, the caretaker must be removed. If the resulting grant reduction is less than 25 percent of the amount of assistance that would otherwise be provided to the family, the grant reduction must be increased to 25 percent. In addition to removing the caretaker, enter the additional amount on the Assistance Plan using the applicable income penalty code. Document the record as to the basis for imposing the additional penalty amount.

2) If the caretaker's needs are not included on the grant due to the caretaker's categorical ineligibility (i.e., receives SSI, or is an ineligible alien) the grant must be reduced by 25 percent. On the Assistance Plan, enter as unearned income to the assistance unit an amount equal to 25 percent of the grant amount the family would otherwise have received.

3) If the caretaker's needs are not included on the grant due to failure or refusal to cooperate in meeting a requirement of eligibility, the grant must be reduced by 25 percent. On the Assistance Plan, enter as an income penalty an amount equal to 25 percent of the grant amount the eligible unit members would otherwise have received.

If the caretaker subsequently complies with the eligibility requirement that had caused his needs to be removed, the amount of the reduction in the grant resulting from noncooperation with DCSE must be recalculated. The amount of the penalty will be the greater of the reduction resulting from removal of the caretaker's needs or 25 percent of the amount the family would now receive if cooperating with DCSE. Enter the additional penalty amount as income on the Assistance Plan, using the applicable income penalty code.

* 45 CFR 232.12

If the caretaker complies with the support enforcement requirement but continues to be ineligible due to noncompliance with another requirement, the penalty reduction (amount in excess of the caretaker's needs) must be removed but the caretaker's needs must continue to be excluded.

See Appendix X to Chapter 201 for examples of the above calculations.

The individual will remain ineligible **and any penalty reduction must continue** until he has cooperated or the information not previously provided has been obtained from another source. **The penalty reduction must be recalculated whenever there is a change in the assistance unit size or the grant amount to ensure that the sanction reduces the grant by the greater of the amount of the caretaker's needs or 25 percent.**

If excluded due to noncooperation in establishing paternity, the case must be evaluated after six months' receipt of assistance according to C.2 below.

b. Issue the assistance payment for the remaining assistance unit members in the form of protective and/or vendor payments unless, after reasonable efforts, the local agency cannot locate an appropriate individual to act as protective payee.* (See Section 502.7.A.2.)

c. Add the recipient to the grant by the month following the month in which he cooperates with DCSE or the information not previously provided is obtained from another source.

d. If, in the sixth month **TANF** is received, the recipient is still not cooperating in relation to unestablished paternity, the local agency must complete a special review to determine if the case continues to be eligible in accordance with C.2 below. If the recipient is still not cooperating but paternity has been established, policy in section C.2 below is not applicable.

2. Noncooperation Related to Unestablished Paternity In or After the Sixth Month of Receipt of Assistance - When noncooperation occurs during or after the sixth month of receipt of assistance, the local agency must conduct a special review of the case. The purpose of the special review is to verify, through contact with DCSE, whether the recipient has begun to cooperate and/or paternity has been established. If the DCSE worker indicates that the recipient is not cooperating and paternity has not been established, action must be taken to close the case.

* 45 CFR 234.60(a)(13)

If paternity has not been established due to the recipient's noncooperation, the local agency must close the <u>entire</u> AFDC case as soon as administratively possible and document the case record accordingly. The case is ineligible effective the following month and must remain closed for a minimum of one month and until cooperation has been achieved or the information not previously provided is received from another source.*

<u>Exception</u>: If the individual not cooperating is the minor parent who is a member of an assistance unit that includes her sibling(s), the agency must notify the applicant/recipient that the sanction may be avoided by withdrawing their request for assistance for the minor parent's child.

3. **<u>Counting the Six Months of Receipt of Assistance</u> - In counting the six months of receipt of assistance, count the month of entitlement as the first month of assistance when noncooperation began prior to case approval. If noncooperation occurred after approval, the six months are still counted from the date of entitlement. <u>Exception</u>:** For a child added to the grant subsequent to case approval, the six-month period begins with the first month of receipt of assistance for the child.

<u>Example 1</u> - At the time of application, the agency determines that Ms. Rageolla is not cooperating in identifying the father of one of her children, and that good cause does not exist. Her case is approved in March, with her needs removed. The date of entitlement is March 20. The case is reviewed in August, the sixth month of receipt of assistance, to determine whether the case must be closed in accordance with C.2 above.

<u>Example 2</u> - Ms. Zorda cooperates at application (April) in identifying the putative father of her child. Her case is approved effective May 1. In the second month assistance is received (June), she is notified that she must come to the DCSE office to have blood drawn. Ms. Zorda fails to keep the appointment, and DCSE notifies the eligibility worker that Ms. Zorda is not cooperating. Good cause for not cooperating does not exist and her needs are removed from the grant. In October, Ms. Zorda has received six months of assistance, and the agency must determine whether the case must be closed in accordance with C.2 above.

<u>Example 3</u> - If Ms. Zorda's refusal to cooperate had occurred more than six months after entitlement, i.e., entitlement is in January and refusal to cooperate occurs in November, the sixth month of receipt of assistance would have been June and the agency would immediately evaluate continuing eligibility of the case in accordance with C.2 above.

* Code of Virginia, Section 63.1-105.1

<u>Example 4</u> - Ms. Bonnewit has been receiving AFDC for several years. A child (not subject to the family cap), who had been residing elsewhere, comes to live with his mother, Ms. Bonnewit. His paternity has not been established. In determining the child's eligibility, Ms. Bonnewit refuses to name the father. At the same time the child is added to the grant, the mother's needs are removed. In this situation, the six-month period begins with the first month of receipt of assistance for the child.

D. <u>CLAIM OF GOOD CAUSE FOR NOT COOPERATING WITH THE DIVISION OF CHILD SUPPORT ENFORCEMENT</u>* - If an applicant/recipient believes that cooperation would be harmful to the child or himself, he may claim good cause for not cooperating. The applicant/recipient must provide evidence to support the claim to be excused from cooperating. If the claim is substantiated, no attempt will be made to establish paternity or collect support.

The local agency may determine that cooperation would be harmful to the child only if one or more of the following circumstances exists:

1. The agency believes that the applicant/recipient's cooperation will result in:

   a. physical or emotional harm to the child; or

   b. physical or emotional harm to the caretaker which would impair ability to care for the child.

2. The agency believes that proceeding to establish paternity or **to** secure support would be detrimental to the child because one of these circumstances exists:

   a. the child was conceived as a result of forcible rape or incest;

   b. legal proceedings for the adoption of the child(ren) are pending; or

   c. the caretaker, assisted by a public or licensed private social agency, is deciding whether to keep or relinquish for adoption the child for whom aid is requested.

E. <u>ADVISING THE CLIENT OF THE RIGHT TO CLAIM GOOD CAUSE</u> - At the time of application or redetermination, the agency must advise each applicant or recipient of the right to explain all reasons for refusing to cooperate in establishing paternity or securing support. The agency must explain the provisions in the "Notice of Cooperation and Good Cause" to the applicant/recipient. The applicant/recipient and eligibility worker must sign the form indicating whether or not the client claims good cause for refusing to cooperate.

* 45 CFR CFR 234.60(a)(13)

A signed copy of the "Notice of Cooperation and Good Cause" shall be filed in the case record and a duplicate copy will be given to the applicant/recipient. If the applicant/recipient wishes to change the claim subsequent to signing one "Notice of Cooperation and Good Cause" then he must sign another form indicating the change of claim. Otherwise, only one "Notice of Cooperation and Good Cause" is necessary per case record unless the case is closed and another application is made subsequently. Because the notice outlines the rights and responsibilities of the applicant/recipient, the eligibility worker shall review each condition with the applicant/recipient to assure a complete understanding. The agency must also advise the applicant/recipient that if a finding is made that no good cause for not cooperating exists, cooperation will be required.

Note: When a minor parent is receiving assistance for her child in the unit with her parent, the good cause provision may also apply to the minor parent. The minor parent must sign a separate "Notice of Cooperation and Good Cause."

F. ACCEPTABLE EVIDENCE TO SUBSTANTIATE GOOD CAUSE CLAIM - Each applicant or recipient who claims to have a good cause for not cooperating must provide acceptable evidence, or provide sufficient information to permit an investigation to determine if good cause exists. The applicant/recipient must provide the evidence within twenty (20) days from the day he makes the good cause claim or the agency will determine that good cause does not exist. The agency must base the determination of good cause on evidence provided by the applicant or recipient and/or through an investigation by the agency.

The agency will determine that good cause exists when the information obtained provides clear and convincing evidence of good cause for not cooperating. The following specified evidence will be sufficient to determine the existence of the good cause claimed circumstance.

1. Incest Or Forcible Rape - Birth certificates or medical or law enforcement records which indicate that the child was conceived as the result of incest or forcible rape;

2. Adoption - Court documents or other records which indicate that legal proceedings for adoption are pending before a court of competent jurisdiction or a public or licensed private social agency is currently assisting the applicant/recipient to place the child for adoption and such discussions have not gone on for more than three months. The agency must obtain a written statement from the social agency.

3. Physical Or Emotional Harm - Court, medical, criminal, child protective services, psychological, or law enforcement records **or a written statement from a domestic violence services program or sexual assault crisis center professional** indicating that the putative father or noncustodial parent might inflict physical or emotional harm on the child or caretaker-relative.

A determination that good cause exists due to the emotional harm factor may only be based upon a demonstration of an emotional state that would substantially affect the individual's functioning if the agency required cooperation with support enforcement. Medical records which indicate the emotional health history and present emotional status of the caretaker-relative or the child for whom support would be sought may also substantiate good cause. Additionally, written statements from a psychiatrist or psychologist which indicate the diagnosis or prognosis of the caretaker-relative or the child(ren) may be used for this purpose.

NOTE: In addition to the above evidence, the applicant/recipient may offer a sworn statement from individuals including neighbors, clergymen, social workers, and medical professionals who might have knowledge of the circumstances supporting his good cause claim of physical harm. This information cannot be the only evidence offered to support the claim.

While the applicant or recipient has the responsibility to provide the agency with the required documented evidence, the agency will, upon request, assist the applicant or recipient in obtaining the required evidence. "Assist" in this context means to advise the applicant or recipient on how to obtain the documents.

If the applicant/recipient is unable to obtain the evidence and requests the agency's assistance, the agency may also undertake reasonable efforts to obtain evidence for the applicant or recipient that he is not reasonably able to obtain. This evidence is limited to the evidence cited above in items 1 - 3.

G. DETERMINATION OF THE GOOD CAUSE CLAIM - Based on the evidence gathered, the eligibility worker must evaluate whether the evidence is clear and convincing enough to substantiate the existence of the claimed circumstance. If so, to grant a good cause exemption, the worker must further determine that requiring cooperation would be detrimental to the child because that circumstance exists. The worker will make this evaluation by considering the possible impact of cooperating, in view of the existing circumstances. In short, existence of the circumstance does not automatically exempt the client from cooperating.

On every claim of good cause, the worker will make the final determination that:

1. good cause does not exist, or

2. good cause exists and the Division of Child Support Enforcement may not pursue support.

The agency must document the final determination regarding good cause in the case record, specifying the agency's findings and the basis for the decision.

H. ADVISING THE CLIENT OF THE DETERMINATION - The agency must advise each applicant/recipient who claims good cause for not cooperating of the final determination using the Notice of Action form. If the agency determines that good cause does not exist, it must refer the case to the Division of Child Support Enforcement. The agency must inform the applicant/recipient that cooperation will be required and provide a clear explanation of what is expected under the cooperation provision. The agency must allow him the opportunity to withdraw the application or request termination. Should the Division of Child Support Enforcement notify the local agency of evidence of failure to cooperate, the local agency must act upon such information in accordance with Section 201.10 B and C.

I. TIME FRAME - The agency must make the final determination that good cause for refusing to cooperate does or does not exist with the same degree of promptness as any other determination or redetermination of eligibility. However, the agency must not delay, deny, or discontinue assistance for the caretaker and children pending a determination of good cause if the applicant/recipient furnishes the required documented evidence or information necessary for the agency to obtain such. EXCEPTION: If the applicant/recipient reapplies following denial or closure due to noncooperation in establishing paternity, the agency cannot approve the application unless good cause has been verified, the applicant has cooperated, or the information not previously provided has been received from another source.

J. REFERRAL TO SUPPORT ENFORCEMENT - When the recipient has claimed good cause for not cooperating, the local agency must enter the pending claim in the MAPPER 501 system. Upon receipt of this information, the Division of Child Support Enforcement will suspend pursuit activities, pending the local agency's determination of the good cause claim.

When the agency has decided whether or not good cause exists, it will notify the DCSE Regional Office by entering the information into the MAPPER 501 system and allowing the Division of Child Support Enforcement ten (10) working days to respond if they do not concur. The agency must consider any information received from DCSE by the local agency for a possible change of the good cause determination, but the agency makes the final decision. If the agency changes its decision, it will notify the Division of Child Support Enforcement and the applicant/recipient. The worker must document the explanation of the basis for the decision.

On a newly approved case in which the applicant has claimed good cause and the recipient has previously received public assistance or DCSE services, the worker must complete the "Good Cause Communication Form" and send it to the appropriate DCSE district office. If the information is questionable as to whether the client has previously received public assistance or DCSE services, the form must be completed and sent to the DCSE district office.

K. FAIR HEARING - The appeal procedures are equally applicable in this section and, upon notification of the decision, the Division of Child Support Enforcement will have the opportunity to participate in any hearings that result from an appeal of any action required by this section.

L. PERIODIC REVIEW - The agency must review evidence used in making the determination of good cause at least as frequently as each redetermination. This review is to determine whether good cause for not cooperating continues to exist. If good cause no longer exists, the eligibility worker must notify the client of this determination using the Notice of Action. The eligibility worker must allow the applicant/recipient the opportunity to request termination of assistance, advise him of the cooperation requirement, and enter the new information in the MAPPER 501 System.

201.11 EMPLOYMENT SERVICES PROGRAM - **See Chapter 900 - Virginia Initiative for Employment Not Welfare (VIEW)**

201.12 - FAMILY CAP PROVISION* - An additional child born during the period when a family is eligible for TANF is not eligible to have his needs included in the grant. The family cap provision applies to a child born while the family is eligible for TANF whether the mother's needs are included in the grant or not. Once a child has been capped, he continues to be capped during any subsequent period of eligibility subject to the provisions below.

For cases active on July 1, 1995, the family cap provision applies to a child born on or after May 1, l996.

For applications on or after July 1, l995, the family cap provision applies to a child born after the ten full months following the month in which the **mother's** initial TANF payment was issued. The issuance of the initial payment is the system check date. **A new ten-month period occurs at each reapplication. The ten-month period is a fixed period of ten calendar months and is not affected by suspensions.**

Example 1: Ms. Brown's application was approved August 3, 1995, and the check date of the initial payment was August 5, 1995. The first month of the 10 month grace period is September. The tenth month is June. Therefore, the effective date of the family cap provision for Ms. Brown is July 1, 1996. The family cap applies to an additional child born to her on July 1, 1996 or later while she is eligible for TANF.

If Ms. Brown's application had not been approved until August 30th and the check date of the first payment was September 1st, the 10-month period would have begun in October and ended in July, with the family cap applicable to a child born on or after August 1.

Example 2: Ms. Solos has been a recipient of TANF for the past three years. She has two children, one of whom is capped. In March 1999 her case was closed. She reapplies in July 1999 and reports that she is pregnant. Ms. Solos' case is approved for herself and the older child. Her younger child continues to be ineligible due to his capped status. Two months later, she gives birth to her third child. This child is not capped, since the child was born during the 10-month period following issuance of her initial check.

A. CHILD SUPPORT FOR THE CHILD SUBJECT TO THE FAMILY CAP PROVISION - DCSE shall send the total value of child support collected for the child subject to the family cap provision to the child's single custodial parent. This child support shall be disregarded as income and resources for the purpose of TANF eligibility and grant determination.

To apply for DCSE services for a "capped" child, the mother may complete a DCSE application or a manual Absent Parent Deprivation/Paternity Information form when applying for Medicaid for the child.

NOTE: Anyone who is not the natural or adoptive parent of a "capped" child is not eligible to receive the total value of child support collected for the child.

* Code of Virginia, Section 63.1-105.7

B. MINOR MOTHERS - If a minor is an eligible child on a grant, the provision does not apply to the first child of the minor, but does apply to additional children born to the minor within the specified time frames.

C. ADOPTIVE PARENTS - The family cap policy applies to adoptive parents in the same manner that it applies to biological parents except the date of entry of the interlocutory order is the date used instead of the child's birth date.

D. INCOME OF THE "CAPPED" CHILD - The income of the child **is** deemed unavailable to the assistance unit.

E. CHILDREN WHO MOVE INTO THE HOME OF THE PARENT RECEIVING TANF - A child who was not subject to the family cap provision is subsequently not subject to the provision when he moves into the parent's home.

F. OTHER CARETAKER/RELATIVES - The family cap provision does not apply to foster parents or caretaker/relatives who are not the biological or adoptive parents of the child. A child who was subject to the family cap in the home of a parent and subsequently moves into the home of a relative may be eligible for TANF, if otherwise eligible. Exception: A child who is subject to the family cap provision and whose parent is in a period of ineligibility due to the time limit for receipt of TANF is not eligible to receive assistance with another caretaker/relative until the parent's period of ineligibility expires. (See 901.11.)

G. DURATION OF THE FAMILY CAP - The provision applies to a "capped" child when he lives with or returns to the home of a parent after living for a period of time in another living arrangement.

H. CLIENT NOTICE OF FAMILY CAP PROVISION - Applicants for TANF shall receive an explanation of the family cap provision at the time of application. The applicant must check the appropriate box on the last page of the Combined Application indicating that the agency has explained the provision and that they understand the provision. When the application is approved, the Client Notice of Action must inform the mother of the effective date of the specified periods described above.

The agency must explain the provision to recipients who are receiving assistance on July 1, 1995, at the next redetermination or face-to-face interview on or after July 1, 1995. After the explanation, the recipient must check the block on the last page of the Combined Application, as well as sign and date the application.

In addition, applicants and recipients must sign and date the Notice of Personal Responsibility form. The form states that the local department has explained and that the individual understands the terms of the family cap provision. The form must be signed for all applications taken on or after July 1, 1995, and at the first redetermination after July 1, 1995, and retained in the permanent document section of the TANF case record.

I. CHILD CONCEIVED AS A RESULT OF VERIFIED RAPE OR INCEST - A child conceived as a result of verified rape or incest is not subject to the family cap provision. Birth certificates and medical or law enforcement records are required to verify rape or incest.

J. MEDICAID COVERAGE FOR THE CHILD SUBJECT TO THE FAMILY CAP - See the Medicaid Manual, Volume XIII, Part I, Chapter F.

K. CHILD CAPPED IN ANOTHER STATE - A family cap imposed under another state's TANF program does not affect the child's eligibility under Virginia's TANF program.

NONIMMIGRANT ADMISSION CODES

SYMBOL	CLASSES OF NONIMMIGRANTS
A-1, A-2	Foreign government officials, employees, and their families
A-3	Employees of A-1 or A-2 aliens and their families
B-1, B-2	Visitor for business or pleasure
C-1, C-3	Alien in transit through the U.S.
C-2	Alien in transit to U.N. headquarters
TROV	Transit without visa
D-1, D-2	Crewmen discharged from vessel or aircraft
E-1, E-2	Treaty traders
F-1, F-2	Students and their families
G-1, G-2 G-3, G-4	Representatives of international organizations and their families
G-5	Employees of G-1, G-2, G-3, G-4 and their families
H-1	Temporary workers of distinguished merit
H-1A	Registered nurse
H-1B	Alien in a specialty occupation
H-2	Temporary worker
H-3	Trainee
H-4	Spouse and minor children, accompanying or following to join H-1, H-2, or H-3
I	Foreign information representatives and their families
J-1, J-2	Exchange visitors and families
K-1, K-2	Fiance orFiancee and their children
L-1	Intra-company transferees
L-2	Spouse and minor children accompanying or following to join L-1
NATO 1, NATO 2 NATO 3, NATO 4	NATO representative and families

NONIMMIGRANT ADMISSION CODES

SYMBOL	CLASSES OF NONIMMIGRANTS
NATO 5, NATO 6 NATO 7	Employees of NATO representative and their families
N-8	Parent of alien classified as SK-3 (unmarried son or daughter of an employee of an international organization)
N-9	Child of N-8, retired employee of an international organization or spouse (SK-1, SK-2, or SK-4)
O-1	Aliens with extraordinary ability
O-2	An assistant to O-1
O-3	Spouse and minor child of O-1 or O-2
P-1	Internationally recognized athletic or entertainment groups
P-2	Reciprocal exchange program for individuals and groups
P-3	Artists and entertainers in a culturally unique program
P-4	Spouse and child of P-1, P-2 or P-3
Q	International cultural exchange program
R-1	Members of a religious denomination that have a bonafide non-profit religious organization in the United States
R-2	Spouse and child of R-1

EVIDENCE OF AGE, IDENTITY AND U.S. CITIZENSHIP OF ALIEN STATUS

1. U.S. CITIZEN - BORN IN U.S. APPLYING FOR ORIGINAL SOCIAL SECURITY NUMBER

A. EVIDENCE OF AGE AND CITIZENSHIP

ONE OF THE FOLLOWING RECORDS ESTABLISHED BEFORE APPLICANT'S 5TH BIRTHDAY:

PUBLIC OR HOSPITAL BIRTH CERTIFICATE

RELIGIOUS RECORD OF BIRTH OR BAPTISHM

IF BIRTH WAS NEVER RECORDED OR THE PUBLIC RECORD NO LONGER EXISTS, SUBMIT DOCUMENTS FROM LIST B FOR EVIDENCE OR AGE AND CITIZENSHIP. AT LEAST ONE DOCUMENT MUST SHOW APPLICANT'S NAME, AGE OR DATE OF BIRTH, AND PLACE OF BIRTH. IT SHOULD BE AT LEAST ONE YEAR OLD.

B. EVIDENCE OF IDENTITY (A BIRTH RECORD IS NOT EVIDENCE OF IDENTITY.)

STATE IDENTITY CARD
INSURANCE POLICY
DRIVER'S LICENSE
SCHOOL ID CARD
VACCINATION CERTIFICATE
ADOPTION RECORD
SCHOOL RECORD OR REPORT CARD
CLINIC, DOCTOR OR HOSPITAL RECORD
CHURCH MEMBERSHIP OR CONFIRMATION RECORD
DAY CARE OR NURSERY SCHOOL RECORD
COURT ORDER FOR NAME CHANGE
LABOR UNION OR FRATERNAL ORGANIZATION RECORD
MARRIAGE OR DIVORCE RECORD
WORK BADGE OR BUILDING PASS
VOTER'S REGISTRATION CARD
MILITARY OR DRAFT RECORD
NEWSPAPER NOTICE OF BIRTH
PRIOR WELFARE ID CARD
MILITARY DEPENDENT'S ID
U.S. PASSPORT OR CITIZEN ID CARD
RECORD OF CHILD'S MEMBERSHIP IN BOY SCOUTS, GIRL SCOUTS OR OTHER YOUTH ORGANIZATION
ANY OTHER DOCUMENT PROVIDING IDENTIFYING DATA SUCH AS PHYSICAL DESCRIP-TION, PHOTOGRAPH, OR SIGNATURE

II. U.S. CITIZEN - BORN OUTSIDE U.S. APPLYING FOR ORIGINAL SOCIAL SECURITY NUMBER

A. IF APPLICANT WAS BORN OUTSIDE THE U.S. BUT IS A U.S CITIZEN, HE/SHE SHOULD SUBMIT EITHER:

1. U.S. CONSULAR REPORT OF BIRTH AND EVIDENCE OF IDENTITY (SEE CATEGORY 1, LIST B); OR

2. FOREIGN BIRTH CERTIFICATE (IF AVAILABLE) AND ONE OF THE FOLLOWING:

   U.S. CITIZEN ID CARD
   CERTIFICATE OF CITIZENSHIP
   U.S. PASSPORT
   NATURALIZATION CERTIFICATE
   U.S. MILITARY DISCHARGE PAPERS SHOWING U.S. CITIZENSHIP

III. ALIEN - NOT U.S. CITIZEN APPLYING FOR ORIGINAL SOCIAL SECURITY NUMBER

A. IF APPLICANT IS AN ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE OR OTHERWISE PERMANENTLY RESIDING IN THE U.S. UNDER COLOR OF LAW, HE/SHE SHOULD SUBMIT FOREIGN BIRTH CERTIFICATE (IF AVAILABLE) AND ONE OF THE FOLLOWING:

1. ALIEN REGISTRATION CARD I-151 OR I-551
2. U.S. IMMIGRATION FORM I-94, I-95, I-185, I-186 OR I-586 (AND I-444, IF APPLICABLE)

SUGGESTED LETTER ON SSN UPDATE

Case number
Client name
Client address
Date

Dear _____

In verifying your Social Security number with the Social Security Administration, they have notified us that the following information in their Social Security Number Record System is not the same as what we have in your public assistance/food stamp record.

_____

_____

_____

Please take verification of your _____ to the Social Security Administration office nearest you to have this information corrected.

Please have the representative at the Social Security Administration complete the bottom of this page to verify that you have completed this requirement.

Return this form to the Department of Social Services by: _____

****

To Be Completed By Social Security:

_____ has provided the information/documentation necessary to update SSA records on this individual.

_____
Signature of SSA Representative

_____
Date

Agencies Corresponding to **USCIS**, Arlington:

Albemarle
Alexandria
Alleghany/Covington
Amherst
Appomattox
Arlington
Bath
Bedford
Bland
Botetourt
Bristol
Buchanan
Buckingham
Campbell
Carroll
Charlotte
Charlottesville
Clarke
Clifton Forge
Craig
Culpeper
Cumberland
Danville
Dickenson
Fairfax
Fauquier
Floyd
Fluvanna
Franklin County
Frederick
Galax
Giles
Grayson
Greene
Halifax
Harrisonburg/Rockingham
Henry/Martinsville
Highland
King George
Lee
Loudoun
Lynchburg
Madison
Manassas
Manassas Park
Montgomery
Nelson
Norton
Orange
Page
Patrick
Pittsylvania
Prince William
Pulaski
Radford
Rappahannock
Roanoke City
Roanoke County
Rockbridge Area
Russell
Scott
Shenandoah
Smyth
Stafford
Staunton/Augusta
Tazewell
Warren
Washington
Waynesboro
Winchester
Wise
Wythe

Agencies Corresponding to **USCIS**, Norfolk:

Accomack
Amelia
Brunswick
Caroline
Charles City
Chesapeake
Chesterfield
Colonial Heights
Dinwiddie
Essex
Franklin City
Fredericksburg
Gloucester
Goochland
Greensville/Emporia
Hampton
Hanover
Henrico
Hopewell
Isle of Wight
James City
King and Queen
King William
Lancaster
Louisa
Lunenburg
Mathews
Mecklenburg
Middlesex
New Kent
Newport News
Norfolk
Northampton
Northumberland
Nottoway
Petersburg
Portsmouth
Powhatan
Prince Edward
Prince George
Richmond City
Richmond County
Southampton
Spotsylvania
Suffolk
Surry
Sussex
Virginia Beach
Westmoreland
Williamsburg
York/Poquoson

U.S. Department of Justice
Immigration and Naturalization Service

SAVE

OMB #1115-0122
Document Verification Request

Section A – *to be completed by the submitting agency.*

To: Immigration and Naturalization Service

6. Verification Number

7. ☐ Photocopy of Document Attached.
(If printed on back, attach a copy of the front and of the back)
☐ Other Information Attached (Specify documents)

From: Typed or Stamped Name and Address Submitting Agency

Attn: Status Verifier

(INS may use above address with a #20 window envelope)

8. (Benefits)	(Year Case Number)
☐ AFDC	
☐ Education Grant/Loans/Workstudy	
☐ Food Stamp	
☐ Housing Assistance	
☐ Medicaid/Medical Assistance	
☐ Unemployment Insurance	
☐ Employment Authorization	
☐ Other (specify)	

1. Alien Registration or I-94 Number
2. Applicant's Name (*Last, First, Middle*)
3. Nationality
4. Date of Birth (*Month, Day, Year*)
5. Social Security Number
9. Name of Submitting Official
10. Title of Submitting Official
11. Date
12. Telephone Number

Section B - *to be completed by INS*

1. ☐ This document appears valid and relates to a Lawful Permanent Resident alien of the United States.
2. ☐ This document appears valid and relates to a Conditional Resident alien of the United States.
3.. ☐ This document appears valid and relates to an alien authorized employment as indicated below:
   a. ☐ Full-Time
   b. ☐ Part-Time
   c. ☐ No Expiration (Indefinite)
   d. ☐ Expires on (*specify Month/Day/Year, below*)
4. ☐ This document appears valid and relates to an alien who has an application pending for (specify INS benefits below)
5. ☐ This document relates to an alien having been granted asylum/refugee status in the United States.
6. ☐ This document appears valid and relates to an alien paroled into the United States pursuant to Section 212 of the I&N Act.
7. ☐ This document appears valid and relates to an alien who is a Cuban/Haitian entrant.
8. ☐ This document appears valid and relates to an alien who is a conditional entrant.
9. ☐ This document appears valid and relates to an alien who is a nonimmigrant (*specify type or class below*)
10. ☐ This document appears valid and relates to an alien not authorized employment in the United States.
11. ☐ Continue to process as legal alien. INS is searching indices for further information.
12. ☐ This document is not valid because it appears to be (*check all that apply*)
   a. ☐ Expired
   b. ☐ Altered
   c. ☐ Counterfeit

INS Stamp

☐ Please see reverse for additional comments.

Form G-3455 (Rev. 06/06/89) Y

Comments

13. No determination can be made from the information submitted. Please obtain a copy of the original alien registration documentation and resubmit.

14. No determination can be made without seeing both sides of the document submitted (*please resubmit request*).

15 Copy of document is not readable (*please resubmit request*).

"PRUCOL"
For Purposes Of Determining If Alien Is Permanently Residing Under Color of Law Only!

16. INS actively pursues the expulsion of an alien in this class/category.

17. INS is not actively pursuing the expulsion of an alien in this class/category, at this time.

18. Other

Instructions

- Submit copies of both/front and back of alien's original documentation.
- Make certain a complete return address has been entered in the "From" portion of the form.
- The Alien Registration Number ("A" Number) is the letter "A" followed by a series of (7) or (8) digits. Also in this block may be recorded the number found on Form I-94. (check the front and back of the I-94 document and if the "A" Number appears, record that number when requesting information instead of the longer admission number as the "A" Number refers to the most integral record available.)
- If Form G-845 is submitted without copies of applicant's original documentation, it will be returned to the submitting agency without any action taken.
- Address this verification request to the local office of the Immigration and Naturalization Service.

U.S. Department of Justice
Immigration and Naturalization Service Document Verification Request Supplement

TO BE COMPLETED BY THE SUBMITTING AGENCY

To: Immigration and Naturalization Service Date_____

_____
Applicant's Name *(Last, First, Middle)*

_____
Social Security Number

_____
Alien Registration Number or I-94 Number

_____
FROM: Typed or Stamped Name and Address of Submitting Agency Telephone(____)_____

Complete the following items: #1 #2 #3 #4 #5 #6 #7
For SSA Use Only: Show 8/22/96 status in #1. Alleged 8/22/96 status _____

TO BE COMPLETED BY INS

1. IMMIGRATION STATUS (check all that apply):
From the document or information submitted and/or a review we find that the person identified is a/an:

a. Lawful Permanent Resident alien of the United States.
(Complete b,c,d,g,h, or I if alien adjusted to LPR status from one of those statuses in the past 7 years.)

b. Refugee admitted to the United States under Section 207 of the INA. (Complete Item 2 below.)

c. Asylee under Section 208 of the INA. (Complete Item 3 below.)

d. Alien whose deportation has been withheld under sections 243(b) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under section 241(b)(3).

e. Alien paroled into the United States under Section 212(d) (5) of the INA for a period of at least 1 year.
(compare Items 3 and 4 below.)

f. Conditional Entrant pursuant to Section 203(a)(7) of the INA in effect prior to April 1, 1980.

g. American Indian born in Canada to whom the provisions of Section 289 of the INA apply.

h. Cuban/Haitian Entrant, as defined in Section 501(e) of the Refugee Education Assistance Act of 1980. (Compare Item 3 below)

i. Amerasian immigrant, pursuant to Section 584 of the Foreign Operations, Export Financing, and Related Programs Appropriation Act of 1988. (Complete Item 2 below.)

j. Other (indicate status):_____

2. Date Alien entered the United States_____

3. Date status was granted:_____

4. Date status expires:_____

5. CITIZEN STATUS:

This document appears valid and relates to a United States citizen.

6. SPECIAL BENEFIT PROVISIONS FOR CERTAIN VICITMS OF ABUSE:

a. This alien obtained Lawful Permanent (or Conditional) Resident Status as the spouse, child, or widow(er) of a U.S. citizen.

b. This alien obtained a Lawful Permanent (or Conditional) Resident Status as the spouse, child, or unmarried son or daughter of a lawful permanent resident alien.

c. This alien did not obtain status as described in (a) or (b).

TO BE COMPLETED BY INS

7. AFFIDAVIT OF SUPPORT:

a. This alien was sponsored on Form I-864. Affidavit of Support under Section 213A of the INA.
Service receipt date_____(Complete Item 3 on page 1.)

b. This alien was not sponsored on Form I-864.

Name of Sponsor	Name of Joint Sponsor(s) (*if any*)
Sponsor's Social Security Number ___ ___ ___-___ __-___ ___ ___ ___	Joint Sponsor's Social Security Number ___ ___ ___-___ __-___ ___ ___ ___
Sponsor's Address	Joint Sponsor Address
	See reverse for information on additional joint sponsor(s).

INS Stamp

- *This supplement may be used in conjunction with Form G-845 to request verification; it cannot be used alone. It reflects information that may be relevant to eligibility for Federal, State, and local public benefits under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, P.L. 104-193.*

Example 1

A family of three, the mother and two children, apply for TANF. The mother fails to cooperate, without good cause, and is ineligible to be included on the grant. The family resides in a Group I locality and has no countable income. The children are eligible for benefits and the grant is calculated as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

$**292.00**	SOA for 3 persons
-228.00	SOA for 2 persons
$ **64.00**	Amount of SOA reduction

Step (2) - Calculate 25% reduction:

.25 * **$292** = **$73.00**

Step (3) - Calculate additional penalty amount:

$ 73.00	25% reduction
- 64.00	SOA reduction
$ 9.00	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$228.00	SOA for 2 persons/Grant amount
- 9.00	Additional penalty
$219.00	Net payment

Example 2

A family residing in Group II has been receiving benefits in the amount of **$254** for two persons (the mother and one child). The mother is determined not to be cooperating, without good cause, and must be removed from the grant. The calculation of the new grant amount is as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

$254.00	SOA for 2 persons
-173.00	SOA for 1 person
$ 81.00	Amount of SOA reduction

Step (2) - Calculate 25% reduction:

.25 * **$254** = **$63.50**

Example 2 - Continued

Step (3) - Calculate additional penalty amount:

$ **63.55**	25% reduction
- 81.00	SOA reduction
$ 0.00	Additional penalty amount

Step (4) - Net payment calculation:

$173.00	SOA for 1 person/Grant amount
- 00.00	Additional penalty
$173.00	Net payment

Example 3

A family residing in Group III is composed of the mother and her four children. The mother receives $120 monthly in countable unearned income. TANF benefits are currently **$389** (**$537** SOA - $120 income). The mother is determined not to be cooperating, without good cause, and must be removed from the grant.

Step (1) - Calculate reduction by removing caretaker's needs:

$537.00 (**$537.00** SOA for 5 persons - $120.00 Countable income)
-451.00 (**$451.00** SOA for 4 persons - $120.00 Countable income)
$ 86.00

Step (2) - Calculate 25% reduction:

.25 * **$537** = **$134.25**

Step (3) - Calculate additional penalty amount:

$134.25	25% reduction
- 86.00	SOA reduction
$ 48.25	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$451.00	SOA for 4 persons
-120.00	Countable income
$331.00	Grant amount

$331.00	Grant amount
- 48.25	Additional penalty
$282.75	Net payment

Example 4

A family residing in Group III is composed of the mother, father, and their three children. A child by a previous relationship of the mother enters the home. The mother does not cooperate, without good cause, in providing information about the child's father. The child's needs are added to the grant; however, the mother's needs must be removed. Calculation of the revised benefits is as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

$570.00	Maximum payment - SOA for 6 persons exceeds maximum
-537.00	SOA for 5 persons
$ 33.00	Amount of SOA reduction

Step (2) - Calculate 25% reduction:

.25 * **$570**= **$142.50**

Step (3) - Calculate additional penalty amount:

$142.50	25% reduction
- 33.00	SOA reduction
$109.50	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$537.00	SOA for 5 persons/Grant amount
-109.50	Additional penalty
$427.50	Net payment

Example 5

A family consists of the mother and two children. Assistance is being provided only for the children because the mother has failed to apply for or furnish a Social Security number for herself. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. The family resides in a Group I locality and has no countable income. Calculate the revised grant amount as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

This step is not applicable since the mother's needs have already been removed from the grant for failure to comply in meeting the SSN requirement.

$228.00 SOA for 2 persons

Example 5 - Continued

Step (2) - Calculate 25% reduction:

.25 * **$228** = **$57.00**

Step (3) - Calculate additional penalty amount:

$ 57.00	25% reduction
- 0.00	SOA reduction
$ 57.00	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$228.00	SOA for 2 persons/Grant amount
- 57.00	Additional penalty
$171.00	Net payment

If the caretaker provides her SSN while she is still being sanctioned for noncooperation with DCSE, the grant amount must be recalculated as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

$292.00	SOA for 3 persons
-228.00	SOA for 2 persons
$ 64.00	Amount of SOA reduction

Step (2) - Calculate 25% reduction:

.25 * **$292**= **$73.00**

Step (3) - Calculate additional penalty amount:

$ 73.00	25% reduction
- 64.00	Amount of SOA reduction
$ 9.00	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$228.00	SOA for 2 persons/Grant amount
- 9.00	Additional penalty
$218.00	Net payment

Example 6

A mother residing in a Group II locality receives TANF for one child. The mother's needs are not included on the grant since she receives SSI. There is no countable income. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. Calculate the revised grant amount as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

This step is not applicable since the mother is categorically ineligible to receive benefits for herself while receiving SSI.

$173.00 SOA for 1 person

Step (2) - Calculate 25% reduction:

.25 * **$173** = **$43.25**

Step (3) - Calculate additional penalty amount:

$ 43.25	25% reduction
- 0.00	SOA reduction
$ 43.25	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$173.00	SOA for 1 person/Grant amount
- 43.25	Additional penalty
$129.75	Net payment

Example 7

A mother residing in a Group I locality receives TANF for herself and seven children. There is no countable income. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. Calculate the revised grant amount as follows:

Step (1) - Calculate reduction by removing caretaker's needs:

$443.00 SOA for 8 persons

$443.00 SOA for 7 persons

Because the SOA's are above the maximum payment amount of **$443**, there is no reduction when the caretaker is removed.

Step (2) - Calculate 25% reduction:

.25 * **$443** = **$110.75**

Example 7 - Continued

Step (3) - Calculate additional penalty amount:

$110.75	25% reduction
- .0.00	SOA reduction
$110.75	Additional penalty amount (Enter on AP)

Step (4) - Net payment calculation:

$443.00	SOA for 7 persons ($472) exceeds maximum. Use maximum.
-110.75	Additional penalty
$332.25	Net payment

203.1 CONDITIONS OF ELIGIBILITY - Under certain conditions, emergency assistance **may be provided** to needy families with children. When all of the following conditions exist, EA must be granted immediately.

A. The family includes at least one child who is under eighteen years or if 18 but not yet 19 is enrolled full time in a secondary school or vocational/technical school equivalency from which the child is expected to graduate prior to attaining age 19.

B. The child is a resident of Virginia, as defined in Section 201.6.

C. The child, and all members of his family for whom assistance is provided must be a citizen of the United States or, if an alien, meet requirements, specified in Section 201.7.

D. The child is living with a relative in a place of residence maintained by the relative as his own home. (See Section 201.5 B.)

E. The emergency assistance is necessary (1) to avoid destitution of the child or (2) to provide living arrangements for him in a home (203.2).

F. The child's need is the result of a disaster or a fire which has destroyed items necessary for maintaining the household or the home itself. The emergency must have occurred within a period not to exceed one month prior to application or in the event of hospitalization of the specified relative(s) within 30 days of the emergency, application must be made within a period not to exceed two months.

G. For current **TANF** recipients, needs can be met through EA in addition to the regular assistance payment. The EA payment does not affect the regular **TANF** money payment. An EA payment may not be issued, however, to replace money lost by the recipient or for the loss of earnings.

203.2 EMERGENCY ASSISTANCE FOR DISASTER OR FIRE

A. NEEDS COVERED - Emergency Assistance shall be used as indicated below to cover **the immediate** needs **of the applicant** resulting from the specific type of emergency. Evidence that the emergency occurred and the date of the emergency must be entered in the case record.

The total amount granted to a family under the EA Program shall not exceed $500.00 during any one period of thirty (30) consecutive days in any twelve (12) consecutive months.

Standards of assistance, as specified in Section 304 are not applicable. Emergency Assistance can be used to provide items **such** as food, shelter items, clothing, repair or replacement of household equipment which has been destroyed or rendered unusable, **and** moving or storage of household equipment.

B. AVAILABLE RESOURCES - Emergency Assistance cannot be granted when other resources are available to meet the family's needs. EA cannot be granted when there is another agency in the community, **insurance policies, or other immediate resources** which **are** known to meet the particular need promptly in that particular type of emergency. **If other resources are available but are insufficient to meet the particular immediate needs, EA may be granted.** Evidence must be entered in the case record that specific community resources have been investigated.

Example: On May 2, a TANF household experiences an emergency as a result of a fire. The household sought emergency housing and other necessary items. An application was submitted for the emergency assistance program. The emergency needs of $500 exceeded the amount of $300, which was provided by community resources. EA of $200 was granted to supplement the community resources.

Income immediately available to the family, **such as cash on hand or money in the bank at the time of application,** must be **evaluated** in determining the amount of assistance granted. **Note: Anticipated wages must be evaluated even though they may not be available to meet the emergency need.** The provisions of Section 305 are generally applicable except that income disregards are not applicable.

C. METHOD OF PAYMENT - Payment for purchase, repair, moving or storage of household equipment must be made by the vendor method to the provider of goods or services.

Payment to meet other needs may be either a money payment to the recipient or a vendor payment to the provider, whichever is most practicable and advantageous to the family.

203.3 AUTHORIZATION FOR TANF-EA - Emergency Assistance must be authorized during a period not to exceed thirty consecutive days within any twelve consecutive months. This thirty-day period begins with the date of the first authorization of payment by agency action. Payment may cover specified needs arising prior to the date of authorization, retroactive to the date the emergency occurred, as specified in Section 203.1 **F**. Payment also covers needs anticipated during the thirty-day period following the initial authorization of emergency assistance, provided it is established that such need will continue to exist for that period.

If it is established at a later date within the thirty-day period that other allowable needs exist, additional payments may be authorized within the time limit up to the maximum specified in Section 203.2.

203.4 REFERRAL FOR SERVICE - In all cases in which EA is requested, referral must be made to staff or other appropriate agency for any other services that meet needs attributable to the emergency.

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301.1 GENERAL PROVISIONS - The Code of Virginia, Section 63.1-110, provides that the "The State Board shall adopt rules and regulations governing the amount of assistance persons shall receive under the provisions of this law. In making such rules and regulations, the Board shall give due consideration to significant differences in living costs in various counties and cities shall establish or approve such variations in monetary assistance standards for shelter allowance on a regional or local basis, as may be appropriate in order to achieve the highest practical degree of equity in public assistance grants.

The amount of assistance which any person shall receive under the provisions of this law shall be determined in accordance with rules and regulations made by the State Board with due regard to the property and income of the person and any support he receives from other sources, including that from persons legally responsible for his support, and the average cost of providing assistance statewide. It shall be sufficient, when added to all other income and support of the recipient (exclusive of that not to be taken into account as hereinafter provided), to provide such person with a reasonable subsistence."

302.1 DEFINITION OF THE TANF ASSISTANCE UNIT - The TANF assistance unit is composed of the individual or individuals who meet all categorical requirements and conditions of eligibility. The assistance payment will include the needs of all such individuals.

302.2 DEFINITION OF CARETAKER - In TANF the caretaker is the natural or adoptive parent or other relative of specified degree who is responsible for supervision and care of the needy child(ren).

There will be one caretaker included in an assistance unit, except when:

1. the natural or adoptive parent **who is incapacitated** has remarried, the spouse may be included; or

2. the household consists of a married couple who each have a child(ren) of their own; or

3. policy in Section 302.7 A. regarding minor parents requires more than one caretaker; or

4. both natural or adoptive parents of at least one child are living in the home and the family is in financial need.

In situations where both parents are in the home and one parent is a convicted offender allowed to live at home, the other parent in the home will be designated as the only caretaker. The convicted offender can only be included as an EWB if providing an essential service. See Section 302.5.

302.3 DEFINITION OF PAYEE - In TANF, the payee is the parent or other relative of specified degree who is responsible for supervision and care of the needy child(ren) but who is <u>not</u> included in the assistance unit. A relative of specified degree would be a payee unless he/she meets the criteria in 302.6.E.

In situations where the parent of the eligible child(ren) is in the home and included in the assistance unit, another specified relative may be designated as the payee for the case if the local agency has determined that the relative, not the parent, is exercising primary responsibility for the care and control of the child(ren). (Refer to Section 502.4.A.1.c. concerning designation of payees.) In such situations, the relative may be included in the assistance unit only if he/she meets the requirements of an essential person (EWB) listed in Section 302.5.

302.4 DEFINITION OF SIBLINGS - In TANF, siblings are two or more children with at least one natural or adoptive parent in common.

302.5 PERSONS ESSENTIAL TO WELL-BEING (EWB) - Needy individuals living in the home who are providing services which are essential to the well-being of the child(ren) on which TANF eligibility is based can be included in the assistance unit. Such individuals must be ineligible for assistance in a federal category in their own right.

A. Services which are considered essential are limited to:

1. The provision of child care which enables the caretaker to work on a full-time basis outside the home;

2. Care for an incapacitated family member in the home;

3. The provision of child care which enables the caretaker relative to receive training full-time;

4. The provision of child care which enables the caretaker to attend high school (or GED classes) full-time; and

5. The provision of child care for a period not to exceed two payment months to enable the caretaker to participate in employment search or other ESP component. *

For the purpose of items 1, 3, and 4, full-time is defined as 30 hours or more per week or 120 hours or more per month. Additionally, for the purpose of item 2, the incapacity must be supported by medical evidence that the family member has a physical or mental impairment that reduces substantially or eliminates his ability to support or care for himself; the impairment must be expected to last for a period of at least 30 days. Eligibility for SSI or SSA disability benefits on the basis of the individual's incapacity is also acceptable proof of the incapacity.

B. Each case in which an applicant/recipient requests inclusion of an EWB must be reviewed and approved by the Eligibility Supervisor prior to such inclusion to ensure that the individual designated to be the EWB is providing an essential service identified. The supervisor must sign the Worker's Evaluation of Eligibility-Aid to Dependent Children approving inclusion of the EWB.

C. Eligibility for individuals for whom the client requests inclusion as EWB must be evaluated per Section 302.6.F.

* 45 CFR 233.20(a)(2)(vii)

302.6 Composition of the TANF Assistance Unit - The TANF assistance unit is required to include, when living together, the parent(s) and minor sibling(s) of a dependent child for whom assistance is requested. Therefore, each sibling living in the home of a dependent child must be evaluated to determine if he/she meets the categorical requirements listed in Section 201.1.A. This includes any sibling living in the home with both natural or adoptive parents who are also living in the home.

The assistance unit will include the following individuals:

A. The natural or adoptive parent(s) who is living in the same home as the child for whom assistance is requested, unless otherwise indicated by policy in 302.6.D.*

B. All blood related or adoptive siblings, including those emancipated by court order or marriage, who meet the categorical requirements of an eligible child, living in the same home as the child for whom assistance is requested.** Note: The spouse of the child emancipated by marriage cannot be living in the home for eligibility to exist.

Children who meet the categorical requirements must also meet all conditions of eligibility set forth in Section 201.1 B. in order for their needs to be included in the assistance payment. If the conditions of eligibility are not met, the child's needs will be excluded, however, any income of that child will be considered available to the remaining assistance unit members.

If categorical requirements cannot be established due to lack of verifications or the conditions of eligibility are not met, the individual will be assumed to be a required member of the assistance unit and the following will apply:

1. In determining need and the amount of payment for the assistance unit such individuals will be excluded.

2. Income of these individuals will be considered available to the assistance unit.

3. If verifications are subsequently provided which establish that the child is not categorically eligible, income of that child will no longer be considered available.

   If verifications are subsequently provided which establish the child's categorical eligibility, his income will continue to be counted, as indicated above in 1 and 2, until all conditions of eligibility are met.

* 45 CFR 206.10(a)(1)(vii)(A)
** 45 CFR 206.10(a)(1)(vii)(B)

When all categorical requirements and conditions of eligibility are met, the needs of that child will be included in the assistance unit. (Refer to Section 401.2.B.2.c.)

The caretaker/relative other than the parent may request exclusion from the assistance unit at any other time except when that person has received a lump sum. The caretaker/relative may request exclusion prior to actual receipt of the lump sum. See 305.4 C regarding treatment of a lump sum received by the caretaker/relative.

No person's needs will be included in more than one assistance unit, but a person receiving assistance under another program may be payee for person(s) receiving TANF. A person receiving TANF in one assistance unit as a caretaker may also be the payee for persons receiving TANF in another assistance unit. (See Section 401.1 for the requirements of a request for assistance.)

A recipient of SSI is not eligible for inclusion in the assistance unit. An SSI recipient is an individual who is entitled to SSI benefits regardless of whether the benefit is currently being received.

C. The following child(ren) is not to be included in the assistance unit.

1. A child who is receiving SSI;

2. A child who is an alien whose needs are met by an individual sponsor or who has been in the U.S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.*

3. Under the **VIEW** Program a child 16 to 18, out of school or enrolled in school part-time, who fails or refuses to participate without good cause must be excluded from the assistance unit unless otherwise exempt;

* 45 CFR 233.51

4. A child whose SSN has not been provided or application for an SSN has not been made. See 201.8 for the exception regarding a newborn child.

5. A child who receives an adoption assistance maintenance payment. Exception: A child who receives an adoption assistance maintenance payment must be excluded when adding that child to the assistance unit and counting the maintenance payment reduces the TANF benefit. However, that child must be included in the assistance unit when the benefit will be increased by adding that child and his income.*

6. A child who receives a foster care maintenance payment or whose needs are included in the foster care maintenance payment for his parent.*

7. A child whose citizenship or alien status has not been declared in writing according to Section 201.7 C.

8. A child subject to the family cap provision. (201.12)

9. A child not in compliance with the compulsory school attendance requirement. (201.3)

10. A child convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**

11. A child fleeing to avoid prosecution or confinement or in violation of probation or parole.**

12. A child who is in a VIEW period of ineligibility.

13. A child whose caretaker is in a period of ineligibility due to the receipt of a diversionary assistance payment.

D. The following parent(s) is not included in the assistance unit:

1. The parent(s), of an eligible TANF child(ren), who is receiving SSI and/or an Auxiliary Grant.

2. The parent who is not (1) a U. S. citizen or (2) an eligible alien.**

3. A parent who receives an adoption assistance maintenance payment on his own behalf up to age 21. Exception: A parent who receives an adoption assistance maintenance payment must be excluded when adding that parent to the assistance unit and counting the maintenance payment reduces the TANF benefit. However, that parent must be included in the assistance unit when the benefit will be increased by adding that parent and his income.*

* Public Law 101-508 (OBRA 1990)
** Public Law 104-193

4. The parent who refuses to cooperate in identifying the noncustodial parent, establishing paternity, **or** obtaining support by failing to comply with any of the requirements defined in 201.10.*** (See 502.7.A.2. regarding how to handle payment in this situation.) This exception applies until compliance with the requirements of cooperation in 201.10 is met.

5. The parent who is a foster care child.

6. The parent whose SSN has not been provided or application for an SSN has not been made.

7. The parent who is an alien whose needs are met by the individual sponsor.

8. The parent who is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.*

9. The parent who is found to have committed an IPV and disqualified according to Section 102.3.

10. The parent whose citizenship or alien status has not been declared in writing according to Section 201.7.C.

11. The parent who is a convicted offender, serving a court-imposed sentence of unpaid public work, or unpaid community service during work hours, while still living in the home. (Exception: The convicted offender could be included only as an EWB if providing an essential service. See Section 302.5.)

12. The parent whose needs are met by her spouse, the stepparent of the eligible children, living in the home.

13. The minor parent not in compliance with the compulsory school attendance requirement in Section 201.3.

14. The parent convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or Food Stamps in two or more states and it is within ten years of the date the individual was convicted.**

15. The parent convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**

16. The parent that failed to report to the local agency in accordance with Section 401.2.B.2.a.3 after it became clear that the minor child would be absent from the home for 45 consecutive days.**

17. The parent that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.**

* 45 CFR 233.51
** Personal Responsibility and Work Opportunity Reconciliation Act of 1996

E. The following caretaker/relative other than the parent, who requests assistance is not included when:

1. He is not in need.

2. He is receiving SSI and/or an Auxiliary Grant.

3. He is not (1) a U. S. citizen or (2) an eligible alien.*

4. His needs are met by a spouse living in the home.

5. He refuses to cooperate in identifying the parents, establishing paternity, or obtaining support by failing to comply with any of the requirements defined in 201.10. (See 502.7 A.2. regarding how to handle payment in this situation.) This exception applies until compliance with the requirements of cooperation of 201.10 is met.

6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4.C.)

7. The caretaker/relative's SSN has not been provided or application for an SSN has not been provided.

8. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.**

9. He is found to have committed an IPV and is disqualified according to Section 102.3.

10. His citizenship or alien status has not been declared in writing according to Section 201.7 C.

11. The caretaker/relative is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or Food Stamps in two or more states and it is within ten years of the date the individual was convicted.*

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* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 233.51

12. The caretaker/relative is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*

13. The caretaker/relative failed to report to the local agency by the end of the fifth day after it became clear that the minor child would be absent from the home for 45 consecutive days.*

14. The caretaker/relative that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.*

Note: The spouse of the caretaker/relative cannot be included in the assistance unit as second caretaker.

F. The following individuals for whom assistance is requested on the basis of providing services essential to the child's well-being (EWB) are not included when:

1. He is not providing a service identified in Section 302.5.

2. He is not in need.

3. He is receiving SSI and/or an Auxiliary Grant.

4. He is not (1) a U. S. citizen or (2) an eligible alien.*

5. The EWB's SSN has not been provided or application has not been made for such SSN.**

6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4 C)

7. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.***

8. He is eligible for assistance in a federal category.

9. He is found to have committed an IPV and is disqualified according to Section 102.3.

10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.

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* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 205.52
*** 45 CFR 233.51

11. He is not in compliance with the compulsory school attendance requirement. Refer to Section 201.3.

12. The EWB is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or Food Stamps in two or more states and it is within ten years of the date the individual was convicted.*

13. The EWB is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*

14. The EWB is fleeing to avoid prosecution or confinement or is in violation of probation or parole.*

G. In Emergency Assistance - The assistance unit includes:

1. In cases of natural disaster or fire any member of the child's family living in the home and other nonrelated member of the household.

2. In cases of total loss of earnings, those persons who are living in the home related to the child by birth, marriage, or adoption, provided they meet the citizenship or alienage requirements.

302.7 FORMING THE COMPLEX ASSISTANCE UNIT - The most common type of assistance unit consists of one caretaker-relative and child(ren) living in a household. The following guidelines have been established to aid in determining who shall be included in an assistance unit when the household contains complex family situations:

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996

A. Minor Parent Situations When Living With a Senior Parent(s) - A minor parent is an individual under 18 years of age who is the natural parent of a child(ren). A senior parent is a parent of the minor parent. When assistance is requested for a minor parent and/or the minor's child, the following apply:

1. A minor parent will receive assistance in her own right when her siblings have not applied for nor are receiving assistance as eligible children.

2. When assistance is requested or being received by the siblings of a minor parent, the senior parent(s), minor parent, and siblings of the minor parent will be included in one unit, including the minor parent's child if assistance is requested for the child.

   a. Include the minor parent as a caretaker unless her parent is providing care and control for both herself and her child, in which case, she must be included as an eligible child.

   b. See Section 201.10 and 201.10.C.2 regarding cooperation with DCSE, and Section 901.2 regarding the VIEW exemption criteria for individuals providing care for a child under 18 months of age and individuals under age **18**.

3. When the senior parent applies for assistance for the minor parent and the grandchild or the grandchild only, and no other siblings of the minor parent are receiving or requesting assistance, the assistance unit will consist of the minor parent and the minor's child. The case must be closed effective the month following the month the minor parent turns 18. (Exception: If the minor parent turns 18 on the first of the month the case must be closed for the birthday month.) The 18 year-old may reapply.

4. When a minor parent and her child live with only one parent and assistance is requested for all, (no eligible siblings of the minor parent are in the home), apply the following:

   a. If the minor parent is providing care and control for the child, the assistance unit will consist of the minor parent and her child. The senior parent can only be included as EWB per Section 302.5.

   b. If the senior parent is providing care and control for the grandchild only, the assistance unit will include the senior parent, the minor parent, and the minor's child. In this situation, the minor parent would be considered a caretaker. The senior parent would also be included as a caretaker.

c. If the agency determines that the senior parent is providing care and control for both the minor parent and the minor parent's child, the assistance unit will be comprised of the senior parent, minor parent, and the minor parent's child. The minor parent will be treated as an eligible child, provided all categorical requirements are met. If categorical requirements are not met, she must be included as a caretaker. The senior parent will be included as a caretaker.

d. See Section 201.10 **and 201.10.C.2** regarding cooperation with DCSE, **Section 901.2 regarding the VIEW exemption criterion of caring for a child under 18 months of age and** Section 401.1D regarding who must complete the application when this situation exists.

5. When a minor parent and her child live with both parents (no eligible siblings of the minor parent are in the home) of the minor parent, the assistance unit will consist of the minor parent as caretaker and her child. If the senior parents request assistance, the assistance unit will be comprised of the minor parent, her parents, and the minor parent's child. The minor parent would be considered an eligible child, regardless of who is providing care and control of the grandchild.

6. When a minor parent and her child live with a relative of specified degree other than a parent and assistance is requested for the minor parent's child, the assistance unit will consist of the minor parent and the minor parent's child. The relative may be included only as an EWB if assistance is requested. If the relative requests assistance for the minor parent's siblings, this request will be handled as a separate unit.

In the event of conflicting statements concerning who provides care and control, the agency is responsible for making a decision as to whether the minor parent or senior parent is ultimately responsible for the child. The basis for this decision must be clearly documented.

B. Households with Multiple Groups of Children - A group of children can be a single child, or natural or adoptive siblings, or other children in a household whose relationship to the applicant is other than son or daughter. When the household consists of more than one group of children the determination of which children will comprise one assistance unit is based on legal responsibility. Children for whom the applicant has legal responsibility will make up one assistance unit. (Exception: When the minor parent, senior parent, and her child receive assistance as one unit.) All other children in the home for whom assistance is requested will make up a second assistance unit. A natural or adoptive parent is the only person who has legal responsibility for a child.

When the household consists of a married couple who each have a child(ren) of their own by a previous relationship and both parents request assistance for their child(ren), there will be one assistance unit with two care-takers. In the event there is a child(ren) born to the union of this couple, that child(ren) must be included in the assistance unit.

When a household consists of a man and woman cohabiting, each who have a child(ren) by previous relationships, there will be two separate assistance units. Should they have a child together, for whom he acknowledges paternity, the child must be included in the assistance unit. The units must be merged as the new child is a sibling to both sets of children.

When the household consists of a caretaker, his/her child(ren), and a child who is biologically related to the caretaker but has been adopted by some-one other than the caretaker, there will be two separate assistance units. In order for the caretaker to receive assistance for the child who has been adopted, the child's adoptive parents cannot be in the home.

The requirement in 302.6 that all siblings of a child for whom assistance is requested must be included in the assistance unit applies to the multiple group households also.

EXAMPLE

A grandmother has two grandchildren who are siblings and a niece living with her. She states she needs assistance for one of the grandchildren; however, application must be made for both grandchildren and each evaluated for inclusion in the unit. If she requests assistance for the niece, the niece will be included in the same unit also, provided she meets the eligibility requirements. However, the niece is not required to be in the unit, unless assistance is requested for her.

302.8 DEFINITION OF THE STANDARD FILING UNIT - For purposes of ADAPT, the group of individuals whose income must be considered in determining the assistance unit's eligibility and grant amount is referred to as the standard filing unit. This includes children and parents required to be in the assistance unit; essential persons; individuals whose income is subject to deeming; and, when assistance is requested, a caretaker-relative other than the parent.

303 – RESOURCES AFFECTING ELIGIBILITY – Repealed effective December 1, 2003.

304.1 STANDARDS OF ASSISTANCE - The State Board has established standards of assistance*, based on the size of the assistance unit, to be used in **TANF cash** payment cases. The standards established cover all allowable maintenance needs (food, including special diet; clothing; personal care; household supplies and equipment; insurance; school supplies and expenses; laundry; utilities, including telephone; housekeeping and personal services; obligations incurred within the month of application; guardianship fees; and the average shelter cost, including rent or housepayments, taxes, fire or comprehensive insurance, repairs, installations, water, sewage and trash disposal, appropriate to the locality in which the assistance unit resides) which are consolidated as specific dollar amounts representing the requirements of assistance units according to size. There is no specified amount identified for any particular item and the client is responsible for budgeting the amount received among the various needs of the assistance unit.

Because of wide variation in shelter cost within the State, three groups of standards have been established reflecting this variation. Appendix 1 to Section 304 lists the localities in the State according to the group in which they fall.

The monthly standards of **need**, based on the number of eligible persons in the assistance unit and the locality group in which the assistance unit resides, are shown in Appendix 2 to Section 304.

The State Board has approved, for purposes of reimbursement to localities, a ratable reduction in the standards of **need,** Appendix 2 to Section 304, shows the proportionately reduced standards of assistance which are currently reimbursable statewide.

Any locality wishing to meet up to the full standard **of need** may do so, provided the additional cost is paid from local funds and the percentage met is used in all **TANF** cases in the locality. No locality may grant assistance in excess of the full standard **of need**.

The appropriate standard of assistance, less all countable income of the assistance unit, as specified in Section 305, is the amount of the monthly **cash** payment for an otherwise eligible assistance unit, except that the State Board has established a maximum payment. The maximum reimbursable payment for each locality group is shown in Appendix 2 to Section 304. Any locality wishing to meet the full budgetary deficiency, when this is in excess of the maximum reimbursable payment, may do so provided (a) the deficiency is computed on the basis of established standards, (b) the excess is paid from local funds and (c) the full deficiency is met in all **TANF** cases in the locality.

* Code of Virginia, Section 63.1-110

304.2 TOTAL ALLOWABLE INDIVIDUAL NEED - When it is necessary to determine whether one individual included in the TANF assistance unit is in need, the total amount allowed for his needs must be identified. This amount is his pro rata share of the appropriate standard of assistance for the assistance unit. The same procedure is used to determine whether or not a caretaker-relative other than the parent or an essential (EWB) person living in the home is in need and eligible for inclusion in the assistance unit. Once the caretaker-relative other than the parent is included in the assistance unit, he may volunteer to participate in VIEW and continue to be eligible for TANF if countable income is less than the current poverty level for one person.

When an individual is removed from the assistance unit, the assistance plan is recomputed on the basis of the standard of assistance specified for the number of persons remaining in the unit.

304.3 MEDICAL EXAMS FOR TANF RECIPIENTS – Medical exams necessary to determine exemption status for VIEW or assess a VIEW participant's abilities, that are not covered by Medicaid, are paid from VIEW funds.

The worker and client must discuss which doctor should complete the medical evaluation. The final decision should be made by the recipient. The agency will pay for only one medical exam.

304.4 – TANF MATCH PAYMENTS (TMP) – The 2002 Virginia Acts of Assembly mandates, effective July 1, 2003, that all recipients of TANF cash assistance, including recipients whose deficit is less than $10, be paid a monthly TANF supplement in an amount equal to the current child support collected by the Division of Child Support Enforcement, less the disregard of the first $50 of current child support received by the assistance unit.

Match payments are defined as current child support paid on behalf of a case, less $50. The Match payments are issued in the second month following receipt and are issued with the TANF benefits as a single payment. Payments will be issued even though the combined total of the TANF deficit and TMP total less than $10.

The TMP is added to the TANF cash benefit after all eligibility and benefit transactions have been completed in ADAPT, i.e., imposition of disregards, penalties, and recoupment have been calculated. Since the match payments are a portion of the unit's monthly assistance payment, policies governing assistance payments must be applied, i.e., notices and fair hearings, **with the exception of continuation of benefits.**

TANF Match Payments will be issued during months of suspension and during VIEW sanctioned months. The issuance of TMPs to a recipient receiving continued benefits during the appeal process is contingent upon collection of current child support by DCSE two months prior to the payment month.

Since TMP payments are paid two months after collection of support, the case may receive payments for up to two months after case closure. These payments are automatically generated in ADAPT and mailed from the State Department of Social Services.

If the TANF benefit, including the TMP, exceeds the maximum reimbursable payment for the assistance unit, the maximum will not apply and the full amount of the combined payment will be issued.

Information on TMPs is passed to ADAPT each month, based on the amount of current child support paid two months prior to the payment month on behalf of assistance unit members. If current support paid in a month is $50 or less, no match payment will be included in the TANF check. A TMP change notice will be sent by the State Department of Social Services to affected TANF cases each month, indicating the Match Payment amount to be paid on the first of the following month.

GROUPING OF LOCALITIES

GROUP I

Counties

Accomack
Alleghany
Amelia
Amherst
Appomattox
Bath
Bedford
Bland
Botetourt
Brunswick
Buchanan
Buckingham
Campbell
Caroline
Carroll
Charles City
Charlotte
Clarke
Craig
Culpeper
Cumberland
Dickenson
Dinwiddie
Essex
Fauquier
Floyd
Fluvanna
Franklin
Frederick
Giles
Gloucester
Goochland
Grayson
Greene
Greensville
Halifax
Hanover
Henry
Highland
Isle of Wight
James City
King George
King & Queen
King William
Lancaster
Lee
Louisa
Lunenburg
Madison
Mathews
Mecklenburg
Middlesex
Nelson
New Kent
Northampton
Northumberland
Nottoway
Orange
Page
Patrick
Pittsylvania
Powhatan
Prince Edward
Prince George
Pulaski
Rappahannock
Richmond County
Rockbridge
Russell
Scott
Shenandoah
Smyth
Southampton
Spotsylvania
Stafford
Surry
Sussex
Tazewell
Washington
Westmoreland
Wise
Wythe

Cities

Bristol
Buena Vista
Clifton Forge
Danville
Emporia
Franklin
Galax
Norton
Suffolk

GROUP II

Counties

Albemarle
Chesterfield
Henrico
Loudoun
Roanoke
Rockingham
Warren

Cities

Chesapeake
Covington
Harrisonburg
Hopewell
Lexington
Lynchburg
Martinsville
Newport News
Norfolk
Petersburg
Portsmouth
Radford
Richmond
Roanoke
Virginia Beach
Williamsburg
Winchester

GROUP III

Counties

Arlington
Augusta
Fairfax
Montgomery
Prince William
York

Cities

Alexandria
Charlottesville
Colonial Heights
Falls Church
Fredericksburg
Hampton
Manassas
Manassas Park
Poquoson
Staunton
Waynesboro

NEED AND PAYMENT STANDARDS

GROUP I

Size of Assistance Unit	Standard of Need	Standard of Assistance
1	$ 146	**$ 144**
2	229	**228**
3	295	**292**
4	358	**354**
5	422	**418**
6	473	**470**
7	535	**530**
8	602	**595**
9	657	**650**
10	718	**712**
Each person above 10		**62**

MAXIMUM REIMBURSABLE PAYMENT $**443**

NEED AND PAYMENT STANDARDS

GROUP II

Size of Assistance Unit	Standard of Need	Standard of Assistance
1	$ 174	**$ 173**
2	257	**254**
3	322	**320**
4	386	**382**
5	457	**451**
6	509	**504**
7	570	**563**
8	636	**629**
9	692	**685**
10	754	**746**
Each person above 10		**62**

MAXIMUM REIMBURSABLE PAYMENT $4**79**

NEED AND PAYMENT STANDARDS

GROUP III

Size of Assistance Unit	Standard of Need	Standard of Assistance
1	$ 243	**$ 242**
2	327	**323**
3	393	**389**
4	457	**451**
5	542	**537**
6	593	**587**
7	655	**649**
8	721	**715**
9	779	**771**
10	838	**831**
Each person above 10		**62**

MAXIMUM REIMBURSABLE PAYMENT $**570**

305.1 INCOME ELIGIBILITY

In order to meet the income requirements for the **TANF** Program, the assistance unit's countable income must be screened at 185% **of the standard of need,** and **the standard of assistance** (prospective determination) to determine the assistance unit's need. Once the assistance unit is determined to be in need, the eligibility worker must calculate the **TANF** payment to determine if eligibility exists for the assistance unit. In screening countable income at 185% and **the standard of assistance** in the prospective determination and in calculating the amount of the **TANF** payment, anticipated income arrived at by one of the method's listed in Section 305.1.B.2.a. is to be used.

A. Prospective Determinations (Screening at 185% and **Standard of Assistance**)

Income eligibility for all cases is based on a prospective determination which anticipates the total gross countable income of the assistance unit. The total gross countable income of the unit is screened at 185% of the standard of need. (Refer to Maximum Income Chart, Appendix 1 to Section 305.) If the income of the assistance unit is equal to or less than the maximum income level, income is then screened at **the standard of assistance** allowing income disregards, when appropriate.

A prospective determination must be conducted on applications/reapplications and ongoing cases whenever a change becomes known to the agency.

The gross income anticipated to be received during the month following the month the change became known to the agency must be screened at both 185% and **the standard of assistance** to determine if eligibility for the next payment exists. If the prospective determination of anticipated income represents less/more than a full month's income, the second month following the month the change became known to the agency must also be screened prospectively at both 185% and **the standard of assistance**.

1. 185% Screening

Total gross countable income for this purpose includes all gross earned income of both adults and children in the unit; unearned income, such as net countable support, benefits, etc.; income of an excluded individual required to be in the unit; and any income deemed available to the assistance unit. The following income is disregarded when income is screened at 185%:

a. all income specifically disregarded in 305.4.A;

b. the earned income of an individual which is funded by the Workforce Investment Act of 1998 (WIA);

c. for TANF-UP, unemployment compensation benefits;

d. lump sum payments per 305.4.C;

e. the earned income of a child that is a full or part-time student.

If the income of the assistance unit exceeds 185%, the case is ineligible for a payment.*

2. Screening at the Standard of Assistance

The following procedures are applicable to the standard of assistance screening:

a. Applications, Including Persons Being Added to An Existing Assistance Unit

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of need, income must then be screened at the standard of assistance allowing earned income disregards where applicable.

b. All AUs will be allowed the following deductions from earned income:

(1) The standard deduction**, the same amount used in the standard deduction for the Food Stamp program, and 20% of the remainder is deducted from the gross earnings.*** (Refer to Appendix 3 to Section 305, Step 2 and Section 305.3.B.7.)

Assistance Unit	Standard Deduction
1-4 members	$134
5 members	**$157**
6 or more members	**$179**

c. Ongoing Cases

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of need, income must then be screened at the standard of assistance allowing earned income disregards where applicable.

d. The following income is disregarded when income is screened at at the standard of assistance:

1) all income specifically disregarded in 305.4.A;

* 45 CFR 233.20(a)(3)(xiii)
** 22 VAC 40-295-60
*** 22 VAC 40-295-60

2) the earned income of an **individual which is funded by the Workforce Investment Act of 1998 (WIA)**;

3) lump sum payments per 305.4.C.

4) the earned income of a child that is a full or part-time student.

If the assistance unit has income below the standard of assistance, the payment is calculated based on prospective budgeting.

B. Prospective Budgeting*

1. Budgeting Concept

In order to be eligible for TANF, a case must be eligible under income requirements. The amount of the payment which an assistance unit is eligible to receive will be calculated based on prospective budgeting.

Prospective budgeting is calculating the TANF payment using the anticipated income of the members of the assistance unit and the excluded persons required to be included in the assistance unit in the budget month. For purposes of determining the amount of the TANF payment and the amount of income to be counted, the payment month and budget month are the same.*

2. Income To Be Counted In Calculating the Payment

The payment is to be calculated using the methods listed below. The assistance unit's circumstances must be evaluated to determine which method(s) will provide the amount of income anticipated (best estimate) to be received in the payment month.

For purposes of determining the amount of income to be counted in calculating the payment, anticipated income means any income the applicant/recipient and local agency are reasonably certain will be received during the payment month. If the amount of income or when it will be received is uncertain, that portion of the assistance unit's income that is uncertain shall not be counted by the local agency.

"Reasonably certain" means that the following information is known:

- who the income will come from,
- in what month it will be received, and
- how much it will be (i.e., rate, frequency and payment cycle).

* 45 CFR 233.33

a. Methods Used To Anticipate the Income

For applications and reapplications, the income generally to be counted is the income verified for the calendar month prior to the month of application. For redeterminations, the income generally to be counted is the income verified for the month prior to the month of review. However, if the income for the prior month is not the amount anticipated to be received in the payment month, the Eligibility Worker must work with the assistance unit to determine how the correct amount can be anticipated. For changes, the Eligibility Worker must work with the assistance unit to determine the correct amount of income that can be anticipated for the payment month.

The following methods are to be used to anticipate the assistance unit's income when the prior month's income does not reflect the income anticipated for the payment month:

1) The Eligibility Worker shall take into account the income already received by the assistance unit during the application process and any anticipated income the assistance unit and local agency are reasonably certain will be received during the payment month. During the approval process, when calculating the grant amount for prior months, the Eligibility Worker shall use converted income which has been received by the assistance unit, to determine the correct amount of the grant, unless the income is for a partial month. If the household received less than a full month's pay, or if less than a full month's pay is to be counted, the exact amount of income is to be used.

2) If income fluctuates so much that the prior calendar month cannot by itself provide an accurate indication of anticipated income, a longer period of past time may be used if it will provide a more accurate indication of fluctuations in future income. If income is ongoing, anticipate by averaging income from the past pay periods.

   The Eligibility Worker may average income received in any number of pay periods immediately prior to application/review, using pay periods still appropriate to the customer's circumstances. The worker should select only the pay periods that will yield the most realistic estimate of income to be received.

If the assistance unit's income fluctuates seasonally, it may be appropriate to use the most recent season, rather than the calendar month prior to the month of application, as an indicator of future income. However, the Eligibility Worker should use caution in using income from a past season as an indicator of income now, since in many cases of seasonally fluctuating in-come, the income also fluctuates from one season in one year to the same season in the next year.

3) For migrant and seasonal farm worker assistance units, the judgment of the Eligibility Worker that income is reasonably certain to be received is to be based on formal or informal commitments for work for individual assistance units, rather than on the general availability of work in an area. Also, income should not be based on an assumption of optimum weather or field conditions.

4) Profit from the sale of livestock or cash crops, such as tobacco or peanuts, or from small businesses, such as but not limited to, vending stands, home beauty shops, or small grocery stores, is prorated on an annual basis or over the number of months in which the income is earned, whichever is appropriate. Federal farm subsidies are prorated over a 12-month period.

   Guaranteed salaries paid under contract will be prorated over the period of the contract even though the employee elects to receive such payments in fewer months than are covered by the contract. When the contract earnings will be received monthly over a period longer than that of the contract, the earnings must be prorated over the number of months the income is anticipated to be received. Contract earnings are defined in 305.3.

   Examples:

   (a) A contract period is September 1993 - August 1994 (12 months). The customer chooses to receive the contract income over a 10-month period. The contract amount is divided by the contract period of 12 months to arrive at the monthly gross income.

   (b) A contract period is November 1993 - June 1994 (8 months). The customer chooses to receive the contract income over the eight-month period. The contract amount is divided by eight months to arrive at the monthly gross income.

   (c) A contract period is September 1993 - August 1994 (12 months). The customer receives the contract income over the 12-month period. The contract amount is divided by 12 months to arrive at the monthly gross income.

(d) A contract period is September 1993 - January 1994 (5 months). The customer receives the contract income monthly over a 12-month period. The contract amount is divided by the number of months in which the income is received (12).

In those cases where a contract specifies a set amount over the contract period, plus additional monies of an uncertain amount if additional work is available and done, only the base contract is prorated. Additional monies earned over and above the base contract are counted as income when they can be anticipated.

In those cases where a contract calls for no pay for those days not worked, the salary for those days should not be counted if it can be anticipated at the time that the prospective determination is made that certain days will be missed. Otherwise, the income calculation is to be based on the maximum salary. The client may then inform the local agency as days are missed. If the client reports a decrease in income within the month of the decrease, a supplemental payment is to be issued.

If the contract amount changes during the contract period, adjust the remaining months of the contract period. To determine the new monthly income amount, divide the new contract amount by the number of months used in the original calculation.

Example 1: A school bus driver's contract states that she will receive $1250 for the year, but that she will not be paid for days the school is closed or for days she is sick. When she applies on February 10, she has already missed three days for snow in the contract year and she was sick for two days. The contract reads that $10 will be deducted for each day not worked. The case is approved with income of $100 per month.

(1250 - 50 = 1200 1200 / 12 = $100)

Example 2: On April 5 the client reports that she missed April 3 and 4, which were not anticipated at the time of approval. The worker issues a $20 supplement for April.

Example 3: On December 11, the school bus driver reports that her contract will be increased by 10% effective January 1. The prospective income is recalculated for January's grant using the increased figure of $110. (1,200 X 1.1 = $1,320 $1,320 / 12 = $110)

b. How To Calculate the Monthly Amount

1) Whenever income is anticipated for each pay period in a given month, and is received on a weekly or bi-weekly basis, the Eligibility Worker shall convert the income to a monthly amount by:

(a) multiplying average weekly amounts by 4.3 and average bi-weekly amounts by 2.15; or,

Example 1:

The client's weekly pay for the prior month was:

$220.40
$175.80
$210.00
$195.70

To obtain a monthly amount, the Eligibility Worker multiplies the weekly average by 4.3.

$801.90 (total of the pay stubs) divided by 4 (number of paystubs) equals $200.48.

$200.48 x 4.3 = $862.06 monthly income.

Example 2:

The client's bi-weekly pay for the prior month was:

$185.40
$209.50
$394.90

To obtain a monthly amount, the Eligibility Worker multiplies the bi-weekly average by 2.15.

$394.90 (total of the pay stubs) divided by 2 (number of pay stubs) equals $197.45.

$197.45 x 2.15 = $424.52 monthly income.

(b) using the exact monthly figure or an average per pay period times the actual number of pays if the assistance unit will receive less than a full month's pay. If actual income is used in any given calculation, it is the Eligibility Worker's responsibility to adjust the figure for subsequent months if the actual income varies.

Example:

The client's salary is $100 weekly. The pay does not vary. The client is paid every Friday.

The client reports she quit her job and will receive a final weekly paycheck on September 3. Since the client was paid for a partial month, the exact amount of $100 will be used.

Example:

The client reports she quit her job on June 21. She will receive a final bi-weekly paycheck on July 5.

For the month of May, she received $190 and $220 for a total of $410. This amount is divided by two (the number of pays) to determine the average bi-weekly pay of $205. $205 is used to calculate her July TANF payment.

2) Assistance units receiving monthly or semi-monthly income, such as state or federal payments or semi-monthly pay checks, must have the income assigned to the normal month of receipt, even if mailing cycles, weekends or holidays cause the income to be received in a different month.

For example, the applicant/recipient is employed and is paid semi-monthly on the first and sixteenth. Because June 1 falls on a Saturday, the client receives her June 1 paycheck on May 31. The Eligibility Worker will count the paycheck received May 31 as income for June.

3) For the on-line systems used to verify child support or unemployment benefits, mailing and processing days must be added to the payment dates shown to properly reflect the period of receipt for TANF purposes. Checks are prepared and mailed on the business day following the APECS disbursement date or the VEC warrant date. Two mail days must be allowed to determine the payment date and month of receipt. For support payments that are directly deposited in a bank account, the bank statement should be used to determine the payment date and month of receipt.

Once the income has been verified, the payment is then calculated based on the anticipated income. (Refer to Appendix 3 to Section 305, Steps 3 and 4.) Ongoing payments will continue in the same amount until a change is reported or becomes known to the agency.

The case record must be documented to reflect the method used to arrive at the anticipated income.

Eligibility must be determined for each month of the application period. Applicants may be ineligible for the month of application and eligible for the month following the month of application. Benefits must be denied for the month of application in ADAPT and granted for the month following the month of application.

Example #1: - On November 17, the worker processes an application dated October 29. Based on converted income received in November, the case is not eligible; however, the case will be eligible for a December payment. Therefore, the case is to be approved effective December 1.

Example #2: - On July 14, the worker processes an application dated June 1. The application was not processed within the 30-day application processing time frame due to a delay by the examining physician in supplying necessary medical information. Verification is received July 13, the worker determines that the case is eligible. The worker approves the case with July 1, as the beginning date of assistance.

Example #3: - On December 6 the worker receives all necessary verification to process an application dated November 3. The assistance unit received a lump sum insurance settlement on December 2; the assistance unit (AU) has no other countable income. The AU is not eligible for the month of application; verification not provided timely. The AU is ineligible for December; lump sum exceeds the standard of assistance. The applicant provides verification showing all monies from the lump sum has been used. The beginning date of assistance for this application is January 1.

Example #4: - On December 12, the worker processes an application dated November 3. The case is eligible for a December payment but ineligible for a January payment. A payment is to be issued for December, and the case is to be closed effective December 31.

C. Verification of Income (Earned and Unearned)

In order to establish income eligibility, verification of all income received or anticipated to be received monthly by the assistance unit is required at the time of application/reapplication, when adding individuals with income, at renewals, and when a change becomes known to the agency. When verification is required, the agency must notify the applicant/recipient of the necessary verification and allow the assistance unit 10 days to respond. The assistance unit has primary responsibility for verifying income; **however, if needed, the worker must assist the household in obtaining any necessary verifications.**

The assistance unit is not responsible for providing verification of reported unearned income for which verification is accessible to the local agency through systems of records. These records include Bendex, SDX, SVES and VEC inquiry of unemployment benefits. If the applicant/recipient fails to verify income within 10 days of notification, policy at 401.2.B.1. and 2. regarding substantiation of eligibility factors is to be followed. Verification may be verbal or written in accordance with Procedures Section VII.

If an individual has a disability that limits his ability to provide verification, the worker must inform such individual that the worker can help obtain any necessary verification, and if the individual requests help, or help was needed but not offered or provided, the agency cannot thereafter impose adverse actions related to the particular incident, on the basis that the individual failed to provide the verification in a timely fashion.

When verbal verification is obtained, the case record documentation should include the name and telephone number of the individual who provided the information, the date of contact, and the information obtained.

At each renewal, all income of the assistance unit must be verified, regardless of whether a change has been reported. If a change is identified, a prospective determination must be conducted in accordance with Section 305.1.A. to establish ongoing eligibility.

When a change in income occurs between renewals, a prospective determination must be conducted to establish ongoing eligibility.

When attempts to verify countable income prove to be unsuccessful because the person or organization that is to provide the verification fails to cooperate with the assistance unit and the local agency, and there are no alternate sources of verification available, the Eligibility Worker shall determine an amount to be used for TANF purposes based on the best available information. The case record must be documented to reflect the method used to arrive at the anticipated income.

In the above situation, the following verification will be considered the best available information:

1. a third party statement,
2. a collateral contact, or
3. as a last resort, the applicant's/recipient's written statement of the amount of income anticipated to be received in the payment month.

D. Handling Changes in Income (Earned and Unearned)

1. The assistance unit must report increases in income that place the assistance unit’s monthly income above 130 percent of the federal poverty level based on assistance unit size.

The income limits are as follows:

Income Limits				
Household Size	Monthly Amount	Weekly Amount	Bi-Weekly Amount	Semi-Monthly Amount
1	**$1,037**	**$241.16**	**$ 482.32**	**$ 518.50**
2	**1,390**	**323.25**	**646.51**	**695.00**
3	**1,744**	**405.58**	**811.16**	**872.00**
4	**2,097**	**487.67**	**975.34**	**1,048.50**
5	**2,450**	**569.76**	**1,139.53**	**1,225.00**
6	**2,803**	**651.86**	**1,303.72**	**1,401.50**
7	**3,156**	**733.95**	**1,467.90**	**1,578.00**
8	**3,509**	**816.04**	**1,632.09**	**1,754.50**
Each Additional Person	**$354**	**$82.32**	**$164.65**	**$177**

1. When **a** change **in income** is reported or becomes known, **including changes not required to be** reported to the agency, the worker must take the following steps:

   a. Document the case record regarding the rate and frequency of payment (i.e., weekly, biweekly, semi-monthly, monthly, etc.) and the payment cycle (i.e., on what day the client is paid). If, based on the information provided by the client, there is a decrease in benefits, income must be verified by the next renewal.

   b. When an increase in income occurs, conduct a prospective determination per Section 305.1.A based on information provided. If the prospective determination renders the case ineligible, close the case as soon as administratively possible, or if ineligibility is expected to exist for only one month the payment may be suspended.

      If the case continues to be eligible, calculate the payment reflecting the new or increased income. If the income anticipated to be received during the month following the month the change became known to the agency represents less/more than a full month's income, then the second month following the month the change became known to the agency must be calculated based on the amount of income anticipated to be received in that month.

      For increases in contract income, refer to Section 305.1.B.2.a.4.

   c. If a decrease in income occurs, the change must be reflected, based on information provided, in the following payment month. Verification must be provided by the second month after the change becomes known. (Refer to Section 503.9 for further guidance concerning underpayments.)

      For decreases in contract income, refer to Section 305.1.B.2.a.4.

E. Adding and Deleting Persons With Income

1. When adding/deleting a person with income, conduct a prospective determination per 305.1.A. If eligible, verify anticipated income and reflect the change in the appropriate payment month.

2. When deleting persons with income, income of persons being removed from the assistance unit will be deleted from consideration at the same time the individual is removed from the unit. Additionally, any income of a stepparent or parent (including the parent of a minor caretaker) who is not included in the assistance unit will be deleted for the month following the month the person leaves the home. In the case of a minor caretaker, income deemed from the minor's parent(s) will be deleted for the month following the month the minor caretaker attains the age of 18.

   Example #1 - One of three children is removed from the home by the court on July 15. This child receives Social Security of $75 per month. The August payment should not reflect the income and needs of the child who was removed.

   Example #2 - A stepparent moves out of the home on the 23rd of September. Any income deemed available to the unit should be deleted from the October grant calculation. A supplemental payment must be made if the income cannot be deleted from the October 1 payment.

3. When adding/deleting the income of excluded individuals required to be in the assistance unit, the income of any excluded individual required to be in the assistance unit will be treated the same as individuals who are included in the assistance unit and, in the case of earned income, earned income disregards are applicable.

   a. The income of an excluded individual will be deleted the month following the month that the person leaves the home or is no longer required to be in the unit.

   b. When an excluded individual gets an increase or decrease in income, the increase or decrease will be handled in accordance with Section 305.1.D.

F. Applicant's/Recipient's Reporting Responsibilities

The applicant/recipient must be advised according to Section 401.2.B.1. and 2. regarding **verification requirements** and action that may be taken if verification is not provided. Additionally, the worker must provide the applicant/recipient with the following information:

1. Documents that constitute acceptable types of verification.

2. Time standards for reporting and acting on changes.

   a. All required changes must be reported timely, within 10 calendar days from the date the change becomes known to the assistance unit **but is reported timely if reported by the tenth day of the month after the change occurs.**

      If the recipient is uncertain of the exact date or amount of the change, then the 10 day reporting period begins the day the change occurs. The recipient is not required to have full knowledge of the change when reporting it to meet the 10-day requirement for timely reporting. For new employment, the 10-day period may begin as late as the first day of employment. Once the recipient reports a change, the EW must evaluate the information within 10 days for potential impact and request additional information and necessary verifications that address rate of pay, number of hours, and how often paid.

      1. When a change will increase benefits, the verification required must be obtained prior to the second month following the change in order to reflect the change in that month. If the assistance unit does not provide verification, the assistance unit's benefits will revert to the original amount unless a refusal to cooperate is documented, in which case an advance notice must be sent to terminate the case. An advance notice is not required if benefits are reverted to the original level because verification was not received, and the assistance unit was so advised at the time of increase.

      2. Whenever a change will decrease benefits, verification must be obtained prior to or at renewal.

      3. When a change neither increases nor decreases benefits, required verifications must be obtained prior to or at renewal.

   b. The worker is responsible for notifying the applicant/recipient when income must be verified. Income verification must be provided within 10 days of notification.

   c. The worker must advise the applicant/recipient on the appropriate notice of the amount of gross income anticipated to be received, the net income counted in determining the payment, the payment month the net income will begin to be counted, and the changes that must be reported.

3. Changes that must be reported.

G. Timely Reporting Examples

Example 1: Mrs. Smith called the agency on April 27 to report that she accepted a job on April 22. She will begin this job on April 29; however, she does not know the number of hours she will work nor how much she will earn hourly. The worker informs Mrs. Smith on May 5 that she needs to provide the number of hours she will be working, the rate of pay and how often she will be paid to determine continued eligibility.

Did the recipient report timely? Yes. Mrs. Smith accepted the job on April 22, however, she will begin work on April 29. The latest this information could be reported timely is May 9.

Did the worker meet the 10-day time frame to act on the change (evaluate the information received and request additional information/verification)? Yes. The worker informed the recipient on May 5 of the information necessary to determine continued eligibility. The client has 10 days from the date requested to provide the information. The client provides the information on May 15. The worker must take action for the June 1 payment. If the information is submitted after May 15, the case must be suspended/closed.

Example 2: Mrs. Johnson calls the agency on September 25 to report that she began working a second job on that date. Mrs. Johnson knows she will work 15 hours a week at $5.15 an hour and will be paid every week. The worker tells Mrs. Johnson that she will need verification of this information by October 5. The case record is documented and the anticipated income entered in ADAPT.

Did the recipient report timely? Yes.

Did the worker meet the 10-day time frame to act on the change (evaluate the information received and request additional information/verification)? Yes. The worker requested verification of the reported change. Increased income may cause either a decrease in payment or termination. This change causes a decrease. The recipient has until the next renewal to provide verification. Once the worker has sufficient information, action must be taken to decrease the benefits using the recipient's information.

Example 3: Ms. Smith accepted a new job on September 10 and started working on September 13. She received her first pay check on September 22. On September 23, she comes into the agency to bring her first paycheck to her worker. Ms. Smith told her worker she did not know what her income would be until she received this check.

Did the recipient report timely? Yes. Changes must be made as soon as they are known to the recipient. For income, the change becomes known when the customer can give the worker sufficient information. At the latest, the 10-day time frame begins the day the recipient begins working. The recipient began working on September 13. Ten days from her first date of employment is September 23. The worker must evaluate the income and impact the November 1 payment.

305.2 INCOME TO BE COUNTED - For the purpose of determining the amount of payment for an assistance unit, it is necessary to deduct the net countable income from the monthly standard of assistance applicable to the assistance unit. Net countable income is all income, both earned and unearned, which is available or expected to be available to members of the assistance unit, except for that portion specifically disregarded.

EXCEPTIONS:

(1) Reimbursements for out-of-pocket expenses shall not be considered countable income. These expenses may include reimbursement for travel expenses, such as mileage; reimbursement to the caretaker of a child for child care expenses; reimbursements for expenses incurred as a volunteer, etc.

(2) Money which belongs to another person that is handled by the client to pay expenses for that person is not considered available to the assistance unit.

Example:

Mrs. C. has a son in the Army who is currently in Germany. He sends her $250 a month to pay his car payment of $250 a month. None of this money is to be considered as income to Mrs. C.

Example:

Mrs. X and Mrs. Y live in the same house which is rented in Mrs. X's name. Mrs. Y gives Mrs. X an established portion of the rent each month. Mrs. X adds her portion to Mrs. Y's and pays the rent. Since this is a "shared shelter" arrangement, Mrs. Y's portion of the rent is not considered income to Mrs. X.

Note: This policy is not intended to replace roomer/boarder and property rental situations.

(3) The first $30 received by each individual in the assistance unit per calendar quarter for special occasions, such as birthdays, Christmas, etc., will be disregarded. Calendar quarters are January through March, April through June, July through September, and October through December. Any amount in excess of the $30 per quarter anticipated to be received will be counted as income in the payment month in which it is anticipated to be received.

There is some income not currently being received by the assistance unit considered available, even though it is not currently being received:

A. Support from a spouse or parent (natural, adoptive, or stepparent) living in the home is assumed to be available to the spouse and dependent children under 21 who are also living in the home** (305.4 E. and F.) <u>except</u>

* 45 CFR 233.20(a)(3)(iv)
** 45 CFR 233.20(a)(3)(vi)

that no part of an SSI or Auxiliary Grant payment or any income of a recipient of either program can be counted in determining the amount of an TANF payment, even though the applicant/recipient is the spouse of the needy caretaker or the parent of the eligible children.* When living together, the income of a minor caretaker's parent(s) will be deemed available to the minor caretaker's assistance unit until the minor care-taker reaches the age of 18, regardless as to whether the minor caretaker is excluded from the assistance unit, due to SSI receipt, or for any other reason.**

B. Benefits such as, but not limited to, RR Retirement, private corporation retirement, unemployment compensation benefits, Veterans or Social Security benefits, including reduced benefits, to which a member of the assistance unit is clearly entitled are available and must be counted even though the individual chooses not to accept such benefits (Section 305.4 B.1). However, individuals eligible for assistance under either the SSI or TANF program have the right to elect the program in which they wish to participate. Individuals applying for or receiving assistance through TANF cannot be mandated to apply for SSI. The applicant/recipient should be advised of this option.***

C. The gross amount of income or benefits must be counted even though all or a portion of the payment has been withheld by court order, i.e., a garnishment or court-ordered child support. Benefits from which child support can be withheld include, but are not limited to, Social Security benefits, Veterans' benefits, Unemployment benefits, and Workers' Compensation benefits. Supplemental Security Income (SSI) and public assistance benefits are exempt from garnishment under federal and state law.

The agency has a responsibility to explore potential **income sources** and assist the applicant/recipient in developing them to a state of availability whenever possible.****

It is the responsibility of the recipient to report **required changes** to the agency within 10 calendar days from the date the change becomes known to the assistance unit. Changes required to be reported by the applicant, which occur after the face-to-face interview but before the date of the Notice of Action to approve the case, must be reported by the assistance unit within 10 days of the date of the notice.

There are some differences in the provisions for counting earned and unearned income. Therefore, when income is from property, the eligibility case record must clearly indicate the basis for determining whether it is earned or unearned income, that is, whether the individual produces it by his own efforts or is actively engaged in management. For example, income from room and board is considered earned income only when the individual is engaged in a commercial enterprise for profit. Regardless of whether the income is earned or unearned, it is the profit which is considered the gross income.

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* Social Security Act, Section 402(a)(24)
** 45 CFR 233.20(a)(3)(xviii)
*** Social Security Act, Section 402(a)(24)
**** 45 CFR 233.20(a)(3)(ix)

305.3 EARNED INCOME – Earned income is defined as income earned by an individual through the receipt of wages, salary, and/or commissions, or through profit from activities in which he is engaged as a self-employed individual.* Earned income includes pay for jury duty, severance pay, vacation pay, and sick pay from the employer or employer obtained insurance.

Self-employment is defined as a business, farming or commercial enterprise in which the individual receives income earned by his own efforts, including his active engagement in management of property. Income from property when the individual is not actively engaged or when no managerial responsibilities are involved is not considered earned income.** In addition, for TANF purposes, self-employment situations include, but are not limited to, domestic workers, day care providers including babysitters, and chore and companion service providers.

Contract earnings are defined as wages guaranteed by a contract. This does not include work on an hourly or piecework basis or self-employment. A guaranteed wage is one which is received by an individual employed on a contractual basis and paid over a period of time. Earnings of this nature will be prorated according to 305.1.B.2.a.4).

When income is received from property, the eligibility case record must clearly indicate the basis for determining whether or not the individual produces it by his own efforts or whether or not he is actively engaged in management.

A. Definition of Gross Earnings or Profit

1. Gross earned income from wages, salary or commissions means the total amount of pay, irrespective of deductions, withholding or work expenses.** It is not the "take home" pay. Exception: Money advanced from an employer prior to the regular pay date must be counted as part of the gross income in the month of receipt. Any amount withheld to repay an advance in salary received prior to the budget month shall be deducted from gross earnings or profit for the budget month in which it is withheld.

2. Profit from self-employment means the total income received, less the business expenses directly related to producing the goods or services and without which the goods or services could not be produced.*** However, business expenses do not include:

* 45 CFR 233.20 (a)(6)(iii) and (iv)
** 45 CFR 233.20(a)(3)(iii)
*** 45 CFR 233.20(a)(6)(v)

a. net losses from previous periods;

b. federal, state, and local taxes;

c. money set aside for retirement purposes;

d. personal expenses, entertainment expenses, and personal transportation;

e. depreciation of equipment, machinery, or other capital investments necessary to the self-employment enterprise.

B. Disregarded Earned Income - As specified below, certain earned income of members of the assistance unit and excluded individuals required to be in the assistance unit must be disregarded in determining need of the assistance unit and amount of assistance to which the assistance unit is entitled. In addition, income disregarded under the provisions of other federal assistance programs must not be counted as income to the **TANF** assistance unit*. The items listed below are disregarded during the 185% screening. Income disregards are to be applied to gross earned income in the order listed below. (Refer to Procedures Section VII.A.1.c. to determine student status).

1. **All payments issued under the Workforce Investment Act of 1998 (WIA), including Job Corps payments.****

2. Other earned income of any eligible child who is a student*** must be disregarded in the 185% screen, determination of need (for applicants) and grant computation.

* 45 CFR 233.20(a)(4)(iii)
** **Public Law 105-220**
*** **22 VAC 40-295-60**

3. Standard Deduction* - A standard deduction is **subtracted from the** gross earned income for the assistance unit whose income is not otherwise exempt.** **Individuals not included in the AU will not be considered when determining the appropriate standard deduction.**

4. 20% Deduction of the Remaining Earned Income* - After applying the disregards in items 1-3, deduct 20% of the remaining earned income, including profit produced by self-employment.**

* **22 VAC 40-295-60**
**45 CFR 233.20(a)(11)(i)(B)
*** **22 VAC 40-295-60**

5. Incapacitated Adult/Child Care Disregard - Anticipated child care expenses, up to the appropriate maximums, must be disregarded in determining initial eligibility **and determining the amount of payment** (Step 2 **and 3** of Appendix 3 to Section 305). **The cost of child care may be** paid for by a service vendor payment, **by the client, or a combination. The child care expenses paid by the client are to be disregarded from earned income up to the maximum.** Prior to allowing the child care disregard, it must be verified that a service vendor payment is not being issued concurrently.

Anticipated incapacitated adult care expenses, up to the appropriate maximum, will be disregarded in both the initial eligibility determination and determining the amount of payment. The appropriate child care/incapacitated adult care disregard will be based on his/her employment status. Incapacity must be supported by a professional determination. The **TANF Medical Examination form (032-03-654)** is used for this purpose, unless incapacity is established by receipt of Social Security Disability benefits.

a) Employment status refers to:

1) Full-time Employment - Employed to work 30 hours or more per week on an on-going basis;

2) Part-time Employment - Employed to work less than 30 hours per week on an on-going basis;

3) Not Employed Throughout A Month - Applicable when an individual begins or terminates employment.

b) To determine the employment status of an individual who is not employed to work a specific number of hours on an on-going basis, such as a person employed on an on-call basis, as needed basis, or fluctuating basis, the following criteria should be used:

1) Full-time Employment - Working, or expected to work, 120 hours or more per month;

2) Part-time Employment - Working, or expected to work, less than 120 hours per month.

Verification of an individual's employment status should be provided by either an employer's statement of the number of hours employed to work, or actually worked, or by pay stubs. For self-employed individuals, the agency will be required to accept the client's statement concerning the number of hours worked, unless the agency has reason to question the validity of the statement.

Note: When verification of the appropriate employment status is being established for a prospective determination, it may be necessary for the eligibility worker to use his/her best estimate of the circumstances that will exist during that month.

The applicant/recipient is required to verify his/her employment status initially, at each full redetermination and whenever a change in the number of hours worked is reported to the agency.

c) Based on an applicant/recipient's employment status, the following disregards will be applied: (See exceptions to allowing the disregards in item 7.)

1) For full-time employment, deduct an amount equal to the anticipated cost, not to exceed $175 per month, for care of each child, age 2 and older and/or incapacitated adult in the assistance unit. In the case of child care for a child under 2 years old, deduct the anticipated cost not to exceed $200 per month.

2) For part-time employment, deduct an amount equal to the anticipated cost, not to exceed $120 per month, for care of each child and/or incapacitated adult in the assistance unit.

3) If an individual is not employed throughout a month but:

a) has worked, or is expected to work, 120 hours or more in that month, deduct an amount not to exceed the full-time disregard.

b) has worked, or is expected to work, less than 120 hours in that month, deduct an amount not to exceed the part-time disregard.

If child care/incapacitated adult care is payable on a weekly or bi-weekly basis, the amount of the monthly expense may be calculated using the 4.3 (weekly) or 2.15 (bi-weekly) conversion factors.

The disregard for child care is limited to children in the assistance unit, and the disregard for incapacitated adult care is limited to adults in the assistance unit.* Verification of the child/incapacitated adult care paid or anticipated to be paid must be obtained and submitted initially, at redetermination and whenever a change in the amount to be paid is reported in order to allow the disregard in determining the amount of payment. Acceptable methods of verification include written statements from the provider, receipts or cancelled checks, or verbal statements from the provider. When verbal verification is obtained, the case record documentation should include the name and telephone number of the individual who provided the information, the date of contact, and the information obtained.

* 45 CFR 233.20(a)(11)(i)(D)

Failure or refusal of the applicant/recipient to submit verification of the expense will result in the amount of the payment being determined without the expense being disregarded. If the verification is subsequently provided, eligibility will be re-evaluated, and a supplement issued for the month for which the disregard was not allowed. If termination or denial results from not allowing the disregard, follow policy in Section 401.3.F.5. This disregard, when applicable, is to be deducted from budget month income. Additionally, the disregard cannot be applied if the provider of care is a member of the assistance unit.

Budgeting adult/child care (if chosen):

Example 1: In December, the income and adult care/child care (if chosen) expenses anticipated for January, using appropriate maximums, are verified and used to determine the amount of the January payment.

Example 2: Budgeting the child care disregard of a child turning 2 years old when employment is full-time:

The child turns 2 on February 5. In calculating February's payment, anticipated income and child care expenses, not to exceed $200, are verified and used to determine the amount of the payment because the child was under 2 during that month. For March, anticipated income and child care expenses, not to exceed $175 (child now 2), are used to determine the amount of the March payment.

Example 3: An ongoing recipient works part-time and has chosen to have child care costs disregarded. In May she reported that her job changed to full-time on May 15. The prospective for June must reflect the appropriate maximum disregard for full-time employment. If eligible, the June payment will be calculated using the full-time maximum.

NOTE: Earned income cases that become ineligible may be eligible for transitional child care benefits. See Section 401.8.

* 45 CFR 233.20(a)(11)(iii)

C. Countable Earnings - The amount of monthly earnings remaining after the appropriate disregards have been deducted is the countable earned income to be used in computing need and amount of assistance.

305.4 OTHER INCOME - In determining the amount of assistance, all other regular income received or anticipated to be received by members of the assistance unit or used in determining eligibility must be counted in the month in which it is received, except that specifically disregarded under A.

A. Other Income Disregards - The following income of members of the assistance unit, a parent not included in the assistance unit or anyone whose income is used in determining eligibility or the amount of assistance must be disregarded.

Income which is disregarded under the following provisions must not be counted in determining the need for assistance of any individual under any other federal assistance program:*

1. Home produce of the assistance unit utilized for their own consumption.

2. The value of food coupons under the Food Stamp Program.

3. The value of foods donated under the U.S.D.A. Commodity Distribution Program, including those furnished through school meal programs.

4. Any payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.

5. Any benefits received under Title VII, Nutrition Program for the Elderly, of the Older Americans Act of 1965, as amended.

6. **Money received for educational purposes.****

7. Training allowances (transportation, books, required training expenses and motivational allowances) provided by Vocational Rehabilitation for persons participating in Vocational Rehabilitation Programs.***

The disregard is not applicable to the allowances provided by VR to the family of the participating individual.

* 45 CFR 233.20 (a)(4)(iii)
** 45 CFR 233.20 (a)(3)(iv) (B) and (vii), and (a)(4)(ii)(d), and Public Law 102-325
*** 45 CFR 233.20 (a) (4) (vii)

8. Any portion of an SSI payment and/or Auxiliary Grant.*

9. Payments to VISTA Volunteers under Title I, when the monetary value of such payments is less than minimum wage as determined by the Director of the action office,** and payments for services of reimbursement for out-of-pocket expenses made to individual volunteers serving as foster grandparents, senior health aides, or senior companions, and to persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and other programs pursuant to Titles II and III, of Public Law 93-113, the Domestic Volunteer Service Act of 1973, including Americorps VISTA.*** The worker must contact the Action Office at the following address or telephone number when VISTA payments are reported; Action Office, 400 N. 8th Street, Richmond, Virginia 23219, (804) 771-2197.

   Note: This disregard does not apply to participants in Americorps USA and Americorps NCCC. These programs are under the authority of the National and Community Service Trust Act of 1993 which contains no requirement to disregard payments to participants applying for or receiving TANF.

10. The Veterans Administration educational amount for the caretaker 18 or older is to be disregarded when it is used specifically for educational purposes. Any additional money included in the benefit amount for dependents is to be counted as income to the assistance unit.

11. Foster care payments received by anyone in the assistance unit.

12. **All payments issued under the Workforce Investment Act of 1998 (WIA), including Job Corps payments.**

13. Income tax refunds (including Earned Income Tax Credit payments and refunds). These exempt tax credits include federal earned income tax credits and state earned income tax credits.

14. Any payment made under the Fuel Assistance Program.

15. The value of supplemental food assistance received under the Child Nutrition Act of 1966. This includes all school meal programs; the Women, Infants, and Children (WIC) Program; the child care food program; and U.S.D.A. reimbursement payments to day care providers which are authorized by the National School Lunch Act.

16. All federal, state, or local government rent and housing subsidies and utility payments.****

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* 45 CFR 233.20(a)(3)(x)
** 45 CFR 233.20(a)(4)(ii)(h)
*** 45 CFR 233.20(a)(4)(ii)(g)
**** 45 CFR 233.20(a)(3)(xii)

17. Any funds distributed to, or held in trust for, members of any Indian tribe under Public Law 92-254, 93-134, 94-540, 98-64, 98-123, 98-124 or 97-458. Additionally, interest and investment income accrued on such funds while held in trust, and purchases made with such interest and investment income are disregarded.*

18. The following of distributions received from a Native Corporation under the Alaska Native Claims Settlement Act (Public Law 100-241):

a. Cash (including cash dividends on stock received from a Native Corporation) to the extent that the total received does not exceed $2,000 per individual per calendar year;

b. Stock (including stock issued or distributed by a Native Corporation as a dividend or distribution on stock);

c. A partnership interest;

d. Land or an interest in land (including land or an interest in land received from a Native Corporation as a dividend or distribution on stock); and

e. An interest in a settlement trust.

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* 45 CFR 233.20(a)(4)(ii)(e)

19. Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes (Public Law 94-114).

20. In determining eligibility for assistance, the first $50 of total child or child and spousal support payments received by the assistance unit is to be disregarded. In calculating the initial month's payment(s) the $50 disregard is only to be applied if it is anticipated that $50 will not be collected by DCSE subsequent to case approval (the date that the approval action is keyed into ADAPT). If it is anticipated that at least $50 will be collected, the support disregard is not to be applied when calculating the initial payment since the unit will receive a disregard payment from DCSE.* If the amount that is anticipated to be collected by DCSE after case approval is less than $50, disregard an amount from the support received prior to case approval that will ensure the total support disregard for the month does not exceed $50. For ongoing cases, DCSE will send each assistance unit a disregard payment of the first $50 of child support received each month (see item 24 below). The $50 disregard is only applicable to current child/spousal support payments received each month.

21. Payments sent to the recipient by the State which are identified as disregarded support.*

22. Federal major disaster and emergency assistance provided under the Disaster Relief and Emergency Assistance Amendments of 1988 and disaster assistance provided by state and local governments and disaster assistance organizations (Public Law 100-707).

23. Payments received by individuals of Japanese ancestry under the Civil Liberties Act of 1988, and by Aleuts under the Aleutian and Pribilof Islands Restitution Act (Public Law 100-383).

24. Payments by VIEW for support services such as transportation, uniforms, child care, etc.**

25. Any payment received from the Agent Orange Settlement Fund or any other fund established in response to the Agent Orange product liability litigation.*** To verify whether a payment is an Agent Orange payment, use documents in the individual's possession. If the individual cannot pro-vide verification or the situation is unclear, write to the Agent Orange Veteran Payment Program, P.O. Box 110, Hartford, CT 06104, Attention: Agent Orange Verification. Include in the request the veteran's name and social security number. If a survivor of a qualifying veteran was paid, also provide the survivor's name and social security number.

26. Payment received by individuals under the Radiation Exposure Compensation Act (Public Law 101-426).

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* 45 CFR 233.20(a)(4)(ii)(j)
** 45 CFR 233.20(a)(11)(v)(c)
*** Public Law 101-239

27. Funds received pursuant to the Maine Indians Claims Settlement Act of 1980 (Public Law 96-420); and the Aroostook Band of Micmacs Settlement Act (Public Law 102-171).

28. Funds paid to an escrow account established under the Family Self-Sufficiency Program of the Department of Housing and Urban Development.

29. Student financial assistance received under Bureau of Indian Affairs student assistance programs.*

30. Interest earned or appreciation in value on a savings or investment account for the purpose of self-sufficiency.

31. Up to $2,000 per year of income received by individual Indians, which are derived from leases or other uses of individually-owned trust or restricted lands.**

* Public Law 102-325
** Public Law 93-134

32. All bona fide loans, regardless of the intended use.* This includes loans obtained for any purpose, and may be from a private individual as well as from a commercial institution. A simple statement signed by both parties indicating that the payment is a loan and must be repaid is sufficient to verify that a loan is bona fide. If the customer indicates that money received was a loan but does not provide required verification, the money is to be treated as unearned income in the month received. Interest earned on the proceeds of a loan while held in a savings account, checking account, or other financial instrument will be counted as unearned income in the month received.

33. Income, including support, received by or on behalf of a child ineligible for TANF due to the family cap provision.**

34. Payments received by victims of Nazi persecution under Public Law 103-286.

35. Matching contributions deposited in an individual development account (IDA) or on the applicant/recipient's behalf in a parallel account maintained by the organization administering the IDA program.

36. Income received by children who are in a VIEW period of ineligibility.

37. Interest income of less than an average of $10 per month.

38. TANF Match Payments issued to TANF recipients based on current support collected by the Division of Child Support Enforcement.

39. Any veteran benefits received by children born with spinal bifida, who are natural children of individuals who served in Vietnam during the period beginning January 9, 1962, and ending on May 7, 1975.

40. Payments received from the Ricky Ray Hemophilia Relief Fund established under Public Law 105-369.

41. Allowances, earnings, and payments to individuals participating in programs under Title I of the Workforce Investment Act (WIA).***

42. Any amount received by or made available to household members for deployment or service in a combat zone will not count as income for TANF purposes unless the payment was received before the deployment. This exclusion includes items such as, but not limited to, incentive pay for hazardous duty, special pay for imminent duty or hostile fire duty or certain reenlistment bonuses, or special pay for certain occupational or educational skills.

B. Income From Social Security and Other Benefits - Monthly benefits received or anticipated to be received by members of the assistance unit, or individuals required to be in the assistance unit, must be counted as income, with the following exceptions:

1. When a member of the assistance unit is eligible for benefits (such as but not limited to, RR Retirement, private corporation retirement,

* 45 CFR 233.20(a)(3)(xxi)
** Code of Virginia, Section 63.2-604
*** 20 CFR 667.272 (c)

Veterans, Social Security, or any reduced benefits), the verified amount must be counted, even though the individual chooses not to accept such benefits.

The agency has a responsibility to explore potential resources and assist the applicant/recipient in developing them to a state of availability whenever possible.*

2. When educational benefits are being received from Veterans Administration. (See 305.4.A.12.)

3. When the Medicare Part B premium is deducted from the Social Security or Railroad Retirement benefits of an individual who is also receiving Medicaid. The amount of benefits actually received, plus the amount of the Part B premium, is counted as income since Medicaid will pay the premium during the time the individual receives Medicaid.

C. Lump Sum Payments - The receipt of a nonrecurring lump sum payment, such as the accumulation of benefits for a prior period, including Social Security and Workmen's Compensation benefits; payments in the nature of a windfall, e.g., inheritances or lottery winnings; personal injury awards; life insurance settlement when the policy is owned by someone other than a member of the assistance unit; or income from any other nonrecurring source, **except lump sums for casualty property loss, shall be counted as income in the month of receipt. This evaluation of lump sums also includes those received by the parent(s) of a minor caretaker or a stepparent who is not included in the assistance unit.**

In situations involving casualty property loss payments for repair or replacement of damaged/lost property, such payments will not be considered as **countable income even in the month of receipt as the payment is designed to allow for the replacement of damaged/lost property.**

1. Determining amount of lump sum to be considered - Only the amount received by an individual which is available for maintenance (lump sum, less directly related expenses paid) shall be considered as income.

2. Allowable expenses include, but are not limited to:

Payment of debts which are incurred for a member of the assistance unit, such as:

medical bills incurred from the period prior to receipt of the lump sum,

expenses related to a natural disaster or fire,

costs related to avoiding the assistance unit's eviction and/or a utility cutoff,

weather related repairs or replacement to the home in which the assistance unit lives, and

funeral expenses.

* 45 CFR 233.20(a)(3)(ix)

Example: Ms. S. notifies the local agency that her claim from an automobile accident has been settled. The settlement was for **$5,000**. She received from her attorney, a check in the amount of **$1,000**. The check stub states **$2,000** was deducted to cover legal **expenses** and **$2,000 for** medical expenses. The $1,000 that she actually received **is considered income in the month of receipt**.

Lump sum payments received as a result of an accumulation of benefits for a prior period, such as Social Security benefits, will have no directly related expense deductions.

The client must provide verification of payment of those expenses **within 10 days**. In instances where verification of payment is not provided **within 10 days, the lump sum payment in its full amount, must be counted in the month of receipt only.**

3. How to count lump sum - Add the lump sum or the remainder of the lump sum after directly related expenses to other net countable income received in the same month to arrive at total income for **month of receipt***.

   a. If the applicant/recipient has knowledge of the date and amount of the lump sum before receiving it and reports it, the lump sum or remainder of the lump sum will be counted in the month that it is expected to be received.

   b. If the recipient reports receipt of a lump sum on the day that it is received or any day thereafter, the lump sum is countable income for the month of receipt only, and must not impact any future months.

   Example 1: Applicant applied for TANF on February 15th. She was in a car accident several months ago and received a settlement of $15,000 on December 10th. The application must be processed without counting the lump sum as income.

   Example 2: A TANF applicant reports at application that she received an insurance check this month to repair damage to her home caused by Hurricane Isabel. She anticipates using the money to repair her home. This lump sum must not be counted as income in the month of receipt or for any future months.

   Example 3: An ongoing TANF recipient calls the local agency on March 11th to report receipt of a $5,000 inheritance check. The TANF check for March was issued on the first of the month. The lump sum cannot impact March and must not be counted for any future months.

Money received from the sale of a resource is not considered a lump sum. Money received from the sale of or conversion of a resource is a resource.

*** 22 VAC 40-295**

Example 4: A TANF recipient calls her worker on June 15th to report she will receive a Social Security payment for her son on July 3rd. The payment will be $200 for each month; March, April and May. The local agency must count this as income for the month of July.

PAGES 28 – 32 INTENTIONALLY LEFT BLANK

D. Sponsored Aliens – For the purposes of determining eligibility, the income of any person who sponsors an alien's entry into the United States on or after December 19, 1997, shall be considered to be the unearned income of the alien.

After determining that an alien meets the alienage requirements in Section 201.7.A.2.a. – d, the worker must determine if sponsor deeming is applicable to the individual. The alien groups exempt from sponsor deeming are refugees, asylees, deportees, parolees, Cuban-Haitians, and veterans/persons in active duty and certain of their relatives (Section 201.7.A.2.d). Aliens exempted are responsible for proving that their original entry status was one of those listed above if their current status is different.

1. Aliens Whose Sponsor Executes an Affidavit of Support on or After December 19, 1997 Section 213A of the Immigration and Nationality Act, as amended by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996(P.L. 104-208) requires that the sponsor of an alien applying for an immigrant visa or adjustment of status on or after December 19, 1997, sign Form I-864, the "Affidavit of Support Under Section 213A of the Act." The sponsor of an alien who applied for an immigrant visa or adjustment of status before December 19, 1997, is not subject to the requirements of Section 213A and must sign Form I-134, the "Affidavit of Support," or another "non-213A" affidavit of support, as determined by USCIS.

Policies applicable when the affidavit of support was executed on or after December 19, 1997, are as follows:

a. Countable Income of Sponsors - For purposes of determining eligibility, the income of any person who executed an affidavit of support with respect to the alien and the spouse of any person who executed an affidavit on behalf of the alien, shall be considered to be the unearned income of the alien.

b. Termination of the Sponsor's Obligation - The evaluation and use of the income of the sponsor and spouse of the sponsor must continue toward the TANF eligibility and benefit level of the immigrant until the alien:

1) becomes a U.S. citizen through naturalization; or

2) has worked, or can be credited with, 40 qualifying quarters of work, provided that the sponsored alien is not credited with any quarter beginning on or after January 1, 1997, during which the sponsored alien receives federal public benefits. (Refer to Appendix 4 to Section 305.); or

3) leaves the U.S. or no longer holds permanent resident status; or

4) dies or the sponsor dies.

c. Review of Income of Alien Upon Reapplication - Whenever an alien reapplies for TANF benefits, the worker must review the income attributed to the alien.

d. Indigence Exception - If a determination is made by the local agency that a sponsored alien would, in the absence of the assistance provided by the agency, be unable to obtain food and shelter, taking into account the alien's own income, any cash, food, housing, or other assistance provided by other individuals, including the sponsor, the amount of income of the sponsor or the sponsor's spouse which shall be attributed to the sponsored alien shall not exceed the amount actually provided for a period beginning on the date of such determination and ending 12 months after such date.

The local agency must notify the Office of the U.S. Attorney General of each such determination, including the names of the sponsor and the sponsored alien involved. The written notification

should include the reference "Determination under 421(e) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996" and should be sent to the following address:

U.S. Citizenship and Immigration Services
Statistics Branch
425 I Street NW
Washington, D.C. 20536

e. Special Rule for Battered Spouse and Child - Sponsor deeming requirements are suspended for a 12-month period from entitlement to TANF for sponsored aliens who have been battered or subjected to extreme cruelty and the local department of social services has determined that there is a substantial connection to the need for benefits and the battery or cruelty.

After 12 months, the battered spouse or child may continue to receive assistance if the battery or cruelty was perpetrated by the sponsor and has been recognized by a court order or **USCIS** determination.

To qualify under this special rule, the batterer must not be residing in the same household as the individual who was subjected to the battery.

Note: This provision only applies if the battered or abused alien entered the U.S. prior to August 22, 1996, but is sponsored on or after December 19, 1997.

f. Reimbursement Procedures - Execution of the affidavit of support, coupled with the sponsored immigrant's acquisition of permanent residence, creates a contract which is legally enforceable. The sponsor is obligated to reimburse government agencies which provide public benefits, including TANF, to the sponsored alien. Procedures for requesting and receiving reimbursement will be issued in a future transmittal. If repayment is received from the sponsor before reimbursement procedures are issued, contact the Regional TANF Specialist for interim instructions.

2. Aliens Whose Sponsor Executed an Affidavit of Support Before December 19, 1997

Aliens who applied for immigrant visas and those who filed for an adjustment of status before December 19, 1997, are not subject to sponsor deeming, as the sponsor’s obligation to support expired after three years.

3. Verification of alien status - Refer to Procedures Section I.F.

E. Support from Relatives

1. Spouse, parent, or minor sibling in the home - Under federal regulations, in family groups living together, income of the spouse is considered available for his spouse, income of a parent is considered available for his children under 21,* income of the senior parent(s) is considered available to the minor caretaker's assistance unit,** **until the minor parent reaches the age of 18,** and income of the ineligible alien parent is considered available to his child's assistance unit. **The deeming of income from the parent only applies to minor caretaker and ineligible alien cases as specified in section 305.4 F.2.**

   As specified in Section 302.6, the parent and minor siblings of the eligible TANF children living in the home are ordinarily included in the assistance unit, with their needs and income counted in determining the amount of payment. If the parent or child is not included in the assistance unit for any of the reasons listed in Section 302.6.C. or D., his income is considered available to the assistance unit as follows:

   a. If the parent or child is receiving SSI, Auxiliary Grants, adoption assistance, or a foster care payment, none of his income can be counted as available to the TANF assistance unit.

* 45 CFR 233.20(a)(3)(vi)
** 45 CFR 233.20(a)(3)(xviii)

b. If the parent does not meet the citizenship or alienage requirement, any income he has is considered available to the eligible child(ren) by applying the ineligible alien deeming formula. (See 305.4.F.)* A lump sum payment received by an ineligible alien parent is counted as income in the month of receipt only. No period of ineligibility is to be established.

If a child is ineligible because of his citizenship/alien status, none of his income is available to the assistance unit.

c. The income of the spouse of a parent of TANF children, who is the children's stepparent, is considered available to his spouse and the children for whom she receives assistance. Income of the stepparent is considered available to his spouse's assistance unit in accordance with Section 305.4.F.

d. The parent of TANF children who is herself a minor (under 18) and is living in the home of her parent(s) must be included in the TANF assistance unit with her child unless specifically excluded per

* 45 CFR 233.20(a)(3)(vi)(B)

Section 302.6.D. The income of the senior parent(s) will be considered available to the minor caretaker's assistance unit in accordance with 305.4.F. The income of the senior parent(s) will be deemed available to the minor caretaker's assistance unit regardless of whether the minor caretaker has been excluded from the unit for reasons identified in Section 305.4.E.1.b and e.

Additionally, any income of the minor caretaker is considered available to her AFDC children, even if he/she is not included in the assistance unit. Earned income disregards are applicable per Section 305.3.B.

e. If the parent or child is excluded or removed from the assistance unit because he/she failed/refused to cooperate in identifying the parents, establishing paternity and securing support per 201.10.A, or failure to provide a Social Security number or show proof of application for a Social Security Number, the parent's/child's earned income, allowing the earned income disregards per Section 305.3.B., and gross unearned income is considered available to the assistance unit. This applies also to individuals who are disqualified per Section 102.3 for being found to have committed an IPV, to an assistance unit member ineligible due to noncompliance with the compulsory school attendance requirement, to a parent excluded because her spouse, the stepparent to the eligible children, is able to meet her needs, and to a parent/child ineligible due to 201.1 F and G.

f. If the parent is a sponsored alien whose income plus that portion of the sponsor's income deemed available to him/her equals or exceeds the alien's pro rata share of the standard of assistance at 90% for the alien and the remaining members of the assistance unit, the children's pro rata share of the alien's countable income (exclusive of the sponsor's income) is considered available to the assistance unit. Allow the earned income disregards per Section 305.3.B. in determining the alien's countable earnings. Note: A lump sum payment received by a sponsored alien parent excluded under this paragraph is counted as income in the month of receipt only. No period of ineligibility is to be established.

If the child is a sponsored alien, none of his income is to be counted.

g. If a parent or child is ineligible due to prior receipt of a lump sum payment and is in a period of ineligibility, none of his income is to be counted.

h. If the parent is a convicted offender, serving a court-imposed sentence while living at home, none of his income is considered available to the assistance unit.

2. Spouse (Stepparent) or parent outside the home - Child support or child support commingled with alimony received or anticipated to be received by the assistance unit is counted as income in the amount actually received, minus the first $50 each month, in establishing initial eligibility on the basis of need for an otherwise eligible assistance unit. If such support is insufficient to meet the needs, the initial grant(s) is to be computed counting all support received prior to the date that the case approval is keyed into **ADAPT** (See Exception d. below). All support received after case approval must be redirected to the Division of Child Support Enforcement (DCSE). All subsequent grant(s) are to be computed without regard to such income and the amount of the assistance payment will be total needs less all other countable income up to the maximum reimbursable payment. (Refer to 601.1 for retroactive payments at initial application.) The applicant/recipient must be advised that all future support received must be forwarded to DCSE. NOTE: Alimony not commingled with support is to be counted as income. It is not considered as support, is not to be redirected to DCSE, and is not eligible for the $50 disregard.

Exceptions:

a. In the event the caretaker fails to cooperate in redirecting these support payments to the State, the caretaker must be removed from the assistance unit (201.10). All future support, minus the first $50 each month, anticipated to be received by the caretaker must be considered as income available to meet the needs of the remaining members of the assistance unit until such time support is redirected to the State.

b. In situations where the client has cooperated and support is being paid to the Division of Child Support Enforcement but the responsible person is also making a support payment directly to the client, the amount being received by the client is to be counted in total as income to the assistance unit. The $50 disregard is not applicable to the additional support received by the family in this situation. The income will be counted against the grant until the new support obligation has been established.

c. Pending the establishment of a child support obligation by the District Child Support Enforcement Office, payments made to a third party such as a rental agency in lieu of or in addition to child support, whether based on a court order or a mutual voluntary

agreement between the client and the responsible person, must be counted as income to the assistance unit. The $50 disregard is not applicable to third party payments.

d. If it is anticipated that an amount less than $50 will not be collected by DCSE after case approval, disregard an amount from the support collected prior to case approval to ensure that a total amount of no more than $50 is disregarded in the initial month of eligibility.

3. Putative fathers outside the home- In cases involving absent putative fathers, cash contributions are counted as income in the amount received, minus the first $50 each month, in establishing initial and continuing eligibility until such time as the contribution is redirected to the State. Note: If a notarized statement of paternity, a copy of an

existing court order for support, or a Virginia birth certificate with the father's name exists in the case record, support received from such person, if absent, must be redirected to the State.

4. Other nonresponsible persons - Cash contributions from non-responsible persons, such as cohabitants, are counted as income in the amount received or anticipated in establishing initial and continuing eligibility.

A cohabitant is a person cohabiting (as man and wife) with the parent of the TANF children.

F. Deeming Income - In certain situations, the income of an individual living in the home with the assistance unit must be evaluated to determine what amount, if any, must be considered available to the assistance unit, or deemed, regardless of whether the income is actually made available to the unit. Income deeming is applicable to the following persons:

- a stepparent living with the assistance unit who is not included in the assistance unit. Income of a stepparent will be deemed available to the child(ren) **providing** the natural or adoptive parent of the child(ren) is also living in the home. Divorce terminates the stepparent's financial responsibility, but not the degree of relationship.

- the parent(s) of a minor parent, when the minor parent and parent(s) of the minor parent are living together;

- an alien parent who is ineligible for assistance due to his alien status.

The procedures described below are to be used to determine the amount of income that must be deemed available to the assistance unit.

1. Stepparent Deeming Procedures - The Code of Virginia has been modified in regard to the stepparent deeming procedure with the goal of keeping families together.* The two-step procedure in a. below must be followed to determine eligibility and the grant amount when there is a stepparent in the home but not in the assistance unit and the parent is otherwise eligible for inclusion in the assistance unit. If the parent has been excluded from the assistance unit due to any reason other than failure/refusal to cooperate with DCSE, only Step 2 is necessary. If the parent has been excluded due to failure/refusal to cooperate with DCSE, the procedure in b. below is applicable.

a. Step 1 - Determining Eligibility of the Parent in the Home - Compute the amount of the stepparent's income available to the assistance unit by subtracting the following from the verified anticipated gross monthly earned income (use net profit if from self-employment) and gross unearned income:

1) The first $90 of gross earned income;

2) The standard of need at 100% for household members claimed or who could be claimed as dependents on the stepparent's federal income tax return, excluding members of the assistance unit.

* Code of Virginia, Section 63.2-6

Exceptions: The needs of an individual(s) who is not in the assistance unit due to an IPV sanction, failure to comply with SSN requirements, or failure to cooperate with DCSE will not be allowed.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

3) Support, including wage assignments paid to individuals not living in the home who are claimed or could be claimed as dependents on the stepparent's federal income tax return.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

4) Payments for alimony and child support, including wage assignments to individuals not claimed on the stepparent's federal income tax return and not living in the household.

Verify by statement from the stepparent.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

The amount remaining after the above deductions must be compared to the standard of assistance for the assistance unit. If the stepparent's income is less than the standard of assistance for the number of persons in the assistance unit, the parent's needs are included on the grant, and no stepparent income is deemed available. Only the income of the parent and child(ren) is to be considered in determining the grant amount. (Step 2 is not applicable in this instance.)

If the remaining amount equals or exceeds the standard of assistance for the number of persons in the assistance unit, the parent is not included in the assistance unit, and the child(ren)'s eligibility must be determined according to step 2.

Step 2 - Eligibility Determination For the Children When the Parent's Needs Must Be Excluded From the Grant - Determine the child(ren)'s eligibility and grant amount by counting the parent's income, the child(ren)'s income, and that portion of the stepparent's gross income in excess of 150% of the poverty level for two persons (the parent and stepparent), which is $**1,562**. The latter is a standard amount and must be used in all cases regardless of the actual number

of dependents the stepparent has. Countable income is to be deducted from the standard of assistance at 90% for the assistance unit.

b. Stepparent Deeming Procedure Used When the Parent in the Home Refuses/Fails to Cooperate With DCSE - When it is determined that the parent of the TANF child(ren) has failed or refused to cooperate with DCSE, the stepparent's income must be deemed available to the assistance unit, calculating the deemed amount in accordance with 305.4.F.1.a.1) - 4). The deemed income, in addition to the income of the parent and child(ren) must be counted to determine the assistance unit's eligibility and grant amount.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

c. Stepparent Deeming When the Parent Is Not in the Home With the Stepparent – Deeming stepparent income is not appropriate when the parent of the TANF child(ren) is not living in the home, regardless of whether absence from the home is due to separation, divorce, or death. The stepparent and the natural/adoptive parent will be considered living together, regardless of absence due to military duty, employment, or other absences or convenience, as long as they consider themselves to be living as husband and wife.

If the stepparent is included in a TANF assistance unit, policies and procedures applicable to assistance unit members apply instead of the deeming procedures.

Note: A lump sum payment received by an eligible child's stepparent is considered available to the assistance unit in the month of receipt only.

EXAMPLE #1:
Ms. P. is applying for TANF for herself and her 3 children. Ms. P. receives unearned income in the amount of $50 per month, and each of the 3 children receives unearned income in the amount of $50 per month, as well. Ms. P.'s husband (not the children's father) is employed and earns $1,530 per month. Mr. P. has no other dependents.

1. To determine Ms. P.'s eligibility to be included in the AU:

Mr. P.'s income	**$1,600.00**
Less $90 disregard	- 90.00
	$1,510.00
Less standard of need for 1 (group II)	-174.00
Amount deemed available to Ms. P.	**$1,336.00**
Standard of assistance for 4 person AU	$ 382.00

Note: The standard of assistance does not include the TANF Match Payment.

Since the portion of Mr. P.'s income which is deemed available to Ms. P. exceeds the standard of assistance for 4 persons, she is not eligible to be included in the AU.

2. To determine the 3 children's eligibility, and, if eligible, the grant amount:

Stepparent's (Mr. P.'s) income	**$1,600.00**
150% of poverty guidelines for 2 (monthly)	**-1,562.00**
Amount greater than 150% poverty guidelines	**$ 38.00**
Standard of assistance for 3-person AU	$ 320.00
Note: The standard of assistance does not include the TANF Match Payment.	
Less countable income **($38.00** - amount of Mr. P.'s income which exceeds 150% of poverty guidelines; $50 - Ms. P.'s unearned income; $150 - the children's unearned income)	**- 238.00**
Grant amount	**$ 82.00**

EXAMPLE #2:
Ms. J., who has been receiving TANF on behalf of herself and her 2 children reports that she remarried over the weekend. Ms. J. receives unearned income in the amount of $100 per month. Her husband, Mr. J. is employed, with earnings in the amount of $800 per month. Mr. J. has 3 children who live with his former wife, for whom he pays support in the amount of $400 per month.

1. To determine Ms. J.'s eligibility to be included in the AU:

Mr. J.'s income	$ 800.00
Less $90 disregard	- 90.00
	$ 710.00
Less standard of need for 1 (group II)	- 174.00
	$ 536.00
Less support paid by Mr. J. to non-household dependents	- 400.00
Income deemed available to Ms. J.	$ 136.00
Standard of assistance for 3-person AU	$ 320.00
Note: The standard of assistance does not include the TANF Match Payment.	

Since the portion of Mr. J.'s income which is deemed available to Ms. J. is less than the standard of assistance for 3 persons, she is eligible to be included in the AU. Proceed to grant calculation, since Ms. J. is eligible.

2. To determine the grant amount:

Standard of assistance for 3-person AU	$ 320.00
Less countable income (Ms. J.'s income)	- 100.00
Grant amount	$ 220.00

EXAMPLE #3:
Ms. L. is applying for TANF for herself and her 2 children. Ms. L. works 10 hours per week, and earns $50 weekly. Her husband, Mr. L. (not the children's father) is employed and earns $2,000 per month. Mr. L. has 1 child, who lives in the household also.

1. To determine Ms. L.'s eligibility to be included in the AU:

Mr. L.'s income	$2,000.00
Less $90 disregard	- 90.00
	$1,910.00
Less Standard of need for 2 (group II) to include Mr. L. and his child	- 257.00
Income deemed available to Ms. L.	$1,653.00
Standard of assistance for 3-person AU	$ 320.00

Note: The standard of assistance does not include the TANF Match Payment.

Since the portion of Mr. L.'s income which is deemed available to Ms. L. exceeds the standard of assistance for 3 persons, she is ineligible to be included in the AU.

2. To determine the 2 children's eligibility, and if eligible, the grant amount:

Stepparent's (Mr. L.'s) income	$2,000.00
150% of poverty guidelines for 2 (monthly)	**-1,562.00**
Amount exceeding 150% of poverty guidelines	**$ 438.00**
Standard of assistance for 2-person AU	$ 254.00

Note: The standard of assistance does not include the TANF Match Payment.

Therefore, the 2 children are ineligible for TANF, since Mr. L.'s income, in excess of 150% of poverty guidelines, exceeds the standard of assistance for an AU of 2.

2. Deeming Income in Minor Caretaker and Ineligible Alien Cases - Income must also be deemed to an assistance unit in the following situations. Applicable policies and procedures are explained below.

a. Minor Caretaker Living with Senior Parent(s) - When living together, the income of a senior parent(s) is to be deemed available to the minor caretaker's assistance unit.* The senior parent's income must be considered available to the eligible child(ren) by applying the deeming procedure in Section 305.4.F.2.c. below. A stepparent's income is not deemed available to a minor caretaker's assistance unit.

When the minor caretaker is an SSI recipient, and lives in the home of his/her parent, the income of the senior parent(s) is deemed available to the minor caretaker's TANF assistance unit. If eligibility for TANF exists, the Social Security Office must be informed that the income is being counted for TANF purposes. The EW must document the case record to show that the Social Security office has been advised that the minor caretaker's parent's income is being counted for TANF purposes.*

b. Ineligible Alien Parent - If a parent living in the home with the eligible TANF child is an alien and is ineligible for assistance

* 45 CFR 233.20(a)(3)(xviii)

for himself due to his alien status, the parent's income must be considered available to the eligible child(ren) by applying the deeming procedure in Section 305.4.F.2.c. below.

c. Calculating the Deemed Amount - Federal regulations provide the following procedure for determining the amount of income to be deemed available to the **TANF** assistance unit from the senior parent(s) or an ineligible alien parent,* or a stepparent when the parent is not residing in the home, but the stepparent and parent are married.

The amount to be deemed available is computed by subtracting the following from the verified anticipated gross monthly earned income (use net profit for earnings from self-employment) or gross unearned income of the senior parent(s), ineligible alien parent, or stepparent. **Note: The TANF Match Payment is not countable unearned income.**

Example: TANF recipient has an assistance unit of three (mother and two children). The mother reports she was married yesterday; however, her husband is not the father of her children. She reports he has earned income of $550 a month. The AU also receives a TANF Match Payment of $185. Continuing TANF eligibility is determined as follows:

Gross income:	**$ 550**	
	- 90	
	$ 460	
	- 174	**(SON for 1 person Group II)**
	$ 286	
	- 0	**(Support paid by the step dad)**
	$ 286	

$286 < $320 (SOA for 3) — AU remains eligible. TMP not considered.

1) The first $90 of gross earned income of each employed person.

2) The standard of need at 100% for household members claimed or who could be claimed as dependents on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return, excluding members of the assistance unit.

Exceptions: The needs of an individual(s) who is not in the assistance unit due to a **VIEW** or IPV sanction, failure to comply with SSN requirements, failure to comply with the declaration of citizenship/alienage status requirement, or failure to cooperate with DCSE will not be allowed.

If the senior parent, stepparent, or ineligible alien parent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the senior parent, stepparent, or ineligible alien parent.

3) Support, including wage assignments paid to individuals not living in the home who are claimed or could be claimed as dependents on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return.

If the senior parent, stepparent, or ineligible alien parent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the senior parent, stepparent, or ineligible alien parent.

4) Payments for alimony and child support including wage assignments to individuals not claimed on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return and not living in the household.

Verify by statement from the senior parent or the ineligible alien parent.

The amount remaining after the above deductions will be counted as unearned income and deducted from the grant.

Failure of the client to verify the income of the senior parent or the ineligible alien parent will result in ineligibility of the case.

In situations where the income of a senior parent(s) is being deemed available to more than one assistance unit, the amount to be deemed will be divided equally among the units for which the parent(s) is responsible.

Note: A lump sum payment received by a senior parent or an ineligible alien parent is considered available to the assistance unit in the month of receipt only.

G. Other Cash Income - The total amount of all other cash income is to be counted. Specific procedures apply to certain types of other income:

1. Supplement to Standard of Assistance - In accordance with the option provided under federal regulations,* the State Board has ruled that local departments of welfare/social services may supplement in an amount sufficient to meet the difference between the 90% payment standard and the 100% standard of need.

   If a local department meets, from local funds, the difference between the proportionately reduced standard and the full standard, it must do so in all cases and the amount of the supplement is disregarded.

2. Assistance from other sources - Any contribution from another agency or organization must be counted as income unless such contribution is for an item not included in the Standard (See Section 304.1).

* 45 CFR 233.20(a)(3)(vii)

3. Home Energy Assistance - Payments made directly to a household for home heating or cooling provided by suppliers of home energy, such as electric and gas companies and fuel oil dealers, must be counted as income.* When payments are received jointly by a household composed of TANF and non-TANF individuals, including SSI recipients, the TANF assistance unit's pro rata share, based on the total number of persons in the household, must be considered as income to the TANF unit.

   The pro rata share of non-TANF and SSI individuals is not to be counted.** Note: Payments made through the Virginia Energy Assistance Program administered by local departments of social services are not considered home energy assistance and are disregarded per Section 305.4.A.16.

4. Public Assistance Benefits Received From Another State - It is possible for individuals who move from another state to Virginia to receive assistance from both states in the same month. However, the assistance paid by the state of prior residence must be considered in determining eligibility and benefit amount in Virginia. The amount of assistance received by the assistance unit from the former state is to be treated as unearned income in the month received.

   Example 1: An applicant applies in Virginia on August 30 and receives a grant from Pennsylvania for $100 in September which covers the period of the last week of August and the first week of September. If the assistance unit is eligible for assistance in September and the S0A is $320, the $100 of unearned income is subtracted from $320, for a grant of $220.

   Example 2: A Group II locality receives an application on September 2 requesting assistance for a parent and two children. The family received a TANF grant from another state on September 1 for $100 covering the period September 1-15, and the case is terminated in the former state effective September 15. The agency determines eligibility on September 10 (date of authorization). The first payment is calculated as follows:

   $320 - $100 = $220 - monthly deficit
   $220/30 = $7.33 - daily rate
   $7.33 x 21 days = $153.93 - prorated deficit
   $153 grant (rounded down)

5. Royalties are considered unearned income.

6. Interest earned on cash assets in excess of $10 a month, such as a bank account or certificate of deposit, is considered unearned income in the month received (available) unless anticipated to be received less often i.e., quarterly, annually, etc, in which case it may be prorated over the period earned if requested by the applicant/recipient. Policy in Section 305.1. B.2 is applicable in determining if the income is "reasonably certain" to be received and, if so, the methods available to use to calculate the anticipated amount. Exception: Interest accrued on exempted VIDA or AFIA funds is not countable income.

* 45 CFR 233.20(a)(3)(xiv)
** 45 CFR 233.53(c)(2)

H. Benefits and Services Received in Lieu of Income - When an applicant or recipient appears to be working but is not paid directly, the worker must determine whether there is an identifiable amount that must be considered as income. Such arrangements must be evaluated using the following guidance:

If the client performs services but receives no pay directly, and there is an identifiable amount of income that could be paid directly to the client, count the identifiable amount as income.

If the client performs services but is not paid directly, and there is no identifiable amount of income that could be paid to the client, no income is counted.

Examples:

1. Situation #1: An applicant/recipient works for an employer and, in lieu of wages paid directly to the applicant/recipient, the employer pays an expense on behalf of the applicant/recipient. In this situation, there is an identifiable wage and even though it is not paid to the client it must be counted as earned income.

2. Situation #2: The applicant/recipient barters for services. There is an exchange of services for which no income should be counted. For example, an applicant or recipient receives shelter at no cost in exchange for babysitting and housekeeping services.

305.5 INCOME OF EXCLUDED CHILDREN REQUIRED TO BE IN THE ASSISTANCE UNIT - When a child is excluded from the assistance unit due to lack of verification of categorical requirements for the child (See 201.1.A.), or when such child fails or refuses to meet conditions of eligibility (See 201.1.B), that child's needs will not be included in the assistance unit. The earned and unearned income of that child, however, will be considered available to the assistance unit. The earned income disregards are applicable per Section 305.3.B. If the child's income cannot be verified, eligibility for the assistance unit cannot be established. (Refer to Section 305.1.E.3.)

If the child has been determined categorically ineligible to be in the assistance unit, no part of his income will be considered available to the assistance unit, unless it is actually made available to the unit. (See 201.12.A and D for treatment of income of the child subject to the family cap provision.)

to meet conditions of eligibility (See 201.1.B), that child's needs will not be included in the assistance unit. The earned and unearned income of that child, however, will be considered available to the assistance unit. The earned income disregards are applicable per Section 305.3.B. If the child's income cannot be verified, eligibility for the assistance unit cannot be established. (Refer to Section 305.1.E.3.)

If the child has been determined categorically ineligible to be in the assistance unit, no part of his income will be considered available to the assistance unit, unless it is actually made available to the unit. (See 201.12.A and D for treatment of income and resources of the child subject to the family cap provision.)

Maximum Income Chart

Size of Assistance Unit	Group I	Group II	Group III
1	$270	$322	$ 450
2	424	475	605
3	546	596	727
4	662	714	845
5	781	845	1003
6	875	942	1097
7	990	1055	1212
8	1113	1177	1334
9	1215	1280	1441
10	1328	1395	1550
Each person above 10	113	113	113

TANF Grant Calculations

Step (1) Compare total gross countable income of all members of the assistance unit against the maximum income level (see Appendix **1** to Section 305).

The earned income disregards **of Section 305.1A.1** apply to this step.

If income of the A.U. exceeds the maximum income figure, the case is ineligible. If the income of the assistance unit equals or is less than the maximum income figure go to Step 2.

Step (2) To be used for screening initial applications and persons being added to an existing assistance unit. In the following order:

(a) Determine monthly gross countable earned income for the assistance unit.

(b) Deduct the standard deduction, as defined in Section **305.1A.2**, from total gross earned income of the assistance unit if the **case** qualifies for this disregard and the income is not exempted.

(c) Deduct 20% of the remainder of the gross income.*

(d) Deduct anticipated expenses up to the allowable maximum as specified in Section 305.3.B.**5**. for care of each dependent child or each incapacitated adult included in the A.U. if the employed person qualified for this disregard.

(**e**) Add any unearned income to the adjusted gross earnings.

(**f**) Screen the remaining income against the standard of assistance for the appropriate locality. If there is no deficit, eligibility does not exist. If there is a deficit, go to Step 3.

Step (3) (a) Determine monthly gross countable income for the assistance unit. In the following order:

(b) Deduct the standard deduction as defined in Section **305.1A.2 if the** income is not exempt **and** if the **AU** qualifies for this disregard.

*** 22 VAC 40-295-60**

(c) Deduct **20% of the remainder* of the assistance unit's** earned income if the assistance unit qualifies for this disregard.

(**d**) Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.**5**. for care of each incapacitated adult/child, if **appropriate,** included in the assistance unit if the member qualifies for this disregard.

(**e**) Add any unearned income to the adjusted gross earnings. The result is net countable income. Note: The TANF Match Payment is NOT countable unearned income.

Step (4) (a) Choose the appropriate Standard of Assistance for the applicant and all members of the assistance unit from the appropriate locality group (Section 304, Appendices 1 and 2).

(b) Subtract the net income, including any unearned income from the Standard of Assistance.

(c) If there is a deficit of $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF and will be carried as an active TANF case.

*** 22 VAC 40-295-60**

SSA Quarters of Coverage Verification Procedures for Aliens

For aliens sponsored pursuant to the "Affidavit of Support Under Section 213 of the Act," the sponsor's obligation terminates if the alien has worked or can be credited with 40 quarters of qualified work. This appendix, in conjunction with the State Verification Exchange System (SVES) User Guide, contains the process for determining the number of qualifying quarters with which an alien can be credited.

To determine the number of quarters available to an eligible alien unit member, the EW must obtain answers to the following questions:

1. How many years has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) lived in this country?

2. How many years has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) commuted to work in the U.S. from another country before coming to the U.S. to live, or worked abroad for a U.S. company or in self-employment while a legal resident of the U.S.?

   (If the total number of years to both questions is less than 10 years, the agency does not need to ask question 3 because the 40-quarter standard cannot be met.)

3. In how many of the years reported in answer to question 1, did the applicant, the applicant's spouse, or the applicant's parent earn money through work?

   (To determine whether the applicant's earnings were sufficient to establish "quarters of coverage" in those years, the agency should refer to the income chart included in this appendix.)

If the answer to question 3 is 10 years or more, the EW must verify, from **USCIS** documents or other documents, the date of entry into the country for the applicant, spouse and/or parent. If the dates are consistent with having 10 or more years of work, an inquiry through SVES must be made.

The applicant must complete the "Consent for Release of Information" (copy on page 4 of this appendix) by providing full name, social security number and date of birth of each individual (self, spouse, or parent) whose work history is relevant to the sponsor deeming determination. In addition, the applicant must provide a consent form signed by each such individual, except deceased persons, giving SSA permission to release information through SVES on that individual to the agency and/or the applicant. The form must be retained in the case file to document the individual's consent. A consent form is valid for 12 months from the time of the signature.

Information received through SVES will not report earnings for the current year nor possibly the last year's earnings. The alien must provide verification of earnings through pay stubs, W-2 forms, tax records, employer records, or other documents, if the quarters of this period is needed to determine if the sponsor's obligation must continue or is terminated.

If the alien believes the information from SSA is inaccurate or incomplete, beyond the current two-year lag period, the alien must be advised to provide the verification to SSA to correct the inaccurate income records.

In evaluating the verification received directly from the alien or through SVES, the EW must exclude any quarter, beginning January 1997, in which the person who earned the quarter received benefits from TANF, SSI, or Medicaid, or Food Stamp Programs or the food assistance block grant program in Puerto Rico.
In situations when consent to release information through SVES cannot be obtained from a parent or spouse, other than death, information about quarters of coverage must be requested directly from the Social Security Administration. The applicant or EW must complete the Request for Quarters of Coverage (QC) History Based on Relation form, SSA-513. The form must be completed to specify the period(s) for which the verification is requested. The completed form must be submitted to:

Social Security Administration
P.O. Box 17750
Baltimore, Maryland 21235-0001

When the SSA is unable to determine if a quarter should be allowed, the SVES inquiry will show "Z" or "#" codes. If an applicant cannot meet the 40-quarter minimum without using a questionable quarter, SSA will investigate the questionable quarter(s) and will either confirm or deny the quarter. Form SSA 512, "Request to Resolve Questionable Quarters of Coverage (QC)," must be used to resolve quarters before 1978. A copy of the SVES report must accompany the completed form. Form 512 must be submitted to the address above to the attention of the Office of Central Records Operations.

For questionable quarters for 1978 or later, the applicant must complete Form SSA-7008. "Request for Correction of Earnings." This form is available at local SSA offices. The completed form, annotated at the top with "Welfare Reform," and proof of earnings must be submitted to:

Social Security Administration
Office of Central Records Operations
P.O. Box 17752
Baltimore, Maryland 21235-0001

Establishing Quarters

The term "quarter" means the 3-calendar-month periods ending with March 31, June 30, September 30 and December 31 of any year.

Social Security credits (formerly called "quarters of coverage") are earned by working at a job or as a self-employed individual. A maximum of four credits can be earned each year.

For 1978 and later, credits are based solely on the total yearly amount of earnings. All types of earnings follow this rule. The amount of earnings needed to earn a credit increases and is different for each year. The amount of earnings needed for each credit and the amount needed for a year in order to receive four credits are listed below.

Year	Quarter Minimum	Annual Minimum	Year	Quarter Minimum	Annual Minimum
1978	$250	$1000	1990	$520	$2080
1979	$260	$1040	1991	$540	$2160
1980	$290	$1160	1992	$570	$2280
1981	$310	$1240	1993	$590	$2360
1982	$340	$1360	1994	$620	$2480
1983	$370	$1480	1995	$630	$2520
1984	$390	$1560	1996	$640	$2560
1985	$410	$1640	1997	$670	$2680
1986	$440	$1760	1998	$700	$2800
1987	$460	$1840	1999	$740	$2960
1988	$470	$1880	2000	$780	$3120
1989	$500	$2000	**2001**	**$830**	**$3320**

A current year quarter may be included in the 40-quarter computation. Use the current year amount as the divisor to determine the number of quarters available.

If you need to use quarters before 1978:

- A credit was earned for each calendar quarter in which an individual was paid $50 or more in wages (including agricultural wages for 1951 - 1955);
- Four credits were earned for each taxable year in which an individual's net earnings from self-employment were $400 or more; and/or
- A credit was earned for each $100 (limited to a total of 4) of agricultural wages paid during the year for years 1955 through 1977.

Social Security Administration

Consent for Release of Information

TO: Social Security Administration

_____ _____ _____
Name Date of Birth Social Security Number

I authorize the Social Security Administration to release information or records about me to:

NAME ADDRESS

_____ _____

_____ _____

_____ _____

I want this information released because:

_____

_____

_____

_____

(There may be a charge for releasing information.)

Please release the following information:

___ Social Security Number
___ Identifying information (includes date and place of birth, parents' names)
___ Monthly Social Security benefit amount
___ Monthly Supplemental Security Income payment amount
___ Information about benefits/payments I received from _____ to _____
___ Information about my Medicare claim/coverage from _____ to _____
(specify) _____
___ Medical records
___ Record(s) from my file (specify)_____

Other (specify) _____

I am the individual to whom the information/record applies or that person's parent (if a minor) or legal guardian. I know that if I make any representation which I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Signature:_____
(Show signatures, names, and addresses of two people if signed by mark.)

Date:_____ Relationship:_____

SSA-3288

OMB No:0960-0575

Date of Request_____

REQUEST TO RESOLVE QUESTIONABLE QUARTERS OF COVERAGE (QC)

Complete the information below when the QC array contains either a (#) pound sign or code "Z" prior to 1978. Mail the form and a copy of the system's printout to the Social Security Administration, P.O. Box 17750, Baltimore, MD 21235-0001.

Print Name:

Last First MI

SSN:_____-____-_____ **Date of Birth:**_____-_____-_____
MM DD YY

Request Years

19_____, **19**_____, **19**_____, **19**_____, **19**_____, **19**_____,

19_____, **19**_____, **19**_____, **19**_____, **19**_____, **19**_____,

OR

19_____ **thru 19**_____ **19**_____ **thru 19**_____ **19**_____ **thru 19**_____

State's Name & Address _____

_____

_____

_____

Contact Person's Name _____

&

Telephone Number _____

The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB control number.

SSA-512

Date of Request _____ OMB NO.: 0960-0575

Request for Quarters of Coverage (QC) History Based on Relationship

Complete the information below when requesting QC history for spouse(s) or parent(s) of a lawfully admitted non-citizen. Mail the form to the Social Security Administration, P.O. Box 17750, Baltimore, MD 21235-0001.

Print Name: _____, _____ _____
Last First M.I.

SSN: _____-____-_____ **Date of Birth:** _____-_____-_____
MM DD YY

Relationship to Applicant: _____

NOTE: COMPLETE THE YEAR COLUMN AND CIRCLE THE PERTINENT QUARTER(S) FOR THE YEAR. SSA WILL PROVIDE INFORMATION ONLY FOR YEARS AND QUARTERS YOU INDICATE.

	QC PATTERN					QC PATTERN			
Year	**1st Q**	**2nd Q**	**3rd Q**	**4th Q**	**Year**	**1st Q**	**2nd Q**	**3rd Q**	**4th Q**

State's Name & Address _____
_____
_____

Contact Person's Name & Telephone Number _____
_____

Form SSA-513 (9/97)

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Appendix I - Virginia Legal Aid Projects
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401.1 BASIC REQUIREMENTS REGARDING APPLICATION -

A. Request for Assistance - Federal regulations* require that any individual wishing to do so shall have the opportunity to apply for whatever type of federal assistance he chooses. This means that no individual can be denied the right to make application for public assistance, even though they may be potentially eligible in another federal program, e.g., SSI. The worker should assist the individual in selecting the appropriate categories of assistance. It is mandatory that the opportunity to apply be freely available and that no obstacles to application be imposed. An inquiry,** which is simply a request for information about eligibility requirements, is to be distinguished from an application. No case folder is to be prepared for an inquiry and no case number assigned. An Inquiry Book, or comparable record, must be kept in each local office for recording the date and notice of each inquiry and the name of the person seeking information.

A request for TANF must include, if living in the same household, the parent(s) and all minor siblings (both natural and adoptive) of the dependent child for whom assistance is requested. The eligibility worker will assist the applicant/recipient in determining who must be included in the request for assistance. If a child for whom assistance is requested is not eligible because categorical requirements are not met, he is a SSI recipient, he receives foster care maintenance payments, **or** he is a child subject to the family cap provision, he will not be included in the assistance unit and his income will not be considered available to the assistance unit.

When a parent or sibling enters the household or circumstances change that may require a parent or sibling living in the home to be included in the assistance unit, his eligibility for inclusion in the assistance unit must be evaluated. The new individual will be considered to be included in the application as of the day he enters the household or, if already residing with the unit, the day the individual's circumstances change requiring him to be included in the unit. A newborn is considered to be included as of his date of birth. The family cap provision per 201.12 may apply to a child born on or after May 1, 1996. If the caretaker refuses to provide the information about an individual required to be included in the assistance unit, it may not be possible to determine the unit's eligibility or payment.

* 45 CFR 206.10(a)(1) and (2)
** 45 CFR 206.10(b)(2)

The Food Stamp Act of 1997 requires that each applicant who is applying for TANF and also wishes to apply for food stamps must be allowed to do so in one interview if all members of the TANF assistance unit will be the same as those individuals who comprise the food stamp household.*

All applications for TANF, except on those on which the household has indicated that it does not want food stamps, shall be regarded as food stamp applications. (At application the household will indicate if it does not want food stamps.) If the household's intention to apply for food stamps is unclear, the local agency shall determine at the interview, or in other contact with the household, whether or not the household wants to apply for food stamps. The local agency shall conduct a single interview at initial application for both TANF and food stamps purposes. TANF households shall not be required to see a different eligibility worker or otherwise be subjected to two interview requirements to obtain the benefits of both programs. (Refer to the Food Stamp Certification Manual, Volume V, Part II, H.)

B. Where/How Applications are Made – **Application forms must be made freely available to the public upon request.** The request for assistance must be made at the local department of social services in the county/city in which the applicant resides on either a permanent or temporary basis. The application is usually completed in the local department and an intake interview conducted.

Any individual may request that an application be mailed to him. This must be done. An applicant may also file the TANF application by fax or other electronic means to the extent that the local agency can receive such a filing. In these situations the applicant must be advised that an interview with an eligibility worker is required in order to complete the processing of the application. This interview must be scheduled at the earliest date convenient to the applicant and may be conducted either in the local department or in the applicant's home, whichever is more feasible. **Any individual also may request an application on someone else's behalf. If an individual requests an application on someone else's behalf, the local department must provide an application to the individual or mail the application directly to the person on whose behalf the application has been requested.**

C. Definition of Applicant** - In TANF, the applicant is the parent or relative of specified degree with whom the child is living who has, either directly or through an authorized representative, made application for assistance and whose eligibility has not been determined. An authorized representative must be at least 18 years of age and must have sufficient knowledge of the applicant's circumstances to provide the necessary information. The authorized representative is usually a spouse, a guardian, or another relative who is able to provide the essential information. If there is doubt about whether an individual has been authorized to act on behalf of the applicant, the applicant must be contacted to verify that she/he wishes the other person to act for her/him and a signed statement must be obtained from the applicant and filed in the case record.

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* 7 CFR 273.2(j)
** 45 CFR 206.10(b)(1)

An applicant may be assisted in the various aspects of the application process, if he so desires, by an individual(s) of his choice (who need not be a lawyer) and may be accompanied or represented by such individual(s) in subsequent contacts with the agency.*

* 45 CFR 206.10(a)(1)(iii)

D. Who Completes the Application - **If an individual is able to complete the application him or herself, the individual should do so. However, the local agency must assist individuals who have disabilities or language barriers who need assistance filling out the application. This help may consist of reading the application to the individual, explaining the meaning of the questions on the application, writing in the answers, or providing other forms of help. The local agency must inform all applicants verbally that this help is available when the DSS office provides the individual with the application, and must offer this assistance during the interview if there is an indication that the individual has had difficulty completing the application. If the individual needs help completing the application, this help must be provided.** If help is needed, the interactive interview must include time to read each section of the application to the applicant, with sufficient explanation and rephrasing to make the meaning clear. During the interview the eligibility worker will enter the information provided into the ADAPT system.

After the interview is completed, the information entered must be reviewed with the applicant. The eligibility worker must also read and explain to the applicant/spouse the statements pertaining to the applicant's responsibilities. Only the signature of the person making the application is required. The signature of the spouse should be obtained if possible but the absence of the spouse's signature will not negate the validity of an application. Additionally, when a minor parent requests assistance for her child and her parent(s), the signature of the minor parent's parent(s) or person standing in loco parentis should be obtained if possible but the absence of this signature will not negate the validity of the application.

If the applicant wishes to change any of the information he has provided or any information as it appears on the application, the worker must make the change in the ADAPT system.

When the application is completed by an authorized representative, it must be signed by such individual. The worker must also explain the responsibility for providing accurate information and the penalties for withholding or providing false statements.

E. Time Standard for Processing Application - The local agency must provide assistance units that complete the initial application process a decision on their application within 30 calendar days following the application filing date. This time standard covers the day following the date of receipt of the signed application to the date the assistance check or the notification of denial of assistance is mailed to the applicant. (The applicant must be informed of the time standard at the time of application.)

1. Exception to the 30 day processing standard may apply when:

   a. the applicant has limitations that hinder him from securing verifications. In this instance the local agency must assist the applicant in securing verifications. The BDOA will be the first of the month following the month of application.

   b. an emergency beyond the agency's control occurs - If an agency delay occurs, and the application was otherwise eligible, the BDOA must be the date of application.

2. At no time should the application remain pending beyond 60 days.

If action is not taken within the time standard, the case record must show the cause for delay and the applicant must be notified via the notice of action of the status of his application, the reason for delay and his right to appeal.

Each application must be disposed of by a decision of eligibility or ineligibility, supported by the facts recorded in the case record.

Exception: Applications disposed of for reasons other than approval or denial will be treated in accordance with the provisions of Section 401.1 (J), Disposition of Application under Special Conditions.

Upon action to approve or deny an application, the applicant must be notified immediately that assistance has been authorized, including the amount of the money payment, or that his application has been denied. The notice must include a statement of the reasons for the action and an explanation of the individual's right to appeal.* Notice to Client of Action must be used to notify the applicant of approval, denial, or delay beyond the time standard.

F. Method of Application - The local department shall require the applicant to complete the Request for Assistance (032-03-875) and Statement of Facts (SOF) generated by ADAPT. If the applicant is unable to come in for an interactive interview or a manual document is needed for any other reason, the application form prescribed by the State agency which must be used is: the Application for Benefits (032-03-824).

When the initial request is made in the local agency, the individual must be given the opportunity of completing his application on the day assistance is requested. If an interactive interview cannot be conducted on the day assistance is requested, the agency must arrange an interview at the earliest date convenient to the applicant. If the applicant wishes, he may be given an Application for Benefits form to complete elsewhere.

The applicant must be informed that if he withholds or gives false information which affects his eligibility for assistance that he is subject to the penalties of perjury.** It is important that the client understand fully his responsibility for the accuracy and completeness of his statements and the consequence if he withholds or gives false information.

G. Date of Application - The date of application is the date the signed Request for Assistance or the Application for Benefits form is received by the local agency. If the application form is mailed in or brought in, the date of receipt by the agency must be stamped thereon to identify the date of application.

1. Persons Added to an Ongoing Case

a. The date of application for adding a required unit member to an approved TANF case is:

1) The date the individual entered the home if it is reported timely; or

2) The date it is reported that the individual is in the home if not reported timely.

* 45 CFR 206.10(a)(4)
** Code of Virginia, Section 63.1-107.1

b. If the individual requesting to be added to an approved case is not a required unit member, the date of application is the date of the individual's request.

2. Persons Added to a Pending Application - When an individual is added to a pending application, the individual's date of application is the same as for the application already pending.

H. Effective Date - The term "effective date" **is the same date as the beginning date of assistance** means the first of the month for which the check is applicable, or in the case of termination/suspension, the last day of the appropriate month. (Exception: The effective date for applications approved in the month of application is the date of authorization.)

I. Beginning Date of Assistance (BDOA) - When eligibility for financial assistance is determined **within 30 days following the date of application**, eligibility shall begin effective the date of **application**. The date of **application** is the date the **signed application was received by the local agency.** No payment shall be made for a period prior to the date of **application.**

If eligibility is not determined **within 30 days following the date the application was received,** the BDOA will be the first of the next month (month following the month in which the application is received, provided eligibility is determined to exist).

Eligibility must be determined for each month of the application period. Applicants may be ineligible for the month of application and the month of processing, however, if eligibility exist for the future month, approve the application, deny benefits in ADAPT for the month of application and the next month, and grant for the future month.

Refer to Section 401.2.B.2.c. and d. for adding persons to an existing case.

J. Disposition of Application Under Special Conditions* - An application may be disposed of for reasons other than approval or denial under the following special conditions. In such cases the "Notice to Client of Action" must be sent.

1. Withdrawal - An applicant may voluntarily withdraw his application at any time during the initial determination of eligibility. This may be done by a signed statement indicating the wish to withdraw the application or may be done by verbal request. The "Notice of Action" must be sent to confirm the applicant's notification that he wishes to withdraw. It can be printed and given to the applicant during the interactive interview.

2. Inability to Locate - If reasonable efforts to locate the applicant are unsuccessful, the agency must include on the notice to client of action the agency's attempts to locate him or request that he contact the agency. If the applicant does not contact the agency so that a decision can be made within the time standard, the application will be denied.

3. Death - If the applicant dies before action can be taken on his case, his application is denied and a letter must be sent to the next of kin, if known, advising that an application for public assistance on behalf of the eligible children had been made and is being denied. The case record must contain verification of death, including the date of death.

When an application is disposed of under one of the conditions described above, board action on the case is not required, but the basis for termination must be recorded in the case record. Cases denied under these conditions are recorded statistically as applications withdrawn and should be reported to the local board at its next meeting.

* 45 CFR 206.10(a)(8)

401.2 INITIAL DETERMINATION/REDETERMINATION OF ELIGIBILITY -

Methods for initial determination and redetermination of eligibility shall be consistent with the objectives of the program and shall respect the rights of individuals under the U. S. Constitution, the Social Security Act, Title VI of the Civil Rights Act of 1964, and all other relevant provisions of the State and federal law.*

A. The Intake Interview -

Each determination of eligibility will include a personal interview with the applicant/recipient, or the caretaker-relative of the needy children. The number of interviews will depend on the individual situation. The interviews are scheduled with the least possible delay on the basis of joint planning by the client.

If an applicant is unable to come to the local agency for an interview, the agency may waive the in-office interview and conduct a phone interview, home visit, meet elsewhere, or interview an authorized representative. The agency must waive the face-to-face interview on a case-by-case basis depending on individual circumstances that include, but are not limited to, disability, illness, care of a household member, hardship due to residency in a rural area, prolonged severe weather, work or training hours during normal agency office hours, situations where residents of shelters for battered women and children would be endangered if they were to leave the shelter, or transportation difficulties. The local agency must determine if the reason for the request warrants a waiver of the office interview. The agency must document the case file if it grants or denies a request for a waiver.

The setting that is chosen for each interview is that which best serves the purpose of the interview and is most satisfactory for the applicant/recipient and the agency.

If the applicant formerly applied for or received assistance, the worker should familiarize himself with the content of the record before the interview, in order to plan for a helpful and appropriate interview.

The purposes of the interview are:

(1) To make certain that information provided is complete and accurately represents what the applicant wants to say about his circumstances.

(2) To ensure that the request for assistance includes the parent(s) and all minor siblings (both natural and adoptive) living in the home with the dependent child(ren) for whom assistance is requested.

(3) To determine what information provided needs further substantiation and what, if any, additional information or substantiating evidence is needed to establish eligibility.

* 45 CFR 206.10(a)(10)

(4) To obtain the additional information needed for a decision as to definitive eligibility.

(5) To explain to the applicant the provisions of the Division of Child Support Enforcement and the right to claim good cause for refusing to cooperate. The worker must also explain provisions regarding continued DCSE services following the termination of assistance.

(6) To explain to the applicant his rights and responsibilities.

(7) To inform the applicant of the services the agency provides.

(8) To inform the applicant that he may be selected to participate in an audit for a complete verification of information.

(9) To inform the applicant(s) of the family cap provision.

(10) To ensure that any necessary help is provided to individuals who might otherwise have difficulty completing the application for literacy, language, or disability-related reasons.

B. Substantiation of Eligibility Factors

1. Initial Eligibility

The applicant must be advised of the need to substantiate the eligibility factors (e.g., categorical requirements and income) and that he may have in his possession the necessary evidence to establish eligibility. The responsibility of the eligibility worker is to secure, evaluate, substantiate, and record the facts regarding each element of eligibility, including the date of substantiation and the method of securing the information. This information must be entered into the applicant's ADAPT case file to the extent possible. In addition, the worker must complete the Permanent Verification Log (032-03-823A) and either the Evaluation of Eligibility Form (032-03-823) or the ADAPT Verification Form (032-03-366) to record all other information obtained in evaluating eligibility and the benefit amount.

At the time of application, there should be a joint decision between the client and the worker as to how necessary verification will be secured and who will assume the responsibility for securing each. T**he worker must provide any assistance unit, that needs and wants help, assistance in obtaining any necessary verifications. If the individual has a disability that impairs the individual's ability to gather the information necessary to establish eligibility for benefits, the worker must offer to assist the individual in gathering such information. In addition, if after the worker and applicant initially divide the responsibility for obtaining verification the applicant is, due to a disability, unable to secure information he or she agreed to obtain, the worker must revise the initial division responsibility and assist with obtaining additional information.**

If, after advising the applicant of the necessary information, the applicant is reluctant or unwilling to provide verifications and refuses to permit the worker to secure them, the worker must consider carefully with him his reasons and explain that without the required verification, eligibility cannot be established. Exception: If the client is unable or refuses to provide verification of categorical requirements for a child who is required to be included in the assistance unit or if the child does not meet the conditions of eligibility, that child will be excluded; however, it may be possible to determine eligibility for the remaining assistance unit members.

If the client decides to assume the responsibility for obtaining the required verification, he must be advised that the information must be provided to the agency within ten (10) days and that failure to do so may affect the decision of eligibility. If the client cannot obtain the necessary information, because of circumstances beyond

his control, and requests the worker's assistance in securing such information, the agency worker must then assume the responsibility for obtaining the needed verification.

When the responsibility for obtaining verification has been assumed by the worker, the client must be advised that if the agency or person from whom verification has been requested does not respond to the request, eligibility cannot be established. In these situations, the Notice to Client of Action must be sent and the case record documented to reflect attempts made to obtain verification. Copies of all relative correspondence must also be in the case record.

If eligibility is established within the original **30**-day processing time, the original application date is protected when an application is denied as a result of lack of required verification. The initial application date must be used if subsequent information substantiates the applicant's eligibility. (See 401.3.F.5.)

2. Ongoing Eligibility

When changes occur within the renewal period that affect eligibility or benefit amount, the agency must evaluate the change and take action to adjust the benefit amount, if necessary. The responsibility for changes lies with both the recipient and local agency. The assistance unit must report changes in income and assistance status. Unless exempt, ongoing cases are subject to interim reporting requirements and must file an Interim Report about their circumstances between renewals. The agency must make adjustments in entitlement and benefit amount based on reported changes and for changes the agency initiates.

a. Changes That Must Be Reported

1) The following changes must be reported by the assistance unit following case approval:

- Changes in address (a new physical or mailing address); and
- Changes in income that place the monthly income of the assistance unit (composition at approval or most recent renewal) above 130 percent of the federal poverty level (FPL).
- That an eligible child has left the home.

Assistance units must report the changes listed above within 10 calendar days from the date the unit knows of the change, but the report is timely if reported by the tenth of the following month. The 10-day period begins the day the change becomes known to the assistance unit. If the assistance unit is uncertain of the exact date or the exact amount of income that has changed, the 10-day reporting period begins the day the change occurs. The

change may be reported on the Change Report form, by telephone, face-to-face, by mail, or electronically.

The unit may also report a change of its circumstances with the filing of the Interim Report. Changes may be reported by an assistance unit member or any person having knowledge of the assistance unit's circumstances. When the report is made by mail, it may not reach the local agency within the 10-day period. The assistance unit will have met the reporting requirement if the letter is postmarked within the 10-day period. Substantiation of eligibility factors or verification of any change requested by the worker must be provided by the recipient as soon as possible but no later than 10 days from the date the information is requested.

2) Local Agency Action on Changes

The agency must act promptly to terminate or to adjust benefits when changes in the assistance unit’s circumstances or income are reported by the recipient, including information about an impending change reported at application.
The TANF case must reflect the following changes:

- changes reported by the assistance unit;
- changes put into ADAPT to meet reporting or policy requirements of another program;
- changes to prevent duplicate receipt of benefits; and
- changes that are considered verified upon receipt, such as notification by the foster care worker that a child has been removed from the home and placed in foster care.

Other information may become known to the agency through other means than listed above. If the change is one that the assistance unit was required to report, the agency must act on the information. If the change is a change that was not required to be reported, the agency must hold the information and evaluate it at the next interim report or renewal, whichever comes first.

Action will be taken according to Section 305.1, page 11.

b. Substantiation of Eligibility - The recipient must be advised of the need to substantiate eligibility factors whenever a change is reported. When changes that affect eligibility or payment amount occur after the case has been approved, the responsibility for the change lies both with the recipient and the local agency.

If required verification is not obtained or provided in time to prospectively determine eligibility for the next payment or to complete a redetermination by the due date, continuing eligibility cannot be determined and the case will be suspended for one month only. If verification is still not provided, the case will be closed for the month following the month of suspension. (See 401.3.G.4.)

If verification is provided after the action to suspend has been taken, the worker will reinstate assistance for the month of suspension, if appropriate. Or, if verification which establishes continued eligibility is provided after action to close has been taken but before the effective date of closure, the worker will reinstate assistance effective with the month closure was to occur.

c. Adding Persons Required To Be in the Assistance Unit - The assistance unit must report a new unit member when completing a renewal or Interim Report. If a new unit member enters the home between renewals or Interim Report filing, the report is considered timely provided the individual entered the home after the most recent renewal or Interim Report was completed.

The change to add a person required to be in the assistance unit must be made by the agency within 30 days following the date the new member was reported.

1) Eligibility for Payments – Once the agency has secured verification of categorical requirements and conditions of eligibility have been met, the individual's needs and income are to be included in determining eligibility and the amount of future payments.

If verifications and conditions of eligibility are substantiated within the 30-day time frame for adding persons or the 30-day period has passed and the agency can document that the delay in providing categorical verifications/meeting eligibility conditions was due to good cause (beyond the assistance unit's control), payments beginning with the date the change was reported must be recalculated considering the individual's needs and income.

Regardless of whether the new individual's presence is reported timely, if the required categorical verifications are not provided or the conditions of eligibility are not met until after the 30-day time frame established for adding the individual, and the delay was not due to good cause (beyond the assistance unit's control), eligibility for retroactive payments is to be determined beginning with the date the last required verification was received by the agency or condition of eligibility was met. Any underpayments identified must be corrected.

The above procedures will require the proration of the first month's assistance in most instances. (Refer to Section 502.2.A.)

NOTE: Refer to 201.12 for the family cap provision which affects newborn children, some adopted children, and the child subject to the family cap provision who moves back into a parent's home.

2) Repayment of Overpayments - If the new individual was not reported timely, overpayments may exist. Follow procedures in Section 503.7.G. to calculate the amount overpaid.

Example: A parent enters the home on October 15 but is not reported to the agency until January 8 of the following year. The last renewal was completed in November, one month after the parent entered the home. All months beginning with the month after the parent entered the home must be evaluated for possible overpayments.

d. Adding Other Persons - A request to add an individual not required to be in the unit, such as a caretaker-relative other than a parent or EWB, will be processed within the normal **30**-day application processing time frame, with eligibility effective no later than the month following receipt of the request per Section 401.1.I.

3. Evaluation of Reported Information - To ensure the applicant/recipient has provided all information necessary for the worker to make a proper determination regarding eligibility, every element on the SOF must be discussed with the client at each application or renewal.

Additionally, when a change is reported by the client, all elements related to the change must be reviewed to ensure continuing eligibility exists.

When statements, either written or verbal, made by the client are deemed questionable, further evaluation of the client's circumstances is required. Questionable information will include, but is not limited to, statements which are:

a. incomplete or unclear;

b. inconsistent with statements previously made by the applicant/recipient;

c. inconsistent with information known by the local agency.

4. Income v. Expenses - In situations where it is obvious the client's monthly expenses exceed verified income, the worker shall discuss with the client how monthly expenses are being met. The worker may not require verification of the client's expenses as a condition of

eligibility. Furthermore, assistance may not be denied or terminated based solely on statements made by the client. Rather, the worker shall take this opportunity to explore the client's situation to determine if unreported income is available which allows the assistance unit to meet monthly expenses. The case record must be clearly documented to accurately reflect the client's substantiation of his/her situation. If the worker and the client are unable to resolve the client's circumstances, attempts to do so must also be documented in the case record. It is important to remember, however, that assistance can only be denied/terminated when income is uncovered which, when verified, exceeds prescribed limits or when the client acknowledges he has unreported income but refuses to verify the source and/or amount.

5. Follow-Up on Suspected Unreported Income - When the agency has reason to believe that a recipient is receiving income that has not been reported, the eligibility worker will follow-up on obtaining information to substantiate the recipient's circumstances. Community complaints, expenses exceeding income, a history of not reporting, and cases with individuals living with the assistance unit whose income would be deemed available are examples of the situations which may indicate the need to solicit additional income information. Forms are available in ADAPT that may be used for this purpose. The case record must be documented regarding the agency's reason for sending the income form. However, the income form is not an eligibility requirement; therefore, negative action cannot be taken for failure to return the form. If the agency chooses not to use the income form, the case record must contain documentation of the attempts to clarify the possibility of unreported income.

C. Face-to-Face Interviews – **Unless waived,** a face-to-face interview by the eligibility worker is required at the time of initial determination and at least every 12 months thereafter. The face-to-face interview shall be used to obtain verification and to secure information necessary to complete the application/redetermination process. The interview may be conducted in the office of the local agency, the home of the applicant/recipient, or a place agreeable to both parties. Home visits may be deemed necessary or appropriate by the local department.

Practices Specifically Prohibited - The following practices are specifically prohibited:

(a) Entering a home by force, without knocking or under false pretenses.

(b) Making home visits outside of working hours, unless such a visit cannot be arranged during working hours because of the applicant/recipient's employment, or a home visit has been requested by the applicant/recipient. When such visits are necessary, the case record must be documented accordingly. Making visits other than specified is not acceptable under any circumstances.

(c) Searching in the home, in closets, drawers or papers, etc.

D. Recommendation Regarding Eligibility - The eligibility study must be completed as promptly as possible, but in all cases within the time needed to assure the assistance check, or notice of denial is mailed to the applicant within **30** days following the date of application.* When the eligibility study is completed, the eligibility worker is responsible for making a recommendation of eligibility or ineligibility. The recommendation must be supported by the facts recorded in the eligibility case record.

E. Decision of Eligibility - Federal regulations** require a decision be made promptly on applications, in accordance with the State established time standards, unless the application is disposed of under special conditions.

A decision of eligibility or ineligibility must also be made when eligibility is reconsidered as specified in Section 401.3.***

The Code of Virginia, Sections 63.1-109 and 63.1-114, provides that the decision of eligibility is the responsibility of the local board. However, the Superintendent is to take action with regard to eligibility if the local board does not act within the specified time limits or if the circumstances require immediate assistance to prevent hardships or other action. The superintendent's action in such instances is official and not subject to confirmation by the local board; the case must be presented to the local board at the next meeting, however, for action on continuing eligibility.

Case Action - This is the formal agency action and is required with respect to initial determination of eligibility and, if eligibility exists, the amount of assistance and BDOA; persons eligible for assistance; method of payment and designation of payee, if other than eligible person; changes in amount of assistance payment; ineligibility for assistance.

All case actions must include the effective date of the action taken. In actions regarding an initial payment, this will be the BDOA.

* 45 CFR 206.10(a)(3)
** 45 CFR 206.10(a)(8)
*** 45 CFR 206.10(a)(9)

401.3 RENEWAL OF ELIGIBILITY - Eligibility for TANF recipients must be redetermined on all eligibility factors subject to change at least every 12 months, unless a shorter renewal period is required by Food Stamps.

A. A renewal of eligibility cannot be considered complete and the renewal date cannot be updated in ADAPT until the following requirements have been met:

1. All elements must be reevaluated and substantiated except date of birth; relationship, if the caretaker remains the same; citizenship; and social security number; or

2. If all required elements have not been reevaluated and substantiated, assistance must be suspended in accordance with Section 401.3 G. The time limit on suspension of assistance (one month unless there is a different reason to suspend for a second month) is applicable to renewal suspensions.

3. The month in which the renewal of eligibility is due to be completed is counted from the date of eligibility (include the month of initial eligibility in this computation) and any changes discovered during the review process should be reflected in the following month, unless such changes are prohibited by the time standards.

Example: Date of Application - July 3
Date of Approval - July 20
BDOA - **July 3**
Renewal Due - June - Effective July 1

Date of Application - July 10
Date of Approval - August 7
BDOA – **July 10**
Renewal Due – **June** - Effective **July 1**

Date of Application - July 21
Date of Approval - September 5
BDOA - August 1
Renewal Due – July - Effective August 1

B. A face-to-face interview must be completed with the recipient once every 12 months.

1. A face-to-face interview may be conducted in the office of the local department of social services, the home of the recipient, or a place agreeable to both parties which will insure privacy and confidentiality. Home visits may be made as deemed necessary by the eligibility worker based on the recipient's circumstances. If a home visit is made, the eligibility worker must complete the redetermination interview using the Application for Benefits or the Eligibility Review form, Parts A and B.

2. The recipient's rights and responsibilities must be reviewed and explained.

C. Joint Processing - The Food Stamp Act of 1977 requires that renewals for TANF and the Food Stamp Program be handled in a single interview when the following conditions exist:

1. When all persons in the case receive TANF and food stamps as the same household, and

2. When the SOF is completed prior to the month or in the same month in which the certification period ends. (Refer to the Food Stamp Certification Manual, Volume V, Part II, H.) The provisions in Section 401.1.A. also apply to renewals.

Joint processing is also required when conducting an Interim Report review. TANF and food stamp cases with the same case number will receive one Interim Report. Information provided must be used to determine both food stamp and TANF eligibility.

D. Overdue Renewals - In the event that a renewal of eligibility is not completed according to the above, the worker will adjust the time frame by scheduling the intervals at no later than 12 months from the month in which the application is completed. Example: The regularly scheduled renewal was due to be completed in January; however, it is not done until March to be effective April 1. The next renewal will be due in March.

E. Establishing Separate Assistance Units - A new application must be completed when an individual or family separates from a family group which is receiving assistance and forms a separate assistance unit. The new application must be processed in accordance with policy.

F. When Completion of a New Application Is Not Required

1. Adding an individual to an existing assistance unit. Verification of all eligibility requirements must be obtained on the new individual and an evaluation of the new assistance unit's need and eligibility must be made. (See 401.2 B.2.c. and d.)

2. A guardian, committee, or personal representative payee is appointed or the payee changes. The new payee, identified as committee or personal representative, must sign a new SOF.

3. Emergency Assistance is granted to a current recipient of TANF.

4. The action to deny an application is reversed by a hearings decision.

5. Action taken to deny an application or close a case as a result of the lack of required verification is reevaluated as a result of information received by the worker within **30 days following** the application date or prior to the effective date of closing and eligibility is determined to exist.(See 401.2.B.)

G. Suspension of Assistance* - The grant may be suspended for one month when the agency has reason to believe that ineligibility will exist for only that month. The grant may be suspended for two consecutive months only when the reason for suspension in the second month is different than the reason for the suspension in the first month. There shall be no instances in which a case is suspended for more than two consecutive months. If the information needed to establish continued eligibility is not provided or renders the case ineligible, the payment for the following month will be terminated and the case closed.

Suspension of a payment is appropriate when:

1. Actual income is being used to calculate the payment according to policy in Section 305.1.B.2. and it is anticipated the recipient will receive a periodic extra pay check in the payment month.

2. Anticipated income causes ineligibility for one month.

3. The agency cannot contact the client and contact is necessary to establish continuing eligibility and the client cannot be located or agency mail to the client has been returned by the post office. The case record must be documented on agency efforts to locate the client. Suspension shall occur as soon as administratively possible.

4. Information needed to verify a change in circumstances or to substantiate eligibility is not provided in time to impact the next payment. (See 401.2.B.2.)

5. The customer fails to appear for a renewal interview.

6. The customer fails to return an Interim Report **(not applicable to FEP cases)**.

7. **The current net monthly support exceeds the current TANF benefit (ADAPT will automatically close the case when net support exceeds the TANF benefit for two consecutive months).**

Exception: The full grant is sanctioned (i.e., the case is eligible for $0 grant) when a VIEW participant is not in compliance with VIEW work requirements. Since the TANF case is not closed for a VIEW sanction, the sanction is imposed by a suspension of the grant using the appropriate suspension code.

H. Interim Reporting - Interim report filing is required for all cases, unless they are exempt from filing as noted below. Assistance units subject to interim reporting must file an Interim Report by the sixth month of the renewal period. The assistance unit composition and financial circumstances reported on the Interim Report will be the basis of the TANF benefit amount for the remainder of the renewal period, unless the assistance unit reports additional changes after filing the Interim Report.

1. Exemption from Filing

a. All adult members of the assistance unit are elderly (60 years of age or older);

* 45 CFR 233.34(d)

b. All adult members of the assistance unit are disabled as evidenced by receipt of income payments, such as SSI or Social Security Disability payments. Refer to the Definitions Section of the Food Stamp Certification Manual for a complete list of persons considered disabled for purposes of interim reporting;

c. All assistance units that are homeless (lack a fixed address and regular nighttime residence). Refer to the Definitions Section of the Food Stamp Certification Manual for a complete definition of persons considered homeless; and

d. **Any adult member of the assistance unit who is a** migrant or seasonal farm worker (worker who **has** to travel to do farm work and who **is** unable to return to **his** permanent residence in the same day while doing farm work on a seasonal or temporary basis). Refer to the Definitions Section of the Food Stamp Certification Manual for complete definitions of migrant and seasonal farmworkers.

e. All payee cases where the payee is a specified relative other than a parent or is a parent receiving SSI.

All other assistance units are subject to interim report filing.

I. Interim Report Filing – An assistance unit that is required to file the Interim Report must have a 12-month renewal period. On or about the twentieth of the fifth month of the renewal period, the State Department of Social Services will create and mail the Interim Report to all assistance units so identified by the EW in ADAPT. Upon identifying cases due an Interim Report and producing the information for the Interim Report each month, the ADAPT system will suspend the case's eligibility. A list of cases sent the Interim Report and a copy of the Interim Report for the household will be available to the local agency through the Data Warehouse.

1. Client Responsibilities

The assistance unit must complete the Interim Report and return it to the local agency by the fifth day of the sixth month. If a change in circumstances is reported, the assistance unit must supply verification of the changed elements. The assistance unit must provide additional information or verifications as requested by the local agency within the time allowed. In TANF only cases, the caretaker (parent or specified relative with whom the child is living) or an authorized representative designated by the caretaker must complete the Interim Report. In joint TANF/Food Stamp households, the form may be completed and signed by any responsible household member or authorized representative.

2. Agency Responsibilities

The local agency must review the list of cases sent the Interim Report against the returned forms. If an assistance unit fails to return the form by the fifth day of the sixth month of the renewal period, the agency must send the assistance unit another form along with the Interim Report Form – Request for Action (032-03-649). The assistance unit will have 10 days from the mail date to return the second Interim Report.

J. Interim Report Evaluation - The agency must assess Interim Report forms received from assistance units **for completeness, accompanied verifications, and reported changes**.

1. Interim Report Returned Timely - If the assistance unit returns the Interim Report timely and there are no changes in circumstances, the EW must rescind the suspension and reinstate the case in ADAPT. If there is a change in eligibility or grant amount as a result of information received on the Interim Report, the grant must be revised and an adequate notice sent.

2. Interim Report Not Returned Timely - If the returned Interim Report is incomplete or lacks required verifications of reported changes, the agency must send the Interim Report Form – Request for Action (032-03-649), and the original Interim Report to the assistance unit. The unit will have 10 days to supply information, verification, or to complete the form. The agency must photocopy the incomplete Interim Report before sending the form back to the assistance unit.

The agency must consider the report incomplete if:

- The form is not signed by an individual listed in Section 401.3.I.1;
- The unit fails to submit verification of changed income, residency, or assistance unit members;
- The unit fails to provide information needed to determine eligibility or benefit level; or
- The unit failed to address all questions.

The EW must use reasonable judgment to determine if the Interim Report is incomplete. For example, if the assistance unit marks “No Change” on the form for income but supplies new pay stubs, the report should not be considered incomplete.

If a completed Interim Report and required verification are returned within the 10-day time frame, the EW must make adjustments, as needed, to reflect information from the Interim Report in eligibility or benefit amount effective the seventh month. The EW must notify the assistance unit of the benefit calculation based on the Interim Report for the

second half of the renewal period and act to reinstate the case in ADAPT after the evaluation of the Interim Report. The agency must provide an adequate notice to notify the assistance unit of the benefit calculation.

3. Interim Report Not Returned or Returned Incomplete - If the assistance unit fails to return the Interim Report or the follow-up Interim Report or if the assistance unit fails to provide needed verifications and the original Interim Report returned for completion, **ADAPT will automatically close the case at the end of the seventh month if the EW has taken no other action on the case. In order for the automatic closure to occur, the EW must leave the case suspended for the seventh month.** The agency does not need to send either an advance or an adequate notice when the assistance unit fails to submit a completed Interim Report or fails to take required actions or to supply requested verifications.

Automatic Closure Example:
A TANF case is approved and assigned a certification period of December 2004 through November 2005. An Interim Report is mailed on or about the 20th of April. ADAPT will
① Suspend the TANF payment effective June 1st
② Close the case effective June 30th, if the worker does not update the system based on information received on the Interim Report.

4. Verification Requirements – In order to determine eligibility for the second half of the renewal period, the assistance unit must supply verification of eligibility factors. The unit must provide the following:

   a. Proof of changed earned or unearned income amounts or source;

   b. Proof of a change in the assistance unit members; and

   c. Proof of other elements. The assistance unit may need to verify other eligibility elements reported on the Interim Report as needed.

   Note: The assistance unit does not need to submit verification of self-employment or contract income that has been averaged.

401.4 NOTIFICATION TO APPLICANT/RECIPIENT - Federal regulations require that adequate and timely notice be sent to applicants and recipients to indicate that assistance has been authorized, denied, increased, reduced, or terminated.

"Adequate" means that the notice is received not later than the effective date of the action and includes a written statement of what action the agency intends to take, the reason for the action and the specific policy supporting the action. In the case of an assistance unit which has no permanent dwelling or fixed address and is otherwise considered homeless, the notice must be available at the local agency or mailed to another destination agreed upon by the client, such as a nonprofit agency or shelter, local post office, etc., to ensure it will arrive at such destination not later than the effective date of the action.

"Timely" means that the notice is mailed, or available at the local agency in the case of an assistance unit which is homeless, at least ten (10) days before the effective date of the action, excluding the date of mailing and the effective date.

In certain situations timely notice is not necessary but adequate notice is always required.

A. Action Requiring Adequate Notice - Adequate notice must be sent to the applicant/recipient* whenever:

1. Case action is taken to approve or deny an application or a request for an increase in grant; or

2. There has been a delay beyond the time standard in acting upon an application or a request for an increase in grant; or

3. Case action is taken to increase the amount of assistance; or

4. Case action is taken to include an additional eligible person in the grant or to change the number of eligible persons if no decrease in assistance results; or

5. Case action is taken to change the payee or the method of payment;

6. An assistance unit is due a revised amount of benefits (increase or decrease) or the unit is ineligible for benefits based on the evaluation of a completed Interim Report.

*45 CFR 206.10(a)(4)

6. A reevaluation of eligibility based on information received within **30 days of the date following the** application date or prior to the effective date of case closing occurs.

The notice shall be sent immediately following the case action or at the expiration of the time standard for processing applications, as appropriate.

The Notice to Client of Action is used for this purpose. The notice shall state the amount of assistance; the amount of the TANF Match Payment (when applicable); the reasons for the action or failure to act and the regulations supporting action taken; and explain the applicant's/recipient's right to request an agency conference and/or to appeal if he disagrees with the action. A copy of the leaflet, "Appeals and Fair Hearings," must be attached to the form if this information is not printed on the back of the form. Fill in the necessary information on the leaflet. (Refer to the Food Stamp Manual, Part XIX, Appendix I, for a list of legal aid offices in the state.) If the appeals and fair hearings information is on the back of the form, the worker must enter information about the local legal aid program on the front of the form.

B. Other Action Requiring Adequate Notice - The form, Advance Notice of Proposed Action, will be used to provide adequate notice in certain situations, however, it is not necessary to send it 10 days prior to the effective date of the action. The notice must reach the client no later than the effective date of action. In any situation listed below, the assistance check will not be mailed in the original amount. The following situations would warrant an adequate notice.*

1. The agency has factual information verifying the death of a recipient or of the payee when there is no relative available to serve as new payee and no person who can serve temporarily as emergency payee.

2. The agency has verified that any member of the unit has been admitted or committed to an institution in which he does not qualify for public assistance.* Note: See policy in 201.5.B to evaluate continued eligibility.

3. The recipient's whereabouts is unknown and agency mail directed to the payee has been returned by the post office indicating no known forwarding address. (The recipient's check must, however, be made available to him if his whereabouts become known during the payment period covered by a returned check.)*

4. A recipient has been accepted for assistance in a new jurisdiction within the state and the locality previously providing assistance has written evidence establishing that fact.*

5. The agency has written evidence that the TANF child(ren) has been removed from the home as a result of a judicial determination or has been voluntarily placed in foster care by his legal guardian.*

* 45 CFR 205.10(a)(4)(ii)

6. A special allowance granted for a specific period (for example, correction of a prior underpayment) is terminated and the recipient has been informed in writing that the allowance shall automatically terminate at the end of the specified period.*

7. When a recipient requests termination of assistance in writing. Such request is made by written statement, signed and dated by the recipient. If the recipient fails to enter the date, the worker must enter the date such statement is received in the agency.*

8. When a recipient becomes a patient receiving skilled care, intermediate care or similar other long term hospitalization. Note: See policy in 201.5.B. to evaluate continued eligibility.

9. When the customer provides a signed, written statement:

   a) providing information which requires termination or reduction of assistance; and

   b) indicating that the customer understands that action to reduce or terminate assistance must be taken in response to the information provided.*

C. Action Requiring Timely Notice - Federal regulations,** require that in certain cases of proposed action to terminate, or reduce assistance, the Advance Notice of Proposed Action must be sent to the client. If a change requires both a reduction or termination in public assistance benefits and a reduction or termination in food stamp benefits, the local agency shall issue a single advance notice of proposed action for both the public assistance and food stamp action.*** Timely notice must be sent to the recipient whenever the case is determined to be ineligible and whenever the grant must be reduced based on a change in the circumstances reported by the client or from any other source.

When the proposed action is to sanction a case for noncompliance with the Virginia Initiative for Employment not Welfare (VIEW), advance notice must be given using the Advance Notice of Proposed Action, 032-03-018/21 (Intranet version). A copy of the notice must be sent to the Employment Services Worker to file in the VIEW record. (Refer to Chapter 1000, pages 58-66.)

* 45 CFR 205.10(a)(4)(ii)
** 45 CFR 206.10(a)(4)(i)
*** 7 CFR 273.12(f)(4)(i)

The following procedures are to be followed in preparing the Advance Notice of Proposed Action Form:

1. The form must be mailed to the recipient at least 10 days, whichever is deemed appropriate in accordance with the definition of "timely," before the action taken is effected.

   a. When the action being taken is a reduction, neither the date of mailing nor the effective date is included in the ten (10) days.

      Example: Advance Notice of Proposed Action is mailed on the 20th day of June, indicating reduction of assistance effective July 1.

   b. When action is being taken to suspend or terminate benefits, neither the date of mailing nor the date of nonissuance (the first day of the following month) is included in the 10 days.

      Example: Advance Notice of Proposed Action is mailed on April 20, indicating that assistance will be terminated effective April 30.

2. The notice must include a statement of what action the agency intends to take.

3. It must include the reasons for proposed action. If the proposed action is to suspend assistance due to the inability to verify a change in the client's circumstances (see Section 401.2.B.2.), the Advance Notice of Proposed Action must also include a statement that if necessary verification is provided, assistance will not be reinstated if such verification renders the case ineligible

4. The specific policy citation requiring the proposed action must be entered.

5. In cases of grant reduction, the new amount of the grant must be entered.

D. Action Requiring TANF Match Payment Change Notice – A TMP change notice will be sent monthly to each TANF case scheduled to receive a TMP in the following month. The State Department of Social Services will send the change notice only to the assistance units actually affected by the change. The notice will include an explanation of fair hearing rights and responsibilities.

   Assistance units must receive the notice no later than the benefit availability date.

E. **IPV Notice Requirements** - Refer to Sections 102.5, 102.8 and 102.13 regarding notice requirements relating to IPV policy and ADH procedures.

F. Neither an advance notice nor an adequate notice is necessary when the assistance unit fails to return a completed Interim Report, provided the agency mailed the assistance unit an Interim Report Form – Request for Action form and another Interim Report or the original incomplete form.

401.5 INFORMATION TO BE GIVEN APPLICANT/RECIPIENT -

In the process of determining eligibility, the worker must provide the applicant/recipient with the following information:

a. The applicant/recipient's responsibility to provide accurate and complete information to the best of his ability.

b. Information Regarding Timely Reporting of Changes

1. Applicants are responsible for reporting required changes within 10 days of the date of the Notice of Action to approve. Required changes that occurred after the face-to-face interview, but before the Notice of Action to approve must be reported within this 10-day time frame.

2. Recipients of TANF must report income changes when the total income exceeds 130 percent of the federal poverty level based on assistance unit size at the time of approval or the Interim Report evaluation, as outlined in Section 401.2.B.2.

3. Recipients are required to report address changes (a new physical or mailing address) within 10 days of the change.

4. Recipients must report when an eligible child leaves the home.

5. VIEW participants are required to report changes in gross countable income of greater than 130 percent of the federal poverty level based on size of the assistance unit, other changes pertinent to participation in VIEW, including changes in the need for supportive services.

6. Assistance units must complete an annual renewal, unless a shorter renewal period is required by Food Stamps. In addition, an interim report must be submitted by the sixth month of the renewal period.

Applicants/recipients must be advised of changes not required to be reported that may increase benefits, such as loss of income and additional family members in the home.

c. Liability for failing to report changes.

d. Methods of Reporting

The Change Report (032-03-051) must be given, with an explanation of its use.

Changes may be reported by telephone, in person, or in writing.

e. The agency's responsibility to complete the application within **30 days following** the date of application or make indicated changes in amount of payment as necessary.

f. The applicant/recipient's right to appeal if action is not taken on his application or request for an increase within the required time period of if he is dissatisfied with the agency's action.

g. The requirements with respect to nondiscrimination.

h. Social services provided by the agency.

i. Family planning and early screening, diagnosis, and treatment.

All applicants must be informed of the availability and importance of preventive health screenings (EPSDT) for children up to age of 21. EPSDT or Early and Periodic Screening, Diagnosis and Treatment is a program that focuses on the early identification of health problems through periodic well-child assessment, immunization and follow-up care to resolve any identified health problems. All Medicaid recipients up to the age of 21 are eligible to receive EPSDT services. EPSDT does not require any additional enrollment procedures. Discussion about EPSDT services should be supplemented by reviewing either the EPSDT section of the Temporary Assistance Programs booklet or the Department of Medical Assistance Services (DMAS) EPSDT brochure with the applicant.

Most recipients will be enrolled in a Medicaid managed care program and, as a result, should be encouraged to contact their MEDALLION Primary Care Physician (PCP), Health Maintenance Organization (HMO) or the MEDALLION Care Helpline at 1-800-643-2273. Non-managed care eligible recipients should also call the MEDALLION Care Helpline to receive a list of Medicaid enrolled doctors or clinics that provide EPSDT services. The recipient should be informed that transportation is provided for EPSDT services at no charge. If the recipient has any difficulty accessing EPSDT services or has questions or concerns about EPSDT or transportation to an EPSDT provider, they should contact the MEDALLION Care Helpline.

You may also contact the DMAS EPSDT program administrator at 804-786-0194 if you have any questions or concerns regarding EPSDT program policies or procedures.

j. The need to substantiate all eligibility factors.

k. The categorical eligibility requirements and conditions of eligibility for TANF.

l. The requirements regarding composition of the assistance unit, that required unit members are considered part of the unit even if application has not been made on their behalf, and that the client's failure or refusal to provide verification of categorical requirements for a child required to be in the assistance unit, or the child's failure to meet conditions of eligibility, will result in the child's needs being excluded from the assistance unit but his income will be considered available to the remaining assistance unit members.

m. The provisions of cooperation in relation to the Child Support Enforcement Program. The client must be informed of the responsibility to assist the State or local agency and the consequences for refusing to cooperate, unless good cause for refusing to cooperate has been determined to exist. The applicant/recipient must be given the opportunity to withdraw the application or request the termination of assistance, before the next payment is issued. The appropriate notice must be sent in either situation.

n. Provisions regarding income and the method by which income will be counted, **including** the lump sum provision.

o. Provisions concerning treatment of child care/incapacitated adult care disregard as it relates to an individual's employment status and eligibility determination (Section 305.3.B.6.). The applicant/recipient must be given the opportunity to choose either the child care disregard or the child care vendor payment to the provider.

p. Standard of assistance

q. Under the VIEW Program, the requirements of the program, the conditions for exemption from this requirement and that all recipients will be notified via mail of specifics regarding participation upon approval of their application. Additionally, the requirement to report all changes relative to VIEW status and the condition of eligibility to participate, if required, must be explained. See Section 901.2 for further details of explanation.

r. Verification of Information - The applicant/recipient must be advised that all factors of eligibility are verified and that public records, such as Bureau of Vital Records and Health Statistics, etc., are utilized in this effort. The applicant/recipient should also be advised that the records of Virginia Employment Commission (VEC) and Social Security are periodically checked for income.

s. Upon receipt of a notarized acknowledgement of paternity form, notify the applicant/recipient that paternity has been established.

t. The applicant/recipient must be advised that if any individual who is included in the A.U. does not have a SSN it must be provided or proof of application must be provided.

u. The applicant/recipient must be advised that when current support, greater than $50, is being collected by the Division of Child Support Enforcement, the TANF recipient may receive a TANF Match Payment per Section 304.4.

v. Provisions regarding continuation of DCSE services following the termination of assistance.

w. The provisions described in Section 401.1.A. regarding the single interview and joint application process for TANF and food stamps must be explained to the applicant/recipient.

x. Provisions for transitional child care benefits per Section 401.7.

y. In situations where the assistance unit is homeless, the worker must explain the need for the caretaker to keep in contact with the local agency and/or frequently check the mutually agreed upon destination where correspondence and checks will be mailed. The case record must be documented to reflect where the unit wants to receive notices and checks.

z. Provisions of the family cap policy per Section 201.12.

aa. 60-month limit on receipt of TANF provision.

bb. The applicant/recipient's right to voter registration services in accordance with the National Voter Registration Act of 1993. Refer to Appendix II of Chapter 400 for applicable policy.

cc. Information on the right to disclose a disability to the agency, and the benefits of doing so by providing the form, "Do you have a disability? (032-03-670).

dd. The fact that applicants and recipients with disabilities are entitled to reasonable accommodations in all aspects of the TANF program, including:

1. Help filling out the application, gathering documents and verifying information establishing eligibility for benefits;

2. Modifications to program requirements if necessary;

3. Help with filing appeals or grievances if needed as the result of a disability;

ee. The fact that the individuals with disabilities should request reasonable accommodations if they feel they need them.

The worker must explain that certain contacts, when appropriate, require written consent (i.e., doctors, banks, etc.).

In addition to being given the above information orally, the applicant must be given the "Temporary Assistance Programs" booklet (Form #032-01-002), the "Virginia Medicaid Handbook," and the "Child Support and You" booklet (Form #032-01-945). A recipient who indicates at the time of the review that he does not have a copy of the Temporary Assistance Programs booklet must be given a copy.

401.6 IMPACT ON MEDICAID

See the Medicaid Manual, Volume XIII, to determine Medicaid eligibility for TANF applicants/recipients.

401.7 TRANSITIONAL CHILD CARE BENEFITS

When a case is closed to TANF, ADAPT generates a notice of potential eligibility for transitional child care which is sent to the agency PID dedicated to print service notices. The agency is responsible for mailing the notice to the client and filing a copy in the case folder.

Refer to the Services Manual, Volume VII, Section II, Chapter D, to determine eligibility for transitional child care.

401.8 REFERRAL FOR VICTIMS OF FAMILY ABUSE

When the eligibility worker learns about a situation where an applicant/recipient of TANF may be a victim of family abuse, the individual should be referred to local resources for supportive services. If local resources are not available, the Family Violence Hotline number, 1-800-838-8238, should be given.

Family abuse is defined in the Virginia Code of Section 16.1-228 as "any act of violence, including any forceful detention, which results in physical injury or places one in reasonable apprehension of serious bodily injury which is committed by a person against such person's family or household member".

402.1 INCOME ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Section 1137 of the Social Security Act requires states to coordinate data exchanges with other federally assisted benefit programs and to use that information when making eligibility determinations for TANF recipients. The federal statute requires that information obtained through these data exchanges be verified by a third party, not the IEVS source, prior to impacting the eligibility of the TANF case or the amount of benefits. The exception to the prior statement is Social Security benefits. Chapter D, page 7, of the IEVS Manual provides instruction to local departments of social services in the use of the information obtained through IEVS. Local workers must complete a Benefit Impact Statement for each TANF case for which it receives an IEVS match.

The Income Eligibility Verification System (IEVS) provides information by running matches of the client population against the files of other state and federal agencies. These include:

- the Social Security Administration for SSI benefit information (SDX) and earnings information from the Benefit Exchange Earnings Records (BEERS);

- the Virginia Employment Commission for NEW HIRE information; and

- the Internal Revenue Service for unearned income, such as interest (RES).

The purpose of the matches is to determine whether available information is known to the local social services department.

Information about SSI benefits from the SDX is considered verified upon receipt because the provider of the benefits (SSA) is also the source of the information. The local agency must take action to terminate, deny or reduce benefits, including proper notices to the assistance unit, without needing additional verification. If the information, however, is questionable, the agency must resolve the discrepancies before taking action.

Information from other IEVS matches is considered unverified. Prior to taking action to terminate, deny or reduce benefits, agencies must independently verify the amount of the asset or income involved, and whether the asset or income is or was accessible to the assistance unit.

The agency must obtain independent verification of information obtained from IEVS by contacting the assistance unit and/or the appropriate source of the income. If the agency opts to contact the assistance unit, the contact must be in writing, informing the assistance unit of the information received, and requesting that the assistance unit respond within 10 days. If the assistance unit fails to respond in a timely manner, the agency must send an advance notice to suspend or terminate the case. The agency may contact the appropriate source of the information. Once independent verification is provided, either by the assistance unit or the source, the agency must properly notify the assistance unit of the action it intends to take and provide the assistance unit with an opportunity to request a fair hearing prior to any adverse action.

403.1 FAMILY BASED SOCIAL SERVICES POLICY - An effective social service and public assistance system is designed to meet the basic needs of citizens who need help. The system shall provide services within the needy citizen's home community and within an environment that promotes family stability whenever possible. In order to accomplish effective social and public assistance services within Virginia's locally administered, State supervised system, each local department must administer programs based upon a philosophy of family based social service delivery.

Benefit programs are designed to provide income support benefits to assist families who are unable to provide the necessities of life and maintain minimum standards of health and well-being through their own efforts. Initial determinations and redeterminations of eligibility are based on a process of the gathering of information relevant to the family's situation in order to assess the need and eligibility for benefit programs. This process also includes an assessment of need for service programs and other resources to assist the family. If other needs exist, the family is to be referred for appropriate services or resources within the agency or community.

Additional information on Family Based Social Services is contained in Volume I, and Volume VII, Section I, Chapter A.

403.2 CHILD HEALTH SCREENING SERVICES - Applicants for and recipients of **TANF** must be advised of the availability, for all children up to age **21**, eligible for Medicaid, of the Early and Periodic Screening, Diagnosis, and Treatment program (EPSDT). **See 401.6.i.**

403.3 PROTECTIVE SERVICES - Federal regulations require that protective services be made available to any child in whose behalf **TANF** is being requested or received when it appears that the child is being neglected, abused, or exploited or in a situation which is otherwise detrimental to his welfare. If the eligibility worker has reason to believe that a child, on whose behalf **TANF** is being applied for, or received, is in an unsuitable environment because of known or suspected instances of physical or emotional injury, it is the responsibility of the eligibility worker to make a referral to the services staff for protective service.

Known or suspected instances of physical or emotional injuries include instances of sexual abuse or exploitation, and negligence and/or maltreatment of such child under circumstances which indicate that the child's health or welfare is threatened.*

403.4 FOSTER CARE - When a child eligible for **TANF** has been removed from his own home by a judicial determination that remaining in the home is contrary to his best interests, it is the responsibility of the agency to provide AFDC-Foster Care as specified in **the AFDC-FC Manual**.

403.5 EMPLOYMENT SERVICES - Employment services **through Virginia Initiative for Employment not Welfare (VIEW)** must be provided to assist **TANF** applicants/recipients in achieving employment and self-sufficiency. Referral to the **VIEW** staff should be made upon request or as required by policy.

Individuals who have been determined to be exempt from VIEW on the basis of incapacity, must be referred to the appropriate State Vocational Rehabilitation Agency.

403.6 CHILD CARE (DAY CARE) SERVICES - Child care services are the provision of care and related services for the child in the absence of the parent or care taker relative during a part of the 24-hour day. Child care services must be provided, when such service is not available without cost for children found eligible for a TANF money payment, when day care is needed to enable the parent or caretaker-relative to accept or continue in employment or appropriate training leading toward employment.

Day care and related services are provided by the local department, either through an agency operated child care center or through a vendor service payment to the provider of care. Day care may be provided in the child's own home or outside the home. The service staff is responsible for the provision of this service, including authorization of the vendor service payment. The eligibility worker is responsible for advising the applicant of the availability of this service and for referral to the services staff of all cases in which day care is needed as indicated above. It is the responsibility of the service worker to assist the client with planning for day care and to authorize a vendor service payment.

403.7 PREVENTION AND REDUCTION OF OUT-OF-WEDLOCK BIRTHS – Public Law 104 - 193, Section 401, requires states to establish goals and take action to prevent and reduce the incidence of out-of-wedlock pregnancies. Local agencies should have knowledge of social, medical, educational, and other services geared toward the prevention of out-of-wedlock births and the strengthening of family life available in their locality, in order that such services may be offered.

403.8 OTHER SERVICES - These services are those which are geared toward meeting particular needs of families and children and the applicant/recipient should be referred to the service worker as needed or upon request. They include:

1. assisting children to obtain education in accordance with their abilities;

2. assistance to families in improving living conditions;

3. assistance in reuniting families;

4. assistance in money management;

5. assisting parent in child rearing.

* 45 CFR 233.90(a)(2)

VIRGINIA LEGAL AID PROJECTS

See Food Stamp Manual, Volume V, Part XIX, Appendix I, for a list of Virginia Legal Aid Projects with addresses, phone numbers, and areas served.

The National Voter Registration Act of 1993 (NVRA) requires local social services agencies to offer each customer of **TANF**, Food Stamps and Medicaid an opportunity to apply to register to vote at initial application and each review of eligibility. Additionally, voter registration application services must be provided any time a change of address is reported to the local agency in person. In complying with the requirements of the NVRA, local agency staff must provide each applicant and recipient the same degree of assistance in completing their voter registration application as they do in completing the application for public assistance.

I. Prohibitions - Local social services agencies and agency staff are prohibited from the following activities when providing voter registration application services:

A. seeking to influence a customer's political preference;

B. displaying any political preference or party affiliation;

C. making any statement to the customer or taking any action the purpose or effect of which is to discourage the individual from applying to register to vote; or

D. making any statement to a customer or taking any action the purpose of which is to lead the individual to believe that a decision to register or not register has any impact on the individual's eligibility for assistance or the benefit level that they may be entitled to receive.

II. Voter Registration Services - Each local social services agency must provide the following services:

A. distribution of voter registration application forms;

B. assistance to customers in completing the registration application form, unless such assistance is refused, and ensuring that all spaces on the form are completed;

C. insuring that the certification statement on the application for benefits or statement of facts is completed; and

D. acceptance of voter registration application forms for transmittal to the local general registrar.

1. Each completed registration application must be submitted to the local general registrar every Friday (if Friday is a holiday, the forms must be forwarded to the local registrar on the last working day before Friday.) Completed forms are to be forwarded to the local registrar in an envelope, notated with an "A" in the upper left-hand corner and listing the number of completed registration applications included in the envelope.

2. For split/combined agencies, all voter registration applications are to be transmitted to the general registrar in the locality where the local social services agency is located.

3. If the individual chooses, he/she may take a voter registration application to be mailed to the State Board of Elections at his/her own cost.

The only exception to offering voter registration application services is when the customer has previously indicated that they are currently registered to vote where they live, there is a completed agency certification form, **application for benefits, or statement of facts** in the customer's case record indicating the same, and the customer has not moved from the address where they stated that they were registered to vote.

III. Forms

A. Voter Registration Application - in Virginia, one voter registration application form will be used to serve a twofold purpose:

1. the voter registration application will be completed by the customer with necessary assistance from local agency staff during the application/review process and left at the local agency for transmittal to the local general registrar; or

2. for customers who do not wish to complete the voter registration during the application process, they may take a voter registration form for mail-in registration.

IV. Individuals Required to be Offered Registration Services - In order to be offered voter registration services, an individual must:

A. Be a member of the **TANF** assistance unit/Food Stamp household/Medicaid family unit.

B. Be at least 18 years old by the next general election. General elections are held in all localities on the Tuesday after the first Monday in November or on the first Tuesday in May to fill offices regularly scheduled by law to be filled at those times. If any question arises as to whether the individual will turn 18 before the next general election, complete the registration application and the local registrar will determine if the individual may be registered.

C. Be present in the office at the time of the application/review interview or when a change of address is reported (if a change of address is not reported in person, a registration application will be sent to the individual upon request for mail-in purposes.) Any change in household/assistance unit/Medicaid family unit composition that does not occur concurrent with an application/review or change of address will be handled at the next scheduled review.

Any individual accompanying the customer to the local agency who is not a member of the assistance unit/household (including payees and authorized representatives) will not be offered voter registration services by the local agency; however, a registration application is to be provided to the non-unit member upon request for mail-in purposes.

Any request for a mail-in application for assistance must include a mail-in voter registration application. When an authorized representative is applying on another individual's behalf, the local agency is to offer a mail-in application. In both situations, the bottom of the certification form is to be completed accordingly.

V. Voter Registration Application Sites - Local social services agencies are required to offer voter registration application services at each local office (including satellite offices) for applicants/recipients of **TANF**, Food Stamp, and Medicaid assistance. Voter registration application services are not to be offered by outstationed staff taking Medicaid applications at hospitals/local health departments or by Medicaid staff at the state's Mental Health, Mental Retardation, and Substance Abuse facilities.

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Appendix I - Check Handling Information and Procedures

502.1 AMOUNT OF PAYMENT -

A. In the TANF Program - The amount of the monthly payment is the amount of the budgetary deficiency (the appropriate standard of assistance for the assistance unit, as specified in Section 304, less countable income, as specified in Section 305), plus the TANF Match Payment, if any, adjusted to the next lower dollar, except as provided below:

1. Maximum Reimbursable Payment in TANF - Because of limitation in State funds in the TANF category, the State Board has approved for purposes of reimbursement to localities:

   a. A ratable reduction in the standard of need for TANF.

   b. An overall maximum amount of payment established for each group of localities, as shown in Appendix 2 to Section 304.

   Any locality wishing to meet up to the full (100%) standard of need and/or to meet the full budgetary deficiency, even though in excess of the maximum reimbursable amount may do so provided (a) the full (100%) standard of assistance is not exceeded in determining need; (b) the additional cost is paid from local funds and (c) the percentage of need met and/or the policy with respect to payment are used in all cases in the locality.

   Note: When a TANF Match Payment is included in the monthly payment, and the TANF benefit, plus the TANF Match Payment, exceeds the maximum for the assistance unit, the maximum will not apply and the full amount of the combined payment will be issued. However, the amount representing the TANF benefit must not exceed the maximum for the size of the assistance unit.

2. Minimum Payment - If the budgetary deficiency is less than $10.00, no payment is made. However, if an assistance unit's ineligibility is based solely on this minimum payment provision, the case will be approved and retained as an active TANF case.

   The minimum payment rule does not apply when a combined payment (monthly benefit plus TANF Match Payment) is issued. The check will be issued provided the combined payment is at least $1.00.

B. In Emergency Assistance to Needy Families with Children - The total payment which may be granted to a family under the Emergency Assistance program must not exceed **$500.**

502.2 PERIOD COVERED BY PAYMENT -

A. Payment covers need for the entire calendar month of eligibility (Section 401.1.I.), except when eligibility is determined in the same month in which an application for financial assistance is received or when an individual is added to an existing case. No payment may be issued, however, prior to the date of application. The effective date of payment is the date that initial eligibility for assistance or a change in amount of assistance begins.

No payment shall be made on an approved application for periods prior to the date of application. If the beginning date of assistance is not the first of the month, the benefit for that month must be prorated. This is accomplished by dividing the amount payable by 30 days, regardless of the total number of days in such month. This amount is then multiplied by the actual days in the month including and following the date of authorization. Additionally, when an individual is added to an existing case, the individual's portion of the grant must be prorated for the first month of eligibility with the beginning date of payment established in accordance with Section 401.2.B.2.c.

Example #1: A Group II locality receives a signed application from Ms. Doe on August 18. She requested assistance for herself and two (2) children and reports no income. The agency determined she is eligible to receive an assistance payment on August 24. The beginning date of assistance for Ms. Doe is August 18. The agency will compute her first month's payment based on the following information:

1. 14 days = number of days for which Ms. Doe is eligible to receive assistance in August.

2. $320.00 - payment amount for full month's benefit.

The method of computation is as follows:
$320.00 ÷ **30** = $10.67 x **14** = **$149.33**
$149.00 grant (rounded down)

Example #2: A Group II locality receives an application on August 5 requesting assistance for a mother and two (2) children. The family receives Social Security of $88.50 each month. The agency determines eligibility on August 10. The beginning date of assistance for Ms. Doe is August 5. The first payment will be computed as follows:

$320.00 - **$88.50** = $231.50 full month deficit
$231.00 ÷ **30** = $7.70 daily rate
$7.70 x **27** days = $161.70 prorated deficit
$161.00 grant (rounded down)

Example #3: On September 5, a timely report is received that on that date a sibling of the child(ren) in the assistance unit moved back into the home. The child being added has unearned income of $30 per month. Eligibility for the child is established on September 13. However, the payment is prorated for the period beginning September 5 (26 days), the date the required unit member entered the home.

$320 current grant
$382 - $30 = **$352** full grant after adding child
$352 - **$320** = **$32** child's portion to be prorated
$32 ÷ 30 = **$1.07**
$1.07 x 26 days = **$27.82**
$27.00 (rounded down) supplement for September

If the individual's presence in the home is not reported timely, payment for the first month of eligibility will be prorated from the date the change was reported or became known to the agency. Or, if the unit failed or refused to cooperate in establishing eligibility without good cause, payment will be prorated from the date the last categorical verification is received or eligibility condition is met. (Refer to Section 401.2.B.2.c.)

B. In TANF-UP - Follow Policy in 502.2 A. except when a second parent enters the home in an existing TANF case. Policy in 401.2 B.2.**c** addresses handling the addition of a second parent.

C. In Emergency Assistance - Payment covers specified needs related to the emergency as specified in Section 203.2. Payment is also limited to coverage of needs arising or anticipated during the 30-day period following initial authorization of EA.

502.3 METHOD OF PAYMENT - Financial assistance under the TANF program **is made** available to eligible recipients in the form of a money payment in cash or check or **direct deposit**, with no restrictions imposed by the agency on the use of funds by the individual.

The following exceptions are permitted:

A. In TANF, a "protective" vendor payment may be made under conditions specified in Section 502.7.

B. In TANF, payment may be made for day care by vendor service payment under conditions specified in Section 403.7.

C. In Emergency Assistance, payment may be made either as a money payment to the recipient or by the vendor method to the provider of goods or services,* whichever is more practicable and advantageous to the family, except that the State Board has ruled that payment for purchase, repair, moving or storage of household equipment must be made by the vendor method.

502.4 DESIGNATED PAYEE - The persons who may be designated as payee are as follows:

A. Money Payment

1. The grantee-relative with whom the eligible child(ren) is living. The grantee-relative is ordinarily the caretaker, but may be other than the caretaker in some situations. Examples:

   a. A child's father receives SSI and is the grantee-relative for the TANF payment which includes the mother as needy caretaker;

   b. A 16 year old mother is the caretaker in an TANF grant, but her mother, with whom she lives, is the grantee-relative; such a grantee-relative, if needy, may be included in the assistance unit (see Section 302.7.A.).

   c. An assistance unit consists of a 22 year old parent and her children. However, a specified relative also residing in the home is exercising primary responsibility for care and control of the children and, therefore, is the grantee-relative.

2. The legal representative of the grantee-relative, if one has been appointed and has qualified.

3. The protective payee, under conditions specified in Section 502.7.

* 45 CRF 233.120(b)(2)(i)

4. An emergency payee in an existing case, when a situation, such as sudden death, desertion, imprisonment, or commitment to a mental hospital, unexpectedly deprives the child of the care of the grantee relative. Payment to an emergency payee is for a temporary period, limited to the time necessary to make and carry out plans for the child's continuing care and, in any event, not exceed three months.

B. Vendor Payment - The provider of goods and/or services.

502.5 ISSUANCE OF PAYMENT

A. Issuance Date -

1. The Monthly Money Payment - **If the effective date is either the date of application or the first of the month following the month of application, benefits should be authorized at the time of approval. ADAPT will issue the payment 2 – 3 days later.** Subsequent ongoing monthly payments will be mailed on the first of the month to cover the needs for that month.

2. Supplemental Payment - A supplemental payment is defined as a payment given in addition to the pre-authorized assistance payment as a result of a change in circumstances which increases need for a specific month.

   Supplementary checks are to be issued immediately using an effective date of the first of the month for which the check is being written.

3. Vendor Payments are to be issued after the end of the month, upon receipt of a bill from the provider of goods or services. When protective vendor payments are made in TANF, under conditions specified in Section 502.7, it may be necessary in some instances to issue such payments at intervals during a month.

4. TANF Match Payments – TANF Match Payments are defined as current child support paid on behalf of a case, less $50. The Match payments are issued in the second month following receipt and are issued with the TANF benefits as a single payment.

B. Mailing of Checks - All checks, including the initial money payment, are to be mailed via the United States Postal Service, unless the recipient has a justifiable reason for calling in person at the office for the check or for asking that the check be delivered directly to him at his place of residence. Such reasons should be stated by the recipient in writing and his signed and dated written request should be filed in the case record. A receipt should be secured for any checks delivered personally in the office or in the home. Proper identification should be requested if there is any doubt as to the identity of the recipient.

C. Direct Deposit – The process by which TANF benefits are electronically posted to a client's bank account. Direct deposit will continue until:

- **The client provides a written request to stop the direct deposit,**
- **The TANF case closes,**
- **The client makes changes to the bank account which causes the direct deposit not to post, or**
- **The client's circumstances change, such as an emergency payee is attached to the case.**

The client must be provided the Direct Deposit Enrollment Authorization form (032-03-672) if he requests direct deposit. The form is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi. To set up a direct deposit, cancel direct deposit, or if the direct deposit does not post to the client's bank account, see Section 500, Appendix 1, Check Handling Procedures.

D. Emergency Payments - Emergency payments shall be issued by local boards in emergency situations or in the event of delay or error in a State issuance of checks for payments of assistance.* The State agency is to reimburse the local board for such payments. In emergency situations which result from lost or stolen checks, the State Department shall assume liability for losses incurred by local boards due to fraudulent acts by recipients provided, however, the local agency referred the case to the Commonwealth Attorney and the decision to prosecute or not has been made by the Commonwealth Attorney. Emergency payments must be issued in these two situations:

1. In the event of lost or stolen checks, a replacement check must not be issued until after the fourth mail delivery. The State Department of Social Services and the local agency must ensure that no undue delays occur in issuing replacement checks. A replacement check must be issued upon receipt of notification that the stop payment process has been completed. This includes receipt of three notarized affidavits by the State Department of Social Services Fiscal Processing Unit. Refer to Appendix I to Chapter 500 for detailed check handling procedures. The Affidavit on Check Endorsement (032-06-118) is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.

2. Once the application has been approved for payment, an emergency payment will be issued to a client who is in dire need at the time of initial application.

* Code of Virginia, Section 63.2-323

3. When issuing a Full Employment Program (FEP) stipend or bonus payment, the replacement check must be a State-issued check. Do not issue a FEP replacement check from local funds, as no process exists to reimburse the locality.

502.6 INTRASTATE TRANSFERS -

A. Transferring the Case

When a recipient of TANF or TANF-UP moves from one locality to live in another within the state and there is no other change in his circumstances which would render him ineligible, he is entitled to receive assistance without a break. To assure the continuation of assistance without interruption, the following procedure must be used.

1. If the move is the result of the family seeking temporary shelter/housing in another locality within the State of Virginia and the family intends to return to the original locality, the original locality may, at its option, keep the case for up to two payment months. If the family has not returned to the original locality after the second payment has been issued, the case must be transferred in accordance with the procedures outlined below. In making a determination as to whether the original locality should keep the case, the agency should work with the unit and consider the distance of the move and any hardships that would be encountered by the unit in reporting changes, etc. and whether the unit is residing in a different locality grouping. If the case is retained by the original locality, the payment will be based on the payment level of the original locality.

2. If the move is permanent (i.e., the assistance unit does not intend to return to the original locality or if the agency determines that the case should be transferred during a temporary move), the locality from which the recipient has moved (the transferring locality) must, within five working days of notification, complete a desk review and forward the eligibility case record along with a Case Record Transfer Form (032-03-227) to the receiving locality if the case continues to be eligible. The case record must contain all verification and other documentation substantiating eligibility. The transferring locality must forward the entire case file to the receiving locality. If the transferring locality wishes to maintain a part, or all of the case file, they must copy the portion that they wish to keep, and forward all of the original case file contents to the receiving locality.

The eligibility case record must be sent by certified mail, or by a courier service which is under contract with the Department of Social Services, or delivered personally, to the receiving locality and a receipt must be obtained.

Note: If the transferring and receiving agency both use an electronic case record system, the transferring agency may send a compact disk of the case information if that is acceptable to the receiving agency.

If the receiving agency does not use an electronic case record system, the transferring agency must print the case information and send the documents to the receiving agency.

B. Transferring Agency Responsibility

The transferring agency must complete a desk review to assure the correctness of the next payment as the transferring locality is responsible for the accuracy of this payment. The desk review entails reflecting all changes known or reported prior to the recipient's move which affect eligibility or payment and any changes occurring as a result of the recipient's move. It also entails a review of the case to insure that any other follow-up or special reviews have been completed. If the case is overdue for review, the transferring locality does not have to complete a renewal prior to transferring the case.

Local social services agencies may not transfer TANF cases in the following instances:

- The case has a suspension status due to Interim Reporting.
- The case has a suspension status due to temporary ineligibility for any reason (one month).
- The case has a suspension status because net support is greater than the current TANF benefit.
- The TANF application is pending. The original agency must process the application. The agency must secure sufficient information to process the application unless the applicant elects to withdraw the application.

Cases that have been sanctioned for non-compliance with a VIEW requirement must be transferred.

The transferring agency must send the recipient a Notice of Transfer providing notice that their case has been transferred and listing the name, address, and telephone number for the receiving agency. If any changes during the desk review result in ineligibility or a decrease in the grant, procedures with respect to the Advance Notice of Proposed Action (032-03-018) are applicable.

The transferring locality will specify on the Case Record Transfer Form that the month following the month in which they send the form and case record to the new locality is the last month for which they will make payment. If the TANF case was receiving food stamps, the transferring locality must note the impact of the transfer on the food stamp case on the Case Record Transfer form. If the case is open to services, the transferring locality will immediately notify the service worker of the client's move and new address, and upon completion of the Case Record Transfer Form, will forward a copy to the service worker. Verification on changes which could not be made for the next payment, due to the advance notice requirements, will be included in the case record and will also be specifically noted on the Case Record Transfer Form under additional remarks. The receiving locality will take the necessary action to make the change(s) and send the Advance Notice of Proposed Action immediately.

Grant adjustments necessary to conform with the standard of assistance in effect in the locality to which the recipient has moved must be made effective for the month following the recipient's move. If the adjustment results in a decrease or termination of assistance, timely notice must be given to the client. It is the responsibility of the transferring locality to give timely notice. (See **502.6 D.2**. for detailed instructions regarding transfers between Loudoun County and other agencies.)

C. Receiving Agency Responsibility

The receiving locality is responsible for completing a desk review **within 5 working days of receiving the case and acknowledging receipt to the transferring agency using the Case Record Transfer form. The desk review must insure that there continues to be an eligible child in the home, inquiry about new employment with earnings greater than 130% of the federal poverty level, and if a VIEW participant inquiry about reportable changes for VIEW. The receiving agency must impact these changes,** affecting eligibility or payment for the first of the month following the month in which the transferring locality specifies as the last month they will make payment. This is the payment month for which the receiving locality will assume responsibility for the accuracy of the payment. If the receiving locality will not be approving the case, or will be approving it in an amount less than the prior payment, they are responsible for sending the Advance Notice of Proposed Action to the client.

There are no circumstances under which it is permissible for the receiving locality to return the case to the transferring locality (other than the recipient subsequently moving back to the original locality).

D. TRANSFER BETWEEN LOUDOUN COUNTY DSS AND OTHER LOCAL AGENCIES
If the receiving locality will make the next payment following the client's move, changes reflecting either a decrease or increase, caused solely by Loudoun County DSS meeting the standard of need, and the other not, must be made.

If, however, the transferring locality is going to make the next payment the following rule applies:

1. If the receiving locality is Loudoun County, the transferring locality shall not increase the reimbursable amount since it does not
have local funds available for this purpose.

2. If the transferring locality is Loudoun County, the payment must be adjusted in accordance with the payment policy of the receiving locality.

E. HANDLING OF APPEALS

1. If the desk review done by the transferring locality results in a determination of ineligibility, that locality will close the case. When the appeal is validated, the transferring locality will reinstate the grant in the original amount (if client remains in same group) or the amount appropriate to the locality in which the recipient is living. The case should then be transferred to the new locality advising them that there is an appeal in process. When the appeal decision is final, the transferring locality will immediately notify the new locality of the appeal decision so that the appropriate action can be taken. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments**, by establishing the claim in ADAPT entering the FIPS code for the agency where the overpayment occurred. The FIPS for an agency other than the current FIPS can only be entered during the calculation of the overpayment on BAT185 (Benefit Adjustment 185% Income Test).** If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

2. If the desk review done by the transferring locality results in a reduction of payment, and the client appeals the action, the appeal will be against the transferring locality, but the locality who is making the next payment will be responsible for restoring the grant to the correct level. The transfer procedure is to proceed as usual.

The Regional Hearings Officer will send the receiving locality a copy of the appeal validation and notify them as to the original amount of assistance which must be restored. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments. If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

3. If an appeal is filed due to a decrease resulting from adjustments in the standards of assistance, the hearing will be ALLOWED.

F. MEDICAID COVERAGE

To assure continued Medicaid coverage the transferring locality must immediately change the mailing address in the Medicaid computer as soon as the change is reported. The current city/county code is to be changed simultaneously with the forwarding of the case record and THE REQUEST FOR TRANSFER ACCEPTANCE to the receiving locality.

G. SITUATIONS AFFECTING THE TRANSFER PROCESS

1. Subsequent Moves During the Transfer Process - If the recipient moves to a third locality before the receiving locality can complete their redetermination, the redetermination does not have to be completed. The procedures outlined earlier in this section will be followed to effect this subsequent transfer.

2. Reapplications in Another Agency After Case Closings - If a former recipient of ADC reapplies in another locality, that locality may request the case record from the former locality. The former locality must comply with this request and forward the case record to the requesting locality within five working days of receipt of the request. The former locality should retain the financial and statistical forms.

3. Applicant Moving to Another Locality within the State - In the event an applicant moves to another locality, with the intent to remain there, prior to completion of the initial determination of eligibility, the agency **must process** the application. **If eligibility exists, the case must be transferred following policy under Transferring Agency Responsibilities (502.6.B.). If the application is denied, the agency will notify the applicant using the Notice of Action.**

Note: There are no provisions for interstate transfer of cases. If a recipient moves to another state, assistance must be terminated and timely notice sent advising the recipient of the case action.

502.7 PROTECTIVE AND VENDOR PAYMENTS - According to federal regulations* protective and or vendor payments are to be made in TANF cases in the following situations:

A. Need for Protective or Vendor Payment -

1. The use of a protective or vendor payment is appropriate only when there is specific evidence that funds are being mismanaged in such a way that the well-being of the child(ren) is threatened, in making diversionary assistance payments, or if the caretaker who is on probation or parole fails a drug test.**

   a. Prior to making a determination of mismanagement, the following conditions must be considered:

      1) whether the family has experienced some emergency or extra-ordinary event for which it was appropriate for available funds to be spent;

      2) whether expenses for necessary bills exceed the recipient's grant and other income;

      3) whether the recipient has withheld the payment as a reasonable exercise of consumer rights when there is a legitimate dispute as to whether terms of an agreement have been met.

      The above-mentioned conditions or any other relevant conside-ration would not be just cause for making a protective or vendor payment.

   b. A protective or vendor payment should ordinarily be made only when a grantee-relative has persistently demonstrated an inabi-lity to manage funds in the best interest of the child(ren) and when continued receipt and management of the TANF check would represent a threat to the health or safety of the child(ren).

      Evidence of mismanagement includes but is not limited to:

      1) continued evidence that the child(ren) is not properly fed or clothed and that expenditures for the child(ren) are made in such a way as to threaten the child's chances for healthy growth and development.

      2) persistent and deliberate failure to meet obligations for rent, food, school supplies, and other essentials.

   Protective payments are not to be used in situations where hazardous conditions other than misuse of funds, jeopardize the child's well-being to the extent that court adjudication of custody should be sought. (In such instances, when custody is placed with the local board, the child will be eligible for AFDC-FC.)

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* 45 CFR 234.60
** Code of Virginia, Section 63.1-105.8

The TANF case record must contain a statement indicating the specific reason(s) why a protective or vendor payment is being made.

In the event a creditor requests that a protective or vendor payment be made as a result of nonpayment of bills, the recipient must be advised of the request. The agency shall notify the recipient in writing that the creditor's request will not be honored.

Where no other suitable protective payee can be found, it may be necessary for a staff member of a private agency, the local welfare department/social services or other appropriate organization to serve as protective payee. Such a staff member must be a worker providing services (not eligibility determination) for families. If a staff member is designated as protective payee, provisions for bonding this employee must be made.

2. Under the TANF program, protective or vendor payments are to be made when the applicant for or recipient of TANF fails to cooperate in establishing paternity, locating absent parents and or securing support unless the local agency cannot, after reasonable efforts, locate an appropriate individual to act as protective payee. The local agency is responsible for defining what constitutes reasonable efforts. The case record must be documented. The amount of the assistance payment is to be determined without regard to the needs of the caretaker-relative and the entire amount of assistance will be provided in the form of protective and/or vendor payments in cases where a protective payee has been located. For cases where the agency is unable to locate a protective payee, the individual's needs will not be considered in determining the amount of assistance; however, the applicant/recipient will continue to receive the payment on behalf of the remaining unit.

3. Unless a minor parent (on his/her own case) meets an exception to the residency requirement and lives independently, protective payments are to be made in these cases. Protective payments are to be made to the minor parent's parent, or person standing in loco parentis.

* 234.60(a)(2)(iii)

4. Vendor payments are to be made in diversionary assistance payments whenever possible.

5. If a TANF caretaker who is on probation or parole fails a drug test, the probation or parole officer will notify the local department of social services. Upon receipt of such notification, protective payments must be arranged as soon as administratively possible. The protective payment arrangement shall remain in place for one year, provided the caretaker does not fail a subsequent drug test.*

B. Procedures for Making Protective or Vendor Payments

1. In protective situations, the superintendent or local board may take actions to designate a protective payee to act for the recipient in receiving and managing the total assistance payment.

   The protective payee should be a person who is interested in or concerned with the welfare of the grantee-relative and his child. The selection of the protective payee should be made by the grantee-relative, or with his participation and consent insofar as possible. The local department must have evidence that such protective payee has the ability and will in the best interest of the grantee-relative and his child. The agency will take appropriate action to protect recipients when it appears that problems are beyond the capacity of the protective payee to handle.

   The protective payee must not be executive head of the local department of social services; the person determining financial eligibility for the family; the special investigator or member of the staff handling fiscal processes related to the recipient; the landlord; grocer, or other vendor of goods and services dealing directly with the recipient. Additionally, service workers, private agency staff, and staff of other organizations can only serve as protective payees in situations per 502.7.A.1. or 502.7.A.**5**.

2. **I**n some situations, it may appear more appropriate to make certain portions of the assistance payment to a vendor, continuing to make the remainder of the grant to the family. vendor payments may be made in TANF to appropriate persons providing goods and services, with the selection of such person being made by the recipient or with his participation and consent insofar as possible.

   The local department must have evidence that vendors have the ability and will act in the best interest and protection of the grantee-relative and his child.

   Authorization for vendor payments will be made according to current local agency procedures.

*Code of Virginia, Section **63.2-605**

C. Provision of Services - In protective situations referral to social services staff must be made, to assure protection of recipients, where problems and needs for services are obviously beyond the ability of the protective payee to handle.

D. Periodic Review of Need for Protective or Vendor Payment - A review of the need for protective or vendor payments in behalf of children and of the way in which a protective payee's responsibilities are being carried out will be made as frequently as indicated by the individual circumstances and at least every six months, or 12 months if appropriate. This review can be coordinated with the eligibility **renewal**. When the protective or vendor payment is made in accordance with Support Enforcement Program, the review is only to assess the way in which the protective payee carries out his/her responsibility. The need for such payment is already established.

Appropriate controls are to be established by the local department to insure that cases are reviewed within the specified period. The case narrative should include an evaluation of the situation at the time of review and a statement of the basis for the decision at that time to continue or to terminate protective or vendor payments.

E. Termination of Protective and Vendor Payment - Provision is to be made for appropriate termination of protective or vendor payments as follows:

1. When the grantee-relative is considered able to manage funds in the best interest of the children, there will be a return to money payment status.

   When it appears that the need for protective payment will continue or is likely to continue beyond two years, because all efforts have not resulted in sufficiently improved use of assistance in behalf of the children, judicial appointment of a guardian or personal representative will be sought. When such an appointment has been made, payment will be made to the guardian or personal representative.

2. Protective or vendor payments made on the basis of a caretaker-relative's failure to cooperate in establishing paternity, locating absent parents or in securing support, will be terminated with a return to money payment status only when the caretaker-relative complies with these conditions of eligibility.

3. Protective payments made on the basis of a caretaker's failed drug test will be terminated after one year.

F. Right of Appeal - Opportunity for a fair hearing will be given any recipient:

1. In relation to the determination that protective or vendor payments should be made or continued, or

2. In relation to the payee or vendors selected.

The recipient is to be advised of his right of appeal when the determination is made that a protective or vendor payment will be initiated and at the time of any change in payment status.

G. Safeguarding Information - Release of information to the protective payee from the public assistance record must be confined to those facts about the family members and their situation that are pertinent to the fulfillment of the payee's responsibility in the home. Information from the social history of the case, such as the legitimacy of children, circumstances of previous marriages, facts concerning relatives of the recipient, medical data, etc., should be disclosed only when required for the welfare of the family or the protection of the protective payee. The information shared may vary according to the type of help offered the family and the payee's personal or professional qualifications.

503.1 DEFINITION OF IMPROPER PAYMENT - A TANF payment made by a local department is improper when the payment is incorrect because: (1) the assistance unit does not meet eligibility requirements in the category (payment to an ineligible case); or (2) payment is in an amount greater than the amount to which the assistance unit is entitled under established policy (overpayment); or (3) payment is in an amount less than the amount to which the assistance unit is entitled under established policy (underpayment); or (4) **a VIEW participant is found to have committed an IPV for receiving** a payment or purchase on his behalf which is in an amount greater than what he is eligible for or for which he is ineligible.*

Improper payments may occur as a result of overdue reviews or other agency errors or because of erroneous or incomplete information supplied by the client. Improper payments may be revealed by several sources, not necessarily limited to the following: Local Agency Reviews, Quality Control Reviews, Federal Program Reviews, Fair Hearings, or earnings reports furnished by the Virginia Employment Commission.

503.2 STATUTORY PROVISIONS FOR REFUND OF OVERPAYMENTS AND PAYMENTS TO INELIGIBLES - In the operation of any program of public assistance in any locality, for which program appropriations are made to the Department of Social Services, it is provided that if a payment or overpayment is made to an individual who is ineligible therefore under federal and/or State statutes and regulations, the amount of such payment or overpayment shall be returned to the Department of Social Services by the locality. However, no such repayments may be required of the locality if the Department determines that such overpayment or payments to ineligibles resulted from the promulgation of vague or conflicting regulations by the Department's Central or Regional Offices or from the failure of either of the offices to make timely distribution to the localities of the statutes, rules, regulations, and policy decisions causing the overpayment or payments to ineligibles to be made by the locality. Further, no such repayment will be required from situations where a locality exercised due diligence, yet received incomplete or incorrect information which caused the overpayment or payment to ineligible(s). If a locality fails to effect the return, the Department of Social Services shall withhold an equal amount from the next disbursement made by the Department to the locality.**

The criteria used for determining if a locality exercised due diligence are as follows:

A. A redetermination was not outstanding (overdue) in the case in question unless:

   1. The agency has received permission from the State to suspend reviews, or

   2. It can be shown that the error was the result of the client willfully withholding information which would not have been discovered by verifications required at the time of the review, or

   3. The error had not occurred at the time of the scheduled review.

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* 2002 Acts of Assembly, Item 362
** Acts of Assembly, Appropriations, Budget Bill

B. The error was not the result of an anticipated change that was overlooked.

C. The error was not the result of the client reporting a change that the agency failed to follow-up on.

D. The error was not the result of failure to use available management tools.

E. The case record must be thoroughly documented regarding efforts to obtain information.

503.3 PERIOD SUBJECT TO REPAYMENT Overpayments and payments to ineligibles which shall be repaid to the State will be assessed for each month (effective April l, l973) in which the recipient fails to report earned or unearned income from a new source or other changes, such as composition of the assistance unit, etc.; for each month the agency failed to take appropriate action within the time limit specified on a change reported by the recipient; or for any incorrect payment which is identified by Quality Control.

503.4 COMPUTATION OF REPAYMENT Standards and policies which are in effect at the time of the improper payment shall be used in determining the amount of repayment to be made. A standard and/or a policy is considered in effect in relation to a specific case after the date when (l) a standard or policy has become effective by State Board action <u>in all cases</u> or (2) a standard or policy has become effective in new and reviewed cases and the particular case is (a) a new case, (b) a case in which a review is due or (c) a case in which a change in circumstances has necessitated a partial review. Exception: Recoupment/recovery policy in effect at the time of discovery of the overpayment(s) is to be used in determining the amount to be repaid.

When an overpayment to an ineligible has been identified by the state or federal agency, a report is submitted promptly to the local department. Ten (10) working days, from the date the report was sent to the locality, is allowed for the agency to concur or register its exception to the findings with the regional office utilizing the concurrence memo. The regional office will provide an opportunity for resolution of the differences and render decisions within thirty (30) working days. The resulting decision is subject to appeal to central office. However, only appeals in which the final decision was not made in accordance with established policy will be accepted.

503.5 - REPAYMENT PROCEDURES - The local department must notify the Division of Finance of the TANF/VIEW overpayment by entering the overpayment information into Application Benefit Delivery Automation Project (ADAPT).

If the overpayment was caused by agency error, it must be entered into both ADAPT and the Locality Automated System for Expenditure Reimbursement (LASER). The Division of Finance will deduct the amount from the next reimbursement made to the locality.

When an overpayment is keyed in ADAPT, the FIPS entered must always represent the originating locality. The originating locality is the locality in which the overpayment occurred. An agency entering a claim in ADAPT, where the overpayment occurred in another agency must enter the originating FIPS on BAT185 (Benefit Adjustment 185% Income Test). This must be done before keying the overpayment information on BATAOC (Create Overpayment/Claim).

503.6 - WAIVER OF CERTAIN OVERPAYMENTS – Federal regulations allow certain overpayments to individuals no longer receiving assistance to be waived (temporary delay).*

A. Overpayment Less than $35 - All overpayments to individuals no longer receiving assistance which are less than $35 are to be waived after the local agency has: 1) notified the individual, or attempted to notify the individual if his/her whereabouts are unknown, in writing, that an overpayment has occurred which must be repaid; and 2) the individual fails to respond or refuses to cooperate with the request for repayment. No further action to recover the overpayment is to be taken. The case record must be documented. (NOTE: The agency must allow at least 10 days from date of mailing for the individual to respond to the request for repayment prior to waiving recovery of the overpayment.)

B. Overpayments of $35, or More - In situations where the outstanding overpayment of TANF/VIEW to an individual no longer receiving assistance is $35, or more, the local agency may waive collection of the overpayment after reasonable efforts to recover the overpayment have been taken and it is determined that further efforts would not be cost-effective. The agency must notify the individual that an overpayment has occurred, which must be repaid, by sending a letter requesting repayment to the individual's last known address. In order to demonstrate reasonable efforts, the agency must take the actions listed below. The actions must be taken in the following order; however, the agency may evaluate whether further efforts would be cost-effective after any one of the actions to collect the overpayment is unsuccessful.

1. Attempt to locate the individual. If the individual's present whereabouts are unknown and attempts to locate the individual has been unsuccessful, the case record must contain documentation of attempts made to locate the individual, such as mail returned to the local agency;

2. Determine that the former recipient has no means with which to repay the overpayment. The case record must contain documentation of evidence used by the agency to determine the individual has no income or cash reserves;

* 45 CFR 233.20(a)(13)(vi)

3. Discuss methods of repayment with the individual. If the individual refuses to cooperate, secure a written statement from the individual that he refuses to repay the overpayment.

Once reasonable efforts to collect the overpayment have proven to be unsuccessful, the agency must document the case record with evidence that further recovery efforts would equal or exceed the amount of the overpayment. Such evidence may include the cost of staff time, the cost of legal/attorney fees, or any other evidence the agency has which demonstrates that further recovery efforts would not be cost-effective. The agency head, or his designee, will make the final determination as to whether further efforts would be cost-effective.

C. Retention of Information - The agency must maintain information on individuals no longer receiving assistance who received an overpayment which was waived, including overpayments less than $35. The agency must initiate recoupment procedures should one or more of those individuals again be found eligible to receive assistance.

D. Intentional Program Violation (IPV) - In situations involving a TANF/VIEW IPV, the agency must make every effort to collect the overpayment regardless of the amount; the overpayment may not be waived. See Section 102 for policy on handling Intentional Program Violations (IPV).

503.7 - Calculating Overpayments - There are several factors which must be considered when calculating overpayments (IPV and non-IPV).

A. Determination of Continued Eligibility - When any change in circumstances which caused an overpayment is still in effect at the time of discovery, the agency must first prospectively determine the client's continued eligibility.

B. Determination of When the Overpayment Began - The worker is to determine when the overpayment began and secure all verifications necessary to calculate the overpayment. The overpayment began in the month the change occurred if the source of the overpayment is:

1. SSN or application for a SSN for a newborn
2. the receipt of a lump sum which did not meet the reported timely requirement or when combined with other income is less than 100% of need,

If the overpayment is the result of any other factor, excluding the receipt of a lump sum which met the reported timely requirement or was equal to or more than 100% of need, the overpayment began the month following the month the change occurred.

Assistance payments issued and payment reductions delayed as a result of the advance notice period are not overpayments. Refer to the examples below:

Example 1: On April 27, Mrs. Smith reports new employment. A prospective determination reveals that Mrs. Smith's May income is going to exceed need. Due to the advance notice period, the worker cannot close the case until June 1. The May payment is not an overpayment.

Example 2: On August 5, Ms. Carter reports her new job. Although the information is reported timely, the agency fails to take action to reflect the anticipated income for September. Since the reason the September payment was not reduced or terminated was because of the agency's failure to act and not the advance notice requirement, the September payment is an overpayment which must be recouped/recovered.

C. Impact on Earned Income Disregards When Calculating Overpayments - When calculating overpayments which are the result of the customer's failure to timely report receipt of earned income, the earned income disregards are not to be allowed in the 185% **screening but are allowed in the** standard of assistance screenings, **and** in determining the amount of the correct payment.

The earned income disregards are applied in accordance with Sections 305.1.A and B., when calculating an overpayment resulting from:

- the agency's failure to act on a change in earned income which was reported timely,
- any action which cannot be taken due to the advance notice period, or
- payments issued pending an appeal decision.

D. Support Related Overpayments - When an overpayment occurs which is the result of the client's failure to redirect support, the client's needs are not to be removed for purposes of calculating the overpayment.

E. Income Related Overpayments - The local agency must determine the correct amount of the payment the assistance unit should have received for those months the assistance unit actually received an overpayment.* Using conversion factors of 4.3 and 2.15, if appropriate based on Section 305.1.B.2.b, screen the income at 185% and at the standard of assistance to determine the monthly payment amount. In cases involving changes required to be reported or payments made pending an appeal decision, the local agency must determine the month that the overpayment initially occurred and all other months as follows:

1. If, due to a misunderstanding or inadvertent error on the part of the assistance unit, an assistance unit failed to report a change in its circumstances within 10 days of the date the change became known to the assistance unit, the first month of an overpayment will be the first month in which the change would have been effective had it been reported in a timely manner.

   The local agency may not determine as the first month in which the change would have been effective, any month later than two months from the month in which the change in income occurred, **unless it is determined that a verified disability affected the person's ability to understand the reporting rule. In that situation the local agency worker has the discretion to determine that the overpayment began at the time that the agency first learned about the overpayment or first determined that it had failed to act upon information correctly provided by the individual.**

2. If the assistance unit reported a change within the prescribed time limits, but the local agency did not act on the change timely, the first month affected by the local agency's failure to act must be the first month the local agency should have made the change effective. Therefore, if an advance notice was required but was not sent, the local agency must assume that the maximum advance notice period as provided in Section 401.4.C would have expired without the assistance unit requesting a fair hearing.

3. If prospectively ineligible, the full assistance payment is an overpayment.

4. If the prospective determination renders the case eligible, calculate each month's overpayment and apply earnings disregards as indicated in Section 503.7.C., if applicable.

F. Overpayments Not Related to Income - If an overpayment is the result of any factor other than income, the overpayment is to be based on the actual circumstances of the case each month.

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* 45 CFR 233.20(a)(13)

Example: In June the worker discovers that an eligible child left the home on August 5 of the previous year. The child should have been reported no later than September 10. Overpayments must be calculated beginning with the October payment. The overpayment amount is the difference between the grant received each month and the correct grant for the actual number of eligible members living in the household.

G. Overpayments Resulting from Incorrect Composition of the Assistance Unit
When it is discovered that an individual required to be in the assistance unit is living in the home, it must be determined if an overpayment occurred. This determination is to be made as follows:

1. Redetermine eligibility for each month beginning with the month following the month the individual entered the home or was required to be in the assistance unit, including the individual's needs, and actual income. Any resulting overpayments must be recouped/recovered.

2. If during the period in which the individual was required to be in the unit he had no income or his needs exceeded his income, an underpayment has occurred only for the months in which all categorical requirements were met and the conditions of eligibility are retroactively deemed to be met per Section 401.2.B.2.c. (See Section 503.9.)

H. Total support collected by DCSE, as identified on the Notification Report, must be deducted from TANF overpayments.

Example: A $354 TANF payment was made for the month of April which included a $100 Match Payment. The amount subject to recoupment is $254, minus total support collected by DCSE in April (the month the overpayment occurred), which was $75; therefore, the April overpayment is $179.

I. In localities meeting the standard of need, only the standard of assistance State/federal share of the TANF overpayment is to be reported to Financial Management. Each locality is then responsible for recovery of the local share of the overpayment directly from the client.

J. Calculating a VIEW Overpayment – A VIEW overpayment occurs when a VIEW participant **is found to have committed an IPV for receiving** a payment or purchase on his behalf which is an amount greater than what he is eligible for or for which he is ineligible.

The worker must determine if the participant is still eligible for services and determine the correct cost of the services that the participant would continue to receive. **The case record must be documented with information to support the establishment of the claim or the reason for not establishing the claim.**

Example: The agency gives the client a $50 voucher for work clothing. The client changes the amount to $500 and the vendor honors the voucher. There is an overpayment of $450.

Determination of When the Overpayment Began – The agency is to determine when the overpayment began and secure all verifications necessary to calculate the overpayment. The worker is to use the best available evidence including, but not limited to:

1. past and existing vouchers from vendors that were paid in the period that the overpayment occurred,

2. the history of payments for supportive or transitional services that were paid for by the local agency in the period that the overpayment occurred and,

3. the amount calculated starting 10 days from when the client had knowledge of the information.

When calculating the overpayment amount the worker is not to include any amounts that the individual paid toward services that were provided in the period the VIEW overpayment occurred.

Note: The client is to repay the calculated amount unless the court orders differently.

503.8 RECOUPMENT AND RECOVERY OF OVERPAYMENTS - State Board policy, adopted in accordance with federal regulations,* requires the local department to promptly recoup or recover any overpayments including overpayments resulting from assistance paid pending hearing decisions. Repayment by either a former or current recipient of the overpayment can occur through recoupment or recovery or both. The agency should discuss voluntary repayment with the client prior to initiating a recoupment.

A. Recoupment consists of withholding all or part of the assistance payment. An overpayment made to a current recipient must be recouped by reducing the amount of any future assistance payable to any assistance unit of which the individual is a member.

1. In situations where the client has no cash reserve or countable income (payment equals the Standard of Assistance for the AU), 10% of the assistance payment may be recouped until the overpayment has been repaid.

   Example: Grant of $320.00. Recoup 10%. New grant $288.00.

* 45 CFR 233.20(a)(13)(i)

2. In situations where the client has earned income, unearned income, or any combination thereof, in addition to his assistance payment, part or all of the assistance payment may be recouped as long as the assistance unit retains at least 90 percent of the standard of assistance when the total gross income **and** the amount of the current grant **are** considered.

   a. Determine the amount of the overpayment.

   b. Combine all gross income (no earned income disregards apply) and the current grant.

   c. Determine what 90% of the standard of assistance for a family of equal size in the same locality would be. This represents the amount of money the client must have available to live on.

   d. The difference in Step b. and c. represents the client's ability to repay the overpayment.

The monthly assistance payment will be reduced according to (1) and (2) above until such time as the overpayment has been repaid. If, however, income and/or cash reserves have been counted in establishing the client's ability to repay, recovery of the overpayment may also be accomplished through voluntary repayment. This option is to be offered to the client prior to initiating a recoupment.

If recoupment reduces the grant to zero, the case will be retained as TANF eligible with no money payment.

B. Recovery consists of making arrangements with a former or current recipient for voluntary repayment of all or a portion of the overpayment even though the client may no longer be eligible for assistance. If a former recipient fails to make the voluntary repayment, the agency must initiate action under Section 63.2-512, Code of Virginia, to collect the amount as a debt. Failure or refusal of a current recipient to voluntarily repay the overpayment will result in court action only when recoupment is not possible and, thus, precludes prompt correction of overpayments as described in 503.7D, i.e., no grant from which to recoup due to a deficit of less than $9.50.

C. RESPONSIBILITY FOR OVERPAYMENTS – The allowable amount of recoupment or recovery of the overpayment from the client is limited to the total amount of the overpayments.

   1. When TANF benefits are overpaid, the caretaker-relative of the assistance unit at the time the overpayment occurred shall be primarily responsible for repayment of the overpayment. If that particular caretaker-relative is not available, and his whereabouts are unknown, then the overpayment is to be recovered from the remaining members of the assistance unit.

The agency shall recoup or recover any overpayment from:

a. The assistance unit which was overpaid.

b. Any assistance unit of which a member of the overpaid assistance unit has subsequently become a member.

2. When the overpayment is the result of intentional erroneous receipt of VIEW supportive or transitional services, only the VIEW participant is responsible for repayment. Other members of the assistance unit at the time of the overpayment are not liable for repayment of a VIEW overpayment.

The agency will only require payback from VIEW when there is a definable cost.

Outstanding overpayments must be recovered or recouped when a former recipient reapplies for assistance and is found eligible. The schedule of repayment is to be based on the current situation of the client.

D. PROMPT CORRECTION OF OVERPAYMENTS - An overpayment must be recouped or recovered as soon as administratively feasible. One of the following actions must have occurred by the end of the calendar quarter following the quarter in which the overpayment was first identified.

1. Repayment must have already been accomplished.

2. Action to locate and/or recover from a former recipient must have been initiated.

3. Repayment from current recipient occurring either through recoupment or voluntary repayment.

If instances occur where none of the three actions have been taken by the time stated above, the overpayment must still be recouped or recovered.

If prosecution for an IPV occurs, then the amount of court ordered restitution will be the amount of the overpayment to be recovered from that case.

E. DETERMINING INTENTIONAL PROGRAM VIOLATIONS (IPV) - A client error may or may not be an IPV, which exists when there is evidence clearly establishing that the recipient willfully withheld information or gave false information affecting his eligibility or the amount of assistance. (See Section 102 for further procedures.)

F. REPORTING OVERPAYMENTS - In instances where the assistance payment is reduced or suspended to recoup an overpayment previously repaid to the State Department of Social Services, or cash amounts are received as recovery of money previously repaid to the Department of Social Services from local funds, an adjustment must be reported on **LASER** in order that the locality can recover local funds paid to the State. The amount of the deduction made from the current payment, the amount of the suspended grant, or the cash amount received as recovery should be shown as an addition to expenditures in **LASER**.

G. RETENTION OF OVERPAYMENT RECORDS – All overpayment records must be maintained for three years after the claim is satisfied.

* 45 CFR 233.20(a)(13)(ii)

503.9 CORRECTION OF PRIOR UNDERPAYMENTS - Federal regulations require that, if a State Plan provides for recoupment/recovery of overpayments from the client, it must also provide for prompt correction of prior underpayments to current recipients and those who would be current recipients if the error causing the underpayment had not occurred.* Therefore, the agency is to correct any underpayment to any person who is currently in need, regardless of whether they are current recipients. (See 305.1.D.2.C.) The local agency shall notify a case not currently receiving assistance, in writing, of requirement to demonstrate their current need (that they would currently be eligible for **TANF** if they

applied) in order to receive underpaid benefits. Additionally, when the agency discovers that a household was incorrectly denied/terminated, the former applicant/recipient must provide verification that the assistance unit was actually eligible for each month subsequent to the incorrect denial/termination. An underpayment will only be calculated for each month such verification is provided.

When it is learned that an underpayment has been made as a result of any (client or agency) error, there must be correction of the prior underpayment by repayment to the client as follows:

1. The total allowable repayment to the client shall be the amount of the underpayments.

2. Retroactive repayment of prior underpayments shall be made either in one lump sum payment or by monthly installment payments to the client until the full allowable repayment is made. The method of payment is to be selected by the local agency.

3. The retroactive corrective payment shall not be considered as income in determining need and the amount of the continuing assistance payment for which the recipient is eligible in the month in which it is paid or the next following month. The **TANF** maximum payment may be exceeded by the amount of such corrective payment.

The agency must also correct outstanding underpayments to former recipients who have reapplied and are found to be eligible.

The above instructions are not applicable when a corrective payment is made as a result of an appeal to the State Board or a court decision. In such cases, the terms of the State Board decision or court order apply.

At the time a grant is made or increased for the purpose of correcting a prior underpayment, the recipient must be informed in writing of the purpose of this special allowance; the amount and the period for which it will be made; and the fact that it will automatically terminate at the end of the specified period. If this is done and the recipient, at the time the special allowance is terminated, appeals within the advance notice period, assistance need not be continued in the original amount.

503.10 OFFSETTING OVERPAYMENTS AND UNDERPAYMENTS - In cases which have both an underpayment and overpayment, the agency will offset one against the other in correcting the payment.

CHECK HANDLING INFORMATION AND PROCEDURES

This appendix explains check handling procedures for cancellation or re-issuance of returned checks, replacement of lost/stolen or mutilated checks, reimbursement of localities for locally issued checks, **mailing checks when a direct deposit did not post to client's account** and obtaining a copy of a cashed check. Note: The ADAPT transactions below indicate how to complete fields related to check handling procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. Glossary

1. ADAPT - The Application Benefit Delivery Automation Project.

2. **Direct Deposit – The process by which TANF benefits are electronically posted to a client's bank account.**

3. Cancelled Check - A cashable check that is returned to the State and redeposited in a State account. A check cannot be cancelled if it cannot be cashed, i.e., if there is a stop payment against the check, if the check has already been cashed or if the check is mutilated. When a check is cancelled, any recoupment is null.

4. EW - The eligibility worker or other local department of social services staff with check handling responsibility.

5. Forgery - A payee states that the signature on the back of a State check is not hers/his. The account of the first casher is debited, and the money is deposited into a special State account.

6. FPU - Fiscal Processing Unit. The FPU is the unit within the State Department of Social Services, Division of Finance, that processes returned/undelivered checks, lost/stolen checks, cancelled, and mutilated TANF checks.

7. Fraud - The payee signs affidavits stating she/he did not cash the State check, but the payee has cashed or cashes the check or receives benefit of the check. The local agency must get local money back from the payee if any was given to the payee.

8. LASER – The Locality Automated System for Expenditure Reimbursement.

9. LDSS - The local department of social services.

10. Mutilated Check - A check is mutilated if it cannot be cashed, i.e., the magnetic ink has been torn, the amount or payee has been tampered with, or if 1/2 of the check cannot be recovered. If less than 1/2 of the check can be recovered, Stop Payment procedures must be followed.

11. Payment History - A history in ADAPT of the payments received by a case.

12. Replacement Check - A local or State check that is written to the payee to replace a State check that is mutilated or has a stop payment placed against it. The local agency that wrote the original check is the only local agency that can write such a check.

13. Specific Payment Inquiry - Information specific to an individual payment on the Payment History.

14. Stop Payment - An action placed against a check so that it will not be honored, i.e., in the case of a lost/stolen or mutilated check. The check is stopped, not the payment to the client. Recoupment is not affected. A local or State check generated through ADAPT should be issued to the payee.

15. VACIS - The Virginia Client Information System (VACIS) accessed by FPU to send and receive check status information. Codes entered into VACIS by FPU are communicated to the ADAPT check handling screens.

B. TANF Checks - Schedules and Mailing Information

1. Mailing - State-generated TANF checks are mailed by the State Treasurer's Office. The check date is the mailing date.

2. Monthly Cycle - Ongoing State-generated TANF checks to be issued/mailed on the first of each month.

3. Daily Cycle - Initial and supplemental checks generated by the State.

C. Undelivered Check Procedures

1. Check Returned to VDSS by the Post Office

Responsible Party	Action
FPU	▪ As soon as a check is returned to VDSS, FPU updates the VACIS check status screen to flag the check with a “U” code (Undelivered). ▪ This updates the Public Assistance Payment History (CHPAH1) screen in ADAPT, notifying the EW that the check has been returned to the State and places an entry on the PA Check Actions Required Inquiry screen of the LDSS. To view, sign on to VACIS and enter the parameter string “PAACTQ.” ▪ Note: If action is not taken by the locality within 10 calendar days from the handling date shown on CHPAH1, the check will automatically be cancelled by FPU with a CA1 code.

a. To remail the check:

Responsible Party	Action
LDSS	▪ **The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU, Check Status Update.** ▪ **The Public Assistance Payment History (CHPAH1) screen is presented. The EW enters "Y" beside the check to be remailed.** ▪ **This brings up the Check Status Update (CHSTAT) screen. The EW completes the Status Update Reason Code, entering "D01" to mail the check to the same address, or "D02" and the new address to mail the check to a new address. This information is sent to FPU through VACIS.**
FPU	▪ **FPU checks the VACIS PA Check Actions Required Inquiry screen at least daily and, upon receipt of notification, remails the check and clears it from VACIS. The action in VACIS updates the Public Assistance Payment History (CHPAH1) in ADAPT to show the check status as "Remailed."**

b. To cancel the check:

Responsible Party	Action
LDSS	▪ **The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU, Check Status Update (CHSTAT).** ▪ **The Public Assistance Payment History (CHPAH1) screen is presented. The EW enters "Y" beside the check to be cancelled.** ▪ **This brings up the Check Status Update (CHSTAT) screen. The EW completes the Status Update Reason Code, by entering the appropriate cancellation code. This information is sent to FPU through VACIS advising them to cancel the check.**
FPU	▪ **FPU checks the VACIS PA Check Actions Required Inquiry screen at least daily and, upon receipt of notification, cancels the check and clears it from VACIS. The action in VACIS updates the Public Assistance Payment History (CHPAH1) in ADAPT to show the check status as "Cancelled."**

2. State Check Returned to LDSS

Responsible Party	Action
LDSS	▪ **When a check is returned to the LDSS, it must be cancelled. The EW must stamp the back of the check with the agency stamp and return it to FPU with a note to cancel the check and stating the reason the check was returned.** ▪ **Note: Do not write VOID on the check.**
FPU	▪ **FPU cancels the check and updates the Public Assistance Payment History (CHPAH1) in ADAPT to show the check status as "Cancelled."**

3. Check Reported Undelivered by Payee

Responsible Party	Action
LDSS	▪ **When the payee reports nonreceipt of the check, the EW determines if the payee has moved since the last check was received.** ▪ **If the payee has moved, he/she should inquire at the former address about the delivery of the check there. The EW must immediately update the address section of the Case Information 1 (AECASE) screen to ensure that future checks are sent to the new address.** ▪ **If the payee has not moved, ask him/her to watch for the postal carrier the next day and inquire about the check delivery.** ▪ **The EW must verify that the check in question was issued. To do this, access Option 8 on the ADAPT Main Menu to bring up the Check Handling Menu (CHMENU). On CHMENU, access Option 1, PA Payment History Inquiry. This presents the Public Assistance Payment History (CHPAH1) screen where the status of the check is displayed.** ▪ **Note: The EW must check the Public Assistance Payment History (CHPAH1) at least daily.** ▪ **If ADAPT shows a check was processed, follow the lost/stolen procedures.** ▪ **If ADAPT shows anything other than processed, follow the procedures for that status.**

4. Check Reported Lost/Stolen by Payee

a. The payee reports nonreceipt of a TANF check:

Responsible Party	Action
LDSS	▪ The pay FIPS reflected on the Public Assistance Payment History (CHPAH1) is the LDSS responsible for the check, regardless of the present locality of residence. The locality will request the stop payment, issue the replacement check, and correspond with FPU for that check. **Note A FEP recipient check must be a State-issued check. If locally written, no reimbursement is available.**
	▪ Before initiating any action, the EW must look up the payment history to be sure a check was written and sent and to make sure that the check has not been cancelled, undelivered, re-issued, mutilated or stopped. If any of these appear, refer to the appropriate procedures.
	▪ To check the payment history, access Option 8 on the ADAPT Main Menu to bring up the Check Handling Menu (CHMENU). On CHMENU, access Option 1. This presents the Public Assistance Payment History (CHPAH1) screen where the status of the check is displayed. To view payment details, enter a "Y" beside the lost/stolen check and the PA Specific Payment History (CHSPHS) screen will display.

a. Obtain signed affidavits:

Responsible Party	Action
LDSS	▪ If a check was issued, have the payee complete and sign **three** State affidavits (Form 032-06-118/3). Both the front and back of the affidavits must be completed. The affidavits must be notarized and stamped with the notary seal.
	▪ If the affidavits are incomplete, incorrect, or are photocopies, FPU will return them to the LDSS for correction. FPU will not make corrections to the forms. **All three** affidavits must be original copies with an original signature.
	▪ Note: The payee for the check is the only person allowed to sign the affidavits. If the payee and recipient are two different people, be sure the payee is signing the affidavits.

Responsible Party	Action
LDSS	▪ Send **two of** the affidavits to the FPU in a large envelope. The affidavits must not be folded. Send the affidavits via overnight pouch to: Margretta Patterson VDSS Central Office Division of Finance Fiscal Processing Unit ▪ **File the third affidavit in the eligibility record.**

b. Enter stop payment request in ADAPT:

Responsible Party	Action
LDSS	▪ After the fourth mail delivery day from the check date (same as the mail date), if the payee still has not received the check and the check has not been reported by the FPU as undelivered, initiate action to stop payment. ▪ Note: If the payee reports that the check has been lost or stolen after receipt, the stop payment procedures still apply. ▪ The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU to access the Public Assistance Payment History (CHPAH1) screen. ▪ On CHPAH1, place a "Y" in the field beside the TANF check for which the stop payment is appropriate. This brings up the Check Status Update (CHSTAT) screen. ▪ On CHSTAT, enter the appropriate stop payment code in the Status Update Reason Code field. Note: A supervisor must authorize this function. ▪ This information is sent to the FPU PA Check Actions Required Inquiry screen, notifying FPU of the stop payment request. ▪ Under no circumstances should an LDSS request a stop payment without having two completed affidavits with original signatures. An LDSS that requests a stop payment without first obtaining affidavits risks nonreimbursement of a locally issued replacement check.

Responsible Party	Action
FPU	▪ **FPU checks VACIS at least once a day for stop payments initiated by the LDSS.** ▪ **Upon receipt of two correctly completed affidavits and the stop payment request through ADAPT, FPU takes action to stop payment on the check, then updates the Public Assistance Payment History (CHPAH1)screen to show the check status "Stop Resolved."** ▪ **Note: Only after the check status on the PA Payment History (CHPAH1) has been changed to "Stop Resolved" can a State check be written or a locally written check be reimbursed.**

D. Checks Lost by First Casher After Check Is Cashed by Payee (e.g., Fire, Robbery, or Employee Error)

Responsible Party	Action
LDSS	▪ **Affidavits are not required from the payee. However, for the locality's own protection, it is recommended that the payee sign a statement that he/she did cash the check at the casher's and did receive the amount of the check. Have the statement signed by a notary and keep it in the case folder.** ▪ **Enter a stop payment request in ADAPT and write a letter of explanation to the FPU. The letter must be on LDSS letterhead and include the check/warrant number, case number, payee name, date, and amount of the check. A copy of the payment history can be used to provide the identifying information.**
FPU	▪ **Upon receipt of the explanation, FPU takes action to stop payment on the check, then enters the appropriate stop payment code in VACIS. This, in turn, updates the Public Assistance Payment History (CHPAH1) to show the check status "Stop Resolved."** ▪ **The LDSS must then issue a local check to the casher and record the check in ADAPT using Option 4 on the Check Handling Menu (CHMENU). This information is transmitted to the F10.2 report. Upon receipt of the report by the LDSS, the check information must be entered in LASER. The LDSS will be reimbursed via electronic transfer.**

E. Mutilated Checks

Responsible Party	Action
LDSS	▪ The pay FIPS reflected on the Public Assistance Payment History (CHPAH1) is the LDSS responsible for the check, regardless of the present locality of residence. ▪ If less than one-half of the check is recovered, follow stop payment procedures under "Lost/Stolen Check Procedures" in C.4.c above. ▪ Note: A mutilated check cannot be cancelled. ▪ If one-half or more of the check can be recovered and can be read, send the mutilated check to FPU. Attach a letter on LDSS letterhead explaining what happened and including all the identifying information on the check, i.e., case number, check/warrant number, name and address on the check, amount, check date and FIPS code on check. A copy of the payment history can be used to provide the identifying information.
FPU	▪ FPU updates the VACIS PA Check Action Inquiry screen with stop payment code M01. This, in turn, updates the ADAPT PA Public Assistance Payment History (CHPAH1) check status to "Mutilated."
LDSS	▪ The EW issues a local check to the payee.

F. Lifting a Stop Payment Order

Responsible Party	Action
LDSS	▪ Telephone Margretta Patterson in FPU at (804) 692-2334 and request that the stop payment be lifted. ▪ If the stop payment can be lifted and the LDSS has not issued a replacement check to the payee, the payee may cash the original. ▪ If the stop payment can be lifted and the LDSS has issued a replacement check to the payee, retrieve the original State check from the payee. During the phone call to FPU, the LDSS will receive instructions concerning reimbursement if a local check was issued.

G. Check Cashed After Stop Payment Placed Against Check

Responsible Party	Action
FPU	▪ The bank voids the stop payment request if the check has been cashed on the same day. If the check is cashed the next day and the stop payment is in place, the casher must request replacement from the recipient who received the cash.

H. Check Cashed Before Stop Payment Request

Responsible Party	Action
FPU	▪ The bank is checked for the status of the check. Fraud action will be initiated by FPU.
LDSS	▪ The locality will issue the replacement check following procedures in C.4.c. above.

I. Procedure to Ensure Reimbursement for a Locally Issued Check

Responsible Party	Action
FPU	▪ FPU receives the affidavits, determines they are correctly completed, and enters S84 or S86 into VACIS. This updates the check status on the Public Assistance Payment History (CHPAH1) screen in ADAPT.
LDSS	▪ After FPU has updated the Public Assistance Payment History (CHPAH1) screen indicating a stop payment against the original check, a local or State replacement check may be written.
	• The EW then records the locally issued check using Option 4 on the Check Handling Menu (CHMENU). This information is transmitted to the F10.2 report and upon receipt in the LDSS must be entered into LASER. The LDSS will be reimbursed via electronic transfer.

J. How to request a copy of a cashed check

Responsible Party	Action
LDSS	▪ The LDSS sends a written request for a copy of a cashed check to the FPU. The letter must include the payee name and address, case number, warrant number, date of check and amount or send a printed copy of the payment history.
	▪ Note on the request if a certified copy is needed for court and include the court date.
FPU	▪ Upon receipt of the request, the FPU will send a copy of the check to the LDSS.

K. How to Process a Direct Deposit Request

Responsible Party	Action
Client	▪ The client must provide a completed and signed Direct Deposit Enrollment Authorization Form (#032-03-672) and a voided check.
	▪ The client is to complete Section 1 of the form. Section 2 must be completed by the bank if the client does not have a voided check.
Eligibility Worker	▪ The case must be in the Ongoing mode. The case name must be on the bank account. The bank account can be a checking or savings account.
	▪ From the ADAPT Main Menu the Eligibility Worker will select Option 4, Case Utilities Menu (CUMENU). Transmit.
	▪ Select Option 12, TANF Direct Deposit Information. Enter the ADAPT case number. Enter “U” (Update) in Access. Transmit.
	▪ On the Case Utilities Direct Deposit (CUDDEP) screen, enter the Institution Name. The account name is pre-filled with the case name. Enter the Account Type, “c” (checking) or “s” (savings).
	▪ Enter the Bank Routing number, which is found at the bottom left side of the voided check, or Section 2 of the Direct Deposit Enrollment Authorization form (032-03-672). Enter “vr” beside “V” for Verification.

- **Enter the bank Account Number. This is the second set of numbers at the bottom of the check to the right of the routing number or in Section 2 of the Enrollment form. Enter "vr" beside "V" for verification. The account number is separated from the routing number by a colon. Transmit.**

- **A pop up box will ask, "Do you want to print the letter?" This is the pre-note letter that is sent to the client informing the client that the request for direct deposit has been processed and instructing the client to check the account number and routing number to make sure the information is correct. If the information is not correct the client is to contact her Eligibility Worker.**

- **The worker will enter "y" to print the letter. Transmit.**

- **The direct deposit request is put into Pending status. Allow seven days for the direct deposit information to be verified with the client's bank. Once the information is verified as correct the direct deposit screen will become Active. The direct deposit Active Status communicates to ADAPT that this case is direct deposit.**

L. <u>Procedures to reissue benefits that did not electronically post (direct deposit) to client's bank account</u>.

Responsible Party	Action
FPU	▪ **As soon as a direct deposit is returned to VDSS, FPU updates the ADAPT check status screen to flag the direct deposit with CD1 (Cancel Direct Deposit).**
ADAPT	▪ **ADAPT automatically updates the Public Assistance Payment History screen (CHSPHS) with information that the direct deposit returned to the state and places the entry on the worker's Action Due List Inquiry screen.**
Eligibility Worker	▪ **The EW must check the Local Action Due Inquiry Listing during the first five days of the month, and check the listing when a client reports her TANF benefit is not in her account. A direct deposit that did not post will be on the list with the code (CD1) Cancel Direct Deposit. The worker**

must take action to mail a check to all clients listed. To access the Local Agency Action Due Inquiry List, select option 8 from the ADAPT Main Menu. Transmit. Select option 8 Check Handling Action Due List. Transmit. **Note: When a direct deposit becomes CD1, the next month's benefit check will be issued to the client through the ADAPT system.**

The EW is to mail the client the Direct Deposit Closed Account/Incorrect Information letter (032-03-674). This letter is sent to the agency printer by ADAPT. The EW is to check the appropriate box on the letter for the reason the direct deposit did not post. The reason is located on the Direct Deposit Utilities (CUDDEP) screen and the PA Specific Payment History (CHSPHS) screen. The letter notifies the client that the direct deposit did not post to the client's account and for the client to contact the local agency. A copy of the letter is to be put into the client's file.

- The EW **may** issue the client a state check **or local check**. Select Option 9, TANF Benefit Adjustment from the ADAPT Main Menu. On the TANF Benefit Adjustment screen enter "u" in Access, enter 11 in Option, enter pay ID # and the month for which the check is requested. Transmit. Enter the appropriate information to issue the state **or local** check.

Note: Whenever the client changes the routing number or bank account number CUDDEP will be put into Pending. A new pre-note file will go to the client's bank. Allow seven days to verify the information. A new pre-note letter is sent to the client and a copy is put in the client's file.

M. How to cancel a direct deposit

Responsible Party	Action
Eligibility Worker	▪ Upon receiving a request in writing or the Direct Deposit Cancel Request form (032-03-675) completed by the client, the worker will access the ADAPT Main Menu. Select Option 4, CUMENU. Transmit. On CUMENU select Option 12, TANF Direct Deposit. On CUDDEP, press F5. A box will come up to ask you to confirm. Enter "Y" for yes. Transmit. (Note: If you enter "N" for no, no action will be done to the case.) The request to cancel the direct deposit must include the client's name, address, social security number, signature and date. The form is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi. ▪ Send the client the Direct Deposit Cancel Verification Letter (032-03-676). The letter is available at http://localagency.dss.state.va.us/Divisions/bp/tanf/forms.cgi.

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601.1 SUPPORT ENFORCEMENT PROGRAM -

A. Legal Base

Legislation enacted by the 1974 session of the General Assembly* provided for the establishment of a statewide support enforcement program with a support enforcement unit to carry the responsibility for initiating and maintaining such program. Amendments to the Social Security Act** effective August 1, 1975, make mandatory, on a national level, a Child Support Enforcement Program and set forth certain procedures relative to the payment and collection of child support and the establishment of paternity. Subsequent amendments to the 1974 legislation expanded the program to include collection of support paid on behalf of caretakers included in the assistance unit and establishment and enforcement of health care coverage. The Division of Child Support Enforcement (DCSE) was established within the State Department of Social Services to administer this program. Regional and district offices are located throughout the state. (See Appendix III.)

B. DCSE Responsibilities

DCSE has the responsibility for:

1. pursuing support from the absent parent(s);

2. establishing paternity;

3. locating the absent parent(s) if whereabouts are unknown;

4. determining ability to support;

5. collecting and distributing support from absent parent(s);

6. pursuing court action to secure support from the absent parent(s);

7. establishing and enforcing medical support obligations;

8. determining noncooperation with DCSE.

C. Local Agency Responsibilities

Local agencies carry the responsibility for:

1. determining the ability to support by the stepparent in the home;

* Code of Virginia, Sections 63.1-249 - 63.1-274.9
** Public Law 93-647

2. explaining the benefits of providing information to DCSE such as possible entitlement to receive up to a $50 disregard per month when support has been collected, monetary support for the child if the applicant/recipient loses TANF benefits, and future benefits or pensions for the children;

3. securing information regarding absent parent(s), and the amount of support, if any, which is received by or on behalf of the applicant/recipient from such persons;

4. reporting information about absent parent(s) to DCSE;

5. explaining the applicant/recipient's rights and responsibilities regarding the automatic assignment of rights to support (201.9), the requirement regarding cooperation in obtaining support and good cause for refusing to cooperate (201.10);

6. in pending applications where it appears from the applicant's statement that a putative father is functioning as a father to the child, the local agency may pursue the establishment of paternity via the Declaration of Paternity form (032-11-VS22).

Once a child becomes a recipient, the agency is not to pursue the putative father for the purpose of establishing paternity. However, the agency will accept an acknowledgement of paternity which is initiated by the putative father at any time. Paternity will be established by use of the notarized Declaration of Paternity form. There will be no instance in which the local agency initiates court action for the purpose of establishing paternity when the putative father is not in the home. Additionally, the local agency will not accept a notarized statement denying paternity under any circumstances.

7. determining good cause for not cooperating with DCSE;

8. determining noncooperation with the local department of social services;

9. determining exceptions to providing identifying information on the noncustodial parent in Section 201.10 A.1.c.).

601.2 REFERRAL OF CASE INFORMATION TO DIVISION OF CHILD SUPPORT ENFORCEMENT - Federal regulations specify that the local agency is responsible for reporting to the Division of Child Support Enforcement (DCSE) all identifying information regarding each absent parent including putative and legal fathers, to aid in the securing of support and establishing paternity for TANF cases.* This information must be provided concurrent with action approving the application or adding a child to a case, and is reported to DCSE. The information is collected on the "Absent Parent Deprivation/Paternity Information Form" and "IV-A/IV-D 501 Supplement." Information obtained is then entered into the MAPPER 501 system in the specified elements or, if there is no specific element, in the comment area. The collected information is transmitted to DCSE upon case approval or action to add a child.

Copies of documents, such as VS95's, paternity statements, birth verifications, and court orders or divorce decrees, if available, are to be submitted at the time of case approval by attaching the legal document or supplement to the "Document Transfer Cover Form" and sending it via the courier pouch to the DCSE district office serving your locality.

A. Referral of TANF Cases

All TANF children with at least one parent absent from the home, including unestablished paternity, must be referred to the Division of Child Support Enforcement (DCSE).* This referral is to be completed for each absent parent (AP), including legal fathers and putative fathers (whether the putative father is living in the home or not). No referral to DCSE is to be completed for a deceased legal parent, a deceased putative father, TANF-UP parents, a court convicted legal parent living in the home who is doing unpaid community service, the caretaker's absent spouse who is not a parent of one of the children in the assistance unit, or the absent parent of a child subject to the family cap provision, or the father of a child conceived by artificial insemination from an anonymous donor. In addition, no referral to DCSE is to be completed for an adoptive parent, a biological parent, or a putative father when there is a court ordered termination of Adoptive Parents Rights for a child. The client's statement is acceptable verification of the parent's status (reason for absence, including death), unless there is reason to question the information provided.

* 45 CFR 235.70

It is the responsibility of the eligibility worker to obtain as much information as possible at the time of application and when an individual is added to the TANF case. When any new information regarding the absent parent becomes known to the agency at each redetermination or during the interim, this information is to be transmitted to DCSE via the MAPPER 501 system.

In order for DCSE to have a "workable case," it is vital that certain key information be obtained by the Eligibility Worker when completing the form or transmitting information via the MAPPER 501 System. When interviewing the applicant/recipient, concentrate on securing the following information:

AP's name
AP's residence address (current and past)
AP's Social Security Number
AP's employer's name and address (current and past)
AP's date of birth
AP's parents' name and address (even if deceased)

Any of the above information, either in whole or a combination thereof will be beneficial to DCSE in locating the absent parent.

If the applicant/recipient cannot give the AP's name or can only provide the AP's name and no other identifying information, the Eligibility Worker should obtain as much information as possible on the "Absent Parent Deprivation/Paternity Information Form" and "IV-A/IV-D Supplement" for transmission to DCSE.

The Absent Parent Deprivation/Paternity Information Form and "IV-A/IV-D Supplement" are not to be given to the applicant/recipient to complete. The Eligibility Worker is to interview the individual and after completing the forms, have the parent or caretaker/relative other than the parent sign them.

The following criteria are to be applied when referring an absent parent to DCSE:

1. In all cases where the child's parents are married or were married at the time of the child's birth and when someone other than that parent is identified as the child's father, the putative or acknowledged father is to be referred as well as the legal father. When an acknowledgement of paternity in the local agency's case record or the birth certificate issued by the Virginia Department of Health, Bureau of Vital Statistics and Health Records identifies the child's father, paternity is considered acknowledged.

2. When there is no legal parent or acknowledged father and more than one individual is named as a child's parent, refer all named individuals

3. If an applicant/recipient claims that the father of the child is unknown, a referral must be made. The reason that the father is unknown must be evaluated with the applicant/recipient to determine if failure to cooperate or good cause exists. (201.10 A.1.c and 201.10)

4. For an otherwise eligible child who has been emancipated by court order (Sections 16.1-331 through 16.1-334 of the Code of Virginia), a referral must be made on the absent parent(s). For an otherwise eligible child who has been emancipated by marriage, the referral will also be made on the absent parent(s).

B. TANF-UP Cases

The natural or adoptive parents residing in the home in a TANF-UP case are not referred to DCSE. Determine if an absent parent of a child(ren) in the assistance unit must be referred as per policy in this section.

C. Changes to TANF and TANF-UP Cases

Changes to TANF and TANF-UP case information will be transmitted to the Division of Child Support Enforcement by computer.

When a child is added to an existing case, all identifying information regarding the absent parent must be provided to DCSE on the MAPPER 501 system concurrent with action to add the child in accordance with Section 601.2 A.

D. Contact with the Absent Parent

When the local agency determines that contact with the absent parent is necessary, such contact will be limited to verifying contributions being made directly to the assistance unit.

E. Automated Communication with DCSE

Eligibility workers are to inquire the "Cooperation in Obtaining Support Report" in the MAPPER 501 system at least once monthly to determine if the Division of Child Support Enforcement has transmitted information to the local agency. This report is sorted by agency FIPS and indicates that at least one of the following types of information has been sent by DCSE:

1. address changes of the absent parent;
2. name changes of the absent parent;
3. paternity data changes;
4. child not living with recipient;
5. failure of the client to cooperate with DCSE; and
6. good cause information; and
7. information that the absent parent lives with the recipient.

Address change information will automatically update absent parent case information in the MAPPER 501 system.

A name change made by DCSE of the absent parent will automatically update APECS information in MSI.

Paternity data information from DCSE will be displayed in the "Individual Child Data Screen" of the MAPPER 501 System. The information will indicate paternity establishment, paternity non-establishment, or paternity exclusion.

Receipt of information that the child is not living with the recipient or that the absent parent lives with the recipient requires that the eligibility worker investigate these circumstances for any possible effect on AFDC eligibility.

A referral to the agency to evaluate a claim of mental incapacity or undocumented rape or to reassess a good cause decision requires the worker to respond to DCSE as per Sections 201.10 A and 201.10 J.

601.3 LEGALLY RESPONSIBLE PERSONS - Under Virginia law the following persons have legal responsibility for support:

A. Husband, for wife*;

B. Wife, for husband*;

C. Parent, natural or adoptive, for child under 18, or child of whatever age who is incapacitated, unless such child is receiving federal or state assistance as permanently or totally disabled or is an adult qualifying for assistance to the blind.

D. A stepparent residing with a child(ren) of the natural or adoptive parent is responsible for such child(ren) who are receiving assistance and the parent as long as the stepparent lives with the natural or adoptive parent. The stepparent and the natural/adoptive parent will be considered living together regardless of absences due to military duty, employment, or other absences of convenience, as long as they consider themselves to be living as husband and wife. **Responsibility for the children does not exist once the natural or adoptive parent is absent from the home because of separation, divorce, or death.**

E. The father of a child born out-of-wedlock, if**

1. the father and mother have made a written statement acknowledging paternity, under oath, including acknowledgements of paternity made under oath by the father and mother prior to July 1, 1990; or,

2. the man, unrelated to any court action, voluntarily submitted to genetic blood testing which affirmed at least a 98 percent probability of paternity; or,

3. the court enters judgment on the basis of other evidence that the man is the father. Such evidence as specified in Section 20-49.4 of the Code of Virginia is limited to the following:

   a. that he cohabited openly or had sexual intercourse with the mother at the probable time of conception;

* Section 20-61, Code of Virginia
** Section 20-49.4, Code of Virginia

b. that he consented to or acknowledged, by a general course of conduct, the common use of his surname by the child;

c. that he claimed the child as his child on any statement, tax return or other document filed by him with any local, state or federal government or any agency thereof;

d. results of medically reliable genetic blood grouping tests;

e. medical or anthropological evidence relating to the alleged parentage of the child based on tests performed by experts;

f. a true copy of an acknowledgement of paternity made on the Declaration of Paternity (Form 032-11-VS22);

g. an admission by a male between the ages of fourteen and eighteen, provided a court has entered an order establishing paternity of a child based on his admission of paternity under oath or upon such other evidence as may be sufficient to support a finding of paternity.

602.1 REDIRECTION OF SUPPORT MONIES FROM NON-CUSTODIAL PARENTS - Federal regulations* state that in cases where an assignment of support is effective, support payments shall be made to Support Enforcement. The assignment is effective upon case approval. Therefore, any child support, including court ordered support, paid to the assistance unit from the non-custodial parent subsequent to case approval must be redirected to Support Enforcement. Once this support is redirected, it will not be considered in determining the amount of payment, until such time as the net support, when added to other countable income, is sufficient to meet the total needs of the assistance unit.

TANF recipients who have redirected all child support paid to the assistance unit from the non-custodial parent to the Division of Child Support Enforcement (DCSE) may be entitled to a TANF Match Payment. When current monthly child support collected by DCSE exceeds $50, a TANF Match Payment in the amount that exceeds $50 will be issued to the TANF recipient.

MONTH 1	MONTH 2	MONTH 3
Non-custodial parent pays current monthly support of $153 to DCSE. DCSE sends $50 disregard to TANF recipient.	**DSS receives DCSE's report showing total amount of current support collected to Division of Benefit Programs.**	**TANF Match Payment of $103 issued to TANF recipient. (Recipients continue to receive $50 disregard check.)**

602.2 TREATMENT OF SUPPORT - The following sections will outline when support received from a non-custodial parent in cash or in-kind is to be considered available to the assistance unit and counted accordingly. The term "total needs" used in the following is the statewide standard of assistance. The local worker's responsibility is limited to determining the amount of support received by the applicant/recipient from non-custodial parents, and determining eligibility and amount of assistance payment based upon the policy set out below.

602.3 SUPPORT FROM NON-CUSTODIAL PARENTS ABSENT FROM THE HOME

During the initial determination of eligibility, the first $50 of monthly child support received, or expected to be received, by the applicant will be disregarded in the eligibility screen and grant calculation. If the amount received or expected to be received is less than $50, the entire amount is to be disregarded. All remaining support (net countable) will be considered as income for computing the amount of any payment made to the family for a period prior to the first assistance check. This procedure applies to A., B., C., and D. below.

If the family is determined to be otherwise eligible according to policy, assistance must be granted without delay. Child support received from non-custodial parents during the application processing stage, less the first $50 of total support received, or expected to be received, will be considered as income to the A.U. for any payment made to the family for a period prior to case approval. The disregard of the first $50 of child support is also applicable to support received, or expected to be received, from a putative father during the application processing stage. Additionally, this disregard will be applied to support from the putative father subsequent to case approval until the recipient redirects such support to the Division of Child Support Enforcement.

* 45 CFR 302.32 (A)

A. Absent Parent or Acknowledged Father

Determine the amount of support received from the non-custodial parent.

1. Subtract the first $50 from the total child support received to determine net support.

2. If net support when added to other countable income is sufficient to meet the total needs of the assistance unit, eligibility does not exist.

3. If such support when added to other countable income, is insufficient to meet total needs of the assistance unit, the budget will be computed showing total needs minus other countable income. The support received will not be counted as income after **case approval**. The applicant/recipient must be advised that all future support received must be forwarded to Support Enforcement. See 305.4.E.2. for exceptions.

B. Absent Spouse of the Caretaker who is a Relative of the Specified Degree Other Than Parent of Eligible Children - Determine if the absent spouse of such caretaker is paying support and/or alimony and the amount contributed. If the amount being paid, when added to other countable income of the caretaker, equals or exceeds that individual's needs, the caretaker will be excluded in determining the amount of assistance payment. If the amount is insufficient when considered as above, the caretaker will be eligible to be included in the assistance unit. Support/Alimony received by the caretaker must then be combined with gross support being received from the absent parent of the eligible children. (See Section 305.4.E.2 regarding the calculation of the initial payment(s)). Future support/alimony payments received after case approval must be paid to the Division of Child Support Enforcement and this income will be disregarded. The amount of assistance payment will be computed based on total needs minus countable income, up to the maximum reimbursable amount. (Refer to 302.2.) If the caretaker is receiving alimony only, (support not commingled with child support) this is to be retained by the assistance unit and counted as income to the unit. The $50 disregard is not applicable.

C. Absent Spouse of the Parent of the Eligible Children - Support or alimony paid to an eligible child's parent in the assistance unit (this parent must be in the assistance unit unless one of the criteria in 302.6.D. exists) must be considered as income to the unit. Combine the support/alimony of the eligible child's parent with support received from the absent parent of the child. The first $50 of total gross support received by the parent and eligible child(ren) will be disregarded in determining eligibility. If the net amount being received, when added to other countable income, equals or exceeds the appropriate standard of assistance, eligibility does not exist. (See Section 305.4.E.2 regarding the calculation of the initial month's payment(s)). If the amount is insufficient when considered as above, future payments received after case approval must be paid to Division of Child Support Enforcement and will be disregarded in determining the amount of the assistance payment. If the caretaker is receiving alimony only (support not commingled with child support) this is to be retained by the assistance unit and counted as income to the unit. The $50 disregard is not applicable.

D. Putative Father Absent from the Home - Cash contributions from a putative father, less the first $50, will be counted as income against the grant, in the amount received by the assistance unit, until these contributions are redirected to the Division of Child Support Enforcement. (See 305.4.E.3. for treatment of cash contributions from putative fathers.) Once the contribution is redirected, the amount of the assistance payment will be computed based on the standard of assistance for the unit minus other countable income, up to the maximum reimbursable payment.

In all instances where support must be redirected to the State, it is essential that the worker make it clear to the applicant/recipient what is required and provide all information necessary to assist the individual in redirecting these payments. See Appendix I and Appendix III at the end of this chapter. The worker must also confirm the fact that the recipient is cooperating in redirection by reviewing the notification report.

602.4 SUPPORT FROM RESPONSIBLE PERSONS IN THE HOME

A. Minor Caretaker/Remarried Caretaker - In situations where such person is in the home, but not in the assistance unit, all income of such person will be considered as income available to the assistance unit in accordance with Section 305.4.E.1.d.

B. The Stepparent - The stepparent, living in the home, married to the parent of the TANF children, is responsible for support of his/her spouse and the eligible children. The stepparent's support obligation will be the amount established in accordance with Section 305.4.F. A stepparent who is not living in the same home with the natural or adoptive parent of the TANF children is not responsible for support of these children. The stepparent remains legally responsible for his/her spouse.

602.5 HANDLING OF SUPPORT PAYMENTS COLLECTED BY THE STATE

State and federal regulations require that all support paid for or on behalf of a child or caretaker receiving TANF must be directed to the State as a refund toward public assistance paid on behalf of such children or caretaker.*

Federal regulations require the Support Enforcement agency to notify the agency administering the TANF program, of the amount of support collected which represents payment on the required support obligation for each month. The notification requirements are accomplished **through** the **report, TANF Cases, Current Collected Support and Expected TMPs displayed monthly and accessed by local agencies on the VDSS Local Agency Intranet Page**. This report shows support collected on the required support obligation by the State in the prior month and is **available on line by the 15th of** the month **following the month** in which the support was collected. The local agency administering the **TANF** program is required, upon being informed of this amount, to determine if such payment is sufficient to make the family ineligible for an assistance payment.**

Federal regulations also require an amount not to exceed the first $50 of support collected, which represents a payment on a current support obligation, to be paid to the assistance unit and disregarded in determining need and the amount of an assistance payment. If such amounts collected are from two or more absent parents, only the first $50 of total support collected will be paid to the assistance unit and disregarded. No disregard payment, shall be made, however, for a month in which there is no support collected.**

A. Notification to Local Agencies

The **report, TANF Cases, Current Collected Support and Expected TMPs** displays **current** support payments **paid to DCSE** on the required support obligation from non-custodial parents for the month identified on the report. The **monthly TANF benefit** and the amount of the TANF Match Payment (total current monthly support, minus the disregard) will also display on the **report**, **TANF Cases, Current Collected Support and Expected TMPs**.

This report must be **accessed and** reviewed monthly. The amount of support shown on the report should be used **as outlined below**:

1. **Compare the net support to the current monthly TANF amount.**

2. **If the net support does not exceed the monthly TANF amount no further action is needed on the TANF case.**

3. **If the net support is greater than the current monthly TANF amount suspend the TANF benefit by cutoff of the report month.**

4. **When the net support is greater than the current monthly TANF amount for two consecutive months, the TANF case must be closed by cutoff of the report month.**

Redirected support paid to DCSE will not be screened at either 185% or the standard of assistance.

* 45 CFR 302.32(a) and Section 63.2-1909, Code of Virginia
** 45 CFR 233.20

Payments made to **DCSE** in a month which exceeds the grant amount will be marked by **one or two asterisks. The number of asterisks denotes how many months net child support exceeded the monthly TANF grant amount. Two asterisks will display when net support exceeds the TANF benefit for two consecutive months. Cases marked with one asterisk must be suspended. Cases marked with two asterisks are ineligible for assistance**.

Failure by the local agency to timely suspend the TANF case when net support exceeds the benefit amount will result in an overpayment to the recipient.

ADAPT will automatically close TANF cases marked with two asterisks. When net support has exceeded the TANF benefit for two consecutive months, ADAPT will close the case in the month that the two asterisks appear on the *TANF Cases, Current Collected Support, and Expected TMPs* report. The closure will take place during the TMP process in ADAPT. Notices will be generated and mailed along with the regular TMP notices.

Example #1: **A TANF recipient in a Group II locality receives a monthly TANF payment of $100 and social security benefits of $128. The *TANF Cases, Current Collected Support, and Expected TMPs* report issued in October shows net support of $150 collected in September. The local agency compares the net support of $150 to the current monthly benefit amount (listed on the report). Net support exceeds the current TANF benefit amount. The worker suspends the TANF case effective October 31st, and sends the recipient an Advanced Notice of Proposed Action.**

In November the *TANF Cases, Current Collected Support and Expected TMPs* report shows net support of $150 with two asterisks. ADAPT has automatically closed the TANF case effective November 31st, generated a notice, and sent the notice to the local agency.

Example #2: **DCSE begins collecting support on behalf of a 3-member TANF AU in September (Group II). The October *TANF Cases, Current Collected Support, and Expected TMPs* report shows net support of $350. The local agency using this report in October compares the net support to the current TANF benefit amount. The net support exceeds the monthly benefit amount of $320; the case must be suspended effective October 31st.**

Should the net support listed on the *TANF Cases, Current Collected Support, and Expected TMPs* report for November exceed the monthly TANF benefit ADAPT will automatically close the case effective November 31st.

Example #3: **The *TANF Cases, Current Collected Support, and Expected TMPs* generated in October shows net support of $73 for a TANF recipient in a group I locality. The current TANF benefit amount displayed on the report is $292. No action is required on the TANF case.**

Support Enforcement will then, on all cases in which eligibility no longer exists, take action to redirect the support to the family in lieu of the public assistance payment.

Note: The **report**, **TANF Cases, Current Collected Support and Expected TMPs** and inquiry into the Automated Program to Enforce Child Support (APECS) through the Multiple System Inquiry (MSI) are the only acceptable means of verifying support amounts that have been redirected to and are collected by the Division of Child Support Enforcement. **One of these sources** must be used in determining continuing eligibility for public assistance.

Support reported by a client is to be verified at the time it is reported if it has not yet been re-directed to DCSE. Timely action is to be taken to close the case if the support causes ineligibility.

The only exception to using the **TANF Cases, Current Collected Support and Expected TMPs** report or APECS inquiry is direct communication with the **district** DCSE representative. **The DCSE representative should only be contacted when the recipient disagrees with the listed amount**. **The case record must be documented with the date, amount, and name of the DCSE representative.** However, the time frame for taking action remains the same. If the case is determined to be ineligible, **the case must be suspended before cutoff of** the month in which the **TANF Cases, Current Collected Support and Expected TMPs report** was received by the agency.

INFORMATION TO BE GIVEN TO APPLICANT/RECIPIENT

In the process of determining eligibility, the local worker must explain thoroughly, the following:

A. Assignment of Rights (Section 201.9)
B. Cooperation in Obtaining Support (Section 201.10)
C. Redirect of Support Payments to State (section 602.1)
D. Referral to Support Enforcement (Section 601.2)
E. Legally Responsible Relatives (Section 601.3)

SCREENING PROCEDURE

ITEM TO BE EXPLAINED	DETAILS TO BE GIVEN
A. Assignment of Rights (Section 201.9)	A. 1. What the assignment of rights means to applicant/recipient; 2. How the assignment is executed; 3. When the assignment is effective; 4. What absent legally responsible relatives are covered by assignment of rights; 5. Assignment is automatic upon receipt of assistance - recipient relinquishes all right, title and interest in all support owed by absent responsible persons and must redirect. 6. Period of time assignment covers.
B. Cooperation in Securing Support and Good Cause (Section 201.10)	B. Advising applicant/recipient of their responsibilities as outlined in 201.10 and the penalty for failure to cooperate unless good cause exists.
C. Redirect of Support Payments (Section 602.1)	C. Applicant/recipient must be informed that: 1. Contact with absent legally responsible person will be made and such person will be instructed to mail support payment to the State.

SCREENING PROCEDURE

ITEM TO BE EXPLAINED	DETAILS TO BE GIVEN
	2. Should support payments continue to be received by the client, failure to send such payments to State will result in referral for prosecution for fraud, including recoupment from future assistance payments.
D. Referral to Support Enforcement (Section 601.2)	D. All information necessary to aid Support Enforcement in the securing of such support must be provided within two working days following the initial payment or redetermination of eligibility.
E. Legally Responsible Relatives (Section 601.3)	E. The applicant/recipient must be advised of the responsibility of each person specified in 601.3 to support, as it relates to each individual case or person for whom assistance is requested.

DIVISION OF CHILD SUPPORT ENFORCEMENT DISTRICT OFFICES AND THE LOCALITIES WITHIN DISTRICTS

Abingdon District

Bland
Bristol
Buchanan
Dickenson
Giles
Lee
Norton
Russell
Scott
Smyth
Tazewell County
Washington
Wise

Charlottesville District

Albemarle
Charlottesville
Culpeper
Fluvanna
Goochland
Greene
Louisa
Madison
Orange

Danville District

Danville
Franklin County
Halifax
Henry
Lunenburg
Martinsville
Mecklenburg
Patrick
Pittsylvania

Fairfax District

Alexandria
Arlington
Fairfax
Falls Church

Fredericksburg District

Caroline
Essex
Fredericksburg
King George
Lancaster
Northumberland
Richmond County
Spotsylvania
Stafford
Westmoreland

Henrico District

Chesterfield
Colonial Heights
Hanover
Henrico

Lynchburg District

Amherst
Appomattox
Bedford
Buckingham
Buena Vista
Campbell
Charlotte
Cumberland
Lexington
Lynchburg
Nelson
Prince Edward
Rockbridge

Manassas District

Clarke
Fauquier County
Frederick
Loudoun County
Prince William
Rappahannock
Manassas
Manassas Park
Warren
Winchester

DIVISION OF CHILD SUPPORT ENFORCEMENT DISTRICT OFFICES
AND THE LOCALITIES WITHIN DISTRICTS
(Continued)

Newport News District

Charles City
Gloucester
Hampton
James City County
King & Queen
King William
Mathews
Middlesex
New Kent
Newport News
Poquoson
Williamsburg
YorkRoanoke,

Norfolk District

Norfolk

Petersburg District

Amelia
Brunswick
Dinwiddie
Emporia
Greensville
Hopewell
Nottoway
Petersburg
Powhatan
Prince George
Surry
Sussex

Portsmouth District

Portsmouth

Richmond District

Richmond

Roanoke District

Alleghany-Covington
Bath
Botetourt
Carroll
Clifton Forge
Craig
Floyd
Galax
Grayson
Montgomery
Pulaski
Radford
City of
Roanoke County
Salem
Wythe

Suffolk District

Franklin City
Isle of Wight
Southampton
Suffolk

Verona District

Augusta
Harrisonburg
Highland
Page
Rockingham
Shenandoah
Staunton
Waynesboro

Virginia Beach District

Accomack
Chesapeake
Northampton
Virginia Beach

DIVISION OF CHILD SUPPORT ENFORCEMENT
DISTRICT OFFICES

CENTRAL DCSE REGION	Telephone Numbers
HENRICO DISTRICT OFFICE Cynthia W. Holdren, District Manager Parham/64 Building 2807 Parham Road, Suite 201 Richmond, VA 23294	(804) **692-2460**
NEWPORT NEWS DISTRICT OFFICE Jeraldine H. Chatman, District Manager 11751 Rock Landing Drive, Suite H4 Newport News, VA 23606	(804) 594-7840
PETERSBURG DISTRICT OFFICE **Amy Ratliff**, District Manager **2623 Park Avenue** Petersburg, VA **23805**	(804) 862-6130
RICHMOND DISTRICT OFFICE Ron Craig, District Manager 700 East Franklin Street, 3rd Floor Richmond, VA 23219	(804) **692-2461**
WESTERN DCSE REGION	
ABINGDON DISTRICT OFFICE Arlene D. Buckley, District Manager 190 Patton Street Abingdon, VA 24210	(703) 676-5460
DANVILLE DISTRICT OFFICE **Vacant**, District Manager 155 Deer Run Drive Danville, VA 24540	(804) 799-7873
LYNCHBURG DISTRICT OFFICE **Kathy E. Andrews**, District Manager **2127 Lakeside Drive** Lynchburg, VA **24501**	(804) **385-0800**

DIVISION OF CHILD SUPPORT ENFORCEMENT
DISTRICT OFFICES

(Continued)

ROANOKE DISTRICT OFFICE	Telephone Numbers
Wayne C. Chapman, District Manager **3535 Franklin Rd., S.W., Suite H** Roanoke, VA **24014-2255**	(703) 857-7932

NORTHERN DCSE REGION

CHARLOTTESVILLE DISTRICT OFFICE	
Glenn E. Stratton, District Manager 750 Harris Street, Suite 203 Charlottesville, VA 22901	(804) 296-3197

FAIRFAX DISTRICT OFFICE	
Carolyn Davis, District Manager Fairfax Executive Park 3953 Pender Drive Fairfax, VA 22030	(703) 934-0099

FREDERICKSBURG DISTRICT OFFICE	
Robert Rodenski, District Manager 302 Westwood Office Park Fredericksburg, VA 22401	(703) 899-4182

MANASSAS DISTRICT OFFICE	
Patricia Crawford, District Manager 8515 Phoenix Drive Manassas, VA 22110	(703) 335-5601

VERONA DISTRICT OFFICE	
Ernest S. Love, District Manager P. O. Box 530 Verona, VA 24482-0530	(703) **248-9300**

WINCHESTER SATELLITE OFFICE	
Patricia Crawford, District Manager Fairfax Cameron Building **24 Ricketts Drive** Winchester, VA 22601	**(703) 722-3490**

DIVISION OF CHILD SUPPORT ENFORCEMENT
DISTRICT OFFICES

(Continued)

EASTERN DCSE REGION	Telephone Numbers
NORFOLK DISTRICT OFFICE Elizabeth T. Ray, District Manager Tazewell Building 100 Brooke Avenue, Suite 305 Norfolk, VA 23510	(804) 465-6890
PORTSMOUTH DISTRICT OFFICE Mary Ann Thrasher, District Manager 2404 Airline Boulevard Portsmouth, VA 23701	(804) **465-6800**
SUFFOLK DISTRICT OFFICE Linda E. Mendenhall, District Manager 2000 Hillpoint Boulevard, North Building II Suffolk, VA 23434	(804) 925-2245
VIRGINIA BEACH DISTRICT OFFICE Ron W. Harris, District Manager Pembroke Office Park Pembroke III, Suite 300 Virginia Beach, VA 23462	(804) 465-6880
EASTERN SHORE SATELLITE OFFICE **Ron Harris, District Manager** Colonial Square Shopping Center Suite 9 Route 13 Post Office Box 373 Belle Haven, VA 23306	**(804) 787-5981**

Note: Satellite offices have been opened in two regions to enhance client accessibility. All communication by local social services departments should continue to be directed to DCSE district offices.

DIVISION OF CHILD SUPPORT ENFORCEMENT
REGIONAL OFFICES

CENTRAL DCSE REGION	Telephone Number
Ernest S. Love, Acting Regional Administrator Central DCSE Regional Office 1604 Santa Rosa Road, Suite 137 Wythe Building Post Office Box K-348 Richmond, VA 23229-5008	(804) 662-7637

EASTERN DCSE REGION	
Carol Vanderspiegel, Regional Administrator Eastern DCSE Regional Office Pembroke Office Park Pembroke IV, Suite 300 Virginia Beach, VA 23462	(804) 552-1886

NORTHERN DCSE REGION	
Patricia M. White, Acting Regional Administrator Northern DCSE Regional Office Human Services Building, Suite 22 320 Hospital Drive Warrenton, VA 22186	(703) 347-6346

WESTERN DCSE REGION	
Leon Alder, Regional Administrator Western DCSE Regional Office Post Office Box 253 190 Patton Street Abingdon, VA 24210-0253	(703) 676-5454

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TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) POLICY MANUAL

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701.1 PURPOSE OF THE TANF-UP PROGRAM

The Temporary Assistance for Needy Families - Unemployed Parent (TANF-UP) Program is intended to provide assistance to families with two able-bodied parents.

701.2 CATEGORICAL REQUIREMENTS AND CONDITIONS OF ELIGIBILITY APPLICABLE TO THE TANF-UP PROGRAM

A. Members of the assistance unit must meet existing categorical requirements and conditions of eligibility for TANF.

B. The child must reside in a home in which both natural or adoptive parents reside, and neither parent meets the criteria at 901.2 C. or D.

   1. In the case of a putative father living in the home, an acknowledgement of paternity must be made in order to qualify for TANF-UP. A notarized affidavit of paternity is an acceptable form of acknowledgement of paternity. **When a putative father in the home has not or refuses to acknowledge paternity for a child in the home, the TANF-UP application must be evaluated as a TANF application.**

   2. If the man's name appears on the child's official birth certificate issued by the Virginia Department of Health, Bureau of Vital Statistics and Health Records, evidence of paternity exists.

C. The assistance unit must be in financial need.

D. Both parents must participate, as required, in the Virginia Initiative for Employment not Welfare Program (VIEW) unless one parent meets an exemption. Only one parent may qualify for an exemption (Refer to Section 901.2). If both parents are ineligible, i.e., do not meet citizenship/alienage requirements, they are not required/allowed to participate.

701.3 ASSISTANCE UNIT TANF-UP

A. The assistance unit is required to include one able-bodied natural or adoptive mother and one able-bodied natural or adoptive father, with at least one child in common and all minor siblings of that child(ren) who meet the categorical requirements listed in Section 201.1.A.

If one or both parent(s) meet the exemption criteria at 901.2 C. or D., the case is a TANF case, not a TANF-UP case.

Note: If the only child in common is ineligible due to 201.12, the assistance unit is still a TANF-UP assistance unit.

B. If, after receipt of TANF-UP benefits, one parent leaves the home and another parent enters the home who has a child in common with the custodial parent and who qualifies for TANF-UP, a new assistance unit is established.

701.4 FINANCIAL CRITERIA

A. All countable earned and unearned income of the assistance unit will be considered in determining financial need.

B. The case is to be closed if the income of the assistance unit causes ineligibility.

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801.1 PURPOSE

The diversionary assistance program was established by HB 2001, passed by the 1995 General Assembly. Authorized by Section **63.2-617** of the Code of Virginia, this program is intended to prevent potential TANF recipients from becoming ongoing TANF recipients. If immediate intervention with short-term aid will resolve a crisis situation and prevent the need for ongoing TANF, the assistance unit may be granted diversionary assistance.

801.2 SCREENING

The worker must explain the diversionary assistance program to all TANF applicants. The worker must screen all TANF applicants for eligibility for diversionary assistance at the time of application to determine if the applicant has an emergency, and whether diversionary assistance can resolve it. If so, the eligibility worker should determine if the client will volunteer for such a payment if otherwise eligible.

801.3 VOLUNTARY

The eligibility worker and the applicant must discuss the appropriateness of diversionary assistance to the applicant's situation. If the applicant meets the eligibility factors for diversionary assistance, he may decide whether or not to receive diversionary assistance rather than TANF. Receipt of diversionary assistance is voluntary and in every case requires the written consent of the applicant. All applicants for diversionary assistance must first sign the Acceptance of Terms of Issuance for Diversionary Assistance to be approved.

801.4 ELIGIBILITY FACTORS

Only applicants may be approved for diversionary assistance. Current recipients of TANF are not eligible. The applicant must verify all of the following factors and the worker must document the case record accordingly before an assistance unit can receive diversionary assistance:

A. The applicant is eligible to receive TANF. A child is eligible for TANF by meeting the TANF requirements in Section 201.1 A. (categorical requirements). The conditions of eligibility in 201.1 B do not have to be met to be eligible for diversionary assistance. The parent or caretaker/relative shall be eligible for TANF unless one of the exceptions specified in 302.6 D or E is applicable. The caretaker/relative does not have to meet the conditions of eligibility (provision of a social security number, VIEW participation, compliance with the school attendance requirement, and cooperation with DCSE). However, if the caretaker/relative is under a VIEW sanction, the assistance unit is ineligible for diversionary assistance. Note: Case closure due to failure to sign the Agreement of Personal Responsibility is not a VIEW sanction. Therefore, a diversionary assistance case may be approved after a case was closed for failure to sign the Agreement of Personal Responsibility.

B. The assistance unit meets TANF income limits;

C. The assistance unit has a temporary loss of income or delay in starting to receive income; (such a loss of income cannot be a loss of TANF benefits) and

D. The worker determines that diversionary assistance will resolve the emergency.

801.5 DETERMINING THE AMOUNT OF THE PAYMENT

The amount of the payment is based on the immediate needs of the applicant. However, the payment cannot exceed the total TANF payments that the recipient would otherwise be eligible to receive in four months. The amount of assistance is the maximum TANF amount for four months or the amount of the needs of the applicant, whichever is less. Local agencies shall strive to provide the most cost-effective appropriate solution to the one-time emergency. To determine the amount of the diversionary assistance payment, follow these steps:

A. Calculate a maximum diversionary assistance amount - Compute the monthly grant amount counting any ongoing income, such as social security income. Income from a terminated source, or that has not started, is not considered ongoing for diversionary assistance purposes. Multiply the grant amount by four.

B. Determine the needs of the assistance unit - Document the case record as to the needs covered and the verified cost of providing for each need. The amount can cover several different needs and can include items such as, but not limited to, shelter payments, utility payments, and transportation assistance.

   Choose the most cost-effective appropriate solution to the applicant's needs. For example, if the emergency has created a need for transportation, the agency may calculate the cost of bus tickets versus the price of repairing a car.

C. Compare the amounts in A and B - The lesser amount of A and B is the amount of the diversionary assistance payment.

   Example: Ms. Z applies for diversionary assistance for herself and two children. Her car broke down, and she is unable to get to work. As there is no countable income, the maximum she can receive is $1,280 ($320 x 4 = $1,280). There is no other transportation available, and Ms. Z needs her car to get to work. Ms. Z provides verification the repairs to her car will cost $900. Since $900 is lower, the worker should approve diversionary assistance of $900.

801.6 PERIOD OF INELIGIBILITY

A. If an assistance unit receives a diversionary assistance payment, it shall be ineligible for TANF for up to 160 calendar days beginning with the date that the diversionary assistance is issued. (For payments by FMF, the beginning date is the date the worker completes the FMF.) To determine the period of ineligibility follow these steps:

   1. Determine the monthly amount of TANF for which the applicant is eligible. **If an IPV has been committed, exclude the disqualified individual's needs. Follow IPV procedures in Section 102.3.A.**

   2. Divide the amount determined in Step 1 by 30. This is the daily amount of assistance.

   3. Divide the diversionary payment amount by the daily amount determined in Step 2 to determine how many days are covered in the payment amount. Round up to the next whole number.

4. Determine the number of days of ineligibility by multiplying the number of days determined in Step 3 by 1.33. Round up to the next whole number. This number cannot exceed 160 days.

5. Using the number of days determined in Step 4, determine the date that the period of ineligibility ends.

B. If the applicant receives diversionary assistance, he cannot receive TANF until the period of ineligibility expires.

C. An assistance unit can receive diversionary assistance only once in a sixty-month period.

D. An assistance unit that is in a period of ineligibility for TANF due to the time limit on assistance is also ineligible for diversionary assistance.

E. A child(ren) born to a client who is in a period of ineligibility for TANF due to receipt of a diversionary assistance payment is not eligible for TANF until the period of ineligibility expires.

801.7 ELIGIBILITY DETERMINATION PERIOD

Local social services agencies must determine eligibility for diversionary assistance within five working days of the receipt of the final verification that substantiates eligibility, or within **30 days following** the date of receipt of the signed application, whichever occurs first.

801.8 VENDOR PAYMENTS

Diversionary assistance payments must be made in the form of a vendor payment. If the worker cannot issue a vendor payment due to systems limitations, then a payment may be made to the recipient.

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The Virginia Initiative for Employment not Welfare Program (VIEW) is a program of employment opportunities to assist individuals in attaining the goal of self-sufficiency.*

The program goals are to offer Virginians living in poverty the opportunity to:

* To achieve economic independence by removing barriers and disincentives to work and by providing positive incentives to work;
* To provide work skills necessary for self-sufficiency;
* To allow families living in poverty to contribute materially to their own self-sufficiency;
* To set out the responsibilities of and expectations for recipients of public assistance;
* To obtain work experience through the Virginia Initiative for Employment Not Welfare (VIEW).

NOTE: All policy in this manual also applies to VIEW participants except for the specific differences indicated below.

901.1 PARTICIPATION - As a condition of eligibility, each recipient of TANF and TANF-UP must participate, as required in VIEW, unless otherwise exempt.

The eligibility worker in the local agency must determine which applicants and recipients are not required (exempt) to participate and which are required to participate (non-exempt). The eligibility worker will refer to the VIEW Program a non-exempt individual at the time of application approval or when an individual's VIEW status changes. Any previous or existing registrations or participation under another category of assistance no longer apply.

NOTE: JOINT TANF AND FOOD STAMP APPLICATIONS: In situations requiring joint processing of TANF and Food Stamp applications, the work registration form or affidavit, whichever is appropriate, is to be used for food stamp purposes in the event that the TANF application is denied. (Refer to Volume V, Part VIII, A. of the Food Stamps Certification Manual.)

901.2 EXEMPTION CRITERIA - An applicant/recipient of TANF or TANF-UP must participate in the VIEW Program unless the individual meets one of the following exemption criteria:

A. Any individual, including minor caretakers under **18** years of age.

B. Individuals at least **18**, but no more than 19 years of age, who are enrolled full-time in elementary or secondary school, including vocational or technical school programs. The vocational or technical school must be equivalent to secondary school.

* Code of Virginia, Section **63.2-609**

C. Individuals unable to participate because of a temporary medical condition that prevents entry into at least 8 hours per week of employment or training, as determined by a physician or other qualified professional. (The Virginia Code Section 8.01-581.1 defines physician as "a person licensed to practice medicine or osteopathy in this Commonwealth..." This definition of physician applies in exemptions F and H below also.) The individual must provide the local agency a written statement from the physician to specify that he is incapacitated, the nature and scope of the incapacity, including abilities and limitations of the individual, and the duration of the incapacity. If the individual does not have a physician, the agency will arrange for the individual to receive an evaluation from a physician. (The Medical Evaluation Form (032-03-654) is to be used for this purpose). If unable to secure a medical evaluation, refer the individual for VIEW participation and further evaluation will occur as part of the VIEW assessment. VIEW funds may be used to evaluate the exemption from VIEW.

If the physician indicates that the individual is able to participate in employment or training but is limited in the types of activities that can be performed, the individual cannot do work activities full-time, is limited in the types of activities the individual can do, or the hours in which individual can do them the eligibility worker must refer the individual for participation in VIEW and share the information with the ESW so suitable accommodations can be arranged. The employment services worker must work with the individual to find suitable work activities, taking into account any limitations indicated by the physician. The agency shall ensure that reasonable accommodations are made.

If the individual is unable to participate because of a temporary medical condition that prevents entry into at least 8 hours per week of employment or training, the eligibility worker must reevaluate the exempt individual's incapacity at the time prescribed by the medical statement.

If there are two parents in the assistance unit and one parent meets this exemption, the case is a TANF case rather than a TANF-UP case.

D. Individuals who are incapacitated, as determined by receipt of Social Security Disability benefits or Supplemental Security Income. The eligibility worker must refer persons with a permanent incapacity to vocational rehabilitation using the Referral to Rehabilitative Services form (032-03-302). Only one referral is necessary and no follow-up is required. This exemption cannot be granted to either parent in a TANFUP case. If there are two parents in the assistance unit and one parent meets this exemption, the case is a TANF case rather than a TANF-UP case.

E. Any individual 60 years of age or older.

F. An individual who is needed on a substantially continuous basis to care for a member of the household. The household member must have a verified disability. The individual must have caretaking needs that prevent the individual

from participating in work activities. “Caretaking needs” that prevent the caregiver from participating in work activities include the need for attendance, supervision and home care, and other needs related to the household member’s disability. A physician must verify the household member’s condition, and the need for the individual to be available on a substantially continuous basis. If the documentation does not result in exemption from VIEW, the documentation must be forwarded to the VIEW worker.

G. A parent or caretaker/relative of a child under eighteen months of age who personally provides the care for a child.
In a double caretaker assistance unit in which one parent is incapacitated, the eligibility worker must refer the other caretaker for participation unless he can provide a written doctor's statement indicating that the incapacitated caretaker is unable to care for the child under eighteen months.

When the minor parent and her child are included in the same unit with the minor's parent, only one of these individuals can receive this exemption on the basis of caring for the minor's child. The individual who is actually providing care will be exempt.

NOTE: A parent who gives birth to a child subject to the family cap provision (refer to Section 201.12) may be granted a temporary exemption of not more than six weeks after the birth of the child.

H. A female who is in her fourth through ninth month of pregnancy as evidenced by a written medical statement provided by a physician, a registered nurse who is the physician’s designee, or a licensed nurse practitioner.*

I. A child receiving Title IV-E Foster Care.

J. Any member of an assistance unit where the primary caretakers of a child or children are grandparents, foster parents or other relatives of specified degree who are not the adoptive or biological parents of the child.

NOTE: Unlike the Employment Services Program where a person whose needs were removed from the grant is not required to participate, in the VIEW Program a parent whose needs are removed from the grant must participate, unless otherwise exempt. Reasons why the parent’s needs have been removed from the grant include, but are not limited to, noncooperation with DCSE, disqualification for IPV violation, convicted drug felon, or failure to provide a Social Security Number. In addition, a parent whose needs are not included in the grant due to the stepparent deeming requirements, 305.4.F., or due to the sponsored alien deeming requirements, 305.4.D., must participate in VIEW, unless otherwise exempt. A parent who does not meet TANF categorical requirements (e.g., - parent is an SSI recipient or a parent who is a convicted offender serving his sentence while still living in the home) is not required to participate in VIEW.

* Code of Virginia, §63.2-609

TANF-UP - In a TANF-UP case, both parents must be referred for participation, unless one meets an exemption; only one parent can be exempt. If both parents meet an exemption criterion, they must decide who will be referred for participation. If the household's situation changes and the recipients wish to change the VIEW participant, they may do so upon request and after advisement from the ESW or EW. Exception: The recipients may not switch VIEW participants in order to avoid or cure a sanction.

When both parents are under the age of 18 they are exempt. However, they may volunteer until they attain the age of 18.

Volunteers - Recipients who are exempt from VIEW may volunteer to participate in VIEW. Recipients of SSI benefits are ineligible for inclusion in the TANF assistance unit; therefore, they cannot volunteer to participate in VIEW. The eligibility worker must advise all volunteers that once they enter VIEW by signing the Agreement of Personal Responsibility they **have the same rights and responsibilities as** mandatory participants. **As voluntary participants, however, they can withdraw from the VIEW program without penalty at any time within the twelve-month trial period and therefore cannot be sanctioned for failure to comply with VIEW program requirements unless they elect to continue in the VIEW program after the twelve-month trial period. If the volunteer cannot meet his obligations, the worker should discuss with the volunteer the option of ending VIEW participation by becoming exempt. A former VIEW volunteer whose TANF case is closed may reapply for TANF and, assuming he continues to be exempt from VIEW, he may once again volunteer to participate in VIEW with a new twelve-month trial period; however, he must not be referred to VIEW nor can he receive the VIEW enhanced disregards until his new TANF application has been approved.**

Non-parent caretakers who meet the financial requirements of Section 304.2 and are included in the assistance unit may volunteer to participate in VIEW. They may continue to be eligible until their monthly income exceeds the current poverty level for one person.

901.3 RESPONSIBILITIES OF THE ELIGIBILITY WORKER - Regarding VIEW, the eligibility worker must:

A. Explain the exemption criteria to all applicants at application and to recipients at redetermination, and their obligation to report changes affecting their status. The recipient must provide information and verify all reported changes in exemption status. The eligibility worker must change the exemption status in the month in which the change is verified. Note: Changes that result in a status change from exempt to non-exempt which are reported late, do not constitute an overpayment.

B. Screen for VIEW status and refer recipients for VIEW participation, when appropriate, and use the appropriate system VIEW status codes (Refer to ADAPT field help on AEGNFS).

C. Explain the requirements of the VIEW Program and the related supportive services to all applicants/recipients at application and redetermination. Information should also cover the transitional child care, transitional transportation, and transitional Medicaid benefits available when the TANF case closes. All applicants and recipients, including non-parent caretakers in the assistance unit, who are not mandatory must be offered the opportunity to volunteer for the VIEW Program.

D. Advise all applicants/recipients of the sanctions/penalties that apply for failing/refusing to participate in VIEW, without good cause. The VIEW worker will evaluate good cause.

E. Refer those individuals who have been determined to be exempt from participation on the basis of incapacity to the appropriate state vocational rehabilitation agency using the Referral to Rehabilitative Services Form. The eligibility worker should provide available medical and other appropriate information with the referral.

F. Review the individual's exempt/non-exempt status when changes are reported and as a part of the TANF eligibility redetermination process, unless the eligibility worker determined the individual to be 60 years old or older, or permanently incapacitated.

G. Advise applicants/recipients who are exempt from VIEW that they may volunteer to participate in VIEW, **unless they are SSI recipients**. **Advise all volunteers that once they enter VIEW by signing the Agreement of Personal Responsibility that they have the same rights and responsibilities as mandatory participants. As voluntary participants, however, they can withdraw from the VIEW program without penalty at any time within the twelve-month trial period and cannot be sanctioned for failure to comply with VIEW unless they elect to continue in VIEW after the end of the twelve-month trial period.**

H. Make appropriate changes in the computer system which affect the individual's VIEW status. The VIEW worker will be notified via the computer system of these changes. This includes, but is not limited to, the individual's:

1. Being removed from the assistance unit;
2. Obtaining employment;
3. Losing his employment;
4. Changing his exemption status (e.g., changing from exempt to non-exempt and vice versa);
5. Moving from one locality to another; or
6. Having a VIEW sanction lifted when advised by the VIEW worker or when a sanctioned individual becomes exempt after the minimum sanction period has elapsed.

I. Upon notification from the VIEW worker indicating that a non-exempt individual claims to be exempt, verify the exemption claim and notify the VIEW worker of the findings within thirty (30) days. If the eligibility worker is unable to verify an exemption claim, the individual will continue in non-exempt status in VIEW until verification is received.

J. Sanction the TANF case by suspending the grant based on the VIEW worker's recommendation.

K. Close the TANF case upon receipt of information from the VIEW worker that the recipient has refused to sign the Agreement of Personal Responsibility.

L. Obtain verification and impact the assistance payment when a recipient obtains employment.

M. Send the Advance Notice of Proposed Action to the recipient at least sixty days prior to the case termination effective date when the 24-months time limit is to expire.

N. Upon notification from the VIEW worker indicating that the VIEW participant is being placed in a Full Employment Program (FEP) placement, suspend the TANF payment per 901.14. The eligibility worker must conduct a prospective determination of eligibility in the last month of the FEP placement.

901.4 RESPONSIBILITIES OF THE VIEW WORKER - The VIEW worker must:

A. Have the recipient sign the Agreement of Personal Responsibility.

Note: Explain IPV (Intentional Program Violation) reporting requirements and penalties to the participant. Have the client sign the Notice of Intentional Program Violation Penalties. This form may be located on the local agency DSS Intranet site (www.localagency.dss.state.va.us). Give a copy to the client and place a copy in the VIEW record. See Section 102.*

B. Enter the date that the Agreement of Personal Responsibility is signed in ESPAS on the VIEW assessment record.

NOTE: This trigger will start the participation counter in VACIS that tracks the 24 months of TANF eligibility.

C. Advise the eligibility worker of the non-exempt recipient's refusal to sign the Agreement of Personal Responsibility, if applicable.

D. Determine in which component(s) an individual must participate and whether he complies.

The VIEW Program consists of the following components listed in priority order:

1. Unsubsidized private sector employment - full, part-time, or temporary;
2. Subsidized full-time employment (Full Employment Program);
3. Community work experience - jobs selected to provide the recipient with skills and serve a useful public purpose.

E. Report to the eligibility worker, within five working days, any changes which financially impact the recipient, which have occurred in the VIEW activities of the TANF or TANF-UP recipient such as securing of employment or entering the Full Employment Program.

F. Advise the eligibility worker that a case is to be sanctioned and the appropriate sanction period.

G. Advise the eligibility worker when participation begins again so the eligibility worker knows when to remove the sanction.

* 2002 Acts of Assembly, Item 362

H. Notify the eligibility worker of changes associated with FEP participation that require action. Changes may include initiation of a FEP stipend, issuance of a supplemental payment to the participant, issuance of a replacement check to the employer, or evaluation of continuing eligibility upon termination of the placement. Notification is sent using the FEP Communication Form (032-03-655). The form is available online and may be sent by email. The online version can be accessed on the intranet at http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.

I. Inform VIEW participants that they have a right to request screening at any time if the individual suspects that he or she may be having difficulty at an assigned activity as the result of a disability, and if the screening indicates that the individual is likely to have such a problem, he or she has the right to be referred for an assessment by a qualified professional to determine whether the individual does have such a problem.

J. Inform VIEW participants that screening and assessment to identify disabilities and other barriers to program participation are voluntary.

K. Inform VIEW participants that they have a right to meet with the VIEW worker to discuss the need to revise the Activity and Service Plan to reflect disabilities, or those of household members that affect the ability to engage in work activities or require accommodations.

L. Inform VIEW participants that they have a right to an Activity and Service Plan that includes the supports, services and any needed accommodations that will be provided to the individual that will enable the individual to participate in work activities or other program requirements.

901.5 PARTICIPATION AND COOPERATION REQUIREMENTS

A. Agreement of Personal Responsibility - As a condition of eligibility, all non-exempt individuals must sign a written Agreement of Personal Responsibility. A new Agreement must be signed at the initial VIEW assessment and upon re-referral following a reapplication or a period in which the individual is exempt. An individual is considered a VIEW participant when the Agreement of Personal Responsibility has been signed. The agreement will, at a minimum, explain the 24-month time limit and that it is the participant's responsibility:

1. To seek employment to support his own family.

2. To participate in assignments made by the case manager.

3. To notify the case manager of any change in the participant's circumstances which would impact the participant's ability to satisfactorily participate in the program.

4. To accept a job offer. Refusal to accept a job offer may result in a sanction if so determined by the VIEW worker.

5. To arrange and find transportation and day care. The case manager will assist the participant if he has tried, but has been unable to find transportation or day care.

B. An individual will be considered as participating in VIEW until such time as a notice is received from the VIEW worker that he has failed or refused to participate. If an individual fails/refuses to participate/cooperate, without good cause, the case is not eligible to receive a grant.

C. Refusal to Sign the Agreement of Personal Responsibility - If the VIEW worker advises the eligibility worker that a mandatory individual has refused to sign the Agreement of Personal Responsibility, the TANF case must be closed as soon as administratively possible. Refusal to sign the Agreement of Personal Responsibility means overt refusal to sign or failing to appear without good cause, for an initial assessment interview in which the Agreement of Personal Responsibility was to be signed.

Upon a subsequent re-application for TANF the applicant(s) determined to be VIEW mandatory must sign the Agreement of Personal Responsibility before the initial payment is issued. If the Agreement of Personal Responsibility has not been signed within the application processing time frame (refer to Section 401.1.E), the TANF application must be denied.

Countable earnings must be screened in accordance with policy in Section 305, and the VIEW grant calculation is applicable beginning the month following the month the Agreement is signed.

Either the eligibility worker or the VIEW worker may obtain the applicant's signature on the Agreement.

901.6 SANCTIONS - Participants who fail to participate in the VIEW Program will be sanctioned by suspending the full amount of the TANF payment for the period of time specified below.

A. The VIEW worker must advise the eligibility worker of the decision to sanction and the sanction count.

B. The eligibility worker is to sanction the participant unless otherwise advised by the VIEW worker. **If the eligibility worker is aware of a reason related to a disability of the recipient or a household member that prevented participation in VIEW, the eligibility worker must advise the VIEW worker so that the VIEW worker can re-evaluate the sanction. If the VIEW worker determines that a disability prevented participation in VIEW, he must advise the eligibility worker to not impose the sanction or to lift the sanction.**

1. If the eligibility worker is aware that the participant might have been exempt during the required participation time, the eligibility worker must advise the VIEW worker.

2. The VIEW worker is responsible for making the final decision as to whether to proceed with the sanction.

3. When an individual becomes exempt during a sanction period, the eligibility worker must wait until the minimum sanction period has elapsed before removing the sanction. **However, if the basis for the exemption is a determination that the person has a disability or language barrier that prevented the person from participating in VIEW, the eligibility worker must provide the information to the VIEW worker for further evaluation. If the VIEW worker determines that the disability or language barrier was the reason for the participant's sanction, the sanction must be lifted immediately. In addition, that sanction will not count toward the individual's overall sanction count.**

Exception: The eligibility worker will not impose the first sanction if the participant obtains and provides verification of full time employment (at least 30 hours per week) prior to the effective date of the proposed sanction. The eligibility worker must advise the VIEW worker of this information.

C. The eligibility worker must apply the sanction effective the month following the month in which they receive notice to sanction, if administratively possible. If this cannot be done, the action must be taken for the second month. The eligibility worker must mail the Advance Notice of Proposed Action as soon as possible after receipt of the Notice to Sanction. The advance notice must indicate the duration of the sanction.

D. The sanction time frames are as follows:

1. For the first sanction the grant will be suspended for a minimum of one month or until failure to participate ceases, whichever is longer.

2. For the second sanction, the grant will be suspended for a minimum of three consecutive months or until failure to participate ceases, whichever is longer.

3. For the third and subsequent sanctions, the grant will be suspended for six consecutive months or until failure to participate ceases, whichever is longer.

In determining the length of time that the sanction will be imposed, if the VIEW worker determines that a previous sanction was due to an unaccommodated disability which prevented compliance, the current sanction should be imposed as if the previous sanction had not occurred. For example, if this would

have been the second sanction but the VIEW worker determines that non-compliance with program requirements that resulted in the first sanction was the result of a disability, the second sanction will be treated as if it is the first sanction and the penalty for a first sanction will be applied.

E. While a grant is suspended for a sanction period, the assistance unit members are considered TANF recipients for all other purposes. The time clock for VIEW participants continues during the sanction.

F. The VIEW worker will advise the eligibility worker of the date the individual began to comply. The sanction is to be removed effective the date he began to participate. If participation begins after the fixed period, the grant will be prorated for the month in which he begins to participate.

G. A sanction is removed when the sanctioned individual becomes exempt after the minimum sanction period has elapsed. Once the exemption is verified, the sanction is to be removed effective the date the exemption change is reported. Late reporting of an exemption change does not constitute an underpayment.

Exception: When the VIEW worker determines that the non-compliance with program requirements that resulted in the sanction was the direct result of a disability, the need to care for a household member with a disability, or barriers to employment related to limited English proficiency, the VIEW worker will notify the eligibility worker, who will immediately lift the sanction, reinstate benefits, and enter the sanction exemption information into the computer system.

H. Sanctions and Reapplication - If the sanction is in the fixed period when the case closes, the sanction resumes at approval at the point it left off when the case closed.

Example - The second VIEW sanction was imposed effective January 1, 1996. Customer requested that her AFDC case be closed effective January 31, 1996. Customer reapplied for TANF in June 1996, and the application was approved July 12, 1996. The customer is VIEW mandatory. The second month of the fixed period resumes with July 1996.

If the TANF case closed during a sanction after the fixed period, the case is sanctioned at reapproval until the eligibility worker is notified by the VIEW worker that the client has complied.

In both sanctions, the time clock for the twenty-four month time limit resumes at reapproval.

When a sanctioned individual moves from one case to another, the sanction continues uninterrupted, **unless the VIEW worker determines that the non-compliance with program requirements that resulted in the sanction was the direct result of a disability, the need to care for a household member with a disability, or barriers to employment related to limited English proficiency.**

I. VIEW Appeal Procedures - The following procedures must be followed at all appeals involving VIEW Sanctions:

1. A representative from the Employment Services Program Service Staff (VIEW) must be present during the pre-hearing conference and the appeal hearing.

2. The eligibility worker must notify the Employment Services Program staff of the date and time for the pre-hearing conference. The hearing officer will notify Employment Services Staff of the date and time of the appeal hearing.

3. The summary of facts must be prepared jointly by the Eligibility Staff and Employment Services Staff to ensure that both ESP eligibility and participation issues are stated in the summary.

4. If the appeal is filed timely and benefits continue pending the hearing decision, the sanction must be imposed as soon as administratively possible when the decision sustains agency action. There is no overpayment in this situation.

901.7 VIEW PAYMENT CALCULATION - To reward work, a VIEW participant may earn up to the assistance unit's federal poverty level (or up to 150% of the federal poverty in the case of TANF-UP households) and remain eligible for TANF for up to twenty-four months from the date that the initial Agreement of Personal Responsibility is signed.

A. The VIEW payment calculation applies to the following:

1. Unsubsidized employment and,

2. On the job training or subsidized training listed in Chapter 1000, Section 7.C.4.

B. This calculation does not apply to the following:

1. FEP Program in Chapter 1000, Section 7.C.2, and

2. Hardship cases (Section 901.9).

The VIEW payment calculation differs from the grant calculation located in Appendix 3 to 305.

An individual who is working when they sign the Agreement of Personal Responsibility is entitled to the VIEW earned income calculation the month following the month in which they sign the Agreement. If it is not administratively possible to impact that payment, a supplement must be issued.

For those VIEW participants who obtain unsubsidized employment during VIEW participation, the VIEW earned income calculation is to be used for grants effective the month following the month when employment begins. If it is not administratively possible to impact that payment, a supplement must be issued.

VIEW participants do not have earned income screened at 185% and the standard of assistance. They may receive the standard deduction **from gross income and 20% of the remainder *,** and child or adult care costs as disregards.

To calculate the VIEW payment (TANF grant), the eligibility worker must follow the steps in Appendix 1 to this chapter. The TANF Match Payment is not considered in calculating the VIEW payment.

See Chapter 900, Appendix 1 for the VIEW Grant Calculation, Appendix 2, for VIEW Income Examples, and Appendix 3 for the Federal Poverty Level table.

A TANF recipient who enters the VIEW program erroneously, i.e., the recipient did not report earnings that he received or expected to receive prior to entering VIEW that would have made the case ineligible for assistance using the 185% and standard of assistance income screenings, must have continuing eligibility determined by using 185% and standard of assistance screenings (see Section 305.1.A.) If the case does not pass the 185% and standard of assistance screenings, the case must be closed as soon as administratively possible. If the case is eligible at the standard of assistance screening, the VIEW grant calculation is appropriate for the month following the month in which the earnings were reported to the agency. Overpayments should be calculated per 503.7.

Note: For a case that contains an individual who is a VIEW participant, the VIEW grant calculation applies to the total countable earnings of all required assistance unit members.

901.8 VEHICLE VALUE LIMIT – Repealed effective December 1, 2003.

*** 22 VAC 40-295-60**

901.9 TWENTY-FOUR MONTH LIMIT FOR TANF ELIGIBILITY - An assistance unit participating in the VIEW Program is limited to twenty-four months of TANF eligibility. The twenty-four months of eligibility is an accumulated period of time, which includes any month that an individual was a mandatory participant on the first day of the month. The time clock is counted automatically by ADAPT, triggered by the date the Agreement of Personal Responsibility is signed and entered by the **eligibility** worker.

A month in which the TANF grant is suspended is counted as a month of participation. When a mandatory VIEW participant becomes exempt, the case is placed in inactive status, or the TANF case closes, the 24-month count stops. If a TANF case closes with months remaining in the 24-month period, the count will resume at the point it stopped, when a new TANF application has been approved and a new Agreement of Personal Responsibility has been signed.

An assistance unit that had time left on the clock when the TANF case closed begins a new twenty-four month period if the assistance unit did not receive TANF for at least twenty-four months after case closure or twenty-four months after termination of transitional Medicaid or transitional transportation, whichever is latest. Sanctions will not carry over into a new twenty-four month period.

Hardship Exception to the Twenty-Four Month Time Limit: The VIEW worker may grant a hardship exception according to the hardship criteria found in Section 1000. The VIEW worker must notify the eligibility worker when the hardship exception is to end, allowing time for the ten-day Advance Notice of Proposed Action to be mailed by the eligibility worker to the participant. The eligibility worker must close the TANF case. A hardship exception is an extension of the time limit and cannot be granted during the period of ineligibility (see 901.11).

A TANF case that is granted a hardship extension is not eligible for the VIEW grant calculation. (See 901.7.)

Time Limit Rules for Two-Parent Cases:

1. When a parent leaves an assistance unit **for any reason, the time on the case clock remains with the existing case. If the parent who left the assistance unit applies for his/her own TANF case, the count on the clock from the previous case will follow and the same months on the clock will remain in place for the parent who remains in the home.**

   Example: Mr. and Mrs. X and their children receive TANF-UP. Mr. X enrolled in VIEW in December, and the VIEW clock started in January. In June, Mr. X moved out along with one child, and applied for TANF for himself and the child. The VIEW clock for Mrs. X is 6 and Mr. X's VIEW clock is also 6.

2. When one parent leaves, the children are subject to the time limit and period of ineligibility of the parent with which they reside.

3. When one parent leaves, a VIEW sanction remains with the individual who caused the sanction.

4. When a parent is added to a TANF case with an existing time clock, he is subject to the clock of the case.

   Example 1: Mr. and Mrs. Y receive TANF-UP and have 6 months on their VIEW clock. Mr. Y leaves the household and moves in with Ms. A, who is a VIEW participant with a VIEW clock of 10 months. Mr. Y is now subject to the VIEW clock of 10 months.

Example 2: Mr. and Mrs. Y receive TANF-UP and have 6 months on their VIEW clock. Mr. Y leaves the household and moves in with Ms. A, who is a VIEW participant with a VIEW clock of 3 months. Mr. Y is now subject to the VIEW clock of 3 months.

5. When a parent is added to a TANF case without an existing time clock, the case he joins is subject to the clock count at the point he left the previous case.

   Example: Mr. and Mrs. Y receive TANF-UP and have 6 months on their VIEW clock. Mr. Y leaves the household and moves in with Ms. A, who is exempt from VIEW and does not have a VIEW clock. Because the case he is joining does not have a VIEW clock, the new case is subject to the VIEW clock of Mr. Y and Ms. A and Mr. Y are now subject to a VIEW clock of 6 months.

901.10 NOTICE AND APPEAL OF THE TIME LIMIT* - ADAPT will generate an Advance Notice of Proposed Action at the beginning of the twenty-second month of VIEW participation and will be sent to the local agency for mailing to the recipient. The notice must be mailed, or available at the local agency in the case of an assistance unit which is homeless, at least sixty (60) days before the effective date of the action, excluding the date of mailing and the effective date, to terminate the TANF case due to the twenty-four month time limit. The notice shall also inform the participant of the circumstances which constitute a hardship exception and how to apply for one. **In addition, the VIEW worker must make a good faith effort to inform the person verbally.**

If a case is not in approved status in the system on the first of the month of month twenty-two, the eligibility worker must send a manual Advance Notice of Proposed Action. This notice must inform the recipient that financial assistance is scheduled to terminate due to the twenty-four month time limit and that they and their family will be ineligible for financial assistance for at least twenty-four months after termination of TANF or termination of transitional Medicaid or transitional transportation,* whichever is later. Information regarding circumstances which constitute a hardship and how to apply for one must also be provided.

If an applicant is reapplying for TANF, and has already received a 60-day notice, the agency must note the number of remaining VIEW months on the Notice of Action to approve the case.

In the event the notice is not issued in a timely manner, the agency must not close the case due to the 24-month time limit until the full 60-day advance notice period has expired. Any benefits received after the 24th month are an overpayment and must be recovered.

If a hearing is requested prior to the effective date of the proposed change to terminate benefits due to the 24-month time limit, a participant appealing such change shall have the right to continued direct payment of TANF benefits pending final administrative action on such appeal.

Termination of financial assistance due to expiration of the time limit is the only circumstance which requires a 60-day notice. For any other action, adhere to policy found at manual sections 401.1-401.6 regarding notification.

* Code of Virginia, §63.2-612

901.11 PERIOD OF INELIGIBILITY - The VIEW participant and all of his natural and adopted children are ineligible for TANF for a period of twenty-four months beginning with the effective date of TANF case closure due to the twenty-four month time limit or beginning with the effective date of termination of transitional Medicaid, or transitional transportation whichever is latest. The termination of transitional Medicaid must be verified by MMIS inquiry. The termination of transitional transportation must be verified by an ESPAS inquiry. ESPAS may be accessed through the ADAPT main menu, option 14. For detailed instructions refer to the ESPAS Manual, Chapter L.

This 24-month period of ineligibility applies to the following individuals:

A. All natural or adoptive children in the assistance unit who received TANF while the caretaker/parent was participating in the VIEW Program. **For income information for children in a VIEW period of ineligibility, refer to Sections 302.6, 303.3, and 305.4.**

B. A child subject to the family cap provision;

C. A baby who is born to the participant or to the minor natural or adoptive child of the participant during the period of ineligibility;

D. All natural or adoptive children of the participant who move into the participant's home during the period of ineligibility, even if the child did not receive TANF with the participant during VIEW participation or received assistance only for part of the time during VIEW participation; and

E. Any individual who is sanctioned and is an otherwise required member of the assistance unit.

EXCEPTIONS: (1) If the parent dies during the period of ineligibility, the children of that parent may receive TANF with another specified relative, if otherwise eligible. (2) A minor parent or child who turns 18 during the period of ineligibility may apply and receive TANF in her own right for herself and her child(ren), if otherwise eligible. (3) If it is determined that the parent became disabled during the period of ineligibility or became required to care for a household member with a disability, and such a disability or situation prevents employment, the parent and children in the family may receive TANF benefits without regard to the period of ineligibility. The worker must assist the parent in pursuing other benefits, as appropriate. The disability must be re-evaluated at the time prescribed by the medical statement. The case is to be closed as soon as administratively possible upon verifying that the parent is able to work.

The 24-month period of ineligibility status remains with any participating family member who moves out of his parent's home during the period of ineligibility.

The eligibility worker must inform the caretaker/relative who applies for TANF for such children when the period of ineligibility expires so they may reapply for assistance at that time.

Example #1: Ms. Smith's TANF case was closed effective January 1998, due to expiration of the period of eligibility while she was participating in the VIEW Program. Her son, Joe, who was an assistance unit member while Ms. Smith participated in the VIEW Program, moved to his grandparent's home in June 1998. In that same month, Joe's grandmother filed an application for TANF, for herself and Joe. The application for TANF is denied due to the fact that Joe was an assistance unit member during Ms. Smith's VIEW participation in which the period of eligibility had expired. Joe will remain ineligible for receipt of TANF until the entire 24-month period of ineligibility has expired.

Example #2: Ms. Smith, who is an TANF recipient with her sons Josh and Joe, began participating in the VIEW Program in March 1996. Josh moved out of Ms. Smith's home in June 1996 to move in with his aunt. The aunt applied for TANF, on Josh's behalf, in June 1996. The aunt's TANF application for Josh may be approved, if Josh is otherwise eligible, because Ms. Smith's TANF case was not in a period of ineligibility when Josh left.

NOTE: No member of the assistance unit in a period of ineligibility is eligible for the Diversionary Assistance Program. (See Chapter 800.)

901.12 TRANSFERS - Active VIEW cases transferred to another agency should be treated as follows:

A. When a VIEW case with no earned income and not in sanction transfers to another agency, the VIEW time clock and the 60-month clock stop until such time as the VIEW worker does an assessment and re-starts the clocks. The receiving agency is responsible for adjusting the clocks after the assessment.

B. When a VIEW case with earnings transfers to another agency, the VIEW time clock continues.

C. A sanction period continues when a sanctioned VIEW case transfers to another agency.

901.13 TRANSITIONAL BENEFITS - When a VIEW case closes, the family may be eligible for Medicaid and up to one year of child care, transportation, and employment and training.* Receipt of Medicaid during the VIEW 12-month transitional period does not affect calculation of the 24-month period of ineligibility. Eligibility criteria for transitional benefits are found in:

A. Medicaid Manual Volume XIII, Section M0320.306 (Low Income Families with Children (LIFC)) and M1520.500 (Extensions of Medicaid Coverage), for Medicaid;

B. Child Care policy manual for transitional child care;

C. TANF Manual, Chapter 1000, for transitional transportation and transitional employment and training.

901.14 FULL EMPLOYMENT PROGRAM - The Full Employment Program (FEP) is **a** subsidized, training-oriented employment **activity for VIEW participants who have been unable to find a job on their own. FEP uses government funds to directly subsidize wages paid by the employer. Wages are paid** through the regular employee payroll **based upon hours worked in lieu of TANF benefits. A monthly stipend is issued to the employer for the duration of the FEP placement.**

The FEP placement and stipend periods are a fixed six-month period. The placement begins the month FEP employment begins and ends on the last day of the sixth month, e.g., placement begins June 10 and continues through November 30, and the corresponding stipend period begins on July 1 and ends on December 1. The begin date of placement cannot be a date within the last 11 days of the placement month.

A parent or other caretaker-relative may participate in FEP. Only one person in a case can be in FEP at any time. No member of a case serving a VIEW sanction can participate in FEP unless the minimum sanction period has elapsed.

A. TANF **PAYMENT** DIVERTED TO **EMPLOYER** - When notified by the VIEW worker of the FEP placement, the eligibility worker must **take action in ADAPT to enroll the individual as a FEP participant and divert monthly payments to the employer. The EW must send an Advance Notice of Proposed Action (032-03-018) informing the recipient that the TANF payment will be suspended. Note: Suspension in the context of FEP participation means that no monthly payment will be issued to the FEP participant while in the placement. It does not mean that action to suspend the payment should be taken in ADAPT, as this would prevent issuance of the monthly stipend to the employer.**

The recipient is enrolled in FEP by completing the VIEW Full Employment Program (AEVFEP) and Case Information 2 (AECAS2) screens in ADAPT. The AEVFEP screen must be completed first. In order for the stipend to be issued to the employer, AECAS2 must be completed using a payee type of FP.

*2002 Acts of Assembly, Appropriations, Item 354C

If the Eligibility worker receives notification of a FEP placement during the 10 day notice period, the ADAPT system should not be updated until the first of the following month. It will be necessary to issue the initial employer stipend out of Benefit Adjustment. The EW must act on the reported change within 10 days.

Example: On May 23 the Eligibility Worker receives the FEP Communication Form from the VIEW Worker indicating a FEP Placement began on May 18. The Eligibility Worker should wait until June 1 to enter the information into the ADAPT system. A TANF payment will be made to the client for June. This is not an overpayment since the Eligibility Worker was not able to provide timely notice. The initial employer stipend for the month of May should be issued out of TANF Benefit Adjustment at the beginning of June. The June employer stipend, will be issued through the monthly batch process and will be received by the employer the beginning of July.

B. TANF ELIGIBILITY DURING FEP PLACEMENT – A participant remains eligible for TANF for the **duration of the FEP placement, with two exceptions: 1) no eligible children remain in the home and 2) a VIEW sanction is imposed on the FEP case.**

Eligibility continues during FEP participation even though changes reported would otherwise cause the case to be ineligible, e.g., a parent with income in excess of 130 percent of the federal poverty level.

1. **During placement in FEP employment,** the recipient **must continue to** report **required** changes **(Section 401.2.B.2.),** and the changes **must be entered** in ADAPT. **Although the information entered does not affect eligibility of the TANF case, the changes must be evaluated in accordance with Food Stamp and Medicaid requirements and may impact the assistance unit's eligibility for Food Stamps or Medicaid.**

2. If a redetermination is due anytime during the FEP placement **and the case is receiving TANF and Food Stamps, the redetermination must be completed when due. Changes in the participant's circumstances will not affect TANF eligibility during the FEP placement, except as noted in paragraph B above.**

3. **If the case is TANF only, the eligibility worker may postpone the redetermination until the last month of the FEP placement, since a full evaluation of eligibility must be completed at that time. In determining ongoing eligibility following termination of the FEP placement, the EW must take into account** any changes that **have** occurred during the placement. **If the FEP participant is retained by the employer following termination of the placement, wages received are evaluated the same as for unsubsidized employment.**

4. If the FEP participant meets the criteria for interim reporting during the FEP placement, an Interim Report will be sent. However, no negative action can be taken if the Interim Report is not returned and/or completed. ADAPT keeps FEP cases active so as not to interrupt issuance of the stipend to the employer.

C. ISSUANCE OF STIPEND PAYMENTS TO THE EMPLOYER – The employer stipend is a monthly payment paid as partial reimbursement of expenses incurred by the employer for wages and training provided to the FEP participant. The stipend is a predetermined, fixed amount of $300 monthly. Stipends are normally issued on the first of each month through the monthly batch process. However, the first stipend must be issued through Benefit Adjustment when ADAPT cannot be updated because of the 10-day timely notice period.

Stipends are paid beginning the month after the participant enters a FEP placement. FEP stipends are issued for six consecutive months, unless notified by the VIEW worker to discontinue the payments. In no instance are stipends to be paid for more than six months.

D. ISSUANCE OF TANF PAYMENTS DURING THE FEP PLACEMENT – A supplemental payment to the recipient may be issued in the following situations:

1. The EW is notified by the ESW that the participant worked less than an average of 20 hours per week, with good cause. Good cause means that the failure to work was outside the control of the FEP participant, such as, but not limited to, loss of child care, transportation, illness of the FEP participant or a family member, or another emergency situation. The number of hours worked and good cause are determined by the VIEW worker. If the ESW determines good cause does <u>not</u> exist, no supplement is to be issued.

The EW will issue a supplemental payment through Benefit Adjustment using gross earnings information provided by the ESW and other countable income received in the month for which the supplement is issued. The amount of the payment is determined using the VIEW calculation. Use ADAPT Option 11 to create the payment. If an overpayment or penalty is in effect, the payment to the FEP participant must be reduced accordingly.

2. Both a TANF payment and monthly FEP stipend must be issued in the final month of the FEP period.

E. ISSUANCE OF EMPLOYER BONUS – The VIEW worker will notify the eligibility worker on the Full Employment Program Communication Form (032-03-655) when a bonus payment must be issued. The bonus payment is a predetermined, fixed amount of $500 payable to the employer. A bonus is paid if the participant is hired permanently at any time during the six-month placement period or within 30 calendar days after the placement has ended. The EW will issue the bonus payment through Benefit Adjustment. Only one bonus payment may be issued per VIEW participant per FEP placement.

The bonus cannot be issued in the same month a stipend has been issued. For example, if the final stipend payment is issued in October, the bonus payment cannot be issued until November.

F. TREATMENT OF CHILD SUPPORT PAYMENTS – FEP participants must continue to redirect all support to the Division of Child Support Enforcement (DCSE) while in a FEP placement. DCSE will issue to FEP participants all child support payments they would otherwise be entitled to receive. This includes $50 disregard payments, and other support payments they would receive if they were receiving a TANF payment.

G. TANF MATCH PAYMENTS – TANF Match Payments will continue to be issued based on current support paid to DCSE.

H. REPLACEMENT OF STIPEND OR BONUS CHECKS – The FEP employer will contact the ESW if check replacement is necessary, and the ESW will notify the EW using the Full Employment Program Communication Form (032-03-655). If a stipend is reported as lost, stolen, or mutilated, follow procedures in Section 502.5.D **and** Appendix I **to Chapter 500 to stop payment.**

The employer must complete the required three copies of the Affidavit on Check Endorsement. The employer will determine the appropriate person to complete and sign the affidavit. This is usually an employee in the accounting department with responsibility for endorsing checks received. If the employer endorses his checks with a stamp, the endorsement stamp should be stamped once on the signature section at the end of the affidavit.

ADAPT coding applicable to FEP check replacements is the same as for reissuing or replacing TANF or Diversionary Assistance checks. Once the worker is notified of a lost/stolen/mutilated/returned check, the worker must update the status of the check in Check Handling. If the check was cancelled or mutilated, the replacement check must be issued through TANF Benefit Adjustment. If a Stop Payment is placed against the check, the stipend must be reissued through Check Handling. Under no circumstances should a local check be written to replace the original check.

VIEW GRANT CALCULATION

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to the Federal Poverty Level (see Federal Poverty Level Chart found in Appendix 3 of this Chapter) for the appropriate AU size. The federal poverty level is to be applied uniformly in all of the three groupings of localities in Virginia.

If the gross countable earned income equals or exceeds the federal poverty level, the case is ineligible.

If the countable gross earned income is less than the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare to the standard of assistance for the AU. TANF Match Payments received are not considered countable income. If the countable unearned income equals or exceeds the standard of assistance, the case is ineligible.

If the countable unearned income is less than the standard of assistance, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction* as defined in Section 305.3.B.**3.** per **assistance unit** from total gross earned income if the **assistance unit** qualifies for this deduction and the income is not exempted.

b. Deduct **20% of the remainder.***

c. Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.

*** 22 VAC 40-295-60**

STEP 4: Add the total net countable earned income and the TANF deficit from STEP 2. The net countable earned income plus the TANF deficit shall not exceed the federal poverty level. If necessary, reduce the TANF payment so that the total of the net earned income plus the TANF payment equals the federal poverty level.

If the TANF payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF (VIEW) and will be carried as an active TANF case.

TANF-UP GRANT CALCULATION

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to 150% of the Federal Poverty Level (see Appendix 3 of this Chapter) for the appropriate AU size. One-hundred fifty percent of the federal poverty level is to be applied uniformly in all of the three groupings of localities in Virginia.

If the gross countable earned income equals or exceeds 150% of the federal poverty level, the case is ineligible.

If the countable gross earned income is less than 150% of the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare to the standard of assistance for the AU. If the countable unearned income equals or exceeds the standard of assistance, the case is ineligible.

If the countable unearned income is less than the standard of assistance, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction as defined in Section 305.3.B.**3**. **for the assistance unit** from total gross earned income if the **assistance unit** qualifies for this deduction and the income is not exempted.

b. Deduct **20%** of the remainder*****.

c. Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.

*** 22 VAC 40-295-60**

STEP 4: Add the total net countable earned income and the TANF-UP deficit from STEP 2. The net countable earned income plus the TANF-UP deficit shall not exceed 150% of the federal poverty level. If necessary, reduce the TANF-UP payment so that the total of the net earned income plus the TANF-UP payment equals 150% of the federal poverty level.

If the TANF-UP payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF-UP (VIEW) and will be carried as an active TANF-UP case.

VIEW GRANT CALCULATION

Example 1 - Earnings

Assistance unit of 2 in a Group II locality. Mom receives a TANF Match Payment of $135 and earns $450 gross monthly. The monthly Federal Poverty Level for an assistance unit of 2 is **$1,070**.

Step (1) - Screening at Federal Poverty Level

$ 450.00	Gross Monthly Earnings <
$**1,070.00**	Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$254.00	Standard of Assistance for 2
- 0	Unearned Income
$254.00	TANF Deficit

The TANF Match Payment does not impact the TANF deficit.

Step (3) - Earned Income Disregards

$450.00	Gross Monthly Earnings
-134.00	Standard Deduction
$316.00	x 20% = 63.20
- 63.20	
$252.80	Net Earned Income

Step (5) - Add Net Earned Income and TANF Deficit

$253.00	Net Earned Income
+254.00	TANF Deficit
$506.80	< Federal Poverty Level

$254.00 = VIEW Payment (TANF Grant)

Example 2 - Earned and Unearned Income

Assistance unit of 2 in a Group II locality. Mom earns $300 gross monthly and the assistance unit also received $120 unearned income monthly.

Step (1) - Screening at Federal Poverty Level

$ 300.00	Gross Monthly Earnings <
$1,070.00	Month Federal Poverty Level for 2

Step (2) - Unearned Income

$254.00	Standard of Assistance for 2
-120.00	Unearned Income
$134.00	TANF Deficit

Step (3) - Earned Income Disregards

$300.00	Gross Monthly Earnings
-134.00	Standard Deduction
$166.00	x 20% = 33.20
- 33.20	
$132.80	Net Earned Income

Step (4) - Add Net Earned Income and TANF Deficit

$132.80	Net Earned Income
+134.00	TANF Deficit
$266.80	< Federal Poverty Level

$134.00 = VIEW Payment (TANF Grant)

Example 3 - Earnings Result in Ineligibility

Assistance unit of 2 in a Group III locality. Mom earns **$1090** monthly gross income. The monthly Federal Poverty Level for an assistance unit of 2 is **$1,070**.

Step (1) - Screening at Federal Poverty Level

$1,090.00	Gross Monthly Earnings >
$1,070.00	Monthly Federal Poverty Level for 2

Ineligible.

Example 4 - Deficit must be reduced in order not to exceed the Federal Poverty Level when added to net earned income

Assistance unit of 2 in a Group III locality. Mom earns **$1067.00** gross monthly. The monthly Federal Poverty Level for an assistance unit of 2 is **$1,070.**

Step (1) - Screening at Federal Poverty Level

$1,067.00	Gross Monthly Earnings <
$1,070.00	Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$323.00	Standard of Assistance for 2
- 0	Unearned Income
$323.00	TANF Deficit

Step (3) - Earned Income Disregards

$1067.00	Gross Monthly Earnings
- 134.00	Standard Deduction
$ 933.00	x 20% **=186.60**
- 186.60	
$ 746.40	Net Earned Income

Step (4) - Add Earned Income and TANF Deficit

$ 746.40	Net Earned Income
+ 323.00	TANF Deficit
$1069.40	> Federal Poverty Level

Reduce TANF Deficit:

$1070.00	Federal Poverty Level
-746.40	Net Earned Income
$ 323.60	VIEW Deficit

$323.00 = VIEW Payment

Example 5 - Maximum Reimbursable

Assistance unit of 6 in a Group I locality. Mom earns $450 gross monthly income. The monthly Federal Poverty Level for an assistance unit of 6 is **$2,156.00**.

Step (1) - Screening at Federal Poverty Level

$ 450.00 Gross Monthly Earnings <
$2,156.00 Monthly Federal Poverty Level for 6

Step (2) - Unearned Income

$470.00 Standard of Assistance for 6
- 0 Unearned Income
$470.00 TANF Deficit

$443.00 Maximum Reimbursable Amount

Step (3) - Earned Income Disregards

$450.00 Gross Monthly Earnings
-**179.00** Standard Work Deduction
$**271.00** **x 20% = 54.20**
- **54.20**
$**216.80** Net Earned Income

Step (4) - Add Net Earned Income and TANF Deficit

$**216.80** Net Earned Income
+443.00 Maximum Reimbursable TANF Deficit
$**659.80** < Federal Poverty Level

$443.00 = VIEW Payment (TANF Grant)

Example 6 - Earned Income Case with Immunization Penalty

Assistance unit of 2 in a Group III locality. Mom earns $960 gross monthly income. One member of the AU receives $60 SSA monthly. The monthly Federal Poverty Level for an assistance unit of 2 is **$1070**. There is a $50 immunization penalty.

Step (1) - Screening at Federal Poverty Level

$ 960.00 Gross Monthly Earnings <
$1070.00 Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$323.00 Standard of Assistance for 2
- 60.00 Unearned Income
$263.00 TANF Deficit

Step (3) - Earned Income Disregards

$960.00 Gross Monthly Earnings
-134.00 Standard Deduction
$826.00 x 20% =165.20

Step (4) - Deduct 20% from $826.00
$826.00
-165.20
$660.80 Net Earned Income

Step (5) Add Net Earned Income and TANF Deficit
$660.80 Net Earned Income
+263.00 TANF Deficit
$923.80 < Federal Poverty Level

Reduce TANF Deficit:

$1070.00 Federal Poverty Level
- 923.80 Net Earned Income + TANF Deficit
$ 146.20 VIEW Payment (TANF Grant)

Step (6) - Apply Immunization Penalty

$146.20 VIEW Payment
- 50.00 Immunization Penalty
$ 96.20 Net VIEW **Deficit**

$ 96.00 = VIEW Payment (TANF Grant)

Example 6 - TANF-UP Household

Assistance unit of 4 in a group II locality. Dad earns $1500 gross income. One-hundred fifty percent of the monthly federal poverty level for an assistance unit of 4 is **$2,419.**

Step (1) Screening at 150% of the Federal Poverty Level

$1500.00	Gross Monthly Earnings <
$2419.00	150% of the Federal Poverty Level

Step (2) Unearned Income

$ 382.00	Standard of Assistance for 4
$ 0.00	Unearned Income
$ 382.00	TANF Deficit

Step (3) Earned Income Disregards

$1500.00	Gross Monthly Earnings
- 134.00	Standard Deduction
$1366.00	x 20% = $273.20
-273.20	
$1092.80	Net Earned Income

Step (4) Add Net Earned and TANF Deficit

$1092.80
+ 382.00
$1474.80 **<** 150% of the Federal Poverty Level

$ 382 = VIEW Payment (TANF Grant)

2005 FEDERAL POVERTY LEVEL

Size of Family Unit	Monthly Poverty Guideline
1	**$ 798.00**
2	**$1,070.00**
3	**$1,341.00**
4	**$1,613.00**
5	**$1,885.00**
6	**$2,156.00**
7	**$2,428.00**
8	**$2,700.00**

For each additional person add **$272**

150% of the Federal Poverty Level
(for TANF-UP Families)

Size of Family Unit	150% of the Federal Poverty Level
1	**$1,197.00**
2	**$1,605.00**
3	**$2,011.00**
4	**$2,419.00**
5	**$2,827.00**
6	**$3,234.00**
7	**$3,642.00**
8	**$4,050.00**

For each additional person add **$408**

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DEFINITIONS

The following words and terms, when used in this policy, shall have the following meaning:

Adult basic education (ABE) - remedial or other instructional activities aimed at enhancing basic educational performance levels including reading, writing and mathematics.

Agreement of Personal Responsibility (APR) - the written individualized agreement of personal responsibility required by the Code of Virginia 63.1-133.49 and this policy.

Applicant - a person who has applied for TANF or TANF-UP benefits and the disposition of the application has not yet been determined.

Basic Literacy level - a literacy level that allows a person to function at a level equivalent to at least grade 8.9.

Case Management - the process of assessing, monitoring, coordinating, delivering and/or brokering activities and services necessary for VIEW participants to enter employment or employment related activities as quickly as possible.

Case Management Services - services which include, but are not limited to, job development and job placement, community work experience, education, skills training and support services.

Case Manager - the worker designated by the local department of social services, a private sector contractor or a private community-based organization including non-profit entities, churches, or voluntary organizations that provide case management services.

Child day care program - a regularly operating service arrangement for children where, during the absence of a parent or guardian, a person or organization has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of 13 (or children up to 18 years of age if they are physically or mentally incapable of caring for themselves or subject to court supervision) for less than 24 hour period.

Child day care services - the arrangement and/or purchase of day care for children to assist eligible families to obtain or maintain employment, education or training.

Community work experience – to work for benefits in a public or non-profit agency.

Component - one of several activities in which a person may participate while in the VIEW Program.

Department - the Virginia Department of Social Services.

Disability: A physical, developmental, cognitive or mental health condition or learning disability that limits the ability of the individual to perform life activities. "Life activities" include, but are not limited to: walking, talking, sitting, standing, lifting, seeing, hearing, speaking, learning, understanding, sleeping, eating, taking care of oneself, functioning independently, concentrating, and working. Individuals with chronic health problems such as asthma, diabetes, and hypertension may also be included, if these conditions limit the individual's ability to function. Such a disability must be verified by a qualified professional.

A child has a disability if he or she has a physical developmental, cognitive or mental health condition or learning disability that limits the ability to perform any of the activities listed above, or other activities, as compared with other children of the same chronological age.

Displacement – when a TANF recipient participating in the Full Employment Program (FEP) or Community Work Experience Placement (CWEP) fills a vacancy that exists because another individual is on layoff from the same or equivalent job; when a participant fills a vacancy created by an involuntary reduction in the work force or by the termination of another employee for the purpose of filling a vacancy with a VIEW participant.

Earned income disregards - a certain amount of earned income which is not counted when determining the amount of the TANF benefit.

Earned Income Tax Credit – earned income tax credits received as advance payments or refunds from federal taxes due.

ESW - Employment Services Worker, may be a local DSS worker or anyone who meets the definition of case manager. In some agencies it may be a worker who is responsible for the administering of VIEW and benefit programs.

EW - Eligibility Worker.

Exempt – status of a TANF or TANF-UP applicant or recipient who meets one of the Virginia Initiative for Employment not Welfare (VIEW) program exemption criteria and, therefore, is not required to participate in VIEW in order to be eligible for public assistance.

Full Employment Program (FEP) - subsidized, training oriented employment, that replaces TANF benefits with wages paid by an employer. This employment is designed to train the recipient for a specific job, increase his self-sufficiency and improve his competitiveness in the labor market.

Full-time unsubsidized employment - employment which is considered by the employer to be full-time, but in no case less than 30 hours per week and for which no government funds are used to subsidize the individual's salary.

Good Cause – a circumstance when a VIEW participant was unable to comply with program requirements due to circumstances beyond his control. This is determined by an evaluation done by the worker responsible for the VIEW program.

Grant - the monthly TANF benefit payment.

Hardship exception - prescribed reasons which, if applicable, would allow an extension of receipt of TANF benefits.

Household member - Any child or adult residing with the applicant/recipient. The individual need not be a member of the applicant/recipient's assistance unit to qualify as a household member.

Job development - Locating job openings which fit the needs and qualifications of participants. Job development may also involve job creation through the provision of employer tax credits and subsidies for on-the-job training.

Job Finding – the identification of available and appropriate jobs.

Job follow-up – the process of tracking wages and hours of employment monthly and providing case management services to assist with job retention and upgrading.

Job matching - matching a participant's skills and/or prior work experience to available job openings.

Job placement - placing a participant in a unsubsidized or subsidized job. Job placement is the result of job finding and job matching.

Job Search - a structured time limited period in which the participant is required to search for and obtain employment. In order to complete the job search, the participant is required to search, find and apply for a set number of jobs.

Job skills training - training in technical job skills or required knowledge in a specific occupational area in the labor market.

Job Training Partnership Act (JTPA) - the Act and organization that prepares economically disadvantaged youth and adults for entry into the labor force.

Legally operating child day care providers - includes all providers regulated by the Department of Social Services, Division of Licensing, city approved providers, county approved providers, local agency approved providers, and providers who are legally exempt from regulation based upon the number and ages of children in care or because the provider is a relative caring only for relatives.

Limited English proficiency - limited ability in the English language by a person whose native language is one other than English or by a person who lives in a family or community environment where a language other than English is the dominant language.

Local agency or local department - any one of the local social services or welfare agencies throughout the Commonwealth which administers TANF and VIEW, its' work program.

Local Annual Plan - a yearly plan submitted to the department by each local agency which describes the locality's VIEW plan.

Making good progress and satisfactory progress - participant in any education or training activity is meeting on a periodically measured basis of less than one year, such as a term or quarter, a consistent standard of progress
based on written policy as developed by the educational institution or training agency.

On the job training – paid or unpaid training which is provided by an employer during the performance of a job by a VIEW participant.

Participant - a TANF or TANF-UP recipient who has signed the Agreement of Personal Responsibility and is participating in the VIEW program.

Part-time unsubsidized employment - employment of at least eight hours but less than 30 hours per week and for which no government funds are used to subsidize the individual's salary.

Pending status - a status to which participants are assigned when they cannot move immediately into a component.

Post-secondary education - a program of post secondary instruction offered by an institution of higher education as determined by the Secretary of Education to meet the Higher Education Act of 1965.

Queue – the list of TANF recipients who are referred by the eligibility worker for mandatory participation in the VIEW program.

Sanction - to suspend a participant's TANF grant and or/food stamp allotment for noncompliance with this program.

Satisfactory participation – attending all the hours assigned to an activity during the month. In the instance of job search, the completion of all required job search contacts.

Self-Initiated - a participant who has enrolled in post-secondary or skills training activities prior to enrollment into the VIEW program.

Standard Operating Procedures (SOP) – guide by which each locality administers the VIEW program specific to their program design.

Support services - services such as child care and transportation provided to program participants to enable the participant to work or to receive training or education which are intended to lead to employment.

Termination – closure of the TANF case for failure by a mandatory VIEW recipient to sign the APR.

Temporary Assistance for Needy Families (TANF) - the cash assistance program for families with children in Virginia, which is based on Title IV-A of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).

Time limitations - a specified period of time enacted by state and federal statute in which to receive TANF

Transitional support services - child care, transportation, employment and training and Medicaid provided to a VIEW participant whose TANF case has been closed.

Unsubsidized employment - employment in which no government funds are used to subsidize the wages earned by a participant.

Virginia Independence Program - welfare reform initiatives implemented in 1995, including VIEW, which is part of TANF.

Virginia Initiative for Employment Not Welfare or "VIEW" – the Commonwealth's employment services program for TANF recipients who are required to participate. It was implemented in 1995 as part of the Virginia Independence program (VIP) to assist participants in attaining self-sufficiency

Vocational Education – certificate/associate degree programs or skills training offered in a public school setting with a specific employment goal

Work Activity - participation in unsubsidized employment, FEP, on-the-job training, or community work experience for at least the minimum federally required hours per week.

1. LOCAL EMPLOYMENT SERVICES PLAN

The Virginia Initiative for Employment not Welfare (VIEW) program is designed with emphasis on work first in conjunction with education and training when it may enhance the participant's ability to become self-sufficient. The program goals are to offer Virginians living in poverty the opportunity to:

- Achieve economic independence by removing barriers and disincentives to work by providing positive incentives to work;
- Obtain work skills necessary for self-sufficiency;
- Allow families living in poverty to contribute materially to their own self-sufficiency;
- To set out the responsibilities of and expectations for recipients of public assistance;
- Obtain work experience through the VIEW program.

All plans and program designs submitted to the state should be clear in that intent.

A. Description

Each local agency will submit an annual VIEW plan* to the Regional TANF Specialists by July 1st of each year for approval. This date will allow for localities to have received notification of the next year's VIEW allocation. The plan will describe the locality's VIEW Program, and will include the following:

1) A description of the VIEW population;

2) The employment needs of the population;

3) Information regarding local labor market trends;

4) A plan of participation by component; and

5) Standard operating procedures **are optional** (guide can be found in Appendix C) which should identify expected outcomes such as the number of participants served, the number employed, average wage, etc.

B. Requirements

1) Each local agency must prepare an annual VIEW plan according to VIEW planning guidelines issued by the State Department of Social Services.

* Virginia Administrative Code 22 VAC 40-760-30

2) Changes to the local annual VIEW plan are allowable for the following reasons:

a) Changes to planned number of participants to be served and/or changes to planned expenditures of 15% or more;

b) Any substantial changes to program design i.e. the local agency ads or drops an optional program component;

c) Changes to planned program outcomes such as entered employment rate/retention rate or average wage.

3) The local agency may submit a change to the local plan only during the first 30 days of each quarter. The local agency may only change the planned participation and planned expenditures for the quarter in which the change is submitted and for future quarters.

4) The local agency will send changes to local plans to the Regional Specialist for approval. The Regional Specialist will send copies of the approved changes to the local plan to the Central Office.

5) All local plans must be submitted to the ESP Regional Specialist for review and final approval. No reimbursements for locality expenditures will be granted without final approval of the local plan.

6) Locality request for additional funds will be approved based on meeting or exceeding the performance measures in the local plan.

2. PROGRAM FLOW

A. The ESW will **complete the assessment of** the participant within 30 days of the referral from eligibility. **If possible, further assessment by a qualified professional, if necessary, is to be completed within 30 days following the completion of a screening**.

The ESW must offer screening of disabilities to individuals within the first 90 days in VIEW and:

- **At the initial assessment;**
- **Whenever an individual discloses the existence of a disability;**
- **Whenever an individual provides other information that indicates that he/she has or may have a disability**
- **At any other time when the individual appears to be having difficulty with entering or maintaining employment or VIEW program participation.**

The worker must also screen an individual for disabilities whenever an individual requests such screening.

If a determination regarding a disability has been made by a qualified professional, it is not necessary to obtain a second assessment for the same disability.

If the screening indicates that the individual is likely to have a disability that affects compliance with VIEW program rules, the worker must:

- Give the individual an opportunity to obtain current documentation or a current evaluation from a qualified professional that describes the nature and severity of the individual's disability, its effect on the ability to participate in work activities and comply with other program rules, the accommodations, if any, needed by the individual to participate in work activities or fulfill other program requirements, and the length of any necessary treatment. Such documentation must be provided in 30 days or in a time frame agreed upon by the client and worker. If the client makes the appointment, the client must provide the appointment date to the worker. The activity and service plan must include the follow-up activities required as a result of the screening and assessment.

- The ESW will arrange for the individual to receive an evaluation from a physician or other appropriate professional. If the assessment or evaluation is not covered by Medicaid or other sources, the cost of the evaluation is payable from administrative funds. The agency may request additional information or a second assessment from another source if there are questions about the original diagnosis.

Prior to conducting screening and, if necessary, referring the individual for an assessment, the worker must inform individuals that screening and assessment are voluntary, screening and assessment may help determine what the individual can and cannot do, and what he needs, who the screening and evaluation results will be shared with, and that having a disability or other barrier does not disqualify an individual from getting benefits or from participation.

B. During the assessment, the ESW will inform the participant of the VIEW program requirements.

C. During the assessment, the ESW will determine the following:

1) The types of jobs a participant could get immediately without the need for further skills training or education.

2) The types of Full Employment work-sites or community work experience sites available to the participant.

3) Possible jobs which the participant could obtain after two years with the provision of VIEW program activities.

4) The participant's need for supportive services.

5) The abilities of the individual.

6) Whether the participant has a disability and whether accommodations are needed.

D. The participant and ESW will sign an Agreement of Personal Responsibility.

E. During the initial assessment, the ESW will assign the participant to either of the following for 30 days:

1) Individual Job Search; or

2) Group Job Search/Job Club.

Job readiness can be offered as a separate activity or as part of individual job search. Job readiness must always be included in any group job search. Job readiness may be offered before, during or after the initial assignment to job search.

F. If the participant obtains full-time employment (30 hours a week or more), he will not be required to participate in other VIEW activities while he is employed full-time, unless he is a member of a TANF-UP household whose minimum weekly requirement is 35 hours. The participant is still required to respond to any correspondence from the ESW and to show up for his reassessments.

G. If the participant obtains part-time employment, which is anything less than 30 hours per week, he will also be required to fully participate in activities designed to help him obtain full-time employment. He may also be assigned to education or skills training in conjunction with employment. He shall be assigned to activities that total at least 30 hours a week (or 35 hours a week if a TANF-UP participant).

The total number of hours of work activities the individual is required to participate cannot exceed the number that the individual is able to perform, based on the Medical Evaluation Form.

If an individual is assigned to a second activity, the worker should determine whether any reasonable accommodations or support services are necessary for the individual to participate in the activity. If any reasonable accommodations or support services are necessary, they should be identified in the Activity and Service Plan, and the worker should arrange for them to be provided.

H. If the participant has not obtained unsubsidized full or part-time employment at the completion of the job search component, he will be reassessed and placed into a work activity (ex.) the Full Employment Program (FEP), on-the-job training, or Community Work Experience (CWEP), no earlier than the 90th day and no later than the 95th day after assignment to the queue.

I. When the assignment is to the community work experience component, the initial assignment will be for 6 months and will be reassessed after 3 months. The ESW should work with the work site to determine their needs; the participant may require a series of work sites if six months is not available at one site.

J. At the expiration of the community work experience period or the Full Employment agreement, the ESW will reassess the participant and assign him to the same or another component.

K. During reassessment, the ESW will determine why the participant has not yet obtained unsubsidized employment. If further education and or training is required, the ESW will assign the participant to the appropriate activities. All participants assigned to education and training activities must also participate in a concurrent work activity.

This determination will include an exploration of whether any barriers, including a verified disability, limited English proficiency, lack of reasonable accommodations or support services, or other barriers, are preventing the individual from searching for or obtaining unsubsidized employment. Unless a disability determination has already been done, the ESW may offer the individual screening to determine whether any disabilities may be preventing the individual from obtaining unsubsidized employment, and, if the screening indicates a possible disability, referral to a qualified professional for an in-depth disability evaluation.

The Activity and Service Plan should be revised and updated to reflect needed accommodations and support services.

L. Sixty days prior to the end of the participant's two-year time period, the ESW will assess and assign the participant to Individual Job Search, Group Job Search, or Job Club.

M. A participant can apply for a hardship exception during the 60-day period prior to the end of the two-year time period. Participants eligible for a hardship exception will have their TANF benefits extended.

N. Participants granted a hardship exception will be reassessed as discussed in section 18 of this chapter. The ESW will determine if the condition for which the hardship exception was granted still exists.

3. EXEMPTIONS – Please refer to Section 901.2.

4. ASSESSMENT

A. Scheduling of the Initial Assessment

1) The ESW will assess the participant within 30 days of his assignment to the queue.

2) The assessment will be an individual, face-to-face interview between the participant and the ESW.

3) The ESW will send the participant a letter informing him of the date of the assessment interview.

4) The letter will explain that appearance for the interview is a condition of continued eligibility for TANF and that the consequence of not attending the interview at which the APR is to be signed, may be termination. The letter will also tell the participant how to contact the ESW, and notify the individual that he must contact the ESW if he is unable to come to the interview or if he needs to reschedule the appointment. **All participants will have their initial assessment interviews scheduled at a time that does not conflict with medical/mental health/other treatment appointments, to the greatest extent possible.**

5) Employed participants will have their initial assessment interviews scheduled at a time that does not require them to miss work. Workers should take into consideration the participant's work schedule when scheduling appointments and if necessary, meet with the participant at a location outside of the agency

which is mutually agreeable.

6) If the participant does not appear for the interview, the ESW **must attempt to contact the participant verbally. If the ESW determines that the participant did not have good cause for missing the appointment or is unable to contact the participant** the ESW will send a written communication to the EW to send an Advance Notice of Proposed Action to the participant within three working days of the missed appointment. The notice will state that the participant must contact the ESW within 10 days from the date of the notice or the participant household's TANF benefits will be terminated. The notice will inform the participant of the good cause process. (See Good Cause for Failure to Participate in Sanctions, section 12 of this policy.)

7) If the participant does not contact local agency staff, as designated on the Advance Notice of Proposed Action, within 10 days of the date of the notice, **the agency will take action to terminate the case. However, if the client signs the APR prior to the effective date of the Advance Notice of Proposed Action to close the case, the case will not be closed.**

Exception: When the signing of the APR is a condition of TANF eligibility and the participant does not keep the initial assessment appointment and does not have good cause, after having signed the APR, the household will be sanctioned, not terminated.

8) Documentation on either the contact sheet or in the case narrative should reflect all correspondence and contacts with the participant and any collateral contacts made beginning with the scheduling of the initial assessment. Included in the recordings should be the date, the name of the person contacted, the method of contact (i.e. telephone, office visit, etc.) and brief description/ summary of the contact.

B. Initial Assessment Procedures

1) Each locality will establish assessment procedures which include:

a) An identification and evaluation of the participant's occupational skills, education, proficiencies and deficiencies. The assessment should focus on the skills the participant already possesses that would allow him to obtain immediate employment. The VIEW Assessment Form or an assessment tool that has been approved by the regional coordinator, must be completed on each participant.

b) A determination of the participant’s functional literacy. If a participant does not have a GED, Associate degree or a Bachelor's degree he will be tested to determine his functional literacy level using the University of Texas "Information Sheet" test found in the forms section of this policy or another literacy assessment tool such as the Test of Adult Basic Education (TABE). He must be tested within 90 days of the referral from the EW. Either the ESW or a service provider can conduct the testing. Prior test

scores, such as TABE**,** which establish an approximate educational/basic literacy level, if within the past year, can be used in place of the "Information Sheet" test.

c) A detailed evaluation of child care and other supportive service needs.

d) A plan for monitoring of the participant's progress while he is participating in activities.

d) An initial identification of the type of community work experience or Full Employment site needed by the participant if unsubsidized employment is not found.

e) Screening for disabilities that may interfere with the person's ability to comply with VIEW participation and/or engage in employment. All VIEW participants must be offered screening for learning disabilities, mental health disabilities, and alcohol and substance abuse within 90 days of signing the APR. The local department must use valid screening tools. Examples can be found in "Screening for Employment Barriers: Issues and Tools." Where there is an indication of a physical or mental impairment, including a learning disability, then the recipient will be consulted and, if it is acceptable to the recipient, the ESW will make a referral for an assessment. Screening and assessment, if needed, may also occur at any time that there is any suspicion or evidence that such problems may be affecting the person's ability to meet VIEW requirements. If a participant chooses not to be screened, then the VIEW participant must engage fully in VIEW requirements.

If an assessment indicates the existence of a disability, the Activity and Service Plan must be updated to include required treatment and/or services, and require participation in those activities.

f) Evaluation of the disability of a household member the recipient cares for, to determine the impact of this responsibility on the recipient's ability to comply with VIEW requirements. Such procedures can include the use of the medical form. While it is preferred that this process occur within 90 days of signing the APR, it also can occur at any time that there is any suspicion or evidence that the need to care for a household member with a disability may be affecting the person's ability to meet VIEW requirements.

2) Each participant will be assessed to determine his job readiness. The assessment will include consideration of the following:

a) Information regarding the types of jobs available to the participant immediately without further education or skills training;

b) The transferable skills the participant already possesses which could allow the participant to obtain immediate employment (such as skills from hobbies, volunteer work or previous employment which may be applicable to jobs available in the community);

c) Job readiness skills, including the participant's ability to work under supervision and cope with professional or personal problems that may occur on the job;

d) The participant's ability to work with co-workers on the job;

e) Participant's job interests;

f) Basic education level;

g) Prior work history, including types of jobs previously held, pattern of finding and losing jobs and work habits;

h) Occupational skills;

i) Family/life circumstances, including the level of support for the participant entering employment as well as consideration of domestic violence situations and whether **there is a household member with a verified disability for whom the participant provides care**;

j) Supportive service needs, including child care and transportation;

k) Ability to read English (as determined by the ESW); and,

l) **Any disabilities or medical conditions that need to be taken into consideration in planning program participation.**

m) Other issues which need to be addressed to facilitate obtaining employment.

3) The ESW will be required to inform the participant of the following information **about** VIEW:

a) program goals and philosophy;

b) program requirements, including an explanation of responsibilities and expectations for participants in the VIEW program;

c) benefits of obtaining immediate employment (increased income and skills level, enhanced disregard);

d) the two-year time limitation for receipt of TANF benefits;

e) evaluation of hardship exceptions and the process for appeals and hearings;

f) penalties for failure to comply, without good cause, with program requirements. Penalties include sanctions and possible consequences for hardship exception requests;

g) good cause reasons for not complying with program requirements, including information, in writing, explaining the criteria that will be used in determining good cause for not working when no acceptable child care arrangements can be made;

h) consequences of not signing the Agreement of Personal Responsibility;

i) the requirement to be involved in work activities throughout the two-year time period of VIEW participation;

j) the fact that the two-year time limitation for receipt of TANF begins the first of the month after the date the Agreement of Personal Responsibility is signed;

k) the name and phone number of the ESW or other persons who might need to be contacted;

l) the requirement to respond to all agency correspondence;

m) a discussion on "banking" months of TANF to save eligibility, building assets with the additional savings allowed through receipt of the enhanced income and savings account disregards and budgeting; and

n) explain IPV (Intentional Program Violation) reporting requirements and penalties to the client/participant. Have the client sign the Notice of Intentional Program Violation Penalties. This form may be located on the local agency DSS Intranet site (www.localagency.dss.state.va.us). Give a copy to the client and place a copy in the VIEW record. See Section 102.

o) The right to disclose a disability to the agency, and the benefits of doing so:

- **The right of all applicants/recipients to request screening at any time, and if the screening indicates that they are likely to have such a problem, that they have the right to be referred for an in-depth evaluation by a qualified professional.**

- **Disclosure of a disability and participation in disability screening and an in-depth disability evaluation are voluntary.**

- **Individuals with verified disabilities are entitled to reasonable accommodations in all aspects of the VIEW program, including: help filling out forms and verifying information; changes in VIEW program requirements, changes in work requirements; programs and services that make it possible to participate in the program; and help with filing appeals.**

- **An Activity and Service Plan that describes the modifications in work activities.**

- **What to do if they need to miss work activities, or are unable to do the work activity assigned to them.**

- **What to do if they requested accommodations, support services, fewer hours of work activities or a different work assignment, and the request was denied.**

- **The right to a temporary exemption from work activities, placement in inactive status, or the right to do work activities part-time or during flexible hours.**

- **The right to special equipment that makes it possible to do work activities;**

- **Information on how to request reasonable accommodations and the documentation needed to qualify for them.**

- **The right to assistance in obtaining documentation to qualify for an accommodation.**

4) After the Agreement of Personal Responsibility is signed at the initial assessment, all participants who are not employed or who are not otherwise required, (Section 7, 1 g and 16, b), will be assigned to a 30-day job search component and/or job readiness. In the case of a referral of a former VIEW participant, the ESW may waive the up-front job search requirement and immediately place the individual into a work activity.

5) TANF recipients exempt from VIEW may volunteer to participate**. As voluntary participants, however, they can withdraw from the VIEW program without penalty at any time within the twelve-month trial period and therefore cannot be sanctioned for failure to comply with VIEW program requirements unless they elect to continue in the VIEW program after the end of the twelve-month trial period. If the volunteer cannot meet his obligations, the worker should discuss with the volunteer the option of ending VIEW participation by becoming exempt**

6) A recipient may have one VIEW trial period per spell on assistance. If the recipient volunteers for VIEW an additional time, the trial period will not apply.

C. Agreement of Personal Responsibility

1) The participant and the ESW will sign a new Agreement of Personal Responsibility (APR) at the time of the initial assessment and each subsequent referral following approval of a TANF reapplication or upon re-referral following a period in which the individual was exempt. **If the client refuses to sign the APR at the initial assessment, the worker must sign it and date it. The worker must note on the APR that the client refused to sign. The worker must also document the case record that the client refused to sign.**

2) If the participant chooses not to sign the Agreement or fails to keep the initial assessment appointment at which the APR is to be signed, the agency will take action to terminate the participant's entire TANF grant. If a TANF-UP participant chooses not to sign the Agreement, the entire household will have its TANF benefits terminated regardless of whether another eligible TANF-UP participant is in the household.

3) If the Agreement was signed as a condition of TANF eligibility, the household will be sanctioned rather than terminated for missing the initial assessment appointment.

D. The Agreement will include:

1. The participant's responsibility:

a. to seek employment to support his own family;
b. to participate in assignments made by the case manager;
c. to notify the case manager of any change in circumstances which would impact the participant's ability to satisfactorily participate in the program;
d. to accept a job offer. Refusal to accept a bona fide job offer will result in a full household sanction;
e. to arrange and find transportation and day care. The case manager will assist the participant when the participant has tried but has been unable to find transportation and day care.

2. Notification of the two-year time period for receipt of TANF benefits.

3. Notification of the enhanced disregards available to the participant if unsubsidized employment is obtained.

E. An individual who has refused to sign the Agreement of Personal Responsibility and has had his case closed must sign the APR prior to approval of the TANF application, as a condition of eligibility. The signed APR may be obtained by either the EW or the ESW. Local agencies should develop a procedure by which the APR is signed as quickly as possible to ensure that the processing of the TANF application will not be delayed as failure to have the APR signed may result in the denial of the application.

In these situations, the queue or start date entered in the system will be the TANF approval date rather than the date the APR was signed. However, the two-year clock will begin the first of the following month after the APR was signed. The eligibility worker will adjust the clock accordingly upon TANF approval.

F. Based on the assessment information, the ESW and participant will develop an Activity and Service Plan.

G. The Two-Year Time Limitation

1) The two-year time limitation for receipt of TANF benefits begins the first of the month after the date the Agreement of Personal Responsibility is signed. The VIEW status of the TANF recipient on the first of each month determines if the month will count toward the two year period.

2) The months in which the participant meets any of the following conditions on the first of the month will not count toward the two-year time period:

a) he is exempt from VIEW;

b) he does not have an open VIEW supplement, for reasons other than sanction; or

c) he is assigned to inactive.

3) Months in which a participant is assigned to pending will count toward the two-year time period.

4) Months in which a participant is sanctioned will count toward the two-year time period.

5) Months in which TANF benefits continue due to appeal will count toward the two-year time period.

5. ACTIVITY AND SERVICE PLAN

A. Based on the information obtained during the assessment, the ESW and participant will develop an Activity and Service Plan. The Activity and Service Plan will detail:

1) a list of the planned activities which the participant will need during the two-year time period in order to obtain employment;

2) the participant's current assignments, and specific responsibilities of the participant and the agency, including but not limited to the expected levels of a) participation, b) attendance and/or c) the requirement to return information to the ESW and report changes which impact employment and/or participation;

3) **the supportive services needed by the individual to comply with program requirements.** The Activity and Service Plan may take the place of a service application;

4) a statement explaining the reason(s) for assignment to Pending or Inactive, if applicable, and a list of the steps planned to resolve the issues leading to that assignment.

5) a description, begin and end dates, and planned weekly hours of the participant's assignment or assignments;

6) that participants should contact the ESW if they are considering quitting a job or, if possible, they believe they are in danger of being fired from a job. This is to enable workers to either help participants retain that position or obtain other employment.

7) **Reasonable accommodations needed by an individual to fulfill participation requirements based on recommendations from a qualified professional's evaluation. These accommodations may include, but are not limited to: part-time or flexible hours for work activities, providing the individual with work activities in a specific work environment that enables the individual to participate in work activities, providing particular types of jobs or work activities that are consistent with the person's limitations, activities that are scheduled so they do not conflict with ongoing medical or mental health treatment, additional notice of program appointments, additional explanation of program rules, job coaches, additional time to complete program requirements, and additional intervention before an individual is sanctioned for non-compliance with VIEW program requirements.**

Some individuals are caring for household members with a disability part-time, and can only do work activities part-time, or during particular hours, or on a flexible schedule. When an individual has such a limitation, the employment services worker must find work activities for the individual that do not conflict with the individual's care-taking responsibilities. The household member's condition, as well as the necessity for care that limits the individual's availability for work must be verified by a physician.

Some individuals have disabilities that limit when they can do work activities. For example, some individuals have appointments for medical or mental health treatment, substance abuse treatment, or rehabilitation services (such as physical therapy). When an individual has such appointments, the employment services worker must find work activities for the individual that do not conflict with the individual's treatment.

Examples: Ms. A lost her job because she frequently gives customers the wrong amount of change. It is determined that she has a learning disability that makes such transactions very difficult. The worker arranged for training specifically designed to help her learn despite her disability.

Ms. B is caring for a child with a disability and keeps losing her job because she is frequently called away from work by the child's school to deal with health-related emergencies. The worker determines whether there are jobs she can do that will permit her to meet her child's needs as well or whether the number of hours of work activity required should be reduced to ensure that the parent can meet the needs of the child with a disability.

Ms. C continually comes onto the TANF program after leaving for a job and then losing the job. It is determined that a mental impairment prevents her from handling many work situations. The worker checks in regularly with Ms. F to see how the job is going, what problems are arising, etc.

B. The ESW must complete a new Activity and Service Plan at initial assessment, reassessment, or whenever there is a change to the participant's activity assignments. Modifications to the Activity and Service Plan or modifications to the Agreement of Personal Responsibility due to changes in assignments will not affect the TANF two-year time limitation.

6. SOCIAL/SUPPORTIVE SERVICE

Social/supportive services are provided to remove barriers to the individual's participation and to stabilize employment. The supportive services available are child care, transportation, (medical and dental, services) work related expenses and emergency intervention. Supportive services are provided as needed and available to support participation in orientation, assessment, approved self-initiated education, training and employment activities, or to accept or maintain employment. The provision of supportive services is contingent upon the availability of funds based on local VIEW allocations, and spending limits for such services will be the discretion of the agency. In such situations that limits are set, this should be stated in the SOP and applied equally for each participant. Agencies are encouraged to explore alternatives to removing barriers, if supportive service funds are limited. If supportive services are essential for participation, and neither the participant nor the agency can provide them, and no alternatives are available, the participant may not be sanctioned for noncompliance. In these situations, the participant will be placed in "Inactive" status, which will prevent the clock from counting against the 24 month and the 60-month time limit.

A. Duration of Supportive Services

1) Supportive services may be **provided** for as long as the participant is in a VIEW activity and the TANF case is open or if the TANF case is closed and the required number of job follow-ups have not been completed. If the supportive services consist of transportation see the instructions for transitional services on page 66.

2) Participants who enter full or part-time employment and continue to receive TANF or TANF- UP are eligible for supportive services. In the event of TANF case closure, all supportive services may be provided for 90 days or until the required job follow-ups are completed, whichever is longer.

Note: Transitional supportive services, for which a former participant may be eligible to receive for 12 months, are limited to transportation, child care, and employment and training.* Workers are to inform clients how receiving transitional services will affect their period of ineligibility. When a participant receives transitional transportation it must be recorded in ESPAS. ESPAS can be accessed through the ADAPT Main Menu, Option 14. For detailed instructions refer to the ESPAS Manual, Chapter L.

B. Employment Service Worker Responsibilities

1) The Employment Services Worker is a case manager. As part of his responsibility he assists the applicant/recipient in meeting his service needs. This may be done directly by the ESW or through a referral to a social worker or service provider.

2) When providing social services to recipients, the Activity and Service Plan form may replace the Service Application regardless of the funding source for the service or the

*2002 Acts of Assembly, Appropriations, Item 354C

worker's salary.

C. Supportive Services for Recipients

1) There are five types of VIEW supportive services that the local agency can provide directly or purchase. These services are child day care, transportation, medical/dental, program and/or work related expenses and emergency intervention. Participants who have been sanctioned are entitled to supportive services in order to maintain their employment. Participants who have been sanctioned **or found guilty of an Intentional Program Violation** may also receive supportive services when the participant is performing a verifiable act of compliance. See page 65, 13.A, for a list of verifiable acts of compliance.

2) If child day care or transportation services are needed but not available, recipients cannot be required to participate.

a. Child day care services are provided to enable the caretaker to gain and/or keep employment or to participate in program activities.

1) Arrangement for and/or payment of child day care as a supportive service will be provided only when the participant is unable to obtain child day care on his own at no cost.
2) Participants who are parents of school age children are expected to search for a job during the hours that the children are in school. However, if the interview must take place outside of school hours, child care may be authorized.
3) Participants who need day care and cannot arrange to find their own may be provided assistance, including payment within child care policy as found in Volume VII, Section II, Chapter D. This payment may include child related transportation costs, child day care related transportation costs.
4) If a participant finds employment and the TANF case is closed, child care may be provided through VIEW funds if the participant is not eligible for transitional day care. It may be provided for 90 days or until the required job follow-ups have been completed, whichever is longer, if employment continues. The chosen child care provider must meet the same approval criteria as established in child care policy, Volume VII, Section II, chapter D, of the Services manual.
5) Participants who have been sanctioned are not entitled to child day care service while in the sanction status unless it is needed to maintain employment. However, an individual who has been sanctioned may receive child day care service upon request, if the service is necessary in order for the participant to perform a verifiable act of compliance.

b. For the purpose of providing supportive services in these circumstances, agencies will close the VIEW Enrollment Record in ESPAS due to the sanction. A Generic Case Document (GCD) will be opened for services that come under category 215, for example day care services. This is applicable as long as VACIS is operational.

D. Transportation and Related Services

This service is provided to enable participants to travel to and from authorized VIEW activities or employment. The need must be linked to needs identified on the participant's Activity and Service

Plan and the participant must be making satisfactory progress and regularly attending the component.

(1) The participant will have the primary responsibility to arrange transportation to be employed or participate in activities required by the Agreement of Personal Responsibility. Transportation will be provided only when the participant is unable to make necessary arrangements.

(2) Transportation can be provided by any of the following means:

(a) Individuals other than public conveyors. In this circumstance, payment is made to the individual provider. Such payment must be pre-authorized and reimbursement cannot exceed the current state mileage reimbursement rate. A reimbursement-type purchase order may serve as a pre-authorization;

(b) Agency or individual public conveyance sellers; or

(c) Commercial establishments. For example, a client who needs gas for his car could receive a voucher that a gas station would honor. Through the purchase order/invoice system, the station would receive payment.

(3) Criteria for approval of vehicle repairs.

(a) A request for payment of an vehicle expense or repair can be approved if the following conditions are met:

(1) public transportation is not available;
(2) the agency cannot provide transportation and there are no other available resources; and
(3) the general condition of the vehicle justifies the cost of the repairs;

(b) The participant must provide documentation of:

(1) required insurance coverage for the vehicle if the request is for repair, tires, etc;
(2) a valid drivers license; and
(3) a registration showing the vehicle is in the participant's name.

Note: The vehicle may be co-owned if the participant's name is also on the registration. In the case of TANF-UP households, the registration may be in either both or one of the participant's names.

E. Medical/Dental Services

(1) Payment for medical/dental services must directly relate to VIEW activities or employment. These are medical/dental services not covered by the State Medical Assistance Plan (Medicaid). The need must be linked to needs identified on the Activity and Service Plan and the participant must be making satisfactory progress and regularly attending the component activities.

(2) Examples of medical/dental services are medical statements or other necessary medical verifications, dentures, glasses, orthopedic shoes, and other items required prior to entry into jobs, work-sites, or education/training components. Medical and mental health evaluations, not covered by Medicaid, needed by participants to determine whether they have a verified disability that affects program participation, the nature and severity of the disability and its effect on program participation, and the reasonable accommodations needed by the individual "directly" relate to VIEW activities or employment.

F. Program Participation and Work-Related Expenses

This service provides assistance to the participant with employment-related expenses or expenses incurred through participation in an approved VIEW component(s).

1) Criteria for Assessing Need

The ESW will use the following criteria when assessing the need for participation or employment-related expenses for the VIEW participant:

(a) The expense is necessary to enable the individual to participate in approved activities or employment;
(b) The need for expenses is clearly linked to the needs identified on the APR, Activity and Service Plan, or, in the case of assessment, in the case record; and
(c) The participant must be making satisfactory progress in the component/activity.

2) Participation expenses which are reimbursable include, but are not limited to:

(a) Fees for birth certificates;
(b) License fees;
(c) Registration/graduation fees;
(d) Picture ID costs;
(e) Uniforms or other clothing or shoes;
(f) Safety equipment and tools;
(g) Car repairs;

3) The ability of a local agency to pay participation expensed is based on the availability of funds and local resources. Therefore, each local agency is encouraged to develop additional policy and procedures for approving expenses.

4) One-Time Work Related Expenses - Payment of one-time expenses are allowable when needed to enable a participant to accept a job offer or maintain employment. One-time work expenses refer to non-recurring work expenses. Expenses which are allowable include, but are not limited to:

(a) purchase of an initial set of tools or equipment;
(b) uniforms;
(c) safety equipment
(d) professional fees and licensing require by the occupation; and
(e) automobile repairs and insurance.

G. VIEW Emergency Intervention Services

This service provides assistance during crisis situations which may affect the individual's participation in an activity or employment. Examples are emergency provisions of food/utilities, or other items necessary for the client to gain and or/keep employment or participate in other ESP activities. Automobile expenses are not covered under this section.

H. Local procurement/purchase procedures should be followed when purchasing medical/dental, work- related and emergency intervention supportive services.

7. PROGRAM COMPONENTS

VIEW program components include all work activities as well as job search/job readiness and education and training. All program components will be monitored monthly for attendance of scheduled hours. In addition, education and training activities will be monitored for satisfactory progress at periodic intervals.

Note: Participants assigned to a work activity for at least eight hours per week may also engage in educational and training activities.

A. Recipient Job Search

1) Job Search is a structured activity carried out over a defined time period when the participant must complete a specified number of job contacts per assignment to job search. The number of job contacts required must be determined on an individual basis and must be within a range established by each local department of social services. Both the agency range and the number of required contacts set on an individual basis should be determined based upon criteria, such as, other work or training activities in which the participant is involved, **language barriers, disability of the participant or household member, other barriers,** employment conditions within the locality, and availability of transportation or child care,

The maximum and minimum number of job search contacts must be included in the local agency's VIEW Annual Plan. **If a participant is unable to make the minimum number of job contacts listed in the VIEW Annual Plan as a result of a verified disability of the participant or participant's household member for whom the participant is responsible, the number of job search contacts required for that individual must be reduced below the minimum number listed on the Annual Plan as a reasonable accommodation.** The limits set may be changed as deemed necessary by the agency. Changes between VIEW Annual Plan submissions must be reported to the Regional TANF Consultant at the time of the change.

a) For the purpose of discussing progress of the job search, and ensuring that the contacts made are reflective of the participant's job skills, bi-weekly contact between the participant and the ESW is suggested. This practice may enhance the participation rate as early intervention by the ESW may benefit participants who may not be utilizing the full job search period to obtain employment.

(1) If the participant finds full-time employment, the job search will terminate;

(2) If the participant finds part-time employment, the ESW may decide whether to terminate the job search or require the individual to continue looking for full-time employment. The participant will be required to fully participate in activities designed to assist him in obtaining full-time employment.

b) Localities may determine how many employer contacts will be required for individuals who are already working part-time at the time they enter the VIEW program.

c) Local departments must work with public and private providers of job development/job placement services, such as VEC, Workforce Investment Act (WIA), and the Department of Economic Development to facilitate job development and job placement.

d) Participants who are not employed 30 hours or more at the time the Agreement of Personal Responsibility is signed must be placed into a 30-day job search. However, in the case of previous VIEW participants, the ESW may waive the up-front job search requirement and place the individual into a work activity.

e) A participant must accept a bona fide offer of employment. Participants who refuse to accept a bona fide offer of employment will be sanctioned.

f) A participant who has not found full-time employment 60 days prior to the end of his 24-month TANF time limitation must be placed in a job search component in conjunction with a work activity. This assignment will continue until the participant leaves TANF at the end of the two-year time period.

g) The up-front job search for a participant already enrolled in an education or training program may be waived if:

(1) the participant has been enrolled in the education and training (self-initiated) for at least one grading period; and

(2) the participant is satisfactorily enrolled and is meeting all requirements of the activity as defined in this chapter at Section 7., e, Post Secondary Education; and

(3) the education and training is related to a specific employment and/or occupation; and

(4) the participant must be able to complete the education or training within one year (12 months).

h) The up-front job search for a participant may be waived if the ESW determines the participant would benefit from immediate job skills training and is placed in a vocational education program. The participant must meet the eligibility criteria as defined in G, 2, page 45, of this section.

NOTE: When there is a refugee resettlement agency in the locality available to work with refugees, all work requirements for refugees required to participate in VIEW should be coordinated with that agency (or designated service provider). The resettlement agency, while maintaining communication with the local agency, must take the lead in assisting the refugee in the pursuit of self-sufficiency. The local agency case record must contain a Comprehensive Resettlement Plan (CRP) developed by the resettlement agency. Contracts between the Office of Newcomers Service and Refugee Resettlement Service Providers mandate these services.

It must be noted that this exception does not remove the requirement for a participant to be in a work activity between the 90th and 95th day from assignment to the queue. It does allow the ESW more flexibility to modify the job search requirement in order for the participant to find employment which will meet the work requirement and at the same time support the education or training program

requirements. If the education or training program includes a work activity such as work-study or practical training outside of a classroom for at least eight hours a week, the up-front job search may be waived.

2) Elements of the Job Search Component

When designing the Job Search component, the worker must incorporate the following elements based on the participant's needs:

a) techniques to help the participant identify good work attitudes, strengths and job skills. For any participant who lacks work history, the identification of transferable skills is extremely helpful.

b) job seeking skills to train the participant to successfully seek and obtain appropriate employment. This instruction/ guidance will enable participants to market themselves in a job interview and on the job. Subjects include, but are not limited to, development of job leads, job interviewing techniques, discussion of local labor market information, employer expectations, and completion of applications.

c) activities and opportunities for the participant to build self-esteem. A group setting is one of the best ways to build self-esteem. Brief periodic meetings may be held to allow the group members an opportunity to report progress, discuss problems and receive specific help with job search techniques.

d) use of the telephone as a primary employer contact to develop job leads and obtain interviews. Developing and writing a good phone script and practicing employer contacts will be an effective aid for the participant in job search.

3) Employer Contacts

a) The participant has the responsibility to arrange the required number of job interviews or submit applications/resumes. The ESW provides support and direction in these areas throughout the job search assignment. **If, however, the individual has a verified disability or language barrier that limits the ability to arrange for the required number of job contacts, the ESW must assist the individual in arranging for these contacts, reduce the number of contacts, or both.**

b) All participants must be registered with their nearest Virginia Employment Commission Office. Registration with the Virginia Employment Commission will be considered one employer contact.

c) All participants must report employer contacts in writing by completing the VIEW Job Search Form.

d) To qualify as an employer contact, four conditions must be met:

(1) The participant must present himself to an employer as being available for work;

(2) The employer must ordinarily employ persons in areas of work for which the participant is reasonably qualified by means of experience, training or ability;

(3) The participant cannot count the same employer more than once during a given job search period unless he applies for different positions; and

(4) Contacts with employers will only be in the form of face-to-face interviews or by submission of applications or resumes to businesses that are hiring.

4) Types of Job Search

There are two types of recipient job search, Group Job Search and Individual Job Search.

a) Group Job Search

Group job search includes methods such as Job Club or classroom instruction.

(1) Job Club is a tightly-structured, intensive program including instruction in job search methods, extensive use of the telephone to obtain job leads and interviews, peer support, direct monitoring of participant activities, and self-placement through job search.

(2) Classroom instruction provides the participant with sound skills for finding and keeping employment.

(3) The annual VIEW plans must describe whether the local department will utilize Job Club or other group methods.

(4) If a group process other than Job Club is used, the annual VIEW plan must describe that process.

(5) The participant in group job search is bound by the participation requirements of the specific group activity. The number of weeks and employer contacts required of a participant in group job search cannot be less than the requirements of individual job search.

b) Individual Job Search

Individual job search includes, but is not limited to, counseling on job seeking methods, information dissemination, application completion, and interview techniques. Included in the information sharing should be a discussion on "banking" months of TANF to save eligibility, building assets with the additional savings allowed through receipt of the enhanced earned income disregards, savings accounts disregards, and budgeting.

(1) The participant will report to the ESW during the job search period and must sign the VIEW Job Search Form attesting to the number of employer contacts made.

(2) The ESW may contact any employer listed on the VIEW Job Search Form to verify that the participant made a contact.

(3) Employer's signatures are not required on the Job Search form.

B. Job Readiness

The purpose of job readiness training is to prepare the participant for employment or program component participation and to provide pre-employment information, skills training, enhancement of abilities, and workplace behavior and attitudes training, which will enable him to be competitive and succeed in the labor market. Job readiness training may be offered before, in conjunction with **or after** the job search assignment. However, be aware that if full or part-time unsubsidized employment is not obtained, the participant must be placed into a work activity between the 90th and the 95th day after assignment to the queue.

1) Job readiness training includes activities to assist the participant in program participation by helping him recognize and overcome personal and family problems which may be a barrier to accomplishing his employment and training goals. Job readiness activities also prepare the participant for work by assuring that he is familiar with general work place expectations, work behaviors, and attitudes necessary to compete successfully in the labor market. Job readiness should also address the economic benefits of going to work. These include wages above the TANF grant, the enhanced earned income and savings disregards and the Federal Earned Income Tax Credit.

2) Job readiness topics may include, but are not limited to, communication skills training, life skills training, motivational training, problem solving skills, assertiveness, nutrition, money management, parenting skills, time management training and other activities that enhance specific work place expectations and behaviors.

3) Job readiness training may be conducted through workshops or seminars, as well as through one-on-one counseling.

C. Work Activities

1) Unsubsidized Employment

a) Unsubsidized employment is employment for which no government funds are used to directly subsidize the individual's salary. Full-time employment is employment of 30 hours per week or greater.

b) A participant employed full-time and earning at least minimum wage is not required to participate in any other VIEW assignment, but he must respond to all correspondence from the case manager and keep all scheduled appointments for redeterminations.

c) A participant employed full-time but earning less than minimum wage for each hour worked, must be assigned to job search at least every six months, but may be assigned more frequently as needed. He may be required to participate in other activities which may enhance employability if it does not interfere with his employment.

2) Part-time employment is employment of at least eight hours, but less than 30 hours per week. A participant working part-time must be assigned to job search at least every three months, but may be assigned more frequently as needed In addition:

a) A participant employed part-time must be assigned to a concurrent education or skills training or other program activity (i.e., CWEP, skills training, education). If the individual is unable to participate in concurrent education or skills training or other program activity because of a verified disability or **verified** disability of a household member, the individual cannot be required to participate in a concurrent activity.

b) A participant who is employed in an unsubsidized job at the time he signs the Agreement of Personal Responsibility will receive the TANF enhanced earned income disregards the following month. Enhanced disregards allow a participant to keep all earnings and TANF benefits so long as the participant's total household income does not exceed 100% of the federal poverty limit for the size of his household or 150% of the federal poverty level for TANF-UP households.

c) Eligible TANF recipients who are employed prior to referral to VIEW should be treated as a priority referral and served as soon as possible so that they may begin to receive the enhanced disregard.

d) Participants will receive the enhanced earned income disregard only after they have entered the VIEW program and signed the Agreement of Personal Responsibility.

e) A participant who obtains employment while in the VIEW program will receive the VIEW enhanced earned income disregard the month following the month of employment.

f) A participant who leaves TANF due to employment or who is employed when the TANF case is closed may be eligible for transitional benefits.

3) Self-employment

a) If a participant becomes self-employed, the participant must provide information and or documentation to show he is legitimately engaged in self-employment. The information could include, but is not limited to the following information: the kind of business, location, hours of operation, source of funding, prospective customer base, expected earnings, business license if applicable and lease or agreement if space is rented. The ESW is to review the information and verify the information when possible.

b) If a participant enters the VIEW program and states he is self-employed and has been self-employed for less than a year, the participant must provide the above

documentation including copies of rent receipts, appointment books or any other documentation that will show the participant is engaging in a legitimate business.

If the participant states he has been self-employed for a year or more, a copy of the previous year's income tax return will suffice. If the tax return is provided and the worker is satisfied with the documentation the up front job search can be waived if the participant meets the criteria in 7.A.

c) The ESW is to give the participant 60 days to establish the business. The hours spent establishing the business will count as unsubsidized employment. If the client states it will take less than 30 hours a week to establish the business, the participant must be placed in a second component. The ESW will do a monthly follow-up to see how the participant is progressing. The job follow-up can include, but is not limited, to requests for copies of receipts for items purchased to assist in starting the business or appointment books. The participant has to show earnings by the 61st day. If the participant is unable to show earnings, the ESW is to assign the participant to a work activity other than self-employment.

4) Job follow-up Retention and Upgrading

A) Job follow-up

The ESW should provide case management and services to a participant who becomes employed to assess job proficiencies and deficiencies, the need for additional skills and address potential problems with job retention.

1. Job follow-up is required for VIEW participants who become employed. A job follow-up is required monthly to track the participant's wages and hours of employment. Participants who obtain part-time employment are expected to continue active participation in the VIEW program. Monthly job follow-ups are also required for part-time employment. The purpose of the follow-up is to determine if the participant is still employed and to assist in resolving any problems the participant may be having on the job.

2. There are three possible outcomes to a job follow-up contact:

   a) The participant is employed;

   b) The participant has left employment;

   c) The ESW is unable to contact the participant or the participant does not respond to job follow-up contact.

3. A minimum of six monthly follow-up contacts must be made on all VIEW cases with employment. Job follow-up may be for up to 24 months, if the participant is employed throughout his VIEW participation. If a TANF case is closed before the six follow-ups are completed, the VIEW case must remain open to complete the six required contacts.

4. Job follow-up information is reported in the automated system as well as on the contact sheet for all outcomes.

5. As part of the job follow-up, the worker must verify on a monthly basis the employment hours. To receive credit for job entry hours the agency must verify that the individual remained employed at the scheduled work hours. Verification may consist of an ADAPT payment history inquiry, confirmation by the benefits worker, paystubs, wage forms, client statements or if necessary, the employer. Local agencies may determine which methods of verification will be used by workers. The ESW may contact the employer whenever a participant has left a job to determine why the participant left employment.

B. Retention and Upgrading

1. Local agencies are encouraged to meet face-to-face for the first three job follow-up contacts with participants who are employed. The purpose of the meeting is to verify continued employment and assist the participant with any problems on the job. At these meetings, the ESW will assess to determine the following:

   a. Any problems on the job which may result in the participant quitting or being fired from the job. **The worker may arrange for services to facilitate retention including disability screening, referral for in-depth evaluation, and/or assistance in arranging accommodations, as appropriate**;

   b. The participant's ability to cope with potential problems on the job;

   c. What skills are needed to keep the job or promotion;

   d. What better jobs may be available.

2. As part of the case management services the ESW may provide the following:

   a. Job retention counseling;

   b. Career exploration for better jobs;

   c. Referrals for additional training, education or CWEP;

   d. Resources for additional job search or job leads;

   e. Referrals for job coaching or mentoring;

   f. Work related workshops or seminars.

C. Reassessments must be conducted on all employed VIEW participants still open to TANF. For full-time employment, the reassessment must be conducted at least every six months. To record full-time employment in the automated system, the participant will be placed in "Pending-employed" for six months.

D. Participants who are part-time employed will be assigned to a concurrent activity **unless the individual or individual's household member for whom he is responsible has a verified disability that prevents participation in a concurrent activity**. For part-time employment, the reassessment will take place when the other component activity ends, or every six months, whichever occurs first. The ESW, in conjunction with the participant, will develop an Activity and Service Plan to address problem areas, or assist in obtaining a better paying job or promotion.

2) Subsidized Employment

Subsidized employment is employment in which government funds are used to directly subsidize the participant's wages. Subsidized employment is designed to provide training while the participant works on the job.

A. Full Employment Program (FEP)

(1) The Full Employment Program is a component in which a participant is placed in a public or private sector job and is paid an hourly wage for the work done. The Department of Social Services will pay the employer a predetermined, fixed stipend of $300 per month. TANF benefits are not paid to the participant during the time the employer is receiving a stipend except when the participant has not worked his scheduled hours for reasons beyond his control.

(2) The goal of FEP is for the employer to retain the participant at the completion of the training period. The placement should provide the participant the opportunity to gain work experience, develop job skills and work social skills. To increase the likelihood that the participant will be hired on a permanent basis for the job and to promote further FEP placements with the employer, the worker should make every effort necessary to insure that the participant's skills, abilities, and interests are a good match for the job description for the placement.

(3) VIEW participants who have been unsuccessful in obtaining unsubsidized employment by the 90th day after the referral to VIEW will be screened for placement with a FEP employer. Participants who are referred to VIEW and have accrued months on the current AECLOC (24-month VIEW participation clock) may be immediately placed in FEP.

(4) If the ESW **does not have** a **suitable** FEP **or** on-the-job training **placement available**, the participant will be immediately screened for **placement in** a **suitable** community work experience **site**.

Suitable is defined as follows:

(a) The worker has evaluated a good match between the participant's skills, abilities, and interests and the position description;

(b) The employer agrees to provide needed training to do the job; and

(c) The net monthly wages (take home pay) estimated by the employer exceed the amount of monthly TANF benefits the participant was last paid. The ESW can obtain the most recent TANF payment amount by accessing the participant's TANF payment history in ADAPT or by contacting the EW.

B. Criteria for **the** FEP **Participant**

(1) The participant must be able to perform the **minimum requirements for entry into** the job **and be** capable of performing the duties of the job with the provision of training by the employer **at the end of the placement**.

(2) The supportive services needed by the participant can be provided.

(3) The participant **may participate in FEP more than one time but must** not **have** been previously sanctioned while assigned to a FEP placement.

(4) A participant cannot **enter** a FEP placement if he is in the process of being referred for a sanction, or **if the case** is currently under sanction, unless the minimum period for that sanction has elapsed.

(5) **More than one participant may be screened and referred to an employer for an interview for the FEP positions.**

(a) The ESW should complete the VIEW Referral to Work Site form (032-02-300) to be given to each referred participant to take to the job interview.

(b) After the employer indicates his selection on the participant's VIEW Referral to Work Site form (032-02-300) and signs the Full Employment Agreement (032-02-309) for the participant's placement, the participant is to be assigned to the FEP position on the Activity and Service Plan (032-02-302) and in ESPAS.

(c) The ESW will complete the Full Employment Program Communication Form (032-03-655) and forward it to the EW as notification of a FEP placement. This form is available on the intranet at http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi and can be completed online and emailed to the EW. The eligibility worker is responsible for updating ADAPT to pay the employer's stipend in place of the TANF grant as indicated on the FEP Communication Form (032-02-655) from the ESW.

(6) If a participant does not attend the employer interview, the ESW **must contact the participant to determine if good cause for the missed interview exists. The VIEW Notice of Sanction/Termination (032-02-307) can be used for the purpose of contacting the participant. If the participant does not respond and/or good cause does not exist, the ESW will notify the EW, in writing, to send an Advance Notice of Proposed Action (032-03-018) to sanction the participant.**

(7) Only one person in a TANF household can be in FEP at any time.

(8) If a participant transfers to another locality, the FEP Agreement will be terminated.

C. Criteria for the FEP Employer

(1) **FEP placements may be established in public or private sector employment.**

(2) The employer must offer **employment of not less than 20 hours per week** at minimum wage or greater. **The position offered must meet the definition of a suitable placement, the amount of TANF assistance.** Wages paid to FEP participants must be the same rate as paid to other employees who perform the same work and who have similar experience and tenure.

(3) The employer must pay Virginia Unemployment Insurance tax for its employees. **FEP participants may qualify for unemployment benefits if not retained as a permanent employee. Eligibility for such benefits must be determined by the Virginia Employment Commission on an individual case basis. Former FEP participants not hired permanently should be encouraged to apply.**

(4) The employer must offer a position in conformity with section 3304 (a) (5) of the federal Unemployment Tax Act which requires the following:

(a) The job offered cannot be available as a result of a strike or labor dispute;

(b) The job cannot require the employee to join, nor prohibit the employee from joining, a labor organization;

(c) The FEP participant cannot be used to displace regular workers.

(5) The employer must agree to pay the participant through his payroll system. The employer agrees to pay his share of the premiums for Social Security contributions, unemployment insurance, and worker's compensation related to the participant's wages.

(6) The employer must **sign a VIEW Full Employment Agreement (032-02-309) for each participant he employs in a FEP placement. The Full Employment Agreement includes:**

(a) The amount of the employer stipend;

(b) The skills and equipment operations the participant will learn;

(c) The hourly wage, number of hours per week the participant is expected to work, and estimated net monthly wages.

(d) The duration of the placement and the conditions under which it will end;

(e) Conditions under which the employer must repay FEP reimbursements;

(f) Provisions regarding termination of the FEP Agreement; and

(g) Responsibility of the employer to report when a FEP participant works less than an average of 20 hours per week. If the agreement is not in effect for a full calendar month, the participant must have worked an average of at least 20 hours per week for the number of full weeks the FEP agreement was in effect during the month.

<u>Example 1</u> – A participant begins employment on the July 13. Since the agreement is in effect for less than a full month, the ESW will determine the average number of hours worked by dividing the total number of hours worked by the number of full weeks (2). If the participant worked 48 hours during the period from July 13 -31, the average number of hours worked per week is 24 (48/2=24).

<u>Example 2</u> – A participant is employed for a full month. The employer reports that the participant worked for a total of 84 hours during the month. The average number of hours worked per week during the month was 21 (84/4=21).

(6) The employer must **also** agree to the following:

(a) Provide on-the-job training to the degree necessary for participants to perform the duties of the job;

(b) Provide sick leave, holiday, and vacation benefits to participants to the same extent provided to other employees performing the same work and having similar experience and tenure;

(c) Maintain healthy, safe working conditions at or above levels generally acceptable in the industry and no less than those in which other employees perform the same work;

(d) Agree not to discriminate against any person, including program participants, on the basis of race, color, sex, national origin, religion, age, or disability.

(7) In addition to completing the VIEW Full Employment Agreement, the ESW will require the employer to fill out the Request for Taxpayer Identification Number and Certification Form (**IRS** Form W-9). **File the completed form in the case record.**

D. **Payments to the Employer**

The employer stipend is a reimbursement for participation in FEP. The stipend is issued for each month of FEP participation.

(1) Two types of payments are made to an employer.

(**a**) **Stipend -** The employer **stipend is a predetermined, fixed amount of $300 paid monthly. Stipends are paid beginning the month after the participant enters a FEP placement. FEP stipends are issued for six consecutive months, unless notified by the VIEW worker to discontinue the payments. In no instance are stipends to be paid for more than six months.**

The ESW is responsible for notifying the eligibility worker within five working days of making a FEP placement. Upon receipt of notification from the ESW that the participant has entered a FEP placement, the eligibility worker will complete the required ADAPT screens to stop the participant's TANF payments and start the employer's stipend payments. The employer's stipend will be mailed on or about the first day of each month.

Using the Full Employment Program Communication Form (032-03-655), the ESW must notify the EW when a FEP placement is made and when changes occur during the placement including the need to issue a supplemental TANF payment, issue a replacement check to the employer, terminate the FEP placement, or reinstate TANF benefits upon completion of the placement.

(b) Bonus - The bonus is a predetermined, fixed amount of $500 paid to the employer:

(1) If the participant is hired on a permanent basis at any time during the six-month placement period, or

(2) Within 30 calendar days after the placement has ended.

(**2**) Limitations on **Payments to the** Employer

(a) No employer will be paid a **stipend** unless the local department of social services has a signed and completed VIEW Full Employment Agreement.

(b) The employer will receive a **stipend** only **when the participant was paid for at least 20 hours per week or an average of at least 20 hours for the number of full weeks the agreement was in effect during that month**. **The EW must be notified within five days that the 20 hour minimum was not met and whether a supplemental payment should be issued to the FEP participant.**

(c) The employer may receive one bonus payment per VIEW participant.

(d) A bonus payment cannot be issued in the same month as a monthly stipend. For example, if the last stipend payment is issued in October, the bonus will be issued in November.

E. FEP Participation

(1) The ESW will track participation by conducting a FEP follow-up by the fifth day of each month for the previous month. This is to be accomplished by contact with the employer to verify that the participant is satisfactorily continuing in the placement and is meeting the minimum requirements for the job, including working at least 20 hours per week or an average of at least 20 hours during a month. The ESW should also discuss any concerns the employer may have regarding the participant's performance or attendance. Hours of participation will be verified by the employer's statement. In any case, monthly contact with the employer should be part of the follow-up process to insure that the employer's needs are being met, to maintain rapport with the employer, and to insure the likelihood of future FEP placements.

The employer contact may be written or verbal. In either case, the ESW must obtain the information requested on the Attendance/Performance Rating Sheet (032-03-305). If the information is to be obtained in writing, the ESW may provide the employer with a six-month supply of the form at the time the FEP Agreement is signed. If the contact is verbal, the ESW should record the information obtained on the Attendance/Performance Rating Sheet.

If the employer recommends the termination of the Full Employment placement, the ESW will document the reasons in the contact log for the recommendation, determine if there are grounds for sanctioning the participant, and, if grounds exist for sanctioning, send the participant a VIEW Notice of Sanction/Termination.

If grounds for sanctioning do not exist, the ESW will reassign the participant to another work activity.

(2) ADAPT will automatically issue the stipend through month six unless cancelled by the EW. If the ESW determines that the employer was not entitled to the stipend received for the prior month, the ESW will inform the employer of his responsibility to return the check. The employer is ineligible for a stipend for any month in which the FEP participant did not work an average of at least 20 hours per week during the month. The stipend or, if the check has been cashed, a check issued by the employer should be sent to the Virginia Department of Social Services, Division of Financial Management, P. O. Box 10209, Richmond, VA 23240-0209. If a check from the employer is used to repay the stipend the employer should reference the participant and the case number on the check. If the employer does not return the check, the local department of social services may pursue civil action through their city or county attorney's office.

(3) The participant may work additional hours beyond the number listed on the VIEW Full Employment Agreement (032-02-309). Overtime hours can be required by the employer, but only to the extent that they are required of other employees with similar positions and experience.

* 45 CFR 261.70 (a) (1) (2)(b)

(4) Whenever possible, FEP placements should begin at the first of the month. This will allow the FEP participant to receive maximum wages to prepare financially for the suspension of TANF benefits during the FEP placement. Under no circumstances can a placement begin during the last 11 days of the month. At a minimum, the participant must have worked at least one full week for at least 20 hours for the employer to qualify for a stipend.

For example, a participant's placement begins on April 19. The employer may qualify for a stipend for each placement month (April through September). Stipends are paid on or about the first day of the month following the month of participation, e.g., May through October in this example. If the participant does not work at least one full week for a minimum of 20 hours, the employer will not receive a stipend for participation in April.

F. FEP Employer Outreach

(1) VIEW case managers should work through existing employer networks (workforce investment boards, chambers of commerce, faith-based organizations, local business organizations, etc.) in order to locate employers who are interested in accepting a FEP placement. The ESW will schedule an interview with any employer who expresses an interest.

(2) The ESW will explain FEP to the employer and the advantages of entering into a FEP agreement. In addition to the reimbursement to the employer, the ESW should discuss Work Opportunity Tax Credits, the supportive services VIEW offers to help the participant be successful on the job, and the case management services in place to support the participant's efforts.

(3) The employer should complete a Work Site Position form (032-02-306). The information obtained from this form will be used to screen participants for the FEP position(s).

(4) If a regular employee at the FEP place of business feels that he/she has been displaced and the situation cannot be handled satisfactorily through the employer's grievance process, the Virginia Department of Social Services will act as a mediator. The employer should be informed that the form can also be obtained at the local social services agency employment services department. Once the form is completed, it is to be given to the local agency's employment services department. The employment services department will send the form and all pertinent information to Virginia Department of Social Services, **7 North Eighth Street,** TANF Unit, Richmond, Virginia 23219-3301.

(5) The employer should agree to contact the ESW as soon as a FEP placement position is available.

G. FEP Assignment

(1) Once the agreement is signed, the ESW will meet with the participant to develop a new **VIEW/TWA/Transitional** Activity and Service Plan **(032-02-302)** and to arrange needed supportive services. At a minimum, the Plan must include:

(a) Name and phone number of the FEP supervisor;

(b) Place of employment;

(c) Days and hours of work, and hourly pay the participant will receive;

(d) Notice that the participant must call the FEP **placement** supervisor and the ESW if the participant will be absent from work;

(f) An explanation that the participant's monthly TANF benefits will be stopped for the duration of the placement, except when the participant was unable to complete the scheduled hours for a reason beyond his control, and that wages received from the FEP employer will be counted in Food Stamps.

(g) Notice that the participant has the right to appeal **the suspension** of the participant 's TANF benefits; and

(2) The ESW will explain the benefits of the Advance Earned Income Tax Credit to the participant.

(3) The ESW should assist each participant in applying with the employer to receive a monthly Advance Earned Income Tax Credit payment.

H. Supplemental Payments to the FEP Participant

A supplemental payment issued to the participant if he works less than an average of 20 hours per week, with good cause. Good cause includes circumstances beyond the participant's control, such as but not limited to, loss of child care, transportation, illness of the FEP participant or a family member, or another emergency situation. Good cause is determined by the ESW.

The supplemental payment to the participant will be calculated in ADAPT based upon gross earnings received in the month being supplemented.

3. Community Work Experience

A. Purpose
Community work experience (CWEP) is a placement in which a participant works for his benefits in a public or private non-profit agency in order to improve his skills and serve a public function. The purpose of CWEP is to help prepare participants to obtain unsubsidized employment. A participant who is assigned to CWEP for more than three months should participate in a concurrent job search.

B. Eligibility Criteria
A participant who is unable to obtain unsubsidized employment, subsidized employment, or another work activity will be placed into a six month community work experience position.

C. Calculation of Work hours

The number of weekly work hours will be calculated in the following manner:

(1) **Combine the total TANF dollar amount with the food stamp amount received and divide by the federal minimum wage. The result equals the required monthly hours to participate in CWEP.** Divide the result by 4.3 to determine the required hours per week for CWEP participation. Include in the calculation only the benefits belonging to the TANF household. Food stamps received by individuals in the household who are not included in the TANF grant will not be counted in the calculation. For TANF-UP cases, the entire benefit amount, combined total dollar amount of TANF and food stamp benefits, available in a CWEP calculation will be used for each participant. If both mandatory TANF-UP participants are placed in CWEP, they both will be required to participate the required number of calculated hours. For example, if the calculation requires 25 hours of participation, each individual will be in CWEP for 25 hours a week, for a total household participation of 50 hours per week.

(2) No participant will be required to work more than 32 hours a week.

(3) The calculation of the hours to be worked weekly will be made every six months
by the ESW and when there is a change in the assistance unit.

Note: If the hours calculated for participation in CWEP do not meet the federal participation minimum requirement, the participant will be assigned to a concurrent work activity **unless the individual or the individual's household member for whom the individual is responsible has a verified disability that prevents participation in a concurrent activity**. State code mandates the method by which CWEP hours are calculated.*

D. Requirements for CWEP

(1) Each VIEW participant in the TANF case must work the required hours based on the calculations described above. The VIEW Referral to Work Site Form is used to refer participants to a work site for an initial interview.

(2) The time required to travel to and from the work site will not be counted as hours worked.

(3) A participant may receive education and skills training during the participant's initial six months of participation in CWEP. A maximum of eight hours a week of the required CWEP hours can be used to participate in educational, training, job search, and/or job readiness activities.

(4) After the initial six months of participation in CWEP, the number of hours a participant works can be reduced to allow increased participation in education/or skills training to further the participant's employability, or the participant can be assigned to another CWEP site, if appropriate.

E. CWEP Work Site Development

(1) The ESW or work site supervisor will complete a Work Site Position Form which lists the job duties and requirements for each CWEP position.

* Code of Virginia 63.2 - 608

(2) The work site supervisor will be given a written explanation of his responsibilities in supervising a CWEP participant.

The supervisor's responsibilities should include, but are not limited to the following:

(a) Provide supervision and training as agreed upon in the Community Work Site Agreement (032-02-308), as well as supplies, tools and work space needed to do the job.
(b) Each month, complete the Attendance/Performance Rating Sheet (032-02-305) and rate the participant's performance.
(c) Notify the worker if the participant does not show up for work, is consistently out of compliance with the rules of the work site, or if there are any work-related accidents.
(d) Conform to all rules regarding job displacement and secular activities.
(e) Explain the employer's rules of the work place to the participant.
(f) Ensure that reasonable accommodations are provided at the work site, if they are required by the Activity and Service Plan.

(3) The ESW should attempt to develop work sites which serve a useful public function; examples would be health care facilities, social services, charitable and environmental protection organizations, education, urban and rural development organizations, recreation, public facilities, public safety and child care.

F. Duration of Community Work Experience

(1) The participant's initial assignment to CWEP must be for a period of six months. Any subsequent assignments must be for a minimum of three months.

(2) There is no limitation on the number of a participant's assignments to the community work experience component.

G. Work Site Monitoring

(1) Each month, the supervisor must complete the Attendance/Performance Rating Sheet. The days and hours the participant worked must be reported as well as the supervisor's opinion regarding continuation of the participant at the CWEP site. If the supervisor recommends removal, he must document the reason.

(2) Every three months, the worker must conduct a reassessment with the

participant. Prior to the reassessment, the worker must contact the work site supervisor to determine if the participant is satisfactorily performing the duties of the job. If the participant is not satisfactorily performing the duties of the job, the worker will, with the supervisor's assistance:

(a) identify the duties which are not being satisfactorily performed;

(b) determine why the duties are not being satisfactorily performed; and

(c) identify ways to improve the participant's performance.

(3) The worker will remove the participant from the CWEP site for misconduct or violation of the employer's rules as stipulated in the work site agreement.

H. Limitations

(1) The participant will not be required to use their public assistance income or personal resources to pay costs incurred while participating.

(2) A CWEP participant cannot displace persons currently assigned to established unfilled positions. The participant must not perform tasks which would have been undertaken by current employees or which would have the effect of reducing the work hours of paid employees. A participant cannot be placed in the position of a worker who is on sick leave, annual leave, leave without pay, or any other granted leave with or without pay; that would be an act of displacement. **For more information on displacement of regular employees see page 30 (c), item (2).**

(3) The participant will not be assigned to work sites which are totally involved in political, electoral or partisan activities. The participant may be assigned to sites developed in the office of an elected official; however, the participant cannot be required to be engaged in political, electoral, election or partisan activities.

(4) Work sites must provide reasonable working conditions and must not violate Federal, State or local health and safety standards. Though the ESW does not monitor working conditions, if the ESW has knowledge of violations, he should take action to terminate the agreement or bring the work site into compliance.

(5) The work sites will not be developed in response to, or in any way be associated with, the existence of a strike, lockout, or other bona fide labor dispute, or violate any existing labor agreement between employers and employees.

(6) The ESW should take into consideration the prior training, experience and skills of a participant when making CWEP assignments. The ESW may

consider assignments which primarily address work behaviors and habits necessary to become employed.

(7) The ESW will not assign the participant to projects which require unreasonable travel time or which require the participant to remain away from his home overnight without his consent. A round trip in excess of two hours from the participant's home is considered an unreasonable distance in any situation. The transportation time determined reasonable should be relative to the number of hours being worked in a day.

(8) Charitable Choice* - When a participant is assigned by the ESW to receive services from a faith-based organization, the participant has the right to object to the services provided by the faith-based organization. If a participant objects to the services, the worker must provide him/her with services from any alternative provider that will give the same value of services. See Chapter 1000, page 70 and Appendix B, Page 7.

I. Workers' Compensation

VIEW participants not eligible for Medicaid who are participating in the CWEP component are deemed to be employees of the Commonwealth for purposes of the Workers' Compensation Act. Such persons shall be eligible for reimbursement for medical costs if the injury is covered under the Workers' Compensation Act, but shall not be eligible to receive weekly compensation.**

(1) If a claim is accepted, Workers' Compensation will pay medical costs for services provided by a panel physician as authorized by the Workers' Compensation Act for covered injuries only.

(a) The VIEW participant should notify her medical provider that she is seeking attention for a workers' compensation claim and request medical providers to submit medical reports and bills for covered injuries to Managed Care Innovations (MCI).

(b) MCI will review the medical report, confirm the treatment is related to a covered injury and remit payment to the medical provider for services of the covered injury.

(2) Local agencies who assign VIEW participants not eligible for Medicaid to CWEP placements must follow these steps to ensure proper coverage in the event of an accident on the job.

(a) Submit the name, case number (legacy number and ADAPT case number), and Begin and End date for the individual assigned to CWEP. The CWEP Placements Without Medicaid Coverage form must be completed online at:
http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms/view.cgi

* Public Law 104-193
** 2005 Acts of Assembly, HB2462

(b) Establish a panel of at least three physicians who agree to provide care in accordance with the requirements of the Workers' Compensation Act. A panel of three physicians must be provided in writing to participants who notify their supervisor that they wish to file a Workmen's Compensation claim. The form can be located at http://www.covwc.com/physicianform.php .

For assistance in establishing a panel access the Preferred Provider Organization (PPO) website; http://www.dhrm.virginia.gov. From the left hand side of the screen select, Workers Comp and Safety and then from the right hand side of the screen select Workers' Compensation PPO Network.

(3) The CWEP work site supervisor must immediately complete an Employer's Accident Report form when an accident occurs. This form can be accessed on line at http://www.vwc.state.va.us/printable/form3_ear.pdf .

(a) The supervisor must investigate the claim, document work place hazards/conditions involved in accident and complete 'Employer's Accident Report' based upon his investigation.

(b) This form is a Virginia Workers' Compensation Commission form and is required to be submitted on tan paper.

(c) List the employer as CWEP and the agency number as 997.

(d) The original form must be sent to:
Managed Care Innovations
PO Box 1140
Richmond, VA 23218.

A copy must also be sent to:
Virginia Department of Social Services
Division of Benefit Programs
Economic Assistance and Employment Unit
Attn: CWEP Placements without Medicaid Coverage
7 North Eight Street
Richmond, VA 23219-3301

(4) The Economic Assistance and Employment Unit of the Division of Benefit Programs at VDSS must:

(a) Maintain case names and numbers received from local agencies and provide these names to the Department of Human Resource Management (DHRM).

(b) Pay premiums per individual in a CWEP placement to DHRM.

(c) Maintain a file of all Employers' Accident Reports.

(d) Notify the local department of social services of the disposition of the Workmen's Compensation application.

(5) The Department of Human Resource Management (DHRM)'s claims administrator Managed Care Innovations:

(a) Will notify VDSS when a claim for Workmen's Compensation has been filed.

(b) Contact both the injured worker and the work site supervisor for information about the accident.

(c) Notify both the injured worker and VDSS home office of the disposition of the claim.

(6) The VIEW Participant without Medicaid in a CWEP placement:

(a) Should immediately notify the work site supervisor in writing of workplace accident facts.

(b) Inform the doctor when the visit is necessitated by an injury at work and that a claim for Workmen's Compensation has been filed. The doctor should submit a medical report and bills to MCI.

(7) Workers' Compensation Hearings

(a) When a request for Workers' Compensation has been denied, the VIEW participant may request a hearing. The request must be made to the Virginia Workers' Compensation Commission.

(b) The Office of the Attorney General represents the state on cases in litigation. Managed Care Innovations will manage and coordinate the defense of the case with the Office of the Attorney General. Should any witnesses or supervisory testimony be required, the Office of the Attorney General will provide immediate notification.

4) On the Job Training or Other Subsidized Training

A. The following are other examples of subsidized employment or on-the-job training to be used as a work activity in the VIEW Program:

(1) On-the-job training offered through the **WIA** Program;

(2) Work study offered through a community college or a four year college program;

(3) Apprenticeship programs;

(4) Paid internships offered by colleges or training providers in which the participant receives a wage or stipend for working and receiving training while on the job; or

(5) Sheltered workshop employment,

(6) Unpaid practicum offered through a college program;

(7) Unpaid internships through a college program or training program.

B. If these activities are offered 30 hours per week or **more**, the participant will not be required to participate in another concurrent activity. If the hours are **less than** 30 per week the participant must be assigned to another concurrent activity **unless the individual or the individual's household member for whom the participant is responsible has a verified disability that prevents the individual from participating in a concurrent activity.**

C. Unpaid on the job training is usually provided in conjunction with an education or skills training program. Training of this type must always be offered with a specific employer to be considered a work activity in VIEW. To record unpaid training that occurs in conjunction with an education or training program, separate the hours of classroom instruction from the unpaid training. Record the classroom training as either skills training or education, with an appropriate component descriptor. Record the hours of unpaid training as component 19 with a component descriptor of 999.

D. Education Below the Post-Secondary Level

1) Educational Activities

a) Participants assigned to this component will be those identified as needing certain educational activities to become ready for further education, training or job entry. Participation in education programs below the Post-Secondary level will be limited to one year. Instruction in these activities may be provided in nontraditional educational settings, e.g., accredited correspondence or interactive satellite transmitted courses. The necessary verification and documentation is still required.

b) Educational activities are defined as basic and remedial education that will provide an individual with a basic literacy level equivalent to at least grade 8.9.

(1) education designed to prepare individual for a high school degree or its equivalent (GED).

(2) Community based literacy programs that provide education activities for individuals who require remediation to acquire a grade 8.9 literacy level.

(3) Education in English proficiency (ESL) for a recipient who does not understand, speak, read or write the English language.

2) Limitations

a) Educational activities can only be provided in conjunction with a work activity during the participant's two year time period.

b) Participants who enroll into education prior to coming into VIEW will be required to participate in a concurrent work activity

c) Participants will not be assigned to an educational activity which cannot be reasonably completed within one year of participation.

3) Monitoring Satisfactory Attendance and Progress

a) Participants in educational activities will be monitored to assure satisfactory progress. Satisfactory progress is used to periodically assess the continued appropriateness of the educational assignment.

b) Satisfactory progress is defined as one grade level increase for every three months of participation in an educational component.

(1) If a participant, during the first three months of participation, has not shown a grade level change, **the worker and instructor will discuss whether the individual may have a cognitive, developmental, learning or other disability that is impeding the individual's progress. If it appears to the worker or instructor that there is a possibility that this is the case, the participant will be referred for a learning disability screening, and if screening indicates that the individual is likely to have a learning or other disability, the individual will be referred for an in-depth evaluation. If the results of this evaluation indicate that the individual has a disability and there are accommodations that could enable the individual to make satisfactory progress in the program, these accommodations must be advocated for by the worker and provided for by the educational provider.**

If neither the worker nor the instructor believes there is any likelihood that the individual has a disability that is impeding

progress, or an individual is referred for screening, and if appropriate, an evaluation, and screening and evaluation rule out the possibility of a disability, the worker and the instructor will discuss whether the participant should be placed in another activity which may better facilitate the participant's job readiness. This discussion should also take place if the participant chooses not to undergo screening and evaluation. The results of this discussion will be documented in the worker's contact log.

(2) No participant will be allowed to continue in an educational component if there has not been a grade level change after the initial six months of participation in the component.

c) Copies of attendance records, certificates, diplomas, grades and, where applicable, competencies achieved will be examined and maintained in the participant's record at the local social service agency.

d) Documentation of progress must be made every three months.

e) Instructors must complete the Attendance/Performance Rating Sheet on a monthly basis to track satisfactory participation.

E. Post-Secondary Education

1) Post-Secondary education is formal instruction at an institution of higher education or vocational school leading to the attainment of a certificate, an associate degree or a baccalaureate degree. Instruction in these activities may be provided in nontraditional educational settings, e.g., accredited correspondence or interactive satellite transmitted courses. The necessary verification and documentation is still required.

a) Limitations

(1) Post-secondary activities will be limited to a period of twenty-four months. Participants will not be assigned to an educational activity which cannot be reasonably completed within a twenty-four month period of participation. **The ESW must advocate for immediate accommodations from the education provider if needed as a result of a verified disability or as a result of the verified disability of the household member.**

(2) The post-secondary education must be related to the jobs which are available in the community or are projected to become available in the community.

(3) Participants referred to post-secondary activities, with the exception of participants enrolling into certificate programs, must have a high school diploma or GED prior to beginning the curriculum.

(4) Participants with a Certificate, Associate or Baccalaureate degree will not be offered additional post-secondary education. These participants are considered to have the education and ability needed to obtain employment.

(5) Reimbursement for tuition, books and fees will be made for only the twenty-four month period unless the participant has been granted a hardship exception or participants where the extension of benefits for up to one year will enable the participant to complete employment-related education. The participant must apply for all available sources of funding including Pell grants, scholarships, work study or other sources.

(6) Participants who enroll into education prior to coming into VIEW will be required to participate in a concurrent work activity and meet the requirements of the program.

2) Monitoring Satisfactory Progress in Post-Secondary Education

a) Participants in educational activities will be monitored to assure satisfactory progress. Satisfactory progress is used to periodically assess the continued appropriateness of the educational assignment. Satisfactory progress is defined as maintaining a "C" average for each grading period and completing the number of credits needed each grading period to successfully complete the degree in the two year time period.

b) The ESW must obtain copies of attendance records, certificate, diplomas, and grades, all of which must be maintained in the case record. Where applicable, competencies will be examined and maintained in the participant's record at the local social service agency.

c) The ESW must make proper documentation of the participant's progress at a time consistent with the institution's schedule, e.g. at the end of a semester or quarter.

d) If a participant is not making satisfactory progress, the worker will meet with the participant to discuss the reasons. **During this meeting, the worker and participant will discuss whether the individual may have a cognitive, developmental, learning or other disability that is impeding the individual's progress. If it appears to the worker or participant that there is a possibility that this is the case, the participant will be screened for a learning disability screening, and if the screening indicates that the individual is likely to have a learning or other disability, the individual will be referred for an in-depth evaluation. If the results of this evaluation indicate that the individual has a disability and there are accommodations that could enable the individual to make satisfactory progress in the program, these accommodations must be advocated for by the worker.**

If neither the worker nor the participant believes there is any likelihood that the individual has a disability that is impeding progress, or an individual is referred for screening, and if appropriate, an evaluation, and screening and evaluation rule out the possibility of a disability, the worker will determine whether to sanction or if the participant should be placed in another activity

which may better facilitate the participant's job readiness.

e) **If a participant is not making satisfactory progress for two or more grading periods, and disability has been ruled out as reason for lack of satisfactory progress, or the participant chooses not to participate in screening and assessment to determine whether a disability is a reason for lack of satisfactory progress, the participant must be reassigned to a different component or sanctioned.**

If the person has a verified disability and there are reasonable accommodations that would help the individual make progress in the program, they must be advocated for by the ESW and provided by the education institution. An individual cannot be reassigned to another component on the basis that he or she has not made satisfactory progress until the individual fails to make satisfactory progress after these accommodations are provided or necessary accommodations, as determined by the educational provider, are not provided by the educational provider.

f) Providers must complete an Attendance/Performance Rating Sheet each month to track satisfactory participation.

F. Self-Initiated Education

1) Self-initiated education is education initiated by the participant, and in which the participant is enrolled at the time of assessment. For purposes of this component, the education must be in an institution of higher education that results in an associate or baccalaureate degree or certificate.
2) All participants enrolled in educational activities prior to coming into VIEW will be required to participate in concurrent work activities.
3) The following procedures will be used by the ESW to approve self-initiated education:

a) All recipients who have self-initiated in education must have their education approved by the ESW in order to pay for supportive services.

b) The ESW will complete an assessment form, an Agreement of Personal Responsibility and an Activity and Service Plan for each participant prior to approving the self-initiated education.

c) If child care is needed, the ESW will notify the child care staff of the approval or disapproval of the self-initiated education. Child care staff will not authorize child care in cases in which the ESW has disapproved the self-initiated education.

d) The education must be for jobs available in the community or are projected to become available in the community.

e) Participants, for whom grades have been issued, must have a "C" average in order to have their self-initiated education approved.

f) If the participant is enrolled in education which will require more than two years to reasonably complete, the participant may be allowed to continue in the activity if they are satisfactorily progressing. However, the participant will not be eligible for a

Hardship Exception based on the extension of education for up to one year beyond the two-year time period.

g) The participant must also meet the conditions previously described in the sections on limitations for and monitoring of post-secondary education.

G. Jobs Skills Training

Jobs Skills Training is training in technical skills and required knowledge specific to an occupational area in the labor market. The Governor's Employment and Training Department **may** facilitate job training.

1) Limitations

a) The choice of occupational skills training offered may vary in each locality, depending upon local labor market conditions. However, skills training must be related to the types of jobs that are available or are projected to become available in the community.

b) Prior to entering job skills training, participants must meet any educational or technical requirements of the occupation for which they are receiving skills training or be enrolled in an activity to meet the requirements.

c) Participants, who enroll into job skills training prior to coming into VIEW, will be required to participate in a concurrent work activity.

d) Participants will not be assigned to skills training which requires more than twenty-four months to complete. An extension for a second year of training will only be made if the participant can be expected to complete the training during the second year, had made satisfactory progress during the first year and was enrolled full-time.

e) A participant who has previously successfully completed a skills training component will not be offered additional skills training unless he meets one of the following conditions:

(1) There are no jobs in the community for the occupation in which the participant completed training, nor are there jobs projected in the future for this occupation; or

(2) The participant needs additional training in the occupation in order to become licensed or certified, and certification or license is needed to obtain a job in the occupation.

(3) Every effort should be made to work with a participant who has already successfully completed a skills training component to find employment in the occupation for which he has already trained.

f) A participant who has been enrolled in no more than two skills training components in the VIEW Program, and who did not successfully complete due to reasons solely within his control, will not be assigned to another skills training component.

2) Vocational Education *

If the worker determines the participant is in need of and would benefit from immediate job skills training, the participant, with his consent, may be placed in a vocational education program rather than up-front job search. The program must be targeted to skills required for particular employment opportunities in the area.

a. A participant must meet two or more of the following qualifying criteria:
   1. have less than a high school education;
   2. have reading or math skills at or below the eighth grade level;
   3. have not retained a job for a period of at least six consecutive months during the prior two years;
   4. is in a substance abuse treatment program or receiving services through a family violence treatment program.

b. The vocational education program must meet a minimum of thirty hours per week.

c. Prior to placing the participant in the vocational education program, a potential employer must be identified. A written statement from the employer must be obtained stating the participant will be placed, if qualified and the employer has an opening in a job at the conclusion of the program.

d. The participant will be required to work an average of at least eight hours per week in unsubsidized employment or CWEP in conjunction with the vocational education program, **unless the individual or household member for whom the participant is responsible has a verified disability that prevents the individual from participating in a concurrent activity.**

e. The participant will be allowed to remain in the program for as long as the agency determines he is progressing satisfactorily. The program cannot exceed the VIEW two-year time period.

3) Monitoring Satisfactory Progress in Job Skills Training

a) Satisfactory Progress is measured according to the attendance and satisfactory progress policies developed by the training provider and approved by the local social service agency.

b) The ESW will monitor the participant to assure that he is making satisfactory progress. Satisfactory progress is used to assess the continued appropriateness of the skills training.

* Code of Virginia 63.1-133.49

c) The ESW will examine and maintain in the participant's case record, copies of attendance records, certificates, diplomas, grades and where applicable, competencies.

d) Documentation of satisfactory progress must be made every three months. The worker will contact the instructor to determine if the participant is satisfactorily progressing and to determine if the participant will successfully complete within the two-year time period. Documentation of these discussions should be kept in the contact log.

e) If a participant is not making satisfactory progress, the ESW will meet with the participant to discuss the lack of progress. A determination will be made as to whether the participant should continue in the component or be assigned to another component. **If the participant has a verified disability and there are reasonable accommodations that would help the individual progress in the program, the ESW will work with the skills training provider to put such accommodations in place.**

f) Participants who have not made satisfactory progress after six months of participation in a skills training component should be reassigned to another component which he can be expected to satisfactorily complete.

g) Training providers must complete an Attendance/Performance Rating Sheet each month to track satisfactory participation.

H. Self-Initiated Training

1) Self-initiated training is training initiated by the participant and in which the participant is enrolled at the time of initial assessment.

2) Participants who enroll into training programs prior to coming into VIEW will be required to meet the requirements of the program.

3) The ESW will use the following procedures to approve self-initiated skills training:

a) All recipients who have self-initiated in skills training must have their skills training approved by the ESW in order to pay for needed supportive services.

b) The ESW will complete an Assessment form, an Agreement of Personal Responsibility, and an Activity and Service Plan for each participant prior to approving the self-initiated skills training.

c) If day care is needed, the ESW will notify the day care staff of the approval or disapproval of the self-initiated skills training. Day care staff will not authorize day care in cases in which the ESW has disapproved the self-initiated skills training.

d) The skills training must be for jobs available or likely to become available in the community.

e) If grades have been issued for the training activity, the participant must have met the satisfactory progress requirements of the provider.

f) If the participant is already enrolled in skills training which will require more than two years to reasonably complete, the participant may be allowed to continue in the activity if they are satisfactorily progressing but will be ineligible for a Hardship Exception based on the extension of training.

g) The participant must also meet the conditions previously described in the sections on limitations and monitoring of skills training.

I. Job Development and Job Placement

1) The Department and local departments will work with other state, regional and local agencies to develop job placements. Job finding and job matching leading to independent employment will be facilitated by the Virginia Employment Commission and the Department of Economic Development. A description of the local agency's Job Development and Job Placement activities should be included in the annual plan.

a) Each locality will offer a Job Development and Job Placement component to solicit public and private jobs, to market participants, and to secure job interviews.

b) Each locality can assign the participant to Job Development and Job Placement activities concurrent with job search activities.

c) Each locality will identify employment opportunities and potential business expansion which may be available for participants.

d) Each locality will market job ready participants to the business community through locally designed initiatives such as, but not limited to, program literature, special mailings and telephone networking.

e) Existing public and private providers of job development/job placement services, such as VEC, JTPA, and the Department of Economic Development will work with the local departments to facilitate job development and job placement.

f) Agencies are encouraged to contract with public and private job development and job placement providers if the services are not available from another provider free of charge.

2) The ESW will not assign a participant to Job Development and Job Placement for longer than 90 days. Participants assigned to Job Development and Job Placement must be assigned to a concurrent work activity. **However, where the ESW determines that, as a result of a person's verified disability or the verified disability of a household member for whom the participant is responsible, the person will benefit from a longer period**

of participation, this is a reasonable accommodation and the period can be lengthened. Similarly, if the ESW determines that, due to a person's verified disability, participation in Job Development and Job Placement will be more successful if not combined with a concurrent work activity, this would be a reasonable accommodation for that individual.

J. INACTIVE

1. Inactive is a status assigned to participants who cannot participate in the program for reasons other than being exempt. Individual assignments to inactive will be for 30 days only. Participants may be reassigned to inactive; however, multiple assignments to inactive will be closely monitored.

2. Participants will be assigned to inactive if:

   a. The local agency determines that transportation is unavailable.

   b. The participant is unable to make child care arrangements and the local agency is unable to make day care arrangements.

   c. The participant provides a written medical statement of mental or medical problems expected to last for at least 30 days, which would make participation impractical. If the mental or medical problem is expected to last longer than 30 days, the ESW will refer the participant to eligibility for re-evaluation of the participant's exemption status.

   d. The participant has a family crisis or a change in individual or family circumstances, such as the death or illness of a spouse, parent or child, family violence situations, or other limited circumstances not of the participant's own making. If the participant is in a substance abuse treatment program for which verification has been provided, he may also be placed in an inactive status.

      In these circumstances, the ESW may continue to offer supportive services including day care and transportation (in order to assist the participant in returning to active status).

   e. **Because of a verified disability, the participant needs services, supports or accommodations to participate in work activities, but those services, supports or accommodations are unavailable.**

   f. The participant is participating in health, mental health, or substance abuse treatment or rehabilitation services and participation in these activities prevent him/her from participating in work activities. Supporting documentation that participation is necessary is required. Do not place the participant in inactive if participation in these activities is considered participation in a component.

   g. Screening indicates the participant has a potential disability but an assessment by a qualified professional is unavailable.

   h. The participant will also be placed in inactive status if all of the following conditions exist:

      1. The participant is providing day care for the child of a relative who is in school, training or employment;

      2. The participant, the child and the relative all live in the same household and all are in the same assistance unit;

      3. The agency is unable to make other day care arrangements for the child; and

4. The relative's school, training or employment would be disrupted without the child care.

i. The ESW must document in the case record the reasons for assigning a participant to an inactive status. In order to assist the participant, the ESW must outline a plan with actions and anticipated time schedules to assist the client to resolve issues and overcome barriers to participation. The ESW must make referrals to the social worker or other appropriate resources to arrange social services needed by the participant. The results must be documented in the case record.

j. The ESW will review the participant's inactive status every month, and complete a new Activity and Service Plan.

k. The months in which a participant is assigned to inactive will not count toward participant’s two- year time period.

K. PENDING

1. Pending is a status assigned to participants who cannot move immediately into a component, but who are anticipated to enter a component within two months. The months in which a participant is assigned to pending will count towards the participant's two-year time period.

2. Participants in Pending must have their Activity and Service Plans reviewed at least every two months.

3. Participants will be placed in Pending for the following reasons:

   a. To await the outcome of a re-evaluation request to the EW.

   b. Because of a delay in the commencement of a planned activity.

   c. Because day care, transportation or supportive services are unavailable, but are expected to become available within 30 days.

   d. Because an individual has a verified disability and needs services, supports or accommodations to participate in work activities, but those services, supports or accommodations are not available, if they are expected to become available in 30 days.

8. Targeted Employer Grant (Repealed effective July 1, 2004)

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9. REASSESSMENT

A. Reassessment provides the ESW and the participant the opportunity to review the participant's progress in the VIEW program and address any problems which may present an obstacle to full-time employment.

1) Reassessment after the initial job search

a) At the completion of the initial job search assignment, the ESW will reassess the participant.

b) The ESW must conduct an individual, face-to-face reassessment interview and complete a new Activity and Service Plan for signature.

c) If the participant has not found unsubsidized employment by the 91st day after the queue assignment, he will be assigned to the Full Employment Program (FEP) or other subsidized employment, on the job training provided by an employer, or community work experience (CWEP). If an appropriate site is available, the participant should be placed in FEP.

2) The reassessment will identify the reason the participant was unable to obtain full-time unsubsidized employment and the ESW will assist the participant in resolving the identified barriers, **including barriers which may be disability-related**. **If there is a reason to believe that the participant's failure to find full-time employment is related to a disability, the worker may offer screening, and if the screening identifies that the individual is likely to have a disability, will offer an in-depth evaluation, to identify the nature and severity of the disabilities, the individual's limitations, and any accommodations needed. The individual's Activity and Service Plan will be revised to reflect this information.**

3) If the ESW cannot place the participant into a FEP position or an on the job training position provided by an employer, he will assign the participant to CWEP for at least six months. If the participant obtains full- time unsubsidized employment during the CWEP placement, participation at the CWEP site will no longer be required. If part-time employment is found, the required CWEP hours may be reduced accordingly.

A. Reassessment procedures

1) The ESW will conduct a reassessment whenever the participant leaves or completes an assignment. The scheduling of reassessment appointments should be done prior to the end of

the current assignment to ensure that participants are reassessed as soon as possible after the end of an activity. New assignments will be scheduled to begin within two weeks of the reassessment, if possible. This practice will have a positive impact on the participation rate as the amount of "down" time between activity assignments will be reduced.

2) The ESW may conduct a reassessment through a face-to-face interview, by phone, or by mail. At a minimum, the ESW must conduct a face-to-face interview every six months.

3) At reassessment, the ESW will assign the participant to an activity and draft a new Activity and Service Plan. The Activity and Service Plan must list the activities to which the ESW will assign the participant during the months remaining in the participant's two year time period. The Activity and Service Plan must also list the current activity to which the ESW has assigned the participant. If the reassessment is conducted in a way other than face-to-face, the Plan must be mailed to the participant and documentation of such included in the case record. Documentation must also include the date on which the new plan was discussed and agreed upon by the participant.

4) The ESW will place the participant into a work activity no earlier than the 90th day and no later than the 95th day after assignment to the queue.

10. PARTICIPATION AND PARTICIPATION RATE REQUIREMENTS

A. Federal law requires that each state meet participation rates for TANF and TANF-UP in order to avoid a reduction in the state's block grant funding. **The reduction in the block grant is 5% (approximately $8 million). For each successive year the participation rate is not achieved, the penalty is increased by 2% of the block grant. The maximum penalty is 21% of the block grant (approximately $33 million).** In order to ensure that the state meets the participation requirement, each locality will be monitored to assure that a specified percentage of TANF clients participate in work activities an average of the federally required hours.

The following chart reflects what the federal participation rate requirements are through the year 2002 for all TANF and TANF-UP families.

	ALL TANF FAMILIES		TANF-UP FAMILIES	
Federal Fiscal Year (Oct.-Sept.)	Participation Rate	Work Activity hours required per week	Participation Rate	Work Activity hours required per week
2000	40%	30	90%	35
2001	45%	30	90%	35
2002	50%	30	90%	35

B. Participation is measured based on the number of families with an adult or minor head of household meeting participation requirements, which is the numerator, compared to the denominator, **which is the total number of TANF cases minus: child only cases, cases that are exempt from VIEW, and VIEW sanction cases**. **Families that are exempt from participation in VIEW** do not count in the denominator. (**As of July 1, 2003 exempt families will count in the denominator.)** Agencies are encouraged to monitor both individual and locality participation. All VIEW clients shall be required to participate in activities that meet the federal work participation requirement, (i.e. activities that are the required number of hours in mandatory and optional work activities). Please see the following calculation.

CALCULATION OF THE MONTHLY PARTICIPATION RATE:

NUMERATOR: # of VIEW families who participate in the required work activities for **at least** the required minimum hours for the month. These are actual hours, not scheduled or averaged hours.

----------divided by----------

DENOMINATOR: # of **TANF cases minus: child only cases, VIEW exempt cases and VIEW sanction cases.**

C. Actual hours of participation in VIEW, not scheduled hours, are counted in determining whether the hourly requirement is met. When reporting participation monthly, the actual hours should be recorded in the system.

D. Number Meeting Participation Requirements

1) All TANF Families - The number meeting the participation requirements for TANF families

is the number of participants who are in a combination of work activities for a total of at least 30 hours a week, based on the current fiscal year requirement.

2) TANF-UP Families – To assist in the strengthening of two-parent families, TANF –UP cases should be treated as priority referrals. Also, the TANF-UP participation rate is higher and these families may be in need of more intensive services to meet participation requirements. These households are required to participate a minimum of 35 hours per week. If one parent in an active TANF-UP case participates at least 35 hours per week in work activities, he will have met the federal hourly requirement for the family; however, for the purposes of the participation rate, the required 35 hours per week may be split between the two parents. If both parents are mandatory participants in VIEW, each will participate.

   If the TANF-UP family receives child day care services through the local agency, the parents must participate in federal participation activities for a minimum total of 55 hours per week.

   Note: A single or married parent under the age of 20, satisfactorily attending high school, GED or ABE classes will count toward the participation rate.

3) Activities included in the federal participation rate:

   a. Unsubsidized Employment
   b. Subsidized Employment (FEP)
   c. Community Work Experience
   d. Individual Job Search/Group Job Search/Job Club/Job Readiness and Other Locally Developed activities
   e. Vocational Education Training (Job skills and self-initiated training that is offered in a public school setting)
   f. Jobs skills training and self-initiated skills training
   g. Education directly related to employment (ABE and GED activities)
   h. English as a Second Language (ESL)
   i. Satisfactory School Attendance for Individual without a High School diploma or GED
   j. On-the Job Training

4. Activities that do not count in the numerator

   a. Post Secondary –Associate or Certificate
   b. Post Secondary – 4 Year Degree
   c. Self-Initiated Education – Post Secondary
   d. Job Development and Job Placement
   e. Inactive
   f. Pending (unless employed)

E. Satisfactory Participation

Satisfactory participation will be documented in the system as "Y" if the participant participated the required number of hours as agreed in the Activity and Service Plan. An "N" will be entered if the participant did not participate all of the required hours. The actual hours of participation is what should be entered into the system monthly. For the purpose of determining whether or not a participant should be referred for sanction because he did not participate the number of hours agreed upon in the Activity and Service Plan, good cause will be evaluated to determine if the reason for not fully participating was legitimate. Satisfactory participation will be documented on the Attendance/Performance Rating Sheet and Attendance Record or an agency developed method. Local staff must stress the importance of timely reporting to participants and providers to assure information is provided as needed.

Local agencies should develop procedures to ensure that reporting is accurate and timely.

Local agencies must maintain a record of attendance on each participant they are serving. At a minimum, documentation must include the number of hours scheduled and the number of hours the participant actually attended on a monthly basis. If the attendance record is not maintained in the participant's record, the worker must document how the number of hours the participant attended was verified.

F. To calculate the average weekly hours of participation during the month, total the hours the participant actually participated for the month and divide by 4.33. The following are rules for counting hours for participation:

1) The hours will count in all active program components except for Job Development and Job Placement. Activities recorded as "other locally developed" in the automated system will count as job readiness for the purposes of federal reporting.

2) In Job Search, each employer contact will count as three hours. These hours are in addition to scheduled hours for Group Job Search or Job Club. **For example, five contacts per week meets 15 hours of the 30-hour weekly participation requirement. The participant must engage in other assigned activities for the remaining 15 hours per week.**

3) Work-study hours count towards hours of participation and will be recorded as employment.

4) Study time will count if it is structured, supervised and scheduled. If there is a structured lab or other activity (such as tutoring) scheduled by the institution or agency, with instructor supervision designed to support the activity, the hours will count toward the participation rate**.**

5) Entry into an apprenticeship program will count as a job entry once the participant begins to earn a wage. Any training prior to or during the apprenticeship will count as hours of participation in Job Skills Training**.**

G. Individuals who are assigned to pending or inactive are counted in the denominator of the participation rate calculation. Sanctioned individuals are not.

H. Homework and time spent commuting to and from activities cannot be reported as participation.

11. TERMINATION OF TANF BENEFITS

If a participant fails to report for his initial assessment, or refuses, without good cause, to sign the Agreement of Personal Responsibility, the household's TANF benefits will be terminated.

A. Notice of Termination Procedures

1) The ESW will **send a written communication to the EW** within 3 working days of the date the participant did not attend the scheduled interview or refused to sign the Agreement. The **written communication will advise the EW top send an Advance Notice of Proposed Action to i**nform the participant that he has **10** days to contact the VIEW worker in order that good cause for not keeping the appointment or signing the Agreement may be evaluated. The case may not be closed until after the **10** day period has passed. **The client may request a conference with the worker and explain why he thinks the agency has made a mistake.** Merely contacting the worker does not constitute good cause.

2) The Notice will inform the participant that he failed to meet the specific requirement and that in order to establish good cause, the participant must contact the ESW within **10** days from the date of the notice to discuss the reasons for the claim of good cause. The Notice will inform the participant that his TANF check will be terminated if good cause does not exist. If the participant contacts the worker within the **10** day grace period (with or without good cause) and is given another initial assessment appointment date, the new appointment letter should state that the termination will be imposed if that appointment is not kept. A new **Advance Notice of Proposed Action** is not required.

3) If the participant fails to contact the ESW within **10** days to establish good cause or does contact the worker but does not present good cause, the **EW will** proceed to terminate the household's TANF benefits. **A new written communication has to be sent to the EW to stop the sanction if the client presents acceptable documentation of good cause for the non-complance.**

4) The ESW will not enter the termination in the automated system until after the proposed effective date of the termination of TANF benefits. This practice will decrease the number of cases called into the hot-line requesting assistance in reopening cases that were terminated prematurely.

Note: In agencies which one worker manages both the VIEW and TANF case, the referral is not needed. However, the same time frames for sending the appropriate notices, determining good cause and entering the appropriate actions into the automated systems, will be adhered to.

B. Documentation For Failure To Report For The Initial Assessment

1) The ESW will notify the participant of the scheduled interview.

2) If the participant fails to keep the appointment, the ESW must document the failure in the contact log.

3) The ESW must **either send the participant an Advance Notice of Proposed Action or** send a **written communication to the EW to send the participant an Advance Notice of Proposed Action.** A copy of the Notice must be **placed in** the case record.

4) The ESW must document in the contact log that a telephone call or personal contact was attempted.

C. Documentation for Failure to Sign the Agreement of Personal Responsibility

1) The ESW must document in the contact log that the participant refused to sign, or did not sign, the Agreement of Personal Responsibility.

2) The ESW must **either send the participant an Advance Notice of Proposed Action or send a written communication to the EW to send the Advance Notice of Proposed Action.**

12. SANCTIONS

A sanction is the suspension of the household's entire TANF grant for program noncompliance. Food Stamp benefits may also be affected.

All TANF and TANF-UP recipients who are determined eligible for the VIEW Program and have already signed an Agreement of Personal Responsibility, are required to participate in the VIEW program. Recipients are subject to sanction if they fail to participate without good cause.

A. Good Cause for Failure to Participate

1) **When a client is not in compliance with VIEW, the agency must attempt to contact the client by phone to encourage participation, explore good cause, and/or notify the client of a possible sanction. In addition, the VIEW Notice of Sanction/Termination may be sent. If the ESW determines that the participant did not have good cause or is unable to contact the participant,** an Advance Notice of Proposed Action must be sent to the client. The ESW will send a written communication to the EW to send the notice. The communication will include the non-compliance act. The EW will send a copy of the Advance Notice of Proposed Action to the ESW for the case record. The client has 10 days from the date of the notice to contact the ESW to show good cause. Any documentation to confirm good cause has to be presented in this time period.

2) A participant who has good cause for noncompliance will not be sanctioned. Good cause will exist if:

a) The participant's inability to fulfill program requirements is due to circumstances outside his control or is the result of a change in circumstances over which the participant had no control. **This includes situations in which the reason for the participant's non-compliance was that the participant had a disability or a household member with a disability that was not identified or was identified but not addressed. The worker must allow the client 30 days to verify the disability prior to referring for sanction.**

b) Acceptable child care is not available when necessary for an individual to accept employment or enter or continue in the program. To be acceptable, the child care must meet all of the following criteria:

(1) The child care must be arranged:
(a) by the participant, or
(b) if the participant can not arrange for the child's care, it must be arranged by the local department of social services with a legally operating provider;

(2) The child care must be within a reasonable distance from the participant's home or work site. This means that the travel time from the child's home to the child care provider and the work site is generally no more than one hour, based on transportation available to the parent;

(3) The child care arrangements must be affordable. This means the cost of the child care is less than or equal to the payment amounts specified in the Child Day Care Services policy (Volume VII, Section II, Chapter D); and

(4) If the child care is with a relative it must meet the requirements for relative care in the Child Day Care Services policy (Volume VII, Section II, Chapter D).

The participant is responsible for demonstrating that she is unable to find child care for one or more of the above reasons. The local agency is responsible for determining if the information provided substantiates that needed child care that meets the above criteria cannot be arranged. The ESW must consult with the Child Day Care worker in evaluating whether a sanction is appropriate.

c) Accepting employment would result in a net loss of cash income for the assistance unit. Net loss of cash income would result if the family's gross earned income, less necessary work related expenses, was less than the recipient's TANF check he was receiving at the time the offer of employment was made.

3) The good cause investigation consists of an evaluation of information in the case record. When there has been no recent contact with the participant, efforts will be made to determine if the participant has contacted the ESW to discuss the problem, given a reason for not attending an ESP interview, or for not completing an assignment, or having not kept any program related appointment.

4) A reasonable effort will be made to contact participants who are unable to read. The worker must document that an attempt by telephone or a personal contact has been made prior to referring the case for sanctioning.

The purpose of this contact is to ensure the participant understands the mandatory nature of the program and has an opportunity to explain the reason for noncompliance.

5) Prior to imposing a sanction the supervisor must review the circumstances of the proposed sanction to ensure that the participant has been screened for disabilities or screening has been offered and refused, reasonable accommodations have been provided if needed, and the agency has attempted to notify the client verbally. The supervisor must not approve the sanction if any of these steps have not been taken. The supervisor or designee must sign the VIEW Non-Compliance Checklist. The completed checklist must be placed in the case record.

B. Refusal to Participate

Refusal to participate occurs when a participant either:

1) Overtly chooses not to cooperate; or

2) Fails to carry out his prescribed VIEW activities without good cause.

C. Reasons for Applying VIEW Sanctions

The following are reasons for applying VIEW sanctions:

1) Failure to report for reassessments, job interviews or other required interviews;

2) Failure to actively participate in any VIEW component or activity or to complete

requirements designated in the Agreement of Personal Responsibility or Activity and Service Plan, the local Employment Services Plan and State policy. This includes failing or refusing to complete and/or return forms or provide other information by the required date;

3) Failure to accept bona fide job offers. A bona fide job offer is an actual job offer given in good faith without dishonesty, fraud or deceit. The job offer must:

a) not be beyond the physical or intellectual capabilities of the participant.

b) provide at least federal minimum wage or the prevailing wage for an occupation not covered by minimum wage standards.

4) Termination of employment without good cause. A sanction will be imposed in the following circumstances:

a) removal from a community work experience work site for misconduct or violation of employer rules governing the work site;

b) termination from unsubsidized or subsidized employment by the employer due to problems with attendance and/or performance or inappropriate behavior, without good cause;

c) non-participation for the assigned hours in a component other than FEP. Participants in FEP will only be sanctioned if the employer requests that the participant's placement be terminated;

d) quitting a job, refusing a bona fide offer of increased work hours, or requesting a reduction in work hours without good cause, including FEP.

D. Documentation Required for Failure to Report for Assessment, Reassessment, Job Interviews or Other Required Interviews

1) Correspondence advising the participant of the scheduled interview. The required contents of this correspondence are given in the Assessment and Activity and Service Plan, found in sections 3 and 4 of this chapter.

2) The Activity and Service Plan forms (unless the recipient fails to appear for assessment, or appears but refuses to participate in the assessment) stating the VIEW activity to which the participant was assigned and any actions required by the participant.

3) Contact log documenting all contacts with the participant.

4) **A copy of the communication sent to the EW to sanction/terminate the case.**

E. Documentation Required for Failure to Report to or Complete Education, Job Skills Training,

Full Employment Program, Job Readiness, Recipient Job Search, Job Development/Placement or Job Search

1) An Activity and Service Plan form showing that the participant was assigned to Education, Full Employment Program, Job Development/Placement or Job Search and stating the actions required by the participant.

2) Any letters and phone calls which may have been made prior to the scheduled activity (such contacts are not required by policy).

3) Any referrals to the education, training or service provider, or employer.

4) Contact log documenting all contacts with the participant.

5) Any records of participant's performance or progress in an activity.

6) Any records of participant's attendance or the Attendance/Performance Rating Sheet.

7) **A copy of the communication sent to the EW to sanction/terminate the case.**

F. Documentation Required for Failure to Report to or complete a Work Experience/Full Employment Program Assignment

1) Activity and Service Plan forms showing that the participant was assigned to Work Experience or Full Employment and stating the actions required by the participant.

2) Referral to Work Experience/Full Employment Site form.

3) Work Experience Attendance and Performance record/Employee Rating Form.

4) Contact log documenting all contacts with the participant.

5) **A copy of the communication to the EW to send the Advance Notice of Proposed Action.**

G. Documentation Required for Failure or Refusal to Accept a Bona Fide Job Offer

1) Description of the job offer and the circumstances surrounding the refusal including an analysis of whether the job offer met the definition of a bona fide job offer.

2) All contacts with the employer.

3) Contact log documenting all contacts with the participant.

4) **A copy of the communication sent to the EW to sanction/terminate the case.**

H. Documentation Required for Termination of Employment, Reduction in Wages or Refusal of a Bona Fide Offer of Increased Work Hours

1) Description of the job and circumstances surrounding the termination of employment, reduction in earnings or refusal of increased work hours.

2) Contact log documenting all contacts with the participant.

3) A copy of the communication sent to the EW to sanction/terminate the case.

I. Advance Notice of Proposed Action to Sanction/Terminate

1) This notice is sent to participants who does not comply with the VIEW program to inform participants that their benefits will be terminated.

2) **Upon determination to sanction the client for** noncompliance, the ESW will send a written communication to the EW to send the Notice. The communication will include the noncompliance act.

3) The Notice will inform the participant of the specific requirement which was not met, and advise the participant to contact the ESW within 10 days from the date the Notice was mailed in order to establish good cause or the TANF grant may be suspended.

a) The Notice will give the participant at least 10 days from the date the Notice is mailed to provide good cause.

b) If the participant does not respond to the Notice by the date given, he will be sanctioned.

c) If the participant responds to the Notice, the information becomes part of the documentation needed to determine if the sanction will be imposed. If the participant does not present good cause, he will be sanctioned.

J. Sanction Procedures

1) In agencies in which both the VIEW program and TANF benefits are not managed by one case manager, the ESW will advise the EW that a sanction is required, when to impose a sanction, and which sanction to impose. An automated message is sent to the EW via the automated system to impose the sanction or a manual communication may be sent. Eligibility will send the participant the Notice of Adverse Action to affect payment which explains the reason for the sanction, the amount of benefit reductions to be imposed, and the duration of the sanction.

2) For the purposes of recording and establishing sanctions, the sanction period begins on the date the participant was in noncompliance. This date is recorded in the automated system by the ESW. The effective date on the Notice of Proposed Adverse Action is the beginning of the sanction period for purposes of suspending assistance.

3) The sanction will be imposed the first month following the month in which the case was referred for sanctioning, if administratively possible. If not, the sanction will be imposed the following month.

4) In an open TANF case, if the recipient terminates employment, the EW may obtain the information first. If so, the EW will notify the ESW. The ESW will contact the employer and/or client to determine if sanctioning is appropriate.

K. Sanction Periods

A TANF or TANF-UP recipient will have his TANF benefits suspended for the following periods:

1) For the first failure to comply, the sanction will continue for at least one payment month or until the participant complies whichever is longer. The TANF benefits will be suspended for this sanction by 100% of the grant.

2) For the participant's second failure to comply, the sanction continues for a minimum of three consecutive months. The sanction will continue beyond the three consecutive months until the recipient complies. The TANF benefits will be suspended for this sanction by 100% of the grant.

3) For any subsequent failure to comply, the sanction continues for a minimum of six consecutive months. The sanction will continue beyond six months until the recipient complies. The TANF benefits will be suspended for this sanction by 100% of the household grant.

4) A participant may perform a verifiable act of compliance during the fixed sanction period. The TANF money payment; however, will not be reinstated until after the fixed period.

5) The months during which the participant is sanctioned will count toward the two year time period limitation. **The "VIEW Sanction Reminder Notice" (032-03-643) will be generated by ADAPT 15 days prior to the end of the minimum time period for the sanction. A second notice will be generated 90 days after the first notice is sent. The notices will be sent to the local agency's printer. The agency will send the letters to the participants. The notice can be located on the intranet (www.localagency,dss.state.va.us).**

6) When an individual is receiving TANF and the category changes to TANF-UP or vice versa, the sanction count continues. For example, if an individual is sanctioned in a TANF case and the category changes to TANF-UP, the original sanction continues and must run its course in the TANF-UP case. Any new sanctions the individual incurs on TANF-UP count as being in addition to the sanctions the individual received while being required to participate as a TANF case. If the sanctioned individual leaves one TANF-UP assistance unit and becomes a member of another TANF-UP assistance unit, the sanction will follow that individual. The sanction will not remain imposed on the assistance unit the individual left. Only one assistance unit at a time will incur a sanction created by the same individual.

7) The ESW will advise the EW of the effective date on which to lift a sanction. Sanctions cannot be lifted during the fixed period. After the fixed period has ended, the date entered into the automated system which will lift the sanction will be the date the participant agreed to participate. The ESW will wait until the participant actually complies before notifying the EW to lift the sanction.

8) The EW will impose the sanction even if a participant becomes exempt after the **Advance Notice of Proposed Action** is sent. There are three exceptions to this rule:

a) If it can be established that the individual actually became exempt during the time he was required to participate and verification is received, the EW will not impose the sanction. However, this information must be communicated in writing to the ESW for final determination.

b) If the individual in a first sanction period obtains and verifies full-time employment (at least 30 hours per week) prior to the effective date of the proposed sanction, the EW will not impose the sanction. The EW must advise the ESW of this information.

c) If a participant becomes exempt after the end of a minimum sanction period, the sanction will be lifted as of the date the individual became exempt.

9) If an individual changes assistance units, the sanctions received in prior assistance units follow the individual. In other words, changing assistance unit does not remove the sanction from the individual's past record. For purposes of recording sanctions in the automated system, the sanction information should be entered on the referral record for the individual who incurred the sanction Example: TANF-UP household with two mandatory participants. Caretaker 1 is referred for sanction. Caretaker 2 remains in compliance. The sanction referral data is entered only on caretaker's 1 service supplement and that supplement is closed. In order to provide ongoing services to the other participant, their supplement would remain open.

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10) The following guidelines are used for food stamp participants subject to sanction:

a) In order to sanction a participant's food stamp benefits, there are three conditions which must exist. The conditions are:

(1) the agency must operate the Food Stamp Employment and Training Program (FSET);

(2) the participant is not otherwise exempt from FSET; and

(3) the VIEW requirement with which the participant does not comply is comparable to a requirement in the FSET program. Comparable means the same components and activities exist in the VIEW and FSET. Comparability also does not exist when the TANF benefits are terminated because the VIEW participant refuses to sign the Agreement of Personal Responsibility.

b) For purposes of comparison, VIEW activities and FSET activities are comparable except that FEP does not exist in FSET.

c) If all the conditions exist, the ESW must notify the Food Stamp EW that the participant is to be sanctioned.

(1) If the participant to be sanctioned is the head of the household, the food stamp benefits of the entire household will be sanctioned for one month for the participant's first food stamp failure to comply under VIEW, three months for the second failure and six months for each subsequent failure.

(2) If the participant to be sanctioned is not the head of the household, only the participant will be deleted from the food stamp household. His entire income, however, will still be reflected in the calculation to determine the allotment of the remaining household members.

Note: Because of a number of factors, including differences in TANF and food stamp policy implementation time frames, sanction periods for TANF and food stamps may not be in alignment. Example: A participant could be in his second TANF sanction and his first food stamp sanction.

d) If the VIEW requirement is not comparable to an FSET requirement and a TANF sanction is imposed, the EW will consider that the participant has lost his exemption status for FSET (the participant was exempt from FSET due to referral to VIEW) and the participant must register for FSET unless otherwise exempt.

13. COMPLIANCE

A. Compliance occurs when the participant who failed to comply and has been sanctioned performs a verifiable act of compliance to lift the sanction during or after the fixed sanction period has elapsed. A verifiable act of compliance for the participant will be either continuing in, or completing an assigned activity.

If the TANF case is closed during the sanction period, the act of compliance may be met while the case is closed or during the pending status of a reapplication. If the individual is applying for food stamps as well as TANF, the TANF sanction is not necessarily cured by complying with FSET requirements. The individual must complete an act of compliance that matches the reason for the VIEW sanction. If that action is no longer available or appropriate, any other verifiable act of compliance deemed acceptable by the ESW will cure the sanction. This determination should be made on a case-by-case basis.

Supportive services may be provided to a participant during the time he is performing a verifiable act of compliance. Ongoing supportive services may also be provided to the other mandatory participant in a TANF-UP household who has continued to comply even when the sanctioned participant remains in the fixed period of sanction. **Reasonable accommodations must be provided to individuals with verified disabilities during the time they are performing verifiable acts of compliance and to make it possible for individuals to perform verifiable acts of compliance.**

1. Verified employment, part or full-time, is a verifiable act of compliance for all situations. The participant is still required to comply with other program requirements in conjunction with employment when applicable.

2. A verifiable act may be defined in these situations as follows:

a. For failure or refusal to report for an appointment or required interview - keeping another scheduled appointment or interview. (Excluding the initial assessment interview.)

b. For failure or refusal to complete and/or return forms or other information to the agency by a required date - returning and/or completing the required form or other information.

c. For failure or refusal to begin, to continue in or participate in an assigned activity - beginning, continuing in or participating in an activity for up to two weeks to show a good faith effort to comply.

d. For failure or refusal to complete an assignment (example: job search) - completing an assignment.

e. For failure or refusal to obtain or accept employment – if the client obtains employment during the sanction, the employment must be maintained through the end of the sanction period.

f. If the assignment from which a participant has been sanctioned is no longer available or appropriate, compliance may consist of participating in or completing a different activity.

A. Once the participant has performed a verifiable act of compliance, the sanction is lifted retroactive to the date the participant agreed to comply and subsequently did comply as agreed upon by the participant and the worker. The Activity and Service Plan should reflect the activity and the date by which the activity is to be completed. This date cannot be prior to the end of the fixed sanction period.

14. TRANSFERS

A. The ESW will transfer within five working days from the date of notification, the entire VIEW record of TANF or TANF-UP participant who moves from one locality to another.

B. All attempts should be made to transfer the benefits and the VIEW records together.

C. All service supplements should be updated and closed prior to case transfer.

D. When a VIEW case with no earned income and not in sanction transfers to another agency, the VIEW clock and the 60-month clock stop until such time as the VIEW worker does an assessment and the clocks re-starts the first of the following month. The receiving agency is responsible for adjusting the clocks.

E. When a case with earnings or one which is in sanction transfers to another agency, the clock continues.

15. TRANSITIONAL SUPPORTIVE SERVICES

Transitional services are designed to facilitate stability of a former VIEW participant once he leaves TANF, either because he has reached the end of the two-year time period, or when his TANF case closes for other reasons. Workers are to **explain to** clients how receiving transitional services will affect their period of ineligibility. Transitional services available are transportation, child care, and employment and training.* Eligibility for transitional services starts the first day of the month after TANF case closure and continues through the last day of the 12th month after TANF case closure. In the event the TANF case is closed and the six months job follow-ups have not been completed and the client is receiving assistance with transportation, the services will be transitional transportation. After the required six job follow-ups have been completed, the VIEW record must be closed. Former VIEW recipients may **be eligible to receive Medicaid.** Transitional services may be provided to either or both of the TANF-UP parents, provided one of them participated in VIEW at TANF case closure.

*2002 Acts of Assembly, Appropriations, Item 354C

If the TANF case is reopened and the client is VIEW, the client no longer qualifies for transitional services. The client may qualify for VIEW supportive services. When the TANF case closes again the client may qualify for twelve months of transitional services.

A. A former VIEW participant may apply for transitional transportation any time during the 12 months of eligibility; however, he will be eligible for only the remaining months of eligibility if he applies after the 12 month period has started. When a participant begins receiving transitional transportation, the information must be recorded in ESPAS. ESPAS is accessed through the ADAPT main menu, option 14. For detailed instructions refer to the ESPAS Manual, Chapter L.

   Payments for transitional transportation may be made for any transportation related expenses that are allowed under VIEW guidelines for open TANF cases. Transitional transportation is paid out of a locality's VIEW allocation.

   Evaluation of continued eligibility and the need for transitional transportation will occur every three months. Minimally, the re-evaluation will verify the former VIEW participant's employment hours. Failure to respond to requests for information will result in termination of transitional transportation services. Adequate documentation supporting reasons for termination shall be filed in the case record. When transitional transportation services are terminated, a written Services Notice of Action (#032-02-103/5) or letter must be sent at least 10 days in advance of the effective date of the action.

B. Child care assistance is available up to twelve months after termination of TANF to maintain employment or to participate in employment and training activities.* To be eligible for transitional child care assistance, a participant must be determined eligible. Transitional child care starts the first day of the month after the month of TANF case closure. The participant will be required to pay 10% of monthly gross income as a fee, for transitional child care, unless a locality has been approved to use an alternative child care fee scale. Once the VIEW participant's TANF case closes and the participant is determined to be income ineligible for transitional child care, the agency may provide the participant with VIEW supportive child care services for 90 days immediately after TANF case closure **or until the 6-month job follow-up is completed, whichever is longer**. The client will not have to pay the 10% fee for the 90 days, but has to pay any amount over the maximum reimbursable rate.

C. Employment and training* provides for education and job training services to qualified VIEW participants. Participants in a sanction at case closure are not eligible for employment and training.

   Employment and training includes all services listed on pages 18 – 19 and activities listed on pages 19 – 24 and pages 40 – 47. The employment and job training activity must be approved by the VIEW worker.

   Employment and training services are available for up to twelve months after TANF case closure if needed to obtain employment, maintain employment or to receive a higher level of employment.

   To qualify for employment and training services, the following criteria must be met:

   1. The activities are designed to maintain employment income, increase employment income or prevent the loss of employment income by the participant.

*2002 Acts of Assembly, Appropriations, Item 354C

2. The participant was enrolled in the VIEW program at the time of case closure.

3. The TANF case of which the individual was a member is closed.

4. The case was not in a VIEW sanction at the time of closure.

5. The individual has not completed an associate degree, four year degree, or higher degree.

6. If the individual is approved to participate in an education activity, the individual must be able to complete the activity within the transitional twelve month period.

7. The local agency has sufficient VIEW funds to pay for activities or services.

If the individual is not employed, the provisions of the employment and training services should allow the individual to become employed within 60 days of starting the training activity. If the client is not employed within 60 days of starting the employment and training activity, the worker is to put the client in a 30 day job search. If the client is not employed by the 90th day, the transitional services must end by the 91st day. If the client is employed after the 91st day, he may qualify for transitional services.

When participating in an educational activity the individual must be assigned to at least 8 hours of employment within 90 days of starting the education activity. If the client is not employed by the 90th day, the supportive services must end the 91st day. If the client is employed after the 91st day, he may qualify for transitional services.

The participant must be enrolled in education and training activities for which there are jobs in the community or jobs projected to be available in the community. The participant must meet the satisfactory progress requirements of the institution providing the training. For education below the post-secondary level, Adult Basic Education and (GED), the individual must obtain one grade level increase every three months. Workers are to use VIEW attendance forms and review grades each grading period to monitor satisfactory progress. Participants shall not be assigned to FEP or CWEP.*

16. CONTRACTS

Agencies may enter into financial agreements with individuals or organizations to operate portions of their Employment Services program. Agencies are bound by State statutes set forth in the Virginia Public Procurement Act and by any local procedures that may supplement the Act. Contracts with other state entities, including community colleges and JTPA Service Delivery Area (SDA's) are not subject to the requirements of the Virginia Public Procurement Act, but may be subject to local procurement procedures.

A copy of the contract must be sent to the Central Office (TANF Unit) no later than 30 days after implementation for the purpose of maintaining a central library of VIEW contracts. Technical support for the development of contracts will be provided by the Regional Coordinators. Please refer to Appendix B of this chapter for a checklist to be used in the development of a contract. The contract should define what is to be monitored and evaluated for contract effectiveness.

The local Employment Services Plan must reflect the agency's intention to contract and must contain a copy of the proposed contract. Agencies who decide to contract after approval of the local plan should submit a plan modification in writing at the same time the contract is submitted.

***2002 Acts of Assembly, Appropriations, Item 354C**

a. Consideration in Contracting

Numerous individuals and agencies, both public and private, in almost every area of the State are capable of delivering services under an agency's Employment Services Plan. Prior to contracting, however, the agency should ascertain that the contractor can provide services of an equal or

higher quality and/or at a lower cost than the agency itself. Care should be taken to insure that the contract represents an extension of services, rather than compensation for services previously provided at no cost. The contract must contain a certification from the provider that the services being contracted for are not otherwise available from the provider at no cost.

b. Services That Can be Contracted

Any program activity or service may be contracted.

c. Selection of Service Providers

When selecting service providers, the local agency must take into account such things as the past performance of the contractor in providing similar services, the contractor's demonstrated effectiveness, fiscal accountability, cost efficiency and other factors which the local agency determines are appropriate. A process must exist that documents these factors were considered.

d. Deliverables

The deliverable services of the contract should be written in such a way to identify the performance and outcomes acceptable through the contract. These performance measures and outcomes assist in determining the success of the contract. The definition of effectiveness and progress measures of the contract should be agreed upon prior to the start of the contract. Performance measures and outcomes should be quantified within the contract. Success should be defined incrementally and in terms of completion.

e. Payment and Reimbursement

Payment for a contract should always be linked to contract performance. Payments are typically prorated according to quantifiable rates of progress and/or performance. Most of the time, expenses are submitted for reimbursement. Under specific but rare circumstances, advances are allowed. A detailed budget should be attached to the contract.

f. Contract Duration

Contracts can be negotiated for any period of time agreeable to both the agency and the contractor so long as they terminate by the end of the fiscal year. To allow local agencies maximum flexibility in operating the Employment Services Program, contracts may be negotiated for a period of six months (or less) rather than for a year. Agencies who choose to contract for 12 months and who later become dissatisfied with the contractor's performance may terminate the contract by providing notice as stated in the contract.

g. Contract Requirements

1) Format

The agency must use the **revised** contract format approved by the Attorney General's Office in contracting (see **revision in** Appendix B, page 5 of this chapter). Other formats can be

utilized in addition, if required by the local government. The contract must show the total cost for all contracted services between the agency and the contractor. (If more than one service is to be provided, the separate cost for each should be included in the scope of services descriptions.)

2) Scope of Services Description

Each service to be provided by the contractor must be described in full. Agencies contracting out more than one service will need to develop a scope of services description for each service.

The description must contain a(n):

a) Summary of activities included in the service;

b) Explanation of roles of the contractor and agency in providing the service;

c) Explanation of the contractor's responsibility regarding required reporting;

d) Description of the numbers and kinds of clients who will receive the service (age 25-35, volunteers, high school graduates, etc.);

e) Statement of the time frame for the service, including beginning and ending dates; and

f) Description of the specific anticipated outcomes.

3) Contract Monitoring

a) It is the responsibility of the local agency to monitor each contract on a frequent basis to ensure both that the terms of the contract are being met and that progress is being made toward achievement of the outcome goals. Monitoring may be carried out through review of reports made by the contractor and contract site visits. At a minimum, the agency will require the contractor to submit a monthly client specific progress report as well as quarterly reports. The quarterly report should include information on overall contract progress, identified problems and client outcomes. The final annual report should provide an objective review of summarizing the overall program operations for the contract period as well as client specific outcomes/progress. A copy of the Contract Development Checklist found in Appendix B, pages 2, 3, 4 **and 5** of this chapter may be used to monitor contracts.

b) It is the responsibility of the local agency, based on information from its monitoring of the contract, to determine the appropriateness of future contracts with the same contractor. In all cases in which the agency plans to enter into a second or subsequent contract with a contractor, the final summary report must accompany the

state-approved format and scope of services description sent to Central Office for their records. In cases in which the final summary has not yet been completed, all monthly and quarterly reports to that date will be submitted instead.

Note: Charitable Choice* - For contracts between agencies and faith-based organizations, it is suggested that language be included stating that the organizations may not discriminate against a participant based on religion or religious beliefs. See Chapter 1000, page 39, and Appendix B, page 7.

17. PARTICIPANTS WHO LEAVE THE VIEW PROGRAM AND RETURN PRIOR TO THE END OF THE TWO YEAR PERIOD

A. A mandatory participant who leaves the VIEW Program for reasons other than sanction, and who is still eligible for TANF, must return to the Program for his remaining months of eligibility.

B. Participants returning to the VIEW program prior to the end of the 24 month time line on TANF will be coded by the EW as priority referrals, and served as soon as possible. The ESW may waive the up front job search and place the participant directly into a work activity.

C. Individuals who reapply whose case was closed while in a sanctioned status are not required to participate in the initial 30-day job search, but must satisfy the sanction before their TANF benefits begin.

D. The individual will participate in a concurrent work activity throughout his participation in the VIEW program.

18. HARDSHIP EXCEPTIONS

A. Introduction

1) Hardship exceptions are situations in which there is good cause for not terminating the Virginia Independence Program participant's TANF benefits at the end of the two-year time period. To receive a hardship exception, VIEW participants must first apply. The exception to this is when the participant lives in a locality “where factors relating to job availability

* Public Law 104-193

may be unfavorable" as defined in C.1 a and b of this section. The ESW does not have to screen all VIEW participants for potential hardship exceptions.

Participants can apply for a hardship exception during the 60-day period prior to the end of the two-year time period. Individuals are entitled to good cause for failing to apply for a hardship exception within this 60 day period if the worker determines that the client failed to apply due to disability reasons. If it is determined that the person had good cause for failing to meet the time period, due to a disability, and it is determined that there are prior sanctions on the person's record that may affect the decision whether to grant a hardship exception, the worker should consider whether any of the sanctions may have been inappropriately imposed because of the person's disability that should have been taken into consideration.

If the ESW does not receive a request for a hardship, the participant's TANF and VIEW cases will close at the end of twenty-four months. In certain circumstances, it will be necessary to manually communicate hardship exceptions, appeals and clock information to eligibility staff. When this occurs, please use the VIEW Exchange Form, found in Appendix A. If a hardship exception is granted, the participant will continue to receive TANF benefits if otherwise eligible, including VIEW. Only one hardship exception at a time will be granted. Hardships cannot run concurrently, but may be granted consecutively if the participant qualifies.

2) The agency may consider granting a hardship exception if a good cause reason exists. In addition, the participant must have complied with the requirements of the Program and engaged in activities designed to obtain employment, **unless the reason for the participant's non-compliance was the participant had a disability or household member with a disability that was not identified by, or was identified but not addressed.**

B. Qualifying Criteria for Granting a Hardship Exception

In order to be considered for any hardship exception, an evaluation of the participant's program participation must be made to determine that none of the following occurred:

1) He was not sanctioned for failing to satisfactorily participate in all assigned activities while in the program. Assigned activities must be listed on the Activity and Service Plan. Some examples of assigned activities include:

a. job search, either individual or group

b. full employment

c. community work experience

d. other subsidized employment or on-the-job training

2) He was not sanctioned for leaving employment while in the VIEW program, **unless the reason for the participant's sanction was the participant had a verified disability or household member with a verified disability that was not identified by the TANF and VIEW programs, or was identified but not addressed, and the verified disability prevented participation.**

3) He was not sanctioned more than one time for reasons other than those listed in 1 or 2, **unless the reason for the participant's sanction was the participant had a verified disability or household member with a verified disability that was not identified, or was identified but not addressed, and the verified disability prevented participation.**

If none of the above three conditions exist, a hardship exception may be granted under the conditions stated in Hardships Exception, section 18, c. and d.

If there is a determination that a sanction(s) was improperly imposed, the existence of that sanction(s) will not be a bar to the granting of a hardship exception.

C. Conditions Under Which a Hardship Exception May Be Granted for up to One Year
A hardship exception will, if the local department determines that the participant meets all criteria, be granted by the local agency for a maximum of one year in the following circumstances:

1) Factors relating to job availability are unfavorable;

a) Participants will not be required to apply for the hardship exception "where factors relating to job availability may be unfavorable". The locality must determine the existence of job unavailability based on its knowledge of the labor market.

b) Job unavailability is defined as an unemployment rate of 10% or greater in the participant's locality, for the two most recent quarters prior to the end of the two-year time limitation. This data is available from the Virginia Employment Commission. If data is not available for one of the two most recent quarters, the ESW will use the most current data.

c) To qualify under this exception the participant must have been actively seeking employment as defined under D. 1).

d) Under this hardship exception, the locality will address the following items to ensure that the hardship applies to the individual participant:

(1) Length of time for which the hardship exception will apply;

(2) The reasons why the benefits need to be extended for the time period requested;

(3) Documentation that jobs to which VIEW participants would be eligible are not available.

2) A one year hardship exception can be granted to enable a participant to complete employment-related education or training.

a) The participant must have been enrolled in employment-related education or training for at least nine of the last 12 months. **If, however, the reason the individual was not enrolled for at least 9 of the last twelve months was related to a verified disability or verified disability of a household member for whom the participant was responsible, this will not disqualify the individual from obtaining a hardship exception to complete education and training**;

b) If the hardship exception is granted, the employment-related education or training is expected to be completed in a year or less;

c) The participant had been making satisfactory progress in the employment-related education or training per program requirements. **If the participant had not been making satisfactory progress, the worker must follow the procedure outlined in Section 1000.7.E.2.d to determine the reasons for the failure to make satisfactory progress, identify any disability-related reasons for this failure and provide accommodations that will make satisfactory progress possible. If the worker has not followed the procedures outlined in Section 1000.7.E.2.d, the individual cannot be denied a hardship exception**; and

d) For the purposes of this hardship exception the following education activities are not considered "employment-related education or training." **If, however, the individual who is participating in these activities has a verified disability that interferes with the person's ability to work and it has been determined that completion of this activity will improve the person's chance for employment, then the hardship exception can apply to these activities as well**:

(1) Adult Basic Education;

(2) General Equivalency Degree activities;

(3) English as a Second Language; or

(4) High school.

e) The ESW must re-evaluate participants granted this hardship every 90 days to determine whether the conditions under which the hardship was granted still exist.

f) If a participant leaves an employment-related education or training activity, his hardship exception will be immediately revoked and his TANF benefits will be terminated immediately. **Before taking such an action, the ESW must attempt to contact the individual by at least two different means (letter, telephone) to determine why the person left the program and whether it was related to a verified disability of the participant or of a household member for whom the participant is responsible. Under such circumstances, it will be necessary to determine whether good cause exists to continue benefits and whether, with reasonable accommodations and supportive services, the person could return to the program.**

D. Conditions Under Which a Hardship Exception May Be Granted for up to 90 days

A hardship exception will, if the local department determines that the participant meets all criteria, be granted by the local agency for up to 90 days in the following circumstances:

1) The participant has been actively seeking employment and is unable to find a job or jobs that would, in combination with all other income or sources of assistance the individual is receiving, pay an amount equal to or exceeding the case's TANF cash benefits plus the standard work deduction. Actively seeking employment is defined as satisfactorily participating in any assigned job-seeking activity while in the program.

2) The participant loses his job as a result of factors not related to his job performance.

a) Factors unrelated to job performance are circumstances in which the Virginia Employment Commission would have determined that eligibility for unemployment compensation would have existed if the participant had worked sufficient hours to qualify.

b) To qualify for this hardship exception, the participant must have applied for unemployment compensation at his VEC office.

c) The participant must provide a copy of the determination of ineligibility for unemployment compensation from VEC in order to grant this hardship.

3) An extension of this hardship exceptions may be granted in certain circumstances

a) A hardship extension is the period of time a participant's TANF benefits and program participation can be extended beyond the originally granted hardship exception. If an extension is granted, the individual will participate immediately in work components, unless good cause exists.

b) The local agency will refer the case to a panel composed of the Commissioner of the Virginia Department of Social Services, the Commissioner of the Virginia Employment Commission, and the Executive Director of the Governor's Employment and Training Department, or their designated representatives.

c) The local agency must request an extension in writing, to the Commissioner of the Virginia Department of Social Services, at least 10 days prior to the ending of the participant's original hardship exception. The written request should include, but not limited to the following:

(1) The specific reason(s) for granting a hardship extension.

(2) The documentation verifying the criteria for granting the extension has been met. In order to apply for a extension, the local department of social services must been able to prove that the individual:

a. has been satisfactorily participating in all assigned activities; and

b. will encounter extreme hardship if benefits are terminated.

(3) A description of any extenuating or individual circumstances the panel should consider in determining if the hardship extension will be granted.

(4) The period of time for which the extension should be granted.

d) The criteria which the panel will consider in making a determination that an individual's benefits should be extended will include but will not be limited to:

(1) the individual meets all the general criteria for receiving the hardship exception;

(2) the individual has applied for and been found ineligible for unemployment compensation because he has not worked sufficient hours to qualify;

(3) the individual**,** through no fault of his own**,** is unable to find a job or a combination of jobs that would, in combination with any other income or sources of assistance that the individual is receiving, equal or exceed the amount of the TANF grant plus the standard work deduction; and

(4) the individual is able to demonstrate that his family would suffer extreme hardship in the event benefits are terminated; and

(5) the individual enters a job search and work component at the time of application and complies with all other program requirements pending and after application approval. The panel will examine each case individually and may consider other extenuating circumstances in deciding whether to grant or deny an exception.

existing hardship. An individual who has exhausted his 24 months of TANF benefits and has left the program may not be considered for a hardship or extension.

F. Procedures for Applying for and Granting a Hardship Exception

1) Procedures for Applying for Hardship Exception

a) The participant will receive a notice in the mail from the EW informing him that his two-year time limitation for receipt of TANF will end in 60 days. The notice will inform the participant that he can apply for a hardship exception and that the request must be in writing. The notice will also inform the participant that the request must be submitted to the ESW.

The only exception to a written request for a hardship exception is if the participant is illiterate and the worker has documented that he is unable to read and write English.

The agency must also inform the client verbally that:

1. Some participating families are entitled to receive benefits beyond the twenty-four months based on hardship;

2. All participants have the right to apply for a hardship exception;

3. The criteria for qualifying for the hardship exception;

4. The documentation required to establish hardship;

5. The right to help in applying for a hardship exception, including, but not limited to, help filling out forms and writing letters, and help gathering documents establishing eligibility;

6. What to do if they are denied a hardship exception and want to appeal the decision;

b) The request from the participant must note the following:

(1) The hardship exception desired by the participant. (Participants will not be required to apply for the hardship exception "Where factors relating to job availability may be unfavorable").

(2) The date the participant wrote the request.

(3) The participant's signature.

2) Time Period in Which a Participant Can Apply for a Hardship Exception

a) **A participant can apply for a hardship exception during the 60-day period prior to the end of the two-year time period. Individuals are entitled to good cause for failing to apply for a hardship exception within this 60 day period. "Good cause" exists if verified disability-related reasons prevented the request a hardship exception.**

b) To be considered for a hardship exception, the request must be postmarked prior to the end of the participant's two-year time period.

1) The date the participant wrote the request.

2) The participant's signature.

3) ESW procedures for granting a hardship exception:

a. The ESW must send the participant a notice within 5 days of the receipt of the request for a hardship exception.

b. The ESW will review the request and determine if a hardship exception should be granted. The following procedures should be used to make the determination.

1) Complete the Hardship Determination form. (See form in Appendix A)

1) Determine if the participant met the qualifying criteria (section 18.B)
2) Review the request to determine if the participant meets the conditions for the individual hardship exception.

c. The ESW must notify the participant in writing that a request for a hardship exception has been approved.

d. Within 30 days of the receipt of the participant's request for a hardship exception, the ESW will send a written notification (see form in Appendix A) to the participant informing him of approval or disapproval of the request for a hardship exception.

4) The written notice will inform the participant of the following:

a) The decision regarding the granting of the hardship exception;

b) The reason why a hardship exception was not granted;

c) The procedures for appealing the decision if the hardship exception was not granted;

d) The date on which the TANF benefits will end;

e) If the hardship exception is granted, the date for the participant to attend a reassessment interview; and

f) The conditions under which the participant will receive the extension of the benefits are the following:

(1) The participant must meet all requirements of the Program;

(2) If the participant is **not complying with VIEW requirements**, the TANF benefits will be terminated **as soon as administratively possible** and the hardship exception will end;

(3) The participant must continue to meet the conditions for which the hardship exception was granted.

5) All participants granted a hardship exception will be reassigned to a component designed to assist them in obtaining employment and must meet all other applicable requirements of the Program.

6) The local agency will notify the Regional Coordinator of all hardship exception requests, approvals and denials. A letter or locally developed form will suffice to notify the Coordinators.

19. APPEALS

A. All participants have the right to appeal an agency action affecting their entitlement to or receipt of assistance, i.e., terminate or suspend a payment. The ESW's decision to refer a participant to the EW because of non-compliance will result in such an action.

B. The EW must notify the participant in writing through use of the **Advance** Notice of **Proposed** Action every time an adverse action is taken.

C. The **notification and fair hearings procedures in the TANF Manual, Sections 401.4 – 401.5,** will govern all appeals to ensure fair hearings for actions **proposed or** taken by the agency as a result of noncompliance with VIEW requirements.

D. If the participant files a valid appeal and requests a hearing, as determined by the hearings officer, the TANF or TANF-UP grant may be reinstated until a decision is rendered by the hearings officer.

E. Workers may work with participants during an appeal.

20. HEARINGS

A. The ESW must follow these procedures for all appeals involving VIEW sanctions:

1) The EW will notify the ESW worker of the date and time of the pre-hearing conference by Eligibility staff and of the date and time of the appeal hearing by the hearings officer.

2) The Employment Services Unit is responsible for assuring that the unit is represented during the pre-hearing conference and the appeal hearing. If the representative is not a member of the Unit, he must be provided sufficient information to be knowledgeable about the case and the **circumstances** which lead to the sanction.

3) Only the participant should reschedule the pre-hearing conference.

4) Eligibility and Employment Services staff must jointly prepare the summary of facts, which must include both eligibility and participation issues. Additional procedures for fair hearings are found in the TANF Manual**, Sections 104 – 106.**

B. **The ESW must carry out the appeal decisions as follows:**

1) If the agency's action is reversed, the ESW must **remove the sanction,** review the participant's Activity and Service Plan to determine the appropriate component assignment.

2) If the agency's action is sustained, the sanction is imposed and the ESP case is closed for the required period of time.

VIEW FORMS

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TEXAS INFORMATION SHEET

A. 1. Write or print your name _____

2. What is your address_____

3. What is the date today?_____

4. Do you have a telephone?_____ What is the number?_____

5. Are you married? _____What is your husband's name (or wife's name)?
_____

6. When is your birthday?_____

7. Where were you born?_____

B. 1. Are you a citizen of the United States?_____

2. Are you a citizen by birth or by naturalization?_____

3. Do you maintain private transportation?_____

4. If so, what type?_____

5. Do you possess a valid driver's license?_____

6. What type of books would you like to read?_____

7. Are you a registered voter in the State of Virginia?_____

8. If you are presently employed, please indicate whether you are employed on a full-time or a part-time basis.
_____

9. How long have your worked for your present employer on the job which you now hold?
_____

10. Do you subscribe to a newspaper?_____

11. Do you subscribe to any magazines?_____

12. If so, please list them._____

13. Do you own (or have ready access to) a T.V.?_____

14. Do you own a radio or is one available to you?_____

15. Please answer either fine, good, fair, poor, or bad to the following questions:

a: How is your vision?_____

b. How is your hearing?_____

c. How is your general health?_____

16. Please write in words the number of times you estimate that you visit the doctor each year.

_____

17. How did you learn about this program?_____

_____

C. 1. Please write a brief and pertinent paragraph explaining how you were made aware of this program.

_____

_____

_____

_____

2. Please write a paragraph telling the aspirations which you have that you feel can be enhanced or furthered by the program which you are now beginning.

_____

_____

_____

_____

3. Please write a paragraph about yourself, as you see yourself. You may reiterate the information which you have already given in the above paragraph.

_____

_____

_____

4. Give me that information which you feel will be most helpful in aiding an instructor who is trying to prepare a program of instruction suited to your particular needs.

_____

_____

_____

Adapted from: Extension Teaching & Field Service Bureau. Division of Extension. The University at Austin, Permission to reproduce granted to Adult Education Program.

THE UNIVERSITY OF TEXAS INFORMATION SHEET

FORM NUMBER – 032-03-311

PURPOSE OF FORM - This form measures functional literacy levels in English.

USE OF FORM - The form is used for all VIEW participants. Functional education level is recorded on the Assessment Form and in the automated system. Functional education level must be recorded in the automated system by the first reassessment.

NUMBER OF COPIES - One original.

DISPOSITION OF COPIES - Original - Case Record.

INSTRUCTIONS FOR PREPARING FORM - This form will be completed by the VIEW participant to the best of his ability. The ESW will determine the participant's functional education level based on completion of Sections A, B, and C.

Section A: grades 0 - 4.0

Complete Question	#1:	grade level 1.0 (record as 01 in automated system)
	#2:	grade level 1.5 (01 in system)
	#3:	grade level 2.0 (02 in system)
	#4:	grade level 2.5 (02 in system)
	#5:	grade level 3.0 (03 in system)
	#6:	grade level 3.5 (03 in system)
	#7:	grade level 4.0 (04 in system)

Section B: grades 5.0 - 8.9

Complete Question	#1:	grade level 5.0 (record as 05 in automated system)
	#2:	grade level 5.2 (05 in system)
	#3:	grade level 5.4 (05 in system)
	#4:	grade level 5.6 (05 in system)
	#5:	grade level 5.8 (05 in system)
	#6:	grade level 6.0 (06 in system)
	#7:	grade level 6.2 (06 in system)
	#8:	grade level 6.4 (06 in system)
	#9:	grade level 6.6 (06 in system)
	#10:	grade level 6.8 (06 in system)
	#11:	grade level 7.0 (07 in system)
	#12:	grade level 7.3 (07 in system)
	#13:	grade level 7.5 (07 in system)
	#14:	grade level 7.7 (07 in system)
	#15:	grade level 8.0 (08 in system)
	#16:	grade level 8.3 (08 in system)
	#17:	grade level 8.5 (08 in system)

Section C: grades 9.0 - 12.9

Completes Question	#1:	grade level 9.0 (record as 09 in automated system)
	#2:	grade level 10.0 (10 in system)
	#3:	grade level 11.0 (11 in system)
	#4:	grade level 12.0 (12 in system)

Commonwealth of Virginia
Department of Social Services

Case Name _____
Case Number _____
Locality _____

Virginia Initiative for Employment not Welfare (VIEW)
AGREEMENT OF PERSONAL RESPONSIBILITY

This agreement lists your responsibilities as a participant in the VIEW program. If you refuse to sign this Agreement of Personal Responsibility, you will lose your Temporary Assistance for Needy Families (**TANF)** benefits.

VIEW PROGRAM RESPONSIBILITIES
I understand that **TANF** is a temporary assistance program and that I am responsible for:

- Recognizing that because **TANF** is temporary assistance, I need to work to become self-sufficient and support my family;
- Looking for and accepting employment;
- **Participating in and satisfactorily completing all** assignments from my case manager;
- Notifying my case manager immediately of changes in my circumstances;
- Answering all letters and calls from my case manager in a timely fashion;
- Keeping appointments with my case manager;
- Arranging child day care and transportation to allow me to participate in the VIEW program. If I am unable to arrange child day care and transportation, my case manager may be able to assist with these services.

VIEW PROGRAM RULES
To continue to receive TANF benefits, I must enroll in the VIEW program.

Once enrolled in the VIEW program, I can receive up to 24 months of **TANF** benefits.

I will be assigned to work activities **throughout** my 24-month eligibility period.

If I do not participate in the VIEW program, I will lose my family's **TANF** grant and my family's Food Stamp benefits may be **affected**. This is considered a sanction.

Each month that I am sanctioned for not participating will count as one of my 24 benefit months.

If I refuse a job offer without good cause, I will be sanctioned and lose my family's **TANF** benefits. **My Food Stamp benefits may be affected also**.

If I quit a job **or am terminated,** I will be sanctioned and lose my family's **TANF benefits unless I have good cause. My Food Stamp benefits may be affected also**.

VIEW OPPORTUNITIES
I understand that it is my responsibility to take advantage of the opportunities afforded me by the VIEW program. By taking advantage of these opportunities, I will be assisting my family in achieving economic independence.

I am able to earn up to the poverty level without **losing** my TANF benefits. The amount of my monthly benefits may not change when I go to work.

When I find employment and leave **TANF**, I may be eligible for up to 12 months of **transitional** child day care, transportation and medical assistance.

I may receive valuable work experience and/or training through the VIEW program.

I may own a vehicle with a fair market value of $7,500 without **its** value affecting my benefits.

HARDSHIP EXCEPTIONS
Hardship exceptions may be granted in very limited circumstances to extend the 24-month eligibility period to persons who demonstrate an extreme hardship. **I may be granted a hardship exception if I have met the following conditions:**

1. **Satisfactorily** participated in all of the **assigned** activities **while in the program without being sanctioned; and**

2. **Was not sanctioned for leaving employment while in the VIEW program**; **and**

3. **Was not sanctioned more than one time for reasons other than those stated in 1 and 2 (required interviews, assessments, etc.).**

FAIR HEARING RIGHTS
I have the right to appeal any agency action which terminates, reduces, or suspends my family's **TANF** and/or Food Stamp benefits.

VIEW ELIGIBILITY PERIOD (Check one)

❑ Signing this agreement will cause my 24-month eligibility **period** to begin on_____ with a scheduled end date of _____. **(first of the following month)**

❑ **Signing this agreement will resume my 24-month eligibility period to begin on _____ (first of the following month) with a scheduled end date of _____. This means I have _____ months remaining of my 24-month eligibility period.**

AGREEMENT TO PARTICIPATE (Check one)
I understand that I must sign this agreement to continue to receive **TANF** benefits. Refusal to sign this agreement will result in the loss of my **TANF** benefits.

❑ By signing this VIEW Agreement, I choose to participate in the VIEW program.

_____
Participant Date

❑ **The client refused to sign the Agreement of Personal Responsibility. The client's responsibility to participate was explained. The client was informed that refusal to participate will result in termination of the family's TANF benefits.**

_____
Case Manager Date

VIEW AGREEMENT OF PERSONAL RESPONSIBILITY
032-02-310/2 (7/00)

PURPOSE OF FORM - This form provides written documentation of the acceptance of personal responsibility by the participant for participating in the VIEW program. The VIEW Agreement of Personal Responsibility must be completed at the initial assessment **and each subsequent referral to VIEW**. The form documents the begin date and scheduled end dates of the VIEW participant's 24 months of receipt of TANF.

USE OF FORM - This form is used by the agency to record the information discussed with the participant concerning the individual's responsibilities while in the VIEW program. The form must be completed and signed before **VIEW** participation may begin**.**

NUMBER OF COPIES - One original and one copy.

DISPOSITION OF COPIES - Original - Case Record
Copy - VIEW Participant

INSTRUCTIONS FOR **COMPLETING** THE FORM - The worker/case manager must discuss this form in its entirety with the participant at the time of initial assessment. This form must be signed by the participant before the participant enters the VIEW program.

Refusal by the VIEW participant to sign this agreement will result in loss of TANF / TANF -UP benefits and **may affect** Food Stamp benefits. **If the participant refuses to sign the agreement, the employment services worker is to check the second box, sign the form, date it, and file it in the case record.**

If a VIEW participant leaves the program prior to the end of the 24-months of eligibility for TANF and subsequently returns, the participant must sign a new Agreement of Personal Responsibility, with the remaining eligibility period indicated in the "VIEW ELIGIBILITY PERIOD" section.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

❑ Assessment
❑ Reassessment

Participant Name:_____
Telephone Number:_____
Email Address: _____
Case ID#:_____
❑ TANF ❑ TANF-UP

VIEW ASSESSMENT I

A. EDUCATIONAL BACKGROUND

Last Grade Completed _____ Date_____ Functional Ed. Level_____ Date_____

Other (test results, date given, type, etc.):_____

_____

Other training/special schooling and dates: _____

_____

B. EMPLOYMENT HISTORY* *(Begin with the most recent job):*

1. Employer_____ Job Title_____
   Duties_____
   Date Started _____Date Left _____Highest Pay_____
   Reason for leaving_____

2. Employer_____ Job Title_____
   Duties_____
   Date Started _____Date Left _____Highest Pay_____
   Reason for leaving_____

3. Employer_____ Job Title_____
   Duties_____
   Date Started _____Date Left _____Highest Pay_____
   Reason for leaving_____

4. Employer_____ Job Title_____
   Duties_____
   Date Started _____Date Left _____Highest Pay_____
   Reason for leaving_____

*(NOTE: This information will be used to identify jobs into which participants may be placed immediately.)

Most favoritejob?_____Why?_____

Least favorite job?_____Why?_____

C. VOLUNTEER WORK/HOBBIES/ABILITIES (Transferable Skills): _____

_____

_____

VIEW ASSESSMENT II

A. 1. Do you have a current driver's license?_____

2. Do you have access to a car?_____ If not, what do you do for transportation?_____
_____

3. Have you ever been convicted of a crime?_____
Explain_____

4. Do you have an illness or disability (as diagnosed by a doctor) that would prevent you from accepting a job?_____ Explain_____

5. What type of child care would you arrange to help you accept a job?_____

6. Have you registered with the Virginia Employment Commission?_____
If so, when was the last time you contacted the VEC?_____

7. Have you registered with any other employment service?_____
If so, give the name and last date of contact._____

8. Are you scheduled to begin an education or training program in the next sixty (60) days?_____
If so, where?_____

B. Which of the following are barriers to your finding and/or keeping a job? (Check all that apply):

- ❑ Family Circumstances
- ❑ Legal/Criminal
- ❑ Homeless
- ❑ Child Care
- ❑ Family Abuse
- ❑ Substance Abuse
- ❑ Transportation
- ❑ Other:_____

List ways that you can help to overcome each barrier checked:
_____
_____
_____

C. CONSIDERATIONS IN EMPLOYMENT PLANNING:

- ☐ No prior Work History/Intermittent Work History
- ☐ Lack of Credentials/Certifications
- ☐ Limited English Speaking/Reading Ability
- ☐ Lack of Transportation
- ☐ Lack of GED
- ☐ Lack of Job Skills
- ☐ Disability_____
- ☐ Homeless
- ☐ Child Day Care
- ☐ Migrant Worker
- ☐ Legal/Criminal
- ☐ Family Abuse
- ☐ Substance Abuse
- ☐ Other _____

D. JOB INTERESTS/EMPLOYMENT GOAL:_____

GENERAL COMMENTS/SUMMARY:
_____
_____
_____

*Please refer the participant to the Family Violence Hotline 1-800-838-8238.

VIEW ASSESSMENT

FORM NUMBER - 032-02-303/1

PURPOSE OF FORM - This form is initially completed at the time of the VIEW assessment interview. The form records information concerning the VIEW participant's educational background, employment history, interests and abilities, and employment goals. This form will also be updated at reassessment interviews.

USE OF FORM - The information on this form is used to assess the job readiness of the VIEW participant and serves as a foundation for development of the VIEW participant's Activity and Service Plan (032-02-302). This form will be used after the initial assessment process to record dated information of the VIEW participant's educational background, employment history, abilities, and employment goals. Information added after the initial assessment needs to be dated as to MM/DD/YY of entry. Should the information on this form change significantly during the course of the program participation or should there be no more room on the form for recording updated information, is appropriate for a new form to be completed.

NUMBER OF COPIES - Original only.

DISPOSITION OF COPIES - Original will be maintained in the VIEW participant's case record.

INSTRUCTIONS FOR PREPARING FORM

Page 1

Identifying Information/Date/Type of Assessment/Category - Date is MM/DD/YY assessment or reassessment is conducted. Check the appropriate block to indicate "Assessment" for initial assessment or "Reassessment" for reassessment interviews.

A. EDUCATIONAL BACKGROUND - Information about the last school attended and last grade completed is obtained from the VIEW participant during the assessment interview. The worker/case manager will use this part of the form to record functional education level testing. Record any training, special schooling or post secondary education. Be sure to include dates attended and any certification(s) or degree(s) obtained. Information about test results may be recorded at the time initial assessment, if known, or may be added at the time of reassessment.

B. EMPLOYMENT HISTORY - The "Employment History" section provides a chronological listing of the VIEW participant's employment. Information about the VIEW participant's duties on the job, reasons for leaving, and job preferences are important for employability planning and merit through discussion.

C. VOLUNTEER WORK/HOBBIES/ABILITIES - In this section, include any information which could assist the on-going employability planning process. This information will be particularly useful in assessing VIEW participants with limited skills/employment histories.

VIEW ASSESSMENT
(Cont'd)

Page 2

This page of the Assessment Form is designed to be completed either by worker/case manager or the VIEW participant.

SECTION A - These questions are designed to help the VIEW participant think about some of the things which will affect his employability as well as his ability to be self-sufficient. Each question needs to be completed as thoroughly as possible and discussed with the VIEW participant at the time of the interview.

SECTION B - This section is designed to allow the VIEW participant to acknowledge things which may impact his progress toward self-sufficiency. If problems are identified, the VIEW participant has an opportunity to decide for himself how these problems may be resolved.

SECTION C - This section is designed to help the worker/case manager identify major considerations in planning with the participant. This is a list of potential obstacles to the VIEW participant's achieving employment. In discussing employability planning with each VIEW participant, this list will enable the worker to identify these obstacles and to discuss how the VIEW participant and the worker/case manager will cooperatively endeavor to remove them.

SECTION D - This section is designed to record an employment goal or area of job interest after careful evaluation of discussion about all of the information gathered during the interview.

GENERAL COMMENT/SUMMARY - This section is designed for the worker/case manger to record any additional information not addressed on the form.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
TANF PROGRAM

Participant:_____
Case ID#:_____
Date:_____
Months Accrued on VIEW Clock:_____

☐ VIEW ☐ TWA ☐ Transitional

VIEW/TWA/TRANSITIONAL ACTIVITY AND SERVICE PLAN

PLANNED COMPONENT ASSIGNMENT	Planned Begin Date	Planned End Date	Planned Weekly Hrs/Pay
Currently employed full-time	_____	_____	_____
Currently employed part-time	_____	_____	_____
Job Search	_____	_____	_____
Job Readiness	_____	_____	_____
Job Development/Job Placement	_____	_____	_____
Full Employment Program	_____	_____	_____
On-The-Job-Training	_____	_____	_____
Community Work Experience	_____	_____	_____
Education	_____	_____	_____
Job Skills Training	_____	_____	_____
Other Work Activity	_____	_____	_____

CURRENT PROGRAM ACTIVITY ASSIGNMENT

Program Activity Assignment	Description/ Location	Planned Begin Date	Planned End Date	Planned Weekly Hrs/Pay
_____	_____	_____	_____	_____
	_____			
_____	_____	_____	_____	_____
	_____			

☐ Pending ☐ Inactive

List reasons for assignment to Pending or Inactive and the steps necessary to resolve problem

_____

_____

SUPPORTIVE SERVICES

❑ Day Care ❑ Transportation ❑ Other (please describe)

_____

PARTICIPANT RESPONSIBLITIES FOR CURRENT COMPONENT ASSIGNMENT(S)

_____

_____

_____

AGENCY RESPONSIBILITIES

_____

_____

PARTICIPANT OBLIGATIONS

I understand that I am responsible for keeping the agency informed of my progress and needs. I agree to call the worker/case manager whose name is listed at the bottom of this page if I have a problem that makes it impossible to keep an appointment or if I wish to discuss or change an activity. I agree to continue in my current activity until I have discussed any problem I may have with my worker/case manager.

I understand that if I fail to participate without a good reason my TANF benefits/support services will be stopped, and my Food Stamp benefits may be affected.

☐ **FOR PARTICIPANTS ASSIGNED TO COMPONENTS**

I will carry out the responsibilities as agreed.

☐ **FOR PARTICIPANTS ASSIGNED TO THE FULL EMPLOYMENT (FEP) PROGRAM**

I understand that I will not receive monthly TANF benefits while I am employed in a FEP placement. However, I may receive a supplemental TANF payment if I am unable to work at least 20 hours per week during the month because of circumstances beyond my control, such as but not limited to, loss of child care, transportation, or illness.

☐ **FOR PARTICIPANTS ASSIGNED TO PENDING (Applicable to VIEW only)**

I understand that I am not actively participating at this time, but the months assigned to this component will count toward my two year time period. I also understand that I must answer all calls and letters from agency staff since I may be required to participate in the future.

☐ **FOR PARTICIPANTS ASSIGNED TO INACTIVE (Applicable to VIEW only)**

I understand that I will not actively participate at this time. I also understand that I must answer all calls and letters from agency staff since I may be required to participate in the future.

☐ **EXCHANGE OF INFORMATION CONSENT (ALL PARTICIPANTS)**

I understand that my worker may contact employers, service agencies, and others to assist me in connection with my work activities. By signing this form, I give permission to my Employment Services Worker to share information from my case record when necessary to provide or coordinate services on my behalf.

PARTICIPANT'S SIGNATURE_____**DATE**_____

CASE MANAGER'S SIGNATURE_____**PHONE**_____

VIEW/TWA/Transitional Activity and Service Plan

FORM NUMBER: 032-02-302/4

PURPOSE OF FORM - This form outlines a strategy designed by the worker/case manager and the VIEW participant to achieve long and short term goals in working toward employment as decided upon during the initial assessment and recorded on the Assessment Form (032-02-303). It details specific activities to which the participant will be assigned and identifies any service needs during assignments to these activities.

USE OF FORM - This form is prepared initially at the VIEW assessment and at the time of each reassessment. It is also to be used for person's assigned to Transitional Employment and Training (TET) and TANF Work Activities (TWA). Activities on this form will correspond to entries in the automated system. A copy of this form may serve as the Service Application.

NUMBER OF COPIES - One original and two copies

DISPOSITION OF COPIES - Original - Case Record
1st copy - VIEW Participant
2nd copy - Service Worker

INSTRUCTIONS FOR PREPARING THE FORM

PLANNED COMPONENTS ASSIGNMENTS - This section is designed to list the components to which the VIEW, TET or TWA participant will be assigned during the course of program participation. This information in its entirety needs to be completed at the initial assessment and at each reassessment.

CURRENT PROGRAM ACTIVITY ASSIGNMENT - This space is provided for the worker/case manager to list the current component assignment(s) along with planned location, dates, and hours/pay. The information on this list will correspond with information at the top of the form and information in Employment Services Automated System (ESPAS). Any assignment to pending or inactive needs to be explained in the space provided.

SUPPORTIVE SERVICES - Any services needed by the VIEW participant to engage in the program activities listed will be identified in this section of the Activity and Service Plan.

PARTICIPANT RESPONSIBILITIES - Outline the specific steps the VIEW participant is required to take in order to comply with program requirements. The amount of detail needed in this section will be determined by the worker/case manager on a case by case basis. **If a participant is placed in FEP, the ESW should include the participant's responsibility to call the FEP placement supervisor (include name and phone number) and the ESW if he will be absent from work.**

AGENCY RESPONSIBILITIES - Outline the responsibilities the agency will assume to assist the participant in carrying out the activities identified.

PARTICIPANT OBLIGATIONS - By signing this section of the form, the VIEW participant indicates they have participated in the planning for activities described, and they understand their responsibilities as a VIEW program participant.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

Participant Name:_____
Case No.:_____
Job Search Policy:_____

VIEW JOB SEARCH FORM

IMPORTANT! YOU HAVE BEEN ASSIGNED TO JOB SEARCH. USE THIS FORM TO RECORD THE CONTACTS YOU ARE REQUIRED TO MAKE WITH EMPLOYERS WHILE YOU ARE LOOKIG FOR A JOB. IF YOU DO NOT COMPLETE THIS FORM AND RETURN IT TO YOUR CASE MANAGER, YOUR TANF OR TANF-UP MAY BE TERMINATED!

REMEBER YOU MUST:

- Have a face-to-face interview and/or leave a job application and/or a resume with at least_____ employers during the next four(4) weeks.
- Accept suitable job offers.
- Notify your case manager as soon as you get a job.

Complete the bottom of this form and:

☐ Return this form by _____to _____

☐ Keep the interview scheduled with your case manager and bring your completed form for:
_____ at_____ at_____
Date Time Address

CASE MANAGER:_____PHONE:_____

EMPLOYER CONTACT LIST:

These contacts may be verified by your case manager. You do not need to get the signatures of the employers you contact. To count as a contact, you must have a face-to face interview or leave an application and/or a resume.

YOUR CONTACTS	DID YOU: (*Check any that apply*)
Company: VIRGINIA EMPLOYMENT COMMISSION Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact:_____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact:_____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact:_____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact:_____ _____

Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____
Company: _____ Address: _____ _____ Type of job: _____ Person Contacted: _____ Date of Contact: _____	☐ Register: ☐ Submit a Resume: ☐ Interview: Result of Contact: _____ _____

JOB SEARCH FORM

FORM NUMBER - 032-02-301/1

PURPOSE OF FORM - This form provides written documentation of the VIEW participant=s job search contacts.

USE OF FORM - This form is used by VIEW participants to record employer contacts and outcomes during assignment to a job search component.

NUMBER OF COPIES - Original

DISPOSITION OF COPIES - Original becomes a part of the case record when the VIEW participant completes job search and returns the form.

INSTRUCTIONS FOR PREPARING FORM - The first section of the form is completed by the worker/case manager, and the information is discussed with the VIEW participant.

The “Employer Contact List” is completed by the VIEW participant. The first lines in this section are to record the mandatory registration/contact with the Virginia Employment Commission. At the end of the job search assignment or at a time designated by the worker/case manager, the form is returned to the agency. The worker/case manager will explain to the VIEW participant how the form is to be returned. Employers are not required to sign the form.

The VIEW participant will sign the end of the form indicating that the contacts have actually been made. A statement on the form cautions the VIEW participant that the worker/case manager may contact the employer to verify the contact.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

VIEW FULL EMPLOYMENT PROGRAM (FEP) AGREEMENT

The goal of FEP is to match Virginia Initiative for Employment not Welfare (VIEW) participants with employers who will provide a period of subsidized training, developing work experience, job skills, and work social skills. At the conclusion of the training period it is hoped that the employer will hire the participant as a permanent employee.

This is an agreement for the benefit of _____, _____ and is between
VIEW Participant Case Number

_____ and _____.
Agency Employer Name

This agreement is a statement of understanding between the local agency and the employer regarding the training of the participant, listed above.

The employer will hire the participant as a(n) _____ at $_____ an hour
Position

for _____ hours a week. Estimated net monthly wages are _____. This training-oriented employment will not exceed six months, beginning on _____ and ending on _____.
MM/DD/YY MM/DD/YY

During this training period, the participant will receive job training necessary to perform the duties of the job to include the following knowledge, skills, and abilities:

_____

_____

_____

_____

Department of Social Services Responsibility:

- Explain all policies and procedures relative to the FEP program to designated employer staff.
- Make every effort to insure the Virginia Initiative for Employment not Welfare (VIEW) participant's skills, abilities, and interests are a good match for the placement.
- Pay to the employer during the training period a fixed stipend of $300 each month as reimbursement for the participant's training for the months in which the participant worked an average of 20 hours a week.
- Issue a bonus of $500 to the employer if the VIEW participant is hired on a permanent basis during FEP participation or within 30 days following termination of the placement.
- Terminate this agreement with written notice, within (5) working days prior to cancellation, for any reason, including but not limited to, if termination is in the interest of the program, if the employer has failed to provide any of the services specified, or if the employer has failed to comply with any of the provisions contained in this agreement.

Employer Responsibility:

The employer agrees to:

- Begin placements on or about the first of the month, but under no circumstances during the last 11 days of the month.
- Provide no fewer than 20 work hours per week for the participant at a rate of pay not less than the current Federal Minimum Wage.
- Maintain time, attendance, and payroll records for the participant as a basis for payment and reporting the local agency.
- Provide sick leave, holiday and vacation benefits to the same extent provided to other employees performing the same work and having similar experience and tenure.
- Maintain healthy, safe working conditions at or above levels generally acceptable in the industry and no less that those in which other employees perform the same work.
- Pay to the participant wages comparable to wages paid to other employees doing similar work and working similar hours.
- Provide to the participant the same benefits, worker's compensation coverage, and considerations afforded other employees doing similar work and working similar hours.
- Not displace any other worker in order to enter into this agreement.
- Not discriminate against any person, including program participants, on the basis of race, color, sex, national origin, religion, age, or disability.
- Not assign the participant to political, electoral, or partisan activities.
- Notify the Case Manager immediately if the participant fails to carry out the requirements of the job, is having employment-related problems, quits, or is terminated.
- Report to the Case Manager by the 5th calendar day of the following month when the participant's hours average less than 20 hours per week.
- Return the stipend for a month in which the participant did not work an average of 20 hours a week for the weeks the FEP Agreement was in effect during the month. Include as a note on your check: FEP and the participant's name.

Virginia Department of Social Services
Division of Financial Management
P. O. Box 10209
Richmond, VA 23240-0209

Either party can terminate this agreement by giving written notice five working days prior to the cancellation. Termination can be for any reason, such as but not limited to: it is in the best interest of the program or the participant; the employer fails to provide the services specified or to comply with any of the provisions of this agreement; the participant fails to fulfill the requirements of the job; the agency fails to comply with the provisions of this agreement.

I have read, understand, and agree to the provisions of this agreement.

_____, Company Name

_____, Employer Telephone #: _____ Date _____

_____, Case Manager Telephone #: _____ Date _____

FULL EMPLOYMENT AGREEMENT (FEP)

FORM NUMBER 032-02-309/2

PURPOSE OF FORM – This form provides the required documentation of the terms of the agreement between the agency and the employer for the benefit of the participant.

USE OF THE FORM – This form is used to ensure understanding between the agency and the employer regarding the responsibilities of each. The form states the stipend amount to the employer and conditions for termination of the placement.

NUMBER OF COPIES – Original and two copies

DISTRIBUTION OF COPIES –	Original	– VIEW Worker
	1st Copy	– Employer
	2nd Copy	– Participant
	3rd Copy	- Eligibility Worker

INSTRUCTIONS FOR PREPARATION OF FORM

After discussion with the employer regarding Full Employment and the FEP placement, this agreement will be completed indicating that the parties have an understanding of their individual responsibilities and agree to them.

Information contained in this agreement should be clearly defined on the participant's **VIEW/TWA/ Transitional** Activity and Service Plan that corresponds to this assignment.

There must be a signed agreement for each VIEW participant assigned to a FEP placement.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

Full Employment Program Communication Form

Full Employment Program Placement Participant Information					Today's Date:
First Name:		**Last Name:**			
ADAPT Number:		**Legacy Number:**			
Employer Name:					
Employer Address:					
City:		**State:**		**Zip Code:**	
Placement began:		**# of hours**	per		
EW Name:		**EW email**:			

Action Needed

☐ Please set up the Full Employment Program placement in ADAPT on the VIEW Full Employment Program screen (AEVFEP). The stipend must be issued for six consecutive months unless notified to discontinue the stipend.

☐ Please issue a monthly stipend of $300 to the employer beginning _____ in accordance with Advance Notice requirements.

☐ Issue a replacement stipend to the employer for the month of _____. Reason for replacement: _____

Supplemental Payments

The VIEW participant listed above may be entitled to a TANF supplement for the month of _____. During the month of _____ , the participant worked less than 20 hours a week in the FEP placement.

Good Cause Exists: ☐ Yes ☐ No -- Do not issue a supplement.

Participant is paid: ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly

Total Gross Earned Income for _____ (Month) **is** $ _____

Termination of FEP Placement

The FEP Placement has ended because:

☐ Please issue the final $300 employer stipend for _____ (Month), the last month in which the VIEW participant worked an average of at least 20 hours per week.

☐ **Employer has hired the VIEW participant. Please issue the $500 bonus to the employer**.

☐ Reinstate the TANF benefit if the participant's unit continues to be eligible.
VIEW participant is employed _____ hours per week at $ _____ an hour.
Paid: ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly

Other Information

_____ Name (VIEW Worker)

_____ Date (MM/DD/YY)

Full Employment Program (FEP) Communication Form

FORM NUMBER - 032-03-655

PURPOSE OF FORM – This form is to be used by the VIEW Case Manager to communicate changes in participant status and employer payments for Full Employment Program placements.

USE OF THE FORM – The FEP Communication Form is completed by the VIEW Case Manager to communicate initial placement and subsequent changes to the Eligibility Worker in the participant's status in the Full Employment Program.

NUMBER OF COPIES – Original and one copy

DISTRIBUTION OF FORM – Original sent to Eligibility Worker
Copy kept in VIEW Record

OPTIONAL DISTRIBUTION – The FEP Communication Form may be prepared electronically and emailed to the Eligibility Worker.

INSTRUCTIONS FOR PREPARATION OF FORM – Information on the form provides identifying information about the participant. The form is to be completed when the participant is placed in a FEP position to inform the Eligibility Worker of the FEP placement and subsequent changes. The form will show the employer's name and address and the first month the employer's stipend is to be issued through Benefit Adjustment in ADAPT.

Note: Workers are encouraged to print the FEP Communication form on yellow paper to make it easily recognizable.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

VIEW COMMUNITY WORK SITE AGREEMENT

_____Department of Social Services (hereafter referred to as the Agency) and _____(hereafter referred to as the Work Site) enter into this agreement in good faith to provide work experience and/or training to participants of the Virginia Initiative for Employment not Welfare Program (VIEW).

THE AGENCY AGREES AS FOLLOWS:

1. To refer appropriate participants to the Work Site for consideration.

2. To provide a detailed explanation of VIEW and the necessary paperwork for reporting requirements.

3. To provide necessary services to enable the participant to participate in VIEW.

THE WORK SITE AGREES AS FOLLOWS:

1. To provide work experience and/or training for participants chosen by the Work Site.

2. To not use participants to displace current employees or to fill vacant established positions or perform tasks that would have the effect of reducing regular employee's work hours.

3. To not use participants to perform political, electoral or partisan activities or in response to any strike, lock-out or other bona fide labor dispute.

4. To provide reasonable working conditions which do not violate federal, state or local health or safety standards.

5. To provide competent supervision to participants.

6. To prepare evaluation and time sheets for each participant and submit this information to the Agency by the fifth working day of each month during the designated training period.

7. To furnish necessary materials to allow participants to perform assigned task.

This agreement will be in effect from _____ to_____
(not to exceed one year)

_____
Authorized Signature (organization) Date

_____
Agency Representative Date

032-02-308(8/95)

COMMUNITY WORK SITE AGREEMENT

FORM NUMBER - 032-02-308

PURPOSE OF FORM - This form provides required documentation of the terms of the agreement between the work site and the agency.

USE OF FORM - This form is used to ensure understanding between the agency and the work site regarding work experience assignments.

NUMBER OF COPIES - Original and one copy

DISPOSITION OF FORM - Original remains on file in agency
Copy is retained by the work site.

INSTRUCTIONS FOR PREPARATION OF FORM

After discussion with the work site representative, this agreement will be completed so that both parties have an understanding of their mutual responsibilities.

Only one agreement with a work site is required. However, each agreement may have several position descriptions associated with it.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OFSOCIAL SERVICES
VIEW PROGRAM

VIEW WORK SITE POSITION(S) (FEP or CWEP)

This form is used to record information about each position at a specific work site.

NAME OF WORKSITE_____
HOURS OF OPERATION_____
ADDRESS_____
_____

CONTACT PERSON AND JOB TITLE:_____
PHONE:_____

POSITION TITLE:_____NUMBER OF POSITIONS:_____
SPECIFIC DUTIES:_____
_____

SKILLS NEEDED:_____
_____

WORK SITE WILL ACCEPT PARTICIPANT(s) DURING THE FOLLOWING HOURS:

Monday	_____to _____	Thursday	_____to _____
Tuesday	_____to _____	Friday	_____to _____
Wednesday	_____to _____	Saturday	_____to _____
		Sunday	_____to _____

WORK SITE SUPERVISOR_____PHONE_____
LEAD TIME NEEDED FOR ASSIGNMENT CHANGES_____
_____

ADDITIONAL COMMENTS:_____

_____

_____

_____

_____

_____

WORK SITE CONTACT:_____DATE:_____
(signature)

LOCAL AGENCY CONTACT:_____DATE:_____
(signature)

032-02-306 (8/95)

WORK SITE POSITION(S) (FEP OR CWEP)

FORM NUMBER - 032-02-306

PURPOSE OF FORM - This form provides a description of a single position available at an organization with whom the agency has a Community Work Site Agreement (032-02-308) or FEP Agreement (032-02-309).

USE OF FORM - The form is prepared by the worker/case manager as a guide for matching a VIEW participant′s qualifications with the requirements of the position.

NUMBER OF COPIES - Original and one copy

DISPOSITION OF FORM - Original - kept on file by agency
Copy - sent to work site

INSTRUCTIONS FOR PREPARATION OF FORM

Information at the top of the form provides details about the work site and should be updated when changes occur at the work site.

Details for the position description will be as specific as possible and will also be updated as changes occur.

Details of the site hours of operation, supervisor=s name and any additional comments will be documented on the form.

The form will be signed by both the site and agency representatives.

Each available position at the work site will have a separate position description form.

COMMOMWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

VIEW REFERRAL TO WORK SITE (FEP or CWEP)

PARTICIPANT_____CASE#_____
ADDRESS: _____
_____

TELEPHONE#:_____MESSAGE PHONE_____

TO THE PARTICIPANT:

Take this referral to_____(company/work stie) for a Full Employment position or Work Experience position.

You are to report to:_____on_____
Name Date Time
Address/Directions:_____

_____

Special Instructions:_____
_____
If you are unable to keep this appointment, call _____at_____ immediately.

TO WORK SITE SUPERVISOR:
Please give this participant your consideration for the _____position with your organization as outlined in our Work Site Agreement form signed by _____.

He/she is eligible to work _____hours per week.

Please complete the section below and return to:_____
_____

TO CASE MANAGER (check one of the following):

☐ Participant will begin work on _____.
Date
He/she will be assigned to_____hours per week at _____per hour. (FEP only)
He/she will be working at:_____

☐ Participant not selected to work in this position.
Reason:_____
_____
_____

Work Site Supervisor_____
Date_____Phone_____

REFERRAL TO WORK SITE (FEP OR CWEP)

FORM NUMBER: 032-02-300

PURPOSE OF FORM - This form provides the VIEW participant and the community work site or FEP employer with written information about the VIEW participant's assignment to or interview at the work site.

USE OF FORM - The form is used to refer VIEW participants to a community work site or FEP placement to interview for a position.

NUMBER OF COPIES - One original and two copies.

DISPOSITION OF COPIES - Original - Participant
1st copy - Work Site
2nd copy - Case Record

INSTRUCTIONS FOR PREPARING FORM

Preparation of this form will serve to refer the VIEW participant for an interview or an assignment to a work experience or FEP position for which there is a position description on file.

The first section of the form contains information that the VIEW participant will use to locate the site, to call the worker/case manager if a problem arises, and to understand the nature of the position for which they are being interviewed or to which they are being assigned.

The second and third sections of the form also contain information which will help the work site representative interview the VIEW participant, record the details of the position for which the VIEW participant is applying/reporting, and know who the local agency contact person is for this particular VIEW participant.

All sections of the form need to be completed for all parties to understand the referral.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES

Participant's Name:_____
Case Manager's Name:_____
Case Manager's Phone #:_____

VIEW ATTENDANCE/PERFORMANCE RATING SHEET

Work Site Name:_____
Address:_____Phone #:_____
Supervisor:_____Additional Contact:_____

Performance Evaluation
(Rating Guide: 0=Poor, 1=Fair, 2=Good, 3=Very Good, 4=Excellent)

Knowledge of Assignment	_____	Safety Habits	_____
Punctuality	_____	Quality of Work	_____
Attitude	_____	Initiative	_____
Cooperation	_____	Grooming	_____
Works Well with Others	_____	Accepts Supervision	_____
		Overall Performance	_____

LIST SKILLS PARTICIPANT HAS MASTERED _____
_____

LIST SKILLS THAT PARTICIPANT NEEDS TO IMPROVE_____
_____

DO YOU RECOMMEND THAT THE PARTICIPANT CONTINUE IN THIS ACTIVITY?:_____
WHY?_____

Date and Hours Worked

Date	Hours	Date	Hours	Date	Hours	Date	Hours
1		9		17		25	
2		10		18		26	
3		11		19		27	
4		12		20		28	
5		13		21		29	
6		14		22		30	
7		15		23		31	
8		16		24			

TOTAL HOURS WORKED THIS MONTH: ☐

TIMES TARDY: ☐

TOTAL NUMBER OF SCHEDULED WORK HOURS THIS MONTH: ☐

NUMBER OF UNEXCUSED ABSENCES: ☐

THE WORK SITE SUPERVISOR MUST COMPLETE THIS FORM EACH MONTH AND MAIL IT TO THE AGENCY BY THE 5TH CALENDAR DAY OF THE FOLLOWING MONTH TO:_____
_____

WORK SITE SUPERVISOR SIGNATURE:_____
DATE:_____

ATTENDANCE/PERFORMANCE RATING SHEET

FORM NUMBER: 032-02-305

PURPOSE OF FORM - This form provides a written means for the worker/case manager to monitor a VIEW participant's progress and attendance in a work experience or FEP placement on a monthly basis.

USE OF FORM - This form is used by the work site supervisor to record the **participant's** attendance and evaluate performance in the work experience **or FEP** position. **It may also be completed by the Case Manager based upon information provided by the employer verbally.** The form is also used by the worker/case manager to evaluate satisfactory participation (attendance) and any need for intervention to enhance the VIEW participant's progress. Usage of the forms with FEP placement is optional. The ESW may contact the FEP employee for a verbal update. Information obtained must be noted in the VIEW record.

NUMBER OF COPIES - Original

DISPOSITION OF COPIES - The original is mailed to the agency by the fifth calendar day after the report month and becomes a part of the case record.

INSTRUCTIONS FOR PREPARING THE FORM

The agency will be responsible for informing the work site supervisor of his responsibility to prepare the form monthly. **A six-month supply of the form may be given to the employer at the time the agreement is completed. Identifying information should be completed by the Case Manager prior to giving this form to the employer.**

For CWEP placements, the agency will be responsible for informing the work site supervisor of the number of hours the participant will be assigned each month.

All sections of the form need to be completed in their entirety to enable the worker/case manager to evaluate performance and monitor attendance.

The work site supervisor will be responsible for completing, signing, dating, and mailing the form to the agency by the fifth calendar day after the close of the report month.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIRGINIA INITIATIVE FOR EMPLOYMENT
NOT WELFARE (VIEW)

Case Name: _____
Client's Name: _____
Case Number: _____
VIEW Worker: _____

VIEW NON-COMPLIANCE CHECKLIST

THE VIEW WORKER MUST COMPLETE THIS FORM, AND THE VIEW SUPERVISOR MUST SIGN THIS FORM BEFORE THE PARTICIPANT IS REFERRED TO THE ELIGIBILITY WORKER FOR NON-COMPLIANCE. THE INFORMATION CHECKED MUST BE DOCUMENTED IN THE CASE RECORD.

Section I. To be completed by the VIEW worker.

The following is documented in the case record:

[ ] The client has been screened and assessed for disabilities or declined to be screened.
[ ] Reasonable accommodations have been provided, if appropriate.
[ ] The client was informed verbally of the potential sanction or an attempt was made to inform the client.
[ ] Good cause was evaluated and the client does not have good cause for non-compliance.

The participant without good cause:

[ ] Failed/refused to report for assessment/reassessment or other required interview.
[ ] Failed/refused to actively engage in or complete job search.
[ ] Failed/refused to complete a Community Work Experience.
[ ] Failed to accept a bona fide job offer.
[ ] Terminated or was terminated from employment.
[ ] Terminated or was terminated from a Full Employment Program work site.
[ ] Failed/refused to complete any other activity assigned on the Activity and Service Plan.

Specify activity/requirement: _____
_____
_____

Section II. To be completed by the VIEW supervisor.

I have reviewed the case record. There is documentation in it to support the determination that this participant has failed to comply with VIEW program requirements, good cause does not exist, and accommodations have been provided if needed.

_____ _____
Supervisor's signature Date

032-03-671

VIEW NON-COMPLIANCE CHECKLIST

FORM NUMBER - 032-03-671

PURPOSE OF FORM - This form must be completed prior to notifying the eligibility worker to sanction a client for noncompliance with VIEW requirements to ensure that the appropriateness of the sanction has been documented in the case record.

USE OF FORM – The form is completed by the VIEW worker and submitted to the supervisor for approval to sanction a VIEW participant. The form is used prior to imposing a sanction.

NUMBER OF COPIES - One.

DISPOSITION OF COPIES - The original is filed in the case record.

INSTRUCTIONS FOR PREPARING FORM NUMBER OF COPIES - The VIEW worker completes identifying information at the top right of the form, indicates the type of documentation filed in the case record to support action to sanction/close the case, and what action or failure to act caused the sanction.

The supervisor signs and dates the form if in concurrence that there was noncompliance, and that there was no good cause not to cooperate.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
TEMPORARY ASSISTANCE FOR NEEDY
FAMILIES (TANF)

Case Name: _____
Client's Name: _____
Case Number: _____

Do you have a disability?

If you have a disability that makes it harder for you to do the things we ask you to do, **please tell us**. A disability is a physical or mental condition that limits one or more life activities.

These conditions may include:

- Diseases (i.e. diabetes, epilepsy, heart)
- Learning disabilities (i.e., a problem reading, writing, or doing math)
- Mental retardation
- Depression or other mental health problems
- Limited ability to walk or stand
- Hearing or vision loss
- History of drug or alcohol addiction

Help is available

If you tell us you have a disability, we can help you by:

- Calling or visiting if you are not able to come to the office
- Telling you what the letters we send to you mean
- Helping you complete a form
- Referring you to services to help you
- Helping to verify information or gather forms
- Helping you appeal if you disagree with a decision we make
- Changing program requirements

Federal law protects people with disabilities

The Americans with Disabilities Act (ADA) is a federal law that says people with disabilities have the same rights to benefits or services from the Department of Social Services as other people. You will not be denied benefits and services because of your disability. If you have a condition that makes it hard for you to do what we ask, we will help you find a way to get the benefits and services available to you. **If you need help, tell us.**

Known conditions and disabilities

_____

_____

_____

_____

Your right to complain

If you feel your benefits or services are denied or changed because of your disability, you may call your worker to arrange a conference or file an appeal. You may also appeal by calling the Virginia Department of Social Services toll free at 1-800-552-3431. If you have a hearing or speech impairment, you may call the Virginia Department of Social Services toll free at 1-800-828-1120 (Text/TTY). Requests for an appeal may also be made in writing to:

Hearing and Legal Services Manager
Virginia Department of Social Services
7 North Eighth Street
Richmond, Virginia 23219-3301

You may file a discrimination complaint by contacting:

U.S. Department of Health and Human Services
Office of Civil Rights – Region III
Suite 372
Public Ledger Building
150 S. Independence Mall West
Philadelphia, Pennsylvania 19106-3499
Hotline: 1-800-368-1019
TDD: (215) 861-4440
Fax: (215) 861-4431

Receipt of "Do you have a disability form?"

I received a copy of the form "Do you have a disability?" and it was explained to me.

Client's Signature: _____ Date: _____

This form was explained to the client on _____, who refused to sign it.

Worker's Signature_____ Date _____

(Page 2 of 2)

DO YOU HAVE A DISABILITY?

FORM NUMBER - 032-03-670

PURPOSE OF FORM - This form provides an opportunity for an applicant to identify any known conditions or disabilities, the worker to explain types of help the agency can offer, and rights of people with disabilities.

USE OF FORM – The form must be explained to each individual applying for TANF and signed by the applicant or worker prior to case approval. This form is used by the agency as an initial assessment of the individual's ability to participate in eligibility or employment-related activities.

NUMBER OF COPIES - Three.

DISPOSITION OF COPIES – The original is filed in the case record, a copy is sent to the VIEW worker when the client is referred to VIEW, and a copy is given to the applicant.

INSTRUCTIONS FOR PREPARING FORM NUMBER OF COPIES - Review the information on the form, assist the individual, as needed, in completing the section on known disabilities, and explain federal protections and avenues of complaint. If the applicant refuses to sign the form, the worker must complete the statement.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
Temporary Assistance for Needy Families (TANF)
Virginia Initiative for Employment
Not Welfare (VIEW)

Locality _____

Case Number _____

Date of Mailing _____

TANF 24-MONTH ADVANCE NOTICE OF PROPOSED ACTION

Name: _____

Address: _____

_____

DEAR _____:

Your TANF grant will be terminated effective _____ due to the expiration of the 24-month time limit on receipt of cash assistance unless you qualify for an extension as explained below. If you had a verified disability or had to care for a household member with a verified disability while participating in the VIEW program, your worker will determine if the disability prevented you from satisfactorily participating in VIEW. You and your children are not eligible for cash assistance again until 24 months after the effective date above or following termination of your transitional Medicaid coverage, or transitional transportation, whichever is later. (TANF Policy, Sections 901.9 and 901.11)

If you disagree with the action taken on your case you may ask for a conference with your worker whose name, address, and telephone number appear below, or you may ask for a fair hearing before the State Department of Social Services. The attached leaflet explains how to ask for a fair hearing.

If you appeal the proposed action on your case before the effective date above, assistance may continue. However, if assistance is continued, you may have to repay benefits you received during the appeal process if the hearing decision supports the action being proposed by the agency. You may waive your right to continued assistance by submitting a written statement to your eligibility worker indicating your desire to refuse such assistance.

Under certain extreme circumstances, an extension of TANF benefits may be granted. To be considered for extended TANF benefits, you must contact your employment services worker and apply in writing for a specific "hardship exception." You must sign and date your request. This written request must be made prior to the effective date above. Not everyone is eligible for a hardship exception.

An extension of TANF benefits will be considered ONLY if:

- You have satisfactorily participated in VIEW activities while receiving TANF, and
- You have never been sanctioned in VIEW for failing to participate in assigned activities or for leaving employment, and
- You have not been sanctioned in VIEW more than once for reasons other than above; and

In addition, the reasons for hardship exceptions are LIMITED TO the following:

- You are already in an approved employment-related education/training program that will be completed within a year; or
- You live in an area of high unemployment (10% or higher); or
- You have lost your job through no fault of your own (such as, layoff); or
- You have not been able to find a job where the earnings are at least as much as your TANF grant plus $90.

AGENCY REPRESENTATIVE _____	
ADDRESS _____	PHONE NO. _____
_____	

032-03-368/3 (4/05)

TANF 24-MONTH ADVANCE NOTICE OF PROPOSED ACTION
032-03-368

PURPOSE OF FORM – To inform a TANF family that their benefits will be terminated at the end of the 24th month, their right to appeal a case closure, and their right to request a hardship exception.

NUMBER OF COPIES – Two.

DISPOSITION OF FORM – The form must be mailed or available at the local agency in the case of an assistance unit which is homeless, at least 60 days before the effective date of the action, excluding the date of mailing and the effective dates. A copy of the completed form must be in the case record.

INSTRUCTIONS FOR PREPARATION OF FORM – Complete the agency information at the top and bottom of the letter, the case name and address, salutation, and the proposed effective date of termination. This date is the last day of the 24th month of assistance.

Commonwealth of Virginia
Department of Social Services
NOTICE OF INTENTIONAL PROGRAM VIOLATION

Name and Address	Case Name
	Case Number
	Locality Date

An investigation of your ☐ Temporary Assistance for Needy Families (TANF) case, or ☐ Food Stamp case has recently been completed. We have reason to believe you intentionally violated a program rule because (may be continued on reverse):

We have the following evidence to support our case against you (may be continued on reverse):

Therefore, a request for an Administrative Disqualification Hearing for the purpose of proving the above allegation will be made. This hearing determines whether you or another person in your household should be disqualified from participation in the program(s) checked above. Tell your worker if you have a disability or limited ability to speak and understand English and need to have special arrangements made to attend or present your case at the hearing.

You or your representative may look at the evidence at the local social services department by calling the number below to arrange a convenient time.

You have the right to an Administrative Disqualification Hearing prior to any action taken by the local Department of Social Services to disqualify you from receiving benefits. If you wish, you may waive your right to this hearing. By signing the attached waiver, you will be disqualified from receiving benefits for the period shown below whether or not you admit to the facts as presented.

Temporary Assistance for Needy Families (TANF)

☐ 6 months, 1st violation ☐ 12 months, 2nd violation ☐ permanently, 3rd violation

If you are not receiving TANF benefits now, you will be subject to the above disqualification penalty whenever you apply for TANF and are found eligible for TANF benefits again.

Food Stamps

☐ 6 months, 1st violation ☐ 12 months, 2nd violation ☐ permanently, 3rd violation
☐ Other (Specify)

If you do not sign the attached waiver, an Administrative Disqualification Hearing will be held. If the hearing finds that you committed an Intentional Program Violation, you will be disqualified for the same period of time as shown above.

Neither signing the attached waiver nor holding the hearing shall prevent the State or Federal government from prosecuting you for an Intentional Program Violation in a criminal or civil court action, or from collecting the overpayment or overissuance. You have the right to remain silent concerning the allegations as anything said or signed by you could be used against you in a court of law.

Worker	Telephone	For Free Legal Advice Call

032-03-721/7 (11/04)

NOTICE OF INTENTIONAL PROGRAM VIOLATION – continuation **Page -2-**

NOTICE OF INTENTIONAL PROGRAM VIOLATION

FORM NUMBER - 032-03-721

PURPOSE OF FORM - To advise a person that he/she is suspected of having committed an intentional program violation (IPV).

USE OF FORM - To be completed by the local agency to advise an individual that IPV is suspected. This form is sent with the Waiver of Administrative Disqualification Hearing.

NUMBER OF COPIES - Two.

DISPOSITION OF FORM - The original is sent to the individual suspected of committing IPV. The local agency retains a copy.

INSTRUCTIONS FOR PREPARATION OF FORM - Complete the identifying information at the top.

In the paragraph beginning "An investigation of your...," check the program involved in this notification (it may be either TANF or Food Stamps or both.)

The paragraph continues, "We have reason to believe ...." Describe the violation the household member allegedly committed.

In the paragraph beginning, "We have the following evidence ...," describe the evidence which supports the allegation.

Use back of form if necessary for these explanations.

In the paragraph describing the lengths of disqualification, check the blocks applicable to the program(s) involved in the IPV. For Food Stamps, enter the number of months in the disqualification period for the 1st and 2nd violations.

Sign the form and complete the information at the bottom.

PAGE 41 INTENTIONALLY LEFT BLANK

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES

VIEW NOTICE OF SANCTION/TERMINATION

Participant Name_____Agency_____
Address_____Date_____
_____Case ID#_____

You did not participate as required in the Virginia Initiative for Employment Not Welfare (VIEW) Program. Participation includes maintaining employment as well as keeping appointments and carrying out assignments.

UNLESS YOU HAVE GOOD REASON FOR NOT PARTICIPATING, YOUR BENEFITS WILL BE STOPPED. THIS IS CALLED A SANCTION OR TERMINATION.

☐ Your household's entire **TANF** or **TANF-UP** benefits will be terminated because you:

- ☐ Did not appear for the Initial Assessment Interview on _____/_____/_____
- ☐ Refused to sign the Agreement of Personal Responsibility.

☐ Your household's entire **TANF** or **TANF-UP** and Food Stamp benefits will be suspended due to sanction because you:

- ☐ Failed to keep your scheduled appointment on _____/_____/_____.
- ☐ Failed to complete your assignment to _____.
- ☐ Failed to maintain employment at _____.
- ☐ Other:_____.

If you wish to discuss your reasons for not participating, and possibly stop the sanction/termination, you must get in touch with your worker/case manager by _____/_____/_____. If you call after the date shown, or if you do not call at all, you will lose your benefits.

If you are sanctioned and receive Food Stamp benefits, **your Food Stamp benefits may also be affected**.

The termination of **TANF** for failing to appear for the Initial Assessment or refusing to sign the Agreement of Personal Responsibility means that your **TANF** case will be closed until you reapply and are found eligible for **TANF/TANF-UP**.

Unless you take action to stop this process, the sanction/termination will last:

☐ For at least one payment month or until you participate, whichever is longer.

☐ For a minimum of 3 consecutive months and until you participate. (If you receive this sanction, you will not be eligible for a hardship exception.)

☐ For a minimum of 6 consecutive months and until you participate. (If you receive this sanction, you will not be eligible for a hardship exception.)

Your Eligibility Worker will let you know when the sanction or termination will begin.

VIEW Worker/Case Manager_____

Telephone Number_____

032-02-307/1 (8/99)

NOTICE OF SANCTION/TERMINATION

(032-02-307/1) (8/99)

PURPOSE OF FORM - This form gives VIEW participants notice that they have failed to comply with program requirements, advises VIEW participants of the consequences of non-compliance, and advises them of how they may show good cause for non-compliance.

USE FOR FORM - This form **may** be sent to VIEW participants to inform them that they are not in compliance with VIEW program requirements and the reason why that determination was made. The form also states that the participant can contact the worker to explain why there was good cause for the non-compliance.

NUMBER OF COPIES - Original and one copy

DISPOSITION OF COPIES - Original - Mailed to VIEW Participant
Copy - Case Record

INSTRUCTIONS FOR PREPARING FORM

This form provides the VIEW participant with written notice that the participant has failed to comply with VIEW program requirements and the consequences of that non-compliance.

Check the appropriate block at the top of the form and complete the corresponding statement in sufficient detail for the VIEW participant to understand the reason he or she is considered to be out of program compliance.

Check the appropriate block at the bottom of the form to indicate the termination/sanction period.

Keep all responses to this notice in the case record, preferably attached to the notice.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

Participant Name:_____

Case Number:_____

ESW:_____

Date Request Received:_____/_____/_____

HARDSHIP EXCEPTION DETERMINATION FORM

I. HARDSHIP REQUESTED (Check One)

❑ Factors Related to Job Availability are Unfavorable

❑ Actively Seeking Employment

❑ Employment-related Education/Training

❑ Loss of Employment Unrelated to Job Performance

❑ Application was timely: _____ Within 60 days _____ Not within 60 days due to disability reason

❑ Yes ❑ No Copy Of Request Attached

II. POLICY REVIEW (check applicable statement)

Excluding any sanctions improperly imposed:

❑ Has not been sanctioned for failing to satisfactorily participate in assigned activities (components)
❑ Has not been sanctioned more than once for failure to comply with program requirements (required interviews, assessments, etc.)
❑ Has never been sanctioned for leaving employment while in the VIEW Program

❑ Yes ❑ No Does the participant meet all three qualifying criteria?
If yes, continue to Section III and IV. If no, the participant is ineligible for a hardship exception.

III. EVALUATION OF ELIGIBILITY FOR HARDSHIP EXCEPTION

❑ Yes ❑ No Meets the conditions of a 90 day hardship?

A. 90-Day Hardship Conditions

1. Actively Seeking Employment

❑ Unable to find employment that, when combined with all other sources of income, equals or exceeds the TANF grant plus the $90 standard work deduction.

TANF Grant	_____	Employment:	_____
Work Deduction:	$90	Other Income:	_____
Total:	_____	Total:	_____

❑ Satisfactorily participated in all job searching activities while in VIEW.

III. EVALUATION OF ELIGIBILITY FOR A HARDSHIP EXCEPTION - CONT'D

2. Loss of Employment Unrelated to Performance

- ❑ Has applied for unemployment compensation
- ❑ Has lost employment for reasons other than performance (If sufficient quarters of employment existed, client would be eligible for unemployment compensation.)

❑ Yes ❑ No Meets the conditions of a 12 month hardship?

B. 12-Month Hardship Conditions

1. Employment-Related Education/Training

- ❑ Enrolled in employment-related education/training for at least 9 of the last 12 months.
- ❑ Is making satisfactory progress in education or training.
- ❑ Education/training is expected to be completed in 12 months or less.
- ❑ Request is not for any of the following educational components: ABE, GED, ESL, High School.

2. Factors Related to Job Unavailability

- ❑ Participant has been actively seeking employment.
- ❑ Unemployment rate in locality for last 2 quarters of available data has been 10% or greater.

==========

IV. DISPOSITION

❑ Yes ❑ No Eligible for hardship exception? If not, why?_____

_____

Approved: ❑ One year hardship for (Reason):_____

_____

From:_____/_____/_____ To: _____/_____/_____

Approved: ❑ 90 Day hardship for (Reason):_____

_____

From:_____/_____/_____ To: _____/_____/_____

Worker/Supervisor
Comments:_____

_____

_____

HARDSHIP EXCEPTION DETERMINATION FORM

FORM NUMBER - 032-03-376

PURPOSE OF FORM - This form is designed to help the ESW determine if a VIEW participant is eligible for a Hardship Exception to the TANF 24 month time limit.

USE OF FORM - The form is completed when a request for a hardship exception has been received by the agency.

NUMBER OF COPIES - One original in case record.

INSTRUCTIONS FOR COMPLETION OF FORM - Section I documents which hardship exception is being requested. A copy of the request should be attached to the form.

Section III documents the particular policy requirements for individual 90 day and 12 month hardship exceptions. To qualify for a hardship exception, the conditions must be met.
(Check "yes").

Section IV documents the final determination of whether a VIEW participant who has reached the end of the 24 month time limit is eligible for a particular hardship exception.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
EMPLOYMENT SERVICES (VIEW)

PARTICIPANT NAME:_____

CASE NUMBER:_____

DATE:_____

NOTICE OF HARDSHIP EXCEPTION

_____

_____

_____

YOUR REQUEST FOR A HARDSHIP EXCEPTION TO THE TANF 24 MONTH TIME LIMIT HAS BEEN APPROVED / DENIED (CIRCLE ONE) FOR THE FOLLOWING REASON(S):

_____

_____.

IF APPROVED, THE EXTENSION OF TANF BENEFITS IS FOR A _____

PERIOD, BEGINNING _____, AND ENDING_____.

YOUR REASSESSMENT APPOINTMENT WITH YOUR VIEW WORKER IS _____,

_____._____._____. YOU MUST SHOW UP FOR THIS APPOINTMENT
MONTH DAY YEAR IN ORDER TO CONTINUE RECEIVING TANF BENEFITS.

YOUR EXTENSION OF TANF ASSISTANCE IS CONDITIONAL BASED UPON THE FOLLOWING:

(1) YOU MUST CONTINUE TO MEET THE TANF AND VIEW PROGRAM REQUIREMENTS.
(2) YOU MUST CONTINUE TO MEET THE CONDITIONS UNDER WHICH THE HARDSHIP HAS BEEN GRANTED.
(3) IF YOU DO NOT COMPLY WITH PROGRAM REQUIREMENTS, YOUR HARDSHIP WILL END AND YOUR TANF BENEFITS WILL TERMINATE.

VIEW WORKER:_____

PHONE NUMBER:_____

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR VIEW WORKER. IF YOU DISAGREE WITH THE PROPOSED ACTION, YOU MAY CONTACT YOUR WORKER TO ASK FOR A CONFERENCE, OR YOU MAY REQUEST IN WRITING A HEARING TO APPEAL THE ACTION.

APPEALS SHOULD BE SENT TO: MANAGER, APPEALS AND FAIR HEARINGS
VIRGINIA DEPARTMENT OF SOCIAL SERVICES
7 NORTH EIGHTH STREET
RICHMOND, VIRGINIA 23219-3301

032-03-377(7/99)

NOTICE OF HARDSHIP EXCEPTION

FORM NUMBER - 032-03-377

PURPOSE OF FORM - This form provides a VIEW participant who has applied for any of the hardship exceptions with a written decision on his application.

USE OF FORM - This form is used to notify a VIEW participant of the decision on his application for a hardship exception to the 24 months TANF time limit. The form will be used for both approvals and denials of hardship exceptions.

NUMBER OF COPIES - One original and two copies.

DISPOSITION OF COPIES - Original - mailed to VIEW participant.
One copy - filed in VIEW case record.
One copy - eligibility worker.

INSTRUCTIONS FOR PREPARATION OF FORM
The form will be completed by the VIEW worker with the appropriate identifying information (participant name, case number, date) and the VIEW participant's name and address.

The hardship will be approved or denied, with the VIEW worker circling the correct choice, stating the reason(s) for the approval or denial, and establishing the time frame for the hardship, if approved. The worker will also set a reassessment appointment, which the participant must keep. If the hardship is denied, the worker will state the reason(s) why, and cross through the information on the extension of benefits and the reassessment appointment. The VIEW worker's signature and telephone number are required.

This form must be mailed to the applicant within 30 days **of receipt of** the **participant's** hardship **request for an exception**.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
Temporary Assistance for Needy Families (TANF)
Food Stamp Employment and Training Program (FSET)

Case Name:_____

Case I.D.#_____

CONTACT SHEET

WORKER NAME OR NUMBER	DATE (M.D.Y)	CIRCLE ONE	PERSON(S) CONTACTED	CIRCLE ONE	RECORD BRIEF INFORMATION ABOUT EACH CONTACT* PLEASE PRINT.
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	

*This form may replace the case narrative if it is used to record all case information.

032-02-078/5 (7/00)

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
Temporary Assistance for Needy Families (TANF)
Food Stamp Employment and Training Program (FSET)

Case Name:_____

Case I.D.#_____

CONTACT SHEET

WORKER NAME OR NUMBER	DATE (M.D.Y)	CIRCLE ONE	PERSON(S) CONTACTED	CIRCLE ONE	RECORD BRIEF INFORMATION ABOUT EACH CONTACT* PLEASE PRINT.
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	
		Phone Office Field Letter		Assessment Review/ Reassessment Other	

*This form may replace the case narrative if it is used to record all case information.

032-02-078/5 (7/00)

CONTACT SHEET

FORM NUMBER – 032-02-078

PURPOSED AND USE OF FORM – This form provides a record of each case action and each client and collateral contact.

NUMBER OF COPIES – One.

DISPOSITION OF FORM – Original is maintained in the registrant's case record.

INSTRUCTIONS FOR PREPARATION OF FORM

This form includes all contacts of any kind with TANF recipient and any case action taken. These include, but are not limited to, interviews which the participant, other contacts (letters, notices, phone calls) with the date a participant begins or leaves an assigned activity.

This form may replace the case narrative. If the form is used to replace the case narrative, it must include all pertinent case information.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
EMPLOYMENT SERVICES PROGRAM
COMMUNICATION FORM

REGISTRANT_____
CASE NAME_____
CASE NUMBER _____
❑ FSET ❑ GR ❑ TANF ❑ TANF-UP

==========

TO_____, EW
FROM _____, ESW

Date_____
Reply Needed By_____

❑ Reevaluation of non-exempt/mandatory status is requested because_____
_____
_____

❑ Volunteer no longer wishes to participate.

❑ Individual will enter/entered employment on___/____/____
#Hours/week_____ Rate of pay $_____Per_____
Employer_____

❑ Please send verification of employment.

❑ Individual will enter education or training activity on _____/_____/_____
Location_____

❑ Individual will be a participant in work experience. Please provide the FS or GR dollar amount for the month of
_____

❑ Individual has failed to comply with program requirements.
Reason _____
_____

❑ Good cause does not exist.

❑ Notify ESW if aware of good cause reason.

❑ Comparability exists.

❑ Sanction for (check appropriate answer)
__ Until notified of compliance ___ 3 months and compliance
__ 1 month and compliance ___ 6 months and compliance

❑ Please provide the dollar amount of reduction due to employment or sanction.

❑ Please notify when sanctioned individual has been added back to FS unit

❑ Other _____
_____

==========

TO_____, EW
FROM _____, ESW

Date_____
Reply Needed By_____

❑ Result of reevaluation of non-exempt/mandatory status
_____

❑ Non-exempt/mandatory individual now exempt.
Reason_____

❑ Volunteer no longer wishes to participate.

❑ Individual will enter/entered employment ____/___/____
Hours/week_____Rate pay$_____Per_____
Employer_____

❑ Individual/household no longer eligible for FS or GR
Case closed due to: (check one)
❑ Sanction; ANPA sent
❑ Employment; Benefit reduction/savings information provided below
❑ Other_____
Effective Date:_____

❑ Individual deleted from FS household due to:(check one)
❑ Sanction: ANPA sent
❑ Other_____
Effective Date _____

❑ Effective with payment on _____/_____/_____, benefits will be reduced from __$_____ to __$_____

❑ Individual appealed sanction. Pre-hearing conference scheduled For _____/_____/_____ at _____(time)

❑ Sanction ended effective _____/_____/_____.
Mandatory registrant has been added back to FS unit.

❑ Amount of FS allotment/GR payment for month of _____was $_____

❑ Individual may be unable to participate in ESP/FSET program because _____
_____

❑ New certification period:
from _____to _____

❑ Individual can ❑ Read English ❑ Write English

❑ Other_____
_____

EMPLOYMENT SERVICES PROGRAMS COMMUNICATION FORM

EMPLOYMENT SERVICES PROGRAMS COMMUNICATION FORM

FORM NUMBER - 032-02-072

PURPOSE OF FORM – To exchange information about VIEW participants between the eligibility worker and the employment services worker.

USE OF FORM – Either the eligibility worker or the employment services worker may originate the form at the time circumstances change for the participant that require the exchange of information.

NUMBER OF COPIES – Three.

DISPOSITION OF FORM – This form is prepared in triplicate. Distribution of the top two copies is indicated on the form. The third copy remains attached to the copy being forwarded, in the event the receiving party uses the same form for reply.

INSTRUCTIONS FOR PREPARTION OF FORM

The name of the participant, the case name, case number and program are to be entered in the upper right hand corner by the worker originates the form.

The top half of the form is completed when messages must be communicated to eligibility staff from employment services staff. The employment services worker will check whichever block communicates the desired information or requests the desired information.

The bottom half of the form is completed when the eligibility staff is either returning the form to employment services with the requested information completed, or when the eligibility staff is communicating information to employment services. The eligibility worker will check whichever blocks are applicable to the situation.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

EXCHANGE OF INFORMATION FORM

DATE:_____CASE#:_____

CASE NAME:_____

CLIENT NAME:_____

CLIENT ID:_____MEMBER#:_____

FROM EW:_____

TO ESW:_____

_____24 MONTH ELIGIBILITY TERMINATION DATE:_____.

_____APPEAL PRIOR TO 24 MONTH CLOSURE. CASE REMAINS OPEN UNTIL APPEAL RESOLVED. SCHEDULED APPEAL DATE:_____.

_____APPEAL OF HARDSHIP DENIAL PRIOR TO 24 MONTH CLOSURE. CASE REMAINS OPEN UNTIL APPEAL RESOLVED.

_____REAPPLICATION-PREVIOUS FAILURE TO SIGN AGREEMENT OF PERSONAL RESPONSIBILITY. SIGNED AGREEMENT ATTACHED. EFFECTIVE DATE OF TANF APPROVAL:_____.

_____CLIENT VIEW STATUS CHANGED FROM _____TO_____.

_____CLOCK ADJUSTED TO:_____.

_____OTHER:_____.

==========

FROM ESW:_____

TO EW:_____

_____FIRST HARDSHIP_____GRANTED FROM_____TO_____.

_____SUBSEQUENT HARDSHIP_____GRANTED FROM_____TO_____.

_____HARDSHIP DENIED ON_____.

_____HARDSHIP TERMINATED ON_____.

_____EVALUATE CLOCK INDICATOR. NEEDS TO BE_____.

_____EVALUATE CLOCK DATE. NEEDS TO BE _____.

_____EVALUATION PARTICIPATION COUNTER. NEEDS TO BE_____.

_____OTHER:_____.

032-03-375/1 (6/00)

VIEW EXCHANGE OF INFORMATION FORM

FORM NUMBER - 032-03-375

PURPOSE OF FORM - This form provides the means by which the employment services and eligibility workers may communicate information related to hardships, appeals, case transfers, and corrections to clock information. It also provides the required case documentation for such information.

DESCRIPTION OF FORM - The heading of the form provides space for identifying information on the case. The top half of the form is for the use of the eligibility worker and the bottom half is for the use of the employment services worker. Workers need to maintain copies of the form in case records both at the time the form is sent and when a reply is received.

NUMBER OF COPIES - Original to receiving worker.
One copy retained in case record by sending worker.

INSTRUCTIONS FOR COMPLETING THE FORM:

1. Enter the current date, case number, case name, client name, client ID and member number in the case/client section.

2. The worker sending the form needs to complete the appropriate section of the form using their name and/or worker ID and the name and/or worker ID of the worker to whom the message is being sent.

3. The sending worker will check the appropriate message(s), complete any necessary information, and forward the form to the appropriate staff.

4. The receiving worker needs to act on the information or respond to the sending worker as soon as administratively possible.

MEDICAL EVALUATION

It is our goal to assist the individual named below in preparing for the transition from welfare to work. This person states that he/she is unable to work. Please give careful consideration in completing this medical evaluation. The information that you provide will be used to determine occupations that this individual may be able to perform, even if there are some limitations.

Commonwealth of Virginia
Department of Social Services
Temporary Assistance for Needy Families (TANF)
Virginia Initiative for Employment not Welfare (VIEW)
Food Stamp Employment and Training Program (FSET)

Agency Name _____
Address _____
_____
Agency Contact _____
Phone # _____
Case Number _____
Case Name _____

Patient's Name: _____ **Address:** _____

Birth Date: _____/_____/_____ **SS#:** ___ ___ ___-- ___ ___ --____ ____ ____ **Phone#:** _____

WORK-RELATED LIMITATIONS:

1. Date of examination on which this medical evaluation is based___/___/___

2. In terms of working for pay / competitive employment and the patient's current health issue(s), check that which is ***MOST*** applicable at this time.

A. ☐ Patient is currently able to work.

↓

Patient can currently work without limitations or modifications. Skip the remaining questions and sign at the bottom of page 2

B. ☐ Able to work with limitations and/or modifications at least 8 hours per week

↓

Patient is able to work in a limited capacity and/or with modifications. Please complete the remaining questions.

↓

Anticipated duration of limitation or modification (Check one)

☐ Less than 60 days
☐ 60 – 90 days
☐ Greater than 90 days. Specify duration: _____

C. ☐ Unable to work

↓

Patient is unable to work in any capacity at this time. Please complete the remaining questions.

↓

Anticipated duration of incapacity. (Check one)

☐ Less than 60 days
☐ 60 – 90 days
☐ Greater than 90 days. Specify duration: _____

3. Please indicate the primary medical reason for the patient's inability to work or need to work with modifications and/or limitations in the space entitled "primary diagnosis" provided below.

Primary Diagnosis: _____

If other medical issues contribute to the patient's inability to work or need to work with modifications and/or limitations, please record those in the space entitled "secondary diagnoses" provided below.

Secondary Diagnosis: _____

_____

032-03-654/2 (11/04) (Formerly #032-03-378) **(OVER)** →

WORK-RELATED LIMITATIONS (CONT'D):

4. Check all areas that the patient currently has limitations in that result in his/her inability to work or result in his/her ability to work in a limited capacity or with modifications. Check all that apply:

- ☐ Lifting objects greater than: _____ POUNDS (**insert #**)
- ☐ Bending over / stooping down / reaching for objects
- ☐ Manual dexterity activities (typing, handling small objects)
- ☐ Hearing
- ☐ Vision
- ☐ Cognition
- ☐ Sitting for greater than 1 hour at a time
- ☐ Standing for greater than 1 hour at a time
- ☐ Walking distances greater than 50 feet
- ☐ Climbing four to six steps
- ☐ Driving an automobile
- ☐ Interpersonal relationships with co-workers

Other work limitations not listed above: _____

5. If the patient is unable to work at this time (see question #2 C on previous page), can he/she participate in any of the following at this point in time? Check all activities that the patient can presently participate in. For each that he/she can participate in, please indicate the number of days per week and hours per day that you think would be appropriate given his/her limitations.

ACTIVITY	Check here if patient can participate	Days per week	Hours per day
a. Classroom based activities leading to a GED or other certification	☐		
b. Educational activities that address job etiquette, social skills, positive job behaviors, etc.	☐		
c. Skills training in an occupation within his/her health-related limitations	☐		
d. Resume writing and practice in completing job applications	☐		
e. Participating in mock job interviews	☐		
f. Job Searching (contacting employers; getting on a bus)	☐		
g.	☐		

WORK-RELATED ADVISING:

6. Have you advised the patient to reduce his/her work hours for health-related reasons? ☐ Yes ☐ No
7. Have you advised the patient to take a leave of absence for health-related reasons? ☐ Yes ☐ No
8. Have you advised the patient to quit his/her job for health-related reasons? ☐ Yes ☐ No
9. Have you advised the patient to apply for disability? ☐ Yes ☐ No

COMPLIANCE:

10. If physical therapy, counseling, or other treatments were prescribed, is the patient complying? ☐ Yes ☐ No ☐ Don't know
11. Does the patient's condition hinder his/her ability to care for his/her children? ☐ Yes ☐ No
12. If medication was prescribed, is the patient complying? ☐ Yes ☐ No ☐ Don't know
13. If the patient reviewed this form, would it jeopardize his/her physical or emotional health or well being? ☐ Yes ☐ No
14. Does the patient require additional evaluation and/or assessment to determine his/her current and/or future work capacity?

☐ Yes ☐ No

(Check all that apply)

- ☐ Psychiatrist, psychologist or other mental health provider
- ☐ Rehabilitation professional – physical therapist, occupational therapist, speech-language pathologist, etc.
- ☐ Educational specialist
- ☐ Medical specialist – orthopedist, neurologist, etc.
- ☐ Other: _____

Print Name of Physician _____

_____/_____/_____
Date form was completed

Signature of physician _____

(_____) - _____-_____
Physician's telephone number

Physician's address _____

MEDICAL EVALUATION

FORM Number – 032-03-654

PURPOSE OF FORM – To provide medical information concerning the mental/physical condition of an applicant/recipient.

USE OF FORM –To be used by the local social services agency in securing medical information when a written statement is necessary to determine ability to work.

NUMBER OF COPIES – One.

DISPOSITION OF FORM – Submitted to the examining or treating physician and, upon return to the local department, filed in the case record.

INSTRUCTIONS FOR PERPARATION OF FORM – The information at the top of the form is completed by the eligibility/VIEW worker prior to submittal of the form to the examining or treating physician. The information requested in Items 1 through 14 is entered by the examining or treating physician. For number 5, item g, the worker may fill this in with an activity not listed. The physician is to sign the form and also complete the identifying information in the appropriate spaces.

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF SOCIAL SERVICES
VIEW PROGRAM

Notification of Workers' Compensation Requirements and Procedure

Virginia Initiative for Employment not Welfare (VIEW) participants not eligible for Medicaid assigned to the Community Work Experience Program (CWEP) and placed at a site shall be deemed employers of the Commonwealth for the purposes of the Workers' Compensation Act.

The VIEW participant should in the event of a covered injury at the CWEP placement:

1. Immediately give notice to the employer or his designee, in writing, of the injury or occupational disease and the date of the accident or notice of the occupational disease.

2. Promptly seek treatment from one of their TANF health care providers. If assistance is needed in finding a doctor, contact your VIEW worker.

The employer should:

1. At the time of the accident, determine the name of the TANF participant's health care provider and immediately set up an appointment for them to see the physician. However, if the injury is of a critical nature, arrange for the employee to be sent to the hospital.

2. Investigate the accident facts, taking note of who witnessed the accident and whether the facts appear correct.

3. Complete the Employer's Accident Report form from the employer's perspective and submit completed form to:

   Managed Care Innovations
   PO Box 1140
   Richmond, VA 23218

   A copy of the report must also be sent to

   Virginia Department of Social Services
   Division of Benefit Program
   Economic Assistance and Employment Unit
   7 North Eight Street
   Richmond, VA 23219-3301

Worker	Telephone	For Free Legal Advice Call

Notification of Workers' Compensation Requirement and Procedure
032-03-675

PURPOSE OF FORM - This form provides notification requirements and procedures in the event of a covered injury to a VIEW participant in a CWEP placement.

USE OF FORM - This form is used to ensure understanding between the VIEW participant and the work site regarding covered injuries for VIEW participants in a CWEP placement not eligible for Medicaid.

NUMBER OF COPIES - Original and two copies

DISPOSITION OF COPIES – Copy remains on file in agency. One copy is retained by the work site and one given to the VIEW participant in a CWEP placement and who is not eligible for Medicaid.

INSTRUCTIONS FOR PREPARING FORM - After discussion with the VIEW participant and the work site representative, this notice will be completed so that both parties have an understanding of their mutual responsibilities.

A separate notice is required for each participant and/or CWEP placement.

Employer's Accident Report

(formerly: Employer's First Report of Accident)
Virginia Workers' Compensation Commission
1000 DMV Drive Richmond VA 23220
See instructions on the reverse of this form

The boxes to the right are for the use of the insurer	Reason for filing	VWC file number
	Insurer code or PEO Ref. No.	Insurer location
	Insurer claim number	

Employer

1. Name of employer (trading as or doing business as, if applicable)	2. Federal Tax Identification Number	3. Employer's Case No. (if applicable)
4. Mailing address	5. Location (if different from mailing address)	
6. Parent corporation /Policy Named Insured (if applicable) or PEO name	7. Nature of business (NAICS code, if applicable)	
8. Name and Address of Insurer or self-insurer for this claim	9. Policy number	10. Effective date

Time and Place of Accident

11. City or county where accident occurred	12. Date of injury	13. Hour of injury ☐ a.m. ☐ p.m ☐ 13a. Time began work ☐ a.m. ☐ p.m ☐	14. Date of incapacity	15. Hour of incapacity
16. Was employee paid in full for day of injury? ☐ Yes ☐ No		17. Was employee paid in full for day incapacity began? ☐ Yes ☐ No		
18. Date injury or illness reported	19. Person to whom reported	20. Name of other witness	21. If fatal, give date of death	

Employee

22. Name of employee (Last, First, Middle)	23. Phone number	24. Sex ☐ Male ☐ Female
25. Address	26. Date of birth 28. Social security number	27. Marital status ☐ Single ☐ Divorced ☐ Married ☐ Widowed
29. Occupation at time of injury or illness (SOC code, if applicable)	30. Is worker covered by PEO policy? ☐ Yes ☐ No	31. Number of dependent children ☐
32. How long in current job? / 33.Date of Hire	34. Was employee paid on a piece work or hourly basis? ☐ Piece work ☐ Hourly	
35. Hours worked per day ☐ / 36. Days worked per week ☐	37. Value of perquisites per week Food/meals $ Lodging $ Tips $ Other $	
38. Wages per hour $ / 39. Earnings per week (inc. overtime) $		

Nature and Cause of Accident

40. Machine, tool, or object causing injury or illness	41. Specify part of machine, etc.	
42. Describe fully how injury or illness occurred		
43. Describe nature of injury or illness, including parts of body affected	43a. Overnight inpatient hospitalization? ☐ Yes ☐ No 43b. Treated in Emergency Room? ☐ Yes ☐ No	
44. Physician (name and address)	45. Hospital or Clinic (name and address)	
46. Probable length of disability / 47. Has employee returned to work? ☐ Yes ☐ No	If yes 48. At what wage?	49. On what date?
50. EMPLOYER: prepared by (name, signature, title)	51. Date	52. Phone number
53. INSURER: (name of processor)	54. Date	55. Phone number
56. THIRD PARTY ADMINISTRATOR (if applicable)	57. Address	58. Phone number

This report is required by the Virginia Workers' Compensation Act

Employer's Accident Report
VWC Form No. 3 (rev. 03/22/02)

INSTRUCTIONS

Employer's Accident Report
(formerly Employer's First Report of Accident)
VWC Form No. 3

Employer

1. Fill out this form whenever one of your employees is injured. Provide all the information requested, except the information in the top right corner. **Please type or print all information in black ink.** Your signature is required on line 50 of the form.

2. Send the original beige form to your insurance carrier, claims servicing agency, or third party administrator for processing. If you are self-insured, send it to your organization's designated office for handling workers' compensation claims.

3. If you are an employer subject to OSHA record-keeping requirements, you may retain a copy of this completed form as a supplementary record of occupational injury or illness. Use block #3 (Employer's Case No.) to cross-reference your master log of accidents and illnesses.

4. If you need additional copies of this form, please request them from your insurance carrier, claims servicing agency, or third party administrator.

Insurance carriers, self-insured employers, Professional Employer Organizations (PEO's), and authorized representatives

1. For accidents meeting one of the seven criteria for establishing a Commission Case File,* submit the original beige form and one copy to the Virginia Workers' Compensation Commission at 1000 DMV Drive, Richmond VA 23220. The code for the reason for filing should be written at the top right of the form.

2. When processing these forms prior to transmittal to the Commission, please include the information requested at the top right of the form, verify that the carrier name and policy number given by the employer are accurate, and enter your name and phone number, and the date of processing at the bottom of the form.

3. Insurer code at the top right of the form refers to the five-digit code assigned by NCCI. If you are self-insured, it refers to a similar five-digit number assigned by the Virginia Workers' Compensation Commission. A PEO must use the VWCC reference number.

4. Additional copies of this form are available without cost by writing to the Commission. Please note that color coding of the forms greatly increases the Commission's efficiency in processing claims, and that any alternative versions of the form you develop yourself require prior approval by the Commission. Write to "Forms" at the listed Virginia Workers' Compensation Commission address.

5. On Lines 8 and 9, the employer or carrier is to give the name of the responsible carrier as set forth on the policy (line 8) and that carrier's policy number (line 9).

6. This form can be filed electronically. If you would like more information, please go to the Virginia Workers' Compensation Commission's Web site (www.vwc.state.va.us) or call us at (804) 367-2084.

*The criteria are (1) lost time exceeds seven days, (2) medical expenses exceed $1,000, (3) compensability is denied, (4) issues are disputed, (5) accident resulted in death, (6) permanent disability or disfigurement may be involved, and (7) a specific request is made by the Virginia Workers' Compensation Commission.

EMPLOYMENT SERVICES PROGRAM FORMS
VIEW

Contract Development Checklist 2

Standard Contract 6

CONTRACTOR
PERIOD OF PERFORMANCE
AMOUNT:
SERVICES PROVIDED:

CONTRACT DEVELOPMENT CHECKLIST

GENERAL CRITERIA:	YES	NO	COMMENTS:
Agency has identified the services or administrative functions needed and the reason for contracting. i.e., LDSS's work becomes more efficient.			
The service is not available in the community free of charge, or at no cost to agency.			
State or local Procurement procedures were followed. Note: If contracting with another State entity, agencies do not have to go out with an RFP.			
If agency has previously contracted with the provider, the following have been evaluated:			
Reports provided timely.			
Required outcomes met.			
If not, section plan developed for improved performance.			
Agency has developed internal procedures for screening and referral of customers to contractor. Staff and contractor have clearly defined procedures for handling absenteeism, lack of progress and other problems that may occur.			
Agency has linked required levels of performance with payment (accepting a minimum number of referrals, placement of target population, payment at designated phases of the contract).			

SCOPE OF SERVICES INCLUDES:	YES	NO	COMMENTS:
Explanation of the roles of the contractor and the agency in providing the service.			
Detailed summary of activities.			
Explanation of the contractor's responsibility regarding reports.			
Description of the numbers and kinds of customers who will receive the service. (i.e., age 25-35, volunteers, high school graduates, etc.).			
Statement of the time frame for the service including beginning and ending dates.			
Description of the specific outcomes anticipated for customers receiving the services, the number of participants to achieve those outcomes and the time frames outcomes will be achieved (i.e., average wage expected and the number obtaining employment, the number completing training, etc.).			
Detailed breakdown of all cost associated with the provision of the service.			
Description of the contract monitoring which will be carried out by the agency.			
Definition of what will constitute acceptable performance by the contractor.			
Description of the action taken both in regard to the contract and in regard to continuation of the service should performance be unacceptable.			

PROGRAM COMPONENTS: (Note: It is recommended that outcome measures for components should exceed that achieved by the agency without benefit of contracting.)			
JOB DEVELOPMENT & JOB PLACEMENT:	YES	NO	COMMENTS:
Number of customers to be referred identified.			
Outcome measures have been established for:			
Percentage/number to be placed.			
Average wage expected at placement or by end of follow-up.			
Percentage to retain for 30/60/90 days.			
JOB READINESS:			
Individual class size and total number of customers to be enrolled have been identified.			
Outcome measures have been established for:			
Percentage/number to complete the class.			
Percentage/number to find employment within 30/60/90 days.			
Retention services to be offered? (Optional)			
If so, retention outcomes specified for 30/60/90 days.			
JOB SKILLS TRAINING:			
Training is being offered for occupations in demand in the community.			
Individual class size and total number of customers to be enrolled has been identified.			
Outcome measures have been established for:			
Percentage/number to complete the training.			
Percentage/number to find employment within 30/60/90 days.			
Retention services to be offered? (Optional)			
If so, retention outcomes specified for 30/60/90 days.			

EDUCATION and TRAINING	YES	NO	COMMENTS:
Individual class size and total number of customers to be enrolled has been identified.			
Tools/methods for measuring progress have been identified (i.e., receipt of GED, pretest and periodic documentation of progress at mid-contract and end of contract period, grade level attainment, completion of competencies).			
Outcome measures have been established for:			
Percentage/number to show progress or successfully complete the curriculum.			
Percentage/number to have satisfactory participation on a monthly basis.			
COST EFFECTIVENESS:			
Contract has been evaluated for cost effectiveness.			
If applicable, contact cost per entered employment is equal to or less than the program cost (desktop review).			
If applicable, contract cost per participant is equal to or less than the program cost.			
If the service cannot be provided at a lower cost, the degree of difficulty in working with the targeted customer population requires intensive services to produce desired outcomes.			

CONTRACT

This Contract is made this _____day of _____20 , by and between

_____
(herein referred to as the "Agency")
and

_____
(herein referred to as "Contractor").

In order to implement the Agency's Employment Services Program, the parties of this Contract agree as follows:

(1) SCOPE OF SERVICES: The Contractor shall provide the services to the Agency indicated in the Attachment.

(2) TIME OF PERFORMANCE: The services of the Contractor shall commence
and terminate on

All time limits stated in this agreement are of the essence.

(3) COMPENSATION: The Contractor shall be paid by the Agency

Total obligation of the Agency in all forms of compensation shall not exceed _____ dollars.

(4) CONDITIONS OF PAYMENT: All services provided by the Contractor pursuant to this Contract shall be performed to the satisfaction of the Agency, and in accord with all applicable federal, state and local laws, ordinances, rules and regulations. Contractor shall not receive payment for work found by the Agency to be unsatisfactory, or performed in violation of federal, state or local laws, ordinances, rules and regulations. Contractor shall not receive payment for work found by the Agency to be unsatisfactory, or performed in violation of federal, state or local law, ordinance, rules or regulations.

(5) LIABILITY: The Contractor shall indefinitely, and hold harmless the Agency, and when applicable, its designated representatives, from any and all claims, suits, actions, liabilities and cost of any kind, caused by the performance by the Contractor of his/her work pursuant to this agreement.

Neither the Contractor, its/his employees, assignees or subcontractors shall be deemed employees of the Agency while performing under this agreement.

(6) GENERAL PROVISION: Nothing in this agreement shall be construed as authority for either party to make commitments which will bind the other party beyond the Scope of Service contained herein. Furthermore, the Contractor shall not assign, sublet, or subcontract any work related to this agreement or any interest he/it may have herein without the prior written consent of the Agency.

(7) INTEGRATION AND MODIFICATION: This Contractor constitutes the entire agreement between the Contractor and the Agency. Any alterations, amendments, or modifications in the provisions of this agreement shall be in writing, signed by the parties and attached hereto.

(8) TERMINATION: The Agency may terminate this agreement upon _____days written notice to the other party. Upon this termination for convenience, the Contractor shall be paid only for those additional fees and expenses incurred between notification of termination and the effective date of termination that are necessary for curtailment of its/his work under this agreement.

In the event of breach by the Contractor of this agreement, the Agency shall have the right immediately, to rescind, revoke or terminate the agreement. In the alternative the agency may give written notice to the Contractor specifying the manner in which the agreement has been breached. If a notice of breach is given and the Contractor has not substantially corrected the breach within _____days of receipt of the written notice, the Agency shall have the right to terminate this agreement.

In the event of recession, revocation or termination, all documents and other materials related to the performance of this agreement shall become the property of the Agency.

(9) COLLATERAL CONTRACTS: Where there exists any inconsistency between this agreement and other provisions of collateral contractual agreements which are made a part of this agreement by reference or otherwise, the provisions of this agreement shall control.

(10) NON-DISCRIMINATION: In his/its performance of this agreement, the Contractor warrants that he/it will not discriminate against any employee, or other person, on account of race, color, sex, religious creed, ancestry, age, or national origin.

(11) APPLICABLE LAWS: This agreement shall be governed in all respects, whether as to validity, construction, capacity, performance or otherwise, by the laws of the laws of the Commonwealth of Virginia.

(12) SEVERABILITY: Each paragraph and provision of this agreement is severable from the entire agreement; and if any provision is declared invalid, the remaining provisions shall nevertheless remain in effect.

(13) AUDIT: The Contractor shall retain all books, records, and other documents relative to this contract for five (5) years after final payment, or until audited by the Commonwealth of Virginia, whichever is sooner. The agency, its authorized agents, and/or State auditors shall have full access to and the right to examine any of said materials during said period.

(14) AVAILABILITY OF FUNDS: It is understood and agreed between the parties herein that the agency shall be bound hereunder only to the extent of the funds available or which may hereafter become available for the purpose of this agreement.

(15) RENEWAL OF CONTRACT: This contract may be renewed by the local agency upon written agreement of both parties for one successive year periods, under the terms of the current contract, and at a reasonable time (approximately 90 days) prior to the expiration.

(16) CHARITABLE CHOICE:* If this contract is with a faith-based organization, the participant has the right to refuse to actively take part in religious activities and can refuse the services of the faith-based organization.

*** Public Law 104-193**

Standard Operating Procedures Guide 2

GUIDE FOR DEVELOPMENT OF STANDARD OPERATING PROCEDURES FOR THE VIRGINIA INITIATIVE FOR EMPLOYMENT NOT WELFARE (VIEW) PROGRAM BY LOCAL DEPARTMENTS OF SOCIAL SERVICES

The goal of the VIEW Program is to assist program participants in obtaining employment with wages and benefits sufficient to make continued, or future, receipt of public assistance unnecessary (i.e. self-sufficiency). In conjunction with employment, it is the commitment of the Department to assist participants in obtaining additional skills, training and education as appropriate in order to enhance employability.

In working toward the accomplishment of the program goal, a number of local agencies have found it useful to put in place standard operating procedures for the program. The following outline is offered as a guide for agencies who have not yet developed standard operating procedures for the VIEW Program but who recognize the value of such an effort.

Communities have different needs and resources and these characteristics, as well as agency size, frequently dictate how programs are designed and implemented. For these reasons, the outline in not intended to be all-inclusive nor is it a "how to" formula. It may be considered as a checklist to be used to ensure that all major functions and activities necessary to operate a successful VIEW Program have been considered.

A. Referral and Case Opening Procedures

1. Describe the procedure by which a potential participant is referred to the Queue.
2. Describe the steps for opening a case once it has been referred to the Queue and the time frame by which this must be done.
3. Describe the frequency with which the Queue will be accessed and monitored.

B. Assessment

1. What methods will be used to identify and evaluate the participant's occupational skills, strengths, and weaknesses. Describe how this information will be used to assess immediate employability.
2. Describe procedures for conducting educational tests and assessments. Include the following in your description of the procedures:
   - What assessment tools will be used;
   - Types of tests used (e.g., TABE);
   - Criteria for determining who should be tested;
   - Incorporation of test results into case records;
   - Staff responsible for conducting assessment; and
   - Referral procedures if test and assessments are conducted outside of the agency.
3. If additional assessment information is gathered, how and by whom (e.g., DRS, VEC, Mental Health) and describe how this responsibility will be handled and how information will be integrated with agency's assessment.
4. How are the results reported and by what time period the results should be provided.

C. Self-Sufficiency Planning/Component Assignment

1. Describe the process by which the two-year plan of participation will be developed and how program components are assigned. Specify the appropriate forms and supportive documentation.
2. Describe the locality's approach to developing and maintaining a current list of local providers for each component.
3. Describe how the agency monitors program activities and evaluates them for effectiveness.

D. Social and Supportive Services

1. Develop a list of the specific services available to VIEW participants in your locality.
2. Describe the procedures used for gaining approval and access to specific services, indicating arrangement, and authorization for payment, and the responsible individuals at each step of the process.
3. If spending limits are set, describe how and why this was decided and describe what steps will be taken to assure equity for each participant.
4. Describe the locality's approach to developing and maintaining a list of current and potential service providers.

E. Monitoring Worker Performance

1. Explain how caseloads will be monitored using VIEW caseload reports available through the Employment Services Automated System (ESPAS), Mapper and other locally developed reports.
2. Describe how the agency will track the timely entry of information into ESPAS.
3. Describe procedures for supervisory oversight of "timeliness" and the utilization of the Action Due Report and any other management reports available to the agency.
4. Describe any locally developed procedures, such as case reading, used in monitoring program effectiveness.

F. Monitoring Participation and Progress

1. Describe the optimal timeframes the agency has set for completion of each component activity when applicable. Describe the methods and means (including forms) by which the agency monitors participant progress in each of the components.
2. Describe how the agency tracks and documents the participant's advancement in and completion of components.
3. Describe how the agency documents participation hours and how the documentation is maintained.

G. Sanctions and Compliance

1. Describe how the agency assures that participant's understand about non-compliance and its consequences, including the following:
   - What is sanctioning?
   - Why it is applied?
   - When it is applied?
   - How/when can a sanction can be lifted?
2. Describe the procedures the agency follows to see that participants follow their Activity and Service Plans.
3. Describe the actions taken by the agency when a participant is out of compliance. Include the following areas in the description:
   - Contact with participant and/or sanction/termination notice;
   - Evaluation of non-compliance;
   - Good Cause evaluation; and
   - Sanction, if required.
4. Describe the procedure for notifying eligibility to impose the sanction and for what time period.
5. Describe the procedures followed by VIEW staff once the sanction has been imposed by eligibility, including:
   - Closing of cases; and
   - Procedure for notifying eligibility to lift sanction when appropriate.

H. Monitoring & Program Evaluation

1. Describe how the locality assesses the program's progress toward meeting the following planned measures:
   - Participation rate, with priority given to TANF-UP households;
   - Entered employment rate;
   - Job retention rate; and
   - Entered employment wage.
2. Describe what steps are being taken to ensure full TANF-UP participation.
3. Describe tracking procedures, documentation, requirements, and supervisor/worker responsibilities for all facets of the agency monitoring process.

I. Data Entry

1. Describe the procedures followed by the agency in entering program data into ESPAS and any other information systems that may be used by the agency.
2. Identify individuals(s) responsible for data entry for VIEW participants from the time the case is opened to closure, and deadlines, for data entry.
3. Identify individuals responsible for reviewing the Queue.

J. Job Development

1. Describe what job development activities the agency has created and/or cultivated.
2. Describe how the agency determines which employers and occupations will be targeted for job development efforts.

3. Describe the methods the agency uses to contact prospective employers. (Are cold calls made to employers, Chambers of Commerce presentations, advertising campaigns, etc.)
4. Describe the procedures used to promote the employer's awareness of services provided by the VIEW Program.
5. Describe how participants are prepared for employer interviews by staff.
6. Describe the follow-up provided by staff to the employer and participant once a participant has been hired.
7. Describe the procedures that will be put in place to insure that feedback from the employer is utilized in improving program operations. (For example, the employer expresses concern about the skill level of a participant despite the fact that the participant has just completed training in the occupation for which she was hired.)
8. Describe procedures used by the agency in monitoring the effectiveness of job development activities.

K. Case Closure

Describe steps which must be carried out to close a case and time frames, including the following:
- responsibility for coding the supplement;
- responsibility for entering closure into ESPAS; and
- specify the supportive documentation

L. Contracts

1. Describe the process by which decisions are made to contract for VIEW Program services, the factors involved in making these decisions, and the level of responsibility for the decisions. Considerations should be given to the following issues:
   - Local procurement process:
   - Development of the contract, including clear outcome measures and quantifiable agency and contractor expectations;
   - Contract monitoring; and
   - Contract termination for non-performance
2. Describe the procedures and timeframes the agency will follow in providing Central Office with copies of the proposed contract.

M. Development and Updating of Local Plan

1. Describe the development of the local VIEW annual plan, including the roles played by the director, fiscal, and program staff.
2. Describe the circumstances under which changes are made to the plan, the process by which changes are made, including the roles played by the director, fiscal, and program staff.
3. Describe the process utilized by the agency to identify changes in the area's labor market, participant needs, and/or fiscal and community resources so that appropriate changes can be made to the agency's plan for program operation in the coming year.

N. Hardship Determinations

1. Describe what internal procedures are used in evaluating hardship requests.(e.g. evaluation team, individual worker, etc.
2. Describe how requests and dispositions of hardship exceptions are tracked and recorded.
3. Describe by what method Regional Coordinators are notified of hardship exception requests and dispositions.

VIRGINIA INITIATIVE FOR EMPLOYMENT NOT WELFARE (VIEW) ANNUAL PLAN
State Fiscal Year 2004
July 1, 2003 to June 30, 2004

*Submitted by:*_____
(Name of Local DSS)

Virginia Initiative for Employment
Not Welfare (VIEW) Coordinator: _____
(Signature) *(Date)*

_____
(Print Name)

Local Director: _____
(Signature) *(Date)*

Date Received by the Virginia Department of Social Services: _____

VIEW Annual Plan

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State Fiscal Year (SFY) 2004 VIEW ANNUAL PLAN

Purpose of the VIEW Annual Local Plan

VIEW continues to be the centerpiece for Virginia's welfare reform program. The program is designed to assist participants in obtaining employment. The goals of the program are to:

- Offer Virginians living in poverty the opportunity to achieve economic independence by removing barriers and disincentives to work and providing positive incentives to work;
- Provide Virginia families living in poverty with the opportunities and work skills necessary for self-sufficiency;
- Allow Virginia families living in poverty to contribute materially to their own self-sufficiency;
- Set out the responsibilities of and expectations for recipients of public assistance and the government; and
- Provide Virginia families living in poverty with opportunity to obtain work experience through VIEW.

The VIEW plan provides each agency the opportunity to show how they have planned and evaluated strategies to meet the above goals for the next fiscal year, beginning July 1, 2003. The plan has a variety of purposes. It serves as a document to assist agencies in planning for the provision of services based on the allocation of funds from the state. It also serves as a monitoring tool for the state. Information from the local agencies can be shared as best practices. Agencies' projections will assist the planning efforts of the state.

Instructions are included. Local agencies may attach their Standard Operating Procedures (SOPs) to reduce or eliminate having to provide redundant information. Column L has been added to Attachment B, to identify vendors providing services for Job Retention and Wage Advancement Projects. On Attachment A, item Q a break down is requested for transitional employment and training.

The Annual Plan is due to Central Office by August 1, 2003.

VIEW Annual Plan

Instructions

I. VIEW Program Description

Review Section I and answer the questions. If the agency's SOPs (Standard Operating Procedures) include the information asked for in the VIEW Annual Plan, you may refer to the SOPs rather than restating the same information. If any answers refer to the SOPs, attach the SOPs to the Annual Plan. When referring to the SOPs be specific. (For example, see SOPs page 5, paragraph 2, item #1).

II. Program Participation Summary - Attachment A

Enter the agency's FIPS, the agency's name, a contact person's name, and phone number. The contact person is the person who completes the annual plan. The date submitted is the date sent received by Central Office. The fiscal year is 2004. Leave the revision number blank unless the agency is submitting a revision to the plan for the same fiscal year. All of the counts on Attachment A are annual projections for the period of July 1, 2003, to June 30, 2004.

Annual Projections - Attachment A

1. VIEW Participants

For item 1.A, enter the total number of VIEW participants the agency expects to serve from July 1, 2003, to June 30, 2004. Do not include participants receiving transitional services.

For item 1.B, enter the total number of VIEW participants the agency expects to enter into employment for the period July 1, 2003, to June 30, 2004.

Item 1.B.1 is the number of participants the agency expects to enter into part-time employment.

Item 1.B.2 is the number of participants an agency expects to enter into full-time employment.

2. Components

Review the listed components A through P and enter the total number of VIEW participants the agency expects to serve in those components from July 1, 2003, to June 30, 2004.

In item Q, Transitional Services, enter the total number of participants the agency expects to provide transitional services to from July 1, 2003, to June 30, 2004. For number 1, 2 and 3 enter the number of participants the agency expect to provide transitional employment and training, transitional child care and transitional transportation services.

3. Hard-To-Serve

For A, enter the total estimated number of participants with barriers to employment that the agency expects to serve from July 1, 2003, to June 30, 2004. This is a count of all clients who may have at least one of the listed barriers under the heading Hard-To-Serve. This is an unduplicated number.

For items 1 through 8, enter the number of participants the agency expects to serve that may face the specific barriers. These numbers may be duplicated because participants may have more than one barrier. Add the numbers for items 1 through 8 and enter the sum in item 9.

4. Hardship Exceptions

For item 4.A, enter the number of participants the agency expects to reach their 24-month time limit for the period of July 1, 2003 to June 30, 2004.

For item 4.B, enter the number of requests for Hardship Exceptions the agency expects to receive for the period of July 1, 2003, to June 30, 2004.

For item 4.C, enter the number of Hardship Exceptions the agency expects to be granted for the period of July 1, 2003, to June 30, 2004.

For item 4.C.1 through 4, enter the number of Hardship Exceptions the agency expects to be granted by reason for the period of July 1, 2003, to June 30, 2004.

III. Contracts and Interagency Agreements Summary -Attachment B

List each activity for which the local agency has a contract or an agreement on Attachment B.

IV. Employment Services Staff Report - Attachment C

Record the number of positions the agency has and the percentage of time that a position works with the VIEW Program.

I. VIEW Program Description

A. VIEW Population:

1. Briefly describe the VIEW population in your locality.

B. Employment Needs:

1. Describe the employment needs of the VIEW population in your locality.

C. Labor Market Trends:

1. Describe the current and anticipated labor market trends in your locality.

D. Community Work Experience (CWEP):

1. Describe the process for developing sites. Who is responsible for the development of sites? How many have been developed?

2. Describe the process for matching participants with the CWEP sites. List all of the agency's CWEP sites that the agency has a current contract with. What is the nature of work done by participants at the site?

3. Describe the process for monitoring work experience placements and indicate who has responsibility for monitoring.

E. Full Employment Program (FEP):

1. Describe how your locality will utilize this activity.

2. What strategies have been used for marketing and development of the sites?

3. How is the monitoring of placements be accomplished?

F. Job Retention, Job Upgrade and Job Follow-up:

In order to ensure participants are able to earn wages that will allow them to be self-sufficient after receipt of 24-months of Temporary Assistance for Needy Families (TANF), localities must develop strategies which allow participants to retain jobs and improve their monthly earnings during their participation in the VIEW Program. Below, please describe the strategies used to improve job retention and earnings.

1. Describe the process which the agency uses to assist participants in retaining employment.

2. Describe the activities in your job readiness classes that are designed to facilitate job retention and upgrade.

3. Describe the process the agency uses to provide job follow-up assistance to participants to identify and address problems which could lead to termination.

4. Describe supportive services available in your locality and how they are delivered to employed participants to enable them to look for and obtain better paying jobs and/or promotions.

5. Describe how the agency will determine if the participant voluntarily quit a job without good cause.

G. Welfare-to-Work:

1. Describe the criteria used to determine which clients will be referred to the Welfare-to-Work Program and the referral process.

2. Describe any strategies the agency has developed to encourage this population to actively participate in the WIA Program.

3. Describe the process of monitoring VIEW clients' participation in this program.

H. Working With The Hard-To-Serve Population:

1. Describe the characteristics of the hard-to-serve in your locality.

2. Describe the agency's plan to work with the hard-to-serve.

3. Describe the resources in your area that your agency utilizes in serving the hard-to-serve population.

4. Describe the flow of your program for the hard-to-serve when their is suspicion of substance abuse, a learning disability or any other situation the client may have that is a barrier to obtaining and retaining employment.

5. Describe how your agency tracks a hard-to-serve client's progress.

6. Describe how your agency has partnered with other organizations and agencies in your service area to serve the hard-to-serve.

I. Hardship Exceptions:

1. Describe the process the agency uses for determining eligibility for hardship exceptions and indicate who is responsible for the determination (individual worker or panel).

2. Describe any special services provided to participants receiving extended TANF benefits due to a hardship exception.

3. Describe who is responsible for obtaining hardship determination evaluations and providing them to the Regional Consultant.

J. Management and Monitoring:

1. Describe the procedure for ensuring that participants will be assessed within thirty days of the eligibility referral. How is this tracked and who is responsible for tracking?

2. Describe how the agency is ensuring that all VIEW participants are in a work activity by the 95th day of referral from the eligibility worker. Who is responsible for tracking this?

3. Describe how the locality ensures that all clients are continually assigned to a work activity.

4. List your contracts and the services each contract provides. Describe the locality's process for monitoring contracts. How are the expenditures tracked and how often? Who is responsible for developing and monitoring contracts? (Do not list fees in this response. Attachment B requests fees and other data.)

5. Describe how the agency tracks the annual plan to determine if performance measures are being met. Who is responsible for tracking the performance measures?

II. VIEW Program Participation Summary - Attachment A

Please follow the enclosed instructions for this section on pages iii and iv.

III. Contracts and Interagency Agreements Summary - Attachment B

It is very important to capture the data and information regarding contractors and the services they provide that assist clients in the VIEW Program. Please complete Attachment B to provide this information.

IV. Employment Services Staff Report - Attachment C

Attachment C is used to capture information on the staff and their position titles. It is also used to review the breakdown in caseloads when workers are working with more than one program.

The completed plan must be sent to Chris Raines, Program Consultant, TANF Unit, 730 E. Broad Street, Richmond, VA 23219.

VIEW PROGRAM
PARTICIPATION SUMMARY

ATTACHMENT A **FIPS# _____**

Local Agency Name_____ Contact Person _____ Phone #_____	Date Submitted _____ Fiscal Year **2004** Revision #____ From **7/1/03** To **6/30/04**
	Annual Projections
	Participants
1. VIEW PARTICIPANTS	
A. Total # of VIEW Participants	
B. Total Participants Entering Employment	
1. Part - time Employment	
2. Full - time Employment	
2. COMPONENTS	
A. Job Search	
B. Job Readiness	
C. Education (ESL)	
D. Education (GED)	
E. Education (ABE)	
F. Education (High School)	
G. Post Secondary - Associate	
H. Post Secondary - Certificate	
I. Post Secondary - 4 Year Degree	
J. Job Skills Training	
K. On-the-Job Training (OJT)	
L. Work Experience (CWEP)	
M. Other Locally Developed	
N. Job Development and Job Placement	
O. Inactive	

TANF Transmittal 23

Attachment A continued

P. Pending (Not Employed)	
Q. Transitional Services	
1. Transitional Employment /Training	
2. Transitional Child Care	
3. Transitional Transportation	
3. HARD TO SERVE	
A. Total # of Participants w/Barriers	
1. Substance Abuse	
2. Learning Disabilities	
3. Domestic Violence	
4. Physical Disabilities	
5. Mental Retardation	
6. Language Barriers	
7. Mental Illness	
8. Other (List)	
9. Total # of Barriers	
4. HARDSHIP EXCEPTIONS	
A. Participants That Will Reach the 24-Month Time Limit	
B. Participants Requesting a Hardship	
C. Participants Who Will Be Granted A Hardship	
1. Actively Seeking Employment	
2. Factors Relating to Employment Unfavorable	
3. Extension to Complete Education and Training	
4. Lost Employment Due to Factors Unrelated to Job Performance Inactive	

VIEW Annual Plan **Agency _____** **FY 2004**
Attachment B

Contracts and Interagency Agreements Summary

Contracts and Agreements
Separate reimbursable contracts will be developed for VIEW even if the same contractor is used.

For each activity for which the local agency has a contract or an agreement list **enter on the form below.**

(A) Contractor/ Agency	(A1) FB	(B) Component	(C) Fixed Fee	(D) Performance Based	(E) Cost Based	(F) Number Served	(G) Contract Amount	(H) Public Non-profit	(I) Private For Profit	(J) Contract Period	(K) Job Placements	**(L) JR/WA**
Totals												

(A) List Contractor/Agency by Name.
(A1) Faith Base Organization (Place an x in the box)
(B) List Component/Service by Type.
(C - E) Enter "yes" or "no" .
(F) Enter the number of clients served.
(G) Enter applicable Amount to be paid to the contractor.
(H - I) Enter "yes" or "no"
(J) Effective Contract Dates (From: xxxx To: xxxx).
(K) Number of planned job placements, if appropriate.
(L) Enter Yes or No. Does this provider provide services for Job Retention /Wage Advancement projects?

VIEW Annual Plan
Attachment C **Agency _____** **FY 2004**

Employment Services Staff Report

Position Title	% VIEW	% Other Programs

VIEW BROCHURES

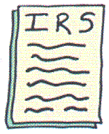
Have You Heard About Benefits For Working Families (032-01-155/**2**) 2

Leaving Welfare For Work Isn't As Scary As It Seems (032-01-154/**2**) 6

HAVE YOU HEARD ABOUT BENEFITS FOR WORKING FAMILIES???

MEDICAID COVERAGE FOR CHILDREN

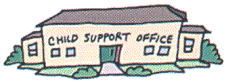
EARNED INCOME TAX CREDIT



FREE HELP WITH FILING TAX RETURN

FOOD STAMPS

CHILD CARE ASSISTANCE



ASSISTANCE WITH CHILD SUPPORT

READ ON TO LEARN ABOUT BENEFITS THAT CAN HELP LOW INCOME FAMILIES WITH CHILDREN!

!-01-155/2 (4/02)

HEALTH COVERAGE

MEDICAID BENEFITS FOR CHILDREN IN LOW INCOME WORKING FAMILIES

- ✔ Hospital care
- ✔ Visits to the doctor
- ✔ Preventive care
- ✔ Medicine
- ✔ Dental care for children
- ✔ Immunizations
- ✔ Eyeglasses

Medicaid eligibility for children is based on income, age of children and citizenship. Children under age 19 may get Medicaid. Income limits are higher for children under age 6.

EXAMPLES:

In 2001, a mother with two children **under age 6** can have countable income of **$1,621** a month and get Medicaid coverage for both children.

If the two children are **under age 19**, she can have countable income of **$1,219** a month and still get Medicaid coverage for her children.

- **Children under age 19 may get Medicaid.**
- **Children do not have to be on welfare to get Medicaid.**
- **Children may get Medicaid even if both parents live in the home.**
- **One or both parents can work full time and the children may still get Medicaid**
- **Children may get Medicaid even if their family has a car, a house and a savings account.**
- **A family with health insurance may still get medicaid for their children.**

To obtain Medicaid coverage for children, an application must be filed providing information such as the family's income and age verification for the parent(s) and children. A family can apply at their local Department of Social Services and, in some areas, they can apply at a regional hospital, a health department or a rural health clinic.

EARNED INCOME TAX CREDIT

Low income families (with children) who work part time or full time can get more take home pay through the Earned Income Tax Credit (EITC).
The amount of extra money depends on income and family size. In 2001, a family with two or more children can earn up to $32,121 a year and qualify for the EITC.
A family does not have to owe any taxes to get the EITC.

There are two ways a family can get the extra EITC money.

✔ **They can get all the extra EITC money when they file their federal tax return.**

OR

✔ **They can get part of the extra EITC money in advance with each paycheck and the rest when they file their tax return.**
To get the extra money in advance with each paycheck, the employee must file Form W-5 with their employer. Employees can get Form W-5 from their employer. (It does not cost the employer any money because it is taken out of the employee's federal withholding taxes.)

EXAMPLE: In 2001, a family (with two children) with gross income between **$895** and **$1,091** a month can get $4,008 in extra EITC money. The family can get the $4,008 when they file their federal tax return **or** they can get $121 per month and the remaining $2,556 when they file their federal tax return.

The EITC money is not counted as earned income when applying for Medicaid, Temporary Assistance for Needy Families (TANF), Food Stamps, Supplemental Security Income (SSI) or housing assistance.

To get the **EITC** a family **must** file a federal tax return. **FREE help is available to file tax returns.** Call the IRS at 1-800-829-1040 and ask where you can get help. (If it is busy, don't give up - keep calling because it is worth it to get free help with your tax return!)

CHILD CARE

Assistance with child care may be available.
A family with limited income may qualify for child care assistance.

Due to limited funding, the family may be placed on a waiting list. A family can get information on child care assistance at their local Department of Social Services.

FOOD STAMPS

Low income families may qualify for Food Stamps while working full time. For example, in 2001, a family of three with gross income of **$1,585 or less** a month may qualify to receive Food Stamps.

CHILD SUPPORT

The district Child Support Office can help custodial parents obtain child support payments from absent parents. They can also assist in obtaining medical support and in establishing paternity.

- A parent does not have to be on welfare to get help in collecting child support or to receive other child support services.
- There are no guarantees that money will be collected, but getting help from Child Support Enforcement can improve the chances of success.
- Services do not include custody, visitation or other matters.
- There is no charge for services provided by Child Support Enforcement.

(For more information, call your district Child Support Office.)

To learn more about benefits available for low income working families, call your local Department of Social Services.

VIRGINIA DEPARTMENT OF SOCIAL SERVICES. VSSII PEOPLE HELPING PEOPLE

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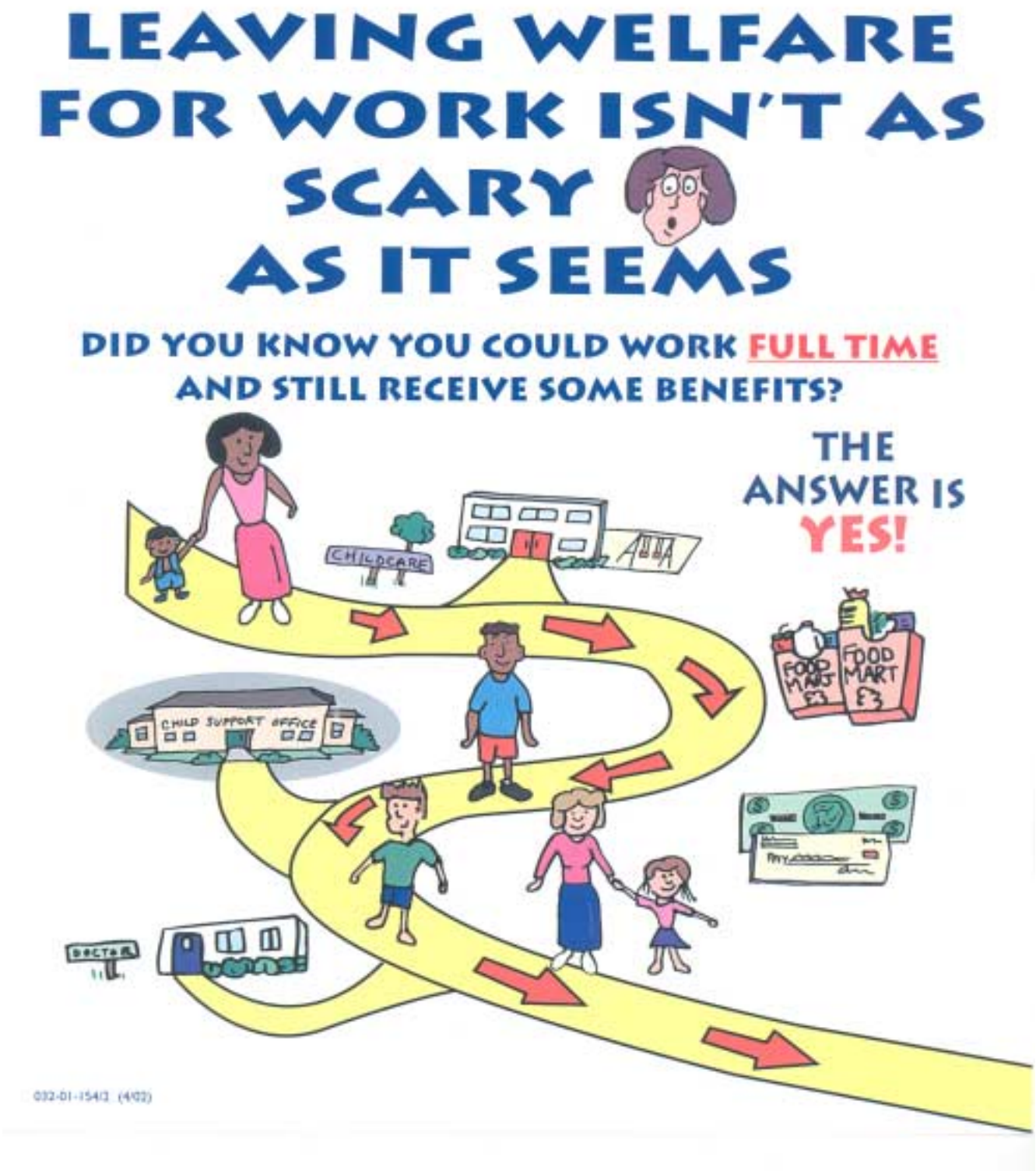
LEAVING WELFARE FOR WORK ISN'T AS SCARY AS IT SEEMS
DID YOU KNOW YOU COULD WORK FULL TIME AND STILL RECEIVE SOME BENEFITS?
THE ANSWER IS YES!
CHILDCARE
CHILD SUPPORT OFFICE
FOOD MART
FOOD MART
DOCTOR
032-01-1541 (4/02)

WHAT ARE THE BENEFITS FOR FAMILIES WHO LEAVE WELFARE FOR WORK?

- **Medicaid** (doctor visits, medicine, hospital care, and checkups)
- **More take home pay**
- **Child care assistance**
- **Food Stamps**
- **Child Support**

HEALTH COVERAGE

Families who get off of welfare because of work may still get family health coverage for parents and children for up to 1 year! It's called **Transitional Medicaid.**

After 1 year, depending on family income, the children are still likely to get health coverage through Medicaid - especially if they are under the age of six.

EXAMPLES:

In 2001, a mother with two children **under age 6** can have countable income of **$1,621** a month and get Medicaid coverage for both children.

If the two children are **under age 19**, she can have countable income of **$1,219** a month and still get Medicaid coverage for her children.

MEDICAID FOR CHILDREN IN LOW INCOME WORKING FAMILIES

- ✔ **Children under age 19 may get Medicaid.**
- ✔ **Children do not have to be on welfare to get Medicaid.**
- ✔ **Children may get Medicaid even if both parents live in the home.**
- ✔ **One or both parents can work full time and the children may still get Medicaid.**
- ✔ **Children may get Medicaid even if their family has a car, a house and a savings account.**
- ✔ **A family with health insurance may still get Medicaid for their children.**

EARNED INCOME TAX CREDIT

Low income families (with children) who work part time or full time can get **more take home pay** through the Earned Income Tax Credit **(EITC).** The amount of extra money depends on income and family size. **A family does not have to owe any taxes to get the EITC.**

There are two ways a family can get the extra EITC money.

✔ **They can get all the extra EITC money when they file their tax return.**

OR

✔ **They can get part of the extra EITC money in advance with each paycheck and the rest when they file their tax return.**
To get the extra money in advance with each paycheck, the employee must file Form W-5 with their employer. Employees can get Form W-5 from their employer or case worker. (The advance does not cost the employer any money because it is taken out of the employee's federal withholding taxes.)

EXAMPLE: In 2001, a family (with two children) with gross income between **$895** and **$1,091** a month could get $4,008 in extra EITC money. The family could get the $4,008 when they file their federal tax return or they could get $121 per month and the remaining $2,556 when they file their federal tax return.

To get the **EITC** a family **must** file a federal tax return. **FREE help is available to file tax returns**. Call the IRS at 1-800-829-1040 and ask where you can get help. (If it is busy, don't give up - keep calling because it is worth it to get free help with your tax return!)

WHICH IS MORE?

WELFARE	EITC + PAYCHECK
In 2001, a parent (with two children) on welfare without a job and no other income could get **$3,840** for the entire year.	If the same parent went to work earning **$13,092 a** year (**$1,091** per month), the parent would get a pay check **plus $4,008** in extra EITC money.

There's more good news! The EITC money is not counted as earned income for Medicaid, Temporary Assistance for Needy Families (TANF), Food Stamps, SSI or housing assistance.

CHILD CARE

Depending on income, parents who get off welfare because of work may get some help with child care expenses for up to 12 consecutive months, beginning with the first month in which they are no longer on welfare! The parent **must ask** for help with child care expenses. It's called **Transitional Child Care (TCC)**.

After 12 consecutive months of being off welfare, the parent might still be able to get some help. The parent will still have to pay a fee.

FOOD STAMPS

Parents who get off welfare because of work may still receive some assistance through the Food Stamp program.

Example: In 2001, a family of three with a total gross income of **$1,585** or **less** a month may qualify to receive Food Stamps.

CHILD SUPPORT

The district Child Support Office can help custodial parents obtain child support payments from absent parents. They can also assist in obtaining medical support and in establishing paternity.

- A parent does not have to be on welfare to get help in collecting child support or to receive other child support services.
- There are no guarantees that money will be collected, but getting help from Child Support Enforcement can improve the chances of success.
- Services do not include custody, visitation or other matters.
- There is no charge for services provided by Child Support Enforcement.

(For more information, call your district Child Support Office.)

SO, YOU SEE, FAMILIES DON'T LOSE ALL OF THEIR BENEFITS WHEN THEY LEAVE WELFARE FOR WORK. THEY MAY STILL GET:

• EITC Cash • Child Care • Medicaid • Food Stamps

To learn more about leaving welfare for work (including getting child support), call your local Department of Social Services.

VIRGINIA DEPARTMENT OF SOCIAL SERVICES. VSSII PEOPLE HELPING PEOPLE

Design: Southern Institute on Children and Families/Shiben. Permission granted by the NC Department of Human Resources.

Virginia Department of Social Services
Temporary Assistance for Needy Families (TANF) Displacement Grievance Form
Virginia Initiative for Employment not Welfare (VIEW)

Date_____

Name of Employee_____ Home Phone #_____

Address_____City_____ State_____ Zip Code _____

Work Phone #_____Best Time To Call_____A.M._____P.M _____

Name of Employer_____ Phone #_____
(Whom grievance is filed against)

Employer's Address _____Apt. #_____

Supervisor's Name_____

City_____State_____Zip _____

Brief description of grievance, include dates._____
_____
_____
_____
_____
_____

Employee Signature_____ Date _____
All of the above information is correct to the best of my knowledge.

Displacement means employing or assigning a Temporary Assistance to Needy Families (TANF) Community Work Experience Placement (CWEP), Full Employment Program (FEP) or other subsidized employment participant when: 1) The employer has terminated the employment of an employee, or the employee's current position, or otherwise caused an involuntary reduction in its work force in order to fill the vacancy with a subsidized participant, 2) An individual is hired while another person is on layoff, including seasonal layoff, from the same or substantially equivalent position; 3) The employer has reduced the hours of an employee in the same or substantially equivalent position to less than full time in order to employ or assign a subsidized participant: or; 4) The employment or assignment results in the impairment of an existing contract for services.* The Virginia Department of Social Services will act as a mediator to assist in resolving the grievance. Any suggestions made by the Department of Social Services are not binding to either party.

This form must be received by the Virginia Department of Social Services no later than sixty days after the alleged incident of Displacement.

Mail to: Virginia Department of Social Services
730 East Broad Street
TANF Unit 7th Floor
Richmond, Virginia 23219

* 45 CFR 261.70 (a)

The following charts outline procedures for determining eligibility and amount of payment. They are divided into sections in relations to Manual Sections as follows:

Section I	Categorical Eligibility Requirements (Section 201)
Section IV	The Assistance Unit (Section 302)
Section V **(Obsolete)**	Property (Section 303)
Section VI	Requirement Items (Section 304)
Section VII	Income (Section 305)
Section IX	ESP/VIEW (Section 900)
Section X	Non-Cooperation with With DCSE (Section 201)

In the charts the left hand column lists each eligibility factor, with the Manual reference, and the facts which must be established in relation to each factor. The right hand column lists the acceptable methods of substantiating each fact, in the order of their acceptability, and, as applicable, methods of computation and procedures to be followed. When written statements are not specified, oral statements are acceptable, provided the source is identified and the statement quoted in the record.

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X.	GOOD CAUSE FOR NOT COOPERATING WITH SUPPORT ENFORCEMENT	Section X

Facts to be Established	Method of Substantiation and Procedures
I. CATEGORICAL ELIGIBILITY REQUIREMENTS (AFDC)	I. CATEGORICAL ELIGIBILITY REQUIREMENTS (AFDC)
A. Age (201.2)	A. Age
1. Month, day, and year of birth.	1. Documents in applicant's possession - Birth Certificate or notification of birth Hospital or physician's record Baptismal record Other sources - Physician's, school or baptismal record Midwife's record of birth Form VS95 from State Bureau of Vital Records & Health Statistics
2. If child obviously under 12, may be included pending age verification.	2. Worker's observation.
3. Age 18.	3. If enrolled and attending full-time in secondary school or vocational/technical school must be reasonably expected to complete the program by or in month child reaches age 19. A child 18 years old is not eligible if in college, enrolled part-time or not in school at all. Verify with the school that the child is enrolled and expected to complete the program no later than the month of his 19th birthday.

Facts to be Established	Substantiation and Procedures
B. Compulsory School Attendance	B. Compulsory School Attendance
1. Applicable to all AU members age 5 through 17.	1. This requirement is deemed to be net unless the agency is notified of noncompliance by a school or other source.
A child who has completed high school or a secondary equivalency program, including the GED program, is deemed in compliance with this requirement.	Verify completion of school through documents in the customer's possession or contact with the school or superintendent's office. Document record.
A child is considered in compliance during school vacations and holidays, if he was in compliance at the start of the vacation or holiday.	
2. Any unit member considered in compliance is subject to exclusion from the grant.	2. If notified of noncompliance the worker must follow the procedures below.
3. Local public schools will report the name of children who are truant.	3. Document in the case record.
a. The agency may also learn of non-enrollment or non-attendance from the customer or another source than the schools.	a. Verify that the child is truant as determined by the school/school division.
b. The agency must contact the customer so that a case plan can be developed.	b. Notify the customer, in writing, to contact the agency to develop a plan, and inform him that failure to cooperate may result in removal of the truant child from the grant.
	Allow 5 working days after the date of mailing for the client to contact the worker.

Facts to be Established	Substantiation and Procedures
1) If the caretaker contacts the agency by the 5th working day, and develops a plan, the child remains eligible as long as the caretaker cooperates in meeting plan requirements.	1) Document the case record as to contact by the 5th working day and development and cooperation with the plan.
2) If the caretaker fails to contact the agency by the 5th working day, the agency must make reasonable efforts to personally contact the caretaker, e.g., by telephone, and explain the need to develop a plan and the consequence of not developing a plan.	2) Document case record as to contact with caretaker and arrangements made to develop a plan.
If, after reasonable efforts, the agency is unable to contact the client, send an Advance Notice of Proposed Action advising that the child's needs will be removed from the grant if he fails to contact the agency to develop a plan to return the child to school.	Document case record as to efforts made to contact the caretaker.
3) If the caretaker fails to cooperate in developing the plan, the child is ineligible until a plan is developed.	3) Document the case record as to failure to cooperate in developing a plan and remove the child's needs. If contacted, follow procedures for developing a plan. Reinstate the child's needs to be effective the month after the plan is developed.

Facts to be Established	Substantiation and Procedures
4) If the caretaker fails to cooperate following development of the plan, the child is ineligible until the caretaker has demonstrated her cooperation. The child's failure or refusal to cooperate is considered non-cooperation by the caretaker.	4) Document the case record a as to failure to cooperate and remove the child's needs. Reinstate the child's needs effective the month after the caretaker demonstrates her cooperation, i.e, complete an activity or event required by the plan.
5) At the point the agency is contacted, the agency and caretaker must develop a case plan following the agency model.	5) The plan must include the information below. Note: A copy of the plan must be given to the caretaker and a copy filed in the case record. (a) The reason for non-attendance; (b) How long the caretaker/-relative has to achieve compliance, allowing for school vacation periods and holidays; (c) What must be accomplished, by what date, and how and by whom the actions and/or activities will be monitored; and (d) What performance is required by the completion of the plan, i.e., enrollment and/or achieved level of attendance or other action mutually determined by the customer, agency worker, and school.
4. When a child attends private, denominational, or parochial school, the local agency must arrange with the school to receive notification when the child is truant as defined in 201.3.A.	4. Follow procedures applicable when notification is received from a public school.

Facts to be Established	Substantiation and Procedures
5. A child not enrolled in a public, private, denominational, or parochial school for one of the following reasons is in compliance with school attendance laws and therefore, eligible.	5. Verify through the local school superintendent's office that the child meets one of these exemptions and document the case record accordingly.
a. Home schooled by a parent;	
b. Tutored by someone who may not be the parent;	
c. Excused from attendance for religious, health, or safety reasons; or	
d. Is age 5 and will not have reached his 6th birthday on or before September 30 of the school year, and the caretaker chooses to delay his attendance for a year.	
6. If the agency learns that a child is not enrolled or attending school due to one of the following reasons, the child's eligibility must be determined as specified below.	6. Verify the child's circumstances and follow procedures to develop a plan to achieve compliance.
a. Suspension, expulsion, or house arrest.	a. Verify suspension or expulsion through the school or superintendent's office. Verify house arrest through correctional institution or court records.
1) Determine when this situation is expected to end.	1) Document the record as to the anticipated end date.

Facts to be Established	Substantiation and Procedures
2) The agency, in consultation with school staff, must explore alternative programs available in which the child can enroll while suspended, expelled, or house arrest, and establish a plan.	2) Complete the plan and send a copy to the caretaker. The child continues to be eligible provided the caretaker cooperates with the plan.
3) If no alternate program can be located in the community the child is not to be sanctioned even though he is not in school.	3) Document case record to substantiate the absence of a school program in which the child can enroll.
b. Child not enrolled due to determination by the local school board that the child cannot benefit from education at school.	b. Follow same procedures as in 6.a.
c. Never enrolled.	c. Verify through the school or superintendent's office. Establish a plan for compliance.
7. If a child has been convicted by a court of a violation of compulsory school attendance laws, the child is ineligible and must be removed from the grant.	7. Verify through court records and document case record. Remove the child from the grant effective the following month, if administratively possible.
When notified that the child is again attending school, the agency must verify that he is no longer truant.	Verify through the school and document the case record that the child is enrolled ad is no longer considered truant by the school.

Facts to be Established	Substantiation and Procedures
8. If an applicant is truant:	8. Document the case record regarding written notification sent and whether the requirement is met prior to case approval.
a. Send written notice per 201.3.C.	
b. Allow the applicant the opportunity to comply during the **30**-day application processing period.	
c. If the child is enrolled or applicant is cooperating in establishing a plan, the child meets this requirement.	

Facts to be Established	Substantiation and Procedures
C. Deprivation of Parental Support or Care (201.4)	
Repealed effective July 1, 1999	
D. Living Arrangements (201.5)	D. Living Arrangements
1. Relationship to caretaker-relative **Caretaker and dependent child must be related by blood, marriage or adoption.**	1. Relationship to caretaker-relative Documents in applicant's possession: Birth certificate Hospital certificate Adoption papers Baptismal certificate Other documents: Hospital or physician's record Court record of adoption Church record Bureau of Vital Records and Health Statistics Marriage records Court support and/or divorce orders which clearly identify the relationship of the caretaker/relative to the children Documents must be adequate to trace relationship completely, except that, if the applicant is the mother and has some type of birth verification, initial eligibility can be established. If other documents are not available, a notarized statement by an individual, other than the applicant/recipient, who has sufficient knowledge to attest to the relationship is acceptable.

Facts to be Established	Substantiation and Procedures
If caretaker-relative is father not married to child's mother or relative of such father, evidence of paternity is required.	Court record establishing paternity. **Court order stating child is residing with paternal or maternal relative.** Written notarized statement of paternity. **Birth Certificate from any state where father's name is included.** Note: Once evidence of paternity has been determined, the worker must verify the relationship between the caretaker-relative and the father. The case record must be documented regarding how the child is related to the caretaker, denoting the verification methods used to make the determination.
2. Living in Home	2. Living in Home
a. Child's presence in home b. Relative exercising care and control	a. and b. The primary source of verification for children who attend school, including nursery schools, pre-schools, or day care centers is the school record which shows address and relative's name. Hospital or physician's record, court or public agency record, contact with public housing, or landlord are secondary sources for children attending school. For pre-school age children (those children who are not in nursery school, preschool, day care, etc.), the client's declaration of the children living with her will be accepted, unless the worker has reason to question the accuracy of the client's statement. The case record must be documented to reflect verification/ declaration obtained.

Facts to be Established	Substantiation and Procedures
	If unable to obtain verification from any source listed above, the case record must be documented to reflect all attempts made to secure verification from a primary/-secondary source. The case record must also contain documentation of evidence the worker obtained which substantiates the child's presence in the home. When the verification conflicts with the applicant/recipient statement, present the verified information to the applicant/recipient. If he/she still maintains his/her statement, the agency must accept other evidence provided which establishes the presence of the child in the home.
E. Citizenship and Alienage (201.7) All applicants/recipients must sign, or have signed on their behalf, a statement declaring their citizenship or alien status.	**E.** Citizenship and Alienage The “Application for Benefits” or “Eligibility Review – Part A” form must be signed by, or on behalf of, all individuals in the assistance unit.
1. Citizenship	1. Citizenship
a. If born in U. S. or any of its territories (Puerto Rico, Guam, the U.S. Virgin Islands, or the Northern Mariana Islands).	a. Verify for child by birth record showing place of birth or by U. S. Passport. If such documents are not

Facts to be Established	Substantiation and Procedures
	currently available and child is obviously under 12, a signed statement of applicant/recipient or other individual having knowledge of the fact, attesting to the place of birth, if in the U. S., is acceptable substantiation of U. S. citizenship unless there is reason to question. If the caretaker, EWB, or other adult AU member is born in the U.S. according to signed statement of applicant/recipient, citizenship is presumed established unless there is reason to question.
b. If born outside U. S.	b. Certificate of derivative citizenship, naturalization papers, document issued by a U. S. Embassy or Consulate attesting that child or caretaker is a U.S. citizen born abroad. If such documents are not available, must verify citizenship through the nearest U.S. **Citizenship and** Immigration Services. Requests for verifications should be done by mail if possible, "Attn: Immigration Status Verifier." Offices in Virginia are: U.S. **Citizenship and** Immigration Services Norfolk Commerce Park 5280 Henneman Drive Norfolk, VA 23513 Telephone: (757) 858-6183 U.S. **Citizenship and** Immigration Services 4420 N. Fairfax Drive Arlington, VA 22203 Telephone: (703) 235-4026

Facts to be Established	Substantiation and Procedures
2. Alienage	3. Alienage
At application and when adding persons to the AU, an individual who is an alien must present immigration documentation to verify alien status.	Examine document(s) in the client's possession and determine if the individual meets one of the statuses below. If a **USCIS** receipt for a replacement document was used to verify qualified alien status, follow-up at the first redetermination to obtain a copy of the replacement document. A copy of the **USCIS** document(s) should be filed in the case record.
If the alien presents expired documents or has no documentation, i.e., claims documents were lost or stolen, refer him/her to the local **USCIS** office to request new documents before primary or secondary SAVE procedures are initiated.	**Note: An identification card issued by another country is not an INS document and cannot be used to verify immigration status; e.g., a Mexican Consular card.**
Documentation provided by the alien must be submitted for re-verification through SAVE. Initiate SAVE verification prior to action to approve the case or add an individual.	Document verification of alien status received through SAVE. If not received prior to action to approve/add the individual, document the date SAVE verification was requested by the EW.
a. The following groups of aliens are qualified aliens. All qualified aliens who entered the U. S. prior to 8/22/96 are eligible aliens.	a. The documents listed below for each alien group are not necessarily all inclusive. An alien may have other documents showing his alien status to be one of those listed for qualified aliens.
(1) Aliens lawfully admitted for permanent residence under the Immigration and Nationality Act (INA) (without regard to the number of SSA qualifying quarters of work the alien has).	(1) Alien Registration Receipt Card (Form I-151 or AR3a or I-551), or unexpired temporary I-551 stamp on foreign passport or on I-94. If the LPR is an American Indian born in Canada and covered by Section 289 of the INA: I-551 with the code "S13"; or a letter or other tribal document certifying at least 50% American Indian blood, combined with a birth certificate or other evidence of birth in Canada. Note: Form I-151, Form AR-3, and AR3a are earlier versions of the I-551. If the

Facts to be Established	Substantiation and Procedures
	alien has only the older version, refer him to **USCIS** to apply for the I-551.
(2) Aliens granted asylum under Section 208 of the INA.	(2) Arrival Departure Record (I-94) with stamp showing grant of asylum under Section 208 of the INA; or Employment Authorization Card (I-688B) bearing "Provision of Law" citation 274a.12(a)(5); or (Employment Authorization Document (I-766) annotated "A5"; or Grant letter from the Asylum Office of **USCIS**; or Order of an immigration judge granting asylum.
(3) Refugees **who are:**	(3) **Verify as follows:**
(a) admitted under (I-94) Section 207 of the INA,	**(a)** Arrival Departure Record (I-94) annotated with stamp showing admission under Section 207 of the INA; or Employment Authorization Card (I-688B) bearing "Provision of Law" citation 274.a12(a)(3) or (4); Employment Authorization Document (I-766) annotated "A3"; or Refugee Travel Document (I-571); or
(b) admitted as an Amerasian immigrant; **or**	**(b)** an I-94 coded AM1, AM2, or AM3; or an I-551 coded AM6, AM7, or a temporary I-551 stamp in foreign passport; **or**
(c) victims of human trafficking.	**(c) letter from the Office of Refugee Resettlement that certifies or documents the status. The entry date is the certification date of the letter.**
(4) Aliens paroled into the U. S. under Section 212(d)(5) of the INA for at least one year.	(4) Arrival Departure Record (I-94) with stamp showing admission for at least one year under Section 212(d)(5). (Alien cannot aggregate periods of admission for less than one year to meet the one-year requirement.)
(5) Aliens admitted as conditional entrants under Section 203(a)(7) of the INA.	(5) Arrival Departure Record (I-94) with stamp showing admission under Section 203(a)(7) of the INA; or Employment Authorization Card (I-688B) annotated "274a.12(a)(3)"; or Employment Authorization Document (I-766) annotated "A3."
(6) Aliens whose deportation has been withheld under Section 241(b)(3) or 243(h) of the INA.	(6) Employment Authorization Card (I-688B) annotated "274.a12(a)(10)"; or Employment Authorization Document (I-766) annotated "A10"; or Immigration Judge's Order showing deportation withheld under section 243(h) of the INA, or removal withheld under section 241(b)(3) of the INA.

Facts to be Established	Substantiation and Procedures
(7) An alien who is a Cuban-Haitian entrant as defined in section 501(e) of the Refugee Education Assistance Act of 1980. A Cuban-Haitian entrant is a person who:	(7) Alien Registration Receipt Card (I-551) with the code CU6, CU7, or CH6; or an unexpired temporary I-551 stamp in foreign passport or on an I-94 with the code CU6 or CU7; or an I-94 with stamp showing parole as "Cuba/Haitian Entrant" under section 212(d)(5) of the INA.
(a) has been granted parole by **USCIS** for humanitarian or public interest reasons, unless a final order of deportation or exclusion has been Issued;	Document that an alien is subject to exclusion or deportation using letters or notices which indicate ongoing exclusion or deportation proceedings for that person. Contact **USCIS** if information indicates that a final order or exclusion or deportation has been issued.
(b) has an application for asylum pending with **USCIS**, unless a final order of deportation or exclusion has been issued;	
(c) is subject to **USCIS** exclusion or deportation proceedings, unless a final order of deportation or exclusion has been issued.	
(8) An alien and/or alien parent of a child battered or subjected to extreme cruelty and/or alien children of a parent who is battered or subjected to extreme cruelty while in the U.S. who meets the following requirements:	(8) Document using information from the applicant/recipient and other sources knowledgeable of the situation. Document decision of the local agency that there is a substantial connection between the battery or cruelty and the need for benefits.
(a) The perpetrator is a spouse, parent, or other household member of the spouse or parent's family who was residing in the home at the time of the incident but is no longer in the home. The alien must not now be residing in the same household as the person responsible for the battery or extreme cruelty, and	
(1) the alien was battered or subjected to extreme cruelty while in the U.S. by a spouse or a parent, or by a member of the spouse or parent's family residing in the same household as the alien, and the spouse or parent consented to or acquiesced in such battery or cruelty;	

Facts to be Established	Substantiation and Procedures
(2) the alien's child was battered or subjected to extreme cruelty while in the U.S. by a spouse or a parent of the alien (without the active participation of the alien in the battery or cruelty), or by a member of the spouse or parent's family residing in the same household as the alien, and the spouse or parent consented or acquiesced to such battery or cruelty and the alien did not actively participate in the battery or cruelty, or	
(3) the alien child resides in the same household as a parent who has been battered or subjected to extreme cruelty while in the U.S. by that parent's spouse, or by a member of the spouse's family residing in the same household as the parent and the spouse consented or acquiesced to the battery or cruelty.	
(b) The alien has a petition approved by or pending with **USCIS** for one of the following:	(b) Examine documents provided by the applicant/recipient to determine if this requirement is met. Document case record.
(1) status as an immediate relative (spouse or child) of a U.S. citizen;	
(2) classification changed to immigrant;	
(3) status as the spouse or child of a lawfully admitted permanent alien (LAPR); or	
(4) suspension of deportation and adjustment to LAPR status based on battery or extreme cruelty by a spouse or parent who is a U.S. citizen or LAPR alien.	
b. If a qualified alien entered the U. S. on or after 8/22/96, he must also meet one of the following requirements.	b. Document qualified alien status is met in a. above, and whether the alien meets any of the requirements below. If none of these requirements are met, the alien is ineligible for five years from his date of entry into the U. S.
(1) The alien was admitted as a refugee under Section 207 of the INA, or is an Amerasian immigrant (even though status may now be adjusted to LPR).	(1) Document same as (3) above; or if now an LPR, verify admission as a refugee by code RE-6, RE-7, RE-8, or RE-9 on alien's I-551.

Facts to be Established	Substantiation and Procedures
(2) The alien was granted asylum under Section 208 of the INA.	(2) Document same as (2) above; or if now an LPR, verify alien was previously granted asylum by filing a G-845 and Supplement along with a copy of the alien's I-551.
(3) The alien's deportation is being withheld under Section 241(b)(3) or 243(h) of the INA.	(3) Document same as (6) above; or if now an LPR, verify previous deportation or removal withheld by filing a G-845 and Supplement along with a copy of the alien's I-551.
(4) The alien is a Cuban-Haitian entrant.	(4) Document same as (7) above.
c. Exception for Veterans/Relatives of Veterans - An alien who is lawfully residing in the state and meets one of the following criteria is an eligible alien for TANF purposes, regardless of his date of entry, provided he is:	c. Document lawful alien status (status must be other than illegal).
(1) a qualified alien who is a veteran (as described in Section A.2.d.1)) discharged honorably and not because of alienage, or	(1) Verify qualified alien status according to Section F.2 above. Verify 201.7 military status using documents in applicant/recipient's possession or through military records (i.e., Form DD 214). (a) Document active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard. (b) If DD 214 shows original enlistment before 9/7/80, there is no minimum active-duty service requirement. If the DD 214 shows two or more years of continuous active duty, the alien meets the minimum active-duty service (c) Document "Honorable" discharge. "Under Honorable Conditions" is not acceptable for purposes of this requirement. (d) Refer aliens in any other branch of service or with any other type of duty (e.g., "Active Duty for Training") to the VA office to determine veteran status, or DD 214 is not available or shows active duty service of less than two years with original enlistment after 9/7/80.

Facts to be Established	Substantiation and Procedures
	(e) If alien has no papers showing service or discharge, refer him to the local VA regional office to determine his status.
(2) a qualified alien who is on active duty (except for training) in the U. S. Armed Forces (Army, Navy, Air Force, Marine Corps, or Coast Guard), or	(2) Verify qualified alien status according to Section F.2 above. Verify military status using documents in applicant/recipient's possession or through military records (e.g., Military ID (DD 2 (Active)). (a) DD 2 must show an expiration date of more than one year from the date of determination. (b) If the DD 2 is due to expire within one year from date of determination, verify active duty through a copy of the current military orders. (c) If the military orders are not available, verify active duty by contacting: DEERS Support Office Attn: Research and Analysis 400 Gigling Road Seaside, CA 93955-6771 Fax Number: (408) 655-8317
(3) the spouse or unmarried dependent child of an individual in (1) or (2) above (as described in Section 201.7 A.2.d.3))	(3) In addition to verification of veteran or active duty status of alien in service as stated in (1) and (2) above, verify relationship to the alien in military service. Qualified alien status not required. Document dependent status of a child by possession of a Military ID card and that the child is under age 18, or if a full-time student is under age 22.
(4) the unremarried surviving spouse of an individual in (1) or (2) above (as described in Section 201.7 A.2.d.3)).	(4) Verify according to procedures in (1) or (2) above, as appropriate, that the deceased spouse was a veteran or active duty military member.
(a) Determine that applicant/-recipient was married to the veteran or active duty alien within 15 years after the termination of the period of service in which the injury or disease causing his death was incurred/aggravated;	(a) Accept applicant/recipient's statement unless there is reason to question.

Facts to be Established	Substantiation and Procedures
(b) Determine that applicant/-recipient was married to the veteran or active-duty personnel for one year or more; or	(b) Accept applicant/recipient's statement unless there is reason to question.
(c) Determine that a child was born of the relationship between the surviving spouse and veteran or active-duty personnel, either during or before the marriage.	(c) Verify through records in applicant/-recipient's possession or through the state vital records office.
d. Sponsor Deeming	d. Sponsor Deeming
(1)Determine if sponsor is individual or agency/organization.	
a) Sponsored by individual.	(a) Deem income and resources according to Section 305.4.D.
b) Sponsored by agency/organization.	(b) Alien ineligible unless agency/organization no longer exists or financially unable to support. Verify ability to support by written or verbal statement from agency/organization. Document agency/organization's existence based on agency knowledge. (Exception: Refugees, parolees, political asylees, Cuban/Haitians and Amerasians are not affected by this provision.)

Facts to be Established	Substantiation and Procedures
G. Each applicant/recipient is required to provide a**n** SSN or show proof of application for a**n** SSN for each person for whom assistance is requested. A verified SSN is not required prior to approval of application	**Client's statement is acceptable for a Social Security number.** To show proof of application for an SSN, client must provide a statement **from SSA office, or if the individual** was enumerated at birth, one of the following proofs must be shown: 1) a completed SSA-2853; 2) a birth certificate showing the individual was enumerated at birth; or 3) a written statement from the hospital indicating a request for a SSN has been made. This statement must include the name and address of the hospital, name of the parent and newborn, and must be dated and signed by hospital staff providing the information. The SSN verification report is also acceptable verification of a client's SSN. Upon receipt of SSN verification, enter number/ numbers on all appropriate documents. Document case record if proof of application for a SSN is provided.
If an applicant/recipient cannot furnish a**n** SSN nor show proof of application for a**n** SSN on each person for whom assistance is requested, **the applicant/recipient must be** referred to the Social Security District Office.	**The agency will direct the assistance unit to submit form SS5 Application for a Social Security Number to the Social Security Administration (SSA). The agency must advise the assistance unit where to file the application for an SSN and discuss what evidence will be needed to obtain an SSN. Evidence needed includes a U.S. public record of birth established before age five or other verification of birth, such as religious records whose validity is not questionable or hospital records if they can be verified by SSA.**

Facts to be Established	Substantiation and Procedures
Adding persons to Assistance Unit - This condition must be met prior to adding the individual to the A.U., with one exception:	Same as above.
Newborn children shall be added **to the assistance unit**. The recipient must furnish a**n** SSN or show proof of application for a**n** SSN for the newborn child. **If the assistance unit is unable to provide an SSN or proof of application for an SSN when the child is first added to the case, the assistance unit must provide the number or proof of application at the next renewal or within six months of the application date whichever is later.**	Worker should explain the condition and the time frame involved to the recipient.
SSNs will be matched via the Income and Eligibility Verification System (IEVS) with the SSN Record System at SSA for verification.	The worker must ensure the client information in **ADAPT** is correct. If a no match report is generated by IEVS, the worker must obtain the correct information for **ADAPT** or refer the client to SSA to correct the information.

Facts to be Established	Substantiation and Procedures
IV. ASSISTANCE UNIT	IV. ASSISTANCE UNIT
A. Children - Include all blood-related or adoptive siblings of the child for whom assistance is requested except when:	A. Those children who meet the categorical requirements and conditions of eligibility in Section 201.1 A. and B.
1. Child receives SSI.	1. Verified by agency knowledge. Omit child entirely from A.U.
2. Child age 16 and not otherwise exempt, has been sanctioned for failure to comply with ESP requirements.	2. The child is to be removed from the A.U. when a sanction notice is received thus reducing the number of persons in the A.U. by one. If the child is the only dependent child in the family, eligibility continues to exist for the remaining member(s) of the unit.
3. Child receives an adoption assistance maintenance payment and adding that child to the assistance unit and counting the maintenance payment reduces the AFDC benefit.	3. Verified by agency knowledge. Omit child entirely from A.U.
4. Child receives foster care maintenance payment.	4. Verified by agency knowledge. Omit child entirely from A.U.
5. Child is subject to the family cap provision.	

Facts to be Established	Substantiation and Procedures
B. Caretaker	B. Caretaker
1. If parent, (including a minor parent) include unless:	1. Parent (this means both parents if they are in the home).
a. Receiving SSI and/or Auxiliary Grant.	a. Verified by agency knowledge. Omit parent entirely from A.U.
b. Parent is not (a) a U. S. citizen or (2) an eligible alien as defined in Section 201.7 A.2.	b. If born in U. S. according to signed statement of applicant/recipient, citizenship is presumed established unless there is reason to question. If born outside U. S., verify citizenship or alienage as specified in Section I F.1.b. or 2. If citizenship or alienage is not established, omit parent from A.U.

Facts to be Established	Substantiation and Procedures
c. Under ESP, the non-exempt parent who has been sanctioned for failure to comply with ESP requirements.	c. The non-exempt parent who is sanctioned is ineligible for inclusion in the A.U. However, assistance is to be given to the otherwise eligible family members.
d. Parent refuses to assist agency in establishing paternity or seeking child support.	d. Decision to omit or remove parent on this basis must be carefully made. Agency must be certain parent is refusing to assist rather than simply unable to assist. Basis for making decision to omit or remove must be documented in case record.
e. Convicted offender sentenced to live at home and perform unpaid	e. Include as EWB, only if providing an essential service (302.5) and if not ineligible per Section 302.6.F.

Note: The parent shall be included in the assistance unit even though the only eligible child is a SSI recipient, the only eligible child receives an Adoption Assistance payment**, or the only eligible child receives a foster care maintenance payment.**

Facts to be Established	Substantiation and Procedures
2. Caretaker if not parent Include if: a. he/she requests assistance; and	2. Caretaker not parent a. Client's statement or
b. is not receiving SSI and/or AG; and	b. Agency knowledge.
c. is in need	c. Verify income by methods described in Section VII. If net income (gross, less work expenses) equals allowable individual requirements, caretaker cannot be included.
d. is a citizen of the U. S. or an eligible alien as defined in Section 201.7 A.2.	d. Verify as for parent-caretaker (Section IV B.1.b.)
Do not include if: e. needs met by spouse in home.	e. If caretaker states spouse living in home cannot support, must determine net income (gross, less work expenses) of spouse (unless spouse is SSI or AG recipient). Determine his ability to support his wife (**TANF** caretaker) through use of the full (100%) standard of assistance based on the number of persons he is primarily responsible for supporting (himself, his wife and their dependent children, if any) and appropriate to the locality group. If his net income equals or exceeds the full standard, his wife (**TANF** caretaker) cannot be included in the AU. If his net income is less than the full standard, the caretaker is included in the AU. Support available from the spouse is established by comparing his net income to the full standard of assistance for the number of his

Facts to be Established	Substantiation and Procedures
	dependents, exclusive of the ADC caretaker. Any surplus is counted as income to the caretaker. If surplus is sufficient to meet caretaker's total allowable individual need (304.2) she cannot be included in the assistance unit.
f. Under the ESP Program, the nonexempt caretaker-relative has been sanctioned for failure to comply with program requirements.	f. Same as for parent-caretaker.
g. Refuses to assist in determining paternity or securing child support.	g. Same as for parent-caretaker.
NOTE: The caretaker/relative shall be included in the assistance unit even though the only eligible child is a SSI recipient.	
C. EWB PERSONS	C. EWB PERSONS
Include if -	
1. Applicant/recipient requests assistance for them; and	1. Request made on application/redetermination form.
2. He/she is providing an essential service.	2. Determine, based on evidence provided by applicant/recipient, that no other individual in the unit can provide such service. All such decisions must be reviewed by Eligibility Supervisor.
3. Living in home; and	3. Telephone or city directory. Contact with landlord, public housing.
4. Are not receiving SSI or AG.	4. Agency knowledge.
5. Are in need; and	5. Same as for caretaker who is not parent.
6. Are citizens of the U. S. or an eligible alien as defined in Section 201.7 A.	6. Establish as for caretaker.
7. Meets other eligibility requirements for EWBs.	7. See Section 302.6.F.

Resources – Repealed effective December 1, 2003.

Facts to be Established	Substantiation and Procedures
VI. STANDARD OF ASSISTANCE IN TANF	VI. STANDARD OF ASSISTANCE IN TANF
A. Standard of Assistance (304.1) Number of persons In assistance unit In (302.2)	A. Standard of Assistance Identify locality group from Appendix 1 to Section 304. Use figure for number of persons in AU for appropriate locality group from Appendix 2 to Section 304. For agencies meeting the standard of need, use appropriate figure from Appendix 2 to Section 304.
B. Total Allowable Individual Need (304.2)	B. Total Allowable Individual Need
1. Amount allowed for needs of one individual in AU.	1. Divide the appropriate standard of assistance by the number of persons in the AU to determine the prorata share of each person in the unit. This prorata share is the total allowable individual need.

Facts to be Established	Substantiation and Procedures
	must send a Notice to Client of Action advising the recipient of the increase in the unit’s Hold Harmless payment amount.
	2. If the amount of the following month’s payment is less than the current month’s payment, the worker must send an Advance Notice of Proposed Action advising the recipient of the decrease in the unit’s Hold Harmless payment amount.

Facts to be Established	Substantiation and Procedures
VII. INCOME	VII. INCOME
	All income, earned or unearned, must be counted in determining need except that which is totally disregarded. Also, the amount of all income, earned and unearned, must be verified; however, if the income is disregarded, only the source must be verified.
A. Earned Income (305.3)	A. Earned Income
1. Earned Income Totally Disregarded	1. Earned Income Totally Disregarded
a. **Individuals receiving payments under the Workforce Investment Act of 1998 (WIA).**	a. Disregard **WIA** earnings in the 185% screen, determination of need and grant computation.
b. Eligible child who is a full-time student or a part-time student **and employed**.	b. Student status established under c. below. Disregard all earnings of full-time student and of part-time student, in the grant computation. Exception: Full-time student earnings must also be disregarded in 185% screening.
c. Student Status A child is considered a student if enrolled in an elementary, secondary, or secondary level vocational or technical program of study or training leading to a certificate diploma, or degree. If verified to be a student the child's status continues during official vacation.	c. Student Status Verify with school if child is enrolled as a full-time or part-time student. Note: An 18 year old eligible child is considered a full-time student.
2. Determination of gross earned income and/or profit from wages, salaries, commissions and/or tips.	2. Determination of gross earned income and/or profit from wages, salaries, commissions, and/or tips.

Facts to be Established	Substantiation and Procedures
a. Wages, salaries and commissions	a. Verify by:
	(1) Pay Stubs
	(2) Pay Envelopes
	(3) Written statement from employer obtained by client
	(4) Written or verbal statement from employer obtained by E.W.
b. Tips	b. If client is employed in an occupation in which tips are a part of the monthly gross earnings, he/she will be required to keep a weekly record of such income and report to the local agency in accordance with reporting requirements.
c. Profit from self-employment	c. To determine profit from self-employment
(1) If income is from property, is it produced by individual's own efforts, or does he carry Managerial responsibilities? If	(1) Establish through worker's observation and discussion with client of his activity. Income from rent or room and Board is not earned income unless the

Facts to be Established	Substantiation and Procedures
either, it is considered earned income from self-employment; if not, it is unearned income. See Section VII,B.4. Other Cash Income when this income is determined to be unearned.	activity engaged in is a business enterprise.
(2) Amount of gross income received	(2) Verify by - Self-employment bookkeeping records
(3) Amount of business expense from (to be deducted from gross income to determine profit).	(3) Verify as above and deduct gross income to determine profit. Exceptions: In the following situations, profit is determined by specified formulas:
(a) Board	(a) Profit is monthly gross income from boarders, less food allowance for one person living in a group (at 100%) per boarder. (Table 1, Appendix 2, Section 305).
(b) Room Rent	(b) Profit is 65% of monthly gross income received if heat is furnished, 75% of gross income if heat is not furnished.
(c) Room and Board	(c) Make deduction for boarder(s) as in (a). Then apply formula in (b) to balance.
(d) Children in family day care This computation for snacks and meals applies only to children being provided day care outside the home in which they live. No deductions for snacks and meals are to be given for children receiving day care in their own home.	(d) When this service is provided in client's home to children other than those living in the same home, deduct from the average monthly gross income received in the budget month the cost of meals and snacks that are provided during the period the income was earned. Allow 40¢ per meal per day. Determine the number of days in the period in which the income was earned in which meals are provided for each child. Add to obtain the total number of meals provided during the period and multiply by 40¢ to obtain the monthly cost of meals

Facts to be Established	Substantiation and Procedures
	provided for all children. The total monthly cost of snacks is computed by the same method as meals with 20¢ allowed for each snack. Add the total monthly costs of meals and snacks to obtain the total cost of food provided. Deduct this monthly cost of food from the total income anticipated for day care during the payment month. Sixty-five percent of the balance is considered as profit from day care.
3. Determination of Assistance Payment.	3. Once the individual has been found eligible for an assistance payment, determination of net income to be used in computing the assistance payment is as follows:
a. Total monthly gross income.	a. Use the anticipated total monthly gross earnings and/or profit.
b. Earned Income Disregards.	b. Deduct from gross earnings/profit in the following order: 1) The standard deduction for **the assistance unit**. 2) **20% of the remainder.** **3**) For purposes of determining initial eligibility, anticipated cost of incapacitated adult/child care, not to exceed $175 for full-time employment or $120 for part-time employment, for each child/incapacitated adult in the assistance unit or if the child is under 2, deduct anticipated costs not to exceed $200, for full-time employment. For determining the amount of the

Facts to be Established	Substantiation and Procedures
	payment, deduct same as above for adult care. Child care disregards apply only when the applicant/recipient chooses the disregard.

Facts to be Established	Substantiation and Procedures
B. Unearned Income	B. Unearned Income
1. Disregards:	1. Disregards:
All unearned income specified in Section 305.4.A. is disregarded.	Disregard all unearned income in this section.

Facts to be Established	Substantiation and Procedures
B. Unearned Income	
d. Veterans benefits for educational purposes of individual 18 or older.	d. (1) Verify by award letter **or benefit payment check.** (2) Verify if the VA Educational Grant is the individual's only source of assistance for education. If VA is the individual's only source of assistance for education, disregard the allotted amount of the benefit for that individual. No further verification is required. (3) If the individual is also a recipient of a grant, loan, or scholarship, and it is verified that the VA benefit is used to help purchase one or more of the following items, the entire allotted amount of the benefit for that individual is disregarded: Tuition, books, fees, equipment required by the school, transportation to and from school if more than one mile away, or child care services if necessary for school attendance.
2. Social Security and Other Benefits - (305.4.B.) Amount of monthly benefits received except as shown in a. and b. (below).	2. Social Security and Other Benefits (VA, Black Lung, RR Retirement, Unemployment Compensation, Workmen's Compensation, etc.) Verify by: Documents in client's possession - Award letter or notice Benefit payment check Other sources - Social Security Administration (Form 1610 OR TPQY QUERY RESPONSE) Veteran's Administration RR Retirement Board UMW Union Va. Employment Commission Workmen's Compensation Board Insurance Company or Fraternal Organization Confederate Pension Board

Facts to be Established	Substantiation and Procedures
	If benefits are actually being paid, count amount received monthly. If client states no benefits are being received, do a routine check with SSA, if either parent is deceased or disabled. Do other routine checks if information given by client indicates possible eligibility for RSDI or other benefits and, if not receiving benefits, assist client in exploring eligibility for them. Assistance must be granted pending such exploration if eligibility is otherwise established.
a. If caretaker-relative appears eligible for reduced RSDI or RR Retirement benefits prior to age 65, must count amount of reduced benefits, even though may choose not to accept.	a. (1) Request caretaker-relative to apply. Do not count until (a) reduced benefits are received or (b) amount of entitlement is determined, but caretaker chooses not to accept. (2) If caretaker-relative refuses to apply and amount of entitlement cannot be determined, need cannot be established.
b. Count amount being received as income except when the Medicare Part B premium is deducted from the Social Security or Railroad Retirement benefits.	b. Verify entitlement amount by:
When the premium for Medicare Part B is being deducted, that amount must be added to the actual amount of benefit being received.	(1) Award Letter, when the individual is eligible for Medicare Part B at the same time eligibility for benefits is determined. Usually this happens at age 65; or, (2) Notice when the individual later becomes eligible for Medicare, usually in disability cases that have been eligible for benefits for 24 months; or **(3) SVES using information on Response Screen 3; or** **(4) MMIS, using information on the DMAS Eligibility TPL Information screen.**

Facts to be Established	Substantiation and Procedures
3. Support from Relatives (305.4 E)	3. Support from Relatives
a. **TANF** Parent in home.	a. **TANF** Parent in home. Income assumed to be available as follows:
(1) Is in AU.	(1) Parent of ADC children in AU. All his/her countable income counted.
(2) Parent not in AU if -	(2) Parent omitted from AU (see Section IV B. for determination).
(a) Receives SSI or AG.	(a) None of his/her income is counted.
(b) Does not meet citizenship or alienage requirements.	(b) Apply deeming income formula as specified in Section 305.4F.

Facts to be Established	Substantiation and Procedures
(c & d) Parent has been sanctioned for failure to participate in ESP or has failed/ refused to assist in determining paternity, or securing child support, or apply for or provide a SSN to the agency.	(c & d) Parent's anticipated gross earned income is counted.
b. Spouse of ADC caretaker (who is not the parent of the eligible children) living in the home, when ADC caretaker is in the A.U.	b. When ADC caretaker has a spouse living in the home and the spouse is unable to support her fully, any income of the spouse in excess of his needs and the needs of their other dependents is assumed to be available to the ADC caretaker, as determined by procedures shown in Section IV.B.2. Income of a spouse is verified as is any other income.
c. Other relatives	c. Other relatives
Anticipated support received from legally responsible relatives and from non-responsible relatives.	Verified by: Receipts or cancelled checks in the relative's possession.

Facts to be Established	Substantiation and Procedures
	Court records. Statement from: (1) person making contribution: or (2) a third party if all else fails.
Legally responsible relatives are: Parent (including putative father, if known) of eligible children. spouse of eligible caretaker.	Legally responsible relatives, if whereabouts are known, must be contacted if living in community or contacted by mail if living elsewhere, except that, if there is no evidence that relative is contributing and there is substantial evidence that personal contact with the relative might result in danger to the family or the worker, this step may be omitted. In such cases, the case record must document the reasons for such omission.

Facts to be Established	Substantiation and Procedures
	Consider as income the actual or anticipated amount of contribution received by the applicant/recipient. Support payments received prior to the date that the case approval is keyed into VACIS are to be considered as income to the assistance unit. After the case has been approved, the support must not be counted, but redirected to DCSE. The $50 disregard is only to be applied in calculating the initial month's payment(s) if it is anticipated that $50 will not be collected by DCSE subsequent to case approval. If court-ordered support payments are made directly to the Division of Child Support Enforcement, they are counted as a refund to ADC and not counted as income in computing amount of assistance. Agency's responsibility to secure support from legally responsible relatives described in Chapter 600.
Cohabitant living in the home with ADC parent and children.	Consider as income the actual or anticipated amount of support or contribution received by the applicant/recipient for the children. This amount is to be counted as income in computing amount of assistance.
c. Refunds, from the Division of Child Support Enforcement, of over-collected child support identified as closed case refunds and support paid in excess of public assistance.	c. Verify by using the appropriate Warrant Register provided by DCSE.
4. Other Cash Income	4. Other Cash Income
This includes all other cash income received. Principal sources would be:	Count actual or anticipated amount (net, if cost involved as income).
a. Rental of property, or rooms, or board paid, when client is not engaged in a business enterprise or actively involved in management.	a. Verify anticipated income by - Document in client's possession Statement of tenant or boarder. Verify anticipated cost by - Tax receipt, for property owned. Where rooms are rented, count as income: 65% of total received if fuel is furnished by client. 75% of total received if fuel is not furnished by client.

Facts to be Established	Substantiation and Procedures
	For boarder, count total received, less the standard food allowance for one son at 100% per boarder (Table 1, Appendix 2, Section 305). For roomer boarder, deduct the standard food allowance for one person at 100% per boarder (Table 1, Appendix 2, Section 305), and apply room rental procedure to remainder. Total amount received, less cost, is income to be counted.
b. Contributions from other agencies or organizations.	b. Verify amount and purpose of contribution through contact with other agency. Count in amount received except disregard contribution made for a special needs item not included in the Standard of Assistance.
c. All other cash contributions.	c. Verify - Papers in client's possession. Statement of person contributing. Count in amount received, except that occasional or unpredictable contributions are not counted.
d. Home energy assistance (cash payments)	d. Verify amount and purpose of payment through contact with provider business or organization. Count amount received. However, if payment was received by a household that includes individuals other than the **TANF** AU, including SSI recipients, only the **TANF** AU's pro rata share, based on total number of persons in household, is to be counted.
e. **Interest in excess of $10 a month. (Interest payments less than $10 a month are disregarded.)**	e. Count as income in the month received or anticipated to be received. Verify amount anticipated/received by documents in customer's possession or through contact with the financial institution where the account or other financial instrument is located.

5. Income designated for the sole use and benefit of a child who is not required to be in the assistance unit.

Do not count any of this income in determining amount of assistance for the assistance unit, if the child is not eligible because: 1) he received a lump sum payment; 2) he is a SSI recipient; 3) he does not meet citizenship/alienage requirements; 4) he is married; 5) is not categorically eligible. If the child is excluded from the unit because verification of categorical requirements has not been provided or because he fails to meet conditions of eligibility, his income will be considered available to the remaining assistance unit members in its entirety. Income of the excluded child must be verified. If the agency is not able to verify the excluded child's income, eligibility for the remaining assistance unit members cannot be determined.

Facts to be Established	Substantiation and Procedures
A. ESP/VIEW REFERRAL	A. ESP/VIEW REFERRAL
1. All applicants/recipients must be referred for participation in ESP **or VIEW** as a condition of eligibility unless the individual is exempt.	1a. The local worker must determine if the applicant/recipient is exempt or non-exempt from participation prior to the initial approval, at redetermination, when adding an individual to the assistance unit, or when a change in the individual's situation would affect his/her ESP **or VIEW** status. Such determination must be recorded in the case record. See Section 201.11.B. and 901.2 the exemption criteria.
	b. Individuals who lose their exemption status must be referred to ESP **or VIEW** in the month in which the exemption status is verified. The worker must provide all applicants/recipients with the ESP explanatory pamphlet and the "Employment Services Program - Rights and Responsibilities" pamphlet **or the VIEW Program pamphlet** and with a verbal explanation of the requirements of ESP **or VIEW**. Note: Exempt persons whose youngest child turns three **or 18 months** will be sent a computer-generated notice by the fifth of the month in which the child turns three **for ESP and 18 months for VIEW.**
	c. Individuals will be referred to ESP **or VIEW** via appropriate VACIS coding.
	d. Individuals must be referred to ESP **or VIEW** each time their status changes from exempt to non-exempt. Additionally, individuals being added to the assistance unit must be referred at the time their needs are included in the grant.

Facts to be Established	Substantiation and Procedures
B. REFERRAL TO ESP UNIT	B. REFERRAL TO ESP UNIT
1. Initial Referral	1. Initial Referral
a. Refer non-exempt applicants upon approval	a. Applicants The referral will automatically be generated to the ESP unit **via the appropriate coding in VACIS** for each **non-exempt individual** at the time of application approval.
b. **All applicants, exempt and non-exempt, must be advised of the right to participate in a voluntary applicant job search. Note: Participation in applicant job search is not a condition of eligibility.**	**b. Voluntary applicant job search.** **This referral will be in accordance with agency procedures for service referrals when participation is requested by the applicant.**
	c. Additions to Assistance Unit The referral will automatically be generated to the ESP unit at the time action is taken **in VACIS** to add a **non-exempt individual** to the assistance unit **via the appropriate VACIS coding**.
2. Subsequent referrals **must be made when a sanction** period **ends**; when a **recipient's** status changes from exempt to **non-exempt; when a non-exempt individual is added to an existing assistance unit;** or **,** when an individual is included in a case that is reopened without a new application.	2. Subsequent Referrals A referral will automatically be generated to the ES**P Worker** at the time the eligibility worker inputs the change in the ESP status code and the **referral month/year**.

Facts to be Established	Substantiation and Procedures
C. RIGHTS AND RESPONSIBILITIES	C. RIGHTS AND RESPONSIBILITIES
1. **All** individuals must **be informed of the availability of program activities, the supportive services for which they are eligible, and the individual's** responsibilities **regarding participation in ESP**.	1. The local worker is to **provide the following information to all** exempt persons: a. **That they may** voluntarily **participate in** employment services under ESP; b. Their option to withdraw from participation at any time without loss of ADC, provided their status has not changed in such a way as to require **participation;** c. Their responsibility to report any changes affecting their exemption status; and, d. The day care services which may be available in the event they volunteer. e. The option to participate in a voluntary applicant job search program.
2. **Non-exempt individuals** who become exempt	2. When **a** non-exempt individual becomes exempt, the EW is responsible for advising the recipient of: a. His/her status change; and, b. His/her right to continue participating in ESP as a volunteer, including the rights and responsibilities of the volunteer as explained in Item C.1. above.

Facts to be Established	Substantiation and Procedures
3. Non-Exempt Individuals	3. The local worker is to: a. Inform **non-exempt individuals** of the requirement **to participate** in ESP; **b. Inform non-exempt individuals of the supportive services available, including child care and transitional child care and extended Medicaid benefits;** **c.** Inform **non-exempt individuals** of the penalties for refusing/failing to meet the participation requirement, without good cause; and **d.** Inform **non-exempt individuals** regarding what constitutes good cause for refusing/failing to participate in ESP. **e.** Inform **all individuals** of the **option** to participate voluntarily in applicant job search.
4. **Exempt individuals who become non-exempt**	4. A computer-generated letter will be sent to **all exempt individuals** at the time **the individual's ESP status in** VACIS **is updated from exempt to non-exempt. The letter will** explain: **a.** His/her status change to **non-exempt**; and, **b.** His/her rights and responsibilities as outlined in C.3. above.

Facts to be Established

D. NOTIFICATION OF CHANGES

1. The **ESP Worker** will be notified of any eligibility determination which may affect an individual's ESP status.

3. The eligibility worker will be notified by the ES**P Worker** via a computer-generated document, of the following changes:

Substantiation and Procedures

D. NOTIFICATION OF CHANGES

1. When any of the following changes are coded in the computer by the EW, the ES**P Worker** will automatically receive a computer-generated docuemnt which described the action taken.

   a. Case is closed or a registrant is deleted from a case;

   b. Obtaining employment;

   c. Losing employment;

   d. Change in exemption status (this change must be input by EW **in the month in which the status is verified**);

   e. Case is being transferred out;

   f. Case being accepted or denied on a transfer in;

   g. Adding previously sanctioned person; or,

2. **The EW must manually notify the ESP Worker of the following changes:**

   a. change of address;

   b. a sanctioned individual secures employment of 30 hours or more per week;

   c. a non-exempt individual who was working 30 hours or more per week quits her job.

3. When such a notice is received, the eligibility worker will:

Facts to be Established	Substantiation and Procedures
a. **A non-exempt individual** has secured or will be securing employment;	a. Secure income verification and impact the assistance payment according to Section 305;
b. **A non-exempt individual** has requested reevaluation of his/her exemption status; and,	b. Within 30 days, re-evaluate the exemption status and notify the ES**P Worker** of the result of the evaluation. Update the VACIS codes or notify the ES**P Worker**, manually, if the ESP status remains the same.
c. **A non-exempt individual** has failed to comply, without good cause, with **ESP** requirements, is to be **sanctioned**.	c. The eligibility worker will sanction the individual as follows: (1) If the individual is a caretaker/relative receiving ADC, his/her needs will not be taken into account in determining need for the assistance unit and assistance will be provided for the remaining AU members in the form of protective or vendor payments unless the local agency cannot, after reasonable efforts, locate an appropriate individual to act as protective payee. If a protective payee cannot be located, the payment will continue to be received by the applicant/recipient. Document case record regarding efforts to locate a protective payee.

Facts to be Established	Substantiation and Procedures
	(2) If the individual is one of several dependent children, his/her needs will not be taken into account in determining need for the assistance unit; or,
	(3) If the individual is the only eligible child in the family, the case will **remain open with only the caretaker(s) needs included in the assistance unit**.
	(4) Once an individual has been sanctioned, his/her needs cannot be included in the assistance unit until **the ESP worker advises to remove the sanction, unless they become exempt and their minimum sanction has passed**.

X. NONCOOPERATION AND GOOD CAUSE

A.	As a condition of eligibility, a client, including a minor parent, must cooperate in efforts to secure support and establish paternity.	A.	Eligibility worker must advise applicant/recipient of this requirement.
B.	An applicant/recipient may claim to have good cause for not cooperating in such efforts, if the client believes that due to circumstances (listed below), cooperating would be against the best interests of the child.	B.	Worker must advise the applicant/recipient of the right to claim good cause. Each case record must contain a "Notice of Exception and Good Cause" form signed by the client. A copy must also be given to the applicant/recipient.
	One or more of the following must exist and must be substantiated by clear and convincing written evidence:		Acceptable evidence:
	1) It can be reasonably anticipated that cooperation will result in physical or emotional harm to the child or caretaker; or,		1) Law enforcement records, court records, medical records, child protective services records, psychological records, report from psychiatrist or psychologist**, or a written statement from a domestic violence program or sexual assault crisis center professional.**
	2) Child was conceived as a result of incest or forcible rape; or,		2) Birth certificates **or** medical records or law enforcement records.
	3) Legal adoption pending; or,		3) Court documents, legal papers.
	4) Official consideration of adoption being made, which has been in progress less than three (3) months.		4) Written statement from licensed or public agency.
			Note: Sworn written statements are acceptable as corroborating evidence of a claim. They cannot be the only evidence of a claim. These statements may be made by neighbors, clergymen, social workers, and medical professionals who have knowledge of the circumstances.

C.	Claim of good cause by an applicant or recipient.	C.	Steps to follow: 1) The worker advises client of right to claim good cause - have client sign the Notice of Exception form. When good cause is claimed in an active **AFDC** case, **the** worker must **enter the information in the MAPPER 501 system** to advise that a claim is pending. (**DCSE** will suspend pursuit activities). 2) EW makes a determination based on the evidence by following the procedures outlined in D. below. 3) Make determination. **4**) Notify the client of the determination by manual use of Notice to Client of Action form.
D.	Making the determination which will be one of the following: Good cause does not exist, or, good cause exists, **DCSE** may not proceed.	D.	Determination process 1) Worker decides if the claimed circumstance exists based on the evidence. 2) If it exists, in order to exempt client from cooperating, worker must determine that to require cooperation would be against the best interest of the child in view of the existing circumstance. (The fact that the circumstance exists does not automatically meant that good cause exists). Document case record.

E. Notification of the determination.

E. The worker must notify the (1) client and, (2) DCSE of the determination.

1) When the worker has made the determination that good cause does or does not exist, the client must be notified by manual use of the Notice of Action. If good cause is determined not to exist, the notice must specify this, and the client must be allowed the opportunity to withdraw or request termination of assistance.

2) All good cause determina-tions must be referred to DCSE for their review and comment by entering the information in the MAPPER 501 system. If a good cause claim is pending when an AFDC case is approved, enter the information in the MAPPER 501 system, and update the code when the determination is made.

F. Time Frame for Good Cause Claims

1) Client must supply the evidence to the agency within 20 days from the day the good cause claim is made.

F. Time Frames

1) If the client does not supply the evidence within 20 days, the the agency will make the determination that good cause does not exist, with the following exception: An extension of the 20 days may be granted by the agency, if the client has informed the agency of difficulty in obtaining the evidence. Case record must be documented.

2) The determination must be made within **30** days **following the date of TANF application.**

2) The agency may extend the time standard only in cases in which the case agency needs additional time due to difficulty in obtaining the evidence. This must be documented in the case record.

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Newborns-Social Security Number (obtaining a SSN#)	201.8, p. 1
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Adding an Individual with Income	305.1, p. 10; 401.2, p. 2b;
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