TITLE 18: HUMAN SERVICES

PART 13: DIVISION OF FIELD OPERATIONS

TANF POLICY MANUAL

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LEGAL AND FUNDING BASE

The following cited laws and regulations set forth basic guidelines used to develop detailed policies and procedures set out in this Volume III, TANF Policy Manual.

Temporary Assistance for Needy Families (TANF)

The Temporary Assistance for Needy Families (TANF) Program is authorized by Title IV of the Social Security Act as amended by the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 (Public Law 104-193) and found in the Code of Federal Regulations, Title 45 beginning with Part 200. The TANF Program is administered through the United States Department of Health and Human Services, Administration for Children and Families.

The Mississippi Department of Human Services is the agency designated by state law to administer the TANF Program. The TANF Program is authorized in the Mississippi Code of 1972 Annotated, in Title 43, Chapters 1 and 17. The TANF Program includes the TANF Work Program (TWP) with specific work-related requirements, exemptions and sanctions. TANF eligibility requirements and TWP requirements are addressed in State law at 43-17-5.

Under the federal and state laws, TANF benefits are time limited, mandating that families move quickly into work activities leading to self-sufficiency. The TANF Program is designed to:

- provide TANF payments assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;
- end dependence of parents/caretakers on public assistance by promoting job preparation, work and marriage;
- encourage the formation and maintenance of two-parent families; and
- prevent Program fraud and abuse.

The specific time limits under which families may receive assistance under the TANF Program as funded under the federal PRWORA, Title IV-A, and State law at 43-17-5 are as follows:

- Temporary assistance to needy families that include an adult is limited to a maximum of 60 months, whether or not consecutive, unless excluded within the 20% exemption criteria.

- The parent or needy caretaker in the assistance unit must be engaged in an approved work activity (defined by the State) as soon as he/she is determined ready to engage in work. In no case shall the adult in the TANF Program receive assistance for more than 24 months within the countable 60 months, whether or not consecutive, unless assigned to and participating satisfactorily in an approved work activity.

The State may exempt no more than 20% of the TANF recipient families from the 60 month maximum benefit and work requirement limits, except as allowed by law in regard to cases

consisting only of minor children, hardship, etc. The State's 20% exemption will include the elderly caretaker relative whose needs are included in the assistance unit, cases in which the parent(s) are incapacitated, cases in which the adult is exempt from work because of caring for a severely incapacitated/ill household member, or cases in which the adult (or child) is suffering hardship because of sexual, mental or physical abuse or battery.

Administrative and benefit costs of TANF payment assistance and the TANF Work Program (TWP) are funded by the federal TANF Block Grant and State Maintenance of Effort (MOE) monies. Formulas for determining the amount of the TANF Block Grant and State MOE requirements are defined in PRWORA.

NOTE: The Block Grant TANF Program replaced the Aid For Families with Dependent Children (AFDC) federal/state match Program in Mississippi effective October 1, 1996.

Related Programs

The legal base and funding for other MDHS programs associated with TANF include:

Child Support

Cooperation with child support enforcement requirements as a condition of TANF eligibility is mandated at both the federal and state level as found in PRWORA and in State statute in Title 43, Chapter 19. The Division of Economic Assistance refers appropriate TANF cases to the Division of Child Support Enforcement.

Refugee Assistance

Money payments for certain individuals who are not eligible for TANF are authorized and funded through the Refugee Assistance Act for Refugee Cash Assistance (RCA). These services are provided with federal grant monies.

FEDERAL LAWS PROHIBITING DISCRIMINATION

The Mississippi Department of Human Services is an equal opportunity service provider and employer. No program, applicant or recipient shall be discriminated against in any aspect of MDHS administration including, but not limited to, the initial and continuing eligibility determination process, the authorization of benefits, access to hearings, and any other service for reasons of race, color, national origin, gender, disability, religion or political beliefs. Civil rights laws and regulations on which compliance is based include Title IV of the Civil Rights Act of 1964, implementing regulation at 45 C.F.R. Part 80; Section 504 of the Rehabilitation Act of 1973, implementing regulation at 45 C.F.R. Part 84; and Title II of the Americans with Disabilities Act (ADA), implementing regulation at 28 C.F.R. Part 35. Title IV prohibits discrimination based on race, color or national origin. Section 504 of Title II of the ADA prohibits discrimination based on disability.

HOW TO FILE A DISCRIMINATION COMPLAINT

Individuals who believe that they have been discriminated against because of age, race, color, sex, handicap, religion, national origin or political belief may file a written complaint with the Office of Civil Rights (OCR), or with the State Agency. An explanation of both the OCR and the State Agency complaint system shall be given to each individual who expresses an interest in filing a discrimination complaint, and he shall be advised of the right to file a complaint in either or both systems.

1. Complaints should contain the following information to facilitate investigations:

    a. The name, address, and telephone number or other means of contacting the person alleging discrimination.

    b. The location and name of the organization, individual or office accused of discriminatory practices.

    c. The nature of the incident, action, or the aspect of program administration that led the person to allege discrimination.

    d. The reason for the alleged discrimination (race, age, color, sex, disability, religion, national origin or political belief).

    e. The names, title (if appropriate), and addresses of persons who may have knowledge of the alleged discriminatory acts.

f. The date or dates on which the alleged discriminatory actions occurred.

g. The provision for the complainant to select whether the complaint will be investigated by OCR, the State Agency, or both.

2. If the client makes verbal allegations and is unable or reluctant to put the allegations in writing, the person to whom the allegations are made shall document the complaint in writing. Every effort shall be made to obtain information specified in Item 1 above.

3. If the person making the complaint chooses to remain anonymous, the person to whom the complaint is made will document the problem or circumstances as described by the complainant including as much information as possible as listed in Item 1 above. The person recording the complaint will sign and date the documentation.

4. When agency staff receives and documents complaints as described in Items 2 and 3 above, that person will immediately alert his immediate supervisor or county director for further handling.

5. Complaints should be filed as soon as possible from the date of alleged discrimination. Reasons for delay in filing a complaint should be included when more than a reasonable time has elapsed between the occurrence and the complaint.

WHERE TO FILE A DISCRIMINATION COMPLAINT

An individual has the right to file a discrimination complaint with MDHS or the Department of Health and Human Services (HHS), Office of Civil Rights (OCR), or both. The person accepting the complaint must fully explain all options to the person filing the complaint. Complaints may be made directly to the State Agency or the HHS, OCR, or both. The individual may mail his written complaint to the county or State MDHS Office or to the Office of Civil Rights, Region IV, Atlanta Federal Center, 61 Forsyth Street, S.W., Suite 3870, Atlanta, GA 30303-8909.

RESPONSE TO DISCRIMINATION COMPLAINTS

Office of Civil Rights

Complaints made to the Federal Agency will be reviewed and investigated by OCR.

County Office

Complaints received in the county office will be immediately forwarded to the State Office with a copy of the complaint to the Regional Office. The State Office will acknowledge receipt of the complaint to the complainant within five (5) working days. A copy of the acknowledgment will be mailed to the county office and regional office.

State Office

Complaints received in the State Office will be logged in by the Office of Field Operations and referred to the county and regional offices for investigation. The State Office will acknowledge receipt of the complaint to the complainant within five (5) working days. A copy of the acknowledgment will be mailed to the county office and regional office.

Based on the analysis of the complaint, one of three (3) situations will occur:

a. Referral: cases received that required no action; cases in this category will be considered closed at this point.

b. Age discrimination: cases will be forwarded to the Regional OCR.

c. Investigation: cases that contain alleged violations in the TANF program, a prohibited basis of discrimination and an adverse action, as determined by the complainant.

An onsite investigation must consist of an interview with the complainant. The investigation may be discontinued at this step if the complainant indicates that discrimination did not occur; that he/she understands how the case was handled; does not wish to pursue the complaint; or withdraws the complaint. The person conducting the investigation should obtain a signed statement from the complainant at this point. The signed statement should be included with the investigative report.

If investigation is necessary to substantiate or refute the allegations, the following steps will be taken in addition to the interview with the complainant: (1) review of the complainant's case file; (2) review of other similarly situated case files concluding with not less than ten percent of the random number of similar case files from the total number of case files in either a caseload or from the applicant pool; (3) interviews with management in the county office; (4) interviews with relevant witnesses and other applicants/participants; and (5) interviews with representative of grassroots/advocacy organizations, if warranted.

Field Operations will gather facts that will either support or refute the complainant's allegations(s) ensuring that all relevant sources of information are investigated. The facts will be reviewed and evaluated. A decision letter informing the complainant of closure or follow-up action and the right to appeal to the Secretary of Health and Human Services Office of Civil Rights will be written and submitted to HHS Regional OCR. HHS RO will maintain rights to oversight and concurrence with the agency's decision. Upon HHS OCR approval, the decision letter will be issued to the complainant. Corrective action, when necessary, will be implemented. All complaints, regardless of the originating office, shall be processed and closed within 90 days of receipt.

COMPLAINT INVOLVING OTHER AGENCIES

When a complaint involves another Federal Agency, Field Operations will refer the complaint to that agency and will notify complainant of the referral.

PROGRAM COMPLAINTS

When the complaint is strictly a program issue (not a discrimination issue based on race, color, sex, disability, religion, national origin, or political belief), it will be processed through the routine program hearings procedure and not as a discrimination complaint. Discrimination complaints will not be handled in the hearing process.

PUBLIC NOTIFICATION

Applicants and recipients will be informed of nondiscrimination compliance via the following:

1. The State Agency shall publicize the nondiscrimination compliance statement on the application, pamphlets, etc.

2. Information regarding the complaint system and an explanation of the procedure must be provided to all persons within ten (10) days from the request.

VOTER REGISTRATION

The National Voter Registration Act (NVRA) of 1993 contains provisions which made it easier for individuals to register to vote in all elections. Under this Act, all agencies in a state that provide public assistance are designated as a voter registration agency. The following services must be provided by a voter registration agency:

1. Distribution of voter registration application forms and declination forms to applicants/recipients of agency assistance;
2. Assistance in completing voter registration application forms unless the applicant/recipient refuses such assistance; and
3. Acceptance of completed voter application forms for transmittal to the county Circuit Clerk for processing within five days of receipt by the agency.

The NVRA prohibits any person providing voter registration services from:

1. Seeking to influence an applicant's political preference or party registration;
2. Displaying any political preference or party allegiance;
3. Discouraging registration;
4. Implying in any way that the availability of Agency services or eligibility for benefits is dependent upon voter registration; or
5. Disclosing any applicant's voter registration information except as needed for the administration of NVRA or identifying the agency's name on the application form.

Agency Responsibilities

Each voter registration agency must provide each applicant/recipient the opportunity to register to vote or to update a voter registration record by offering the Mississippi Voter Registration Application form and declination form at the time of each:

1. application or reapplication,
2. recertification/reevaluation, and
3. report of change of address.

When providing the applicant/recipient the opportunity to register to vote, the applicant must be verbally asked "If you are not registered to vote where you live now, would you like to apply to register to vote here today?"

Any applicant or recipient who contacts the worker to request an application, either in person or by phone, will be provided a voter registration form and declination form (see discussion of the declination form below). If the household requests that an application form be mailed, a voter registration form and declination form must be mailed along with the application. If the client who initiates an application or recertification by mail or telephone later comes into the office for the face-to-face interview, voter registration services must also be provided at that time. Assistance in completing the voter registration forms must be offered in the same manner as an application for agency assistance. Clients must clearly be provided the option to either complete the registration form in the office or take the form with them to complete at a later time. Caseworkers, though, should encourage clients who check "yes," or otherwise say they'd like to register to vote, to complete the application on site to ensure timely delivery to the Circuit Clerk. Households that do not complete the forms in the office may either hand deliver or mail completed forms to the county Circuit Clerk's office or return the forms to the MDHS county office. Clients should be informed that completed voter registration forms will be submitted to the county circuit clerk within five (5) business days of completion or from the date received by the county office. During the application process, if the individual completes and signs the voter registration form, the date of signature must be entered on the MAST screen in MAVERICS. See "Declination Forms" below for procedures when the client declines the opportunity to register to vote.

Whenever a client contacts the county office by phone or in person to report a change of address, a voter registration application must also be provided. If the report is made by phone, a voter registration application must be mailed to the household. When the form is used to update voter registration, Section II of the form, along with all other sections of the registration form, must be completed.

Declination Forms

Regardless of whether or not a client wishes to register to vote, a voter Declination form must be completed by the client. This form indicates if a client wishes either to register or not register to vote. Workers should remind clients that this form is for voter registration purposes only and in no way affects their application for benefits. Completion of the declination form should be handled as follows:

1. The client should check the box next to the appropriate answer to the question of whether he or she wishes to register to vote.

2. The client should sign and date the form. It is also recommended that the client print his or her name beside the signature. If the client receives assistance from agency staff in completing the form, the staff person assisting should sign and date the form as well.

3. If the client refuses to sign the declination form, the worker processing the form should print the client's name, and date and initial the form. The form must be scanned to the Temporary Documents folder of the household's case record, with documentation of the action taken entered on the IIDO screen and the FOES (Forms/Explanations/Screens Documentation) screen in MAVERICS.

NOTE: In the event that a household's authorized representative is being interviewed, a declination form will not be required. The case should be documented on IIDO that the authorized representative has been informed of the opportunity for household members to register to vote and that voter registration forms can be provided to the household upon request.

Agency Coordinator Duties and Responsibilities

To oversee and coordinate agency and local office compliance with NVRA, the State Operations Director will serve as the agency's NVRA Coordinator. The State Operations Director will be responsible for:

- compiling and analyzing voter registration data provided by county offices
- answering questions submitted by county offices regarding voter registration procedures
- serving as liaison to the Secretary of State's office on issues of voter registration and NVRA compliance
- ensuring that NVRA training materials are incorporated into agency training materials and that semi-annual training in voter registration is conducted
- ensuring that NVRA compliance is incorporated into standard monitoring procedures
- ensuring that agency offices have an adequate supply of voter registration materials at all times
- developing and maintaining an up-to-date list of site NVRA contacts

Site Coordinator Duties and Responsibilities

The County Director or his/her designee will serve as Site Coordinator to ensure that voter registration services are successfully administered. Responsibilities of the Site Coordinator include the following:

- maintain adequate supplies of voter registration applications, declination forms, transmittal forms, training materials, and posters
- train new or reassigned employees on voter registration duties immediately upon hiring or reassignment and ensure re-training twice annually
- monitor and resolve any issues relating to the voter registration process
- ensure the timely and accurate transmittal of completed voter registration applications to the county circuit clerk within 5 business days of completion by the client
- communicate with local and state election officials to ensure that materials are current
- contact State Operations concerning any issues or problems regarding the voter registration process
- serve as contact person on voter registration matters for state and county election officials
- on a weekly basis, review completed voter registration applications and declination forms to ensure the forms are completely filled out. Ensure that the county office name is noted in Section I of the voter registration application.
- display NVRA posters in the office's lobby

NOTE: Regional Directors shall monitor county voter registration activities to ensure that NVRA guidelines are being met.

The Site Coordinator is responsible for supervising the daily voter registration activities at the location. The Site Coordinator should be well trained in the registration practices required of the agency. The Site Coordinator should monitor agency activities and quickly work with employees to resolve any noted deficiencies.

The Agency Coordinator will review the data compiled by Site Coordinators from the NVRA Data Reports on a monthly basis to determine whether offices are performing their NVRA responsibilities. If a review of the numbers indicates that an office is underperforming in its obligations, as required by the NVRA training manual, the Agency Coordinator shall require the

Site Coordinator to take immediate action and submit a report on such follow-up measures within a month of being notified by the Agency Coordinator. The Agency Coordinator shall forward copies of all such communications to the Secretary of State's office. If the Agency does not take appropriate remedial measures, the Secretary of State shall perform an audit of the office's voter registration practices.

NVRA performance should be included in all employees' evaluations.

NVRA Reporting

County offices will be responsible for submitting all voter registration applications to the county circuit clerk's office within five (5) business days of completion of the application. This includes any applications completed to update an existing registration. **Attachment C, NVRA Transmittal Form**, should be used to submit the applications to the circuit clerk. The timely delivery of voter registration applications is extremely important to ensure that all individuals are properly registered to vote. When submitting voter registration applications to the county circuit clerk's office, please use the following procedure:

- All fields on the NVRA Agency Voter Registration Application Transmittal Form should be completed, with a copy of the form retained in an office administrative file.

- The transmittal, along with all voter registration applications, should be placed in a secure and sealed envelope. Date of birth, social security numbers, telephone numbers and the agency of registration are confidential and should be kept from public view.

- For every Mississippi election, the voter registration deadline falls 30 days prior to the election. County office staff should be aware of these deadlines and transmit applications as soon as possible when a registration deadline is near.

In order to meet NVRA reporting requirements, special coding must be entered on the Marital Status (MAST) screen in MAVERICS to capture voter registration activity. Coding entered on MAST will indicate the date of voter registration for the household member being interviewed, when the registration took place (either at application, reevaluation, or when the household reports an address change), and whether or not the client checked "yes" or "no" on the declination form (or left the form blank). Using this MAST coding of voter registration activity, Management Information Systems (MIS) will produce the "NVRA Data Report" to be submitted by State Operations via email to the Mississippi Secretary of State's office. This monthly report will indicate the date of actual voter registration, not the MAVERICS system month, in which the registration occurred.

Example: At recertification interview on March 5th for the new certification period beginning in April 2011, the 35-year-old PI wishes to register to vote. The PI checks "yes" on the declination form and fills out and signs the voter registration form on the date of interview. On the MAST screen, the worker enters the NVRA date of 03/05/2011, along with the NVRA "type" code of "R" to indicate registration occurred at recertification/reevaluation and the NVRA code of "Y" that the client indicated on the declination form that he/she wished to register to vote. Even though the system month at the time of voter registration is April 2011, the application is considered to have occurred in March 2011 and the form will be included in the applications submitted to the circuit clerk's office during the month of March. The NVRA Data Report will reflect that voter registration associated with this case occurred in March.

EXAMPLE**:** The PI reports in person on April 27 that the household has moved. Based on this reported change, the PI is offered the chance to update voter information and fills out the voter registration form including the section used to update the household's address. The county worker will access the MAST screen in the current system month of June and enter the NVRA date 04/27/2011, the NVRA "type" code of "C" to indicate an address change and the NVRA code "Y" to indicate the client's desire to be registered at the new address. Though the change of address is documented in the system month of June, the change is considered to have occurred in April and the form will be included in the applications submitted to the circuit clerk's office during the month of April. The NVRA Data Report will reflect that the address change occurred in April.

Upon request, voter registration forms may be provided for other household members who may wish to register. If additional voter materials are provided, the case should be documented and the household member or representative informed that completed forms may either be returned to the county office or submitted to the county circuit clerk's office. When voter registration forms are returned to the county office, the worker must enter the appropriate information on the MAST screen and document IIDO.

See Volume X, Chapter 3, for instructions on MAST coding of voter registration activity.

Training

All county offices must train new or reassigned employees on voter registration duties immediately upon hiring or reassignment. All staff must be trained regarding NVRA procedures on a semi-annual basis. For training assistance, county offices should contact State Operations who will coordinate training through the Secretary of State's Office. Training material will include NVRA policy found in Chapter 1 of Volume III and Chapter 1 of Volume V, along with the NVRA Training Manual located in the "Training Resources" folder in Interwoven/Worksite.

County offices will be required to submit a report of all employees who attended the training via the MDHS-EA-106 to State Operations within one month of the training.

Prohibitions

When providing voter registration services, MDHS employees must not engage in the following:

- seek to influence a client's political preference or party designation (voter registrants are not required to declare party affiliation in Mississippi)
- display any political preference or party allegiance
- make any statement to a client or take any action for the purpose of discouraging the client from registering to vote; or
- make any statement to a client or take any action that would lead a client to believe that a decision to register or not to register has any bearing on the availability of services or benefits the client will receive.

Registration of 17-Year-Olds

Mississippi law allows persons who will be 18 years of age on or before the date of a November general election to vote in a primary election associated with that general election. Therefore, the agency may determine that in some instances a 17-year-old household member is eligible to register to vote. If a 17-year-old will turn 18 on or before the general election date in November, the 17-year-old can register and vote in the primary election held earlier in the same year, and must be provided with a voter registration application and declination form at each application, reapplication, and change of address transaction.

RIGHTS OF APPLICANTS AND RECIPIENTS

The determination of a person's initial or continued eligibility for assistance payments shall be conducted in a manner consistent with his rights under the Social Security Act as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1 996 (Public Law 104-193), Title VI of the Civil Rights Act of 1964, and Section 504 of the Rehabilitation Act of 1973, Title II of the ADA, and State laws. Thus, any practice which violates an individual's privacy or personal dignity, subjects him to any form of harassment, infringes on his constitutional rights, or discriminates on the basis of race, color, national origin, gender, disability, political beliefs or religion is forbidden.

The above cited laws and other state and federal laws give each applicant and recipient:

1. The right to apply for assistance and to have eligibility determined promptly. *Chapter 7, The Application Process*, sets out procedures for taking applications in county Economic Assistance offices and other places and the time limits for processing applications.

2. The right to a choice in programs when the person may meet eligibility requirements in more than one program. This includes the right to be told the advantages of each program for which he may be eligible.

3. The right to participate in establishing eligibility by giving facts about his circumstances that relate to his eligibility and by obtaining, or authorizing the worker to obtain, documents or information from others when necessary for determining eligibility.

4. The right to timely notification of disposition of the application for assistance.

5. The right to assistance upon determination that the legal and administrative eligibility requirements are met.

6. The right to the unrestricted use of a money payment unless the appointment of a guardian, conservator, or protective payee has voided this right.

7. The right to a confidential relationship with the agency. Information concerning the client and his family shall not be released without the client's permission unless the disclosure is directly related to administration of the TANF program or another federal or federally-funded program which provides assistance, in cash or in kind, or services directly to individuals on the basis of need.

The records of the disbursement of funds or payments to recipients of any and all assistance under programs administered by the state or county Departments of Human Services showing the names of the recipients and the amount of the individual benefits shall only be disclosed according to federal regulations regarding disclosure of information for TANF and Food Stamp Programs, and federal laws regarding use of electronically exchanged data.

Any person, firm, corporation, or association of the agency who or which shall violate any provisions of State law 43-1-19 shall be guilty of a misdemeanor and, upon conviction, shall be subject to a fine of not less than One Hundred Dollars ($100.00) or more than Five Thousand Dollars ($5000.00), or by imprisonment in the county jail for not more than ninety (90) days, or by both such fine and imprisonment in the discretion of the court.

8. The right to advance notice of reduction or termination of payments except in certain circumstances which are specified in *Chapter 7, Certification and Authorization*.

9. The right to a hearing when (a) dissatisfied because an application for financial assistance is denied or is not acted upon with reasonable promptness; (b) when aggrieved by any agency action resulting in suspension, reduction, or termination of assistance; and (c) a written request for a hearing is made within twenty days from the date of mailing of the notice that instigated the request. See *Chapter 13, Hearing Process*, for an exception to the right to a hearing, possible extension of the time period for requesting a hearing, access to case record materials to be used in the hearing, and other details of the hearing process.

10. The right to review information, such as agency policies and case material, used in determining eligibility for the budget group; however, the agency reserves the right to limit access to social and medical information unless such material is to be considered in a fair hearing. Refer to *Chapter 1, Confidentiality* and to *Chapter 13, Hearing Process*, for further discussion on this subject.

RESPONSIBILITIES OF APPLICANTS AND RECIPIENTS

The applicant or recipient is responsible for:

1. Giving complete and correct information about his circumstances as they relate to eligibility, both at the time of application, at each subsequent eligibility determination, and as changes occur in his family circumstances.

2. Keeping the county informed timely of any plan to leave the state in which he is receiving assistance or any changes in the income of the family if it meets or exceeds 185% of the need standard for the household size at the time of their current review period.

3. Repaying funds received during a period of ineligibility, or eligibility for a reduced TANF grant or supportive services, resulting from failure to report changes of circumstances, giving incorrect information, or for overpayments caused by agency errors.

4. Participating satisfactorily in the TANF Work Program, unless exempt.

5. Assigning to the State the right to child support collections and for cooperating with child support enforcement requirements, unless good cause is determined.

6. Ensuring that all TANF children are properly immunized and that TANF children attend school regularly as required under the State's compulsory school attendance laws.

7. Submitting to a substance abuse questionnaire. If results of the questionnaire indicate a reasonable likelihood that a substance abuse problem exists for the TANF adult(s), the adult must be tested for unlawful drug use and enroll in a treatment plan if results of the drug test are positive.

REGULATIONS SAFEGUARDING CONFIDENTIAL INFORMATION

The assistance titles of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 (Public Law 104-193), require that MDHS provide safeguards which restrict the use or disclosure of information concerning applicants and recipients of TANF to purposes directly connected with the administration of the Program. These regulations also specify that information can be shared with other programs administered under the Social Security Act as amended by PRWORA and under Titles IV-A, IV-B, IV-D, IV-E, XVI, XIX, XX, and any other federal or federally-assisted program which provides assistance, in cash or in-kind services, directly to individuals on the basis of need. The State statute at 43-1-19 mandates that MDHS shall abide by federal rules and regulations restricting the use or disclosure of information, records, papers, files and communications concerning applicants and recipients to purposes directly connected with the administration of the programs.

SAFEGUARDING INFORMATION

State law at 43-1-19 restricts disclosure of records showing names of recipients of public assistance and amounts of benefits in accordance with federal laws and regulations and laws regarding use of electronically exchanged data. Public Law 104-193 expands the exchange of information to include:

- Quarterly reports to U.S. Citizenship and Immigration Services (USCIS) of illegal aliens known to the Agency.
- Exchange of certain information with law enforcement agencies relating to prosecution of fleeing felons, parole violators, or persons fleeing relating to a crime that would be a felony under the law.

The Agency by law routinely exchanges information with other agencies and individuals in order to determine the applicant/recipient's eligibility status and benefit level for needs-tested programs. These information sources include:

- Verification with USCIS for alien status (SAVE).
- Exchange of information with the school district, local school or attendance officer.
- Exchange of information with other related State agencies including Division of Medicaid, Department of Health, etc.
- Exchange of information for electronic verifications and data matches (IEVS), including information from Social Security Administration (SSA), Department of Treasury/Internal Revenue Service (IRS), Mississippi Department of Employment Security (MDES) and the Tax Commission/Motor Vehicle registry.
- Exchange of information with employers, housing entities, landlords, etc., for the

purpose of establishing eligibility status.

- Exchange of information relating to child support enforcement, work requirements, and suspected Program violations.

NATURE OF INFORMATION TO BE SAFEGUARDED

MDHS prohibits any employee, state or local, working in any capacity, from disclosing confidential information concerning any applicant or recipient of assistance or services, except in the administration of the program as described above. The information which shall be considered confidential and shall not be disclosed except in the administration of the laws, under which MDHS works, shall be:

1. Names and addresses of applicants and recipients.

2. Lists of applicants and recipients. List of applicants and recipients will on occasion be requested for commercial, personal, or political use. Under no condition may a list of clients be disclosed to any person, agency or business organization except as described below.

3. Case records, with each and every document included.

4. Information obtained from the computer. This includes computer access related to Wire Third Party Query and all other on-line data from the Social Security Administration, IRS and Mississippi Department of Employment Security through the IEVS process, Motor Vehicle Verification, and data from the Division of Medicaid and other on-line sources.

Employees shall not disclose information of a confidential nature even though a record of the information has not been made.

PENALTIES FOR VIOLATION OF CONFIDENTIALITY

This Agency and the other agencies and entities with whom electronic data is exchanged are bound by the same Federal and State laws which require confidential handling of all client data. Unauthorized use and disclosure of client information is punishable by law at the Federal and State levels.

Disciplinary action will be taken against any agency employee violating the regulations pertaining to the safeguarding of information in accordance with the disciplinary policies and procedures of the Mississippi Department of Human Services and/or the State Personnel Board. A willful violation of this regulation will be termed inefficiency in office and the employee may be suspended or removed. In addition, State statutes specify that such acts can be considered as misdemeanors and upon conviction an individual may be fined or imprisoned or both. The specific details of these penalties are located in Sections 43-1-19, 43-15-21, 43-17-7 and 43-19- 45 of the State law.

If the representative of an agency or organization to whom information has been disclosed violates the regulations, the MDHS Executive Director, after conducting an investigation, will report the employee or representative to the head of the agency involved.

Mississippi Department of Human Services will provide all employees of the State and County DHS offices with a copy of the rules and regulations governing the safeguarding of information, including a statement regarding the penalty for any use of such information in violation of the regulations. MDHS will also make available copies for distribution to all agencies and individuals who are interested.

MDHS-EA-105, Confidential Information Agreement, will be completed at the initial training of current and new employees, security personnel, volunteers and others who are assigned tasks in the offices of the Division of Field Operations and other persons at any location who are assigned access to the computer systems. Also, the **MDHS-FO-106**, Employee Awareness/Security Training, must be completed upon entry of new employees and annually thereafter to acknowledge training and awareness of security guidelines for IEVS data, civil rights compliance, and SSA data.

PENALTIES FOR IMPROPER DISCLOSURE – SSA INFORMATION

Federal law restricts the use of SSA information obtained through computer access or other means to purposes directly connected to the administration of the TANF program. Any agency employee that publishes, discloses, or makes known in any manner confidential SSA information is subject to a civil money penalty of $10,000 for each such unauthorized publication or disclosure, or a criminal penalty of a fine of not more than $10,000 or imprisonment of not more than 1 year, or both, for each such unauthorized publication or disclosure.

PERSONS AUTHORIZED TO DISCLOSE INFORMATION

Disclosure of all information, including records of every kind, shall be governed by these regulations. Observe these regulations as set out below regarding the release of information when a request is made and MDHS does not have an agreement with the agency requesting the information:

1. Information from State office records. Refer the request to the Division of Field Operations. Designated staff will obtain information about the request and make a decision in accordance with agency regulations.

2. Information from county department records. Refer the request to the appropriate regional or county director, who will investigate the request and release the information in accordance with agency regulations or deny the request if not permissible, or refer it to State Office for handling.

3. Court subpoena. When a state or county staff member receives a subpoena for the record, handle according to the discussion, Subpoena of Case Records, below.

INFORMATION TO BE RELEASED

The information listed below will be released under the circumstances described:

1. MDHS shall by State law at 43-1-5 make accurate and timely federal reports in compliance with Program requirements and shall report to the Governor and the Legislature annually all fiscal and statistical Program participation data. These records are open for public inspection. See discussion below, TANF Disbursements Records to be Made Public.

2. Information shall be provided to County and District Attorneys in connection with fraudulent receipt of TANF, TWP, SNAP, or Child Support and in connection with the location of deserting or putative parents, the establishment of paternity, and obtaining of support. See discussion below, Disclosure to County or District Prosecuting Attorneys.

3. Information with regard to deserting and putative parents in TANF shall be disclosed to the grand jury in active session for purposes directly connected with obtaining or enforcing child support.

4. Information concerning TANF, TWP or Child Support shall be shared with agencies authorized under Titles IV-A, IV-B, IV-D, IV-E, XVI, XIX, XX and others which are Federal or federally assisted programs which provide assistance, in cash or in-kind, or services directly to individuals on the basis of need. See the discussions below, Disclosure to Agencies, Agencies Providing Assistance or Services, and Agencies with Whom Lists are Exchanged.

5. The client or his authorized representative will have access to certain information in his case record as set out below under the discussion, Disclosure to Client or Client Representative and Hearings.

6. Information may be disclosed to state and local law enforcement officers under certain circumstances explained below.

OTHER INFORMATION TO BE DISCLOSED

MDHS regularly prepares and publishes statistical and financial data about Field Operations programs. The county and state staffs are authorized to release and to interpret the following information:

1. Disbursements of payments to eligible TANF families, TWP participants, recipients of food assistance, etc.

2. Number of applications received, number approved, number rejected, type of assistance requested, and similar data, compiled monthly, quarterly, or annually in the several instances.

3. Services available from the Department and the conditions under which services can be given. Number of persons requesting services and number receiving them, by nature of the request, when available.

4. Child Support activities and information concerning the collection and distribution records summarized.

5. Establishment and collections of claims for overpayments.

6. Court orders obtained as a result of prosecution for fraudulent receipt of benefits.

The Department prepares and publishes an annual report on the operation of all programs, in accordance with the State statute at 43-1-5. Other reports, usually those required by Federal regulations, are also available and are published.

DISCLOSURE TO GRAND JURIES

When cases involving fraud, the deserting legal father, or for the purpose of establishing paternity and/or obtaining support are presented to the grand jury in active session, the information necessary for their consideration and decision will be made available. Members of such bodies are expected to observe the regular court ethics with regard to use of this information.

DISCLOSURE TO AGENCIES - GENERAL REQUIREMENTS FOR TANF AND CHILD SUPPORT

Disclosure of information concerning applicants and recipients of TANF and Child Support will be made to other agencies under the prescribed conditions. These agencies must meet one of the criteria listed below:

1. The applicant or recipient has requested assistance or service from other agency; and the agency's program is administered under Title IV-A, IV-B, IV-D, IV-E, XVI XIX, XX, or another Federal or federally assisted program which provides assistance, in cash or in-kind, or services directly to individuals on the basis of need.

2. The related agency or organization has entered into a contract or agreement with this Department to provide a required service and will use the information only in relation to providing that specific service.

DISCLOSURE TO LAW ENFORCEMENT

States may disclose the address of any current TANF recipient to a federal, state, or local law enforcement officer under specific conditions. The request for information by the law enforcement officer must be in writing with the official’s signature, date, and agency name. The requesting law officer must notify the agency that locating or apprehending the household member is an official duty and that the request is being made in the proper exercise of an official

duty. The officer must furnish the agency with the name of the household member and notification that the member:

1. is fleeing to avoid prosecution, or custody or confinement after conviction, for a crime or attempting to commit a crime that is a felony under the law.

2. is violating a condition of probation or parole imposed by Federal or State law, or

3. has information that is necessary for the officer to conduct an official duty related to the above conditions.

AGENCIES PROVIDING ASSISTANCE OR SERVICE

Agencies which are known to have standards of confidentiality comparable to those of MDHS and to provide assistance or services for clients, and with whom information is exchanged for purposes of administration of the TANF, Child Support or other MDHS programs include:

1. Department of Human Services (public assistance) agencies in other states

2. Division of Medicaid and its fiscal agent

3. Department of Rehabilitation Services

4. Social Security Administration and the Department of Treasury

5. Department of Health through its state or county health offices

6. State Department of Mental Health and the Regional Mental Health Centers

7. Housing authorities, the state or local administrator

8. State mental hospitals and general hospitals, health services providers

9. Mississippi Department of Employment Security

10. Veterans Administration

11. State Department of Education, county and local school districts.

No lists of names of applicants or recipients shall be released to these or other agencies, except as specified. See electronic data exchange description in this volume. Other releases of information shall be on request from the agency and the purpose must reasonably relate to the function of the Department's programs and to the function of the agency requesting the information. If an agency makes a request for information which that agency normally would be determining for itself and which is not in favor of the client, the request will be denied.

DISCLOSURE TO CLIENT OR CLIENT REPRESENTATIVE

The case record is not available for examination by the applicant or recipient or his authorized representative. MDHS reserves the right to withhold any information which pertains to medical and medical social facts or severe social problems such as illegitimacy, incest, neglect and abuse of children or adults, marital discord, and other serious conditions and changes. The county director will release certain information to a client or his authorized representative when authorized in writing as follows:

1. In connection with a request for a state or local hearing. Refer to Volume III, Chapter 13.

2. Information as to receipt of an amount of child support or assistance received by a recipient.

3. Information supplied by the client or obtained by the worker that the client needs in order to be able to qualify for a benefit which he has requested. This excludes medical reports, as the examining physician must release this information to his patient. It includes proof of age, documents relating to real and personal property, and other factual material that will assist a client in obtaining a service or benefit.

4. Client's verifications of income and resources and other forms which he/she has signed.

5. Budgets worked to determine eligibility for programs for which the Division of Field Operations is responsible.

6. Any case information, other than medical, medical social, or information concerning severe social problems as described above when the client presents a written request which specifies the material desired and the purpose for which the material will be used.

When the request is made by a person other than the client, the information will not be available without the client's written permission prior to releasing the information. This written statement will be made a permanent part of the case record. The worker will speak from the case record or provide copies of the material requested.

RELEASE OF MEDICAL INFORMATION TO SPECIFIED AGENCIES

In providing medical information to agencies in which the Department has formed agreements, follow the rules set out below.

1. In the release of information provided by private physicians, MDHS puts the examining physician on notice of the use of the medical data in hearings when held and in other requests relating to the administration of the program. This is done at the time the county office requests the information and authorizes payment for it.

2. Do not release medical reports obtained from the Veterans Administration, the University Medical Center, Mental Health Centers, or the Health Department. Also, do not release any reports marked "Confidential" or "Not to be released to other agencies". The agency making the request must make its own request to the other agency.

3. The hearing record must contain the material on which the contested eligibility decision was made; hence, any such medical material must be available in the hearing record for examination by the client or his authorized representative. Do not supply copies of this material to the client or his representative.

DISCLOSURE TO ELECTED OFFICIALS

When an applicant for or recipient of TANF, SNAP or Child Support makes a complaint, usually by letter, to a public official such as a Senator, Congressman, County Board of Supervisors, etc., about his denial, inadequate receipt, or other action taken about his request for assistance, the State or County office handling the complaint may include that information in the reply which will provide an adequate explanation of the action taken by MDHS. That is, when the person or authorized representative sets out facts about the individual's circumstances and enters a request to MDHS, this implies the consent of the individual for MDHS to reply to the complaint.

Determine first that the individual himself knows that the other person is writing MDHS about his dissatisfaction with the action or lack of action.

When the individual or his authorized representative writes a public official, either local, State or Congressional, or other public agency, the public official usually sends the letter, so that the County or State Department knows that the inquiry or complaint is from the client. Do not include more information than is necessary to explain the MDHS position or action.

DISCLOSURE TO COUNTY OR DISTRICT PROSECUTING ATTORNEY

The County and District Prosecuting Attorneys shall have access to information from the case records for the following reasons:

1. Making an investigation of an alleged violation of the sections in the State statutes on fraudulent receipts of TANF, SNAP or Child Support.

2. Locating deserting parents or putative fathers, establishing paternity, and securing support for children. For further discussion concerning the location of deserting legal or putative parents and the failure or refusal of the mother to establish paternity and obtain support for the TANF children, refer to Volume III, Chapter 3 and Volume VI.

When acting in their official capacity on behalf of MDHS, County and District Attorneys are authorized to review, without written request, case record material in the case of the individual involved and other material related to the individual case such as SNAP issuance records and child support fiscal and bookkeeping records. This is in accordance with Federal regulations and the Mississippi Code of 1972, Sections 25-31-11, 19-23-11, 43-19-45 and other specific

references.

Law enforcement officials may request case record information involving the fraudulent receipt of TANF, SNAP or Child Support in instances in which the MDHS Division of Program Integrity has asked assistance in a particular case.

SUBPOENA OF CASE RECORDS

When the court issues a subpoena to the county director or another MDHS staff member to personally appear or produce a case record, the county director or his representative will immediately notify the regional director and Field Operations. A copy of the subpoena or court order must be emailed immediately to Field Operations and to the Attorney General's Office. The Attorney General's Office will contact the county director to provide further instructions and will correspond directly with the court. The court may permit the employee to read the portions from the case records that are pertinent to the legal action.

DISCLOSURE TO LEGISLATIVE OFFICIALS

The Federal regulations also provide for the disclosure of such information to a committee or legislative body (Federal, State or local) when such body certifies that the information is needed in connection with their official duties with regard to the program and that the information will not be used for any other purpose. Exception: Disclosure of information to any committee or legislative body that identifies TANF applicants or recipients by names or addresses is prohibited unless the information is required for audit purposes as set out below.

DISCLOSURE FOR AUDIT PURPOSES - TANF

Federal and state regulations provide for disclosure of information concerning applicants for and recipients of TANF for audit purposes to any government entity authorized by law to conduct such audits or similar activity.

DEFINITION

The electronic case record includes recorded information pertaining to the assistance payments for applicants and recipients. This is the information available to the county Economic Assistance office pertaining to all applicants and recipients. The case record includes forms, documents, and the data contained in the on-line MAVERICS eligibility determination and tracking system, the JAWS Work Program activities and the METSS child support data.

PURPOSE OF THE CASE RECORD

The purpose of the case record is directly related to the purpose of the assistance payments program. The case record serves its primary purpose to the agency when:

1. It clearly furnishes case disposition and eligibility dates on individuals who have applied for or are receiving assistance.

2. It validates the action taken by the agency, based on facts about eligibility, to grant or deny assistance or change the amount of the payment.

3. It furnishes verification for the validity of expenditure of public funds.

Other purposes which do not relate to the standards for basic minimum content, but which the case record may serve are:

1. To aid in the supervision and management of case work.

2. To assist in the development of the worker's skill.

3. To evaluate the performance of the worker.

The case record is a permanent source of information which prevents the need for repetition of information by the individual and duplication of work by the worker.

The case record protects the individual, the MDHS county office, and the community against inaccuracies which might arise from errors of memory. To assure accuracy of statements, recording must be done during the interview or after the securing of information.

The purpose of the case record is centered on the individual's circumstances and is not set up as a record of the worker's activities. It has value only as it results in more accurate, helpful, and efficient administration of financial assistance for the family.

CONFIDENTIAL NATURE OF CASE RECORD

To assure the right of the individual to a confidential relationship with the agency, the worker must know and observe the safeguard regulations concerning the release of information about an individual, whether from the case records or forms. For a detailed discussion of these

regulations see *Chapter 1, Regulations Safeguarding Confidential Information*.

In addition to observing the regulations concerning the release of information, case records need to be protected from use by persons not connected with the MDHS county office. The county director will be responsible for the assignment of cases and the management of the case files within the county office.

PURPOSE OF CASE RECORD FORMS

The worker is responsible for the completion of case forms and for entering data in MAVERICS. Case record forms have been designed for:

1. Economy of time, space, material, and uniform organization to facilitate location of specific materials.

2. Inclusion of a written explanation when needed to clarify or to explain without repetition.

Case record forms and MAVERICS screens also provide the mechanics necessary for the worker to determine eligibility and provide services. In this capacity, forms and screens provide for:

1. Authorization of action, whether approving, denying, increasing, reducing or terminating TANF.

2. A clear and usable record.

3. Date and signature or initials of the worker responsible for the accuracy and validity of information and decisions.

4. Maintaining the case record in the county where the client resides.

THE CASE NUMBER

The case number is assigned by MAVERICS to the case head (primary individual/PI). It is not to be assigned to any other person. Once the unique case number is assigned by MAVERICS, the same case number will be used each time that person applies for assistance as the case head (PI). Therefore, each case head applying for any Economic Assistance program anywhere in the State has a unique case number. For the procedures for assignment of case numbers, see Volume X.

THE INDIVIDUAL NUMBER

Each adult and child will be assigned an individual (ID) number by MAVERICS for identifying purposes. Each person will be assigned only one individual number even though he may be receiving SNAP and/or TANF. The person retains his individual number when the case is closed and reopened and when transferring between households. The person's ID number is especially

critical for identifying and tracking individuals in TWP activities in JAWS and for child support referrals in METSS. The individual number for the case head will not be the same as the case number. See Volume X for assignment of individual numbers.

MAINTENANCE OF INDIVIDUAL CASE RECORDS

Each household who applies for assistance shall have a separate electronic case folder produced for the filing of case documents. All forms, correspondence, and other pertinent information will be maintained in this folder according to instructions in this material. When an individual transfers to another case, essential material related to that person or child should be scanned into the appropriate electronic file in the receiving case.

Destruction of Case Records

To assist in case record disposal, county offices will receive reports each year with instructions for destroying and weeding case records. Special MAVERICS reports will be produced the first weekend in July each year until all county paper case records are destroyed and archived. The reports will identify and provide instructions for cases that meet the retention period (cases closed and claims/restorations paid out or otherwise closed for 3 years, remaining Health Benefits cases closed for 5 years) and certain cases that have not been archived:

1 the **Annual Destruction/Archive Report** will list cases already archived and will identify cases that should be destroyed. Cases noted on this report should be pulled and shredded.

2 the **Annual MSCAP Destruction/Archive Report** will list cases already archived and will identify MSCAP cases by resident county that can be destroyed. Cases noted on this report should be pulled and shredded.

3 the **Annual Weed/Destroy Report** will identify cases that meet the retention period policy and will indicate by program which program material should be destroyed and which program material should be weeded. For combination cases, the report will determine whether each program's material should be destroyed or weeded. The destroy report will also identify claim related cases that meet the destruction criteria.

4 the **MSCAP Annual Weed/Destroy Report** will identify MSCAP cases by resident county that meet retention period policy and will indicate by program which program section should be destroyed and which program section should be weeded.

In situations where cases are transferred from one county to another after the annual MAVERICS reports are provided but before required action has been taken, the receiving county should be notified of the action needed for each case.

ARRANGEMENT OF DOCUMENTS IN ELECTRONIC CASE FOLDER

An electronic case record shall be produced for each case head who applies for assistance. Case records may include a combination of forms, appropriate verification documents, records of contacts, and other eligibility related materials. Documents must be scanned into TANF electronic file folders contained in the Interwoven/Worksite system based on case action for each program. Individual file folder options will be available, depending on the nature of each document. File folders will be identified as follows:

TANF ONLY CASES:

Application Forms

MDHS-EA-900 Application
MDHS-EA-900S Supplement
MDHS-EA-940 Notice of Appointment (if system is down)

Permanent Documents

MDHS-EA-312-Personal Responsibility Contract
MDHS-EA-941-Notice of Child Support Enforcement

Temporary Documents

Resource Verification (if necessary) and Income Verification, including Work Number Information
Child Care Expense Verification
Immunization Records
MDHS-EA-336-TWP Substance Abuse Treatment Agreement
MDHS-EA-918 Representative Authorization

Medical Review

MDHS-EA-330A- Request for Medical Exam
MDHS-EA-331 Report of Medical Exam
MDHS-EA-332 Report of Social Information
MDHS-EA-334 Medical Review Decision

Personal Data Folder

Birth Certificate
Social Security Cards
Marriage License
Child Support Orders
Divorce Decree
Drug Felony Documentation

Revised 12-01-10

MDHS-EA-301C-Verification of Age and Relationship (obsolete as of 12-01-10)

Case Review

MDHS-EA-173-Case Review Guide (2nd or 3rd party)
MDHS-EA-173T-Case Target Review Guide Client
Inquiry Documents

TANF Fair Hearing

Hearing request and other supporting documents related to the hearing request that have not been previously scanned and are not available in MAVERICS.

Combination Cases

Cases which include a combination of TANF and SNAP benefits will be electronically converted by scanning case documents into a Generic file folder. File folders will be identified as follows:

COMBINATION CASES:

Application Forms

MDHS-EA-900 Application Form
MDHS-EA-900A Interactive Interview Documentation Forms
MDHS-EA-900S Supplement
MDHS-EA-940 Notice of Appointment

Permanent Documents

MDHS-EA-941 Notice of Child Support Enforcement

Temporary Documents

Resource and Income Verification
Child Care Expense

Personal Data Folder

Identification
Social Security Card
Birth Certificates
Marriage Licenses
Child Support Orders
Drug Felony Documentation

Case Review

MDHS-EA-173-Case Review Guide (2nd or 3rd party)
MDHS-EA-173T-Case Target Review Guide Client
Inquiry Documents

ADDING TO DOCUMENTS IN INTERWOVEN/WORKSITE

Documents may be added to existing case folders, provided the documents being added are related to the same case action. For example, when a new application is being processed and certain document folders are being established, additional related documents, such as multiple documents scanned to the Temporary Documents folder (income verification and child care expense verification) may be contained in that single folder until final case disposition. Any **new** case action would require the establishment of a new folder related to the case change.

Example: A household applies for TANF in June. The household provides verification of income which is scanned to the case's Temporary Documents folder at the time of interview. Verification of a child's immunization record is requested at interview. The household responds with the requested verification within ten days and the immunization document is scanned to the existing Temporary Documents folder. The TANF application is subsequently approved. Later in August, the household reports and verifies a change in income. This verification is scanned to a new Temporary Documents folder because this represents a new case action separate from that established at the time of application.

Refer to the Interwoven/Worksite Users Guide for instructions on use of the Adding To documents function.

OVERVIEW

This material describes records management functions which must be performed by the case manager. The records management functions described in this material include TWP file status codes, transferring cases and the proper format for the TANF Work Program TWP section of the electronic case record.

TWP ELECTRONIC CASE RECORD FORMAT

In addition to JAWS, the case record is a permanent source of client information. It prevents the need for repetition of information by the individual and duplicate case management activities.

In order to maintain an accurate record of each participant, each case record must be complete, accurate, timely, and reflective of the individual's current status. The purposes of the work program section of the electronic case record are to:

1. Furnish demographic and program information on individuals who have been referred to the TANF Work Program.

2. Validate case management actions taken by the case manager (CM).

3. Provide verification of program expenditures.

4. Aid in supervision of the CM.

ARRANGEMENT OF DOCUMENTS IN ELECTRONIC CASE FOLDER

Documents must be scanned into TANF Work Program (TWP) electronic file folders for storage in the Interwoven/Worksite system. Electronic file folders will be identified as follows:

Supportive Services Applications:

MDHS-EA-379 TANF Child Care Services Application MDHS-EA-357G TANF Transitional Work Assistance Application

Permanent Documents:

Back-Scanned Contact Records

MDHS-EA-313 and 313A High Counter Reports

Temporary Documents:

Check Stubs, Work Number Information
Wage Forms
Doctor Excuses
MDHS-EA-359 TWP Agreement to Participate Following Notice of Adverse Action
MDHS-EA-361 Self-Assessment
MDHS-EA-362A Client Release Form
MDHS-EA-363 Employability Development Plan

TWP Upfront Job Search (UFJS)

MDHS-EA-303C TANF Upfront Job Search and any supporting documents for Up-Front Job Search.

Personal Data Folder

MDHS-EA-362B-Background Check

TWP Fair Hearing

Hearing request and other supporting documents related to the hearing request that have not been scanned and are not in MAVERICS

The CM has primary responsibility for assuring that case records contain all the required documentation, and that the documentation is complete, accurate, timely, and reflective of the individual's program status.

JOBS AUTOMATED WORK SYSTEM (JAWS)

JAWS maintains case record information on TWP participants. JAWS provides an on-line interactive system to:

1. Receive TWP referrals for eligible TANF recipients;

2. Prioritize and assign individuals to TWP case managers and program components for processing;

3. Manage the financial aspects of the TWP, including payments for services, both to providers and participants; and

4. Monitor program effectiveness and efficiency through a series of State and Federal management reports.

JAWS produces a variety of notices to TWP participants and/or providers. It also generates alerts to inform the case manager (CM) of required actions for a particular individual. The goal of JAWS is to support the efficient and effective management of the TWP, and to expedite the delivery of services to TWP participants.

TWP File Status

The **TWP File Status** in JAWS identifies the individual's eligibility, participation, and qualification for services in a single code. This status determines how JAWS processes the case, so it is essential that the file status code be correct. An individual can be assigned one of the following four file status codes:

Hold Status

A **hold** status is indicated by a code of "H" in JAWS. "H" indicates that there is some activity that must be completed outside the control of the JAWS system or the case manager, before TANF processing can proceed. The following conditions can result in the assignment of a hold status by JAWS:

- The individual has not completed the orientation process.
- The individual has not completed the assessment process.
- The individual has completed assessment and is awaiting assignment to a TANF work activity.
- The individual has barriers which prevent participation at present time. (*DC - Discontinue Client*)

- The component needed to meet the employment or educational goal of the TANF recipient is unavailable for assignment of this participant, and no employment is available.

- Supportive services (*transportation/child care*) not available.

JAWS assigns the "H"- hold status in each of these situations without any action by the CM. However, individuals assigned the "H" file status should be monitored to ensure that the needed action is completed on a timely basis and that the individual proceeds in the TANF Work Program. The CM can change an individual's status on-line from “Hold” to another appropriate file status code via the MPAS screen when the situation causing the hold is resolved. The CM can also reset the appointment schedule code in JAWS to “_____” blank, by changing the TWP file status from “Hold” to “Inactive” to “Hold”. This will allow the CM to schedule an orientation appointment for an individual.

Individuals in the "H"- hold status are counted in the denominator for the participation rate percentage. The TANF recipient’s **24 and 60-month time limit counters** are also being incremented. Case Management will use the “holding” status only to transition TANF recipients between allowable work activities. No more than 20% of their caseload may be in a holding status at any one time.

Active Status

An **active** status is indicated by an "A" in JAWS. This code may be assigned by JAWS when a participant is assigned to a component by the CM.

Inactive Status

An **inactive** status is indicated by an "I" in JAWS. All component activities and authorized supportive services must be closed before an "I" code can be assigned by the system or the case manager. JAWS assigns an inactive status code when:

- An individual is determined to be exempt from TWP participation.

- An individual has an outstanding conciliation.

- An individual transferred to another county.

Individuals in an inactive status are counted in the denominator for the participation rate percentage.

Closed Status

A **closed** status is indicated by a "C" in JAWS. This code is used when the TANF case closes (CL).

NOTE: If the CM adds an unsubsidized component (UNS/TRN) after the case becomes CL, the file status is changed to “A-Active”. The file status code will change to “C-Close” when the transitional component is closed.

CASE REASSIGNMENTS, COUNTY TRANSFERS AND CASE CLOSURES

When an individual moves from one county location to another, the case record and the automated JAWS file must be assigned to the individual's new location. If the individual's new residence is in a different county, a county transfer is required, if appropriate.

Reassignments

Each county location is served by specific case managers. JAWS supports an automatic process for the reassignment of the participant to another case manager (*i.e., the case closes in JAWS and re-opens*) **within a county location**. The supervisor may authorize, via JAWS, the reassignment of the participant, if both case managers involved are under his/her supervision. This type of on-line reassignments is restricted to relocations within a single county so that the participant's TANF work activities and component assignments are not disrupted.

County Transfers

When an individual changes his county of residence, a county transfer is required. The participant's change of address must be recorded in MAVERICS, and passed to JAWS. The following guidelines should be followed when completing a county transfer:

1. When the participant's county of residence is changed before orientation or assessment is scheduled, JAWS changes the county location and continues the scheduling process in the new location.

2. When the participant's county of residence is changed during orientation or assessment, the case is assigned to a case manager in the new county location and that case manager is alerted to the need for follow-up.

3. When an active TWP participant's county of residence changes, the components and services are closed in JAWS, pending re-evaluation of the individual's circumstances by the EW in the new county. The participant is re-referred by the EW, if appropriate, and reinstated in TANF, if qualified.

Case Closures

If the TANF case closes because of earned income:

- The CM may continue to monitor the case for transitional transportation or transitional child care.

OVERVIEW

This material describes all the functions the DHS county office must perform once the individual has been referred to the TANF Work Program (TWP).

CASE MANAGEMENT

Case management is the process for coordinating TANF work activity assignments and supportive services for TANF Work Program (TWP) participants. Case management is the critical link between eligibility for assistance and full- time employment. The case manager (CM) is responsible for placing adult TANF recipients in allowable work activities and arranging supportive services, child care and transportation, when necessary. The top priority of the TWP is to help individuals become self-sufficient through full-time employment. The CM must manage his/her existing caseload and new referrals to the TWP to ensure timely placement in allowable work activities.

The DHS county office will provide case management to the TANF Work Program participant. Each county office must establish a case management unit. This unit:

1. Provides program orientation for TANF recipients referred to TWP.

2. Assesses TANF recipients' employability and identifies supportive services needed.

3. Develops (with input from recipients') employability development plans (EDP) designed to develop skills, eliminate employment barriers and help TANF recipients become self-sufficient as quickly as possible.

4. Arranges for any supportive services needed to meet the EDP.

5. Places TWP participants in appropriate, allowable work activities.

6. Updates TWP participants' EDP as necessary.

7. Conducts the conciliation/adverse action process when TWP participants fail to participate as required.

8. Maintains requests for fair hearings and TWP exemptions.

9. Ensures that policy changes are received and understood by staff and policy material is maintained appropriately for quick reference.

The role of case management is to place and keep adult TANF recipients on a path to self-sufficiency by assisting them in removing all barriers which prevent attaining full-time employment.

This is accomplished by placing TWP participants in allowable activities to improve their readiness for full-time employment and/or developing supportive service resources to assist participants in removing all barriers to participation.

The following material describes the policy, procedures and expectations for the various services provided by MDHS to the TANF Work Program participant.

Case Management Principles

Before talking to the TWP participant, the CM should consider his/her own feelings about the TANF Work Program. The CM should act on the belief that change and development are possible; help the individual identify goals and set tasks to achieve those goals; establish a working relationship with the participant; and identify circumstances which affect participation in the TANF Work Program. The CM must build self-esteem and motivate TWP participants and help them capitalize on their strengths and abilities. The following principles should be followed by all case management staff when working with TANF recipients:

1. The needs of individual TANF recipients are unique, wide ranging, and vary over time; therefore, case management staff must be flexible.

2. TANF recipients can function in the community when provided with support and **positive reinforcement**; they should be encouraged to function as independently as possible.

3. TANF recipients should be encouraged to assume active, rather than passive, roles in the management of their own EDP.

4. Case management is not a time-limited service; it is an ongoing process to provide TANF recipients with what they need, when they need it, within program limitations.

REGIONAL DIRECTOR

The activities provided for the TANF Work Program participants may include case management, program components such as education and training, and supportive services. Some services are provided by other agencies bound through formal interagency agreements with MDHS to provide component or supportive services to TWP participants.

Component and service providers may be individuals or agencies. The providers of supportive services can be further broken down into those that are reimbursed for the services rendered and those that provide supportive services at no cost to MDHS or the TWP participant. This provides a network of local resources to:

- Ensure that a broad selection of commonly needed services are available to the CM when the TANF recipient or TWP participant needs them;
- Enable the CM to know, in advance, what they can and cannot provide to the TWP participants;
- Empower the CM to "requisition" services and resources across organizational lines; and
- Revise traditional methods of operation if they do not work in the best interests of the TANF recipient or TWP participants they serve.

The regional director or designee is responsible for the coordination with the Child Care Development Fund (CCDF) Designated Agent to ensure that child care services are provided for all TWP participants, those individuals transitioning off TANF, and those at risk of becoming TANF recipients. Child Care for at-risk parents is for very low-income, working families who are not receiving TANF, need child care in order to work, and would otherwise be a risk of becoming eligible for TANF.

The regional director or designee will be responsible for ensuring that each county office within the region is:

- Providing case management services, program components such as education and training, and supportive services for TWP participants;
- Developing Community Services and AWEP sites for TWP participants; and
- Providing child care and transportation options that may be used by TWP participants.
- Resolving in a timely manner any problems between the CM and component/service providers which may affect the individual's participation in the TWP.

- Provide direct supervision of job readiness trainers and employment coordinators and ensure that work activities are coordinated with the county directors. Monitor work performance and assign other job development/identification duties, as needed, to enhance the TANF Work Program.

COUNTY DIRECTOR

The **county director or designee** will:

1. Attend assessment and job readiness sessions, take an active role in encouraging and coaching individuals with their goal and provide steps toward self-sufficiency.

2. Approve community service placements. Assist with the recruitment of community service sites, if necessary.

3. Monitor the work activities of the eligibility/case management staff. This includes monitoring the participant flow through the work program (*Orientation/Assessment, work activity assignment and the conciliation process*). The county director or designee will ensure coordination of services between the case management staff and component/services providers.

CASE MANAGEMENT DUTIES

The CM will be under the direct supervision of the case manager supervisor (CMS) which in some counties will be the county director. The CM will be responsible for assessing TANF recipients, developing a work plan for individuals participating in the TWP, providing supportive services to TWP participants and providing transitional services and case management for up to 12 months to TWP participants who lose TANF eligibility because of employment and meet all other eligibility criteria. The transitional case management services include assisting with transitional child care arrangements and transitional transportation, referring the individual to other resource providers (*i.e., food, clothing, housing, health and other services*), informing the individual about the availability of and requirements for receiving job retention bonus payments, and providing counseling to ensure that no problems are present to jeopardize the individual's continued employment.

The duties of the **county director or designee** include (*but are not limited to*):

3. Supervising the TWP CMs.

2. Assuring that enough orientation/assessment sessions and slots are available for TWP Referrals.

3. Maintaining the **MJCM** screen in JAWS by:

   - Assuring that the CM is available for assessment appointments in JAWS;
   - Blocking case management assessment appointments;
   - Updating phone numbers; and
   - Updating printer ID numbers.

4. Transferring cases between case managers, immediately, when needed.

5. Terminating sanctions added in error in JAWS by the CM. This includes:

   - Monitoring the number of CM errors made each month and counsel with CM to improve work performance;
   - Meeting with the job readiness trainer/employment coordinator on a regular basis to review participation and progress of TWP participants, employment placements, and employer participation.
   - Assuring that the case record contains written documentation of reason(s) for removing a TWP sanction.

6. Assuring that the TANF Work Program rules and regulations are explained clearly and accurately to the individual at orientation and assessment.

7. Maintaining an inventory in JAWS of all component and supportive service providers so that the CM can refer the participant to components and available services.

8. Monitoring the CM to ensure that the Caseload Listing Report is being worked continuously.

9. Monitoring participant status by reviewing the TANF status, participation code and TWP appointment schedule code.

10. Assessing the TWP file status codes. No more than 20% of the caseload should be in "holding". "Holding" should only be used to transition the individual between allowable activities, when requesting an exemption and setting up a conciliation.

11. Monitoring the status of attendance entered. Attendance must be up-to-date by the end of the month for the prior month.

12. Monitoring component assignments. Job readiness/job search training is limited to six weeks during each federal fiscal year. AWEP and community service placements are limited to six months each Federal Fiscal Year. Individuals assigned to these activities must be assessed at least every 90 days.

13. Working the TWP caseload if CM is unavailable.

14. Ensuring that policy and system changes are received, reviewed and understood by staff members and filed appropriately.

15. Ensuring that adequate Community Service and AWEP sites have been developed for TWP participants by the CM.

16. Ensuring that resource service providers are available, as needed.

The duties of the **CM** include (*but are not limited to*):

1. Promoting the TANF Work Program to participants, emphasizing personal responsibility and long-term self-sufficiency.

2. Identifying and prioritizing the individual's strengths and skills, aptitudes, interests, and social needs and translate them into realistic goals that will lead to full-time employment.

3. Referring participants to the local community college for literacy assessment if needed for job placement.

4. Working with the participant to develop a plan of action that will lead to full-time employment, especially when the individual is unsuccessful in finding employment after completing job readiness/job search.

5. Assisting in removing the barriers (*transportation, child care, clothing, housing, etc.*) to help access the resources needed to pursue those goals. The CM is responsible for ensuring that the TANF recipient or participant receives appropriate services, in a timely manner.

6. Monitoring the participant and the service provider to ensure the delivery and continued appropriateness of services, enabling persons to reduce barriers that interfere with participation.

7. Monitoring the participant's placement to ensure that the individual is attending the activity as required and making satisfactory progress.

8. Maintaining a list of available resource providers within the county and surrounding area.

9. Assigning the TWP participant to the appropriate TANF work activities.

10. Reviewing and revising the EDP, as necessary, to address participation barriers and inappropriate component placement.

11. Conducting conciliations promptly to resolve unsatisfactory participation. The CM will work with the participant to resolve any barriers to participation which contribute to attendance problems or lack of satisfactory progress in the component.

12. Determining good cause for failure to participate.

13. Approving work program exemptions.

14. Sanctioning TWP participants for non-compliance.

15. Entering a sanctioned individual's compliance in JAWS.

16. Processing changes which may affect the TANF benefits in a timely manner.

17. Referring fair hearing requests to the MDHS-EA local office.

18. Acting as a liaison between the TANF Work Program and other human service agencies.

19. Collecting and reporting individual and participant data (*i.e., manual reports and tracking forms*) as required by Economic Assistance.

20. Maintaining the mandated participation rate. *(See Chapter 12)*

21. Coordinating provision of transitional services (*child care, transportation and job retention bonus payments*) once the TANF case closes because of earned income.

22. Providing counseling and resource referral services, as needed, for up to one year after the TWP participant loses TANF eligibility due to earned income.

23. Reviewing and working the CM Caseload Listing report to ensure appropriate actions necessary to assist TWP participants in becoming self-sufficient are taken in a timely manner.

24. Reviewing system alerts and ticklers on a daily basis and taking appropriate actions.

25. Notifying OCY Designated Agents timely when a TWP participant needs child care assistance, a change in child care services is necessary or termination of child care services is determined.

Managing the TWP Caseload

Eighty (80) percent of case management's active TANF caseload must be assigned to allowable work activities. Case management will use a "holding" status only to transition participants between allowable work activities. Case management will complete an assessment of each TANF recipient within fifteen (15) days after approval of TANF benefits.

NOTE: These individuals should appear in JAWS on the following day. (*If the individual does not appear in* JAWS, *submit the problem to the Help Desk.*) The CM must schedule an assessment appointment for the individual in JAWS. (*Refer to Chapter 8, Referral to the* TANF *Work Program for additional information.)*

Following the development of an employability development plan (EDP) for each individual and identification of required supportive services, if needed, first priority will be assigning participants to job readiness/job club/job search activities. Case management will ensure attendance data is entered into JAWS timely to ensure continuity of supportive services and work activity credit is calculated in the state's participation rate.

JOB READINESS TRAINER

The job readiness trainer will be under the direct supervision of the regional director; however, work activities must be coordinated with the county directors. The job readiness trainer will work areas assigned by the regional director and will be willing to travel outside the region as needed. The job readiness trainer's work performance will be monitored by the regional director and other duties may be assigned, as needed, to enhance the TANF Work Program. The job readiness trainer will perform and render the following services for the TANF Work Program:

- Review each participant's case record and become familiar with the household composition, EDP, participation barriers, grade level, work history, component assignments, etc.

- Complete a participant profile sheet, based on the case review, for each participant scheduled to attend job readiness training.

- Interview each participant, within three days of beginning job readiness training, to assess areas of employment interest, strengths and weaknesses toward employment, etc.

- Coordinate with case management to ensure TWP participants' transportation and child care needs are met, if necessary.

- Provide a minimum 80-hour structured job readiness training curriculum in a classroom setting preparing TWP participants to obtain and retain employment. Program activities must contain the following elements:

  individual assessment
  job readiness/life skills
  job search/job club
  enhanced job readiness

  Areas/topics to be incorporated in the above elements should include, but are not limited to the following:

  interviewing techniques
  self-esteem
  management/budgeting/banking
  nutrition/shopping tips
  application process
  money
  appropriate dress//hygiene/grooming
  employer expectations

work ethic

- Make curriculum enhancements to meet the local area's needs and specialized labor market conditions.

- Provide job club/job search activities in conjunction with basic job readiness training. Job club will consist of more advanced interviewing techniques such as role-playing, mock interviews and telephone techniques. Encourage group interaction by sharing job seeking/interviewing experiences.

8. Coach participants in developing job leads using yellow pages, classified ads and other sources of information.

9. Provide individual counseling for participants experiencing trouble obtaining employment focusing on participants' strengths and weaknesses.

10. Assist the employment coordinator with scheduling interviews.

11. Provide an overview of the following services available to TWP participants:

Child Care	Advanced Earned Income Tax Credit (EITC)
Transportation	Earned Income Disregards
Work-Related Expenses	Participation Stipend
Transitional Benefits:	
Child Care	Case Management Services
Transportation	Job Counseling Services

12. Assist, if needed, in the development of AWEP/community service slots based on the skills/experience needed by participants to obtain on-the-job training to improve their employability in the competitive job market.

13. Actively participate in weekly staff meetings with case management and employment coordinators and make individual recommendations for continued job readiness training or assignment to a more suitable/realistic work activity.

14. Refer all incidents of noncompliance to case management for conciliation.

15. Exercise tact, patience and discretion in communicating and dealing with individuals with a variety of ethnic, social or educational backgrounds.

16. Perform other duties as needed to enhance the TANF Work Program.

EMPLOYMENT COORDINATOR

The employment coordinator will be under the direct supervision of the regional director; however, work activities must be coordinated with the county directors. The employment coordinator will work areas assigned by the regional director and will be willing to travel outside the region as needed. The employment coordinator's work performance will be monitored by the regional director and other job development/identification duties may be assigned, as needed, to enhance the TANF Work Program. The employment coordinator will perform and render the following services for the TANF Work Program:

1. Plan, develop and execute a program to identify employers willing to hire TWP participants.

2. Contact employers in person, by telephone, or in group sessions to learn their hiring and training needs.

3. Educate employers on the advantages of hiring TANF recipients to include:

   - Federal Work Opportunity Tax Credit (WOTC).
   - Employer-Sponsored Child Care Tax Credit.

4. Maintain an area-wide inventory of interested employers and available jobs for TWP participants by meeting and networking with business and industry leaders in the community.

5. Give special care to match employers' needs with TWP participants' skills and abilities.

6. Document all follow-ups with employers regarding participants' interviews and job performance.

7. Maintain a tracking log of all contacts made with employers, participants/employees and case management staff. The log should reflect the date of the visit/contact and comments pertaining to the contact. If possible, visit with employees biweekly/monthly at the job site.

8. Follow-up immediately with the employer, and be available for counseling, upon notification of problems or concerns expressed by the employer or the employee.

9. Work closely with the job readiness trainer to ensure awareness of local employer-specific needs, requirements and potential job opportunities, as well as to identify skills and abilities of participants.

10. Review participant profile sheets, provided by the job readiness trainer, and become familiar with each participant's situation, i.e., household composition, EDP, employment barriers, grade level, work history, component assignments, etc., to assess strengths and weaknesses toward employment.

11. Actively participate in the job search portion of job readiness training by assisting in the areas of job interviewing, conduct, responsibility, cooperation, personal appearance and attitude.

12. Schedule interviews with employers.

13. Actively participate in weekly staff meetings with case management and job readiness trainers to discuss participant progress and make recommendations for enhanced job readiness training or assignment to more suitable/realistic work activities.

14. Mentor participants during structured job club/job search activities.

15. Inform participants about the benefits of the Advanced Earned Income Tax Credit (EITC).

16. Assist, if needed, in the development of AWEP/community service slots based on the skills/experience needed by participants to obtain on-the-job training to improve their employability in the competitive job market.

17. Identify and provide resources and assistance in removing or reducing barriers to meet employment goals.

18. Make employment referrals (arranging interviews, accompany participants, etc.) to local businesses and industries for possible job placement.

19. Report job placements to case management and assist with employment verification.

20. Address the number of work hours, if a reduction in work hours occurs, to determine the reason and notify the case manager accordingly so that appropriate action can be taken.

21. Report incidents of noncompliance to case management.

22. Exercise tact, patience and discretion in communicating and dealing with individuals with a variety of ethnic, social or educational backgrounds.

23. Perform other assigned duties as needed to enhance the TANF Work Program.

Refer to *Chapter 10, Supportive Services*, for the employment coordinator's role and responsibilities when a TANF case closes due to earned income or loss of the total earned income disregards.

OVERVIEW

This material describes the automated TANF and TWP system transactions. This material also includes a discussion on the MAVERICS/JAWS interface and system security.

The Mississippi Application Verification Eligibility and Reporting Information Control System (MAVERICS) is the statewide automated on-line system that supports Mississippi's TANF eligibility, Food Stamp Program and some TWP-related functions. The Jobs Automated Work System (JAWS) is the statewide automated on-line system that supports the TANF Work Program (TWP) for tracking the individual in work activities and paying for supportive services. MAVERICS and JAWS also support the collection of data for Federal and State reporting.

EXCHANGING INFORMATION

There is an electronic exchange of information between MAVERICS and JAWS. After the initial referral from MAVERICS is accepted by JAWS and the TANF case is established for the TWP, the two systems continue to exchange data overnight on a daily basis. This daily overnight communication is required to ensure the information about a TANF recipient participating in the work program is consistent, correct, and up-to-date.

On a daily basis:

- MAVERICS sends to JAWS any changes in the individual's eligibility for benefits which may affect participation in the work program. This exchange of information includes the individual's eligibility status, results of exemption and fair hearing requests.

- JAWS sends to MAVERICS any changes in data which may affect the individual's eligibility for TANF, including changes in demographic data and/or employment status, information related to a sanction, compliance for non-cooperation, and requests for exemptions and fair hearings.

Accurate and timely communication, whether written, oral, or electronic, is critical to the effective operation of the TWP. The eligibility worker or case manager will provide through the MAVERICS/JAWS interface (*or on paper*) any information that will affect the individual's TANF benefits, supportive services and ability to participate in the TANF Work Program. Examples include:

- Participant becomes exempt or non-exempt

- TWP participant is requesting an exemption
- TANF recipient is employed
- Case closed because of earned income (*transitional child care, transitional transportation and job retention bonus payments)*
- Case closure, other reasons
- Change in address
- Results of fair hearings and exemption requests
- A sanctioned TWP participant wishes to comply

TWP Component providers and employers will report to MDHS any information which will affect the TWP participant's benefits, supportive services, or participation in the TWP. For example:

- Participant becomes employed
- Change in employment
- Decrease/increase in wages or other income
- Change in address
- Family member(s) moves in or out of home
- Change in school attendance of a minor volunteer
- Unsatisfactory attendance in assigned TWP component
- Change in supportive service (*transportation and child care*) arrangements
- Change in scheduled hours for component assignment or employment

Once the information becomes known by the component provider or employer, the information must be reported to MDHS within five working days.

JAWS/MAVERICS INTERFACE

JAWS/MAVERICS Transactions

MAVERICS transmits new referrals and updates information for previously referred individuals to JAWS nightly using a batch process. Information that requires TANF case benefit authorization will not be referred to JAWS until TANF authorization occurs.

The following transactions will come over to JAWS from MAVERICS on their **Effective Date**. In order for these transactions to come across to JAWS, TANF benefits must be authorized in MAVERICS.

- Initial referrals
- Re-referrals/reinstatements
- TANF Participation Code (IN, OU) changes
- TANF Program Status (CLosed, OPen, or REceive) changes
- TANF closures

NOTE: Closures which are "back dated" in MAVERICS will be processed overnight in JAWS.

EXAMPLE: If, on January 17, 2006 the TANF case erroneously closes in MAVERICS with an effective date of December 2005, the closure will process overnight and appear in JAWS on January 18, 2006.)

- County transfers
- TWP Program Status codes (NE, EV, SM, MV, WH, WP, WL, JB, JF, JJ, JK, JL and JV)

TANF Case Closure

If a case closes in MAVERICS on the 17th of the month, JAWS does not process the closure until the last day of the month. If the case is still closed (MAVERICS *has not sent another transaction to open the case*) on the last day of the month, JAWS will process the closure and close the case and TWP component. If the case is reinstated in MAVERICS after JAWS has received the closure, MAVERICS will send the reinstated referral overnight to JAWS.

NOTE: There is not an automatic process that "pops open" a TWP component that was automatically closed by a MAVS/JAWS interface. If the case is reinstated and the individual remains in his/her work activity, the case manager must enter any outstanding attendance for the closed component, add a new component in JAWS and continue to track the individual.

Other Data Exchanges

The following transactions will come **Overnight** in JAWS from MAVERICS. (*If the case is open.*)

- Address changes
- Last grade completed
- Enrollment in school
- Exemption/fair hearing requests and determinations

JAWS transmits new TWP data and updates to information on individuals previously referred to the TWP. When MAVERICS receives the new or updated information from JAWS, MAVERICS creates an alert to the EW of changes reported by JAWS which may affect TANF eligibility. The case manager (CM) or EW will review and update the information.

Although JAWS cannot update data which is primarily owned by MAVERICS (*i.e., address change, employment information and employer data, change in date of birth for a child included in the TANF budget, etc.*), certain functions performed in JAWS by the CM will affect the participant's TANF and Food Stamp benefits in MAVERICS:

- The JAWS conciliation process will cause MAVERICS to automatically FREEZE and CLOSE (*if a sanction is to be applied*) the individual's TANF case, *and possibly* FS.

- TWP participants are required to participate in an allowable work activity whenever they become "work ready". "Work ready" means that the person is ready to be assigned to a work activity, not necessarily ready for paid employment or job training. JAWS monitors attendance on TWP participants monthly and determines whether or not a TWP participant is meeting the monthly federal participation requirement. If the participant is assigned to an allowable component in JAWS, MAVERICS will not increment the participant's 24-month counter.

There are two data elements which are co-owned by MAVERICS and JAWS, the last grade completed and the enrolled in school indicator. These two data elements may be updated in both systems.

JAWS Appointment Notices

The CM should not perform any function which will generate a notice (*i.e., orientation/assessment or conciliation appointments*) in the JAWS system on Friday, Saturday or Sunday. The MAVERICS/JAWS interface jobs do not run on the weekend and notices are not printed until the following Monday.

EXAMPLE: If a conciliation appointment is entered on Saturday, the notice will not be printed until Monday night, and the conciliation request will not go to MAVERICS until Monday night.

It is imperative that we do as much as possible to keep the number of days between requesting the conciliation in JAWS and MAVERICS sending the individual the closure notice in sync. Also, we must allow adequate mailing time for the participant to receive the JAWS appointment notice and meet the 10-calendar day appointment deadline.

Resolving Conciliations

Whenever the CM schedules conciliation, one of the following situations may occur:

1. The participant comes in within the 10-calendar day conciliation period and complies. No sanction is applied if good cause is determined.

NOTE: Whenever possible the CM should see the participant and send a compliance before the 10th day. If the compliance is sent on the 10th day, MAVERICS auto-closure will close a TANF case prior to processing the compliance sent by JAWS.

If the10th day falls on Saturday or Sunday and the participant comes in on Monday, the supervisor should **"ER"** the conciliation and allow the participant to comply. Whenever **"ER"** is used, the supervisor must file written documentation of the reason for the use of this code in the participant's records.

2. The participant does not comply and the case closes for non-compliance. **The participant's case will close but the CONCILIATION will remain "OPEN" *(unresolved*)**. Although JAWS will not process the case closure until the effective date, the CM will not be able to resolve a conciliation once the 10 day period has expired (*i.e., MAVERICS closes the case on June 10, 2005, effective for July 1, 2005. JAWS will process the closure and display it on June 30, 2005. JAWS will not allow the CM to resolve the conciliation on June 11, 2005*). The participant must serve the sanction period before complying. When the individual serves the sanction period and reapplies for TANF benefits, MAVERICS will refer the **"RECEIVE"** status to JAWS. **The CMS must not use "ER" or "CN" to resolve this conciliation. The individual must be referred by the EW to the TANF Work Program to complete orientation.**

3. If MAVERICS has the case **"FROZEN"** for another reason (case closure request, etc.) or if the EW works the case during the 10-calendar day conciliation period, MAVERICS **will not** process the conciliation sent by JAWS.

a. The following may occur if the TANF case closed for a reason other than the conciliation (*request from the individual, etc.*):

1. The participant will not receive a sanction.

2. The individual who received the conciliation will be flagged by MAVERICS to alert the worker if the individual reapplies for TANF.

3. The participant's case and CONCILIATION record will be closed.

4. JAWS will display **"CL" for the TANF Program Status code on ICLI and "CL" for the Conciliation Resolution code on WCOR**.

If the individual reapplies for TANF benefits, using MDHS-EA-319, the EW will manually refer the individual to the CM to comply. The CM will allow the individual to comply off-line; complete MDHS-EA-319; and return the form to the EW.

MAVERICS **will not** send the **"RECEIVE"** Program Status to JAWS if the individual does not have an outstanding sanction record for TANF. MAVERICS will send the **"OPEN"** status to JAWS once the TANF case has been approved.

b. If the case does not close, JAWS will have an **"OPEN"** case and a CONCILIATION RECORD that will remain "**OPEN"** after the 10 days expire**.** If the participant needs to be sanctioned, the supervisor may **"CANCEL-CN"** this record and allow the CM to schedule another conciliation. A new conciliation record must be added in order to sanction the participant.

JAWS will display **"OP" for the TANF Program Status code on ICLI and the Conciliation Resolution code field will be blank (_____) on WCOR**. See *Chapter 12, Open TWP Cases with Expired Conciliation Report*.

Exemption Requests

NOTE: If the worker has access to JAWS and MAVS, an exemption should be processed in MAVS instead of JAWS.

If the recipient requests an exemption from the case manager (CM), the CM may enter the request in JAWS or MAVERICS. An exemption request in JAWS can be created two different ways:

1. If a conciliation record exists and the individual requests an exemption **within** the 10-calendar day time frame, the CM may enter the exemption request in JAWS on the existing conciliation record. MAVERICS will change the program status from "FROZEN" to the previous program status.

- If the individual is **approved** for exemption, the EW will enter the exemption code in MAVERICS. MAVERICS will send JAWS the exemption code "EX" to resolve the conciliation.

- If the individual is **denied** the exemption, the EW must enter the denial code in MAVERICS. MAVERICS will pass the exemption results to JAWS. The EW will close the case with a notice which has the same conciliation/closure reason as the original and MAVERICS will apply the sanction.

2. If the CM requests an exemption, without an existing conciliation record, JAWS will create a conciliation record for the exemption request. However, MAVERICS will not place the individual's benefits in a frozen status when this situation occurs.

- If the individual is **approved** for exemption, the EW will enter the exemption code in MAVERICS. MAVERICS will send JAWS the exemption code "EX" to resolve the conciliation record created for the exemption request.

- If the individual is **denied** the exemption, the EW must enter the denial code in MAVERICS. MAVERICS will pass the exemption results to JAWS. The individual must then participate in TWP or receive a sanction. The CM may schedule the individual for orientation/assessment or assign the individual to an activity. If the individual fails to cooperate, a sanction must be applied.

County Transfers

When a case is transferred to another county, the individual will appear on the new county's Case Manager's Caseload Listing report. The individual will be assigned to the previous CM or the CM ID number will be "blank". The CMS in the new location must review the caseload listing report and reassign the individual to a CM in the new location. The individual will remain assigned to the CM in the previous county until he/she is re-assigned to a CM in the new county. The CM in the previous county will receive alerts for this individual until the CM transfer process has been completed in the new county.

NOTE: Upon receipt of the Case Manager Caseload Listing report, the supervisor will review for blank ID numbers and reassign immediately to the new CM.

SUBMITTING PROBLEMS TO THE HELP DESK

When submitting a problem to the Help Desk, please indicate whether this is the FIRST, SECOND or THIRD request for that case and specific problem. Allow a reasonable time for resolution before making the second/third request. Please coordinate requests within your county or supervisory unit so that duplicate requests are not submitted for the same case problem. Be sure that the JAWS and MAVERICS cases have been reviewed to identify and resolve any possible case and policy inconsistencies before requesting Help Desk assistance. The supervisor should review and approve all requests before they are submitted to the Help Desk. Requests without adequate explanation of the problem will be returned to the sender.

Deleting Attendance Due to Incorrect Data Entry

The Help Desk will not delete data for any week for which any payment has been made, even when it is discovered that attendance was omitted or entered incorrectly. The CM must strive to enter attendance timely and accurately. **Failure to enter attendance timely and accurately may cause the participant to lose TANF benefits**.

SYSTEM SECURITY GUIDELINES

The CM has access to JAWS and/or MAVERICS and it is imperative that MDHS protects the integrity of these systems. Refer to discussion of systems security under IEVS in Chapter 4.

1. Computer system access shall be granted to authorize system users by Economic Assistance/State Office upon receipt of a properly completed System Access Form.

   - MAVERICS Security Access - Mississippi Form MDHS-MIS-01 and MDHS/MIS Confidentially Information Agreement

   - JAWS Security Access - Mississippi Form MDHS-MIS-03 and MDHS/MIS Confidentially Information Agreement

2. System users are identified by their User-ID and Password which are to be used exclusively by that individual. This information will be mailed directly to the user in an envelope marked "Confidential-To Be Opened by Addressee Only". Under no circumstances will User-ID's be issued over the telephone.

3. Whenever a User terminates his/her employment, the County Director or designee must complete the appropriate form (MDHS-MIS-01 or MDHS-MIS-03) and forward it to Economic Assistance/State Office.

4. Under established security policies, users are prohibited from:

   - Providing their User-ID and Password to another user.

   - Signing onto the system using their User-ID and Password to allow another person to enter data for them.

   - Enter data using another employee's User-ID and Password.

5. No one shall be allowed to maintain a list of User-ID's and Passwords.

6. The system will automatically require system users to change their CSSN Password every (30) days. User Passwords may also be changed any time at the discretion of the user. Passwords must be a recognizable eight (8) character word, which includes at least one number. The security system will retain the last eight (8) user Passwords issued/changed. Use of family member names and/or rotation of previously used Passwords are highly discouraged.

7. System users must notify the System Security Administrator (MIS Director) or the MIS Systems Security Officer immediately upon suspicion that their User-ID and Password is being misused.

8. System users must log off their computer terminal or PC when they are away from their workstation for breaks, lunch, meetings, etc.

9. System users must keep areas around computer equipment free of damaging materials. There shall be no eating or drinking on or over the keyboards, terminals or printers.

10. System users shall take every precaution to ensure computer equipment assigned to them is protected from unauthorized use.

11. System users should cease the input of data immediately if any abnormal processing occurs to avoid possible corruption of case data being entered. In these situations, assistance should be obtained from Help Desk staff.

12. System users must secure and safeguard confidential reports and other sensitive materials in accordance with established agency policy and procedures.

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ABSENT PARENT (AP)

The parent of a child who is not in the home fulfilling the parental role. This is the parent who is referred for child support enforcement. See Chapter 3, Child Support.

ACCRUAL RIGHTS

The applicant's right to a money payment. This right accrues on the date on which the money payment is authorized or the 30th day following the date on which a valid application form was received, whichever comes first. See Chapter 7, Disposition of the Application, and Accrual Rights of the Recipient.

ADVANCE NOTICE

The requirement that the Department give 10 days' advance notice to a recipient of the decision to decrease assistance, to terminate assistance for one or more, but not all individuals in the TANF budget, or to terminate assistance completely. The 10 days are to be counted beginning with the date of printing/mailing of the notice and must expire prior to the first day of the effective month. This refers to calendar days, not working days. See Chapter 7, Advance Notice.

ADVERSE ACTION

Action taken to terminate or reduce a participant's benefits or supportive services. See Chapter 11, Conciliation, Good Cause and Adverse Action.

ALIEN

An individual who is not a citizen of the United States, whether or not in the country legally. Most aliens are not eligible for assistance after their first five years in the country and must be carefully evaluated for eligibility determination. See Chapter 3, Citizenship and Alienage.

ALTERNATIVE WORK EXPERIENCE PROGRAM (AWEP)

A work activity in which individuals perform work for **private non-profit entities** for no cash payment, in order to receive current work skills and/or experience. The target population of this work activity is individuals who have not attained employment and need additional training/work experience to improve their employability skills. Placements are limited to six months in a federal fiscal year and must be reviewed by the CM every 90 days. See Chapter 9, Coordination

of Activities.

AMERICORPS - Also see Volunteers In Service To America (VISTA)

A network of local, state and national volunteer service programs in intensive service to meet our country's needs in education, public safety, health, and environment.

ANNUALIZE

To convert money received from contract work or self-employment to a level monthly amount by averaging over the year. See Chapter 4, Earned Income to be Averaged.

AP - See Absent Parent.

APPLICANT

An applicant is an individual who has made application for economic assistance to the county office of the Department of Human Services and whose application has not been disposed of by appropriate county action. The parent or other relative with whom the child will live must be the applicant on the child's behalf. See Chapter 7, Definitions.

APPLICATION

An application for TANF is made by an individual signing the agency application form, MDHS-EA-900, page 1. A valid application must consist of the client's name, address and signature. The application may be the first formal request made for assistance or may be a subsequent request, which is referred to as a re-application. See Chapter 7, Definitions.

APPLICATION PROCESS

The application process consists of all activities from the time an application is accepted until the payment or notice of denial is mailed to the applicant. At any point in the application process, the applicant may decide to withdraw his request. See Chapter 7, Definitions.

APPROPRIATE CHILD CARE

Suitable and affordable child care that is available within a reasonable distance from the individual's home or work site. See Chapter 10, Supportive Services.

ASSESSMENT

An interactive interview process to determine the individual's employability; and establish an Employability Development Plan (EDP) that identifies his/her employment or educational goals, the TWP work activities that can help the participant achieve his/her goal and any supportive services needed to facilitate the EDP. Assessment is a continuous process. The CM must assess the individual's participation in the TWP to ensure the individual is participating satisfactorily and making progress in his/her assigned activities. See Chapter 7, Assessment.

ASSISTANCE HOUSEHOLD

A household in which all members are included in a TANF money payment budget. See Volume V, Chapter 7, Categorically Eligible Households.

ASSISTANCE UNIT (AU)

The assistance unit is defined as all individuals who must be included in the TANF budget group. The assistance unit was formerly called the standard filing unit (SFU). See Chapter 3, Assistance Unit Concept.

AU - See Assistance Unit.

AUDIT -To examine and check. See Chapter 1, Disclosure for Audit Purposes.

AUTHORIZATION

Authorization is an official act, usually performed by the county Economic Assistance Director/Supervisor, certifying as to the eligibility or continuing eligibility of any assistance payment group. The authorization requests the issuance of a money payment and authorizes the expenditure of public tax funds. See Chapter 7, Standard of Promptness.

AWEP - See Alternative Work Experience Program.

BARRIERS

Circumstances in the individual's life that may prevent his/her participation in the TWP. Case managers should work with the individual to remove these barriers through the provision of supportive services, strategic component assignments and other assistance. See Chapter 8,

Barriers to Participation.

BATCH PROCESS

A computer term. Information gathered into a group and held for processing at a later time.

BENEFIT MONTH

The month for which the TANF money payment is paid.

BP - See Bus Pass.

BROAD-BASED CATEGORICAL ELIGIBILITY (BBCE)

BBCE households are not subject to a resource test. All households are considered to be broad-based categorically eligible, with the following exceptions: (1) households containing a member currently disqualified for Intentional Program Violation (IPV); (2) households with a member convicted of a drug felony. Resources of all members of such non-BBCE households must be verified and tested. See Chapter 5, RESOURCES.

BUDGET

The calculation of eligibility and benefit amounts based on family size, income and expenses. Most budgets are done in the computer, but paper budgets are available for use as needed. See Chapter 6, Budgetary Process.

BUDGET GROUP

The people being included in the household size for determination of eligibility and benefits. SSI individuals are not a part of the budget group for TANF. See Chapter 6, Number of Budget Groups.

BUS PASS

One of two modes of transportation offered to TWP and TT participants. Bus Passes are the first method of transportation to consider for participants who live in areas where transit systems are available. Bus Passes are purchased with TANF funds and issued by the case manager. See Chapter 10, Supportive Services.

CAA - See Community Action Agency.

CARETAKER RELATIVE

A caretaker relative, or grantee relative, is a parent or other adult relative within the specified degree of relationship who is 18 years old or older and who exercises control and supervision over the assistance child(ren). The caretaker relative is always the legal parent when the legal parent is in the home. The caretaker relative is the individual who signs the required agency
Forms and is responsible for reporting changes in the family's situation. Except for protective payment and emergency situations, the money payment is issued in the name of the caretaker relative. This individual is also referred to as the grantee relative, PI or payee of the case, and may be a needy caretaker or a non-needy caretaker. See Chapter 3, Choice of Caretaker Relative.

CASE HEAD

The individual in whose name application is made for participation in the program. This is the individual who is the specified relative. Only the case head (*also called the payee, PI, caretaker relative or grantee relative*) may be interviewed and sign agency forms, as there is no authorized representative provision for TANF. See Chapter 3, Specified Degree of Relationship, Choice of Caretaker Relative, and Choice of Needy Caretaker Relative.

CASE MANAGER (CM)

Case manager is the individual who works directly with the TWP participants to provide support, encouragement and assistance in management without promoting dependency. The case manager is the driving force in the family's quest for self-sufficiency and should be an effective role model for communication, conflict resolution and negotiation. Work tasks include completing the intake process, gathering data for making case decisions; explaining TWP; developing an EDP; arranging supportive services; making work activity assignments; referring to other service providers; monitoring and coaching to assure compliance with TWP and lead to full-time employment. The case manager works as a professional partner with the participant. See Chapters 8, 9, 10, 11 and 12.

CASE MANAGER SUPERVISOR (CMS)

The Case Manager Supervisor is the individual responsible for providing administrative technical assistance to the CM; monitoring the CM's caseload; and assuring that the CM follows the policy and procedures of the TANF Work Program. See Chapter 12, TANF Work Program

Reports.

CASE RECORD

The physical record consisting of a folder containing forms, documents and other verification materials to support eligibility and benefit decisions. See Chapter 1, The Case Record.

CASH RESERVE

The resource readily available to the TANF family, such as actual cash money or bank accounts. See Chapter 5, Resources to be Included and Resources to be Excluded.

CCDF - See Child Care Development Fund.

CFR - See Code of Federal Regulations.

CHILD CARE

A supportive service payment for dependent child care expenses. Child care may be paid, if needed for TWP participants who are satisfactorily participating in an approved TWP work activity. See Chapter 10, Child Care Services.

CHILD CARE DEVELOPMENT FUND (CCDF)

Subsidized child care authorized by the PRWORA to assist low income families in obtaining child care so they can work or attend training/education. This is how TWP child care and TCC are funded. See Chapter 10, Supportive Services.

CHILD SUPPORT

Support payments ordered/paid by non-custodial parents to support their children, and provide them with a sense of family, social and financial security and help families to become less dependent on public assistance. The PRWORA requires all applicants for and recipients of TANF assistance to assign their support rights to the State and to cooperate with the State in establishing paternity and obtaining support. See Chapter 3, Child Support.

CITIZENSHIP

The status of being a citizen. Federal statute requires that an individual be a citizen of the United

States or an alien admitted for permanent residence in order to receive public assistance. See Chapter 3, Citizenship and Alien Status.

CLAIM - See Improper Payment.

CM - See Case Manager.

CMS - See Case Manager Supervisor.

CODE OF FEDERAL REGULATIONS (CFR)

The multiple volume document that contains the regulations for all federally authorized programs. See Chapter 1, General.

COLLATERAL CONTACT

An individual outside the household who may be contacted to provide eligibility information. Also the act of making this contact. Collateral contact may be used to verify certain information given by the client, especially regarding household size composition and residence. Collateral contacts must be fully documented in the case record.

COM - See Community Service.

COMMON LAW MARRIAGE

A common law marriage which was entered into prior to April 1, 1956 in Mississippi, is legally binding as one established by statutory ceremonial marriage, provided both parties were free to contract to marry, the parties agreed to become husband and wife, and the parties lived and cohabited together in Mississippi as man and wife, openly proclaiming their marital relationship.

COMMUNITY ACTION AGENCIES (CAA)

Community Action Agencies are non-profit organizations which were officially designated as a community action agency or a community action program under the provisions of Section 210 of the Economic Opportunity Act of 1964. The purpose of the CAA is to bring public and private resources and expertise together to make people self-sufficient and eliminate the causes and effects of poverty.

COMMUNITY SERVICE (COM)

Community Service is a work activity in which individuals, not otherwise able to obtain employment, work for **public entities** for no cash payment to improve their employability skills to help them move promptly into regular public or private employment. Community Service providers must be approved by the county director. Community Service placements are limited to projects that serve a useful purpose in fields such as health, social services, environmental protection, education, urban and rural development and redevelopment, welfare, recreation, public facilities, public safety, and child care. Community Service also includes work associated with refurbishing publicly assisted housing. Placements should only be made if sufficient private sector employment is not available. The maximum number of hours in any month that a participant may be required to work is based upon the size of the family's assistance grant. Placements are limited to six months per federal fiscal year and must be reviewed by the case manager every 90 days. See Chapter 9, Coordination of Activities.

COMPLIANCE

When a participant satisfies the request, demands and/or requirements of the TWP. See Chapter 11, Compliance Prior to Case Closure, and Compliance After Case Closure.

COMPONENT

A structured, regularly scheduled work activity for TWP participants. See Chapter 9, Program Components.

CONCILIATION

An informal conflict or grievance resolution process; it is available so that TWP participants and case managers can resolve problems concerning TWP participation or progress outside of the formal grievance process. See Chapter 11, Conciliation.

CONCURRENTLY

Occurring or existing at the same time, such as job readiness/job search. See Chapter 11, Job Readiness/Job Search.

CONSECUTIVE

Following one after the other in order without interruption. See Chapter 9, Job Readiness/Job Search.

CONTINUED ABSENCE

A child may be considered deprived for the reason of continued absence when one or both legal parents is absent from the home. The parent may be divorced, separated, or the father was never married to the mother even though paternity was established for one or more of the children. See Chapter 3, Continued Absence.

CONTRACTOR

Individual or entity that contracts with a sub-grantee to provide job placement services or supportive services for TANF participants in a certain geographic area. A contractor may also be called a local service provider. See Chapter 1, Guidelines for TWP Contractors, and Chapter 10, Supportive Services.

COOPERATION

When the TWP participant satisfies all program requirements. See Chapter 9, Satisfactory Participation.

CP - See Custodial Parent.

CUSTODIAL PARENT (CP)

Child support term used to refer to the parent with the actual custody of the child, generally our client as opposed to the AP. See Chapter 3, Child Support.

DA - See OCY Designated Agent

DEA - See Division of Economic Assistance.

DEDUCTION

A standard amount or actual expense paid by the client that is subtracted from the family income in determining eligibility and benefits. See Chapters 4, 6 and 7.

DEPENDENT CARE

Money paid to someone outside the household to care for a child or incapacitated adult in order for the parent /caretaker to work, look for work, or attend classes preparing for employment. See Chapter 10, TANF Child Care Services.

DEPENDENT CHILD

For TANF purposes, a dependent child is a child under the age of eighteen (18), regardless of marital status, who is living with a parent or other caretaker relative in a place of residence maintained as his/her or their own home. See Chapter 3, Dependent Child, Individuals to be Included in the Assistance Unit, and Age.

DEPRIVATION

In order to qualify for TANF, a child must be deprived of care and support of one or both parents. There are four major deprivation reasons: death, incapacity, unemployed parent and continued absence. See Chapter 3, Deprivation.

DESIGNATED AGENT - See OCY Designated Agent.

DISABLED INDIVIDUAL

Individuals in a household that receive payment from any of several sources for some incapacitating health problem are considered disabled and are often eligible for certain special considerations in determining eligibility and benefits. For TANF, any individual who claims to be disabled but is not receiving a payment may be evaluated through the medical review process to determine if the individual will be considered disabled. Generally, receipt of SSI, Social Security Disability or 100% VA disability establishes incapacity. Other situations require the medical review process. See Chapter 3, Deprivation.

DISQUALIFICATION

Whenever an applicant for or recipient of assistance refuses or fails to cooperate with various eligibility requirements without good cause, that individual is subject to a penalty. The penalty may be a full case situation, which closes the program, or may involve disqualifying the non-cooperative individual while continuing to count the individual's income and resources in the case. See Chapter 3, Non-Financial Criteria and Chapter 11, Adverse Action.

DISTANCE LEARNING

Computer based educational activities that provide formal training during which the student is not in the same physical location as the instructor. Course work is completed online through an accredited educational institution or internet-based provider.

DIVISION OF ECONOMIC ASSISTANCE (DEA)

The MDHS division that administers SNAP, TANF, TWP, Transitional Services, Abstinence and Healthy Marriage Education, Nutritional Education, and Food Distribution. See Chapter 1, General.

DOCUMENTATION

Refers to written statements or documentary evidence in the case record or in MAVERICS that report information given by the client or online information acquired from other sources, and support decisions made by the worker based on the information in the case record and system. See Chapter 3, Verification and Documentation, Volume X, Chapter 4, Notices/Case Documentation.

EARNED INCOME

Money obtained by an individual's own effort, such as wages, salaries, commissions, and self-employment income. See Chapter 4, Income.

EC - See Employment Coordinator.

ELDERLY INDIVIDUAL

An individual age 60 or above, including individuals who will reach age 60 before the end of the application month. See Chapter 3, Age 60 and Over (JA).

ELIGIBLE RECIPIENT

An individual qualifying for a money payment. The number of adults who may be included as eligible recipients in a TANF grant is limited to those who qualify according to the definition of who must be included in the AU, i.e., the child's non-SSI parent or parents when both are in the home or no more than one needy caretaker relative when the child does not live with a parent. See Chapter 3, Assistance Unit Concept.

ELIGIBILITY FACTOR

Any of several criteria that must be met in order to receive assistance. See Chapter 3, Summary of Eligibility Criteria, Chapter 4, Income and Chapter 5, Resources.

ELIGIBILITY WORKER (EW)

The individual who determines eligibility for TANF, TWP and SNAP. For the TWP the EW determines time limits for and exemptions from the program. See Chapter 7, Eligibility Determination Process.

EMANCIPATION

In certain situations, the court may grant an order of emancipation or relief of minority to remove the minor from parental care and to allow the minor to act on his own behalf as an adult. Also, when a child marries, he/she has in effect emancipated him/herself from the state of minority and will no longer be considered a minor child unless he is living in the home of his parent or other specified relative. See Chapter 3, Introduction.

EMERGENCY PAYEE

The individual who provides temporary care and control for the child(ren) in emergency situations may receive the TANF benefits for the child(ren). See Chapter 3, Living with a Caretaker Relative.

EMPLOYABILITY DEVELOPMENT PLAN (EDP)

A plan, developed jointly by the case manager and the TWP participant that describes the client's educational or employment goal and the means the client will use to achieve this goal. See Chapter 8, Employability Development Plan.

EMPLOYMENT COORDINATOR

A case manager assigned the specific duty of developing and implementing a program targeted at recruitment of employers for participation in the TWP for unsubsidized employment.

ENHANCED JOB READINESS

An in-depth job readiness program focusing on the TWP participant's strengths and weaknesses and reemphasizing and expanding on skills taught in the basic job readiness/life skills program. See Chapter 9, Job Readiness/Job Search.

ENUMERATION

Social Security (SS) account numbers must be disclosed or applied for on all members of the AU. The application for and disclosure of SS account numbers is a technical factor of eligibility for assistance through TANF and other assistance programs. Only those individuals for whom DHS has a SSN or for whom an application for a number has been completed are eligible to be included in the assistance budget. See Chapter 3, Enumeration.

EQUITY

The money value of a property beyond any mortgage or liabilities existing on it. The fair market value less encumbrances. Encumbrances are determined by the number of scheduled monthly payments, including interest owed, that remain in a loan agreement (this is not the same as the "payoff" amount, which indicates the amount that could currently be paid to erase the debt). See Chapter 5, ALL RESOURCES.

EV - See Exempt Volunteer.

EW - See Eligibility Worker.

EXEMPT INDIVIDUAL

An individual whose TANF participation code is IN and who is not required to participate in the TWP because that individual meets one of the exemption criteria. Exemption decisions are made by the EW and eligibility for the exemption must be verified. See Chapter 3, Exempt Individuals and Chapter 8, Exempt Individuals.

EXEMPT VOLUNTEER (EV)

A TANF recipient who is exempt from participation in the TANF Work Program, but signs an agreement and chooses to participate. See Chapter 3, Volunteers and Chapter 8, Exempt Volunteers.

FAIR HEARING

An administrative review process which provides an individual the opportunity to appeal agency action or failure to act. When an individual disagrees with the action that has been taken, the hearing gives the individual the opportunity to more fully describe his/her circumstances, to present new or additional information, and to have his/her eligibility reviewed by someone not involved in the original decision. See Chapter 13, Hearings.

FAIR MARKET VALUE

The value of an item on the open market, generally referring to resources such as vehicles or property. See Chapter 5, Resources.

FAMILY BENEFIT CAP (FC)

Policy that limits the TANF benefit to children already born or conceived at the time of initial application. Only children born into the family during the first ten (10) months of assistance will be added to the benefit unless the child meets one of the exception reasons. See Chapter 3, Family Benefit Cap.

FC- See Family Benefit Cap.

FRAUD

The participant or provider during the receipt of TANF public assistance funds or supportive services, willfully falsifies, misrepresents, or withholds information which, if known to the agency, would have resulted in the denial of public assistance or supportive services or in a reduced amount. See Chapter 14, Claims.

FULL-TIME EMPLOYMENT

Employment of 35 or more hours per week at minimum wage. MDHS will consider a minimum 32 hour per week placement if the benefits for an employee working 35 hours per week are also available to the employee working 32 hours per week and the hourly pay rate is equivalent to at least 35 hours at minimum wage. See Chapter 9, Full-Time Employment.

GED

A General Education Degree (GED) can be substituted for a high school diploma. GED is an

allowable work activity for individuals under the age of 20. For individuals over age 20, after the individual has participated the required number of hours in an approved TWP activity, additional hours may be scheduled in education leading to a high school diploma or a GED. See Chapter 9, Other Educational Activities.

GOOD CAUSE

A valid reason for a client's failure or refusal to cooperate in providing information or complying with various program requirements. Good cause determinations are made by the eligibility worker, child support enforcement officer, case manager or other individual depending on the eligibility factor involved. The stated reason for non-cooperation must be explored, verified as far as possible depending on the situation, and the decision to grant or deny good cause thoroughly documented in the case record. See Chapter 11, Good Cause.

GRANT

The TANF benefit. See Chapter 1, Temporary Assistance for Needy Families

GRANTEE RELATIVE - See Caretaker Relative.

GROSS INCOME

The total income of the TANF family from all countable sources, before any deductions are taken. See Chapter 4, Gross Income Tested.

HOME

Home is defined as the family setting maintained or in the process of being established by a parent or other adult within the specified degree of relationship who assumes responsibility for the child's welfare. Usually the child shares the same household with the relative. However, the requirement for "living with" and the definition of home are not confined to the occupation of the physical household by the child and relative provided there is a valid reason for the child or relative to be away and the absence will be temporary. See Chapter 3, Home.

HOMESTEAD

The home (house, mobile home, etc.) and surrounding property owned by the household and on which they live. Only the property adjoining the home and not separated from it by property owned by someone else is included in the homestead. This home property is excluded from

consideration as a resource in determining eligibility for assistance. See Chapter 5, Home Property.

ILLEGAL ALIEN

An individual who is not a citizen of the United States and who has not been legally admitted to this country. See Chapter 3, Reporting Illegal Aliens.

IMMUNIZATION

All TANF children under the age of 18 must have current immunizations according to the schedule recommended by the Department of Health. See Chapter 3, Immunization.

IMPROPER PAYMENT

The term "improper payment" is used when a TANF, TWP case/client or refugee individual receives assistance to which he/she was not entitled to all or part of the payment or services rendered. See Chapter 14, General.

INCAPACITY

Incapacity is defined as a physical or mental defect, illness, or impairment which prevents an individual for the most part from engaging in his usual occupation or a similar one. A permanent incapacity is one which wholly prevents a parent from providing economic support or the homemaking skills which are necessary for the care and support of his family. Temporary incapacity results from an illness or injury which will run a fairly predictable short-term course and which is not likely to leave permanent after-effects as shown by medical findings. Partial incapacity refers to an impairment which does not wholly or totally limit an individual's activities but prevents the individual for the most part from engaging in his usual occupation or a similar one. See Chapter 3, Deprivation, TANF Work Program, and Chapter 8, Intake.

INCOME

Monies received by household members. See Chapter 4, Income.

INELIGIBLE ALIEN

An individual who is not a citizen of the United States and who does not meet the criteria for

eligibility under alien policy. An ineligible alien is not necessarily an illegal alien. Ineligible aliens are disqualified though other household members, especially children who are U. S. citizens, may be eligible for assistance. See Chapter 3, Citizenship and Alienage.

INITIAL MONTH

The first month for which a family is eligible for TANF benefits. See Chapter 6, General Principles.

INTAKE

- **ELIGIBILITY -** Intake is the process of gathering data on households which have applied for assistance (TANF, SNAP) in order to determine eligibility criteria. See Chapter 7, The Application Process.

- **TWP -** Intake for participation in the TANF Work Program is the process of receiving TANF recipients referred by the EW for participation in the TANF Work Program; orienting those individuals to the program; assisting in the completion of the work program assessment; and assessing the individuals' employability and willingness to participate in the TWP. See Chapter 8, Intake.

INTERVIEW

The process that takes place between either the eligibility worker or the case manager with the individual(s) responsible for giving information and signing mandatory forms. See Chapter 7, Initial Interview.

INQUIRY

An inquiry is a request for information regarding eligibility requirements for assistance and develops into an application only when the individual signs the agency application form and discusses his own situation. See Chapter 7, The Application Process.

JAWS - See JOBS Automated Work System.

JOBS AUTOMATED WORK SYSTEM (JAWS)

"JAWS" is the computer system used to support the TANF Work Program. See Chapter 8, Intake, and the JAWS User Manual.

JOB DEVELOPMENT AND PLACEMENT

Efforts to create or discover job openings, and to market participants for job openings. See Chapter 9, TANF Work Activities.

JOB READINESS (JRA)

Structured, coordinated, planned, and supervised classes or individual exercises that help TANF participants prepare to enter the workforce. See Chapter 9, TANF Work Activities.

JOB READINESS TRAINER

A case manager assigned the specific duty to conduct JRA for TWP participants.

JOB-READY

A term used to refer to an individual who is ready to be placed in a job based on having no physical or mental skills barriers that preclude employment and possess skills necessary to complete successfully in the labor market compete successfully in the labor market.

JOB SEARCH

A work activity that provides counseling, training, information about available jobs, and instructions in job seeking skills, on a group or individual basis, to participants actively looking for employment. See Chapter 9, TANF Work Activities Defined.

JOB SKILLS TRAINING (JST)

Training, which includes vocational training, in technical job skills and equivalent knowledge and abilities in a specific occupational area. After the individual has participated the required hours in an allowable TWP activity, additional hours may be scheduled in JST in order to meet the participation rate. See Chapter 9, TANF Work Activities Defined.

JRA - See Job Readiness.

JRT - See Job Readiness Trainer.

JST - See Job Skills Training.

LEGAL PARENT

The father of a child born of a legal marriage, the father of a child born out of wedlock when the child's paternity has been legally established, the adoptive father or adoptive mother of the child who has been legally adopted through proper court action, or the mother of the child. See Chapter 3, Caretaker Relative, Legal Responsibility, Assistance Unit.

MANAGEMENT INFORMATION SYSTEMS (MIS)

The MDHS Administrative/Support Services division that is responsible for supporting the Department's programmatic and administrative data processing needs.

MAVERICS

Mississippi, Application, Verification, Eligibility, Reporting and Information Control System - The MDHS on-line computer system which supports Economic Assistance policy and procedures. See Chapter 12, Reporting and Volume X.

MDHS - See Mississippi Department of Human Services.

MILITARY LEAVE

This policy allows individuals receiving transitional transportation who are called into active military duty, to remain eligible for the service once they are discharged and return to work in accordance with the Uniform Services Employment and Re-employment Rights Act constraints. See Chapter 10, Military Leave.

MINOR PARENT

Parents under the age of 18 who are not married. The law requires that minor parents and the dependent child in their care live with the minor's parent(s) or other adult caretaker relative in order to receive assistance unless good cause is established. See Chapter 3, Assistance Unit Concept.

MIS - See Management Information Systems.

MISSISSIPPI DEBIT MASTERCARD

A debit card issued to TANF and Child Support recipients for the purpose of receiving TANF

and child support payments. Recipients can use the debit card at merchants and bank locations worldwide. See Chapter 7, Payment Process, for restrictions on the use of TANF benefits.

MISSISSIPPI DEPARTMENT OF HUMAN SERVICES (MDHS)

The agency designated by state law to administer the TANF Program which includes TWP. See Chapter 1, General.

NEEDY CARETAKER

The individual responsible for a TANF child(ren). This will always be a legal parent, if one or both legal parents are in the home and not receiving SSI. When the parent(s) of the child(ren) is not in the home, the TANF case may include one needy caretaker relative who is exercising parental control and providing care for the child or children, lives in the home with the child or children, is related within the specified degree, is financially needy, and is not a recipient of SSI or in another assistance budget. The needy caretaker is not synonymous with the caretaker relative because the caretaker relative may or may not qualify as a needy caretaker. If the non-parental caretaker relative does not meet the financial need tests, the caretaker will not be included in the assistance budget. This relative remains the caretaker (payee) and receives the TANF benefit for the assistance children. See Chapter 3, Living with Caretaker Relative.

NET INCOME

The countable income remaining to the TANF family after allowable deductions and disregards have been applied. See Chapter 4, Basic Principles.

NON-COOPERATION

When the participant fails or refuses to cooperate with a TANF eligibility factor, i.e. TWP, Child Support, etc. See Chapter 11, Conciliation.

NON-EXEMPT

A TANF recipient who is not exempt and is required to participate in the TANF Work Program as a condition of eligibility for TANF. See Chapter 8, Intake.

NO-SHOW

When a participant fails to show for an appointment or work activity assignment. See Chapter

11, Conciliation.

OCY - See Office for Children and Youth.

OCY DESIGNATED AGENT

An OCY Subgrantee who administers the CCDF Certificate Program for a specified number of counties. See Child Care Policy Manual.

OFFICE FOR CHILDREN AND YOUTH (OCY)

The MDHS office that is responsible for the provision of all child care services for TANF Work Program participants as well as Transitional Child Care services. See Chapter 10, Supportive Services.

OJT - See On-the-Job Training.

ON-THE-JOB TRAINING (OJT)

A work activity in which an individual is employed by a public or private employer, and while engaged in productive work, he/she receives training that provides the knowledge or skills essential to full and satisfactory job performance. The employer is reimbursed by the State for the cost of training and supervision given to the participant. In Mississippi, OJT is provided through the local WIA organization and/or other sources. OJT participants are considered to be in unsubsidized employment and may lose eligibility for TANF benefits. See Chapter 9, TANF Work Activities Defined.

ORIENTATION

A meeting, conducted in an individual or group setting, where potential TWP participants learn about the requirements of the TANF Work Program. See Chapter 8, Orientation.

PARTICIPANT

A participant is a TANF recipient who has completed the TWP intake process and signed an EDP indicating a willingness to participate in TWP. See Chapter 8, Intake Activities.

PARTICIPATION

The number of hours per week an individual participates in a work activity. The minimum number of hours required to count in the federal participation calculation is mandated by federal law. Currently the minimum weekly requirement is 30 hours per week for all families (20 hours if the family has a child under 6) and 35 hours per week for two-parent families. However, since federally funded child care assistance is available to TWP participants, the mandated weekly requirement for two-parent families is 55 hours per week. See Chapter 12, Federal Reports.

PARTICIPATION RATE

The percentage of TANF recipients that must satisfactorily participate in the TANF Work Program in order for MDHS to receive enhanced federal funding. See Chapter 12, Federal Reporting.

PARTICIPATION STIPEND

Reimbursement for daily expenses when a TWP participant is satisfactorily participating in one or more allowable TWP work activities other than employment. See Chapter 10, Supportive Services.

PART-TIME EMPLOYMENT

Employment of less than 35 hours per week at minimum wage. See Chapter 9, TANF Work Activities Defined.

PAYEE

This term is often used to refer to the parent/caretaker relative or the primary individual (PI) in Program will mean a full benefit sanction. A full sanction means that the TANF case will be closed. The SNAP case will also close if the individual does not meet a SNAP work exemption. The case will close for the appropriate TWP time penalty period. The family must serve at least the minimum penalty period and comply with the TANF Work Program before TANF eligibility can be reestablished. See Chapter 11, Adverse Action.

PAYMENT MONTH - See Benefit Month.

PENALTY VIOLATION

The TANF Work Program penalties for failure without good cause to participate will be the same time periods as work-related penalties in SNAP. Failure to comply with the TANF Work

Program will mean a full benefit sanction. A full sanction means that the TANF case will be closed. The SNAP case will also close if the individual does not meet a SNAP work exemption. The case will close for the appropriate TWP time penalty period. The family must serve at least the minimum penalty period and comply with the TANF Work Program before TANF eligibility can be reestablished. See Chapter 11, Adverse Action.

PERSONAL RESPONSIBILITY CONTRACT

The MDHS-EA-312 is an agreement between MDHS and the TANF recipient which outlines the responsibilities of each. Personal responsibility is required by this contract. Other responsibilities include TANF eligibility and work requirements and non-compliance penalties, specific benefit time limits, child support enforcement, family benefit cap, school attendance, immunization, change reporting, and sanctions for failure without good cause to meet TANF requirements. See Chapter 3, Personal Responsibility Contract, and Generic Forms Manual.

PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY RECONCILIATION ACT OF 1996 (PRWORA)

Public Law 104-193 was signed on August 22, 1996, and ended the federal government's 60 year commitment to a minimal safety net for poor families, and replaced it with a fixed block grant, TANF, which provides time limited assistance and requires those who receive it to work in exchange for benefits. See Chapter 1, General.

PI - See Primary Individual.

POST SECONDARY EDUCATION (PSE)

A program of post-secondary instruction that is offered by an institution of higher education. This is not an allowable TWP activity under TANF. See Chapter 9, TANF Work Activities Defined.

PRIMARY INDIVIDUAL (PI)

The individual whose name the case is in. See Chapter 3, Caretaker Relative, Marriage Disregard.

PRINCIPAL WAGE EARNER

In TANF-UP cases, the individual who earned the most money in the last two years before

application. See Chapter 3, Deprivation.

PRORATION

Payment of a partial TANF benefit in the initial month. Proration will occur only when the application is taken and payment authorized in the same calendar month. The benefit will cover the authorization date through the last day of the month. See Chapter 6, Prorating Grants for Applicants.

PROSPECTIVE BUDGETING

The computation of a family's grant for a payment month based on an estimate of income and other circumstances anticipated for the month. See Chapter 6, General Principles.

PROSPECTIVE ELIGIBILITY

The determination of initial or ongoing eligibility for assistance based on circumstances expected to exist in the payment month. A family must be prospectively eligible or no benefits may be authorized. A prospective eligibility test is required for an ongoing case whenever there is a change in the family's circumstances that might affect eligibility. See Chapter 6, General Principles.

PROTECTIVE PAYEE

The person that accepts the responsibility for receiving and using, or overseeing the use of, the TANF benefit and for promptly relaying to the caretaker relative any request for information issued to the protective payee. Protective payees are required when mismanagement of funds has been proven to be consistent and continued or the caretaker relative is incapable of adequately managing their business due to physical or mental incapacity.

See Chapter 7, Protective and Vendor Payments.

PRWORA - See Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

PRUDENT MAN

This concept refers to the element of judgment that must be exercised by all individuals in making choices, determining goals, evaluating statements by others, and the like. Discernment. When the worker finds some of the applicant's statements questionable, the worker must evaluate

the statements and ask the applicant to make a reasonable explanation of the contradictions and/or assist in seeking further information. The statements made, corroborating evidence, and other information acquired by the worker must be thoroughly documented in the case record to support the decision reached by the worker. See Chapter 7, Evaluating Information.

PSE - See Post-Secondary Education.

PUTATIVE FATHER

The term is used to describe the alleged father of a child for whom paternity has not been legally established. See Chapter 3, Child Support.

RANDOM MOMENT SAMPLE (RMS)

A time measurement instrument used to determine the activity in which eligibility workers are engaged at a randomly selected moment. Data collected from the RMS is used to allocate costs to programs administered by the Division of Economic Assistance.

REASSIGNMENT

Assignment of a case from one worker to another worker. This is done in the MAVERICS System by accessing the Case Record Control Screen (CARC). See Volume X, Case and Client Maintenance.

RECIPIENT

An individual who is receiving TANF and/or SNAP through the Department of Human Services. See Chapter 7, The Redetermination Process, Changes.

RECOUPMENT

A reduction in a client's benefit in order to repay a claim. The minimum recoupment amount will normally be 10%. MAVERICS computes the recoupment amount using the balance remaining on the claim. See Chapter 14, Procedures After Approval of Claim.

REDETERMINATION

A redetermination is a review, or reevaluation, of a recipient's situation to determine whether or not eligibility continues for TANF and whether the amount of benefit, if any, is correct. A

review of all variable eligibility factors is called a regular redetermination. A review of one or more but not all of these factors is called a special redetermination. The terms "review" and "redetermination" are interchangeable and refer to TANF cases. "Recertification" is a SNAP term and is not appropriate for TANF. The term "reevaluation" is often used when referring to the simultaneous handling of multi-program cases. See Chapter 7, The Redetermination.

REDUCTION IN WORK HOURS - See Voluntary Quit

REFERRAL

A referral is a request for information, service, or assistance on behalf of an individual or family. It may be made by an agency, an institution, or another individual and is considered an inquiry until an application is formalized. See Chapter7, The Application Process.

REINSTATEMENT

Reopening a TANF case that was recently terminated for failure to comply with certain requirements once all requirements are met within a specified time frame. A TWP participant whose case is reinstated will not be required to repeat the orientation and/or assessment process, and may be re-assigned to a component consistent with his/her latest EDP. See Chapter 8, Intake.

REQUEST FOR PROPOSAL (RFP)

A document that requests bidders to submit proposals to provide an identified product or service to the requesting organization. It also defines the terms and conditions that apply to the procurement of the product or service.

RESIDENCE

For purposes of TANF, residents of the State of Mississippi are individuals who are voluntarily living in Mississippi with the intention of making their home here. In other words, residence is based on the concept of intent to reside and a permanent mailing address is not required. See Chapter 3, Introduction, and Residence.

RFP - See Request for Proposal.

RMS - See Random Moment Sample.

ROLLOVER

Rollover occurs on the 23rd of the month unless the 23rd falls on a weekend or holiday, then rollover is the Friday before. At rollover, MAVERICS "rolls" into the next month, and the current system month changes. All cases with an authorized benefit will be copied exactly into the new month, with an authorized benefit at the same level as the previous month. This is also referred to as "payroll". See Chapter 9, TANF Work Activities Defined.

SANCTION

Termination or reduction of benefits when the individual did not have good cause for failing to participate in the TANF Work Program, Child Support Enforcement, school attendance, immunization, reporting household changes or other requirements. See Chapter 3, Child Support, School Attendance, Immunization, Chapter 7, Changes, and Chapter 9, Adverse Action.

SCHOOL ATTENDANCE POLICY

Dependent children in the TANF budget ages 6 to 18 must attend school satisfactorily until high school graduation or completion of a GED. See Chapter 3, School Attendance.

SELF-INITIATING CLIENT

A TANF recipient who enrolls in an education or training program independently, and prior to referral to the TANF Work Program. Self-initiating clients can only be enrolled in the TANF Work Program through a referral from the EW. See Chapter 9, TANF Work Activities Defined.

SELF-INITIATED TRAINING / EDUCATION (SIT)

Self-Initiated Education or Training (SIT) is training in vocational or technical fields which provide skills in a self-initiated client's current area of interest. (See Self-Initiating Client.) See Chapter 9, TANF Work Activities Defined.

SERVICE DELIVERY AREA (SDA)

The local jurisdiction that operates and administers WIA training programs at the local level.

SIT - See Self-Initiated Training / Education.

SPECIFIED DEGREE OF RELATIONSHIP

When a needy child does not live with a parent or parents, he must live in the house with another adult relative who comes within the specified degree of relationship in order to be eligible for TANF. See Chapter 3, Specified Degree of Relationship.

SSI - See Supplemental Security Income.

STANDARD FILING UNIT

Budget group/assistance unit - Includes children and legal parents or parent by admission of paternity, may include needy adult caretaker relative when parent is not in home. Stepparents are also considered in the group. See Chapter 3, Assistance Unit Concept.

STANDARD OF PROMPTNESS

State laws decree that not more than 30 days shall elapse between the date on which the application is received and the date of approval or the notice of denial. The EW must have the application ready for supervisory review and approval by the 30th day or sooner, at the supervisor's discretion. Authorization by the 30th day is mandatory. See Chapter 7, Disposition of the Application.

STATE PLAN

A written document, prepared by MDHS and approved by the U. S. Department of Health and Human Services, which describes each of the Federal/State programs administered by MDHS.

STATUTORY MARRIAGE

A marriage between individuals who were legally free to contract a marriage and one for which a license was secured and a ceremony performed by a licensed minister or designated officer for the State. The minister or officer should have completed the marriage certificate and returned it to the County Circuit Clerk for recording.

STIPEND

A regular fixed payment such as an allowance. See Chapter 9, Transportation Stipend and Participation Stipend.

SUB-GRANTEE

An entity that contracts with MDHS to provide case management or supportive services for TANF participants in a certain geographic area. See Chapter 1, Guidelines for TWP Contractors and Chapter 10, Supportive Services.

SUPPLEMENTAL SECURITY INCOME (SSI)

A federal money payment paid to an individual who is aged, blind or disabled to insure that the individual has sufficient income to meet his/her basic maintenance. An individual that receives SSI benefits is not eligible for TANF benefits according to Federal statute. However, an SSI recipient may be the grantee relative of TANF children. See Chapter 3, Assistance Unit Concept, and Incapacity, and Chapter 4, Basic Principles.

SUPPORTIVE SERVICES

Services that may be available to TANF participants to allow them to participate in the TANF Work Program, if needed. Supportive services include child care, transportation, work-related expenses, participation stipends, transitional child care and transitional transportation. See Chapter 10, Supportive Services.

TANF –See Temporary Assistance for Needy Families.

TANF-BASIC

A TANF case in which:

- there is a single parent or single caretaker relative included with the child(ren); or
- there are two parents included with the child(ren) and one or both parents is disabled or one parent receives SSI and is not included in the AU. See Chapter 8, Intake.

TANF-UNEMPLOYED PARENT (TANF-UP)

A two-parent family case for the purposes of the TANF Work Program participation requirements. A TANF-UP case is one in which both parents are able-bodied. If either parent claims an exemption because of incapacity, the case will be handled as a TANF Basic case. See Chapter 3, Unemployed Parent.

TANF UP - See TANF-Unemployed Parent.

TANF UP-FRONT DIVERSION PROGRAM (UD)

UD provides a one- time cash payment to help low-income working families affected by a disaster with emergency needs, such as child care, transportation, rent, work-related and/or relocation expenses.

TANF UP-FRONT JOB SEARCH (UJS)

The 2006 Mississippi Legislature passed legislation authorizing MDHS to implement UJS. Adult TANF applicants who do not meet an exemption from work requirements are required to participate, cooperate and comply with job search activities during the 30-day TANF application processing period.

TANF WORK PROGRAM (TWP)

This program assists TANF clients to become self-sufficient by providing needed employment related activities and supportive services. Participation in this program is mandatory for persons who receive TANF and are not exempt. TWP requirements are addressed in State Law at 43-17-55. See Chapter 1, Administration, Chapter 3, TANF Work Program, Chapter 8, Referral to TANF Work Program, Chapter 9, Work Program Components, Chapter 10, TANF Work Program Payment Process, Chapter 11, TWP Conciliation/Adverse Action, Chapter 12, Reporting and Generic Forms Manual, MDHS-EA-303, TANF-Temporary Assistance for Needy Families pamphlet.

TCC - See Transitional Child Care.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)

Replaced AFDC (Aid to Families with Dependent Children). The TANF Program is authorized by the Mississippi Code of 1973, Annotated in Title 43, Chapter 1and 17. TANF eligibility requirements are addressed in State Law at 43-17-55. There are two types of TANF cases. The TANF Basic case is any case other than TANF-UP cases, including cases with a single caretaker relative or two parents when one receives SSI or deprivation is based on incapacity. Two-parent cases are, by definition, TANF-UP cases**.** See Chapter 1, General, and Chapter 8, Intake.

TEMPORARY SEPARATION

A temporary separation of the parent or other relative and the child which does not affect eligibility, provided the absent member does not establish a permanent home elsewhere and the reasons for the separation show the temporary nature of the arrangement. Such separations are generally limited to a three-month period and must be carefully documented. The worker must also follow-up on the absence to be sure the separation ends on schedule. See Chapter 3, Living with Caretaker Relative.

TEEN PARENT

A teen parent is a single head of household, under the age of 20. A teen parent will count toward meeting the participation rate if the recipient maintains satisfactory attendance at secondary school or the equivalent; or participates in education directly related to employment for the minimum number of hours required in that fiscal year. See Chapter 9, Satisfactory Participation in the TANF Work Program.

TIME LIMITS

TANF benefits are time limited and are based on federal and state laws. TANF time limits mandate families to move as quickly as possible into work activities leading to self-sufficiency. The 60-month TANF time limit is based on federal regulations and is applicable nationwide. The 24-month TANF time limit is based on state law and is not applied nationwide. Federal regulations also limit two exemptions from work requirements to a lifetime maximum of 12-months. Refer to Chapter 3 for additional and more detailed information regarding the 60 and 24-month TANF time limits and the 12-month TANF work exemption time limits.

TOTAL EARNED INCOME DISREGARDS

- **Three-month Disregard (3D)** - Earned income will be totally disregarded for three (3) months in the TANF budget for any recipient who becomes ineligible for TANF due to earned income received from employment of at least 25 hours per week. 3D can be used more than one time as long as there has been a 12-month break in receipt of TANF benefits. Refer to Chapter 6, Budgeting Net Monthly Earned Income.

- **Six-month Disregard (6D)** - Earned income received from employment of at least 35 hours per week will be totally disregarded for up to six (6) months in the TANF budget, if the wages are from full-time employment found within 30 days after authorization for a new TANF application or reapplication; or within 30 days after the initial start date of

the job readiness activity and the income causes the family to be ineligible for TANF. 6D can only be used once. Refer to Chapter 6, Budgeting Net Monthly Earned Income.

- **Marriage Disregard** - The income and resources of a new spouse will be disregarded if the case meets specific criteria. See Chapter 3, Assistance Unit Concept.

TRANSFER

When a TANF recipient or family group moves to another county and the worker establishes that it is a permanent move, the SNAP case will be closed and the TANF case record will be physically transferred to the other county. See Chapter 7, Special Procedures and Chapter 1, TANF and TWP Information Exchange.

TRANSITIONAL CHILD CARE (TCC)

For families that lose benefit eligibility, child care services may be continued under TCC for up to 24 months. The family must apply for the assistance through the case manager. See Chapter 10, Transitional Services.

TRANSITIONAL TRANSPORTATION (TT)

Households that lose benefit eligibility may qualify for transitional transportation for up to 18 additional months. The family must apply for the assistance through the case manager. See Chapter 10, Transitional Services.

TRANSPORTATION - See TWP Transportation and Transitional Transportation.

TRANSPORTATION STIPEND (TS)

A payment for transportation, up to $300.00 per month, that is available to TWP and TT participants in areas that do not have a transit system, or if the bus pass is not a reasonable method of transportation.

TS - See Transportation Stipend.

TT - See Transitional Transportation.

TWP FILE STATUS CODE

The code that identifies the individual's eligibility, participation, and qualification for TWP services in JAWS for TWP. The TWP File Status in JAWS can be found on ICLI and MPAS and can be A-active, H-holding, I-inactive, and C-closed. See JAWS User Manual, Chapter 16, Client Information.

TWP TRANSPORTATION

Transportation assistance (bus pass or private vehicle) may be provided, if needed, to TWP participants while satisfactorily participating in an allowable work activity. See Chapter 10, Supportive Services.

TWO-PARENT FAMILY

Any TANF assistance unit that includes two parents. See Chapter 3, Assistance Unit and Chapter 8, Intake.

UD - See TANF Up-front Diversion Program.

UJS - See TANF Up-front Job Search.

UNEARNED INCOME

Money from sources other than employment that requires no effort on the part of the recipient, such as Social Security, cash gifts, etc. See Chapter 4, Unearned Income.

UNSUBSIDIZED EMPLOYMENT (UNS)

Earned income for which the state does not furnish aid or support to the employer for wages paid to the TWP participant. UNS is considered a countable work activity in the participation rate calculation. See Chapter 9, TANF Work Activities Defined**.**

VISTA - See Volunteers In Service To America.

VERIFICATION

The use of third party information or documentation to establish the accuracy of statements on the application. See Chapter 3, Age and Chapter 7, the Application Process.

VENDOR PAYMENT

A payment made in money on behalf of a household. When a person or organization outside of the household uses its own funds to make a direct payment to either the household's creditors or a person or organization providing a service to the household.

VOCATIONAL EDUCATION

An organized educational program offering a sequence of courses which are directly related to the preparation of individuals in paid or unpaid employment in current or emerging occupations that do not require an advanced degree. Such programs shall include competency-based applied learning which contributes in an individual's academic knowledge, higher-order reasoning, and problem-solving skills, work attitudes, general employability skills, and the occupational-specific skills necessary for economic independence as a productive and contributing member of society. See Chapter 9, TANF Work Activities Defined.

VOLUNTEERS IN SERVICE TO AMERICA (VISTA)

Provides full-time volunteers to nonprofit community organizations and public agencies to create and expand programs ultimately bringing individuals and communities out of poverty. Vista Volunteers are no longer exempt from TANF Work Program requirements. See Chapter 9, TANF Work Activities Defined and Chapter 4, Basic Principles-Income Totally Disregarded.

VOLUNTARY QUIT/REDUCTION IN WORK HOURS

Employment is terminated voluntarily, without good cause by the employer as a direct result of personal action(s), or work hours are voluntarily reduced to less than 20 hours per week without good cause. In an application situation, the penalty should be applied if the quit/reduction occurred within 2 full calendar months prior to the month of application, or between the date of application and certification. In an ongoing case situation the penalty should be applied if the quit/reduction occurred within 60 days from the date of discovery. See Chapter 3, Voluntary Quit Provisions and Chapter 11, Monitoring Participation.

VOLUNTEERS

Certain exempt individuals may choose to volunteer for the TANF Work Program. Only individuals eligible for exemption as caretaker of a child under 12 months of age (JJ) or as a victim of domestic abuse (JV) will be accepted as volunteers. Individuals in these categories who wish to volunteer will be coded EV, Exempt Volunteer, for referral to the TANF Work

Program. A minor dependent who needs child care assistance to remain in school may volunteer also and is coded MV, Minor Volunteer. See Chapter 8, Intake.

WELFARE REFORM - See Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

WIA - See Workforce Investment Act of 1998.

WIN JOB CENTER

A product of WIA. WIN provides workforce investment activities, through statewide and local workforce investment systems that increase the employment, retention and earnings of participants; increase occupational skill attainment by participants, and as a result, improve the quality of the workforce, reduce welfare dependency and enhance the productivity and competitiveness of the nation.

WORKFORCE INVESTMENT ACT OF 1998 (WIA)

Public Law 105-200 places a strong emphasis on partnerships and cooperation between business and government. WIA provides training for youth and unskilled adults and encourages their entry into the workforce. Funding for WIA is authorized by Congress and is distributed by the U. S. Department of Labor to the Governor. In Mississippi, WIA is administered through the Employment Training Division of the Mississippi Department of Economic and Community Development.

WORK ACTIVITIES

Specific tasks or components to which a participant is assigned to accomplish the requirements of the TANF Work Program. See Chapter 9, TANF Work Activities Defined.

WORK ELIGIBLE

This term refers to the fact that a TANF participant is ready to be placed in a work activity. See TANF Work Program and Chapter 8, Intake.

WORK RELATED EXPENSES

Case Management is allowed to pay for certain work related expense items, required by the employer, in order to help TWP participants find and keep employment. GED testing fees may also be paid with this process. See Chapter 10, Supportive Services.

WORK STUDY

Work study at an accredited college that may be either substantiated by wages or in place of tuition. Work study will be counted as unsubsidized employment if the participant receives pay. If the work study is not at least 25 hours per week, the case manager must couple it with another component in order to count it as an approved work activity. See Chapter 9, TANF Work Activities Defined.

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SUMMARY OF ELIGIBILITY CRITERIA

A child or children under 18 years of age and their parent(s) or other caretaker relative must meet all technical and financial eligibility requirements in order to qualify for a TANF benefit. These requirements are briefly discussed below and are covered in detail later in this chapter and in other chapters of this manual.

NOTE: Federal regulations prohibit the granting of TANF benefits to individuals who are inmates of public institutions.

TANF Time Limits

The 60-Month time limit is based on **federal** regulations, is applicable **nationwide,** and transfers from state to state; however, some states do not allow for the full 60 months. Months which have been used in other states count towards the 60-month time limit for Mississippi recipients. Transfers from other states who apply in Mississippi and who have received less than 60 months of assistance may be eligible for the remaining portion of the maximum limit. Individuals transferring from Mississippi to a state with a lower maximum time limit will be subject to the time limit for the new state of residence.

- **60-Month -** Beginning October 1996, any TANF case that includes an adult or teen head of household is **limited** to a lifetime maximum of sixty (60) months of financial assistance; the 60 months are cumulative but do not necessarily run consecutively. Any month for which the recipient family is receiving a TANF benefit, and/or a TANF Work Program (TWP) transportation payment, will be included in the 60-month count. The first month of the count for an applicant household is the first month of benefit eligibility. Families who have received TANF cash assistance for five (5) cumulative years (60 months total) will no longer be eligible for cash assistance.

  The 60-month counter will increment for all exempt and non-exempt families as long as the case contains an individual with a relationship code of **"PI",** "SP", or "LP" and a participation code of "IN", "DI" or "DF". If the eligible individual is receiving a TANF benefit (TANF grant or transportation stipend) for that particular month, the 60-month counter will increase by one. TANF Transitional Services (transitional transportation and transitional child care) provided to employed families are not defined as assistance and will not affect the 60-month counter.

  The 60-month time limit does not apply to child only cases. For example, if a child resides with a grantee relative (not a parent) who is **not** included in the TANF assistance unit, or if a child resides with a parent(s) who is ineligible for reasons other than TWP

sanction or other disqualification, the 60-month time limit is not applicable. Refer to Time Limits later in this chapter for additional and more detailed information.

State law reduces the 60-month federal time limit to 24 months for a TANF case that includes an adult who is not exempt from TANF work requirements and the person fails to comply with TANF work requirements. The 24-Month time limit is based on state law and is not applicable nationwide.

- **24-Month** — A TANF case in which the parent, needy caretaker relative or teen head of household is determined to be a work-eligible individual and is referred to the TANF Work Program is limited to a lifetime maximum of twenty-four (24) months of financial assistance if he/she is not assigned to an approved work activity. The 24-month State counter is cumulative, but does not have to be consecutive; however, this counter does run concurrently with the 60-month federal counter, when applicable. The 24-month count begins with the first month the TANF recipient is determined to be a work-eligible individual and referred to the TWP. However, the 24-month counter will not increment if the TWP participant is assigned to an allowable work activity.

Refer to the General section later in this chapter for additional and more detailed information regarding the 60- and 24-month TANF time limit counters.

TANF Work Exemption Time Limits

Certain TANF Work Program exemptions are limited to a lifetime maximum of 12 months, which do not have to be consecutive. Once the counter reaches 12 months, the recipient's JOBS Program Status Code must be updated, and the recipient will no longer be eligible to claim that exemption. The TWP exemptions subject to a 12-month time limit are:

- "JJ" Caretaker of a Child Under 12 Months of Age - Months used for this exemption will not count in the 24-month lifetime limit, but will count in the 60-month lifetime limit

- "JV" Victim of Domestic Violence - Months used for this exemption will not count in the 24-month lifetime limit, but will count in the 60-month lifetime limit, and must be documented by a police report.

Note: If the 12-month counter for the JJ or JV codes increases to 13, the 24-month time limit counter will increment for that month and any additional months the individual is coded JJ or JV.

Personal Responsibility Contract

Each adult in the TANF assistance unit must acknowledge the family responsibilities incumbent upon receipt of assistance by signing form **MDHS-EA-312, Personal Responsibility Contract**. Caretaker relatives who are not included in the assistance budget as needy caretakers must also sign the contract acknowledging their responsibilities for the TANF children. TANF will be denied if the responsible adult(s) fails to sign the contract.

Assistance Unit Concept

The legal parent(s), if in the home, and all technically-eligible minor children (under age 18) must be included in the TANF assistance budget. An adult caretaker other than the legal parent may be included with the children when there is no legal parent in the household, provided the adult wishes to be included and meets all eligibility criteria.

Minor Parents

Unmarried minor parents (*under age 18*) and their children are required to live with the minor's parent or other adult caretaker relative in order to receive TANF. The parent or caretaker relative will be the payee, and all normal eligibility criteria apply, including assistance unit policy. Exceptions for good cause must be approved by State Office Policy Unit prior to approval.

Not a Recipient of SSI

An individual who receives SSI is not eligible for TANF benefits. The SSI recipient will not have his/her needs, income or resources included to determine the family's eligibility for TANF. If the SSI recipient is the parent/caretaker relative, that individual is responsible for TANF eligibility requirements for school attendance, immunization, and child support, and appropriate sanctions will apply to the case for this individual's failure to meet TANF eligibility requirements including the family benefit cap.

Family Benefit Cap

The TANF benefit is limited to children existing or conceived at the time the parent or caretaker relative initially qualifies for assistance. Only children born into the family during the first 10 months of assistance or a child whose date of birth is prior to the end of the 10-month cap period for the case may be added to the benefit unless the child meets one of the exception reasons. Children in the TANF assistance unit who are excluded from the benefit because of the family benefit cap are subject to all TANF requirements for child support cooperation, school attendance and immunizations, and the parent/caretaker is subject to TANF Work Program requirements, unless exempt. Expenses incurred for the care of children subject to the family benefit cap are allowed as a dependent care deduction.

Deprivation

The child or children must be deprived of one or both parents due to:

1. Incapacity.
2. Death.
3. Continued absence. Continued absence includes, but is not limited to, absences by reason of:
    a. Divorce.
    b. Desertion or non-support of legal parent.
    c. Illegitimacy.
    d. Hospitalization for more than a temporary period.
    e. Imprisonment.
    f. Court sentence to perform unpaid public work or service while living at home.
    g. Removal of the child from the home by court order.
    h. Legal adoption by a single parent.
4. Unemployment of the principal wage earner (PWE)

Age

The age limit for dependent children to receive a TANF benefit is up to 18 years old. Benefits may continue for a child through the month in which the child becomes age 18. There is no age limit for a caretaker relative, but minors cannot be grantee relatives unless granted an exception for good cause by the State Office Policy Unit.

Residence

Applicants for TANF must express the intent to reside in Mississippi, if not already a resident, in order to receive assistance. Residents of the State are individuals who are voluntarily living in Mississippi with the intention of making their home here. Certain temporary absences from the state do not affect eligibility. The family must apply and receive assistance, if eligible, in the county of residence.

Enumeration

The parent or other caretaker relative must disclose or apply for a Social Security account number for all members of the assistance unit. Only those individuals for whom a Social Security number is provided, or for whom an application for a Social Security number has been verified, are eligible for assistance, unless there is good cause. The application must not be approved without the SSN or verification of the SSN application for the PI. Duplicate and multiple numbers must be resolved before approval.

Citizenship and Alien Status

The State requires that an individual be a citizen of the United States or a qualified alien in order to be eligible for assistance. Signing of the **MDHS-EA-900, Application for Temporary Assistance for Needy Families (TANF) and SNAP,** attests to the citizenship of all household members, and citizenship must be verified only if questionable. Alien status must always be verified.

Living with Caretaker Relative

A caretaker (grantee) relative is a parent or other adult relative who is the case head, is responsible for the care and supervision of the child(ren), and to whom the assistance payment is made. The child(ren) must live with his/her parent(s) or another adult relative who is within the specified degree of relationship. When a legal parent is in the home, no other adult may be designated as the caretaker relative for that child(ren). Exception: See *Minor Parent.*

Immunization

All TANF children under the age of 18 must have current immunizations according to the schedule recommended by the Department of Health. Good cause exceptions may be allowed if there is a legitimate and verifiable reason that the child's immunizations are not current.

School Attendance

Dependent children in the TANF budget ages 6 to 18 must attend school satisfactorily until high school graduation or completion of a GED. Failure to attend school or excessive absences, without good cause, will result in penalties being applied to both the TANF and SNAP cases.

Child Support Enforcement Requirements

Federal and State statutes provide that a parent or other relative who accepts a TANF benefit for children due to the continued absence of a parent must assign support rights to the State. Assistance will be denied to the family who fails or refuses to assign support rights to the State. The parent or caretaker relative must also assist the state by cooperating in obtaining support from the absent parent. This includes providing information to assist in locating the absent parent and establishing paternity. TANF benefits will be denied or terminated for the entire family for failure without good cause to cooperate with the Child Support Enforcement to

establish paternity (if child is born out of wedlock) or to obtain child support. The Child Support worker will determine good cause for failure to cooperate and will decide when a sanctioned individual has cooperated satisfactorily and can again be eligible for assistance.

TANF Work Program Requirements

The parent(s) or other caretaker relative who is included in the assistance unit must participate in the TANF Work Program (TWP) unless he/she meets one of the work exemption criteria. Failure without good cause to participate in TWP for reason other than substance abuse will mean a full family benefit sanction. A penalty will also be applied to the SNAP case when a TWP penalty is imposed. Adults disqualified for substance abuse will mean an individual drug sanction will be imposed on the adult. In this situation, a corresponding penalty will not be applied to the SNAP case.

Need

The children must not have sufficient income and resources to meet their needs according to agency standards. Refer to the discussion of need based on income and resources in Chapters 4 and 5.

Strikers

Striking employees must establish that the assistance unit would have been eligible for assistance prior to the strike before approval of TANF benefits. Eligibility for TANF is based on pre-strike income. See *Chapter 6, Special Budgeting Procedures - Strikers*, for a full discussion of eligibility criteria for strikers.

Not a Child of a Minor Mother in Foster Care Nor a Child Receiving Adoption Assistance

A child whose mother is a minor receiving foster care board payments (IV-E or CWS) from federal, state or local funds is not eligible for TANF benefits, nor is a child who receives adoption assistance payments from federal, state, or local funds. There is one exception, if the adoptive parents have an active TANF case for their own children and including the adoption assistance child's needs and income in the TANF budget would result in an increase of TANF benefits, the adoption assistance child can be considered eligible for TANF. Otherwise, consider the adoption assistance child as technically ineligible for the benefit program.

Reporting Changes

All TANF households are considered Simplified Reporting households. These households are only required to report the following changes:

1. When the household’s total monthly gross income, earned and unearned meets or exceeds185% of the need standard for the household size at the time of their current review period. Disqualified household members will not be included in the household size when determining if the household meets or exceeds 185% of the need standard.

This change must be reported by the 10th of the month following the month in which the change occurred. If the 10th day falls on a holiday or weekend, the client has until the close of business on the last working day prior to the 10th day to report the change.

2. When it becomes clear that a TANF child will be out of the home for more than 30 days. The parent/caretaker must report the child has left the home within 5 days.

3. When the head of household moves out of the state. This must be reported within 5 days.

NOTE: Individuals who are TANF Work Program or Transitional Transportation participants must verify time and attendance. (See Chapter 9, Work Program Components)

Substance Abuse Screening Questionnaire

Any adult, age 18 or older (including any disqualified individual), included in the assistance unit will be subject to a questionnaire to determine if a reasonable likelihood exists that the adult has a substance abuse disorder. Any adult added to the assistance unit after approval will be subject to the screening. Minor heads of household (under age 18) are excluded from drug screening and testing policy. The questionnaire is administered during the TANF application process by the Case Manager (CM) utilizing an online screening tool known as the Substance Abuse Subtle Screening Inventory (SASSI). Case managers have been trained and certified in the administration of the SASSI. The questionnaire must be completed prior to approval of a TANF application. Refusal of the adult to submit to the questionnaire will lead to denial of the TANF application. If results of the questionnaire indicate the reasonable likelihood that abuse of a controlled substance exists, the adult will be required to take a drug test. Results of the SASSI are strictly confidential and must not be shared with persons outside the agency at any point prior to or after disclosure to the TANF adult. Disclosure of the questionnaire results are to be shared with the TANF household only at the point of case approval.

A positive drug test will require the adult to satisfactorily participate in a drug treatment program in order for the adult to continue to receive TANF benefits.

EXPLANATION OF TERMS

In the discussion in this chapter, a number of items require definition as to the meaning involved as these terms are used in the material. The terms and definitions are given below.

Dependent Child

For TANF purposes, a dependent child is a child under the age of eighteen (18), regardless of marital status, who is living with a parent or other caretaker relative in a place of residence maintained as his or their own home.

Emancipation

In certain situations, the court may grant an order of emancipation or relief of minority to remove the minor from parental care and to allow the minor to act on his own behalf as an adult. Also, when a child marries, he has in effect emancipated himself from the state of minority. An emancipated minor will not be considered a minor child unless he is living in the home of his parent or other specified relative.

Home

Home is defined as the family setting maintained or in the process of being established by a parent or other adult within the specified degree of relationship who assumes responsibility for the child's welfare. Usually the child shares the same household with the relative. However, the requirement for "living with" and the definition of home are not confined to the occupation of the physical household by the child and relative provided there is a valid reason for the child or relative to be away and the absence will be temporary.

Caretaker Relative

The caretaker relative is the individual who is within the specified degree of relationship of the child(ren) and who exercises control and supervision over the assistance child(ren). The caretaker relative is always the legal parent when the legal parent is in the home. The caretaker relative is the individual who signs the required agency forms and is responsible for reporting changes in the family's situation. Except for protective payment and emergency situations, the TANF benefit is issued in the name of the caretaker relative. This individual is also referred to as the grantee relative, PI or payee of the case, and may be a needy caretaker or a non-needy caretaker. Exception: See *Minor Parent.*

Needy Caretaker

The needy caretaker is not synonymous with the caretaker relative because the caretaker relative may or may not qualify as a needy caretaker. If not a legal parent, a needy caretaker must meet the qualifications for a caretaker relative and must be financially needy in order to be included in the assistance budget. The needy caretaker may not be a recipient of SSI. If the non-parental caretaker relative does not meet the financial need tests, or does not wish to be included, the non-needy caretaker will not be included in the assistance budget and is coded OUT of the TANF case. This relative remains the caretaker (payee) and receives the TANF benefit for the assistance children. If the caretaker relative is a parent and receives SSI, the parent is coded SS for TANF participation, and should not be coded OUT of the case due to assistance unit policy.

Grantee Relative

See Caretaker Relative above.

Eligible Recipient

An eligible recipient in TANF is an individual qualifying for benefit and employment services. The number of adults who may be included as eligible recipients in a TANF budget is limited to those who qualify according to the definition of who must be included in the assistance unit (AU), i.e., the child's Non-SSI parent or parents when both are in the home or no more than one needy caretaker relative when the child does not live with a parent.

Payee

This term is often used to refer to the parent/caretaker relative or the primary individual (PI) in MAVERICS, and is the individual in whose name the benefit is paid.

Emergency Payee

The individual who provides temporary care and control for the child(ren) in emergency situations may receive the TANF benefit for the child as an emergency payee.

Protective Payee

The protective payee accepts the responsibility for receiving and using, or overseeing the use of the TANF benefit. Protective payees are required when mismanagement of funds has been proven to be consistent and continued or the caretaker relative is incapable of adequately managing their business due to physical or mental incapacity or the adult is disqualified and sanctioned due to a substance abuse disorder. Refer to the AUTHORIZATION AND PAYMENT PROCESS for further discussion and to instructions for form MDHS-EA-314, Agreement between Department of Human Services and Protective Payee.

Putative Father

The term is used to describe the alleged father of a child for whom paternity has not been legally established.

Acknowledgment of Paternity

Paternity for a child born out of wedlock may be established for the TANF Program in one of the following ways:

1. Legal court proceedings which establish the paternity of the child and result in an order of affiliation.

2. Signing of the *ASAP* form - A Simple Acknowledgment of Paternity - which is a voluntary document that carries full legal weight once signed by the father and sixty days have passed. The putative father has sixty days from the day he signs the form to rescind the paternity acknowledgment.

NOTE: If paternity for the child was established using the ASAP, process the AP REL Code in MAVERICS would be PV.

3. Marriage of the mother and the putative father provided the father acknowledges paternity privately and publicly and recognizes the child as his own by supporting him and providing him with care and supervision.

   NOTE: The above method for establishing paternity meets the requirements as defined by the TANF program and should be used for determining the legal child/father relationship for a father who is to be included in the assistance unit. For an absent parent, marriage of the mother and the putative father after the birth of the child alone does not meet the IV-D Child Support requirement for establishing legal paternity. In order for the father to be recognized as a legal parent, a *Legitimation-A* form must be processed after the marriage. Proper coding of the AP REL field in MAVS for these situations would be as follows:

   NE - Marriage of mother and putative father after birth of child

   PV - *Legitimation -A* form processed following marriage of mother and putative father after birth of child.

Once paternity for a child has been established by one of the methods described above, the putative father becomes the legal father of the child. The Child Support worker will help the parent obtain a court order for support when appropriate.

Legal Responsibility

Legal Parent

When the child is living in the home with two legal parents who under state statute are legally responsible for his support, the child is not eligible for TANF even though financial need may exist in the home unless one parent is incapacitated, sentenced by the court to work without pay or qualifies as an unemployed parent.

In determining deprivation for TANF, the term legal parent means:

1. The father of a child born of a legal marriage. See below for the definition of a legal marriage. This applies even when the mother names someone else as the biological father of her child.

2. The father of a child born out of wedlock when the child's paternity has been legally established or who has met the requirement for paternity establishment as defined by the TANF program by marriage to the child's mother after birth of the child. See Acknowledgment of Paternity, #2.

3. The adoptive father or adoptive mother of the child who has been legally adopted through proper court action.

4. The mother of the child**.** The mother is always a legal parent of a child without regard to whether or not the child was born out of wedlock or born of a legal marriage. When the father's identity has not been legally established for a child born out of wedlock, the mother is the only legal parent of the child.

Individuals Not Legally Responsible

The following individuals are not legally liable for the support of a child under state statute and cannot be considered parents in establishing deprivation or seeking support.

1. A stepfather or stepmother. As an incentive for two-parent families, when a TANF PI marries on or after October 1, 1999, the income and resources of the newly married spouse are to be disregarded for six consecutive months. If the new spouse has income which causes the household's total income to exceed 185% of the need standard established at the last case review, the marriage is a reportable change. To be considered timely the marriage would have to be reported by the 10th of the month following the month in which the change occurred. If the 10th of the following month falls on a weekend or holiday, the report must be made by the last working day prior to the 10th. When the change is reported timely, the first month of the disregard period will begin with the first month the spouse can be added to the case. If the change is not reported timely, the first month of the 6-month disregard will be the month for which the spouse could have been added, if the change was reported timely. If the marriage does not meet the criteria of a reportable change, the first month of the 6-month disregard will be the first month the spouse can be added to the case following the report of the marriage whether the change is reported prior to or at the next reevaluation.. After the 6 month period ends, the income and resources with specified disregards must be considered in the determination of need for the spouse's children who are applying for or receiving TANF.

   See *Chapter 3, Marriage Disregard*, pages 3104-3105, for procedures to disregard the spouse's income and resources. *See Chapter 6, Stepparent Situations,* for the stepparent budgeting procedures.

2. A man or woman (not a parent or spouse) who lives in the home and maintains a marital relationship with the child's parent; or who maintains a continuing relationship with the child's parent outside the home.

3. A related adult, such as grandmother, grandfather, aunt, uncle, sister, brother, etc.

4. A putative father of the child when paternity has not been established, even if he lives in the home with the assistance family. Once paternity for the child has been legally established, the putative father becomes the legal father of the child for TANF eligibility.

Legal Marriage

The two types of marital unions which are recognized in this state are statutory marriage and legal common-law marriage.

1. A marriage between individuals who were legally free to contract a marriage and one for which a license was secured and a ceremony performed by a licensed minister or designated officer for the State. The minister or officer should have completed the marriage certificate and returned it to the County Circuit Clerk for recording. Since there is legal presumption in favor of the validity of ceremonial marriage, the worker will establish a statutory ceremonial marriage as follows:

   a. Ask the parent or other relative to show the marriage license or to tell in which county the marriage was performed.

   b. Check the records in the Circuit Clerk's office for the recorded license.

   c. If the marriage record is not found or the parent or other relative cannot produce the license, assist him/her to secure a statement from the minister or officer who performed the ceremony or the witnesses who attended the ceremony.

   d. Ask the parent or other relative to describe the kind of ceremony which took place.

   A statutory ceremonial marriage when established as described above will be recognized as a legal marriage unless there is a serious reason to doubt the validity of the marriage such as:

   - A previous husband is living in the community or is in touch with the county and states that he did not obtain a divorce from the mother prior to the present marriage.

   - Some other individual is in a position to know the marital history of the mother and the prior husband and raises a question as to the legality of the current marriage.

   - Records in the agency, such as a previous application by the individual or a former husband and some other individual, contain statements which raise questions of legality.

   In these instances the county office must assist the parent in determining the status of the prior marriage in order to determine the status of the current marriage and of the children involved as to whether they are legal or illegitimate children.

2. A common-law marriage which was entered into prior to April 1, 1956, in Mississippi, is as legally binding as one established by a statutory ceremonial marriage provided:

   a. Both parties were free to contract to marry. That is, any previous marriage had been terminated by death or divorce or the parties had never been married before.

   b. The parties agreed to become husband and wife.

   c. The parties lived and cohabitated together in Mississippi as man and wife, thus openly proclaiming their marital relationship.

NOTE: Applicants who claim a common-law marriage status from another state must provide appropriate documentation in order for the legal marital status to be recognized.

Court Ordered Custody

The fact that the court has granted custody of a child to someone other than the individual or agency giving care and supervision to the child does not:

1. Terminate the parent's responsibility for support of the child. Usually the court order includes a statement regarding the parent's responsibility for support.

2. Invalidate the TANF assistance unit requirements that the legal parent in the home be included in the budget as payee with a protective payee as appropriate.

3. Make a relative other than a parent financially responsible for the child.

4. Prevent another parent or relative from receiving TANF for the child.

Joint Custody Cases

When parents are granted joint custody of a child(ren), the worker will need to evaluate each situation to determine whether or not the requirements of continued absence and living with a caretaker relative are met.

Note that the child who is spending a portion of each month with each parent will not be continuously absent from either parent and that both parents will continue to exercise parental control. Also, note that children may be eligible with one parent when parental functioning of the other parent is terminated long enough for eligibility to be determined and that children may be temporarily separated from their usual caretaker relatives. The case record must be thoroughly documented to support such determination of absence.

GENERAL

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, contains specific time limits for which any assistance unit that includes an adult may receive assistance under any State program funded under Section 403. The TANF time limit counters began with the TANF payments that were issued for the benefit month October 1996. The only TANF cases exempt from the 60-month federal time limit are cases in which the assistance unit does not include an adult in the budget. For example, if a child resides with a grantee relative (not a parent) who is **not** included in the TANF assistance unit, if a child resides with a parent(s) who is receiving SSI, or if the child resides with a parent that is an ineligible alien, the 60-month time limit is not applicable. Such cases are identified by the case type of ANI-adult not included. However, **not all TANF cases identified as ANI cases are defined as child only cases**. For example, if a child resides with a parent who is ineligible due to one of the disqualification reasons listed below, the 24-month counter and the 60-month counter are applicable even though the case type is ANI.

A change in federal regulations mandates that certain disqualified adults are required to participate in allowable work activities. Beginning with October 2007 benefit payments, these adults are no longer exempt from TANF time limits. Below is list of disqualified adults that will be referred to the TANF Work Program:

- drug felons
- fleeing felons
- individuals disqualified for fraud
- individuals sanctioned for enumeration, school attendance or untimely reporting of a child leaving the home

For additional information, refer to Chapter 6, Special Budgeting Procedures for Disqualified Individuals.

60 and 24-MONTH MAXIMUMS

The TANF 24- and 60-month time limits were explained in detail earlier in this chapter, under TANF Time Limits.

TWP 12-month exemption time limits will have a negative effect on the family's 24-month time limit if the TWP exemption exceeds the 12-month lifetime maximum. Certain TWP exemptions are limited to a lifetime maximum of 12 months. Months used while claiming a TWP exemption as a caretaker of a child younger than 12 months (JJ), or a victim of domestic violence (JV) do

not count in the TANF 24-month time limit, **unless** the TWP exemption exceeds the 12-month maximum. If a TWP 12-month time limit counter exceeds 12 months, the TANF 24-month time limit counter will begin at the 13th month and continue thereafter.

Refer to TWP Exemption Time Limits, earlier in this chapter, and the exemption chart in Chapter 8, Determining Eligibility for Participation in TWP, for additional and more detailed information.

TANF HIGH COUNTERS REPORT

The TANF High Counters Report (JC250A) is a monthly MAVERICS report that is generated the first of each month for the previous month. The report tracks high counter information for the TANF 24 and 60-month time limits, and the TWP 12-month exemption time limits for JJ and JV.

Any TANF case that is subject to the TANF time limits and/or the TWP exemption time limits will initially display on the report when one of the counters reaches high counter status, and will remain on the report until the TANF case closes. TANF cases will display on the report according to the following schedule:

- 24-month time limit at 19 months;
- 60-month time limit at 40 months;
- JJ/12-month exemption time limit at 9 months; and
- JV/12-month exemption time limit at 9 months.

The counters for the 60-month time limit and the two TWP 12-month exemption time limits (JJ and JV) run one (1) month behind the current calendar month. The counter for the 24-month time limit runs two (2) months behind the current calendar month.

Workers must regularly (no less than monthly) review the TANF High Counters Report (Report Name JC250A) and schedule **face-to-face** interviews for all new adults appearing on the report in accordance with the policy outlined below. County and regional staff are responsible for ensuring that every effort is being made to move families to self-sufficiency.

TANF COUNTER CASE REVIEW REQUIREMENTS

When a TANF case reaches high counter status for the 24 and 60-month time limits, a **face-to-face** interview must be completed for that case. The monthly TANF High Counters Report will be used by caseworkers to help manage their high counter cases and complete required case

actions timely. Workers must regularly review the report and schedule **face-to-face** interviews as quickly as possible for all new adults appearing on the report under the 60-month or the 24- month column. County and regional staff are responsible for ensuring that every effort is being made to move families to self-sufficiency. The following MAVERICS notices will be used to schedule the initial face-to-face interview.

- 24-Month Time Limit – A104, TANF 24-Month Counter Information notice
- 60-Month Time Limit – A102, TANF 60-Month Counter Information notice

The MDHS-EA-313, TANF High Counter Action Plan, will be completed during the initial face-to-face interview for the 24 or 60-month counter, and thereafter on an as needed basis. The MDHS-EA-313A, TANF High Counter Action Plan Follow-Up Case Review, will be completed at each subsequent face-to-face interview. Refer to the High Counter Action Plan section later in this chapter for additional and more detailed information regarding the 24 and 60-month high counter case reviews. **The CADM screen in MAVERICS must be documented each month for all cases displaying on the TANF High Counters Report.** (The CADM subject line should be used to identify the TANF counter(s) reviewed along with the counter status, e.g., 60-Month Counter Review at 48 Months; 24-Month Counter Review at 19 Months, etc.)

24-Month

The TANF 60-month time limit for a nonexempt family will be reduced to a 24-month lifetime maximum, unless the adult recipient is assigned to an approved work activity, or qualifies for a TANF work exemption. The TWP case management staff is responsible for ensuring nonexempt adults are engaged in allowable work activities as soon as possible upon referral to the TANF Work Program. Work activities should be meaningful and designed to move the family toward self-sufficiency within the time constraints imposed by federal regulations. A nonexempt adult who complies with TANF work requirements may receive TANF for his/her family for the full 60-month time limit, if all other TANF eligibility criteria are met. If a nonexempt family receives assistance for any month where the adult is not assigned to a work activity, the 24-month counter will increment by one.

The caseworker will send MAVERICS notice A104, TANF 24-Month Counter Information, when a nonexempt family's 24-month time limit is equal to 19 months. The A104 notifies the recipient of how many months of the family's 24 and 60-month time limits have been used and that the TANF case will be closing with an effective month, unless the adult is employed and/or participating in an allowable work activity or qualifies for a TANF work exemption. The A104 also schedules the recipient for a face-to-face interview appointment to discuss the TANF case status.

The purpose of this interview at 19 months is to develop a plan of action (MDHS-EA-313) to engage the nonexempt adult in an approved work activity as quickly as possible. The family's 24-month time limit will **not** increment once the adult is assigned to a work activity. If the individual fails to keep his/her appointment or contact the worker, the worker will send MAVERICS notice A405, TANF Closure, Unable to Locate, and the TANF case will be allowed to close. A family that includes a nonexempt adult that is not assigned to an allowable work activity will be ineligible for TANF after the family's 24-month time limit is used up. In this instance, the worker will mail MAVERICS notice A453, TANF Closure – 24 Month Time Limit, to notify the family and close the TANF case effective the following month.

A desk review will be completed each month following the face-to-face interview for all 24-month high counter cases. **The worker will document the CADM screen in MAVERICS for each monthly desk review**. A follow-up face-to-face interview must be scheduled any time a nonexempt adult has been placed in holding for more than 30 days, or the TWP program status changes from nonexempt to exempt. The MDHS-EA-313A will be completed to document the face-to-face follow-up case review and the CADM screen will be documented accordingly.

The supervisor or county director is required to implement a TANF high counter case review process to:

- monitor the worker's timeliness and ensure TANF high counter case reviews (face-to-face and monthly desk reviews) are completed in accordance with policy requirements;
- review the worker's case review documentation on the CADM screen; and
- document his/her approval, request for additional information, or corrective action(s) required on the CADM screen.

Caseworkers, supervisors and county directors must choose the most appropriate language from the list below for the CADM Subject Line when entering TANF high counter case review documentation.

1. 24-Month Counter Interview at "*" Months (Example * = 19)
2. 24-Month Counter Desk Review at "*" Months (Example * = 20)
3. 24-Month Counter Supervisory Review at "*" Months
4. 60-Month Counter Interview at "*" Months (Example * = 40)
5. 60-Month Counter Follow-Up Review at "*" Months (Example * = 43)
6. 60-Month Counter Supervisory Review at "*" Months

If the adult does **not** qualify for a TWP exemption, the worker must discuss in detail, and document the following.

1. Explain the 24-month time limit and the potential impact on the family's 60-month time limit and eligibility for continued TANF assistance.

2. Explain the purpose and requirements of the TANF Work Program.

3. Discuss the allowable work activities and participation requirements.

4. Discuss the potential employment barriers which could include child care, transportation, health issues of the participant, participant's child(ren) or other household members, school attendance, etc. Discuss short and long term resolutions.

5. Discuss the participant's employability status. This should include education, training, skills, work experience, and employment history (tenure and reason for leaving).

6. Discuss opportunities for realistic job placement. This should include job opportunities identified by the caseworker and by the participant.

7. Work with the individual to develop a realistic Employment Development Plan (EDP) designed to move the family forward to attain the greatest level of self-sufficiency possible within the TANF time constraints. The EDP should be developed jointly by the caseworker and the participant.

8. Discuss the availability of TANF (TWP and TCC) supportive services, in order to process applications and complete system functions timely.

9. Discuss the criteria (TWP holding status greater than 30 days or jobs program status change) that will require a follow-up face-to-face high counter interview to be completed.

If the individual qualifies for an exemption, the worker must discuss in detail, and document the following.

1. Explain the 24 and 60-month time limits and the potential impact on the individual's family, as well as exemption status to include exemptions requested/granted, reasons and duration. In the case of long-term medical exemptions, the following questions should be asked: "Is the individual following the doctor's orders?" "Has the individual applied for SSI, and if so, how frequently, when, and what was the result?"

2. Discuss the potential employment barriers which could include child care, transportation, health issues of the participant, participant's child(ren) or other household members, school attendance, etc. Discuss short and long term resolutions.

3. Discuss the participant's employability status. This should include education, training, skills, work experience, and employment history (tenure and reason for leaving).

4. Discuss opportunities for realistic job placement. This should include job opportunities identified by the caseworker and by the participant.

5. Find out the individual's plan of action for supporting his/her family when the TANF case closes. (This is to be submitted by the participant.)

60-Month

The case worker will send the A102, TANF 60-Month Counter Information, notice to schedule a face-to-face interview when the family has received assistance for 40 months. The A102 also informs the recipient of how many months of the family's 60-month time limit have been used. The purpose of the face-to-face interview at 40 months is to develop an action plan (MDHS-EA313) for moving the family forward to self-sufficiency, and/or extending the 60-month time limit.

Following the initial face-to-face high counter interview, the caseworker will use the A102 to schedule a follow-up high counter face-to-face interview every ninety (90) days. The MDHSEA-313A will be completed at each follow-up interview to document the case review.

If the individual meets an exemption, the worker must discuss in detail, and document the following.

1. Explain the 60-month time limit and the potential impact on the individual's family, as well as exemption status to include exemptions requested/granted, reasons and duration. In the case of long-term medical exemptions, the following questions should be asked: "Is the individual following the doctor's orders?" "Has the individual applied for SSI, and if so, how frequently, when, and what was the result?"

2. Discuss the potential employment barriers which could include child care, transportation, health issues of the participant, participant's child(ren) or other household members, school attendance, etc. Discuss short and long term resolutions.

3. Discuss the participant's employability status. This should include education, training, skills, work experience, and employment history (tenure and reason for leaving).

4. Discuss opportunities for realistic job placement. This should include job opportunities identified by the caseworker and by the participant.

5. Find out the individual's plan of action for supporting his/her family when the TANF case closes. (This is to be submitted by the participant.)

If the individual **does not** meet a TWP work exemption or a hardship reason, the worker must discuss in detail, and document the following.

1. Explain the 24 and 60-month time limit and the potential impact on the individual's family.

2. Discuss the family's reason(s) for remaining on TANF.

3. Discuss the potential employment barriers which could include child care, transportation, health issues of the participant, participant's children and other household members, school attendance, etc. Discuss short and long term resolutions.

4. Discuss the participant's employability status. This should include education, training, skills, work experience, and employment history (tenure and reason for leaving).

5. Discuss opportunities for realistic job placement. This should include job opportunities identified by the caseworker and by the participant.

6. Explain the purpose of the TANF Work Program, and discuss the allowable work activities and participation requirements.

7. Work with the individual to develop and implement a plan of action designed to move the family forward to attain the greatest level of self-sufficiency possible within the months remaining on his/her 60-month time limit or documented extension. The action plan should be developed jointly by the caseworker and the participant.

8. Find out the individual's plan of action for supporting his/her family when the TANF case closes. (This is to be submitted by the participant.)

9. Review the individual's progress monthly to ensure timely completion of actions designed to reduce employment barriers and successful completion of the action plan before the TANF case closes.

If the individual is employed, but the earned income is not enough to cause the TANF case to close, the worker must evaluate the job placement, discuss in detail, and document the following.

1. Discuss the possibility of increased work hours.

2. Discuss promotional opportunities available with the current employer. This should include additional skills, education, and/or training required for job advancement.

3. Discuss other full or part-time employment opportunities available within a 20 mile radius.

No Show for 60-Month High Counter Appointment

If the individual fails to keep the face-to-face appointment the worker must determine the appropriate action(s) to be taken based on whether the adult is exempt from or required to comply with TANF work requirements. Appropriate case actions are outlined below:

- **Non-Exempt** – A face-to-face interview is required to establish the initial TANF high counter case review at 40 months. TWP adverse action policy will be applied if the adult fails to keep the face-to-face appointment scheduled via the A102. In this situation, the worker will schedule a TWP conciliation appointment and apply the appropriate TWP penalty if the adult is a "no show".

  Ongoing case reviews are required every 90 days; however, it may not be necessary to schedule a face-to-face interview for each subsequent 90-day case review for non-exempt adults who are assigned to an allowable work activity and participating satisfactorily. If doing so will cause a disruption in the adult's TWP participation, the worker should complete a desk review, document the case record, and handle the face-to-face interview at the next regular scheduled appointment. The worker must use good judgement to discern when a face-to-face interview is required.

  Exempt – Adverse action does not apply to exempt adults. If an exempt adult fails to keep the face-to-face appointment scheduled via the A102, the worker will document the case record accordingly and complete the MDHS-EA-313/313A at the next regular scheduled appointment. In this situation, the worker must verify that the TWP program status code is correct and appropriate, up-to-date documentation has been scanned to the recipient's case record.

HIGH COUNTER ACTION PLAN

County staff and regional staff are responsible and must strive to help TANF families gain the greatest level of self-sufficiency possible within the confines of TANF time limits. **An action plan must be developed for each individual listed on the TANF High Counters Report for the 60- and 24-month time limits.** The caseworker and the individual will work jointly to develop an action plan for the family. Two forms have been designed to facilitate this process, and to ensure the individual's plan is reviewed and approved by regional staff.

- The High Counter Action Plan, MDHS-EA-313, will be used by county staff to develop an action plan to help the family move toward self-sufficiency, and to identify barriers and possible resolutions. The MDHS-EA-313 requires the regional director's signature and his/her approval or denial of the action plan and comments. At the discretion of the regional director, screen prints from MAVERICS and/or JAWS may be substituted for duplicated information on MDHS-EA-313.

- The High Counter Action Plan Follow-up Case Review, MDHS-EA-313A, will be completed at each follow-up face-to-face review for all 24 and 60-month high counter cases. The form is used to document progress toward the goals established by the MDHS-EA-313 and the continued plan of action. A MDHS-EA-313A must be completed at each 90-day case review following the date of the original MDHS-EA-313 interview for 60-month high counter cases. For 24-month high counter cases, a MDHS-EA-313A must be completed at each face-to-face interview that is scheduled following the date of the original MDHS-EA-313 interview.

The county staff is responsible for initiating, routing and maintaining all forms and documentation pertaining to the individual's high counter case review and follow-up reviews. The review process will be handled electronically by scanning and emailing all documents to the county and regional director for review and handling. If the regional director does not approve the individual's plan, the county must address any outstanding issues, provide additional information and reroute the file for further action. Upon completion of full review process, the worker and/or supervisor is responsible for scanning all review documents to the TANF Permanent folder in the individual's electronic case record.

A brief summary of the case review and statement regarding the family's potential eligibility for a 60-month time limit extension should be included on the MDHS-EA-313A. Refer to 60-Month Time Limit Extensions later in this chapter for additional and more detailed information. The county director or his/her designee will use the MDHS-EA-313A to review high counter cases, address concerns and assess the action(s) taken by the worker and client. The regional director will use the MDHS-EA-313A to review high counter cases, address concerns and assess the actions taken by county staff.

The MDHS-EA-313A must be completed during each face-to-face review process, but it is not necessary to complete a new MDHS-EA-313. **It is recommended that workers update the initial**

MDHS-EA-313 by dating new entries. A new MDHS-EA-313 may be completed at the time of the 90-day review, as deemed necessary by the worker.

Page two of MDHS-EA-313A must be completed if three (3) months or less remain in the family's 60-month time limit, and if one (1) month remains in the family's 24-month time limit. A family that qualifies for an allowable work exemption (JB, JC or JF) and meets specific hardship criteria may be granted an extension beyond the 60-month lifetime maximum in three-month increments. The worker must test the family's eligibility for an extension and, if eligible, recommend whether an extension should be granted. The county director must agree or disagree with the worker's recommendation and route the high counter file to the regional director for review and approval or denial. Refer to 60-Month Time Limit Extensions later in this chapter for additional and more detailed information.

Routing and Reviewing High Counter Action Plans

A systematic process has been established for routing, reviewing and handling TANF high counter cases. The following procedures must be followed statewide:

1. The MDHS-EA-313, MDHS-EA-313A and any other pertinent documentation pertaining to the high counter review will be scanned and routed electronically (email). The supervisor for the worker handling the TANF High Counter review is responsible for scanning the completed form(s) and any other documentation to the individual's case record.

2. Form MDHS-EA-313 must be completed as part of the initial face-to-face interview, and may be updated at future interviews and dated accordingly. A new MDHS-EA-313 will be completed, as needed, and numbered accordingly. If the recipient fails to keep his/her interview appointment, the MDHS-EA-313 and the CADM screen will be documented accordingly, and appropriate case action(s) taken based on the policy and procedures established for 24 and 60-month TANF time limit counters.

3. The MDHS-EA-313 and MDHS-EA-313A, if applicable, along with appropriate documentation will be scanned and routed electronically (email), and handled according to the procedures outlined in this chapter. Each reviewer must have sufficient information to adequately review the case and ensure proper handling.

4. When the TANF High Counter case review is fully completed, the worker's supervisor is responsible for scanning all documents associated with the review to the recipient's case record.

The county director must establish a tickler system to ensure that each case displaying on the TANF High Counters Report with 19 or more months in the 24-month column and/or 40 or more months in the 60-month column are handled timely. This tickler system must be maintained on an ongoing basis to ensure the follow-up MDHS-EA-313A is prepared and reviewed by the county and regional director within the timeframes outlined in policy.

The MDHS-EA-313 must be completed as part of the initial face-to-face interview process and thereafter as needed. TANF high counter cases must be reviewed based on each family's action plan and individual case circumstances in accordance with policy. It is not necessary to complete 60-month case reviews every 90 days when the PI is age 60 and over (JA-TWP/Jobs status code) or is a recipient of SSI (SS-participation code.) If the individual's SSI benefits are terminated and he/she is included in the budget (IN-participation code), form MDHS-EA-313A must be completed at that time. Case changes that occur between review dates must be clearly documented and handled according to current policy. These actions must be reviewed as part of the high counter case review process. During the interview/review process, the worker must explain that the family will not be eligible for transitional services (child care or transportation) if the TANF case closes for any reason other than increased earned income or loss of an earned income disregard. Special effort should be made to assist individuals who are employed, but not earning enough to transition off TANF (increasing work hours and/or finding a better job).

HANDLING 24-MONTH CASE REVIEWS

Current adverse action policy applies to a nonexempt TWP participant who fails to keep his/her face-to-face interview at 19 months. A systematic process will be used statewide for reviewing and handling 24-month time limit case reviews and TANF case closures.

1. MAVERICS notice A104, TANF 24-Month Counter Information, will be sent to schedule a face-to-face interview when the 24-month counter is equal to **19** months. If a nonexempt adult fails to keep the face-to-face interview appointment or contact the worker, the worker will determine the appropriate case action on a case-by-case basis.

- If the nonexempt adult is assigned to a TWP work activity, the worker will document the case record and proceed with the conciliation process.

- If the person keeps the conciliation appointment, the MDHS-EA-313 will be completed, and the participant will be assigned to a work activity, if required.

- If the person fails to keep the conciliation appointment, the appropriate timed penalty will be applied and the TANF case closed. If the person reapplies and is approved for TANF, the MDHS-EA-313 will be completed at that time.

- If the nonexempt adult is not assigned to a TWP work activity, the worker must send MAVERICS notice A405, TANF Closure – Unable to Locate, and allow the TANF case to close for the next available month. If the individual reapplies for TANF, the MDHS-EA-313 must be completed at TANF approval.

2. Form MDHS-EA-313 must be completed as part of the initial 24-month case review (at 19 months) to document the reviewer's case findings and recommended case action, i.e., TANF case closure after the family has received assistance for 24 months,

or whether the nonexempt adult was not properly notified about the status of the 24-month counter (A104 not sent) and will be given the opportunity to comply with TANF work requirements. This option is only available if the family's 24-month counter is greater than 24 months. In this situation the nonexempt adult must agree to comply with TANF work requirements and be assigned to an allowable work activity to continue receiving TANF benefits for the family. The worker must use the CADM screen in MAVERICS to document the case record accordingly. If the nonexempt adult agrees to participate, but later fails to comply, the worker will send MAVERICS notice A453, TANF Closure – 24-Month Time Limit, to close the TANF case. (Do not schedule a conciliation appointment.)

3. The MDHS-EA-313A will be completed when the family has received TANF cash assistance for 23 months (when counter displays 21 months) to document the appropriate case action(s) for handling the case in accordance with the 24-Month Time Limit policy.

If case closure is the appropriate action, the A453, TANF Closure – 24-Month Time Limit, notice must be sent to close the TANF case affective for the month following the 24th month. The A453 notifies the recipient that the TANF case will close for the month specified because the family has received benefits for 24 months and the adult(s) is not participating in an allowable work activity. Refer to 24-Month Close Out for Cash Assistance later in this chapter for additional and more detailed information.

4. The MDHS-EA-313 and MDHS-EA-313A forms, along with supporting documentation, must be scanned and routed electronically (email), and handled according to the procedures outlined in this chapter.

5. Each reviewer must have sufficient information to adequately review the case and ensure proper handling. (The CADM screen in MAVERICS must be thoroughly documented to support discussions, decisions, and case actions.)

6. When the case review is fully completed, the worker's **supervisor** is responsible for scanning all documents associated with the review to the recipient's TANF High Counter folder, and reviewing the case to ensure appropriate case action(s) are completed according to timeliness standards.

24-MONTH CLOSE OUT FOR CASH ASSISTANCE

The caseworker should not begin the conciliation process for a nonexempt recipient whose family has received TANF benefits for 24 months or more and the individual fails to comply with TANF work requirements. The worker must send notice A453, TANF Closure - 24-Month Time Limit, and allow the TANF case to close. Workers should be aware that the TANF time limit counters displaying on the MAVERICS CAP2 screen are not current. Refer to the TANF High Counters Report earlier in this chapter for additional and more detailed information.

Revised 04-01-15

Prior to closing a TANF case when the family receives assistance for 24 months, the case must be reviewed at 23 months by the county and regional director via the High Counter Action Plan process utilizing the MDHS-EA-313 and MDHS-EA-313A forms. The MDHS-EA-313 must be completed as part of the face-to-face interview when the counter displays 19 months (21 actual months). The MDHS-EA-313A must be completed as part of a desk review at 21 months (23 actual months). This will ensure proper handling and allow the case to be removed from the tickler, if necessary. If the family does not qualify for a work exemption, the worker will:

1. send the A453, TANF Closure - 24-Month Time Limit, notice to close the TANF case effective for the month following the 24th month; or

2. assign the nonexempt adult to an allowable work activity to stop the 24-month counter.

   - If noncompliance with the TWP occurs, the worker must send the A453 notice and allow the TANF case to close for the next available month. (Do not conciliate the client if the 24-month counter is equal to or greater than 23 months.)

SPECIAL HANDLING AT 57 MONTHS - EXEMPT INDIVIDUALS

TANF recipients who are exempt from work requirements will be given the opportunity to take advantage of services available through the TANF Work Program (TWP) or the Office of Vocational Rehabilitation (OVR) during the last three months of TANF eligibility. A recipient who qualifies for the JB, JC or JF exemption will not be referred to the TANF Work Program if the household's income is less than the Basic 100% Requirements for the TANF Program. These individuals will continue to receive TANF under the 60-month time limit extension provision as long as they qualify for an allowable work exemption (JB, JC or JF) and their household gross income remains less than the Basic 100% Requirements for the TANF Program.

A face-to-face high counter case review must be scheduled during the 57th month (56 months on the high counter report) for TANF recipients who are exempt from work requirements to discuss the eligibility criteria for receiving a 60-month time limit extension and referral to the TWP or OVR. Based on the outcome of the face-to-face interview and the decision made by the TANF family, the worker will take the appropriate action(s) to handle the case.

1. An individual who qualifies for the JB, JC or JF exemption status may be eligible for a 60-month time limit extension after the family has received TANF cash assistance for 60 months. Refer to 60-Month Time Limit Extensions later in this chapter for additional and more detailed information.

2. The exempt individual may choose to participate in the TWP during the last three months of TANF eligibility. The worker will thoroughly explain the purpose of the TANF Work Program, supportive services (TWP and transitional), along with the eligibility criteria for receiving each service. At the completion of the face-to-face interview, the worker will change the TWP/Jobs status code to EV-exempt volunteer and refer the case to case management (JAWS). The case manager will work intensively with the family to develop and implement a plan of action that will allow participation in the TWP.

   When the family has received TANF cash assistance for 60 months, the TANF case will be closed for one of the following reasons:

   A. **Satisfactory Participation in TWP - Job Found** - If the individual finds employment and the new income will cause the family to be ineligible for TANF the worker must send MAVERICS notice A411, TANF Closure-Earned Income, to inform the family that the TANF case will be closed because of earned income. A TANF family that has received TANF benefits for 60 months or more is not eligible for any of the earned income disregards. At the time the A411 notice is sent, the worker must send the following MAVERICS notices to inform the family about TANF transitional services and give the individual the opportunity to apply for TANF transitional services.

      - A807, Appointment for Transitional Services;
      - A802, TANF Transitional Child Care; and
      - A803, TANF Transitional Transportation.

   B. **Satisfactory Participation in TWP - No Job Found -** If the individual has not found employment at the time the 60th month is paid, the worker must send MAVERICS notice A454, TANF Closure – 60-Month Time Limit, to inform the family that the TANF case will be closed because the family has received TANF cash assistance for 60 months.

C. No Show or Unsatisfactory Participation in TWP - Adverse action policy and procedures will be applied to the case if an exempt volunteer fails to keep the TWP intake appointment or comply with work requirements during the 58th month. If noncompliance occurs after the family has received TANF cash assistance for 59 months, the worker will not begin the conciliation process. The worker must send the A454, TANF Closure – 60-Month Time Limit, notice to inform the family that the TANF case will be closed because the family has received TANF cash assistance for 60 months.

3. An exempt individual who qualifies for the JB exemption status and the household's income exceeds the Basic 100% Requirements for the TANF Program, may choose to seek Vocational Rehabilitation Services during the last three months of TANF eligibility. At the completion of the face-to-face interview, the worker must change the TWP/Jobs status code to EV-exempt volunteer and refer the recipient to case management. The case manager will refer the individual to the local Department of Vocational Rehabilitation for assessment and services. The recipient will continue to receive TANF cash assistance up to 60 months while working with Vocational Rehabilitation.

A. When the family has received TANF cash assistance for 60 months, the worker must send the A454, TANF Closure – 60-Month Time Limit, notice to inform the family that the TANF case will be closed because the family has received TANF cash assistance for 60 months.

60-MONTH CLOSE OUT FOR CASH ASSISTANCE

All TANF cases must be closed when the family has received TANF cash assistance for 60 months, unless the family is approved for a 60-month time limit extension. Refer to the 60-Month Time Limit Extensions section later in this chapter for additional and more detailed information. A TANF case in which the last child in the case is a family capped child, must be closed regardless of the number of months remaining in the 60-month time limit counter. Workers should not begin the conciliation process for a nonexempt TWP participant who has received TANF cash assistance for 59 months. (The 60-month counter will display 58 months on the TANF High Counters Report.) The A454, TANF Closure – 60-Month Time Limit, notice must be sent to close a TANF case based on the 60-month lifetime time limit. Workers should be aware that the TANF time limit counters displaying in MAVERICS are not current. Refer to TANF High Counters Report earlier in this chapter and MAVERICS Time Limit Counters later in this chapter for additional and more detailed information.

Prior to closing a TANF 60-month high counter case for any reason, the case must be reviewed, via the MDHS-EA-313A process, by the County and Regional director. This will ensure proper handling and allow the case to be removed from the tickler. The worker must use the A454, TANF Closure - 60-Month Time Limit, notice to close the TANF case.

NOTE: An individual receiving the 3-month, 6-month or marriage disregard at the time the 60th month is paid, will not be eligible for any remaining months of the disregard. An individual who finds employment in the 60th month will not be eligible for any of the earned income disregards.

60-MONTH TIME LIMIT EXTENSIONS

Federal regulations allow states to exempt up to 20% of the State's countable cases from the TANF 60-month time limit. This exemption is based on certain hardship factors. To ensure the State does not exceed the 20% exemption cap, each county is limited to 20% of the county's countable cases.

Under this 20% exemption provision, a family that reaches the 60-month time limit and meets certain hardship criteria may qualify for a TANF 60-month time limit extension in increments of three months. TANF high counter case reviews will continue for TANF cases that include an adult and a face-to-face interview must be completed every 90 days to determine the family's ongoing eligibility for an extension. The A455, TANF 60-Month Time Limit Extension, must be sent each time an extension is allowed. The family will **not** be considered for a 60-month time limit extension when the only child remaining in the TANF case is a family cap child and is ineligible for monthly TANF benefits.

Policy for determining whether the family is eligible for an extension on the 60-month time limit is based on specific criteria for the following two categories.

Category One

TANF recipients whose TWP/JOBS Program Status code is **JA, JD, JV, JL, JK, JJ, EV, CF, DV, VR, NE, WP, WH, WL** or **SM** will be handled according to the following instructions.

1. If the TANF case includes a needy caretaker (not a parent) who is age 60 or older **(JA**), take the appropriate action in the 60th month to remove the needy caretaker adult from the grant to create a child only case, or close the TANF case. The appropriate case action to be taken will be based on the decision of the household after a face-to-face interview. The CADM screen in MAVERICS must be used to document the discussion and the family's decision.

The case will continue to display on the TANF High Counters Report after the adult needy caretaker is removed because of the high counter status of the case. Such cases are not included in the 20% exemption and the 60-month counter will no longer be incremented.

NOTE: The household type will also be "ANI" for a TANF case that includes a disqualified adult. In this situation, the case is not a "true" ANI case. Such cases are subject to the TANF 60-month time limit and are included in the 20% exemption.

2. If the TANF case includes an adult in treatment for a substance abuse disorder (**JD**), an adult who is a victim of domestic violence (**JV**), an adult reporting a temporary illness (**JL**), an adult in the third trimester of pregnancy with medical complications (**JK**), an adult caring for a child under age one (**JJ**), an exempt adult who volunteered for the TWP **(EV)**, or a nonexempt adult who is required to participate in the TWP (**CF**, **DV, VR, NE, WP, WH, WL,** or **SM**), the TANF case will be closed in the 60th month. A face-to-face interview is required to ensure appropriate explanations are provided and policy is applied correctly. The A454, TANF Closure – 60-Month Time Limit, notice must be sent to close the case.

Category Two

TANF recipients whose TWP/JOBS Program Status code is **JB** (incapacitated adult), **JC** (parent caring for an incapacitated child) or **JF** (parent caring for an incapacitated adult) will be handled through the MDHS-EA-313 process according to the following instructions.

- If the household's gross income meets or exceeds the Basic 100% Requirement for the TANF Program the TANF case will be closed in the 60th month. The family will be given the opportunity to take advantage of services available through the TANF Work Program (TWP) or the Office of Vocational Rehabilitation (OVR) during the last three months of TANF eligibility. Refer to "Special Handling at 57 Months - Exempt Individuals" earlier in this chapter for additional and more detailed information. The A454, TANF Closure – 60-Month Time Limit, notice must be sent to close the case.

- If the household's gross income does not exceed the Basic 100% Requirement for the TANF Program, a TANF 60-month time limit extension may be allowed in three-month increments. The family must continue to qualify for one of the allowable work exemptions (**JB, JC** or **JF**) while receiving an extension. The family's circumstances will continue to be monitored by the MDHS-EA-313/313A process. If the 60-month time limit extension is approved, the worker must send the A455, TANF 60-Month Time Limit Extension, to notify the family of the extension along with the next review month.

A face-to-face review will be scheduled every 90 days to discuss the family's current circumstances and the status of the 60-month time limit counter, to review the family's ongoing eligibility for a work exemption (JB, JC or JF) and the 60-month time limit extension, and imminent TANF case closure. A MDHS-EA-313A must be completed at each review to document the family's progress toward self-sufficiency and ongoing eligibility for the 60-month time limit extension. The MDHS-EA-313A and the CADM screen in MAVERICS must be documented to support eligibility for an allowable work exemption (JB, JC or JF) and eligibility for a 60-month time limit extension.

Refer to the Monthly Consolidated Standard for Basic Requirements in Chapter 15 for the 100% TANF Basic Requirement table. The household's income will include the gross income of all individuals residing together, including SSI recipients and others not included in the standard filing unit. No deductions will be allowed. The worker will test the budget based on the household's gross income and the number of household members

The following chart is provided as a guide for granting and terminating TANF 60-month time limit extension.

The following chart is provided as a guide for granting and terminating TANF 60 month time limit extensions.

CODE	DEFINITION	EXTENSION
JI	Children under the age of 18.	Not subject to 60-month life-time limit.
JA	Adults age 60 and over in assistance units that included children otherwise eligible for a TANF payment.	If the adult in the case is a needy caretaker and not a parent, the needy caretaker adult will be removed from the budget allowing the case to become a child only case. TANF benefits may continue for the children. If the needy caretaker is not removed, the TANF case will be closed in the 60th month.
JB	Adults who are determined to be incapacitated. Requires medical review decision.	The JB code may continue as long as the adult qualifies for this work exemption. If eligible and the household's gross income does not exceed the Basic 100% Requirement for the TANF Program, a TANF 60-month time limit extension may be approved in three-month increments.
JC	Parents who are required to care for an ill or incapacitated child. Requires doctor's statement.	The JC code may continue as long as the **parent** is required to care for the disabled child. If eligible and the household's gross income does not exceed the Basic 100% Requirement for the TANF Program, a TANF 60-month time limit extension may be approved in three-month increments.
JD	Adults who are in treatment for drug abuse. Requires health care provider documentation.	The case will be ineligible for a TANF 60-month time limit extension. The case will be closed in the 60th month.
JF	Parents who are required to care for an ill or incapacitated adult. Requires doctor's statement.	The JF code may continue as long as the **parent** is required to care for the disabled adult. If eligible and the household's gross income does not exceed the Basic 100% Requirement for the TANF Program, a TANF 60-month time limit extension may be approved in three-month increments.

JV	Adults who meet the requirements as victims of domestic violence. Requires police reports.	The case will be ineligible for a TANF 60-month time limit extension. The case will be closed in the 60th month.
JL	Adults who report a temporary illness or injury based on medical evidence. Requires doctor's statement.	The case will be ineligible for a TANF 60-month time limit extension. The case will be closed in the 60th month.

County staff and Regional staff are responsible for recommending and approving TANF 60-month time limit extensions. The County TANF 20% Exemption Summary (TA120A) and the TANF 20% Exemption Regional County Summary (TA121A) reports run at the end of each month for the current month and can be viewed and printed through Worksite. These reports must be used by the County Director and the Regional Director to review and monitor TANF 60-month time limit extensions and the 20% exemption cap.

County Level Reviews

The TA120A, County TANF 20% Exemption Summary, identifies the exempt families whose 60-month counter is greater than 60 and displays the case number, name, JOBS status code and the status of the 60-month counter. The report also displays the county's countable caseload, the calculated 20% for the county, the number of exemptions claimed and the number of exemptions available. The County Director will use this report to monitor the county's 20% exemptions and to ensure the number of cases approved for the 60-month time limit exemption does not exceed the 20% calculated for the county.
The County Director is required to complete a case review for each case listed on the report no later than the 10th of the month. The County Director will work with the appropriate county staff to resolve any issues identified during the case review. The County Director must sign, date, scan and email the report to the Regional Director no later than the 15th of each month.

Regional Level Reviews

The TA121A, TANF 20% Exemption Regional County Summary Report, displays the statistical data for each county within the region. The Regional Director will use this report to monitor each county's 20% exemptions and the 20% maximum for the region.

The Regional Director is required to collect and review the county reports, randomly select at least one case from each county with exemptions and complete a case review. The Regional Director will work with the County Director to resolve any issues identified. The Regional Director must also sign and date each county's report, compile the county reports, scan as one document and email the file to Program Support Unit at dfo.programsupport@mdhs.ms.gov. The subject of the email must identify the content, e.g., 1N TANF 20% Exemption Report-March 2015.

State Level Reviews

The state office 20% exemption reports (TA120A, TA120B, TA120C and TA121B) provide data for each county and region as well as statewide data. The Program Support Unit will select a sample from each region and complete case reviews. Staff will work with each Regional Director to resolve

any issues identified. The Program Support Unit will maintain signed copies of the reports in an administrative file which will be available to monitors and auditors.

EXCLUSIONS FROM TANF TIME LIMITS

TANF cases with no adult in the budget (true child only cases coded ANI) are the only cases exempt from the federal time limits. The 60-month time limit counter will increment for all other cases (exempt, nonexempt and ANI cases for which the adult is disqualified). The State may exempt no more than 20% of the state's countable cases from the TANF 60-month time limit. The work exemptions for victims of domestic violence (JV) and caretakers of a child younger than 12 months (JJ) are limited to a lifetime maximum of 12 months. Refer to Exempt Individuals located in Chapter 8 for additional and more detailed information.

RESPONSIBILITIES OF ELIGIBILITY WORKER AND CASE MANAGER

It is the responsibility of the case worker who initially interviews the TANF applicant to fully explain the TANF time limits. The worker must clearly explain that TANF cash assistance is limited to a lifetime maximum of 60 months and the 60 months will be reduced to 24 months for nonexempt individuals who do not comply with TANF work requirements. The worker must also discuss personal responsibility and the importance of planning and preparing the family for self-sufficiency.

When a change occurs that affects a recipient's exemption status, the worker handling the change is responsible for explaining any ramifications the change may have on the TANF time limits, providing assistance and encouragement to the family that promotes good choices. All staff should encourage TANF recipients to maximize their TANF time limits by terminating TANF cash assistance when the family's situation improves, and by not claiming a work exemption (JJ or JV) longer than absolutely necessary. This will allow the family to receive TANF cash assistance in the future, if otherwise eligible.

MAVERICS TIME LIMIT COUNTERS

Four (4) separate MAVERICS time limit counters are used to track the number of months used by the individual. The four counters track the 60 and 24-month time limits and the two 12-month work exemptions (JJ and JV). The TANF time limit counters display in MAVERICS on the following screens

1. **CLPR** (Client Profile) screen – When inquiring on an individual client, this screen displays the total TANF months used for each counter (Overall, Non Wrk, Child Care and Dom Violence).

2. CAP2 (Case Profile) screen – displays the months used for each counter (60, 24, CC and DV).

3.JCHI (JOBS Code History) screen – This screen is accessed from the **JOBS** screen and displays a history of the TWP referable and exemption codes. The status of the four TANF time limits (60, 24, CC12 and DV12) displays at the bottom of the screen.

4.TLHI (TANF Time Limit History) screen –This screen is accessed from the **SSDO** (SSN/Date of Birth/Sex) screen and displays a month-by-month history of the months used and the total months used for each counter (60, 24, CC12 and DV12).

MAVERICS NOTICES

The following notices are available in MAVERICS and must be used in conjunction with the TANF high counter policy and the TANF 60-month time limit exemption discussed in this chapter. Workers are responsible for sending the appropriate notification according to timeliness standards set forth by TANF policy and procedures.

- A102, TANF 60-Month Counter Information, will be sent to any family that has received TANF assistance for 41 months. The TANF High Counters Report will be used to ensure the A102 is sent timely at 40 months. The A102 notifies the family of its 60-month counter status and schedules a face-to-face interview with the worker to develop a High Counter Action Plan. The A102 will also be used to schedule follow-up high counter face-to-face interviews every ninety (90) days.

- A103, TANF Domestic Violence Exemption 12-Month Counter, will be sent to a recipient family that has claimed the domestic violence exemption for 10 months. The TANF High Counters Report will be used to ensure the A103 is sent timely at 9 months. The A103 notifies the family of the number of months used for the 12-month domestic violence exemption, and the TANF 24 and 60-month time limit counters. The A103 also provides the month in which the adult will be referred to the TANF Work Program and required to participate in allowable work activities.

- A104, TANF 24-Month Counter Information, will be sent to any family that has received TANF assistance for 21 months. The TANF High Counters Report will be used to ensure the A104 is sent timely at 19 months. The A104 notifies the family of its 24-month counter status and schedules a face-to-face interview with the worker to discuss the TANF case and develop a high counter action plan for the family.

- A105, TANF Child Care Exemption 12-Month Counter, will be sent to a recipient family that has claimed for 10 months the exemption as caretaker of a child younger than 12 months. The TANF High Counters Report will be used to ensure the A105 is sent

A105, TANF Child Care Exemption 12-Month Counter, will be sent to a recipient family that has claimed for 10 months the exemption as caretaker of a child younger than 12 months. The TANF High Counters Report will be used to ensure the A105 is sent.

- A106, TANF Time Limit Counter Information, provides general information about the TANF 60 and 24-month time limits and the two TANF work exemptions that may be claimed for a lifetime maximum of 12 months by a nonexempt adult who is a victim of domestic violence or is a caretaker of a child younger than 12 months. The worker will use the A106 anytime significant case changes occur, but no less than once during each certification period, to notify a recipient family about the number of months used for each TANF counter.

- A226, TANF Denial – 60-Month Lifetime Maximum, will be used by the worker to notify a TANF applicant that the TANF application is being denied because our records show the family has received or exceeded the 60-month lifetime maximum any family may receive TANF financial assistance.

- A227, Denial – TANF 24-Month Time Limit, will be used by the worker to notify a TANF applicant that the application is being denied because our records show that the family has received TANF financial assistance for 24 months or more with no participation in an approved work activity. The family will not be eligible for TANF benefits again until the adult(s) is working, participating in an approved educational activity or meets a TANF work exemption.

- A453, TANF Closure – 24-Month Time Limit, will be used by the worker to notify a recipient family that the TANF case is closing because the family has received TANF benefits for 24 or more months and the nonexempt adult(s) in the family is not participating in an approved work activity.

- A454, TANF Closure – 60-Month Time Limit, will be used by the worker to notify a recipient family that the TANF case is closing because the family has received its lifetime maximum of 60 months of TANF assistance.

- A455, TANF 60-Month Time Limit Extension, will be used by the worker to notify a recipient family that has been approved for a TANF 60-month time limit extension based on certain hardship criteria and the family may continue to receive TANF benefits in three-month increments.

- A456, TANF Time Limit Extension Closure, will be used by the worker to close the TANF case when the family becomes ineligible for a 60-month time limit extension and to

notify the family that the extension is being terminated and the TANF case is closing.

The CADM screen and the MDHS-EA-313/313A forms must be documented that the above notices were sent according to timeliness standards.

HANDLING A TANF APPLICATION WHEN THE 24 AND 60-MONTH TIME LIMITS HAVE BEEN EXHAUSTED

When a worker determines that a TANF applicant has exhausted the family's 24 or 60- month time limit, the worker will deny the application and send the appropriate denial notice.

- A226 – TANF Denial – 60-Month Lifetime Maximum; or
- A227 – Denial - TANF 24-Month Time Limit.

FAIR HEARING NOTIFICATION

The fair hearing notification is included on the back of all MAVERICS notices. TANF benefits may continue during the hearing process, if requested timely. TANF benefits **will not** continue during the hearing process if the request is based on a change in law or policy, or if the request is based on the expiration of the 24 or 60-month lifetime time limit or the termination of a TANF 60-month time limit extension.

Revised 08-01-06

GENERAL

The Mississippi Code of 1972, Annotated, at 43-17-5 requires the Department to have applicants for and recipients of public assistance sign a personal responsibility contract acknowledging their responsibility to the State.

REQUIREMENTS

The **MDHS-EA-312, Personal Responsibility Contract**, must be explained and completed with each application or reapplication for TANF benefits. A signed contract is a condition of eligibility. Refusal to sign or failure to return the signed contract timely will result in denial of the application.

The parent or caretaker relative responsible for the TANF children must sign the contract whether or not the adult is included in the assistance budget. If the family includes a second parent, that individual must also sign the contract. If the second parent is not present at the interview, a copy of the partially completed contract may be given to the applicant with instructions for completion and return of the form. The eligibility worker, case manager, supervisor or county director who conducts the interview and explains the TANF program will also sign and date the form.

DEFINITION

The assistance unit (AU) is defined as all individuals who must be included in the TANF budget group. The assistance unit was formerly called the standard filing unit (SFU).

INDIVIDUALS TO BE INCLUDED IN THE ASSISTANCE UNIT

The needs of an adult must be included in the assistance unit as a TANF recipient eligible for TWP services when he is:

1. The legal parent of at least one child in the budget or of a child who would be in the budget if not receiving SSI, or
2. In families with two legal parents in the home, one parent is incapacitated, unemployed (TANF-UP), or sentenced to work without pay while being allowed to live at home. Based

on accrual rights, include the following individuals who are living in the household in the assistance unit:

1. The technically eligible children under age 18 who are blood-related legal siblings or adoptive siblings of the child(ren) applying for TANF.

   Children (siblings) considered technically ineligible for TANF are those who receive SSI and those who are not deprived. If SSI is received, a participation code of SS is appropriate for the TANF case. Children who do not qualify on the deprivation factor are coded OU.

   Children who are not eligible on citizenship and alienage and children ages 13 - 17 who are not meeting school attendance requirements are disqualified (DI).

   Children ineligible for money payment due to family benefit cap requirements are still part of the assistance unit and must be included in the case with a participation code of IN. All technical eligibility factors must be met for such children.

   Also remember that a sibling for whom age and relationship has not been established cannot be included in the TANF budget. If the payee refuses to cooperate in verifying age and relationship, eligibility for the case cannot be determined. Reject the application or close the case. If the mother is making every effort to cooperate and the income and

resources of the child can be determined, sanction the child until he/she meets the eligibility requirement. This also applies for children not meeting the enumeration requirement.

2. The legal parent(s) with whom the child or children live unless the parent(s) is:

   a. An SSI recipient or was converted with the SSI recipients and is still included in the SSI computation as a converted ineligible spouse. The parent's participation code should be SS in MAVERICS. The income and resources of these parents must not be considered.

NOTE: Individuals who do not receive SSI payments, but are considered to be SSI eligible by the Social Security Administration fall within the above category and are coded SS in MAVERICS.

   b. Being penalized because of a failure to cooperate in meeting enumeration requirements for a child. Remember, however, that such a parent's net income must be included, using the earned income disregards in the TANF budget. The parent's participation code MUST be DI in MAVERICS.

   c. Ineligible on citizenship and alienage requirements. The participation code must be DI.

   d. Married to the TANF PI on or after October 1, 1999. In this situation the spouse/legal parent's presence in the home will be disregarded for 6 consecutive months beginning with the month the spouse is added to the case. The relationship code used in MAVERICS will be NW. *See MARRIAGE DISREGARD Chapter 6.*

3. A needy grantee relative, other than a parent, fulfilling the parental role, provided he wishes to be included and is not an SSI recipient, or was converted and still included in the SSI computation as an ineligible spouse.

NOTE: Remember that a relative other than a parent cannot be designated as payee if one of the legal parents is living in the home with the children.

Needy Caretaker When Only Child(ren) SSI

When application is made for TANF for a household which includes only a child(ren) who receives SSI, the presence of such SSI children is taken into account for purposes of qualifying that family for TANF. However, the determination of the amount of TANF benefits can be based only upon non-SSI individuals who are eligible to receive cash assistance. That is, only the needs and income of those eligible non-SSI individuals may be included in the budgetary process. Money payment may be available only to the non-SSI caretaker relative in a TANF case. The participation code(s) of the SSI child(ren) should be SS.

Inclusion of Mandatory Assistance Unit Members - Special Procedures

The Deficit Reduction Act (DEFRA) requires the inclusion of certain individuals in the assistance unit at the time of application, redetermination or when known to the agency regardless of whether or not an application has been filed for such individuals. Use the following procedures when adding mandatory individuals to an assistance unit:

1. Inform the payee of the requirements for the inclusion of such individuals at the next recertification/review;

2. Redetermine eligibility for the assistance unit based on the additional individual. Code the individual IN in MAVERICS only when he meets all technical eligibility requirements. If there is refusal to comply with a technical eligibility factor, apply the appropriate sanction;

3. Terminate assistance for the entire family group when the income of such individual added to the income of other family members makes the unit ineligible on the need factor;

4. If the computation results in ineligibility, take appropriate action to deny or close the case.

MINOR PARENT CRITERIA

The Mississippi Code at 43-17-5 requires that minor parents (*under 18 years old*) who are not married and the dependent child or children in their care, live with the minor's parent(s) or other adult caretaker in order to receive assistance, unless there is good cause. The income and resources of the minor parent's parents or needy caretaker relative (*non-parent PI included in the*

budget) must be considered when determining eligibility.

The intent of the law is that the minor parent remain under responsible adult supervision to oversee the well-being of the minor parent and child and to provide guidance to the young parent. The parent or caretaker relative will be the individual making application and the check will be paid to the adult guardian. Therefore, the adult caretaker must be within the specified

degree of relationship for TANF approval.

Good Cause

Any request for exemption from minor parent requirements must be referred to the Policy Unit for a decision.

The minor parent may be exempt from the requirement that she live with an adult caretaker in the following situations:

1. The minor parent has no living parent or suitable relative, or their whereabouts are unknown.

2. No living parent, specified relative, or legal guardian will allow the minor parent to live in his or her home.

3. The minor parent has lived on her own, apart from adult supervision, for at least one year prior to the birth of her child or prior to making application for TANF.

4. The physical or emotional health or safety of the minor parent or her child would be endangered by residing with the minor parent's parent or other caretaker.

5. There is other good cause to grant assistance to a minor parent living apart from adult supervision.

When good cause is claimed for physical or emotional health or safety reasons, current verification from court, physician, mental health, police, or other medical records is required. A referral to Family and Children's Services is mandatory when no verification is available. The case record must be fully documented to explain the reason for the good cause request. Submit the good cause request with appropriate documentation to the Policy Unit for a decision. No minor parent case may be approved unless good cause is allowed by State Office.

School Attendance

Minor parents who have not completed high school or a GED are required to remain in school. School attendance requirements apply once the minor parent's child is 12 weeks old. While the minor parent will be exempt from the TANF Work Program as under 18 (code JI), supportive services are available if the minor parent needs child care in order to remain in school. In this situation, refer the minor parent to TWP as a volunteer (code MV).

MARRIAGE DISREGARD

As an incentive for two-parent families, for the first marriage of the PI occurring on or after October 1, 1999, the Mississippi Department of Human Services will:

- Disregard the income and resources of the new spouse for 6 consecutive months; and
- Offer TWP services to the new spouse if that person is unemployed or under employed. *See Chapter 8 for further information.*

Allowing this disregard of income and resources will encourage marriage and two parent families and may provide the newly formed family an opportunity to establish a home and better surroundings for the children. The following minimum requirements must be met before disregarding the income:

1. The marriage must be the first marriage for the PI which occurs after October 1, 1999;
2. The marriage date must be verified;
3. **An MDHS-EA-348, Request for Income and Resource Information for Stepparent/New Spouse,** must be completed by the recipient; and
4. The worker must set a review date for the 6th month of the disregard if possible.

This is a one-time disregard and will be applied for 6 consecutive months. MAVERICS notice,

A706, Marriage Disregard Notice, will be sent advising the PI that the new spouse will be added to the case but that this will not affect the TANF money payment for six months. If the addition of the new spouse meets the requirements for a reportable change, the 6 month count begins with the month the spouse could be added to the household if the change is reported timely. If the change is not reported timely, the disregard period will be allowed prior to the determination of claim status. If the marriage does not meet the requirements for a reportable

change, the 6-month disregard period will begin with the first month the spouse can be added to the household after the change is reported. In this instance the change will be considered to have been reported timely if the marriage is reported at the next reevaluation. If the household reports the addition of the new spouse prior to the next reevaluation, the worker will act on the change even if the change is not considered reportable under Simplified Reporting requirements. If the new spouse who is unemployed at the time the marriage disregard is applied, finds employment, his/her income will be disregarded for the months remaining in the 6-month time frame. This disregard applies only to the TANF case and would not affect the Food Stamp case.

See Chapter 6, Marriage Disregard for instructions for correct coding of MAVERICS screens during disregard period.

NOTE: Alien status of the new spouse does not affect eligibility for the marriage disregard.

Once the 6-month period ends, the TANF case must be reviewed: a new **MDHS-EA-348** must be completed; the spouse will be added to the case; and the disregard of income and resources will be removed. If the addition of the spouse and his /her income to the case at the end of the 6- month marriage disregard period causes case closure, the family does not qualify for the 3-month disregard.

MAVERICS notice, **A415, Marriage Disregard Closure Notice**, will be sent advising the recipient of the case closure and the reason for the closure. After the 6-month disregard ends and the spouse is added to the TANF case, if the new spouse then gets a new job and his/her income makes the family ineligible, the TANF case must close.

NOTE: The end of the marriage disregard period does not qualify the family for the 6-month or 3-month total disregards. If the payee's new spouse leaves the home during the disregard period, the marriage disregard ends with the next possible month and the recipient loses any future entitlement to this disregard.

Legal Parent Situations

If the TANF recipient marries the legal parent of at least one of the children in the TANF case after October 1, 1999, the worker should first determine whether the family would qualify for TANF based on unemployed parent or incapacity deprivation factors. If the Assistance Unit will qualify, then process the new spouse for TANF and not the marriage disregard, and the deprivation information in the case will remain the same until the end of the disregard period. Child Support Enforcement will be notified via the change reporting procedure for the MAVS-

METSS interface system. If the new spouse who is a legal parent receives SSI, the disregard will not apply because he/ she will not be a part of the TANF Assistance Unit because of receipt of the SSI. The deprivation reason could change however (i.e. from absent to incapacitated).

At the end of the disregard period, the situation must be reviewed to again determine whether the child(ren) remain deprived based on incapacity or unemployed parent criteria.

GENERAL

According to State law, the TANF benefit is limited to children already born or conceived at the time of initial application. Only children born into the family during the first ten (10) months of assistance or a child whose date of birth is prior to the end of the 10-month cap period for the case will be added to the benefit unless the child meets one of the exception reasons. If a child in a current TANF case becomes part of another TANF case (new or existing), the child's eligibility depends on the 10-month cap period of the case in which the child is being included. If the child, whether capped or not in a previous case, was born prior to the end of the 10-month cap period in the new case, the child may be added to the benefit in the new case. MAVERICS will look at the child's date of birth and the cap date of the case to determine if the child can be added to the TANF benefit.

EXAMPLE: TANF case contains a mother, an eligible child born August 1, 1999, and a capped child born September 10, 2002. The mother moves out of the state and leaves the children with a grandmother. The grandmother already has an open TANF case with another grandchild. The 10-month family cap period in this case ended October 31, 2002. Because the two children moving in with the grandmother were born prior to October 31, 2002, both the eligible child and the child capped in the previous case can receive benefits in the grandmother's case.

EXAMPLE: TANF case contains the mother, a minor mother and her baby. The baby has been a capped child since birth. When the minor mother turns 18, she establishes her own TANF case with her child. As the PI, the 18-year old's cap period will begin with the first benefit month in the new case. The child, capped in the previous case, is eligible for benefits in the new case.

Upon initial case approval, MAVERICS will generate and mail to the household notice A918, TANF Family Cap, which explains the family cap policy. The notice will be sent the first time the family cap start date is set on the CAP2 screen. The family benefit cap date is based on the first benefit month. This month is the first in the ten-month count. A benefit month can be a month in which the benefit, whether regular or prorated, is less than $10.00 and not actually paid to the recipient.

EXAMPLE: Application is made September 25 and TANF is approved October 15. October is the first benefit month. Children born through July 31 will be potentially eligible for a benefit. October through July is the 10-month cap period. Children born on or after August 1 will not be eligible unless the capped child meets an exception.

EXAMPLE: Application is made March 2 and TANF is approved March 25. A prorated benefit will be issued for March, and that is the first benefit month. Children born

through December 31 will be potentially eligible for a benefit. March through December is the 10-month cap period. Children born on or after January 1 will not be eligible unless the capped child meets an exception.

EXCEPTIONS TO FAMILY BENEFIT CAP

The cash benefit will not be increased to include children born into a TANF recipient family after ten months from initial program participation except when:

1. The child was born prior to the ten-month limit and is returning home.

   EXAMPLE: TANF is approved for benefits starting in November, 2001. The 10- month cap period for the case is November 2001 through August 2002. A child, age 6, who has been living with a grandmother returns to the mother's home September, 2003. Since this child was born prior to August 31, 2002, the child is not capped and may receive benefits in the mother's case.

2. The new child was conceived as a result of rape, incest, or sexual assault, as verified by doctor's statement and police records.

3. Parental custody has been legally transferred.

4. The child is born after a period in which the family has not received TANF assistance for a period of at least 12 consecutive months.

   EXAMPLE: The TANF case closes for July, with the last benefit in June. Children capped during the original eligibility period will remain capped unless a child meets an exemption at reapplication. Children born July 1 through June 30, during the first 12 months of closure, will be capped children at any future reapplication, unless the child meets another exception. Children born after the 12th month of closure are not capped and are potentially eligible for benefits at reapplication.

5. When the child's parent dies, becomes too incapacitated to provide care, or is institutionalized or incarcerated for an extended period of time.

REAPPLICATIONS

When a TANF case closes and the family reapplies at a future time, determine family cap status for each child as follows (**Note:** MAVERICS Notice A918, TANF Family Cap, will not be sent to the household upon approval of reapplications):

1. Children included in the original benefit and still eligible under regular TANF criteria may be included.

2. Children capped in the original case remain capped in that case unless an exception is met at reapplication.

3. Children born during the first 12 months of TANF closure are capped, unless an exception is met.

4. Children born after the family has been off TANF assistance for at least 12 consecutive months may be added if the family is reapproved for benefits.

5. Children born within 10 months of reapproval may be added to the benefit, if the family has been off TANF assistance for at least 12 consecutive months.

6. Children born prior to the original 10-month limit and have returned home may receive benefits.

NOTE: A new 10-month period to add new children is allowed only when the family has been off TANF assistance for at least 12 consecutive months. Existing children are subject to the cap period applicable to them based on date of birth, unless exempt from this provision at reapplication.

ADDING NEW CHILDREN TO THE ONGOING CASE

The fact that a child will not be eligible for a benefit due to the family cap does not change the family's requirement to report the birth of the child as required at the next review. Capped children are still part of the assistance unit. An interview with the grantee relative to add the child to the case is required.

All eligibility criteria apply to a child under family cap and must be verified as appropriate for any member of the assistance unit. The capped child is coded "IN" the TANF budget but will have a family cap code of "NE". On the PRAW screen in MAVERICS, the capped child will

have a code of "1". The grantee relative must cooperate with child support on the capped child. The family may qualify for work exemption and child care assistance on the basis of this child as well. Child care expenses for capped children are allowed as a dependent care deduction. Capped children are not excluded from food stamp eligibility. Eligibility for other programs should be explained to the parent when adding a child to TANF.

INCOME OF CAPPED CHILDREN

Though capped children are considered part of the assistance unit, their income is not included in the TANF budget. Any income attributed to a capped child must be coded by the child in MAVERICS. The income will not count in TANF, but will be included in the household's food stamp budget. For example, child support paid directly to the PI for a family cap child must be coded by that child in MAVERICS so that the income will not count in the TANF budget.

EXPLANATIONS AND DOCUMENTATION

It is the responsibility of the worker interviewing the grantee relative to explain family cap requirements. The family cap date must be entered on the **MDHS-EA-312, Personal Responsibility Contract,** at time of interview. Upon approval, the cap date will appear on the **CAP2** screen and an automatic notice will be generated by MAVERICS to explain Family Benefit Cap to the recipient. Documentation of family cap status is required on the **MDHS-EA900A, Interactive Interview Documentation Form**.

DEFINITION

In order to qualify for Temporary Assistance for Needy Families, a child must be deprived of one or both parents for one of the reasons set out below. The worker must, with the help of the adult requesting assistance for the child, establish that the child is deprived of one or both parents for one of these reasons.

REASONS FOR DEPRIVATION

There are four reasons for deprivation:

1. Death;
2. Incapacity;
3. Continued Absence; and
4. Unemployed Parent.

Each of these deprivation reasons is discussed in detail in the following pages.

DEATH

A child will be considered deprived because of death of his parent when he has lost one or both of his legal parents by death. To establish death, the worker will ask the parent or relative with whom the child(ren) lives to state the date and place of the death of the parent and other pertinent information. The worker will then establish the fact of the death with documentation such as:

- Death certificate
- Physician's records
- Hospital, mortuary, cemetery, or insurance records
- Newspaper article or obituary recording facts and date of death
- Family Bible
- Diaries or letters
- Statements or references **INCAPACITY** A child otherwise eligible living in the home with both legal parents will be considered deprived

of parental support and care when one or both of the parents is determined to be incapacitated.

The definition of incapacity should not be interpreted to include individuals who are merely unemployed. The two-parent family in which neither parent claims a disability must be handled under TANF-UP deprivation requirements. However, if either parent in a two-parent family claims a work exemption based on incapacity, eligibility for TANF (basic) must be determined on the incapacity deprivation factor.

If the Medical Review process is used for determination of incapacity as a basis for deprivation, exemption from the TANF Work Program will be decided at the same time, without a separate request.

Also, qualifying for SSI and/or RSDI on the basis of age does not constitute automatic incapacity. This must be established for the older parent as for any other parent.

Definition

Incapacity is defined as a physical or mental defect, illness, or impairment which prevents an individual for the most part from engaging in his usual occupation or a similar one. In order to be considered eligible on the basis of incapacity, the condition must:

1. Make the individual totally disabled to work in the individual's usual occupation or a similar one, or

2. Prevent the individual for the most part from performing useful work in the individual's usual occupation or similar one. That is, the condition is such that the individual is unable to work full-time in work that is within his competence to perform and which is available in the community, or if working full-time, must accept lower wages because the individual's physical or mental limitations prevent the individual from fulfilling all the responsibilities of the work.

3. Be expected to last for a period of 30 days or more.

The inability to work, whether total or for the most part, may be caused by either a permanent impairment or a temporary illness or injury.

Permanent Incapacity

A permanent incapacity is one which wholly prevents a parent from providing economic support or the homemaking skills which are necessary for the care and support of his family.

Temporary Incapacity

Temporary incapacity results from an illness or injury which will run a fairly predictable short-term course and which is not likely to leave permanent after-effects as shown by medical findings. For example, a broken bone usually results in temporary incapacity, as does surgery. An individual who has had surgery or is following some other form of medical treatment may not be able to work or may be very limited in the work that can be performed during the period of convalescence, and may be considered as prevented for the most part from performing useful work.

In a period of temporary incapacity, the course of the illness or injury should be expected to continue for a period sufficient to allow for the determination of incapacity and the initiation of the grant. An illness or injury of an emergency or acute nature not lasting more than two or three weeks does not come within the intent of the program.

Partial Incapacity

Partial incapacity refers to a physical or mental defect, illness, or impairment which does not wholly or totally limit an individual's activities but prevents the individual for the most part from engaging in his usual occupation or a similar one. For example, the individual is only able to perform work through the help and assistance of others because of a physically or mentally incapacitating condition which prevents normal functioning, or he can work only a few hours a day, or his production is limited when he can work.

Establishing Incapacity

Based on Receipt of Disability Payments

A finding of eligibility for RSDI or SSI benefits based on disability or blindness is acceptable proof of incapacity for TANF purposes. Also, receipt of 100% VA disability benefits may be considered proof of disability. The worker will document the finding of eligibility or receipt of these benefits initially and on each redetermination. There is no requirement to submit social and medical information to the Medical Review Unit for these cases. However, any VA benefit percentage less than 100% does require a Medical Review decision.

Based on Submittal of Medical and Social Information

The process of determining incapacity in TANF begins in the county at the time of the initial application, or at the time the change occurs, and is a continuing activity of the county worker during the time of the receipt of assistance based on this deprivation criteria. The county worker is responsible for three primary duties: (1) observing and talking with the incapacitated parent about his impairment, illness, or defect, (2) describing this condition clearly and adequately in preparing the social information report and (3) assisting the client in securing the medical information required by the medical review board.

Due to the fact the client will be requested to provide medical information to the agency and the Medical Review Unit, the dissemination and use of this information is protected by the Health Insurance Portability and Accountability (HIPAA) Act of 1996. In order to insure the agency is in compliance with the requirements of this act, the following actions are to be taken by the case worker:

1. Provide the client with a copy of the MDHS-EA-933, Notice of Privacy Practices, if the NOHS does not indicate one has been sent to the client in the past.

2. Secure the signature of the person for whom medical information is being requested on the MDHS-EA-902, HIPAA Authorization For Release of Information.

3. Secure the signature of the person for whom medical information is being requested on the MDHS-EA-903, HIPAA Authorization for Release of Information by the Mississippi Department of Human Services.

Preparing the Social Information Report

Once the client has provided the required HIPAA releases, the case worker should continue the process of gathering the information to determine incapacity. The case worker will complete the MDHS-EA-332, Report of Social Information based on statements made by the applicant or recipient about his/her physical or mental condition, together with the observed facts about the effect of this condition on the individual's ability to perform his usual work. The form may be supplemented with an additional narrative if necessary. This report begins with the application interview or change request and continues with each redetermination or other contact with the individual, as scheduled by the Medical Review Unit. The Report of Social Information, MDHS-EA-332, is of major importance in reaching a decision as to incapacitating conditions which will qualify an individual for public assistance through TANF. While two people may have about the same illness, defect, or impairment, the effect of the condition on each one may differ greatly in its effect on each one's ability to carry on his work activities. The social report consists of facts about the effect of the physical or mental condition on the individual's capacity for carrying on the activities in his work, whether a job for wages, self-employment, or homemaking activities.

Since the State Medical Review Unit does not have the advantage of seeing the applicant, **the county worker's summary should aim at presenting the individual's situation with clarity, and with a conscious effort being made to keep out personal biases and prejudices.** Therefore, the worker must distinguish between what he sees the applicant do or fail to do and what the applicant says he can or cannot do. While the information obtained from the relatives or friends can be helpful, it does not take the place of the worker's direct observation of the individual during the interview.

The worker who observes the incapacitated parent in TANF is in a position to complete the social information report, having seen the extent to which his condition handicaps his movements, the help which other individuals may have to give him, and other important factors

in describing his limitations.

In preparing the social information report, the worker will:

1. Use form **MDHS-EA-332, Report of Social Information**, supplementing the form with an additional narrative if necessary.

2. Submit the social information along with the medical information report to the Medical Review Unit as described below.

Securing Medical Information

The medical information to be used in making decisions as to incapacity in TANF must contain complete and specific medical findings, a diagnosis, a statement as to whether treatment is being given, and a prognosis.

Medical information obtained must relate to the current condition, mental or physical, of the individual. If the medical information is more than six months old, or relates to a condition that no longer exists or is no longer disabling, the county department will obtain new information.

EXCEPTION: New medical information will not be required if information obtained within the 12 months prior relates to the current condition and is available from the sources listed below.

The county department will use one of the following sources to obtain new medical information, as indicated by the application or case:

1. From a current examination made by a physician of the individual's choice or from the records of his own physician based on a current examination and treatment within the past six months. In either event, the Department will reimburse the physician. See the instructions for the use of form **MDHS-EA-330, Request for Medical Information for TANF Families**, and the way in which the physician bills the Department for his services.

2. From a hospital or clinic record made within the prior six months.

NOTE: See below for exceptions to this time limitation. Also see the instructions for use of form **MDHS-EA-333, Request to Cooperating Medical Facilities for Information,** for payment procedures in these situations.

3. From county health departments, Vocational Rehabilitation counselors, etc.

4. For Veterans Administration Hospitals, obtain a release from the individual, either on the regular form provided by the hospital or in the form of a letter or written statement over the individual's signature, giving his full name, address, social security and

veteran's claim number and send this request to the appropriate hospital.

5. From other agencies with whom special agreements have been worked out.

There are several agencies or medical facilities with which the Department has agreements for exchange of medical information. These are the University Medical Center, Jackson, Mississippi; East Mississippi State Hospital, Meridian, Mississippi; Mississippi State Hospital, Whitfield, Mississippi; and Regional Mental Health Centers.

The Medical Review Unit will accept medical information from the sources named above when the applicant for or recipient of TANF has been examined or treated in the facility within twelve months prior to the current date. Follow the procedures below for requesting medical information.

- University Medical Center, Jackson. Use form **MDHS-EA-333, Request to Cooperating Medical Facilities for Information**, to request medical information from a UMC out-patient clinic or from the hospital regarding treatment or examination. Give complete identifying patient information including the patient ID number, and include a stamped, addressed return envelope.

NOTE: The University Hospital cannot accept patients for examinations for determining eligibility on incapacity using the **MDHS-EA-331, Report of Medical Examination.**

- Mississippi and East Mississippi State Hospitals. Request medical information from either of these hospitals by use of form **MDHS-EA-333** when the individual has been treated within the previous twelve months. Otherwise, obtain a current report from a Mental Health Center where he is being followed, or secure medical information from other sources, and describe any bizarre or abnormal behavior of the individual in the social report. If the Unit wishes to request the State Hospital's summary, their request will authorize payment for the additional report.

- Regional Mental Health Centers. Use form **MDHS-EA-333** to request an evaluation and report or a report only when the individual has been evaluated or treated at the Center within the previous twelve months.

Role of Examining Physician

The private physician who completes the physical examination of the individual on form **MDHS-EA-331, Report of Medical Examination,** is asked to furnish the following:

1. The medical findings describing the impairment or illness.

2. A diagnosis of the individual's physical or mental problem.

3. A description of the treatment and its effect on the individual or recommendation for treatment.

4. A statement as to whether an examination by a specialist or special tests are indicated.

5. A statement of how the individual's condition affects his ability to work or to participate in the TANF Work Program, including the anticipated duration of the disability which prevents the individual from working.

The physician is not asked to make a decision as to whether the individual is qualified for incapacity in TANF. The definitions used in making the eligibility decision are not available to the examining physician.

NOTE: The **MDHS-EA-331, Report of Medical Examination,** may be signed by a Licensed Nurse Practitioner, who is currently involved in the client's treatment.

Submitting Information for Applications

After an applicant/recipient has been examined by a physician or the worker has requested a report on his mental or physical condition, and the medical findings have been returned to the county, the worker will attach the **Report of Social Information, MDHS-EA-332**, and submit, with the medical report, to the Medical Review Unit, c/o Economic Assistance Policy Unit.

The Medical Review Unit will return form **MDHS-EA-334, Notice of Decision of Medical Review Unit Concerning Incapacity And/Or TANF Work Program Medical Exemption**, to the Policy Unit, detailing their decision as to incapacity. The form will indicate the date by which a reexamination will be required and any referrals that need to be made for the individual. In some cases when there is insufficient information on which to base a decision, the Medical Reviewer may defer the decision and request additional information. Only upon such a request may the county authorize payment for more than one medical report per decision request.

Role of Medical Review Unit

The Medical Review Unit has the following duties:

1.To review the medical and social information reports and to ascertain that the reports contain adequate medical findings with regard to the physical or mental illness, impairment, or defect of the individual, together with complete social information describing the effect of the condition on the individual's ability to work.

2. To make the decision as to whether or not the individual has been rendered incapacitated, partially or wholly, for work.

3. To request reexaminations and new social information at specified intervals in cases in which the individual's condition is expected to improve or be otherwise modified.

4. To make recommendations, where appropriate, for services which the county worker will help the individual obtain in order to help him return to his usual work or become less disabled.

5. To review, separately from the daily process, the medical and social information reports in connection with a fair hearing, and to make recommendations for decision by the Division of Program Integrity, Administrative Hearings Unit.

Receipt of Decision from Medical Review Unit

Upon receipt of the **MDHS-EA-334** with the Medical Review Unit decision to approve incapacity as the deprivation reason for TANF eligibility or for a TANF Work Program exemption, the worker will set a tickler for 45 to 60 days in advance of the next medical review due date. New medical and social information must be completed timely for re-review if the TANF eligibility or work exemption request is expected to continue to be based on incapacity. The regular TANF review may or may not coincide with the date of the Medical Review request. When the medical review is due prior to the next regular TANF review, the TANF review may be pulled up and completed at the same time to reduce case work and office appointments.

Upon receipt of the incapacity approval when the Medical Review Unit has indicated a need for additional referrals for treatment or reports prior to the next scheduled review, send a **Request for Information, MDHS-EA-942 or Notice A905**, to inform the individual of the requested information or referral needed. Tell the individual what additional information will be needed so he/she will have time to discuss this with his/her physician or health care provider as soon as possible. The cooperation of the individual in following the recommendations of the Medical Reviewer must be noted in the social and medical information submitted for the next review request. Failure of the individual to follow the reviewer's instructions could mean denial of the incapacity request unless the reason is sufficiently documented by the health care provider. Also, the individual's willingness and cooperation in seeking and following medical treatment for the disabling condition will also be considered in subsequent reviews.

If the Medical Review Unit denies the request for incapacity for deprivation, the TANF application will be denied. If the denial is for the work exemption, the individual must be referred to the TANF Work Program as non-exempt if no other exemption is appropriate.

Submitting Information for Redeterminations

The county worker is responsible for review of the incapacity factor for the parent/needy caretaker in TANF at each redetermination. When the Unit authorizes the county department to obtain a reexamination, the eligibility worker will follow the same procedures used originally in securing the initial examination and obtaining social information.

EXCEPTION: The Medical Review Unit may ask for a reexamination of individuals who are incapacitated because of mental retardation or mental illness. Because of the nature of this impairment, the individual may refuse to be reexamined. In such

instances, prepare a full, complete social report, indicating the reason for the lack of current medical information and submit to the Medical Review Unit when the report cannot be obtained from other sources.

Do not obtain any medical reevaluation earlier than two months before the date specified on the decision form **MDHS-EA-334, Notice of Decision of Medical Review Unit Concerning Incapacity And/Or TANF Work Program Medical Exemption.**

NOTE: When the date of the review of incapacity does not coincide with the date of the regular redetermination, consider the redetermination complete and then set up the tickler file for the special review of this factor.

When submitted to the Medical Review Unit for review, the new medical and social information must be accompanied by all former medical, social, and decision forms. Use the tickler file as a control over reexaminations.

When the worker notes a change prior to the date of reexamination requested by the Medical Review Unit, he will:

1. When the change is apparent improvement, prepare another social report on **MDHS-EA-332, Report of Social Information,** and send this along with all previous social and medical reports to the Unit for another decision. The question of improvement must be resolved by the Unit.

2. When the physical or mental condition of the incapacitated parent has apparently become worse and the parent is not receiving disability benefits under Social Security, SSI, or VA, refer him to the Social Security Office or Veteran's Administration, as appropriate, to apply for benefits. If the TANF parent applies and is approved for SSI, the worker will remove him from the TANF budget.

3. When the TANF parent's incapacity continues past six months or its immediate severity is such as to indicate permanent incapacity, the individual should be advised to apply for benefits (RSDI or SSI) at the Social Security Office. The results of this referral should be noted at the next case review.

Submitting Information for Reapplications

When a parent in TANF reapplies within six months after a case has been closed or an application rejected on the incapacity factor, follow the same eligibility procedures as used originally and submit to the Medical Review Unit. A current examination may not be required when:

1. The social report does not indicate any marked change in the individual's condition.

2. Medical information has become available from another source.

Unless the worker notes a marked improvement in the individual's condition or new medical information is available, resubmittal to the Medical Review Unit of reports on cases closed or rejected on an eligibility factor unrelated to incapacity is not necessary. However, eligibility on other factors must again be established.

Submitting Information for Requests for Additional Information

When the social or medical information is incomplete or inadequate, the Medical Review Unit will specify the information needed and the source from which to request it, or will send the county a form to complete relating to the type of incapacity involved.

The Unit may request additional information from the county department for:

1. Cases involving mental retardation.

2. Cases involving epilepsy.

3. Any case requiring complete and specific information in regard to the activities of the applicant or recipient.

4. Any case requiring a summary of the individual's work history and educational ability for retraining.

5. Any case in which there is a wide discrepancy in medical and social information so that neither substantiates the other, or two medicals show entirely different diagnoses.

6. Cases in which the information on the medical report is not adequate for the Unit to make a decision concerning the nature or extent of the individual's incapacitating condition.

Submitting Information for Refusals to Cooperate with Rehabilitation Plan

When the Medical Review Unit determines an applicant for or recipient of TANF eligible based on incapacity, the Unit may instruct the county to refer him for rehabilitative or restorative services. When the referral is made and the report from the agency shows that the individual has been offered a plan of rehabilitation or restoration and has refused it without a reasonable basis, proceed as follows:

1. The worker will confer with the Vocational Rehabilitation counselor or other agency and talk with the individual regarding his reasons for rejecting the plan.

2. If the individual continues to reject the plan, the worker will report this fact to the Medical Review Team and return all medical and social information reports for a decision as to continued eligibility.

3. The worker will state in the report that the reason for resubmittal is the refusal of the individual to accept the rehabilitation or restoration plan, and give the individual's reason for refusal.

4. Also, if the individual refuses treatment, such as that prescribed by a county health department for drug therapy and rest for treatment of tuberculosis, without a reasonable basis, the worker will submit the report about this, together with the medical and social information reports, to the Medical Review Unit for further consideration.

NOTE: Fear of surgery is often a reason for the individual's refusal of the rehabilitation or restoration plan. In some instances, the fear is based on the uncertainty of the success of the surgical procedure, as in the case of heart surgery. However, with more common surgical procedures, the fear usually can be overcome with counseling.

Referrals to Vocational Rehabilitation

The Division of Rehabilitation Services will provide services to appropriate recipients which can result in their becoming more self-sufficient and in many cases partially or wholly self-supporting. Referrals are made on form **MDHS-EA-320, Temporary Assistance for Needy Families Referral to Vocational Rehabilitation.** Prior to making a referral to Vocational Rehabilitation, the worker should review the case record to insure it contains current copies of the MDHS-EA-902, HIPAA Authorization for Release of Information and MDHS-EA-903, HIPAA Authorization for Release of Information by the Mississippi Department of Human Services.

Role of the Eligibility Worker

The eligibility worker is responsible for assisting the individual with referrals to the Division of Rehabilitation Services and must:

1. Determine those individuals whose referral is recommended by Medical Review Unit;

2. Recognize those individuals who could potentially benefit from services;

3. Furnish information and explanations to help the individual get an appointment with the counselor who serves that county;

4. Explain the necessity for referral, making certain that the applicant or recipient understands that the Department expects him to cooperate;

5. Send the referral form, **MDHS-EA-320**;

6. Take whatever follow-up steps are necessary to determine continuing eligibility after the worker receives a report from the counselor on the availability of services or the success or failure of the rehabilitation plan.

Individuals to be Referred

The individuals whom the eligibility worker will refer fall into two groups:

1. Applicants or recipients for whom the Medical Review Unit has recommended referral.

2. At the discretion of the eligibility worker, those individuals who the worker thinks are feasible; that is, they meet most of the selection criteria used by Vocational Rehabilitation for screening. This group may include spouses and essential individuals included in the recipient's financial need income test as well as individuals themselves.

Selection Criteria

In determining the feasibility for referral of individuals whose referral is not mandatory, the worker should consider the criteria established by the Division of Rehabilitative Services. Basically, the individual referred must meet these requirements:

1. A disability or incapacity must exist.

2. The disability or incapacity must constitute a vocational handicap; that is, must prevent him from performing useful work.

3. There must be a reasonable expectation that the services could result in continuing employment.

Specifically, Vocational Rehabilitation considers the individuals who meet the following criteria very good referrals and the best prospects for successful rehabilitation:

1. Individuals who have potential for a substantial work period following vocational rehabilitation.

2. Individuals who had recent work experience prior to the onset of disability or incapacity.

3. New applicants or recipients who have been in the caseload for one year or less.

4. Individuals who manifest interest in employment.

5. Disabled or incapacitated unemployed young men and women.

6. Disabled or incapacitated individuals rejected for the TANF Work Program.

On the other hand, the following "screen-out" criteria may be helpful to the worker. For referrals which are made at the discretion of the worker, the conditions listed below would preclude referral. These screen-out criteria are:

1. Terminal stage illness.

2. Mental retardation and/or other impairment so severe as to preclude work adjustment.

3. Advanced age.

4. Long-standing neurological and/or psychiatric impairment not responding to treatment, substantiated by poor employment and social histories.

5. Applicant totally uncooperative will not keep appointments, furnish information, etc.

NOTE: Do not screen out a referral simply because Medicaid will pay for the medical treatment needed to correct the disability or incapacity. There may be other services to offer the individual. In many cases proper treatment or correction of the physical or mental disability, social services, and training or retraining can prepare an individual for employment. Often after sustaining a disabling injury or developing a disabling or incapacitating condition, the individual cannot return to his former employment but can be trained for a different type or a less strenuous job.

Confidentiality of Medical Information

Medical records are always considered confidential. Medical reports are not included as part of case material for the hearing folder unless the hearing is on the medical decision. In this case, the medical is resubmitted to the Medical Review Unit rather than with the hearing folder. See *Chapter 13, Hearings*. Refer also to the discussion of confidentiality of all case information.

CONTINUED ABSENCE

Definition

A child may be considered deprived for the reason of continued absence when one or both of his legal parents is absent from the home. The parents may be divorced, separated, or the father was never married to the mother even though paternity was established for one or more of the children.

Whatever the reason for the absence from the home, in order for a child to be considered deprived, the facts must establish that the absent parent has ceased, for the most part, to function as a parent; that is, as a provider of maintenance, physical care and guidance for the child.

Even when a child's legal parent does not live in the home, the child may not be deprived due to continued absence. If the parent continues to have contact with the child and to assume responsibility for the child by providing support and care, then the child cannot be considered deprived for the reason of continued absence.

Evaluating Parental Involvement

The worker is responsible for evaluating the situation based on facts provided by the payee and, in some instances, the absent parent or others. The decision and supporting evidence as to whether or not a child is deprived due to continued absence should be documented in the case record in most instances and in every case where it is not obvious. Every case situation is a judgment made by the worker after careful evaluation. Supervisory advice should be requested whenever this determination is not clear.

All of the following conditions need not be met, but in evaluating situations to determine whether or not the parent who is absent from the home provides support, guidance and care, give consideration as to whether:

1. The child communicates on a regular and frequent basis with the parent. The child may go back and forth between the absent parent's home and that of a parent with whom he lives, or the absent parent may visit the child(ren) on a schedule that indicates he could be providing physical care and guidance. Routine visitation has the same effect on determination of deprivation, whether such visitation is the result of court-ordered visitation, joint legal custody, or an informal agreement between the parents. It is the actual visitation, and not necessarily what is stated in a court order, that counts in determining how often the absent parent visits the child.

2. The absent parent provides guidance. Guidance means day-to-day parental participation in and responsibility for the child's physical, emotional, and intellectual development. Such participation includes, but is not limited to (*depending on the age of the child*) accompanying the child on doctor visits, attending school conferences, providing discipline, participating in decisions concerning the child's wellbeing and being involved in the child's extracurricular activities.

3. The absent parent provides physical care. Physical care means performing tasks required in the child's daily life or having the responsibility for supervising a child's activities and assisting with personal care.

4. The absent parent provides maintenance and is responsible for the child's medical care. Maintenance means either financial support paid directly to the child's household or substantial in-kind contributions of food, clothing, and other necessities.

In joint custody cases, whether stipulated in a divorce settlement or in a legal or informal separation agreement, that place a child for specified amounts of time in the home of each parent, the worker must determine whether deprivation due to the continued absence of either parent exists. The actual circumstances of each case must be carefully reviewed to determine whether the child is deprived of parental care and support.

In case situations where the child spends a portion of each week or month with each parent, it is unlikely that there is an interruption of either parent's care and support. However, if the child

spends the school year with one parent and vacation periods with the other parent, the absence may be of a continuous nature for the period of time that the child is with the payee.

Although there is not a specific time period for establishing deprivation by reason of continued absence, the absence must be of such duration as to establish the break in parental functions as described above and for the agency to establish eligibility.

Reasons for Continued Absence

While there are only four separate reasons for deprivation, continued absence may be due to any of several specific reasons. These are described below.

Divorce or Legal Separation

A child living with one parent who has secured a divorce or legal separation from the other parent will be considered deprived of parental support or care, provided the parent who is out of the home is not fulfilling his/her parental role, as discussed above. Also, divorce or legal separation may be the basis for deprivation for a child living with another relative when neither of his parents are in the home.

There is no provision for legal separation in the Mississippi statute although there is a provision for bringing a separate support and maintenance action. However, legal separation could be the basis for deprivation for children in this state when the child's parent obtained this legal action in some other state which has the provision.

Divorce or Legal Separation

To establish divorce or legal separation the worker will:

1. Obtain a statement from the grantee relative concerning the fact of the divorce or order for separation, the time and place of the order, and the provisions made for support.

2. Substantiate, if possible, the fact of the divorce or legal separation from copies of the order in the possession of the individual.

3. If the individual does not have documentation in his possession, check court records in the county or ask the Department of Human Services in the other county or state to check records and obtain this information.

Desertion and Non-Support

When a child is deprived of the care and supervision of one or both legal parents due to desertion and non-support of the parent or parents, the child will be considered eligible on the deprivation factor. To establish the fact of absence of the legal parent(s), the worker will discuss with the parent or other relative with whom the child lives the following points:

1. The circumstances under which the desertion or absence took place.

2. What steps the parent or other relative has taken to locate the absent parent, and whether or not the absent parent's current address, employer, etc., is known.

3. What other sources of information are available from which to obtain additional facts when the account given by the other parent or relative is inadequate to establish the fact of absence.

4. What contributions the absent parent has sent since the desertion.

When additional evidence of absence and lack of support is needed, any or a combination of the following sources of information is acceptable: former employers, parents or other relatives of the absent parent, friends who have knowledge of his whereabouts, business associates, labor unions, lodges, or organizations to which the parent belonged.

Never Married (Illegitimacy)

Children of unmarried parents will be considered as deprived of a father due to lack of marriage unless paternity has been established for the child. In cases of out-of-wedlock births when paternity has not been established, the mother is the only legal parent of the child. If the mother is still legally married to someone other than the biological father of the child, the mother's legal husband is the legal father of the child until excluded from paternity, and it is the legal husband who must be referred to the Division of Child Support Enforcement.

A child born out of wedlock for whom paternity has not been established is considered deprived of a father, even when the putative (alleged) father lives in the home, when it has not been established that this man is actually the child's father and therefore legally responsible for his care and support.

Refer to *Chapter 3, Explanation of Terms*, for the definition of a legal parent and acceptable methods for establishing paternity in the TANF case.

To establish deprivation due to lack of marriage of the child's parents, the worker will ask the mother or other grantee relative:

1. The name of the putative father, his whereabouts, and what arrangements he has made to support his children.

2. What steps, if any, the applicant has taken to have paternity established for the child.

3. Whether the putative father has signed a voluntary admission of paternity, or would be willing to do so.

The mother or other relative must then document her statements in some way or assist the worker

to obtain substantiation by other means. This documentation may be that:

1. A birth certificate has the name of the father left blank, with the mother's maiden name given, and this information corresponds with the mother's statement of non-marriage to the putative father of the child.

NOTE: The fact that the birth certificate has the name of the father does not necessarily mean that he is the legal parent. Unless the father was married to the mother or paternity has been established by court order or signing of the ASAP form, the legality of the relationship may not be determined. It is sometimes helpful when requesting a birth certificate from Vital Records to ask that the back of the certificate be copied also. This may contain a notarized admission of paternity allowing the father's name to be on the birth certificate and will be helpful in getting legal paternity established.

NOTE: The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 allows voluntary acknowledgments of paternity signed on and after August 22, 1996 to serve as legal findings of paternity subject to the right of either parent to rescind the acknowledgment within the earlier of 60 days or the date of a judicial proceeding relating to the child (including a proceeding to establish a support order) in which either parent is a party.

2. The mother or other relative gives an account of the relationship with an unnamed individual, along with substantiation that the mother had a relationship with this individual which resulted in the birth of the child. She may produce records, introduce statements or references, or use other means to establish that the child was born of such a relationship.

3. The mother is or was legally married, there has been no legal divorce, and the payee claims that a man other than the legal husband is the father. If she does not report the marriage at the time of birth, the birth certificate will not give the name of the father at all. According to Mississippi paternity law, the man to whom she is legally married is the legal father of any child born to that mother unless a court of law establishes otherwise.

   In such cases in which the Economic Assistance Office is aware of the legal marriage, the worker must initially report the legal husband to the Child Support Enforcement Office as the absent parent. The worker may send a message to alert the Child Support Office that the mother is claiming another man as the actual father. At a later date, if the absent legal father's paternity is nullified by the court, the worker will receive an alert to update MAVERICS to remove the original absent parent. A new referral will be required to refer the putative father and begin the process of establishing paternity, if necessary.

4. In some cases, it will be necessary to establish relationship between the child and a grantee relative other than the mother. Obtain statements regarding the conception and

birth of the child. However, in a case which involves proving relationship to a relative of a putative father, this requires naming the putative father and making a determination of paternity; otherwise, relationship and deprivation cannot be established for TANF eligibility.

Whenever relationship to the caretaker relative within the specified degree cannot be established within timely processing standards, deny the application. Approve TANF if relationship can be established at a later time, the individual reapplies for money payment, and all other eligibility factors continue to be met.

Hospitalization

When the parent is hospitalized for more than a temporary period of time, and this results in an interruption of his functioning in providing care and support for the children, consider the children deprived for this reason.

A hospitalization for illness such as tuberculosis, mental illness, some heart conditions, or surgery with complications can result in stays in the hospital for more than a temporary period. In such cases, it may be appropriate to explore incapacity as the deprivation reason. However, most hospital stays are of a temporary nature.

To establish absence due to hospitalization the worker will obtain:

1. A statement from the patient's physician regarding the nature of the illness or injury and the expected length of stay in the hospital, or

2. A statement from the hospital or medical facility concerning the nature of the illness or injury and the expected length of the stay.

See *Chapter 3, Living with Caretaker Relative - Temporary Separations*, for further information.

Imprisonment

When the legal parent of a child is imprisoned, this usually results in an interruption in his function of providing care and support for the children. When this occurs, verify imprisonment by checking the court record to ascertain the date of conviction and the term of the sentence if possible. Otherwise, write the prison in which the parent is incarcerated. When the imprisonment is long term, consider deprivation due to continued absence.

When the imprisonment is short term or a sentence is being served on a week-end arrangement, determine whether or not the parental functions of care, supervision, and support are interrupted. Individuals who are imprisoned are not eligible for TANF money payment when the incarceration period is expected to be a month or more. When this situation becomes known, a new caretaker relative must be determined.

In situations in which the parent is allowed to serve the sentence on week-ends, or other arrangements in which he is in and out of the home but is providing economic support, the children cannot be considered deprived for this reason.

NOTE: This is not the same situation as the one that is discussed directly below.

See *Chapter 3, Living with Caretaker Relative - Temporary Separations*, for further information.

Court Sentenced to Unpaid Work

A child or children will be considered deprived of parental support and care by reason of continued absence when:

1. A parent has been convicted of an offense and is under sentence of a court, and

2. The sentence requires, and the parent is performing, unpaid public work or unpaid community service during working hours, and

3. The parent is permitted by the court to live at home while serving the sentence because of crowded jail conditions or for other reasons in the public interest.

Because other reasons for deprivation due to continued absence mean that the parent is physically absent from the home, the worker will apply the following procedures in handling TANF cases based on absence while the parent is physically present in the home. These are:

1. The convicted offender living at home and performing unpaid work:

    a. Should not be the payee;

    b. Should be included in the budget and eligible for benefits as the second parent;

    c. Should not be referred to TWP, as such registration would serve no purpose;

    d. Should not be treated as an absent parent for child support purposes.

2. The sentence should be verified with the clerk of the court of jurisdiction. For example, contact the Circuit Clerk when the sentence was imposed by a Circuit Judge.

    Note: A parent or caretaker in a TANF case that is disqualified due to a felony drug conviction should not be confused with an individual who is court sentenced to unpaid work. The disqualification alone does not meet the criteria for deprivation.

Court Ordered Removal

When the court has ordered the removal of the child from the home of his parent(s), usually

because of hazardous home conditions, and orders placement in the home of another relative, continued absence will be considered to exist and to form the basis for deprivation. The court removal interrupts or terminates the functioning of the parent(s) in their role of providing care and support. The indefinite duration of the separation of the child and the parent assists in establishing absence.

Legal Adoption by a Single Parent

A child will be considered deprived of one parent due to continued absence when he has been legally adopted by a single individual or parent. Establish this fact by asking to see the final decree of adoption and recording this fact in the case record. When the child is adopted by a single parent, there is no “absent parent” unless the child no longer resides with the adoptive parent.

DEPRIVATION TERMINATED

Return of Incapacitated Parent to Work

When TANF has been granted based on incapacity of a parent and the parent resumes work the worker will:

1. Discontinue payment without review by the Medical Review Unit if income meets the family's needs or the parent agrees that he is no longer incapacitated and is able to resume his regular work.

2. Submit a new social information report, together with the former social and medical reports, to the Medical Review Unit for another decision when the parent continues to have physical or mental limitations or does not agree that he is able to resume regular work. Include all information on the type of work, his ability to perform it, and related facts.

Return of Absent Parent to the Home

When an absent parent returns to the home after the TANF case has been approved based on his absence due to hospitalization or imprisonment, continue the TANF benefit for a temporary period of adjustment not to exceed three months. Consider the parent who has been sentenced by the court to unpaid work as having "returned" to the home when he has served his sentence or has been paroled or pardoned. During this time the family will be able to overcome the effects of the absence. Of course, deprivation does not exist during this period, but the purpose of the adjustment period is to allow the parent to find work, resume his former job, learn a new skill, or otherwise resume his role as wage-earner.

Do not add the returning parent to the TANF budget and do not continue assistance beyond the three-month period. Terminate the payment before the three months have elapsed when:

1. The parent obtains work. Do this without regard as to whether or not his earnings meet the TANF budgetary requirements. When he has obtained work, the effects of his absence have been overcome, and the case must be closed because the children are no longer deprived of the support and care of the parent.

2. Or financial need no longer exists because of receipt of income or resources which exceed the budgetary requirements or cash reserve maximum.

If the worker has put the payee on written notice that eligibility will cease at the end of the three-month period, additional advance notice is not required. Otherwise, give the usual ten day advance notice period prior to termination of benefits.

If the parent returning to the home is ill or incapacitated, use the three-month period to obtain medical information, prepare a social information report, and obtain a decision from the Medical Review Unit. If incapacity is established, add the parent to the TANF budget and continue assistance based on incapacity. If incapacity does not exist, consider whether the family may qualify under TANF-UP as the basis for deprivation.

UNEMPLOYED PARENT (TANF-UP)

Unemployment of the parent who is the principal wage earner is an additional reason for deprivation when there are two able-bodied parents in the home. All other factors of TANF (Basic) eligibility remain the same, except that both parents in any family eligible for TANF by reason of unemployment must participate in the TANF Work Program, unless temporarily exempt. If either parent claims a work exemption because of incapacity, the TANF-UP case must be changed to TANF-Basic and a Medical Review decision requested immediately. The TANFUP parents are subject to higher participation hours for the Work Program, so that prolonged exemptions could adversely affect the family's time limits without work activity. Even though both able-bodied parents may be in the home, a dependent child is considered deprived of parental care or support when the natural or adoptive parent who is the principal wage earner is unemployed as defined below.

Requirements for TANF-UP Qualification

To qualify for TANF-UP, the unemployed parent must:

1. Be the principal wage earner (PWE). This is the parent who earned the greater amount of income in the 24-month period immediately prior to the application for benefits. The individual's statement is accepted unless questionable. Once designated, the PWE will not change as long as a child in the assistance unit remains eligible because of unemployment of a parent. If both parents earned the same amount in the 24-month period, the worker will designate which parent shall be the principal wage earner based on discussion with the family. The case record will be documented to substantiate the determination of PWE.

2. Be unemployed and meet the following conditions:

   a. Is not currently working and has not worked full time for at least thirty (30) days prior to receipt of TANF benefits; or

   b. Is the PWE but works less than 100 hours per month; and

   c. Has not refused a bona fide offer of employment or training without good cause within the 30 day period prior to receipt of TANF benefits; and

   d. Is the PWE parent and is not on strike.

   Full-time employment for purposes of determining TANF-UP eligibility is defined as 100 hours or more per month. Employment exceeding 100 hours in the application month can be considered temporary if the PWE worked less than 100 hours per month in each of the two months prior to application and is expected to work less than 100 hours during the month after application.

   If the PWE has been unemployed less than 30 days, the TANF application cannot be approved until after the 30 day period has ended. This will require changing the benefit start date to the 31st day prior to working the case.

3. Have a work history that establishes a recent connection to the labor force by verification of one of the following:

   a. If the PWE received unemployment compensation within one year prior to application, or could have received unemployment but did not file for the benefits, recent connection to the work force is established and no further action is required on this factor.

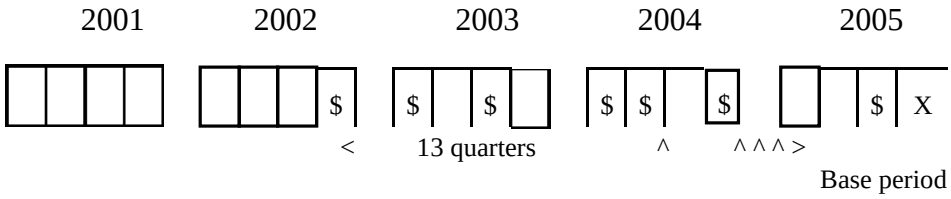
   b. PWE must have at least $50 in earnings during one or more calendar quarters within the base period of one year prior to application for TANF and there must be a total of at least six calendar quarters with $50 or more in earnings that fall within a maximum time frame of 13 quarters. The 13 quarters must include at least one quarter of earnings in the base period.

NOTE: A calendar quarter is a period of 3 consecutive months ending March 31, June 30, September 30 or December 31.

The PWE may have attended full time at an elementary school, secondary school, or vocational or technical training course designed to prepare him for employment or he may have participated in TWP or JTPA. These training/educational activities may substitute for no more than 4 of the 6 quarters required to establish recent connection to the work force.

EXAMPLE 1: Application is received October 2, 2005. This is the fourth quarter (October, November, and December). The base period covers the four calendar quarters immediately prior to the application quarter (Oct/Nov/Dec of 2004 and the first three quarters of 2005). The PWE must verify at least $50 in earnings for one or more of these quarters.

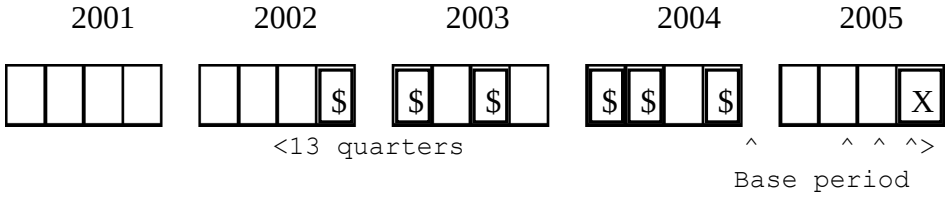
Earnings of $50 or more must be verified in at least six total quarters, the last of which must be within the base period.



On the chart above, counting back from the most recent earnings (third quarter of 2005), the PWE must have six quarters with $50 or more in earned income. Since there are seven quarters within the 13 quarter total, and at least one of these is in the base period, recent connection to the work force has been established.

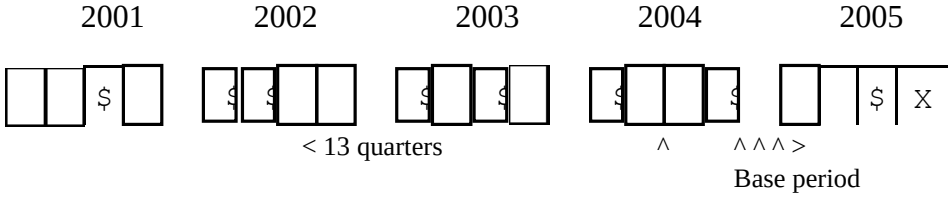
X	Application date October 2, 2005
▯	Quarters in the base period
< >	Maximum start and ending quarters for work history
$	Quarters with $50 or more verified earnings

EXAMPLE 2: The situation is the same as above, except that the third quarter 2005 earnings do not exist.

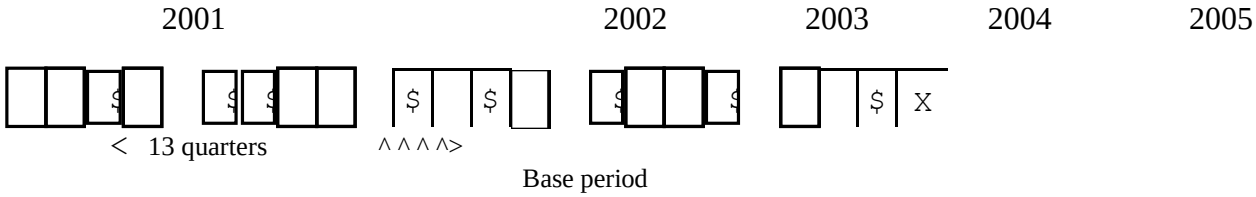


The 13 quarters start with the fourth quarter of 2004, which is the last quarter with earned income, and is still within the base period. There are still six quarters of earnings within the 13 allowed quarters, so eligibility on this factor is established. If one or more of the earnings quarters prior to fourth quarter of 2004 did not exist, there would be only five quarters of earned income and the family would not qualify for TANF-UP.

EXAMPLE 3:



In this situation, we count 13 quarters, beginning with the most recent earnings in the base period. There are only five quarters of earnings within the thirteen. However, we have two quarters within the base period with verified earnings of $50 or more. Therefore, we can "shift" the 13 quarters to count from the fourth quarter of 2004, the other earnings quarter within the base period. This causes us to "lose" the third quarter of 2005, but we "gain" the two quarters of earnings in 2002 that were outside the original 13 quarter count.



Since we now have six quarters of earnings within the total of 13 allowed, eligibility is established on this factor. If there had still not been six quarters, the family would be ineligible for TANF-UP as we cannot shift the 13 quarters back again - at least one of the 13 must be within the four quarter base period prior to the application quarter.

EXCEPTION: In order to allow young two-parent families to qualify for TANF, recent work history requirements will be waived when both parents are under 21 years of age.

4. Participate in the TANF Work Program, unless temporarily exempt;

5. Accept a bona fide offer of work/training/education unless there is good cause.

6. Claim unemployment compensation benefits when

eligible.

Explanations Relating to TANF-UP Assistance Unit (AU)

The dependent child(ren) must be living with both parents, and the relationship verified. If the mother is legally married to someone else, the family is ineligible for TANF-UP unless the paternity of the natural father in the home has been established by court order. In stepparent

situations where there is a common child, the PWE, second parent, mutual child, and the children of each parent must be included in the TANF-UP budget. In either situation, the entire assistance unit (AU) is ineligible if the family fails or refuses to cooperate in determining TANF-UP eligibility.

NOTE: The term "common child" is used to identify families in which both parents of at least one child reside together with that child(ren), regardless of the marital status of the parents, when the father has completed an admission of paternity (except when the mother is legally married to
another) or when the court has established paternity. If deprivation is claimed based on continued absence, death, or incapacity and there is no common child in the stepparent family, eligibility for TANF cannot be based on UP as the deprivation reason.

PWE Designation
Accept the individual's statement regarding the designation of the principal wage earner unless questionable. If both parents earned the same, establish PWE by discussion with individuals. In either case, document the case to justify designation of PWE.

Work History

When establishing work, training, or education quarters for recent connection to the labor force, verification is required only to the extent necessary to prove earnings of at least $50.00 per quarter or enrollment in the training/education during that quarter.

Bona Fide Offer of Employment or Training

At application, accept the individual's statement for case documentation unless questionable that (1) no offer was made, or (2) the offer was refused. A bona fide job offer is an offer at or above minimum wage for such work in the area, even if the work is unrelated to the PWE's previous work history or the pay is less than previous earnings. A bona fide training offer would be for training for a specific job, not necessarily related to prior work history or previous earnings. After approval for TANF, the case manager or Job Readiness Trainer will provide verification of refusals to accept a bona fide offer of employment or training.

Stepparent Situations

When stepparent families apply, assistance to the non-PWE parent and his or her children should not be denied solely due to waiting for the 30-day period of unemployment to be met. In these situations, the TANF case may be approved for the other parent and children who are deprived for reasons other than unemployment of the PWE. The PWE, his/her children, and any common child(ren) deprived due to the unemployment of the PWE may be added to the grant effective the month after the 30 day period of unemployment is met.

EXAMPLE: Application is made July 23 for husband, wife, common child, and her child from a previous marriage. The basis of deprivation is unemployment of the

husband, who is PWE, and was laid off on July 22. The 30-day period of unemployment begins July 23 and ends August 22, so the husband and common child cannot be eligible prior to that date. The TANF application would be approved with the mother and her own child coded IN, the husband coded ST (stepparent) and the common child coded OU for July and August. The husband and common child would be coded IN for September, assuming no change that would make the family ineligible.

In ongoing cases, when eligibility under TANF-UP must be determined because the PWE in a stepparent family becomes unemployed, this parent, his/her children, and any common children who are now eligible for TANF due to the unemployment of the PWE are added to the TANF money payment effective the month after all eligibility requirements are met. The case cannot revert to stepparent budgeting as long as the PWE is unemployed. The common child has become technically eligible because of the PWE's unemployment, so the child must be included in the AU as long as the parents meet UP requirements.

In the example given above, if the mother already had an active TANF case for herself and her child prior to the husband's loss of employment, eligibility for TANF-UP would be determined and the husband and common child added to the money payment for September, provided all required verification is received by August 31. If the family fails to provide required verification timely and then turns it in at a later date, the stepparent and common child would be added for the next month. In the situation given, if verification is not received until September 10, and eligibility is found to exist, the husband and common child would be added to the money payment for October.

Situations When the Absent Parent Returns Home

When the children are currently receiving TANF based on deprivation due to continued absence of a parent and that parent returns home, eligibility for TANF-UP must be determined. If the family is ineligible for TANF-UP because the PWE does not meet the recent connection to the work force, the family is ineligible to receive TANF with UP as the deprivation reason.

When One Parent Is or Becomes Incapacitated

If both the parents are in the home and either parent is or becomes incapacitated, determine deprivation under incapacity rather than TANF-UP. When incapacity ends, eligibility for TANF-UP may be determined.

Work Hours

The PWE must verify monthly that he/she was employed less than 100 hours per month. This is determined by the month in which the hours were worked and may not be the month in which the pay was received. If the hours worked are not on the check stub, the individual must be informed to provide this statement regarding work hours. Do not count hours by pay equivalent.

Work hours may vary per month but must not average over 100 hours per month.

Thirty (30) Days Consecutive Unemployment

The PWE must be unemployed (or working less than 100 hours per month) for 30 consecutive days prior to approval for TANF money payment. The 30-day period begins the first day after the PWE's employment ended.

1. If PWE is unemployed at time of application and has not worked in more than 30 days prior to the application, the deprivation factor has been met at the time of application and the usual timeliness standards for application processing apply.

2. If PWE applies the day after his employment ends, the family is not entitled to a money payment until he/she has been unemployed the full 30 days (or until the 31st day). If the 31st day falls in the month following application, the TANF grant would be prorated from the point of approval in the second month.

3. If the PWE is working less than 100 hours in the 30 days preceding the date of application, he/she has met the requirement on the date of application.

4. If the PWE worked 100 hours or more in the 30 days prior to application but is expected to work less than 100 hours prospectively, the application must be held for 30 days before entitlement.

NOTE: TANF-UP applications which must be held for the 30-day unemployment period will not be considered overdue when held pending only for that reason. All casework and verifications should be completed within the normal timeliness standard and the case should be ready for supervisory approval on the 31st day. The supervisor must change the Benefit Start Date on COAR screen to authorize payment.

Self-Employment

If the PWE is self-employed and claims to be working less than 100 hours per month, document the case to establish or refute unemployment based on his/her verification of earnings, work hours, and work history.

Work History Not Covered by Social Security

If PWE claims to have worked in circumstances where no record was established by payment of Social Security withholding, the burden of proof will be upon the individual to provide verification from the employer giving time periods and wage amounts.

TANF Work Program Registration

Both parents are required to participate in the TANF Work Program (TWP), unless one parent is caring for a severely disabled child or household member.

Initial Benefits

TANF-UP eligibility cannot be established for any day prior to the PWE's meeting the 30 consecutive days of unemployment. The supervisor will adjust the benefit start date in MAVERICS to account for this unique situation. Eligibility shall not begin earlier than the 31st day after employment stops. The benefit start date should be changed to the 31st day of consecutive unemployment when this does not occur until after the application date.

1. If the 30-day period of unemployment falls in the month of application and the case is ready for supervisory review and approval prior to that 31st day, hold the case until the full 30 day period has expired before authorizing benefits.

2. If the 30-day unemployment period ends in the month of application and the case is approved the following month, authorize full benefits for the second month.

3. If the 30-day unemployment period ends after the month of application, change the benefit start date in MAVERICS to the 31st day. Benefits would be prorated in the month following the application month based on the date of approval.

NOTE: DO NOT confuse the 30 day standard of promptness with the 30 day period of unemployment. The 30 day period of unemployment may end prior to application, anytime during the standard of promptness, or after the 30 day standard of promptness has ended. The application must be completed within normal timeliness standards, other than authorization of benefits, which cannot be done until the 30 days of unemployment has been met.

Authorization Periods

TANF-UP cases will be approved based on regular TANF standards.

Continued Eligibility

If the designated PWE, on whose unemployment the deprivation factor was met, continues to cooperate in TWP and does not refuse a bona fide job or training offer without good cause, the TANF-UP family will continue to meet that factor of deprivation. If other family circumstances change, these must be considered when reviewing eligibility factors.

Child Support Requirements

The TANF-UP family must cooperate with appropriate child support enforcement activities for children within that family.

Transitional Child Care

The TANF-UP assistance unit shall be entitled to Transitional Child Care (TCC) services if they meet the criteria for money payment closures. MAVERICS Notice **A802** explains potential eligibility for TCC when the TANF-UP case closes due to an increase in hours.

Transitional Transportation

TANF-UP households may qualify for Transitional Transportation as any other household that loses money payment eligibility. However, only one parent per household is eligible to receive a transitional transportation payment.

Closure of the TANF-UP case

The TANF-UP case will be closed when:

1. Unearned income makes the family ineligible, not including the one month suspended status.

2. The family composition changes so there is no longer a dependent child deprived because of an unemployed parent.

NOTE: 100 Hours Rule for UP cases: The TANF case will close when the PWE begins working 100 or more hours per month and anticipates this income to continue. If both the PWE and spouse are employed 100 hours or more per month the TANF case will close. Choose the closure reason most advantageous for the client**.**

Earned income vs 100 hours - earned income closure will supply the family with transitional services. If the spouse (not the PWE) is employed at 100 or more hours, the 100 hours will not apply and he/she will be eligible for the disregards.

3. Increased earnings or loss of disregards cause closure. The family could receive transitional childcare and one adult could receive transitional transportation benefits.

4. The PWE goes on strike.

5. Other TANF eligibility factors are not met.

NOTE: If both adults obtain employment, both should be tested for eligibility for the 6-D and 3-D disregards as appropriate. MAVERICS will not allow more than one individual to be coded to receive the 6-D or 3-D disregard; therefore the income of the two adults must be combined and entered under one person. The case must be documented and a manual count of disregard months used maintained.

Sanctions for Failure to Comply with TWP or Work Requirements

When the PWE or any adult in the TANF-UP case fails to participate in a work activity or refuses a bona fide offer of a job or training without good cause, the TANF case will close with a timed work penalty.

REQUIREMENTS

The age limit for a dependent child to receive a TANF benefit is 18. The child will no longer be eligible beginning with the month after his/her 18th birthday, unless the date of birth falls on the first of the month. The child must be under 18 at least one day of the month to be eligible. The date of birth must be verified for each child in the TANF assistance unit.

A caretaker relative, or grantee relative, is a parent or other adult relative within the specified degree of relationship who is 18 years old or older. State law requires minor parents (*under age 18*) who are not married to live with their parent(s) or other adult caretaker relative in order to receive assistance. Requests for exemptions from this provision must be approved on a case by case basis by the Economic Assistance Policy Unit. See Minor Parent Criteria.

VERIFICATION AND DOCUMENTATION

The long birth certificate with the Vital Statistics registration number listing the child's name, date of birth, and the name of the child's parent(s) is the preferred verification document. However, other types of documentation may be used whenever this is not available.

Selection of Documents

In selecting records or documents to be used to establish date of birth or age, note the following principles:

1. One important consideration in using a record is to note whether or not it might have been made in order to set down the birth date or other facts to be used in establishing eligibility for TANF.

2. Entries made in personal records, such as a family Bible, birthday book of the family, and the like, must give evidence of having been made in times past. That is, do not accept a newly written record of the date of birth or other information being sought.

3. The record must be free of erasures, mark-overs, or other changes.

4. Do not keep original documents, such as birth or baptismal certificates, marriage licenses, or other documents of personal value to the applicant. Either make a copy of the document or record the information and return the document to the applicant.

5. There is no requirement for a record to have been in existence for any specified period prior to the date of application.

Recording Documentary Evidence

Record on form **MDHS-EA-301C, TANF Basic Data Form**, the nature of the document used and its pertinent content, as follows:

1. Public Records: Identify the type of record, the date of the record, and the information contained in it. The worker will record the date seen and sign the entry.

2. Personal Records: State the type of record, whether family Bible, birthday book, baptismal or marriage certificate, insurance policy, or other document. State what the record shows with regard to the date of birth or other factor of eligibility for which documentation is being sought. The worker will record the date seen and sign the entry.

   If the record is in the possession of an individual in another county, ask the other county department to see the record and supply the information to be used.

Conflicting Information

When records give conflicting information about a date or other point of eligibility, the conflict must be resolved and a decision made as to the most valid piece of evidence. Base the decision either on a preponderance of evidence or the greater merit of one record compared to a more doubtful one. Preponderance of evidence means that a number of pieces of evidence agree and thus outweigh another which is different.

Some examples of less reliable documents are burial policies, employment records, medical records, etc. A hospital record may give an approximate age while burial policies or employment records may contain altered ages, up or down, which are advantageous to the individual giving the information.

If conflicting evidence is found, the worker must evaluate it with a supervisor if needed, make a logical decision in view of all the facts available, and then record the reasons for accepting one or more pieces of evidence and disregarding another. Comparing the document with other social history data which the applicant has given may be helpful.

Sources for Establishing Age

The date of birth of each child must be established before approval for TANF. Establish the age of the payee *when there is doubt* that the payee is under or over 18 years of age or is under or over age 60 or 65. Only when the payee's age impacts on another eligibility factor is it necessary to furnish actual proof of age for a payee. Given below are sources for establishing or documenting age and in some cases relationship as well.

- A public or religious record of birth established before age five (5), such as a birth certificate or baptismal record. A short form birth certificate is sufficient to establish date of birth, but will not verify relationship. The long form birth certificate may be used for both eligibility factors.

- A school record.

- Church record.
- A State or Federal census record.

NOTE: A census record is often difficult and expensive to obtain. If there is no other age proof available, the individual may write to the U.S. Census Bureau, Pittsburgh, Kansas 66762, for information.

- A statement signed by the physician or midwife who was in attendance at the birth, as to the date of birth shown on his records.
- A Bible or other family record, which must be seen by the worker and fully documented
- An insurance policy.
- A marriage record.
- A voter registration record.
- A military or draft record.
- A delayed birth certificate.
- Applicant's child's birth certificate showing applicant's name and age.
- A U.S. passport.
- Driver's license.
- State identity card.
- Any other record which shows age or date of birth, such as hospital or Health Department treatment record, labor or fraternal organization record, permits, licenses, etc.
- WTPQ.

Revised 08-01-06

GENERAL

The state has no durational residency requirement for determining eligibility for assistance. Durational residency refers to a requirement that the individual(s) requesting assistance has been a resident of the state for a set minimum time period. Eligibility for TANF with respect to family members' status as residents will be determined according to statewide policy requirements and benefit levels when the applicant states his intent to reside in Mississippi. Receipt of TANF benefits in the family's prior state(s) of residence must be determined prior to approval when this is questionable.

DEFINITION

For purposes of TANF, residents of the State of Mississippi are individuals who are voluntarily living in Mississippi with the intention of making their home here. In other words, residence is based on the concept of intent to reside. A permanent mailing address shall not be a requirement for receipt of assistance.

REQUIREMENTS

The specific residency requirements for eligibility are:

1. The family members must not be receiving assistance from another state, and

2. The family members must not be in Mississippi for a temporary purpose.

EXCEPTION: Federal regulations further specify that migrant or itinerant workers may be considered residents if they came to Mississippi with a job commitment or seeking employment, whether or not they are currently employed.

Applicants

For the TANF applicant who states intent, physical presence in the State of Mississippi in addition to the above two requirements would establish residency in this state. However, when the worker thinks or an applicant states that he received assistance from a former state of residence, ask him to provide his notice of closure. If he does not have this in his possession, contact the appropriate welfare agency by phone and/or send form **MDHS-EA-914, Out-of-State Inquiry**, by mail or fax. If confirmation of closure is not received by the end of 30 days, proceed with the approval of the application and notify the agency in the other state that the applicant and his family are now living in Mississippi and give the effective date of approval for assistance in this state.

NOTE: Most county offices have a national welfare directory with the agency names, addresses, and phone numbers for offices in other states. This directory may be located with the Child Support or Social Services offices, or with Economic Assistance.

COUNTY OF RESIDENCE

State statutes governing receipt of assistance specify that the application for TANF shall be made in the county in which the applicant and his family are living and making their home with the child(ren).

This provision establishes the responsibility of the county in which the family is living for accepting the application, determining eligibility, and authorizing or denying assistance, as well as maintaining contact with the recipients after assistance is granted. Recipients are free to move within the state. This is not a reportable change, however if reported or known to the agency, the case would be transferred to the new county for proper handling. If the client comes into the office to report a change in address, the client should complete the MDHS-FO-116, Change of Address form.

TANF TIME LIMITS

When the applicant has received TANF benefits in another state, the number of months the family received benefits that included a needy caretaker relative must be verified and added to the 60-month maximum benefit counter in MAVERICS. The request to adjust the time limit counter(s) must be submitted to the Help Desk on the **MDHS-MIS-10.2, MIS Incident Control Form**, with the verification from the other state(s).

DENIAL OF ASSISTANCE

Individuals Convicted of Misrepresentation of Residence

The individual who is convicted in Federal or State Court of having made a fraudulent statement or representation, with respect to the individual's place of residence in order to receive TANF (or SNAP) benefits in two or more states simultaneously shall be denied assistance for a period of 10 years. Verifications must be obtained, or provided, to manually track the convictions and penalty times served before reapproval for benefits. The case containing such an adult should be labeled as "Permanent" and provide an immediate alert to anyone handling the case that the individual must be disqualified until the 10 year period is served. Other members of the family may be eligible based on income, resources and all other eligibility factors. See *Chapter 6, Special Budgeting Procedures,* for budgeting procedures for disqualified individuals.

TERMINATING RESIDENCE

Individuals are residents of Mississippi until they abandon residency here. Continuity of residence is not interrupted by temporary absences, defined as three months or less, with subsequent return to Mississippi or the intent to return when the purpose of the absence has been accomplished. An absence of longer than three months requires that the county contact the recipient prior to the end of the third month and determine intent with regard to returning to Mississippi. An individual who has been approved for assistance in another state will be considered to have abandoned residence in Mississippi. For recipients who plan to relinquish residence in Mississippi and establish residence in another state, follow these procedures:

1. Prior notice given by recipient: Let the recipient know that eligibility will terminate in the month following that in which he/they leave Mississippi. Give or mail the payee the 10-day advance notice of closure unless the client makes his request in writing for immediate case closure.

2. No prior notice given by recipient: When the family or a member of the family leaves the state without notice to the county office, the county will assume that the absence is to be a permanent move. When the departure becomes known and the family cannot be reached or collateral contact cannot confirm the family's plans, send the non-advance notice immediately for closure of the case and proceed with closure or other appropriate action unless the payee notifies the county of a plan for a temporary absence. Send a copy of the advance notice to the economic assistance department in the other state, when known. These situations may require a claim to be identified and worked.

3. With or without prior notice: When another county within the State notifies the county that the TANF family has moved and is applying for assistance there, take appropriate action to transfer the case to the new county. See MAVERICS procedures in *Volume X* and mail the case record to the new county after completing alerts, documentation, etc.

If the payee notifies the county that his or the family's absence is temporary, and there is a plan to return, set a tickler to verify return to the state.

REQUIREMENTS

The parent or other caretaker relative must disclose or apply for a Social Security account number for all members of the assistance unit. The application for and disclosure of Social Security account numbers is a technical factor of eligibility for assistance through the TANF and other assistance programs. Only those individuals for whom we have a Social Security number or for whom an application for a number has been completed are eligible to be included in the assistance budget. The enumeration requirement will be considered met at application when one of the following exists for each member of the assistance unit:

1. Provision of the Social Security number (SSN), either verbally or by showing the card or other document containing the number for each individual in the assistance unit;

2. Receipt of a completed **MDHS-EA-949, Referral for Social Security Number Application,** showing SS-5 completed;

3. Receipt of form SSA-5028, Receipt for Application for a Social Security Number, completed by the Social Security Administration (SSA) office;

4. Proof of the request for enumeration at birth by copy of the certified birth certificate (long form) with the name of the newborn, official signature of a hospital employee, and a check-off box attesting to the application for a SSN for the newborn;

5. Copy of a revised SSA-2853 including, at a minimum, the name and address of the hospital, the date and the signature of an authorized hospital employee, and the name of the parent and newborn;

6. Receipt of any official statement from the SSA that provides a Social Security number or verifies that an application has been made to obtain a number.

Only items that include an actual SSN will meet the enumeration requirement on an ongoing basis. Proof of application for a number will be valid only prior to receipt of the actual number. The SSN must be recorded in the case record for each individual receiving assistance no later than the next regular case review, unless good cause is documented. The application must not be approved without the SSN or verification of the SSN application for the PI. Duplicate or multiple SSN's and other discrepancies must be resolved prior to approval or addition to the TANF case. The quarterly MAVERICS reports of individuals without SSN's must be reviewed upon receipt and appropriate action taken to request missing numbers and resolve any discrepancies.

RESPONSIBILITIES OF THE DEPARTMENT

Legislation and Federal regulations dictate that the Department has the responsibility to:

3. Inform individuals that enumeration is an eligibility requirement and that failure of the

payee to apply for or disclose a Social Security number for all individuals in the assistance unit means that the needs of the payee and any child for which the individual refuses or fails to comply cannot be included in the budget, though their income will be included in determining eligibility and benefits.

2. Inform individuals who have applied for SSN's that the number must be reported upon receipt or no later than the next regular case review, unless good cause is documented.

3. Inform individuals that the Social Security account number will be used in the administration of the TANF Program and the TANF Work Program as a means of identification in securing information through the Income Eligibility Verification System (IEVS) as well as other records to identify wages and resources.

4. Inform individuals that the Social Security Act is the authority for the requirement of application for or disclosure of these numbers.

5. Refer individuals using form **MDHS-EA-949, Referral for Social Security Number Application**, to the Social Security Office to make application for a SSN when appropriate.

6. Enter the SSN in MAVERICS when the individual already has an account number or when the individual receives a number(s) that was applied for and reports the number(s) to the worker.

7. Document the application for the SSN. When this is done for a newborn on the birth certificate application, include copies of the documents.

8. Send periodic request for information notices (MAVERICS Notice **A908)** to families in which an individual has not reported receipt of the SSN that was applied for and take appropriate action on the response.

9. Inform individuals when there are unresolved discrepancies in Social Security numbers, and assist as needed to resolve these.

OBTAINING THE SOCIAL SECURITY NUMBER

The Social Security numbers for all individuals in the assistance unit must be provided and documented in the case record and in MAVERICS. If previous documentation appears incorrect, ask the payee to provide additional information to resolve the discrepancy.

If the payee states that the individual has a SSN, the EW may obtain the SSN from any of these sources, if verification is necessary to resolve a discrepancy:

3. The individual's Social Security card.

NOTE: A metal or other non-official card that contains the SSN is unacceptable as verification of a SSN.

2. The BENDEX, State Data Exchange (SDX), or correspondence from the Social Security Administration.

3. The Social Security Number Validation identifier in MAVERICS on **CLPR**.

4. Individual's statement or other documents containing the Social Security number, such as driver's licenses, wage stubs, etc.

5. WTPR screen.

After it has been verified that an application for a SSN was made, the payee must be told to provide the SSN as soon as it is received, with one exception. For recipients enumerated through the enumeration at birth project (EAB), the SSN must be reported at the first redetermination following the receipt of the number. The EW may assist the payee in obtaining verification of the SSN if it has not been received within a reasonable period. Generally, receipt of a SSN through the EAB process requires up to 13 weeks, or one calendar quarter, maximum. Unless there are other problems related to SSA requirements, applicants for a SSN should receive their number within three (3) months or less in most instances. It is the responsibility of the individual, with assistance from the worker as necessary, to follow-up when the SSN has not been received and to continue to take appropriate action to get a number.

Once the SSN has been received and is reported to the EW, record the number and enter the SSN in MAVERICS by completing an inquiry on the individual and making the change on the **CLMA** screen.

Whenever possible, a copy of the source document used to obtain the individual's SSN should be filed in the case record with other basic data materials on the left side of the TANF, or generic material, as appropriate. However, remember that hard copy proof of a number is not mandatory and no penalties may be applied for failure to provide verification of the number, unless required to clear up a discrepancy.

VALIDATION OF SOCIAL SECURITY NUMBERS

The worker should document the case record and review MAVERICS when the individual reports receipt of the SSN. Once the SSN is entered in MAVERICS whether at time of application or at a later date, it will be validated by automated tape match with the SSA through the IEVS computer match process. When the individual is added to MAVERICS, the system sets the code to N (not validated). This validation code appears on the CLPR screen after the SSN. Entry of the validation code on CLPR is an automatic system process and cannot be entered by the worker even when the Social Security card is available for verification. If the individual's identifying data changes, the validation code resets to N and the process is repeated. Whenever there is a discrepancy, when MAVERICS alerts the worker to a problem, and/or upon

receipt of the MAVERICS listing of individuals without a SSN, the county worker must take any necessary steps to resolve the situation.

When application for a SSN was made through the enumeration at birth process, a MAVERICS/SSA automated match is not possible. The individual must provide the SSN to be entered in MAVERICS for validation.

The validation process includes the following situations:

1. When the individual's SSN matches perfectly with SSA, MAVERICS will change the validation code from N to Y (validated). No further action is required unless the worker later receives information which makes this SSN invalid.

NOTE: The SSN validation can occur as a result of the initial Wire Third Party Query process. See MAVERICS instructions for the WTPQ procedure for verifying income from SSA/SSI benefits.

2. When the individual's SSN, as provided, does not match with SSA, the validation code will remain N, and an IEVS SSN Validation Match alert will be created. The worker may be able to resolve the discrepancy or may need to contact the individual.

   Any discrepant information between MAVERICS and the SSA will generate a non-valid match. Names must match exactly in spelling, initials, etc. If the name and number match, but there is a discrepancy in date of birth or sex, the SSN will not be validated and the Validation Match alert will be generated. Therefore, care in entering correct information may prevent validation problems.

3. When the SSN has been applied for through the **MDHS-EA-949, Referral for Social Security Number Application**, and there is a perfect match with SSA, the SSN will be automatically entered on the MAVERICS records. If the individual is included in a TANF or food stamp case, the system will enter EN (enumeration) as the verification code on the **SSDO** screen. The validation code on **CLPR** will be changed from N to Y. The worker should review MAVERICS, document the case record with the number, and resolve any discrepancies.

4. When there is no SSN on the MAVERICS records, an IEVS SSN ENUM/VAL Match Data alert will be created. The validation code will remain N and periodic alerts will be generated.

MAVERICS ALERTS AND NOTICES

To assure prompt reporting and MAVERICS entry for SSN validation, MAVERICS produces SSN alerts and a quarterly listing of individuals/cases without SSN's. The alert creation process runs weekly to look for any individuals without a SSN in an active case.

When an individual meets the criteria, the system calculates three months from the current date, creates an alert with text SSN REQUIRED FOR (NAME OF INDIVIDUAL), and enters the alert with a DUE DATE of three months. The alerts will be created for individuals without SSN's every three months. If the worker deletes the alert but does not enter a SSN for the individual, another alert will be created at the end of the second three months. The alerts will continue to be created every three months for up to one year until a SSN is entered for the individual or there is no longer an active record for that individual.

MAVERICS notice **A908** is intended for use to request a SSN for anyone, including newborns. If more than one individual in the same case needs to report a SSN, a separate notice can be sent for each individual, or the request may be added in the worker comments section at the bottom of the notice.

To assure that we obtain SSN's as quickly as possible, the worker will follow this procedure:

1. When the first SSN alert is received on an individual with no SSN, send the **A908.** On the notice, enter the

   - name of the individual whose SSN is being requested
   - the date of the SSN application, and
   - the date by which the information must be received (10 days).

   The worker must set an appropriate tickler/reminder to take action.

2. If there is no response at all from the individual within the 10 days, the worker will take action to close the case for failure to provide information, providing the required advance notice.

3. If the individual responds with the requested SSN, document appropriately in the case record and in MAVERICS for system validation.

4. If the individual responds to say that he has not yet received the SSN, the worker will document the case record to show the response and set a tickler to send the individual another notice in one-month. The tickler could be a screen print of the original notice or other document.

5. If, after receipt of the second system generated alert or at the time of the next case reevaluation, the individual continues to report that he has not received the SSN even though there is verification that he applied, start over with the **MDHS-EA-949** process. Note in "Remarks" section of the **MDHS-EA-949** the reason for request.

6. Document the new SSN application date in MAVERICS and the case record, and begin the alert/notice routine again after the next three-month SSN alert is received. Changing the SS-5 date does not change the MAVERICS three-month alert creation cycle. The notice history and case documentation of the individual's response provide proof that we

received and/or the individual reported the SSN timely and that the worker took appropriate action. The notice process applies to all programs. Documentation will be filed as appropriate in the generic section of the case file.

NONCOMPLIANCES AND PENALTIES

Disclosure of the Social Security number or proof of application for a SSN is mandatory prior to case approval for the grantee relative (PI). Refusal or failure to provide the SSN or proof of application requires denial of the TANF application.

When a payee refuses or fails to apply for a Social Security number for a dependent child, both are sanctioned. That is, their needs are not included in the assistance budget but income, both unearned and earned, is included. The appropriate income disregards for the case are allowed, but the noncooperating parent and the child(ren) for whom enumeration has not been met cannot be included in the budget. Both the parent and the child(ren) will have a TANF participation code of

DI. In a one-child case where the grantee relative has failed to cooperate with enumeration requirements, neither the child nor the needy caretaker is eligible until the enumeration requirement has been met. An application may be rejected if this requirement is not met within the standard of promptness period.

EXAMPLE: A mother applies for TANF for herself and her three children. The mother and two of the children have Social Security numbers. If the applicant fails or refuses to follow through with the referral or fails to follow up to secure needed information for the Social Security office to complete the SS-5 for the third child, only the needs of the children who have Social Security numbers can be in the assistance budget. However, any income as described above of the mother and the third child will be included in the budget and their participation codes in MAVERICS are DI.

When the payee is making every effort to meet the enumeration requirement for the child(ren) but has been unable to do so, this does not constitute refusal to cooperate. The payee can be included in the budget along with the children for whom enumeration has been met. The third child will be included when Social Security returns the **MDHS-EA-949** showing that the SS-5 has been completed or the enumeration requirement is otherwise met. The child's participation code should be DI until the enumeration requirement is met, and then should be changed to IN. The case record must be documented to show why enumeration has not been met for the disqualified child and what efforts the payee is making to resolve the situation.

Case documentation is most important as to why a payee is sanctioned or why a child is omitted from the budget. The worker needs to make all reasonable efforts to help the individual secure needed information and explain thoroughly the consequences of failure to follow through with the referral procedure. The SSN must be provided for referral and tracking in the TANF Work Program.

NON-FIANANCIAL CRITERIA: CITIZENSHIP AND ALIEN STATUS

Revised 08-01-06

GENERAL

To participate in the TANF Program, an individual must be either a citizen of the United States or an alien lawfully admitted to the United States who must meet certain alien eligibility criteria. The presence in the household of an alien who does not meet the eligibility criteria shall not prevent the remainder of the assistance unit from applying for and receiving TANF benefits, if otherwise eligible.

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, enacted August 22, 1996, limited participation in the TANF Program to qualified aliens who meet certain Immigration and Nationality Act (INA) statuses and certain veterans or active duty military personnel and their families.

CITIZENSHIP AND ELIGIBLE ALIENS

Individuals in the following classifications are eligible to receive TANF:

For an Unlimited Period

1. A United States citizen.

2. An alien lawfully admitted for permanent residence who has worked 40 quarters of coverage under Title II of the Social Security Act, or can be credited with such qualifying quarters. A qualifying quarter includes one worked by a parent of an alien while the alien was under 18 (credits of quarters before the child is born are allowed) and a quarter worked by a spouse during their marriage if the alien remains married to the spouse or the spouse is deceased. Beginning January 1, 1997, any quarter in which the alien received any Federal means-tested benefit, such as SSI, TANF, Food Stamps, or HUD housing assistance, for example, is not counted as a qualifying quarter.

3. An alien who is a veteran of the U. S. Armed Forces and was honorably discharged for reasons other than alienage; an active duty member of the U. S. Armed Forces, other than active duty for training only; and the spouse and unmarried dependent children of such personnel.

   Eligibility for the surviving spouse of a deceased veteran or individual on active duty will continue, provided the spouse has not remarried and the marriage fulfills the requirements of Section 1304 of title 38, U.S.C.

NOTE: “Unlimited Period” does not mean that there are no time limits applicable to the TANF case; only that the qualified alien may receive benefits, if otherwise eligible, under the same time limit maximums as all other TANF assistance cases.

For Five (5) Years After the Designated Alien Status is Obtained

1. An alien admitted as a refugee under Section 207 of the Immigration and Nationality Act.

2. An alien granted asylum under Section 208 of the Immigration and Nationality Act.

3. An alien whose deportation is withheld under Section 243(h) or Section 241(b)(3) of the Immigration and Nationality Act.

4. An alien lawfully admitted for permanent residence, if the alien entered the U.S. within the last five (5) years as a refugee, an asylee, or deportation was withheld.

INELIGIBLE ALIENS

An alien who is not in one of the above listed eligible categories will not be eligible for TANF. Some of these aliens may be lawfully admitted, but only for a temporary or specific period of time. Such aliens may include visitors, tourists, students, and diplomats. In addition, any alien who has entered or remains in the United States unlawfully is not eligible for assistance. After five years, those aliens listed as eligible for five years after designated alien status is obtained, will no longer be eligible.

INCOME AND RESOURCES

The ineligible alien's income will be prorated and the resources shall be counted in their entirety to the remaining eligible members in the assistance unit. This is accomplished by coding the ineligible alien DI for TANF participation.

VERIFICATION OF ALIEN STATUS

Prior to approval, verification of alien status must be presented by the applicant. If the alien applicant does not provide documents establishing his alien status on a timely basis or if his alien status is questionable, the eligibility of the remaining household members shall be determined in accordance with regular TANF requirements, coding the questionable alien DI pending verification of status. If adequate documentation is subsequently received, the worker shall act on the reported change in accordance with appropriate timeliness standards.

Once the applicant has submitted acceptable documentation of his alien status, benefits cannot be denied, delayed or reduced on the basis of his immigration status, pending verification from U.S. Citizenship and Immigration Services (USCIS).

The alien may present USCIS documents that verify alien status. The most commonly used immigration documents include, but are not limited to, the following:

1. Form I-551 - Resident Alien Card and Conditional Resident Alien Card
2. Form I-151 - Alien Registration Receipt Card
3. Form I-94 - Arrival-Departure Record
   (Annotated with Section 207 or refugee, asylum, or paroled.)
4. Form I-688 - Temporary Resident Card
5. Unexpired foreign passport when it contains an endorsement "Processed for I-551. Temporary Evidence of Lawful Admission for Permanent Residence"

If the USCIS document provided by the applicant does not clearly indicate the alien status or if the document presented is questionable, the worker must send **USCIS Form G-845S** (*SAVE form*) with a photocopy of the alien's document to the appropriate U.S. Citizenship and Immigration Services office to validate alien status.

For applicants claiming eligibility based on 40 quarters of work, the worker will access **WTPQ** inquiry from **INME** menu to verify the quarters from Social Security Administration's automated system.

Applicants claiming military service must provide verification of a veteran's honorable discharge or status in the service for active duty member.

SPONSORED ALIENS

Qualified aliens with a sponsor who signed the affidavit of support prior to December 19, 1997, will have deeming procedures for three years. If **Form I-864, USCIS Affidavit of Support** is signed on or after December 19, 1997, all income and resources of the sponsor and their spouse will be considered until the alien has worked 40 qualifying quarters of coverage or becomes a naturalized citizen. See *Chapter 6, Budgeting Process*, for procedures to be followed.

QUESTIONABLE CITIZENSHIP STATUS

A member of the assistance unit whose citizenship is questionable shall be ineligible until proof of citizenship is obtained. Citizenship is not verified unless questionable.

REPORTING ILLEGAL ALIENS

The appropriate USCIS office shall be informed whenever it is determined that any member of a TANF assistance unit is ineligible because the member is present in the United States in violation of the Immigration and Nationality Act. The worker will report illegal aliens to the county director. Each county will send a monthly report of known illegal aliens to the Economic Assistance Policy Unit, and State Office reports quarterly to the U.S. Citizenship and Immigration Service.

When the grantee relative indicates inability or unwillingness to provide documentation of alien status for any member of the assistance unit, that member should be classified as an ineligible

alien. In such situations, the caseworker shall not continue efforts to obtain that documentation. The worker is cautioned that a determination that an individual is an ineligible alien is not equivalent to a determination that an individual is an illegal alien. Therefore, the report to USCIS is submitted only if there is evidence that the individual is an illegal alien.

SPECIFIED DEGREE OF RELATIONSHIP

When a needy child does not live with a parent or parents, he must live in the house with another adult relative who comes within the specified degree of relationship in order to be eligible for TANF. The child and caretaker relative must live together in a place of residence maintained by the relative as his home.

Relatives Within Specified Degree

The following is the list of relatives, other than a legal parent, who come within the specified degree of relationship:

1. Brothers or sisters, half-brothers or half-sisters, uncles or aunts, first cousins, first cousins once removed (*also known as second cousins*), and nephews or nieces. This group also includes individuals described by the prefix of grand, great, or great-great. However, only great-great-great grandparents are designated as specified relatives.

   First cousins are defined as the children of the brothers and sisters of the dependent child's mother and father; in other words, the children of their uncles and aunts. First cousins once removed, or second cousins, are the children of the parent's first cousin or the children of the dependent child's own first cousin.

2. Stepfather, stepmother, stepbrother, and stepsister, but not the step-grandparent. The relationship of step-grandparent occurs when one of the child's own parents remarries. For instance, if the child's own mother dies and his father marries the second time, the second wife becomes the child's step-mother. Then the step-mother's parents become the child's step-grandparents.

   A grandparent-in-law is within the required degree. The relationship of grandparent-in-law occurs when one of the child's grandparents remarries. For instance, if the child's paternal grandmother dies and his paternal grandfather marries again, this second wife of the child's grandfather becomes the child's grandmother-in-law.

   To restate, a step-grandparent is the parent of the child’s stepmother or stepfather, and is not within the specified degree of relationship for TANF approval. A grandparent-inlaw is the spouse of the child’s actual grandparent, from a remarriage, and is within the specified degree of relationship for TANF approval.

3. Individuals who legally adopt a child or his parent, as well as the natural and other legally adopted children of such individuals. All relatives of individuals who adopt children become the relatives of the adopted children, just as if there were a blood relationship.

4. Spouses of any individuals named in the above groups, even if the marriage is

terminated by death or divorce. Although no "legal" relationship remains between the payee and child, the widow/widower or divorced spouse of a blood relative will remain within the specified degree of relationship for TANF purposes.

5. A natural or biological parent whose child has returned to this parent's home after being legally adopted by another individual. In such instances, the natural parent is no longer legally responsible for the child and the adoptive parent(s) must be reported to the Division of Child Support Enforcement in order to meet the eligibility requirements for TANF. The adoptive parent is now the parent who is legally obligated to provide food, shelter, and clothing and to care for and maintain the child.

Effect of Custody

The fact that there has been judicial consideration of the child's circumstances and that the court may have taken jurisdiction of the child or given legal custody to another agency does not constitute a barrier to the child's being considered as living with a relative. The relative, of course, must exercise responsibility for the child, and must be within the specified degree of relationship. An individual with legal custody of a child, but who is not within the specified degree of relationship may not have a TANF case for that child.

Guardianship

To be eligible to receive TANF for a child, the guardian or conservator must be either (1) the parent or other specified relative with whom the child lives or (2) the guardian or conservator of the parent or other specified relative with whom the child lives. In the second situation, the guardian would usually be the protective payee for the case with his/her name entered on the **EBCR** screen to receive and handle the TANF benefit.

Payment cannot be made to a legal guardian or conservator of the child if this is not a relative within the specified degree of relationship with whom the child lives. If such is the case, the worker should obtain the consent of the guardian before making a specified relative, not the guardian, the grantee relative. Guardianship is also addressed under corrective authorization procedures.

ESTABLISHING RELATIONSHIP

The worker will obtain and record factual information establishing the relationship of the child to the relative with whom he lives on the **MDHS-EA-301C, Verification of Age and Relationship**. For children living with their parent(s), long form birth certificates are the usual source of proof. For other methods of verification, see *Chapter 3, Age - Sources for Establishing Age*, for suggested sources.

One of the most difficult kinds of relationship to establish is that of the child to a relative of a

putative father, usually the mother of this alleged father in whose home the child is living or will live. If the putative father has been located and is willing to follow the legal procedures for establishing paternity, refer him to the Division of Child Support Enforcement to establish relationship between the child and the putative father. If this is not possible, other sources of information must be considered. If paternity cannot be established with the reported putative father, then relationship to the caretaker relative cannot be established.

If the mother of the child can be located, she is usually able to assist in establishing relationship to a relative of the putative father, but if the mother has died or deserted, the worker will have to depend on other sources to furnish information that may lead to individuals who can establish the facts. For example, if the mother, other relatives of the mother or putative father, or close friends can furnish the names of individuals in the community where the mother and putative father lived together, these individuals can sometimes make affidavits as to the fact that the mother and putative father lived together at a known address, were accepted as man and wife at a specified date, and that the child was born to them of this union at a definite time. If such information has to be used, statements should be obtained from more than one individual, and each individual giving information in this way must give definite facts and state how he knew that the situation existed at the time.

CHOICE OF CARETAKER RELATIVE

In TANF, the mother or other female relative most frequently makes application and becomes the payee. A legal parent in the home is always the caretaker relative, even when a protective payee is required. The caretaker relative is the primary individual (PI) in MAVERICS. The PI may or may not be a needy caretaker when other than a legal parent. The legal parent will be a needy caretaker unless he/she is an SSI recipient and therefore technically ineligible for TANF or is disqualified from the budget for reasons such as enumeration or alienage.

When Both Parents are in the Home

This situation will occur in cases of deprivation based on incapacity, unemployed parent, or court sentence to unpaid work. When both mother and father are in the home, either may be the payee and they should come to a decision on this point. When there is already a known MAVERICS case in the name of one parent, register the application in this name/number unless there are special circumstances to consider, such as the disability of one parent.

When Parents Are Deceased or Have Deserted Child(ren)

When children have lost their parents and live with another relative, the worker must evaluate the relative's interest in, attitude toward, and feelings for the children as well as the health and physical arrangements in the home of this relative. It may be better for the children if another relative accepts them in his/her home. In these situations, the Division of Family and Children’s Services may be able to help the family work out the best plan for the selection of a caretaker relative.

When Parent is Under 18

When the parent is a minor under age 18 and he/she is in a TANF budget as a dependent child, the minor's child will be added to the TANF assistance unit. The child may be subject to the family benefit cap. The minor parent and his/her child must reside with the minor's parent(s) or another adult caretaker relative within the specified degree of relationship in order to receive TANF. She/he may not be the payee for the TANF case for her own child(ren) unless an exception is granted by the Economic Assistance Policy Unit.

When Parent is TANF Child and Becomes 18

When the parent is a TANF child who becomes 18, both mother and baby must be removed from the caretaker relative's TANF case. The 18-year-old must make a separate application for her/himself and the child(ren), if assistance is needed. If the young mother is incompetent mentally or physically to be the payee, the young parent must still be the payee but her own mother or other caretaker relative may be named as a protective payee.

CHOICE OF NEEDY CARETAKER RELATIVE

Introduction

When a child has a legal parent in the home, that parent must be the grantee relative and will be the needy caretaker, included in the TANF budget, unless receiving SSI or technically ineligible.

In situations where an adult other than a legal parent is the grantee relative, that individual may or may not be a needy caretaker. The family must choose who will be the caretaker relative when more than one adult is in the household and meets the qualifications. For example, a child may live with his grandparents. Both adults cannot be caretakers, but they may choose which will be the PI and caretaker. The worker will explain the advantages and disadvantages of each possible choice and allow the adults to decide.

A stepparent may not be included in the TANF benefit as a needy caretaker when there is a legal parent in the home, unless deprivation has been established by reason of incapacity of the parent or stepparent and there is a common child.

Definition

When the parent(s) of the child(ren) is not in the home, the TANF case may include one needy caretaker relative who meets all of the following requirements:

1. Is exercising parental control and providing care for the child or children;

2. Is living in the home with the child or children;

3.

3. Is related to the child or children within the specified degree;

4. Is determined to be financially needy and has his basic requirements and income included in the TANF money payment budget;

5. Is not a recipient of SSI, or does not have his requirements included in another assistance budget.

Individuals Not Qualifying

Certain individuals do not qualify as a needy caretaker. Such people include:

1. A payee who is a relative other than a parent and who fails to qualify for inclusion in the budget under the criteria listed above, or who does not wish to be included.

2. A parent whose needs are not included in the budget due to receipt of or inclusion in an SSI grant consideration or technical ineligibility due to application of the penalty for noncooperation with enumeration requirements or ineligible alien status.

Second Parent Eligible for Money Payment

A second parent can qualify for TANF benefits as a recipient of TANF when all of the following requirements are met:

1. He is the legal parent of at least one child in the budget or of one child who would be in the budget if not receiving SSI;

2. He is living in the home with the eligible child(ren);

3. Deprivation is based on his incapacity, the incapacity of the other parent, court ordered work without pay, or unemployment of the principal wage earner;

4. His basic requirements are included in the TANF budget. This means that he is not a recipient in his own right or does not have his requirements included in another assistance budget.

Occasionally, an unusual situation may occur in which the other legal parent of a child of a TANF minor mother may qualify to have his needs and income included in the TANF budget and be eligible for all TANF benefits. Such an example is given in *Chapter 6, Minor Mother Budgeting*, with instructions for handling.

Establishing Parental Control and Supervision

In determining that the caretaker relative other than a legal parent has parental control and

supervision of the child, the worker will discuss with the applicant:

1. The circumstances under which the child became his responsibility,

2. The whereabouts of the parent or parents,

3. The relative's plans for the child's care and education,

4. And the other factors which ordinarily govern parents or parental figures in the exercise of duty toward their child or children in their care.

If the parent or other adult relative states that the child is physically present in the home with him, the eligibility worker will establish this fact through the discussion with the applicant during the initial interview. The worker is not required to see the child or children, though this will be done in instances in which a question arises as to whether or not the child is in this home or under the relative's parental supervision. A discussion of living arrangements, school attendance, and problems arising in the management of the home and child will all assist in establishing the child's presence in this home.

The child(ren) can be temporarily out of the home for medical care and still meet the requirement of "living with". However, medical care excludes treatment of children committed to a mental hospital. Also, children committed to the state training schools are no longer under parental control and supervision and are not eligible for TANF.

DEFINITION OF HOME

A child must be established as living in the home with his parent(s) or with a specified relative. “Home” is defined as the family setting maintained or in the process of being established by a parent or other relative who assumes responsibility for the child. Usually, the child shares the same household with the relative. However, the requirement for “living with” a caretaker relative and the definition of a home are not confined to the occupation of the physical household by the child and relative, provided there is a valid reason for the child or relative to be separated and the situation is temporary.

TEMPORARY SEPARATIONS

Definition

A temporary separation of the parent or other relative and the child does not affect eligibility, provided the absent member does not establish a permanent home elsewhere and the reasons for the separation show the temporary nature of the arrangement. The worker must establish that the parent or other relative retains control and guidance of the child. When the child and relative are physically separated, establish the purpose of the separation, the duration, and the plan for the home to be maintained for the child.

The following are situations in which the child and relative are temporarily separated in order to carry out a specific purpose, with the plan for the relative to continue supervision and to maintain a home to which the child or adult is expected to return.

Hospitalization

Hospitalization of the child or parent is considered temporary when the illness is of such nature that a return to the family is expected and parental responsibility continues.

Educational Training

A situation considered to be a temporary separation occurs when a child attends a school away from home because of the unavailability of school facilities near the relative's home or the plan for attendance at a boarding school is made in order to afford protection for the child and a period of adjustment away from his home setting. The purpose may also be that of the child's obtaining vocational or other special educational training or a college education. When the child returns home regularly, on week-ends and vacations, consider that the parent or other relative retains control and supervision.

When it is the parent who is attending school away from the child but returns home regularly on weekends, breaks, for special occasions or emergencies and maintains continuous contact with the individual providing care of the child, consider that the parent retains control and supervision of the child(ren).

Visits

Consider a visit a temporary separation when the child or grantee relative visits another relative or other individual with a plan to return at the end of a specified period. Also, at times there is the need of an older individual in the family, usually the child's grandparent, who lives alone, to have someone in the house with him at night. When the parent or other relative plans with the elderly or incapacitated individual for one of the children to stay nearby with this individual at night, this will not be considered separation of the parent and child. The parent or other relative retains control and supervision of the child and the child's real home remains with the parent or other relative.

Absence for Work Purposes

When it is necessary for the parent to work away from the home where the child lives, the parent must be found to retain control and supervision of the child. The parent must live away from the home in order to get a job and must then delegate to another adult relative the day-by-day care of the child. However, the parent must continue to make the important decisions about the child and to maintain frequent contact with him if the child is to be considered living with the parent. Long absences during which the parent works elsewhere, does not return to the home, and does not plan for and direct the care of the child, do not meet the definition of temporary absence for

the purpose of obtaining work. If the parent is obviously not retaining parental control and supervision, then the county must make a change of payee to the adult relative who is exercising this function and also report the absent parent for desertion and/or nonsupport.

For the budgeting of parent and child when the parent works away from home, see *Chapter 6, When Working Parent Temporarily Out of Home*.

Extended Absence

A parent or caretaker relative must report within five (5) days when it becomes clear to the household that the child(ren) has left home or when the child(ren) will be absent from the home for more than 30 days. Failure to report such absences timely will result in disqualification of the caretaker relative and a subsequent reduction in food stamp benefits. See *Chapter 7, Changes*, for a discussion of this reporting requirement.

EMERGENCY SITUATIONS

Temporary Arrangements

From time to time, emergencies arise which deprive a child or children of the care of the parent or other relative through whom he has been receiving aid. For instance, the parent or other relative may die, desert, be imprisoned, or be hospitalized for a physical or mental illness. When an emergency occurs, another relative or sometimes an unrelated individual comes in to care for the children or takes them into his home temporarily until new arrangements can be made. This individual is acting for the relative and the child is regarded as continuing to live in his own home.

Payment to Individual Acting for Relative

When such arrangements come about in emergencies, the TANF grant may be paid to the individual acting for the relative for a temporary period. A temporary period is a period limited to that actually necessary to make and carry out plans for the child's continuing care and support, including that time needed to make a change of payee, but shall not exceed three months.

In using the emergency payment procedure, the following provisions must be met:

1. The TANF benefit is made only for individuals who were already included in the TANF budget at the time the emergency occurred. When the payee is absent temporarily due to hospitalization or out of the home for a legitimate reason, enter the name of the emergency payee on EBCR as a protective payee and the system will issue a card. However, if the emergency results from a situation such as the death of the payee or the departure of the payee with no prospects of return, the benefit must be reduced, if possible, before it is made available to the emergency payee.

Rework the case in MAVERICS for the current payroll month, reducing the grant and entering the name and address of the emergency payee as described above.

2. The benefit is for the purpose of carrying out active planning for the continuing care of the child. If it is definitely known that the child or children will no longer be eligible for TANF, payment may not be continued.

REQUIREMENTS

Appropriate immunizations are required for all children who receive TANF benefits according to the plan recommended by the HHS National Vaccine Program and approved by the State Department of Health, unless good cause is met. This program is intended to improve the health care of all children.

EXPLANATIONS

Immunization requirements should be explained to applicants and recipients. Since the parent is provided a schedule by the infant's physician, the Health Department, or other clinic overseeing the birth and infant checkups, it is the responsibility of the parent/caretaker to plan for routine vaccinations as recommended.

The program must be explained at each application and regular case review to ensure that the caretaker understands medical services that are available and takes advantage of these services to promote healthy babies and children. Appropriate pamphlets must be provided by the worker.

COMPLIANCE REQUIREMENTS

The worker will rely on the Recommended Immunization Schedule from the Department of Health to discuss each child's immunizations with the caretaker relative. However, some children may not meet the recommended schedule for various reasons, while still being "on schedule" for their own particular situation. The county will rely on verification from the child's medical care provider to determine whether a particular child has met his/her individual requirements.

Since children in public schools must provide proof of current immunization before admission, we will consider such children to be in compliance as long as they remain enrolled in a public school.

VERIFICATION

Current immunization is a condition of eligibility for TANF children from birth through age 17. Therefore, verification is mandatory. For children attending public schools, document the fact of public school attendance and do not ask for further verification, unless questionable circumstances exist. Children not attending school, being home-schooled, or attending a non-public school must provide proof of current immunizations. The immunization card from the health care provider is usually in the caretaker relative's possession and may be used to verify

immunization. Otherwise, form **MDHS-EA-311, Immunization Verification**, or a statement from the health care provider may be used.

GOOD CAUSE

Good cause must be determined whenever a child appears not to meet immunization requirements. Good cause may also be requested whenever a family has failed to meet the immunization requirement.

Good cause reasons may include:

1. Established religious beliefs which prohibit injections/vaccinations or medical treatment. The caretaker relative should discuss alternative preventive measures with the health care provider, and the worker will document the alternate plan established for this child.

2. Recommendation by the health care provider that the child should not be immunized.

3. Delays in scheduled immunizations because of illness or other health conditions of the child.

4. Family emergencies beyond the caretaker's control that prevented scheduled appointments from being kept.

5. Other situations which temporarily prevent the family from meeting compliance, such as delays in obtaining second appointments. In such cases, the caretaker should be able to provide appointment schedules. More than one such delay in six months should require very careful screening to determine if good cause can be approved.

The county worker must document all requests for good cause with the explanation/verification. The caretaker relative must be allowed 30 days to comply with the immunization requirement or show good cause before a sanction may be applied to the case. MAVERICS Notice **A911** must be sent notifying the caretaker of the noncompliance and pending sanction and of the date by which compliance/good cause must be verified. This notice is mandatory prior to a sanction, including application situations where information has been requested on the **MDHS-EA-942, Request for Information,** or other MAVERICS notice. If compliance is met or good cause established timely, no penalty will be applied. Document the good cause decision in the case record. Good cause requests are initiated on the **ISAT** screen in MAVERICS with the good cause approval/denial entered on **ISGC**.

SANCTION FOR NONCOMPLIANCE

If the caretaker relative fails to respond to the **A911**, fails to verify compliance of the child, or good cause is denied, the worker must document the case record and apply the appropriate sanction. The sanction is initiated for the next possible month after the 30-day period from the date of notification has expired and good cause/compliance is not established.

In application situations, the 30-day compliance period will usually extend beyond the 30-day standard of promptness. The application must not be denied solely due to failure to verify immunization compliance and/or good cause. The worker must complete the application within the standard of promptness, including any child for whom immunization verification/good cause has not yet been established in the budget. If the **A911** has not already been sent, it must be done at this time and the caretaker relative allowed 30 days to complete verification of compliance or good cause prior to sanction being imposed.

A 25% sanction of the monthly TANF benefit will be imposed after the 30-day notification period has expired and the caretaker has failed without good cause to obtain the recommended immunizations for the children in their care. The sanction will remain in place until verification of compliance/good cause is provided for all noncompliant children in the assistance budget. Denial of good cause on the **ISGC** screen in MAVERICS initiates the sanction. The worker must complete this screen, and then rework the TANF budget on **AFPD** to apply the sanction. MAVERICS Notice **A914** is used to notify the caretaker relative that a sanction has been applied and the benefit reduced.

A 25% penalty will also be applied to food stamp benefits when the TANF penalty is imposed. The worker must rework the food stamp budget on **FSAD** to initiate the penalty, after completing the TANF sanction procedures. An adverse action notice is required to inform the client of the change.

Only one immunization sanction may be applied per household, regardless of the number of children in noncompliance. However, the sanction will not be removed until all children are in compliance or have established good cause. All noncompliances will be coded on the **ISAT/ISGC** screens, but only one 25% sanction will apply. Once compliance/good cause is met, the sanction will be lifted for the next possible month. Compliance will be entered on the **ISAT** screen and the TANF and food stamp budgets worked to lift the sanction. MAVERICS will continue to apply the appropriate TANF and food stamp sanctions until all children show compliance or good cause approval on **ISAT/ISGC**.

REQUIREMENTS

Regular school attendance is required until high school graduation or completion of a GED for TANF children ages 6 through 17 years of age. The objective of this requirement is to improve the education/literacy level of TANF children in order to bolster self-esteem and encourage their self-sufficiency as adults.

EXPLANATIONS

It is the responsibility of the case worker to explain school attendance requirements and the electronic process of exchanging attendance data at each application, reapplication and redetermination. The caretaker relative must understand that failure of a TANF child subject to school attendance requirements to attend satisfactorily or assist in verifying data will result in a sanction of both the TANF and SNAP benefits, unless good cause is met.

COMPLIANCE REQUIREMENTS

The family may comply with school attendance requirements by enrollment and attendance in a public school setting, by enrollment and attendance of a recognized GED program or by completing a certificate of enrollment accepted by the local school district for private school enrollment or a Home Instruction program. A child whose sixth birthday occurs early in the year but who is not yet subject to enrollment in first grade under state law is considered to be in compliance.

Satisfactory attendance to meet this requirement means no more than two (2) unexcused absences in any month, except for good cause and assist with verifying data. Only absences considered by the school to be unexcused will require good cause determination. The caretaker relative is responsible for providing all identifying information (social security number, date of birth, given name) to the school district in order for attendance data to be exchanged.

VERIFICATION

School attendance is verified monthly by computer match between the Mississippi Department of Human Services (MDHS) and the Mississippi Department of Education (MDE). An alert will be generated to the worker when a match is received for a child with 3 or more unexcused absences or if no match is received. The data is available through the Interface Inquiry Menu (INIM). An alert will continue to be received each month a child is in non-compliance. When the child is found to be in compliance following receipt of the X910, an alert will be generated to

notify the worker the child is now in compliance. Some situations may require the worker to verify school attendance, if questionable, by sending the **MDHS-EA-310, School Enrollment and Attendance Verification**, to the school/school district. Such situations might include the children of families who have recently moved to the area or children in non-public school.

By law, the caretaker relative's signature on the TANF application gives permission for school attendance records to be reported to the Department. A copy of the signature page may be sent to the school/school district with form **MDHS-EA-310, School Enrollment and Attendance Verification,** to request verification of enrollment/attendance in questionable situations, as needed. Send the original form to the school/school district and retain a control copy pending a response.

Form **MDHS-EA-310** should be used whenever there is a question about the child's school attendance. The form may be used:

- whenever the parent cannot provide documentation of the child's school attendance; or
- to verify the child's satisfactory return to school after a reported absence.

GOOD CAUSE

Unsatisfactory attendance is determined by receipt of a computer match from the school, showing an unacceptable number of unexcused absences, showing a discrepancy in data or by other means when the worker has requested information in questionable situations. Upon notification that the child has failed to attend satisfactorily or a discrepancy in data, the family must be allowed 30 days to resolve the problem or show good cause before a sanction may be imposed.

MAVERICS will send notice **X910** to the caretaker relative, notifying him/her of the situation and providing instructions to be followed in order to avoid sanction. The family will be given the opportunity to explain the reason(s) for the unexcused absences. Specific reasons must be given for each absence, and verification provided, if feasible. The worker may be able to assist the individual in overcoming barriers that have prevented the child from attending school regularly.

Good cause reasons include:

1. The minor is the parent of a child less than 12 weeks old. After 12 weeks of age, it is mandatory that the minor parent return to school. The minor parent may be referred to

the TANF Work Program as a volunteer in order to receive child care assistance.

2. The child is prohibited by the school district from attending school and an expulsion is pending. This exemption no longer applies once the child has been expelled. If the only child, who is a teenager, is expelled, the TANF case should be closed since there is no longer an eligible child in the home due to the penalty of disqualifying a child over 12.

3. The child failed to attend school for one or more of the following reasons:

   a. Illness, injury, or incapacity of the child or of his/her own child;
   b. Court-required appearances or temporary incarceration;
   c. Medical or dental appointments of the child or of his/her own child;
   d. Death of a close relative;
   e. Observance of a religious holiday;
   f. Family emergency;
   g. Breakdown in transportation;
   h. Suspension from school; or
   i. Other circumstances beyond the control of the child or family.

If the family wishes to request good cause for absences, the explanations must be reasonable in the judgment of the worker or supervisor, according to the "prudent man" concept. The case record must be documented to explain the reason the good cause request was approved or denied.

There will be no good cause determination when a "NO MATCH" alert is received because the needy caretaker will be required to provide correct information to the school district. The caretaker relative may provide MDHS with verification from the school district that the information has been provided in order to avoid a sanction.

SANCTION FOR NONCOMPLIANCE

If the caretaker relative fails to verify compliance with school attendance requirements or to show good cause, a sanction will be imposed for the next possible month after the 30-day period has expired. The 30 days begins when Notice **X910/A910** is sent.

In situations where the caretaker relative states that the child is not attending school and will not be attending, a sanction may be initiated without sending the **A910**. This will generally occur with teenagers who have dropped out and the caretaker relative has been unable to enforce attendance.

The sanction (notice **A913**), once imposed, will apply for one month for each month of unsatisfactory attendance without good cause. Due to the timing of the receipt of the attendance verification from MDE, the caretaker relative may provide form **MDHS-EA-310** completed by the school when the child is attending satisfactorily in order to have the sanction removed at the earliest possible date. Otherwise, the sanction will be removed when the attendance verification from MDE is received verifying compliance. In the case of a dropout, the sanction will remain in place until the caretaker provides written proof that the child has re-enrolled and attended satisfactorily for one month. Any month that school is in session for at least 10 days during the month may be used to meet the attendance requirement, including summer school.

In situations where the caretaker relative fails to provide verification from the school district that the discrepancy in the non-compliant child's identifying information has been resolved, a sanction will be imposed for the next possible month after the 30-day period has expired. The sanction will remain in place until verification is received that the child is in compliance. In situations where the non-compliant child will turn 13-years-old during the sanction, a tickler should be set to rework the case, disqualifying the child.

EXAMPLE: The 30-day period for compliance/good cause determination has passed, and good cause has been denied. The report from the school showed two months of unsatisfactory attendance. If the 30 days ends December 1, the first possible month to apply the sanction is January. The sanction period must be two months, minimum, due to the two months of unsatisfactory attendance. The earliest possible date for removing the sanction, regardless of when compliance occurs, will be March.

EXAMPLE: The school reports one month of unsatisfactory attendance on November 1. The 30-day notice is sent, and the individual reports the child has dropped out of school. The 30-day period ends December 1, and sanction is imposed for January. This child will not be eligible again until the school verifies he has re-enrolled and he attends for a full month. If the child re-enrolls in January and attends satisfactorily for the full month, this may be reported and verified on the **MDHS-EA-310**. If the **310** is provided in February, before rollover, the child may be put back in the case for March. If compliance is not verified until after rollover, the child would be put back in for April. If verification is received through the electronic data exchange, the earliest date the child may be put back in the case is April.

EXAMPLE: On December 1, a "NO MATCH" alert is received. The caretaker relative fails to provide verification that the discrepancy has been resolved by December 31. A sanction will be imposed for February. The sanction will remain in place until verification is received from the caretaker relative that the discrepancy has been resolved or we receive verification of attendance data from MDE.

The penalty for failure to meet school attendance requirements without good cause is as follows:

- For children ages 6 through 12 years, the TANF grant will be reduced by 25%. Only one penalty at a time may be applied for children in this age group, regardless of the number of children in noncompliance.

- For children ages 13 through 17 years, each child who fails to meet school attendance requirements will be disqualified from the TANF case with a participation code of DI.

- For families with unsatisfactory attendance in both age groups, both penalties will apply. The teenager will be disqualified and the remaining grant will be reduced by 25%.

- The SNAP benefit will be reduced by 25% whenever any child is sanctioned for failure to attend school satisfactorily. There will be only one 25% penalty regardless of the number and ages of children in noncompliance.

REMOVAL OF A SANCTION

The school attendance sanction will be lifted on an individual child for the next possible month following verification of compliance/good cause. However, the case sanction cannot be lifted if any other children remain in noncompliance. Once all children in the 6 - 12 age group comply, the 25% TANF penalty will be removed for the next possible month. As each child in the 13 – 17 age group complies, they will be coded IN for the next possible month. When all children in both age groups have complied, the SNAP penalty will be removed. Removal of the sanction is accomplished by coding compliance on the **ISAT** screen, coding teenagers IN the TANF budget, and reworking the **AFPD** screen. The **FSAD** screen must also be reworked to lift the SNAP sanction.

EXAMPLE: The TANF mother has two children, ages 8 and 10. Unsatisfactory attendance is reported on November 1 for September for both children. The **X910** is sent the same day. On December 1, the 30-day period expires, and good cause has not

been established. Both children will be coded noncompliant on **ISAT/ISGC**, and the sanction will begin in January. On January 1, an alert is received verifying that the younger child is now attending satisfactorily. Compliance will be coded for this child on **ISAT/ISGC**. However, the case sanction - 25% of TANF and 25% of SNAP benefits - will continue because satisfactory attendance has not yet been verified for the older child.

EXAMPLE: The TANF mother has two children, ages 9 and 10. Unsatisfactory attendance is reported on March 1 for January, and the **X910** sent that day. No good cause is found, and the 30-day period expires March 31. Sanction is imposed for May. However, on April 12, the **MDHS-EA-310** was received verifying compliance for both children in March. It will still be necessary to sanction the case for May as there was one month of unsatisfactory attendance. The sanction will be lifted for June with no further verification required since the county has already been notified that the children are attending satisfactorily.

EXAMPLE: The TANF mother has two children, ages 10 and 14. Unsatisfactory attendance is reported on December 1 for October. Both children are in noncompliance. The X910 is sent December 1, and the 30-day period expires December 31. No good cause is found for either child. Effective for the month of February, both children must be coded noncompliant on **ISAT/ISGC** and the 14-year-old disqualified from the TANF case with a participation code of DI. If the family was receiving a maximum TANF payment of $170, disqualification of the teenager will reduce the grant to $146 and an additional 25% sanction will be applied to this amount for the noncompliant younger child. The SNAP sanction will still be 25% of the allotment. Regardless of the compliance date, at least one month of sanction must be served, which will be February. On February 1, an alert is received verifying compliance for the 10-year-old child. **ISAT/ISGC** must be coded to show compliance for this child and the case reworked for March. This will remove the 25% TANF sanction, but the SNAP sanction will remain due to the continuing disqualification of the 14-year-old.

SANCTIONS WHEN BOTH IMMUNIZATION AND SCHOOL ATTENDANCE NONCOMPLIANCE ARE INVOLVED

If there are noncompliant children for both immunization and school attendance requirements, all appropriate penalties will be applied to the TANF case.

- For cases with one or more children not meeting immunization requirements and one or more children ages 6 - 12 with unsatisfactory school attendance, the TANF case will be sanctioned 50% - 25% for immunization and 25% for school attendance.

- For cases with one or more children not meeting immunization requirements and one or more children ages 13 - 17 with unsatisfactory school attendance, the teenager will be disqualified and the remaining grant sanctioned 25%.

- For cases with one or more children not meeting immunization requirements and children in both age groups with unsatisfactory school attendance, the teenager will be disqualified and the remaining grant reduced by 50% - 25% for immunization and 25% for school attendance for the 6 - 12 year old.

- The SNAP case sanction will be 25% regardless of the number of TANF immunization/ school attendance sanctions.

LEGAL BASE

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, P.L. 104-193 (PRWORA), and the Mississippi Code of 1972, Annotated, at 43-17-5 and in Title 43, Chapter 19, Support of Natural Children, mandates that the State operate a Child Support Enforcement Program and that receipt of TANF benefits is conditional upon the cooperation of the parent(s) or other caretaker relative with Child Support Enforcement requirements. Based upon these statutory requirements:

- The parent or caretaker relative must assign support rights to the State on behalf of any family member for whom the family applies or who receives TANF benefits, including TWP transportation services.

- TANF benefits will be denied or terminated for the entire assistance unit for failure without good cause to cooperate with the Division of Child Support Enforcement to establish paternity of a child born out of wedlock and/or to obtain child support. The Division of Child Support Enforcement will determine whether there is good cause for failure to cooperate.

- The noncooperating adult will be disqualified from the food stamp case. This sanction applies whether the adult is the PI of a combination TANF/food stamp case or participates in someone else's Food Stamp Program.

ASSIGNMENT OF RIGHTS TO SUPPORT

The TANF applicant must, as a condition of eligibility, assign support rights to the State for all individuals in the TANF assistance budget. Acceptance of the TANF money payment constitutes assignment of support rights. For families already receiving court-ordered or voluntary support payments, this means that the support received must be paid directly to the Child Support Enforcement Office by the TANF caretaker/custodial parent until the court order is modified to direct the payments to the IV-D Office or the absent parent voluntarily redirects the payments for collection and distribution.

The assignment of support rights to the State is included in the **MDHS-EA-312, Personal Responsibility Contract**, and in the **MDHS-EA-941, Notice of Child Support Enforcement**, which the applicant signs at intake to acknowledge awareness of child support requirements. If the applicant refuses to sign the **MDHS-EA-941**, the worker will document the reasons and the individual's explanation in the case record and continue the eligibility determination process. The worker must explain that the requirements for child support cooperation are still in effect although the **941** was not signed and that failure to cooperate without good cause will result in sanction.

COOPERATION WITH CHILD SUPPORT ENFORCEMENT

Cooperation with child support enforcement means that the applicant/recipient must act in good

faith to provide information about the absent parent(s) to the Economic Assistance Office and to the Child Support Enforcement Office. The caretaker relative must also appear at interviews, hearings, and legal proceedings and must submit to genetic tests when ordered by a judge or administrative agency. These requirements are set by federal law. Failure to cooperate with required child support activities will mean termination of the TANF case unless good cause for the failure to cooperate is determined by the Child Support Enforcement Office.

RECOVERY OF TANF PAYMENTS

The Division of Child Support Enforcement is required to recover from support collections all possible TANF Block Grant money paid out as TANF cash assistance, including TWP transportation service payments. In addition to the ongoing monthly comparison of TANF payments with the current collection amount, up to the obligation, any unrecovered assistance payments (TANF and/or AFDC) from prior benefit months will also be recovered. Any remaining difference will be paid to the family as "excess current" support.

In addition to the ongoing recovery of current monthly TANF payments, TANF recovery can also occur for unrecovered assistance payments after the TANF case closes. After TANF closure, the unrecovered TANF/AFDC amounts can be recovered from any child support collections in excess of the current obligation amount.

RESPONSIBILITIES OF THE ELIGIBILITY WORKER

In handling each TANF money payment, the worker must determine whether or not each child included in the assistance budget has an absent parent who is living. If so, the worker will:

1. Explain the child support requirements to the grantee relative and secure her signature on forms **MDHS-EA-312** and **MDHS-EA-941**. Refer below for explanations to be made verbally and in writing. Signing of the **MDHS-EA-312** is a condition of eligibility. However, failure or refusal to sign the **MDHS-EA-941** will not be considered a refusal to cooperate.

2. Gather information on the absent parent or the putative father, absent or not and enter the information on the APRE screen in MAVERICS.

3. If the applicant/recipient wishes to claim good cause not to cooperate, refer him/her to the CSEO to request good cause determination.

4. Deny the application or terminate the TANF case when the individual is required to cooperate and fails to do so.

5. When a court order for support or a voluntary agreement is brought in at application or on an ongoing case, enter the appropriate data in MAVERICS and send a copy of the court order to the Child Support Enforcement Office.

6. Make changes in MAVERICS that affect the IV-D case in a timely manner so that the MAVERICS/METSS interface will allow the child support case to be maintained properly and actions to be taken timely.

7. Budget child support as countable income in the TANF budget for the prospective budget when the individual receives the child support prior to IV-D conversion. Child support payments must be turned in to the Child Support Office beginning with the first payment received by the individual after notification of TANF approval. Failure of the custodial parent to redirect child support to the IV-D Office after approval for TANF benefits will cause termination of the case.

8. Explain the marriage disregard process to the client. The worker will explain the 6-month disregard period for the new spouse's income and resources and what action will be taken at the end of the disregard period. If the new spouse is the legal parent of at least one child in the TANF budget, the worker will communicate this information to CSE via the change reporting process in MAVERICS.

EXPLANATIONS

Verbal Explanations

When one or both parents are absent and alive, the eligibility worker will explain to the applicant that, as a condition of eligibility for assistance, he/she must assign to the State the rights to support from the absent parent(s) for the children for whom TANF benefits are requested and that he/she must cooperate in child support activities. Also, explain to him/her that:

1. State and federal laws specify that when an individual asks for and receives TANF benefits for the children, they have in fact assigned to the Department of Human Services rights to monetary and/or medical support for the children. Also, explain that the assignment of support rights to the State cannot be waived or excused.

   An unmarried minor mother not living in the home of her parents who applies for TANF benefits for her own child(ren) and herself and who is approved for a minor parent exception, must not only agree to assignment of support rights on behalf of her child(ren), but for herself also when there is an existing court order for one or the other parent to provide support for her. The penalty for failure to assign support rights or to cooperate in child support activities is denial or termination of TANF.

2. The information which the caretaker relative provides will be turned over to the Child Support Enforcement Office. The individual must respond to all notices and requests from the Child Support Office to prevent a determination of non-cooperation and loss of benefits. Child Support staff will use the information which the individual provides to locate the absent parent, establish paternity if needed, and obtain support, unless it is determined that such activities will not be in the best interest of the child (good cause).

3. The payee in a TANF case must turn over to the Child Support Office any support received directly from the absent parent. Child Support staff will take steps to have the existing court order revised or a new court order issued so that the support payments are made directly to the IV-D Office.

4. Child Support staff will pursue legal action to establish paternity when necessary and to obtain support from the absent parent unless good cause is determined.

5. The payee is required to cooperate with Child Support Enforcement in establishing paternity and obtaining support, unless good cause is determined by the IV-D Office. Cooperation may include, but is not limited to:

   a. Identifying and helping to locate the absent parent of a child for whom a TANF benefit is requested or received. The custodial parent/caretaker relative must provide identifying information about the absent parent(s) including full name, date of birth, SSN, address, employment, relatives, etc.
   b. Appearing for scheduled interviews with child support staff to provide necessary information. This includes information which the relative knows or can reasonably obtain leading to the location of the parent, the obtaining of support, or the establishment of paternity.
   c. Providing information, or attesting to the lack of information, under penalty of perjury.
   d. Establishing paternity of a TANF child born out of wedlock, which may include genetic testing.
   e. Appearing as a witness in a court or other hearing necessary for establishing paternity or obtaining support.
   f. Obtaining support payments or medical assistance for the child or property due the child.
   g. Turning over to the IV-D Office any child support received by the individual or children after the initiation of a TANF payment.

6. The support collected from the absent parent by IV-D will be considered as income in determining eligibility for TANF, but the collection amount will not be considered as income in determining the amount of TANF grant that the group will receive once eligibility has been established.

7. The support collected in a TANF case will first be used to recover the amount of the IV-A payments. Any current support remaining (excess current) after the TANF recovery occurs, as previously described, will be forwarded to the payee.

8. In addition to the ongoing recovery of current monthly TANF benefits, TANF recovery can also occur for unrecovered assistance payments after the TANF case closes whenever the delinquent support is collected by Federal Tax Offset from the non-custodial parent's federal income tax refund. The state will retain any unrecovered TANF/AFDC amounts and the former recipient will receive any support arrearage

remaining from the tax offset collection after the state obligation is satisfied.

Acknowledgment of Explanations

After giving verbal explanations, the eligibility worker will have the applicant sign in duplicate form **MDHS-EA-941, Notice of Child Support Enforcement**, to indicate his/her awareness of the requirement and his/her right to claim good cause. The applicant also will sign the **MDHSEA-312 Personal Responsibility Contract**, which acknowledges the individual's responsibility to cooperate with child support requirements.

The signed, original form **MDHS-EA-941** will be given to the individual and the duplicate will be filed in the case record. Also, a copy of the **MDHS-EA-312** will be given to the individual. Upon request, a copy will be available to the staff member from the Child Support Office who is responsible for IV-D activity in the county.

PENALTY FOR REFUSAL TO COOPERATE IN ESTABLISHING PATERNITY OR OBTAINING SUPPORT

Applying the Penalty

Federal and State laws require that the TANF case be closed when the parent or caretaker relative refuses without good cause to cooperate with Child Support Enforcement requirements. The Child Support Enforcement Office is responsible for determining when a payee has refused to cooperate in establishing paternity or obtaining child support. Verification of non-cooperation will be provided by the "ND" status on the child's line on the **CSEA** screen as a result of interface from METSS to MAVERICS. The worker will receive an alert. Verification may also be made by use of the **MDHS-EA/CSE-943/643, Child Support Enforcement Cooperation Verification Request**. The penalty for noncooperation with Child Support will be handled as follows:

1. Deny the TANF application when the parent/caretaker states his/her refusal to cooperate at the time of application, using the "NC" COOPeration code on the **CSEA** screen.

2. When the non-cooperation (ND) code is received from the Child Support Enforcement Office via METSS to MAVERICS, the worker will receive an alert and the TANF case will freeze and close ten days later unless cooperation is verified. MAVERICS will send the notice of adverse action X032.

3. At reapplication, when the TANF case closed because of child support non-cooperation, or an outstanding noncooperation existed even though the case closed for another reason, the EW must request verification of cooperation. The application will not be approved until verification of cooperation is received via the **MDHS-EA/CSE-943/643**. Applicants who fail to cooperate by the 30th day from application will be denied.

4. When the failure to cooperate with Child Support affects the TANF case in combination

with a food stamp case, appropriate steps must be taken to disqualify the individual in the food stamp program.

5. When denying an application or terminating the TANF case for failure to cooperate with Child Support, send the notice of action explaining why the family is not eligible for TANF.

Removing the Penalty for Non-Cooperation

There is no minimum time period for the child support non-cooperation penalty. However, benefits may not be authorized or reauthorized until verification of satisfactory cooperation with child support requirements has been received from the Child Support Enforcement Office.

Eligibility for assistance following non-cooperation may be reestablished in one of the following ways:

1. When the TANF case closes for failure to cooperate with Child Support Enforcement, the sanction may be removed and TANF benefits continued without a break only when the individual cooperates before the effective date of closure. The cooperation status must be verified by the IV-D Office and the cooperation status interfaced back to

   MAVERICS before the effective date of closure. If the cooperation occurred before the effective date of closure but the manual verification of cooperation, **MDHS-EA/CSE-943/643**, is not received until after the end of the month, the Supervisor may follow MAVERICS instructions to revert the case to open and continue benefits.

2. The individual may reapply and state his intent to cooperate or that he/she has already met cooperation requirements. Benefits will not be reauthorized until satisfactory cooperation is verified by Child Support Enforcement.

3. At any time there is a reapplication for assistance or an application for assistance in a new case and MAVERICS shows an existing noncooperation status for that individual from a prior case, the system will fail the case. In order to establish eligibility, verification of satisfactory cooperation must be provided before the assistance can be approved. The noncooperation status which originated in a prior case will affect the new application or reapplication for benefits and must be resolved before completing the eligibility determination.

4. Eligibility may be established for the month following verification of compliance. Upon receipt of the **MDHS-EA/CSE-943/643** verifying that the noncooperating individual has now met compliance, the worker must have the supervisor change the TANF benefit start date to the first day of the calendar month after compliance occurred. If adding an individual to an active case, add them to the money payment for the first possible month after compliance has occurred.

NOTIFICATIONS

In order to carry out state and federal requirements related to child support, notices of appointments and case actions must be sent to the individual and certain notifications must be completed and exchanged between the IV-A and IV-D offices. Communication and coordination are essential to the success of the support program.

The county director is responsible for ensuring that all the required data is obtained on the MDHS-EA- 900 and entered into MAVERICS on child support related screens and that all outstanding alerts received from Child Support are handled timely. It is even more critical that all case actions are handled promptly and accurately because of the complexity of multiple assistance programs (TANF and food stamps) now affected by child support requirements.

The eligibility worker is responsible for completing the appropriate child support screens in MAVERICS for the following:

1. MAVERICS will generate referrals and changes to METSS when:

   a. A case is approved that includes a child with an absent parent(s) who is alive or for whom paternity has not been established.

   b. A new child is added to an existing case

   c. A case is being reapproved for assistance after a closure or when there is a program change.

   d. Children from one TANF case who have absent parents already referred in this assistance case number are added to a new case.

      Note that the IV-D parent identifier on the second referral may change. For example, a parent coded "A" in the first case may become "B" or "C", etc. in the second case.

   e. A child's deprivation status changes from another code to absence or death.

   f. There is a change in absent parent information.

   g. The case closes in MAVERICS.

   The system will not generate a new referral when a case is being reinstated before the effective closure date. Reinstatements which occur after the effective date of closure will produce METSS status change.

NOTE: Refer to MAVERICS instructions for data entry and requirements for interface with METSS.

2. Form **MDHS-EA/CSE-943/643** is required for verification of child support cooperation:

   a. Before a TANF reapplication is approved, when the closure reason was failure to cooperate with Child Support;

   b. Before reapproval of a TANF case that closed for another reason but also had an outstanding noncooperation;

   c. To approve a new case or to add a disqualified individual to a new or existing case when the failure to cooperate occurred in another assistance program; or

   d. There is a need to provide or request information not available in the METSS/MAVERICS interface process including the conversion month when the custodial parent begins payment of support to the IV-D Office.

NOTE: The middle section of the **MDHS-EA/CSE-943/643** is provided for the individual's acknowledgment of child support responsibilities. The individual's signature should be obtained before sending the form to Child Support.

3. Once the case is referred and the MAVERICS/METSS interface sets up the child support case for each absent parent, changes that are reported or exchanged on any IV-D/IV-A Case may include the following:

   a. The address of the payee changes.

   b. A child is added or removed from the TANF benefit.

   c. A TANF case is transferred from one county to another.

   d. A TANF benefit is terminated or the case is closed.

   e. A court order or voluntary agreement for support from an additional parent is received after referral.

   f. Action is taken to increase or decrease a TANF benefit.

   g. Total benefit ineligibility existed for a month in which child support was recovered by the Agency and the worker needs to know the amount, if any, of the recovered support in order to compute improper benefits.

DRUG SCREENING REQUIREMENTS

Any adult, defined as being 18 years of age or older, included in the TANF assistance unit is required to take a substance abuse screening questionnaire to determine the reasonable likelihood of a substance abuse disorder prior to approval. This policy includes adults that are disqualified, but excludes minor heads of household (under age 18). Screenings will be administered only at the time of a new application and will not be administered at redetermination. If the results of the substance abuse screening questionnaire indicate a reasonable likelihood of a substance abuse disorder, the individual will be notified via the MAVERICS TANF Approval Notice – A101 that the adult must submit to a drug testing procedures. The case worker will mail under separate cover the MDHS-EA-337, TANF Drug Testing Instructions, and ePassport to the individual requiring a drug test. Testing expenses will be paid using TANF program funds.

The adult will have 7 calendar days from the date of the TANF approval notice to report to the clinic for testing. The individual may advise the testing facility of any current prescription or over-the-counter medications being taken. The case worker will notify the adult of the test results via the MAVERICS Notice A315, Notice of Drug Test Results. If the result of the drug test is positive, the adult will be required to complete the treatment facility's intake process and/or enroll in a drug treatment program approved by the Mississippi Department of Mental Health within ten days of the notice of test results. Failure to return the verification within ten days, will result in a sanction for the TANF adult. Drug testing procedures and test results are confidential **and** must not be disclosed to anyone other than the TANF household.

NOTE: The adult may contest the results of a positive drug test by taking an additional test at a facility meeting agency contract guidelines. In such cases, the adult will be responsible for paying for the test. Additional testing must occur within 7 calendar days of the notice being sent with results of the original drug test. If results of the second test are negative, the individual will be reimbursed for the cost of the second test.

Referral to Treatment

Upon receipt of verification (copy of the treatment plan or MDHS-EA-338, Substance Abuse Treatment Plan, completed by the treatment facility), the individual will be referred to the TANF Work Program for monitoring. (Adults exempt from Work Program requirements will be coded EV for referral to TWP.) The start date must be within a reasonable time, meaning the first available slot as verified by the treatment facility. The plan must include a start date and expected end date. A tickler must be set to alert the worker when the treatment is ending review the case for TWP requirements or to refer the individual adult back to the eligibility worker. Failure to participate in the treatment plan at any point will mean a drug sanction for the TANF adult.

The drug treatment program will last at least sixty days. During treatment, the adult must test negative on any random drug test administered, in addition to testing negative at the conclusion of treatment, in order to continue to remain eligible for TANF.

Sanction for Non-Compliance

Failure of the TANF recipient to complete the requirements of drug testing and treatment will subject the TANF adult to a drug sanction. Non-cooperation includes:

- The recipient's refusal to submit to a drug test based on the results of the questionnaire or completing a drug test
- The recipient's failure to complete the treatment facility's intake process
- The recipient's failure to enter a treatment program if drug test results are positive
- The recipient's entering but failing to meet requirements of a treatment plan, including refusing to take a random drug test
- The recipient testing positive for the unlawful use of a drug in a drug test administered during the treatment plan or at the conclusion of the treatment plan

If non-compliance occurs, the TANF adult will be ineligible to receive TANF benefits for a period of 3full months after the date the adult is determined to be ineligible. A full 12 month sanction period must be served if a second non-compliance occurs within a 12 month period. If a sanctioned adult becomes a member of another assistance household, the penalty will follow the sanctioned, adult.

Whenever an adult fails to cooperate at any point in the drug testing/treatment process and a drug sanction is imposed, the adult must serves the sanction period, and comply with the drug sanction violation before the adult can be added back in the TANF budget. The household may reapply for TANF to add the adult back to the assistance unit.

PROVISION OF TANF SUPPORTIVE SERVICES

TANF supportive services, child care and transportation, are available for TANF recipients that are required to participate in drug treatment. (TANF applicants are not eligible for TANF supportive services.)

TANF recipients who are required to participate in drug treatment and comply with their treatment plan will be eligible for TANF transportation and child care assistance for their children during the treatment period. In order to receive a monthly transportation stipend and a referral to the Division of Early Childhood Care and Development for child care services, the TANF recipient must provide verification of his/her treatment plan and be referred to the TANF Work Program for assignment to the JRA/SAT component.

These cases will be included in the denominator and in the TWP participation rate calculation. Ongoing policy will be used to determine whether these recipients meet or fail to meet their monthly participation requirements.

TANF recipients who are sanctioned for noncompliance with drug testing and/or drug treatment may apply for child care assistance through the Division of Early Childhood Care and Development at www.childcareinfo.ms (under the "Parents" tab.) The Division of Field Operations staff will assist sanctioned individuals with the DECCD online child care application process as needed. The DECCD is responsible for the eligibility determination process.

Transportation Assistance

The provision of transportation assistance will be handled according to current TWP policy. The monthly stipend amount will be based on the number of hours the individual is scheduled to participate in treatment activities each week.

Child Care Assistance

The provision of child care assistance will be handled according to current TWP policy.

Nonexempt Recipients

The jobs status code for nonexempt recipients will be based on ongoing policy. A nonexempt TANF recipient may be required to participate in other work program activities while participating in drug treatment. This decision will be made by the case manager supervisor or county director on a case-by-case basis in accordance with the individual's treatment plan. If the treatment plan requires participation of 20 hours or more per week, the recipient will not be assigned to another activity. (The JRA/SAT component will be the only component assignment for the duration of the individual's treatment plan.)

The worker will set a tickler to review the case in the last month of the recipient's treatment period. The worker will review the recipient's Employability Development Plan, determine the recipient's work activity assignment for the month following the end of the treatment period, and notify the recipient accordingly.

Exempt Recipients

The jobs status code of an exempt recipient will be EV-exempt volunteer. The EV code will allow the exempt adult recipient to be referred to the TWP for component assignment. An exempt recipient who is required to participate in drug treatment will be assigned to the JRA/SAT component. No other component assignment will be required regardless of the number of hours required for treatment.

The worker will set a tickler to review the case in the last month of the recipient's treatment period and handle the case according to current TANF work requirements and TANF work exemptions. The worker will take action to change the EV code to the appropriate jobs status code for the next month.

Noncompliance with Treatment after Referral to TWP

If an exempt or nonexempt recipient fails to comply with the requirements of his/her treatment plan after referral to the TANF Work Program, the case manager will not add a TWP conciliation record in the JAWS system. The worker will take action in JAWS to terminate the child care referral and take action in MAVERICS to apply the appropriate drug penalty. Refer to Sanction for Non-Compliance below for additional and more detailed information.

Protective Payee

In the event that a TANF adult is sanctioned as a result of non-cooperation with screening/ testing/treatment requirements, the household will be required to designate a protective payee to ensure responsible management of the TANF payment. The household must be given form MDHS-EA-918, Representative Authorization, along with a Request for Information, giving the household ten days to respond. If the household fails to provide a complete 918 form within the designated ten day time frame, the TANF case must be closed.

TANF Transitional Services During Treatment

TANF transitional supportive services are available for TANF recipients who are employed during treatment and the earned income causes ineligibility for TANF. Eligibility for TANF transitional supportive services will be based on current TWP policy and continued compliance with treatment program requirements. If noncompliance with treatment occurs, the individual will lose eligibility for any months remaining in the family's TCC 24-month eligibility period and/or the family's transitional transportation counter. The worker will take action to terminate TANF supportive services regardless of the individual's employment status. The PACR screen in JAWS will be used to document the case record regarding this action.

OVERVIEW

This section discusses the eligibility requirements for the TANF Work Program (TWP), with emphasis on the responsibilities of the worker. Exemptions from work requirements, TWP volunteers, and other basic information needed by the eligibility worker are summarized in this section. Additional and more detailed information about the TWP requirements is located in Chapters 8, 9, 10, 11 and 12.

DETERMINING ELIGIBILITY FOR TWP PARTICIPATION

All individuals coded IN, DF or DI in the TANF assistance budget must be screened for eligibility for the TANF Work Program. Each such individual must have either an exemption reason (J* code) or a work status code (referable) entered in MAVERICS (JCHI screen). All adult TANF recipients who do not meet specific exemption criteria must participate in the TWP as a condition of eligibility as soon as they are determined work eligible. TANF benefits will not be paid if the individual is not participating in an approved work activity after being referred to the TWP. The family's 60-month lifetime maximum will be reduced to a 24-month lifetime maximum, unless the individual complies with TANF work requirements. The 24 months are cumulative, but does not have to be consecutive. Be aware that "work eligible" means that the individual is ready to be assigned to an approved work activity, but not necessarily ready for paid employment or job training.

Case Definitions

There are two types of cases for which TWP eligibility must be determined. The TANF Basic case is any case other than a TANF-UP case. This includes cases with a single caretaker relative or two parents when one receives SSI, or deprivation is based on incapacity. Two-parent cases are, by definition, TANF-UP cases for the purposes of this program. Additional and more detailed information is located in Chapter 8, Case Definitions.

Non-Exempt Individuals

Non-exempt individuals are TANF recipients who do not qualify for an exemption, and are therefore subject to TWP requirements as a condition of eligibility. These individuals are also called mandatory participants, and must be referred to the case manager (CM) for placement in work activities.

Only the individuals who verify qualification for one of the specific TANF work exemptions reason listed below will be granted an exemption from work requirements. A nonexempt

individual in a TANF Basic case and the principal wage earner (PWE) of a TANF-UP case are referred to TWP as nonexempt (NE). The second parent in a TANF-UP case is referred as a mandatory spouse (SM), and may only be exempt if the person is caring for a severely disabled child or other household member, caring for a child younger than 12 months, or if the person is in the third trimester of pregnancy and has a verified medical complication.

Additional and more detailed information describing the nonexempt categories is located in Chapter 8, Non-Exempt Individuals.

Exempt Individuals

Any individual whose TANF participation code is IN will be referred to the TANF Work Program, unless that individual meets one of the exemption criteria listed below. Exemption decisions are made by the worker and eligibility for the exemption must be verified. Adult TANF recipients who are eligible for either the JB, JC, JF, JL or JD exemption and their TANF Program Status code is "IN" may choose to voluntarily waive (give up) their exemption status if they want to participate in TANF Work Program activities. Refer to Chapter 3, Waiver of Exemption Status, for additional information.

NOTE: Receipt of unemployment benefits or wages does not qualify the person for an exemption from TANF work requirements.

Child Under 18 Years of Age (JI)

A dependent child in the TANF case under the age of 18 is exempt by reason of age. Time limits do not apply to a child while in the TANF budget as a dependent. The only appropriate code for the dependent child is JI, unless the child is a minor parent who needs child care in order to remain in school. In this situation, referral as a minor volunteer (MV) would be appropriate. Any months used under this exemption reason will not count in the 24 and 60-month time limits.

Age 60 and Over (JA)

An elderly caretaker, age 60 or above, is exempt from TANF work requirements and the 24-month time limit. Age must be verified for this exemption. Any months used under this exemption reason will count in the TANF 60-month time limit.

Incapacity (JB)

Exemption from TANF work requirements due to incapacity may be established in the same manner as the determination of incapacity for deprivation. Receipt of SSI automatically precludes participation in the TWP. A person who receives SSI is not eligible for TANF and cannot be referred to the TWP. Receipt of any amount of Social Security disability or 100% VA disability income establishes incapacity and exemption from TWP. If the Medical Review Unit made the initial determination of incapacity for deprivation, a decision on referral to the work program should have been made at the same time. If not, the medical/social process as described in Chapter 3, Establishing Incapacity, may be used to obtain a decision. This would also be appropriate for a single parent household where deprivation was not initially determined by the Medical Review Unit and the caretaker relative claims disability as a work exemption. A household with incapacity as the TWP exemption reason is also exempt from the 24-month time limit. Any months used under this exemption reason will count in the 60-month time limit. Additional and more detailed information is located in Chapter 3, Referable TANF Applicants/TANF Interview and Referable TANF Recipients/Referral of Incapacitated Adults.

Caretaker of Ill or Incapacitated Adult (JF) or Child (JC)

A TANF parent, with at least one child included in the assistance unit, who is responsible for the full-time care of an ill or incapacitated household member, may be exempt from TANF work requirements, with proper verification. The incapacitated individual must live in the home with the assistance family, but may not be included in the assistance budget. Needy caretaker relatives are not eligible for this exemption.

The medical condition of this individual must be verified by appropriate medical records. The medical information must be specific in regard to the incapacitated individual's need for full-time care, the nature of the illness, and how long it is expected to last. The Medical Review process may be used to establish incapacity for the household member if deemed appropriate by the worker. New statements will be required at each redetermination.

A parent may be exempt from work program requirements and be eligible for the "JC" exemption even if the ill or incapacitated child attends school full-time. Federal regulations simply require medical documentation to substantiate the need for the parent to remain in the home to care for the disabled child.

The TANF parent must also provide information to explain why she/he is the appropriate individual to provide this care or whether there is another suitable individual who could take on this responsibility. The worker must use the CADM screen to document the caretaker's statement

in the electronic case record. Once properly verified and documented, the TANF household is exempt from the 24-month time limit during the period of time this exemption is allowed. Any months used under this exemption reason will count in the 60-month time limit. The parent should be reminded to report any change in circumstances that would affect eligibility for this exemption, such as an improvement in the condition of the incapacitated individual, a change in caregiver, or a move to a nursing home or other institution.

Temporary Illness or Injury (JL)

An individual in the assistance unit who has a temporary illness or injury, defined as a short-term problem expected to last no more than 30 days, may be granted an exemption from work requirements for a maximum of 30 days. This exemption requires a statement from the physician or other medical verification, even if the problem appears to be obvious, such as a cast on the leg, neck brace, etc. This exemption may not be allowed longer than 30 days, regardless of the apparent circumstances. If the disability or illness is of such a nature that recovery is expected but not within the 30-day limit, a Medical Review Unit decision on incapacity must be requested. This should be handled immediately to make it possible to obtain a decision within the 30-day time period of temporary exemption. Any months used under this exemption reason will count in the 60-month time limit, but will not count in the 24-month time limit.

NOTE: If a person has used up the 12 months allowed to claim an exemption to care for a child younger than 12 months (JJ) and has another child, the JL exemption may be used for the postpartum period. In this situation, the JL code cannot exceed two months and the date of delivery and the postpartum period must be verified by medical statement.

Pregnancy (JK)

A woman in the third trimester of pregnancy (7th, 8th and 9th months) may be exempt from work requirements if there are complications with the pregnancy The complications must be verified by the certificate of a licensed physician, nurse practitioner, physician assistant, or any other licensed health care professional practicing under a protocol with a licensed physician. The expected date of confinement (EDC) must be verified in order to determine whether the individual has reached the third trimester. In situations where a pregnancy is determined high-risk or other complications/problems exist according to the individual, temporary illness may be used for 30 days, with a doctor's statement, and a Medical Review decision requested for incapacity if the 30-day exemption will not be long enough to reach the third trimester. In no instance may the pregnancy exemption be used prior to the third trimester. This exemption terminates when the pregnancy terminates, and the individual should be instructed to report to the

worker when the pregnancy ends. At that time, options for further exemption or referral to the TWP will be explored.

Any months used under this exemption reason will count in the 60-month time limit but will not count in the 24-month time limit An individual that meets the criteria for this exemption cannot volunteer to participate in the TWP.

MAVERICS will assist the worker in tracking the "JK" code. When the EDC is entered in the Expiration Date field on the JOBS screen, MAVERICS will automatically generate the X016, Third Trimester Pregnancy Exemption, notice. The X016 informs the individual that she has been approved for the pregnancy exemption due to medical complications and that she must contact the local county office to report the baby's birth or a change in her delivery date. The "JK" exemption can only be allowed during the third trimester of pregnancy. MAVERICS will automatically generate the X017, TANF Request for Information/Closure, notice when the system current date becomes equal to the EDC date displaying on the JOBS screen. The X017 informs the individual that she must provide a status update on the birth of the baby and that the TANF case will be closed if the information is not provided within ten (10) days. MAVERICS will send an alert to the worker when the X017 notice is generated. Refer to Volume X, Chapter 3, for additional information.

Caretaker of Child Under 12 Months Old (JJ)

The individual responsible for the actual physical care of a child younger than 12 months of age may choose to be exempt from TANF work requirements. This exemption ends the month following the child's first birthday, and is limited to a lifetime maximum exemption of 12 months, regardless of the number of children. This means that if the caretaker uses up the full 12 months for one baby, no months will be left to claim this exemption reason on any future child. The worker must make certain the caretaker understands this and encourage her to save as many months as reasonable for possible future use. The worker will use the CADM screen to document the discussion and the person's response/comments. Months used while claiming this exemption will count in the 60-month time limit but will not count in the 24-month time limit.

Since the pregnancy exemption (JK) cannot be continued after the birth of the child, the exemption code will be changed to caretaker of a child younger than 12 months (JJ) for the next month after the birth is reported. If the individual is not eligible for the exemption to care for a child younger than 12 months (JJ), up to six weeks of post-partum will be allowed using the JL code. An individual may be exempt up to a maximum of two months after the birth of the baby using the JL code. The number of months allowed (one or two) will be determined based on how early in the month the baby is born. Part of the post-partum period may be covered under the JK

exemption code. Under no circumstance will the JL code be approved for more than two months. When the individual adds the newborn to the case, the worker must explain to the individual that she must decide whether to claim the JJ work exemption, if any months are available, or participate in the TANF Work Program. The worker will explain the 12-month lifetime maximum time limit for this exemption and how claiming the exemption affects her 60-month and 24-month time limit counters. If the caretaker relative does not contact the worker to request referral to the TWP, the exemption will be allowed to continue until the child reaches age one, the individual has used up the 12-month maximum allowed, or the caretaker requests referral to TWP. If the caretaker wishes to volunteer for the TWP, she may do so at any time by contacting the worker to request a referral.

NOTE: It is vital that the worker clearly explains TWP requirements and penalties, and explains that an exempt individual who voluntarily chooses to be referred to the TWP as an exempt volunteer will be subject to adverse action policy and procedures. An exempt volunteer that fails to participate satisfactorily in her assigned work activities or commits a voluntary quit violation will be sanctioned, if good cause cannot be substantiated. Prior to referral to the TWP as an "EV", the participant must sign form MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, to acknowledge understanding of TWP requirements and adverse action policy and procedures. The MDHS-EA-359 will be scanned to the electronic case record to document that TWP rules and regulations were explained.

Domestic Violence (JV)

A caretaker relative who qualifies for the victim of domestic violence exemption may choose to claim the exemption or volunteer to participate in the TANF Work Program. Months used while claiming this exemption will count in the 60-month time limit but will not count in the 24-month time limit. The domestic violence exemption is limited to a lifetime maximum of 12 months. The 12-month counter is cumulative, but does not have to be consecutive. Additional and more detailed information about the specific requirements and explanations for this exemption are located under Domestic Violence, later in this section.

NOTE: It is vital that the worker clearly explains TWP requirements and penalties, and explains that an exempt individual who voluntarily chooses to be referred to the TWP as an exempt volunteer will be subject to adverse action policy and procedures. An exempt volunteer that fails to participate satisfactorily in assigned work activities or commits a voluntary quit violation will be sanctioned, if good cause cannot be substantiated. Prior to referral to the TWP as an "EV," the participant must sign form MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, to acknowledge understanding of TWP requirements and adverse action policy and procedures. The MDHS-EA-359 will be scanned to

the electronic case record to document that TWP rules and regulations were explained.

Drug Treatment (JD)

Individuals who are undergoing substance abuse treatment recommended by a physician or Mental Health Office may be exempt from work requirements during the active treatment period only. This is intended to cover temporary periods spent in residential treatment centers or other full-time rehabilitation programs, and not ongoing support group participation, such as AA meetings. The plan of treatment must be documented in the case record and an alert set for the anticipated treatment end date. Months used while claiming this exemption will count in the 60-month time limit but will not count in the 24-month time limit. Additional and more detailed information about the specific requirements and explanations for this exemption are located under Drug Treatment, later in this section.

Waiver of Exemption Status

An adult TANF recipient included in the assistance unit (coded IN) that is eligible for a TANF work exemption under the JB, JC, JF, JL or JD exemption reason may choose to voluntarily waive his/her exemption status and be referred to the TWP. When a waiver is requested, the worker will thoroughly explain work program requirements, e.g., work activities, participation, supportive services, adverse action (full family sanction and timed penalties), earned income disregards, and transitional supportive services. The worker will also inform the recipient that once a work exemption is waived, the exemption status cannot be resumed automatically. Ongoing policy will be applied if the individual subsequently reports an inability to work or comply with work program requirements. If, after all explanations have been provided, the exempt individual chooses to voluntarily waive his/her exemption, the worker will have the recipient complete and sign form MDHS-EA-321, TANF Work Exemption Waiver. Once the MDHS-EA-321 is fully executed, the worker will change the individual's TWP (JOBS) Program Status Code from "J*" to NE with the exception of JJ and JV. The JJ and JV codes will be changed to EV. A signed copy of the MDHS-EA-321 will be scanned to the individual's electronic case record. Once the individual is referred to the TWP, ongoing TWP policy and procedures will apply to the case.

DOMESTIC VIOLENCE

An individual with a history of having been a victim of domestic violence which has been reported as required by State law and substantiated by police reports or court records, and is at risk of further domestic violence may claim this work exemption. "Domestic violence" is defined by law

as having the same meaning as "battered or subjected to extreme cruelty". State law defines this to mean an individual has been subjected to:

- physical acts that resulted in, or threatened to result in, physical injury;
- sexual abuse;
- sexual activity involving a dependent child;
- being forced as the caretaker of a dependent child to engage in nonconsensual sexual acts or activities;
- threats of, or attempts at, physical or sexual abuse;
- mental abuse; or
- neglect or deprivation of medical care.

In order to claim a domestic violence exemption, the electronic case record must be documented to show that the domestic violence or battery occurred and that the individual is at risk of further domestic violence. The claim of abuse must be substantiated by police reports, which means that a complaint was made and that the investigation verified that the abuse/battery actually occurred. "Being at risk of further domestic violence" must be documented after the existence of actual abuse is verified before allowing the work exemption. If the individual who was abused is no longer at risk due to incarceration of the abuser or other reasons, the JV exemption may not be used.

"Reported as required by State law" means that the agency must make the individual who claims to be a victim aware of protection afforded under the law through the Domestic Abuse Law and the Vulnerable Adults Act. The Vulnerable Adults Act protects adults lacking the capacity to consent due to physical or mental impairment or who lack sufficient understanding to make or communicate reasonable decisions. Such individuals should be referred to the Division of Family and Children's Services.

When the domestic violence work exemption may not be used because the individual does not meet the requirement about "still being at risk", it may be appropriate to use temporary illness or injury as the exemption reason, when supported by medical documentation. If the individual who is the victim has a physical or mental incapacity resulting from the domestic violence or battery, or the “temporary” problem is expected to last longer than 30 days, the incapacity exemption should be claimed so the 12- month limit will not apply. The Medical Review process should be used to get an incapacity decision.

When the domestic violence work exemption is approved, the worker should set an alert or set the case review date to review the individual's work status timely. Individuals who are victims of domestic abuse should be encouraged to participate in the TWP as soon as possible following the abuse.

NOTE: Individuals who are eligible to claim the JV work exemption but choose to volunteer for work program services will not be excluded from adverse action policy and procedures and may be sanctioned for failure to attend or participate satisfactorily in assigned work activities without good cause.

DRUG TREATMENT

TANF Recipients Approved Prior to 08-01-14

Many employers require drug testing prior to employment. TWP participants who are referred to these employers must comply in order to be hired. Failure to pass a pre-employment drug screening or failure to retain a job because of a positive drug test will be considered failure to comply with TWP requirements.

In order to make sure a TANF recipient is informed about the substance abuse treatment exemption and understands the drug abuse requirements and has the opportunity to seek treatment, the worker must inform all TANF recipients about the specific provisions of the drug/substance abuse treatment exemption prior to referral to the TWP. The worker's explanations must include the potential penalties if the individual fails to request an exemption and is later found in noncompliance due to a substance abuse disorder.

This exemption can be requested only at the time of reevaluation, or at the time the individual's participation status changes from exempt to mandatory (NE) or exempt volunteer (EV). This exemption can only be claimed during the substance abuse treatment period. It may not be claimed as a means of avoiding TWP participation or an individual drug sanction once a referral has been made to the TWP, or when referred to an employer who requires a drug test prior to employment. Failure to request this exemption in advance of the potential failure to participate or to obtain employment because of a substance abuse disorder will prohibit the granting of this exemption. Any failure to participate in TWP because of a substance abuse disorder after the opportunity to request the treatment exemption has been declined will mean a TANF drug sanction will be imposed on the adult. Refer to Sanction for Non-Compliance later in this chapter for additional and more detailed information.

At each regular reevaluation interview, the TANF work exemptions must be explained and the **MDHS-EA-336, TANF Work Program Substance Abuse Treatment Agreement**, must be signed by the non-exempt recipient attesting to his/her understanding of the substance abuse exemption requirement. Each non-exempt adult must sign the TANF Work Program Substance Abuse Treatment Agreement, including a minor head of household. The form will be scanned to the TANF Temp folder in Worksite and a copy given to the individual. Any individual who is exempt from the TWP for another reason will not be required to sign the Agreement until the work status changes to a mandatory (NE) or an exempt volunteer (EV) referral. However, the individual may choose to claim this exemption instead of another exemption for which he/she is qualified if substance abuse treatment is needed.

If the referral to the TWP occurs at a time other than a regular case review, the Agreement may be completed at the orientation appointment. The worker will be responsible for coordinating this arrangement with the case manager to assure that the Agreement is signed prior to beginning participation in the TANF Work Program.

Requesting an Exemption

When the TANF applicant or recipient requests an exemption to obtain treatment for substance abuse and the **MDHS-EA-336** has been signed, the worker will provide forms **MDHS-EA336A**, Substance Abuse Treatment Recommendation, and **MDHS-EA-336B** Substance Abuse Treatment Plan to the individual requesting the exemption. In order to ensure compliance with the Health Insurance Portability and Accountability Act of 1996, the client is to be given a **MDHS-EA-933**, Notice of Privacy Practices. Signatures should be obtained on a **MDHS-EA902,** HIPAA Authorization for Release of Information and a **MDHS-EA-903**, HIPAA Authorization for Release of Information by the Mississippi Department of Human Services. The **MDHS-EA-336A** and **MDHS-EA-336B** must be completed by the primary care provider (PCP) or Mental Health Office. The Worker must complete the recipient's identifying information and get the individual's signature on the forms authorizing the release of information by the service provider. The worker must also complete the **MDHS-EA-332,** Report of Social Information, taking care to record the individual's statements about his substance abuse problem and how this limits his/her ability to work or care for his family. A copy of the **MDHS-EA-332** should be attached to the **MDHS-EA-336A**. The recommended plan and social information are not submitted for Medical Review approval unless the exemption request later becomes a request for an incapacity determination.

It is the responsibility of the individual requesting an exemption to make an appointment with his/her primary care provider to discuss his substance abuse disorder and develop a treatment plan for rehabilitation. The PCP may refer the individual to the local Mental Health Office or

other treatment facility or may determine that no treatment is necessary at that point. The recipient must return the completed recommendation to the county office within 10 days.

The **MDHS-EA-336A** and **MDHS-EA-336B** are not payment authorization forms to the provider. The individual's Medicaid benefits (not the Agency) will pay for treatment or examination for substance abuse work exemption purposes. When necessary, the worker will assist the recipient with the Medicaid application process. It is the individual's responsibility to provide adequate verification to qualify for the exemption. The provider may use the forms provided by the Agency or any other recognizable documents to provide verification of the treatment recommendation and/or plan.

If the participant's physician or mental health provider does not recommend treatment, the individual will be required to participate in the TWP. Subsequent failure to participate in an assigned work activity because of a substance abuse disorder or failure to be hired for a job because of a positive drug test should be considered refusal to participate and the individual will be subject to a drug sanction.

If a treatment/rehabilitation plan is recommended, the plan must be verified. The **MDHS-EA-336B**, **Substance Abuse Treatment Plan**, will be provided to the individual with the **MDHSEA-336A** to be completed by the treatment provider. The start date must be within a reasonable time, meaning the first available slot as verified by the PCP or Mental Health Office. The plan must include a start date and expected end date. A tickler must be set to alert the worker when the individual should be referred to the case manager. Failure to participate in the treatment/ rehabilitation plan will mean a notice of adverse action and a drug sanction at any point during the proposed treatment plan. The individual will have the opportunity to provide medical evidence to document satisfactory progress by medical or mental health records to resolve any interruptions (not to exceed one week) in active participation in the treatment/rehabilitation plan.

Family and Children's Services may need to become involved with the family in need of treatment to assure protection and adequate care for the children when family resources for care are inadequate or questionable. Field Operations staff should make referrals as seems appropriate for the prevention of child abuse or neglect when there appears to be a reason for concern. Continued eligibility for assistance will follow ongoing policy regarding temporary absence from the home for the purpose of medical treatment.

When Treatment Ends

At the end of the satisfactory completion of the substance abuse treatment period, the individual will be referred to the TANF Work Program unless there is proof of eligibility for another work

exemption. Treatment programs are generally limited to no more than 60 or 90 days, but may be shorter or longer based on the individual's circumstances as documented by the service provider.

The individual may be given more than one exemption period to participate in a substance abuse treatment/rehab program, but must make the request at reevaluation, or when a change occurs to the individual's non-exempt status. However, voluntarily quitting the treatment plan without the doctor's or Mental Health Office's approval will cause a drug sanction to be imposed on the adult. Changes in treatment plans require a new **MDHS-EA-336A** or verification from the PCP or Mental Health Office.

Form Maintenance

The **MDHS-EA-336**, **MDHS-EA-336A**, **MDHS-EA-336B** and **MDHS-EA-332** forms will be retained in the electronic case record with the corresponding **MDHS-EA-900**. The county will make the exemption determination based on the recommendation for treatment when the individual follows the recommended treatment plan. If a request for work exemption based on incapacity is submitted later for a Medical Review decision, include all prior **MDHS-EA-336A**, **MDHS-EA-336B** and **MDHS-EA-332** forms with the new medical and social reports when the request is submitted to the Division of Field Operations.

Initiating a Sanction

If recipient receives an exemption for Drug Abuse Treatment (JD) but fails to participate in a treatment program as advised by his/her physician or mental health provider, or voluntarily quits the treatment plan without the doctor's or Mental Health Office's approval, a drug sanction will be imposed on the adult. The fair hearing process is the same as any other fair hearing request, if made by the individual.

In order to be included in the TANF budget after a drug sanction has been imposed the adult must serve the penalty period and be in compliance with his/her substance abuse treatment plan or qualify for a work exemption Subsequent failure to participate in the TWP due to a substance abuse disorder after being added back in the TANF budget will mean another drug sanction will be imposed on the adult.

TANF Approvals/Applications Taken On or After 08-01-14

Effective August 1, 2014, Mississippi law requires all adults included in the TANF assistance unit to take a screening questionnaire to determine the reasonable likelihood of a substance use disorder at the time of a new TANF application. This policy includes adults that are disqualified, but excludes minor heads of household (under age 18.) If the household is eligible for TANF

and the results of the questionnaire indicate the adult has a reasonable likelihood of a substance use disorder, MAVERICS notice A101, TANF Approval, will be used to notify the household of the results and that the adult must submit to a drug test. At the time the A101 is sent, the worker will send in a separate mailing an information packet providing the household information on contacting the nearest testing facility for purposes of submitting to a drug test. The packet must include the following four (4) documents:

1. MDHS-EA-337, TANF Drug Testing Instructions (the EW must use the list of TANF drug testing collection sites to locate the facility nearest to the client and enter the facility's information on the MDHS-EA-337.)
2. MedScreens/MDHS cover sheet
3. ePassport (single sheet with a bar code)
4. Chain of Custody and Control Form (multi sheet with a bar code)

The adult will have seven (7) calendar days from the date of the TANF approval notice to report to the facility for drug testing. The adult may advise the testing facility of any current prescriptions or over-the-counter medications being taken. The case worker will notify the individual of the test results via MAVERICS notice A315, Notification of Drug Test Results. If results of the test are positive, the adult will be required to complete the treatment facility's intake process and/or enter a drug treatment program approved by the Mississippi Department of Mental Health within ten days of the notice of the test results. Failure to return verification of the compliance within ten days will result in a drug sanction for the adult.

NOTE: The adult may contest the results of a positive drug test by taking an additional test at a facility meeting agency contract guidelines. In such cases, the adult will be responsible for paying for the test. Additional testing must occur within seven (7) calendar days of the notice being sent with results of the original drug test. If results of the second test are negative, the client will be reimbursed for the cost of the second test.

Drug Treatment Referral

Upon receipt of verification of drug treatment enrollment (copy of treatment plan or form MDHS-EA-338 completed by the treatment facility), the individual will be referred to the TWP for monitoring. (Adults exempt from work program requirements will be coded EV for referral to TWP.) The start date must be within a reasonable time, meaning the first available slot as verified by the treatment facility. The plan must include a start date and expected end date. The worker must set a tickler for the date the individual is expected to complete treatment to review the case and take the appropriate case action. For example, 1) update the individual's JOBS status code, if necessary; 2) refer the individual back to the eligibility worker; 3) review the

individual's EDP and TWP placement for updates; or 4) impose the appropriate drug penalty, if necessary. Failure to participate in a treatment program at any point will mean a drug sanction for the adult.

Drug treatment programs will last at least sixty (60) days. During treatment, the adult must test negative on any random drug test administered, in addition to testing negative at the conclusion of treatment, in order to continue to remain eligible for TANF.

Sanction for Non-Compliance

Failure of the TANF client to complete the requirements of drug testing and treatment will subject the TANF adult to a drug sanction. Non-cooperation includes:

- the client's refusal to submit to a drug test based on results of the questionnaire
- the client's failure to complete the treatment facility's intake process
- the client's failure to enter a treatment program if drug test results are positive
- the client entering but failing to meet requirements of a treatment plan, including refusing to take a drug test
- the client testing positive for the unlawful use of a drug in a random drug test required by and administered during the treatment plan or at the conclusion of the treatment plan

If non-compliance occurs, the adult will be ineligible to receive TANF benefits for a period of 3 full months after the date the household is determined to be ineligible. A full 12 month sanction period must be served if a second non-compliance occurs within a 12 month period. If a sanctioned adult becomes a member of another assistance household, the penalty will follow the sanctioned individual.

Whenever an adult fails to cooperate at any point during the drug testing/treatment process and a drug sanction is imposed, the adult must serve the sanction period, and comply with the drug sanction violation before the adult can be added back in the TANF budget.

NOTE: Until MAVERICS coding can be implemented, the drug sanction period must be tracked manually. When a drug sanction becomes necessary, the worker must change the noncompliant adult's participation code to "DI-disqualified individual" and track the 3 or 12-month sanction period manually. The worker must thoroughly document the SSDO/IIDO and CADM screens. The CADM screen must contain the following information:

1. Subject line: TANF Drug Sanction Imposed
2. Name of the adult being sanctioned;

3. Length of the sanction period (3 or 12 months) along with the start and stop dates of the sanction period; and
4. Reason the drug sanction was imposed.

The adult must serve the full sanction period and be in compliance before the adult can be included in the TANF budget. For example, an adult refuses to take a drug test and is sanctioned for 3 months. The adult must serve the 3-month sanction and take a drug test before he/she can be added back in the budget.

PROVISION OF TANF SUPPORTIVE SERVICES

TANF supportive services, child care and transportation, are available for TANF recipients that are required to participate in drug treatment. (TANF applicants are not eligible for TANF supportive services.)

TANF recipients who are required to participate in drug treatment and comply with their treatment plan will be eligible for TANF transportation and child care assistance for their children during the treatment period. In order to receive a monthly transportation stipend and a referral to the Division of Early Childhood Care and Development (DECCD) for child care services, the TANF recipient must provide verification of his/her treatment plan and be referred to the TANF Work Program for assignment to the JRA/SAT component.

These cases will be included in the denominator and in the TWP participation rate calculation. Ongoing policy will be used to determine whether these recipients meet or fail to meet their monthly participation requirements.

TANF recipients who are sanctioned for noncompliance with drug testing and/or drug treatment may apply for child care assistance through the Division of Early Childhood Care and Development at www.childcareinfo.ms (under the "Parents" tab.) The Division of Field Operations staff will assist sanctioned individuals with the DECCD online child care application process as needed. The DECCD is responsible for the eligibility determination process.
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Transportation Assistance

The provision of transportation assistance will be handled according to current TWP policy. The monthly stipend amount will be based on the number of hours the individual is scheduled to participate in treatment activities each week.

Child Care Assistance

The provision of child care assistance will be handled according to current TWP policy.

Nonexempt Recipients

The jobs status code for nonexempt recipients will be based on ongoing policy. A nonexempt TANF recipient may be required to participate in other work program activities while participating in drug treatment. This decision will be made by the case manager supervisor or county director on a case-by-case basis in accordance with the individual's treatment plan. If the treatment plan requires participation of 20 hours or more per week, the recipient will not be assigned to another activity. (The JRA/SAT component will be the only component assignment for the duration of the individual's treatment plan.)

The worker must set a tickler to review the case in the last month of the recipient's treatment period. The worker will review the recipient's Employability Development Plan, determine the recipient's work activity assignment for the month following the end of the treatment period, and notify the recipient accordingly.

Exempt Recipients

The jobs status code of an exempt recipient will be EV-exempt volunteer. The EV code will allow the exempt adult recipient to be referred to the TWP for component assignment. An exempt recipient who is required to participate in drug treatment will be assigned to the JRA/SAT component. No other component assignment will be required regardless of the number of hours required for treatment.

The worker must set a tickler to review the case in the last month of the recipient's treatment period and handle the case according to current TANF work requirements and TANF work exemptions. The worker will take action to change the EV code to the appropriate jobs status code for the next month.

Noncompliance with Treatment after Referral to TWP

If an exempt or nonexempt recipient fails to comply with the requirements of his/her treatment plan after referral to the TANF Work Program, the case manager will not add a TWP conciliation record in the JAWS system. The worker must take action in JAWS to terminate the child care referral and take action in MAVERICS to apply the appropriate drug penalty. Refer to Sanction for Non-Compliance above for additional and more detailed information.

Transitional Services during Treatment

TANF transitional supportive services are available for TANF recipients who are employed during treatment and the earned income causes ineligibility for TANF. Eligibility for TANF transitional supportive services will be based on current TWP policy and continued compliance with treatment program requirements. If noncompliance with treatment occurs, the individual will lose eligibility for any months remaining in the family's TCC 24-month eligibility period and/or the family's transitional transportation counter. The worker will take action to terminate TANF supportive services regardless of the individual's employment status. The Maintain Participant Free-Form Remarks (PACR) screen in JAWS must be used to document the case record regarding this action.

REFERABLE TANF APPLICANTS

All adult TANF applicants who do not meet an exemption from work requirements will be referred to the TWP and required to participate, cooperate and comply with TANF Up Front requirements during the 30-day TANF application processing period. The TANF Up Front requirements include: screening for a substance abuse disorder, and referral to the WIN Job Center for job search requirements, or referral to the Office of Vocational Rehabilitation for assessment and services, if eligible.

Registration

The process for receiving and registering a TANF application has not changed. The Field Operations clerk will continue to register the TANF application and schedule a TANF interview appointment within 10 days. At the time of registration, the clerk will inform the applicant about the TANF Up-Front requirements and provide a copy of the TANF Up-Front Job Search Informational Sheet (MDHS-EA-303B) and document page one of the MDHS-EA-900 accordingly. The MDHS-EA-303B provides explanations, expectations about the TANF Up Front requirements, and informs the applicant that the TANF interview and TWP intake process may take about three hours to complete. The applicant should be encouraged, at that time, to make arrangements for child care for the appointment time period. All nonexempt applicants will be referred to JAWS in real time through an online referral.

Scheduling Intake Appointments (EW)

The Field Operations clerk will register the TANF application and schedule an EW intake appointment within ten days. In counties where the clerk manually schedules appointments, the MDHS-EA-940, Notice of Appointment for Determination of Eligibility, will be used to notify

the individual of the appointment date and time. Counties using the automated process will use the A906, Appointment Notice.

TANF Interview

During the TANF interview, the eligibility worker will identify all referable adults. All will be referred to the TWP and required to comply with TANF Up Front requirements prior to TANF approval. The eligibility worker will use MDHS-EA-303C, TANF Up-Front Job Search Checklist, or the MDHS-EA-303D, TANF Vocational Rehabilitation Checklist, whichever is appropriate, to provide detailed explanations to all adults regarding TANF Up Front requirements.

A TANF applicant requesting a TWP exemption which is not obvious and cannot be verified at the TANF interview will be given an A301-TANF Pending Application or A905-TANF Request for Information, whichever is applicable, to verify the exemption. The applicant will also be referred to the TWP and required to comply with the TANF Up Front requirements while verification for the exemption is pending. A TANF applicant requesting the JB exemption will be given (in addition to the A301) forms MDHS-EA-331, Report of Medical Examination and MDHS-EA-330, TANF Request for Medical Information, or MDHS-EA-333, TANF Request to Cooperating Medical Facilities for Information, whichever is applicable, to be completed by the attending physician and returned within the 10-day period. The eligibility worker must set an alert/tickler to handle the application the day following the tenth day. Based on case circumstances, the application will be handled according to the following guidelines.

1. If the applicant returns the completed MDHS-EA-331, along with any other pertinent medical information, within 10 days, the worker will enter the VR (vocational rehabilitation) code on the JOBS screen in MAVERICS and process the AFPD screen to allow the case to be "pulled" into JAWS and submit the appropriate paperwork to the Medical Review Team.

2. If the applicant fails to return the completed MDHS-EA-331 timely or contact the worker to verify good cause, the eligibility worker will deny the TANF application after the 10-day period.

3. If the applicant contacts the worker and provides written documentation (verification of the doctor's appointment date and time, etc.) to substantiate that a good faith effort has been made to comply with the 10-day request for information, and verifies that the MDHS-EA331 cannot be completed timely, the eligibility worker will refer the applicant to the TWP to complete the substance abuse screening. The application may be held up to 30 days

(dependent upon case circumstances) before action is taken to deny or approve the TANF application.

Example: If written documentation substantiates good cause and verifies the MDHS-EA-331 cannot be provided within the 30-day application processing period (appointment to see the doctor is beyond the 30-day limit), the worker will go ahead and approve the application with the "JL" code, if the adult complied with substance abuse screening and all other eligibility criteria are met (doctor statement or obvious exemption with supervisor's approval.) The worker must set a tickler to change the "JL" code to "NE" (medical documentation not provided) or "VR" (medical documentation provided and Medical Review decision is pending) effective for the next month. If the TWP (JOBS) Program Status Code is "NE", the individual will be required to participate in TWP. If the TWP (JOBS) Program Status Code is "VR", the individual will be referred to the Office of Vocational Rehabilitation (OVR) and required to comply with VR requirements.

Example: If written documentation verifies the MDHS-EA-331 can be completed within the 30-day application processing period, the worker will hold the application up to 30 days. If the adult complied with substance abuse screening and the MDHS-EA-331 is provided within the 30-day period but there is not enough time for the applicant to complete the TWP and VR intake processes, the eligibility worker will approve the case with the "VR" code and submit a request for a Medical Review decision.

Example: If the adult complied with substance abuse screening and written documentation substantiates good cause and verifies the MDHS-EA-331 cannot be completed within 30 days and the client fails to provide a medical statement or has no obvious exemption, the worker will enter a "NE" code on the JOBS screen and work the case if all other eligibility criteria are met.

4. If the Medical Review Team grants an exemption from TWP work requirements and the OVR determines the individual is not eligible for vocational rehabilitation services, change the TWP (JOBS) Program Status code to "JB- Incapacity" granting an exemption from TWP and VR requirements.

If a nonexempt (NE, EV, WL, WP, WH, VR and SM) TANF applicant informs the case manager during the TWP intake process that he/she is unable to work, the case manager will review the case record to determine if the eligibility worker reviewed the individual's medical documentation and denied the request for a medical exemption. If the case record does not indicate the possible medical exemption was considered by the eligibility worker, the case manager will refer the applicant back to the eligibility worker in person after the adult has

completed the substance abuse screening. (If the adult fails to comply with the substance abuse screening, the adult will not be referred back to the EW. The application will be denied.) In situations where the client requested the medical exemption and the eligibility worker denied the exemption, the client will be required to continue with the TANF Up Front process.

When an individual is referred back to the eligibility worker and does not have the required medical documentation, the eligibility worker will give the applicant a 10-day request for information, along with a MDHS-EA-331 and MDHS-EA-330 or MDHS-EA-333, which must be completed by the attending physician and returned timely. In this situation, the worker will handle the application, within the 30-day processing period, according to the above policy. If the applicant provides the required medical documentation, the eligibility worker will change the TWP (JOBS) Program Status code to "VR" and work back through the AFPD screen to refer the applicant back to JAWS (overnight). In this situation, the case manager must work closely with the VR counselor and eligibility worker to comply with timeliness standards.

The nonexempt referable TWP (JOBS) program status codes are CF, NE, EV, WL, WP, WH, SM and VR. The "VR-Vocational Rehabilitation" code will identify TANF applicants to be referred to the Mississippi Department of Rehabilitation Services, Office of Vocational Rehabilitation.

The adult of a child only case whose TANF participation code is OU or SS will not be required to comply with TANF Up Front requirements. These applications will be handled according to regular processing procedures. The worker will use the JOBS screen in MAVERICS to code adults for referral. After the worker processes the AFPD screen, MAVERICS will create a UJS file for each referable adult in real time, i.e., the case manager (JAWS) will have immediate, real time access to the file. (The referral process for non-referable adult applicants will be handled manually.)

When the AFPD screen is initially processed, all referable TANF applicant cases will be in REceived status. The REceived status will update to PEnded status if the AFPD screen is processed with pended information. The TANF case status and date will be updated to OPen at approval. MAVERICS will not create a UJS file if the applicant fails eligibility on the AFPD screen. The status of the UJS process will display on the CAP2 screen in MAVERICS after the eligibility worker successfully processes the AFPD screen. The status of the UJS referral will be Referral created, JAWS in Progress, Complied, Denied MAVS or Denied JAWS.

When it is determined that a **non-exempt** applicant is referable, the eligibility worker will schedule a TWP intake appointment with case management within three days via MAVERICS Notice A923, TANF Intake Appointment (TWP). The eligibility worker will put the A923 notice

to history for documentation purposes. A screen print copy of the A923 will be provided to the individual as notification of the appointment date and time. The referral, along with the appointment date and time, will be entered on MDHS-EA-319A, Work Program Referral Log, which will be forwarded to the case manager supervisor daily. The case manager supervisor will use MDHS-EA-319A to make case manager assignments. In counties where the eligibility worker and case manager are the same, the MDHS-EA-319A will still be necessary to document the results of the SASSI. The case manager will "pull" the case in JAWS and add the TWP intake appointment.

NOTE: If MAVERICS is not available during the interview process, the eligibility worker may use MDHS-EA-355 (T001), TWP Intake Appointment Letter, in lieu of the A923, to schedule the TWP intake appointment for non-exempt adults. MDHS-EA-355 is a manual version of the JAWS automated notice (T001) and should only be used if MAVERICS is not available, not on a routine basis.

When it is determined that an **exempt** applicant is referable, the eligibility worker will schedule a TWP intake appointment with case management within three days via MAVERICS Notice A901, Other Notice. The eligibility worker will put the A901 to history for documentation purposes. A screen print copy of the A901 will be provided to the individual as notification of the appointment date and time. The referral, along with the appointment date and time, will be entered on MDHS-EA-319B, Substance Abuse Screening Questionnaire Referral Log, which will be forwarded to the case manager supervisor daily. The case manager supervisor will use MDHS-EA-319B to make case manager assignments.

Referral to JAWS

The TANF applicant's participation code must be IN, DF or DI (except for IA-ineligible aliens) to refer adult and child case information to JAWS. The JOBS Program Status code for an exempt adult will be EV. The nonexempt applicant's TWP (JOBS) Program Status code must be one of the following:

NE - nonexempt	WL - working less than 20 hours
EV - exempt volunteer	WP - working 20 to 34 hours
SM - spouse mandatory	WH - working 35 or more hours
VR - vocational rehabilitation	CF - convicted drug felon or fleeing felon

Applicants whose TANF participation code is "OU," "SS" or "DI" (if the citizenship code is IA-ineligible alien) will not be referred to JAWS. Refer to Handling Unresolved TWP and Child Support Sanctions below for additional information regarding the DI code.

In small counties, TANF applicants may be referred to case management the same day as the TANF interview. In large counties, TANF applicants may be given an appointment to meet with case management. In either situation, the case manager supervisor will use the MDHS-EA-319A to manually assign TANF cases to the case manager(s). When a manual referral is received, the case manager will access the Pull Up-front Job Search Case (PUCA) screen in JAWS to "pull" the referred client. Once the client is "pulled," the client's information will display on the Client Information Inquiry (ICLI) screen and assign the client to the case manager's caseload. The case manager will then schedule a TWP intake appointment in JAWS for the date and time listed on the MDHS-EA-319A. TWP intake appointments cannot be rescheduled beyond three days from the initial appointment date. Refer to Chapter 8, Referral to the TANF Work Program, for further information.

Handling Unresolved TWP and Child Support Sanctions

Nonexempt TANF applicants who have an unresolved TWP or child support sanction are not exempt from TANF Up Front requirements. These individuals must have a participation code of "DI" for the application month in order for the individual to be referred to JAWS. Once the individual successfully completes the TWP intake process and TANF Up Front requirements, JAWS will notify MAVERICS that the application may be approved. The worker **must** change the benefit start date to the first day of the month following the month of compliance and approve the application. (A change in the SNAP start date will be dependent upon the situation, refer to Volume V). If the applicant had a child support sanction that remains unresolved, the application must be denied. If the child support sanction has been resolved, approve the application, if otherwise eligible.

Notification of Cooperation

When it is determined that an applicant has fully completed the TANF Up Front requirements, the case manager will enter the appropriate completion code on the Maintain Up-front Job Search (MUJS) screen or the MDHS-EA-319B, whichever is applicable. JAWS will interface with MAVERICS through the nightly batch process. MAVERICS will code the AUSP screen and send an alert to the TWP Alerts Due Today or Overdue (TWAD) screen informing the worker to process the application. The eligibility worker will process the application according to the code displayed on AUSP screen or the 319B. Fully Complied (FC) is the only completion code that will allow the application to be approved. Any code other than FC will result in denial of the application. All other TANF eligibility criteria must be met before a TANF application can be approved. If a denial code is received through the JAWS-to-MAVERICS interface, MAVERICS will automatically deny the application based on the denial code received from JAWS and notify the applicant via MAVERICS Notice X710. MAVERICS will generate an alert

to the eligibility worker that the application has been denied. Refer to Chapter 8, for additional information.

Non Compliance with TANF Up Front Requirements

At any point in the application processing period the applicant fails to comply with any requirements or assignments, e.g., misses a TANF appointment (eligibility intake), fails to provide requested information for eligibility, fails to keep the TWP intake appointment, fails to cooperate or fully complete the TANF Up Front requirements, etc., the application will be denied. The eligibility worker may deny the application at any point. When an application is denied in MAVERICS after the UJS process has started, MAVERICS will interface with JAWS through the nightly batch process and deny the case in JAWS. Applications for non-referable adults must be held for the 30-day processing period before denying the application.

An individual may reapply for TANF at any time. If an individual reapplies the same day a TANF application is denied, the clerk will hold the application until the next day and then register the TANF application for the application date entered on the MDHS-EA-900.

Earned Income Disregards

Applicants who find new employment any time after the UJS requirements have been explained (beginning with receipt of the MDHS-EA-303B and documentation of the MDHS-EA-900 or completion of the MDHS-EA-303C/MDHS-EA-303D) and the new income will cause the application to be denied will be entitled to the three-month earned income disregard (3D) if otherwise eligible. The eligibility worker will discuss the eligibility criteria for receiving the disregard and inform the recipient that the disregard months will count in the TANF 60-month time limit. Nonexempt applicants and exempt volunteers who are eligible for the earned income disregard will be referred to the TWP and required to participate in the TANF Work Program. TWP participants whose TANF cases close because of earned income or loss of the earned income disregard may be eligible for transitional supportive services (child care and transportation) if all eligibility criteria are met. Applicants who are exempt from TWP requirements will not be eligible for TANF transitional services after their cases close due to earned income or loss of the three-month disregard. Refer to Chapter 6, for additional information.

REFERABLE TANF RECIPIENTS

All adults TANF recipients who are not specifically exempt must be referred for TANF work activities, including:

- Individuals who are receiving unemployment benefits
- Individuals who are working, whether part-time or full-time
- Teen heads of household under age 20, once the child is 12 weeks of age
- VISTA volunteers and other volunteers participating in activities under the National Community Service Trust Act of 1993, such as AmeriCorps
- Individuals otherwise exempt as caretaker of a child under 12 months of age (JJ) or as a victim of domestic violence (JV) who wish to volunteer (EV)
- Individuals otherwise exempt (JB, JC, JF, JL and JD) who voluntarily waive their exemption and become non-exempt (NE)
- Minor dependents with a child of his/her own who needs supportive services to remain in school.
- Both parents in two-parent families, unless one is caring for a severely disabled child, other household member, child under 12 months or in their third trimester of pregnancy
- Parents or needy caretakers whose youngest children are over the age of 12 months
- Individuals who have been determined to be incapacitated (eligible for the “JB” code) or who report they are unable to work
- DF - drug/fleeing felons or fraud and DI disqualified for enumeration or failure to report a child not in the home

Referral of Working Individuals

Employment is not an exemption from the TANF Work Program. Employed individuals who do not meet another work exemption reason must be referred to the TWP. Those individuals whose work hours do not meet TWP participation requirements will be assigned to a countable work activity for sufficient hours to meet the work requirement.

NOTE: Prior to the TANF case closure, the worker must ensure exempt individuals (JJ or JV), who are employed, are given the opportunity to be referred to the TWP as an exempt volunteer "EV". The worker will explain to the exempt individual that a referral to the TWP will allow an application for supportive services (transitional child care and transitional transportation) to be processed. If the individual wishes to be referred to the TWP, the worker must complete MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, prior to making the referral. (Refer to Chapter 3, Volunteers, for additional information.)
Individuals working less than 20 hours weekly have a TWP referral code of "WL"; those working 20-34 hours weekly are coded "WP"; individuals working 35 or more hours weekly are coded "WH". MAVERICS monitors the monthly hours worked on the Earned Income

(EAIN) screen and compares the average hours to the referral code on the Jobs Opportunities and Basic Skills Program (JOBS) screen.

MAVERICS will display a warning message on the AFPD screen when the number of hours worked does not match the work program code displaying on the JOBS screen.

Termination of employment and receipt of unemployment benefits requires that the "W*" code be changed to NE. Receipt of unemployment benefits do not exempt the participant from the TWP.

Referral of Incapacitated Adults

Ongoing TANF recipients whose TWP (JOBS) Program Status code is "JB-incapacitated" will be changed to "VR", on the JOBS screen in MAVERICS, at the next regularly scheduled redetermination appointment, if they remain eligible for the exemption. These recipients will be referred to JAWS on the last day of the month prior to the effective month of the code change to "VR." Incapacitated adults who have previously been determined ineligible for Vocational Rehabilitation services will not be referred back to the TWP. The "JB" exemption code for these adults will continue if they are otherwise eligible. A TANF recipient whose "JB" code has expired or who reports an inability to work and a medical review determination is pending cannot be referred to the TWP until the appropriate medical documentation is provided. The eligibility worker will follow the same guidelines provided for TANF applicants to request medical documentation for submission to the Medical Review Team and case management. Cases for which the MDHS-EA-331 is not provided prior to the deadline for completing the redetermination will be handled according to the same guidelines provided for TANF applicants. Refer to Referable TANF Applicants, TANF Interview, for additional information. If the individual is determined to be ineligible for vocational rehabilitation services, the case manager will refer the individual back to the eligibility worker. The eligibility worker will change the individual's TWP (JOBS) Program Status code to the appropriate code and handle the case accordingly.

Teen Parents

Teen parents must stay in school until high school graduation or completion of a GED to prepare themselves for employment and self-sufficiency. "Teen parent" is defined as any PI who is under the age of 20. A teen head of household who maintains satisfactory school attendance for the month or participates in education directly related to employment for at least 25 hours per week meets the work participation requirement.

The teen head of household does not fall under regular TANF school attendance requirements. Such a teen parent who has not finished high school or completed a GED is not allowed to claim the JJ caretaker exemption for a child younger than 12 months. The teen may only claim the JJ exemption until the baby is 12 weeks of age, and then becomes a mandatory participant (NE). The case manager will assign the teen parent to an educational component, such as high school, GED program approved by the Department of Education, vocational course, technical school, or adult education program.

Teens referred to the work program will be monitored and tracked by case management and will be sanctioned for failure to participate satisfactorily. Supportive services are available to the teen parent.

A minor parent, defined as under the age of 18 who is a dependent in a TANF case rather than head of their own case is subject to regular TANF school attendance policy. If the minor dependent parent needs supportive services in order to remain in school, she/he may be referred to the TANF Work Program as a volunteer.

Volunteers

Certain exempt individuals may choose to volunteer for the TANF Work Program. Only the individuals in the following categories will be accepted as volunteers.

- Individuals who are caring for a child younger than 12 months of age that are eligible to claim the JJ exemption.

- Individuals who are victims of domestic violence that are eligible to claim the JV exemption. Individuals in an exempt category (JJ or JV) who wish to volunteer will be coded "EV - Exempt Volunteer" for referral to the TWP. Volunteers are not using months in their 12-month TANF exemption time limit. The EV code will cause the 24-month time limit counter to increment if the individual is not assigned to a work activity. Penalties for noncompliance, without good cause, with the TWP <u>will</u> apply to volunteers. Failure to attend or participate satisfactorily, without good cause, may result in a TANF sanction and a corresponding SNAP sanction. Prior to referral to the TWP as an "EV", the participant must sign form MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer. The 359 serves as case documentation that TWP rules and regulations were explained, and to acknowledge his/her understanding of TWP requirements and adverse action policy and regulations.

The “EV” code for an exempt volunteer that is no longer eligible for the JJ or JV exemption must be changed to NE (mandatory participant.) For example, a volunteer with a child younger than 12 months old will no longer qualify for the JJ exemption the month after the child's first birthday. The EV should be changed to NE for the first month of ineligibility.

A minor parent who is not the head of household (JI-dependent under age 18) is subject to TANF school attendance requirements. A minor parent who is attending school and needs assistance with child care expenses to remain in school may be referred to the TANF Work Program as a “MV-Minor Volunteer” in order to receive supportive services. A minor dependent who fails to attend school satisfactorily will be sanctioned under school attendance policy, not TWP. The minor parent’s TWP code should be changed from MV to JI and the appropriate school attendance penalty applied. Refer to Chapter 3, School Attendance Requirements, for additional and more detailed information.

A TANF recipient’s spouse whose presence in the case is disregarded for six months due to application of the Marriage Disregard will be referred to the TWP manually. The case manager must handle this individual manually because he/she is not actually in the JAWS system. Refer to Chapter 8, Volunteers, for more information.

Mississippi Band of Choctaw Indians

MDHS has entered into an agreement with the Mississippi Band of Choctaw Indians which allows the Tribe to operate a separate TANF Work Program for their TANF eligible members in seven Mississippi counties. The counties involved in this program are Jones, Kemper, Leake, Neshoba, Newton, Scott and Winston. Non-exempt Choctaws living in these counties must be served by the Tribal TANF Program rather than the MDHS TWP. A Choctaw Indian living in a county other than the seven listed above is considered a regular TWP referral. In this situation, the Choctaw indicator on the HERC screen in MAVERICS must be changed to "N" for the Choctaw to be counted in the TWP participation rate. NOTE: Choctaw Indians residing in a non-Choctaw county who are coded "N" will not be listed on the Active Choctaw Indians Report, but other household members who are coded "Y" will be listed. This report is used to identify and handle the TANF cases that receive distribution payments from the Mississippi Band of Choctaw Indians.

EXPLANATIONS

It is extremely important that the intake worker explain basic work program requirements so that the individual will know what to expect when he/she attends TWP orientation. The Worker must tell the individual that the number of hours required for participation in the TWP will be based

on the individual's Employability Development Plan (EDP) and work activity placement. The worker should not explain the minimum hours required to meet the monthly federal participation rate requirements.

REAPPLICATION FOLLOWING A SANCTION

When the TANF case closes because of a TWP violation, the case must not be re-approved until the minimum time period is served. After the timed sanction period has been served the case may be re-approved if the individual who committed the violation has met compliance, the family meets an exemption, and/or there is good cause for non-compliance. Cases closed for specific program violations will be identified in MAVERICS by the closure reason. There will be times when the TANF case will be frozen for another reason when the TWP noncompliance is received. Such cases will close for the original reason with no timed TWP sanction. However, any outstanding conciliation for TWP noncompliance must be resolved prior to approval of any re-application. Refer to Volume X, Chapter 5, Sanction Override (SANO) screen, and follow the system procedures provided to resolve an outstanding sanction when the individual meets an exemption or a fair hearing is involved.

A sanctioned individual may reapply for benefits at any time. However, he/she will not be eligible for benefits until the penalty period has ended. Any re-application filed prior to the 15th day of the last month of the minimum sanction period must be denied. The worker will need to explain the sanction period, re-application requirements, up-front job search (UJS) and the need to comply before re-approval. Re-applications received on or after the 15th day of the last month of the minimum sanction period will be accepted and the applicant will be required to comply with UJS requirements prior to approval, if otherwise eligible. MAVERICS will generate a referral that must be pulled to JAWS.

If the individual fails to comply, the case manager will deny the application on the third day. Only when compliance is met will the JAWS system send a referral back to MAVERICS, indicating UJS has been fully completed and the application can be approved, assuming all other eligibility factors are met.

An individual who is sanctioned and complies with the work program will be eligible to receive a TANF benefit the month after the month in which compliance is met.

EXAMPLE 1: A first level sanction was imposed for December and January. Any application prior to January 15 must be denied. An application received on or after January 15 will be worked in MAVERICS, creating a UJS referral to be pulled to JAWS. If application was made January 18th, the applicant has until January 20th (3

days) to complete the intake process with case management. If the intake process is not completed by that date, the application must be denied.

EXAMPLE 2: Application for the above example was made January 18, and the UJS referral has been received from JAWS verifying compliance on January 28. The benefit start date must be changed to February 1 and eligibility determined beginning with February. No benefits will be approved for January.

EXAMPLE 3: For the application received December 18, compliance with TWP was not verified until January 10 when the MDHS-EA-319 was received showing compliance as of January 9. The benefit start date must be changed to February 1 and eligibility determined beginning with February. No benefits will be approved for December or January.

REAPPLICATION FOR SNAP ONLY

If the parent/caretaker who caused the TWP sanction does not wish to reapply for TANF after the sanction period is served, he/she may apply for SNAP-only without complying with TWP requirements. (Refer to Chapter 3, Failure to Comply with TANF Work Program (TWP), for additional information.)

VOLUNTARY QUIT PROVISION

In the TANF Program, the voluntary quit provision mandates that no adult included in the assistance unit who is a mandatory work program participant **or an exempt volunteer** shall be eligible for participation in the TANF Program if he/she commits a voluntary quit violation without good cause. Criteria for determining whether an individual committed a voluntary quit violation are listed below:

1. Individual voluntarily quit his/her employment, without good cause; or

2. Individual was terminated by the employer as a direct result of personal action(s) committed by the individual, without good cause, e.g., disruptive behavior, inappropriate conduct or language, absenteeism (to include absence caused by the loss or lack of transportation), tardiness, etc.; or

3 Individual voluntarily reduces his/her work hours for any job of 20 or more hours per week, without good cause.

At the time of application, the worker shall explain to the applicant the consequences for committing a voluntary quit violation, without good cause. (Refer to Chapter 3, Ending a Voluntary Quit Provision Penalty/Disqualification, for information regarding compliance.)

An employee of the Federal, State or local government who engages in a strike against the government which results in dismissal from that job shall be treated as a voluntarily quit violation, without good cause. However, changes in employment status that result from involuntarily reducing hours of employment while working for the same employer, terminating a self-employment enterprise, or resigning from a job at the demand of an employer will not be considered as a voluntary quit for purposes of this provision.

If an individual quits a job, reduces his/her work hours, or is terminated by the employer as a direct result of personal action(s), e.g., disruptive behavior, inappropriate conduct or language, absenteeism (to include absence caused by the loss or lack of transportation), tardiness, etc., committed by the individual, then gets a new job at comparable wages or hours and then is laid-off or, through no fault of his own loses the new job, the earlier quit will not be considered as a basis for disqualification.

EXCEPTION**:** An individual meeting a work program exemption will be excluded from the voluntary quit provision. However, an exempt individual who chooses to be referred to the TWP as an exempt volunteer (EV) or who voluntarily waives his/her exemption status and is referred to the TWP as a nonexempt (NE) participant will not be excluded from the voluntary quit provision if he/she commits a voluntary quit violation while participating in the TWP, without good cause. Refer to Chapter 3, Exempt Individuals and Waiver of Exemption Status, for additional information.

INDIVIDUALS SUBJECT TO THE VOLUNTARY QUIT PROVISION

All household members should be tested for voluntary quit at application, recertification and during the certification period. If a member of an applicant household quits a job without good cause within two full calendar months prior to the month of application, or between the date of application and certification, a voluntary quit penalty will be applied. Since this is not a reportable change under simplified reporting rules, if a member of a certified household quits a job without good cause, a voluntary quit penalty will not be applied unless the voluntary quit is discovered within 60 days of the quit. If it is discovered that a household member quit a job, document the date of discovery and the date of quit. Determine if the discovery is within 60 days of the quit. Based on these dates, determine if a voluntary quit penalty should be applied.

The following individuals are subject to the voluntary quit provision:

1. Nonexempt individuals (parents and caretaker relatives) applying for TANF benefits.

2. TANF recipients who qualify for a work exemption as caring for a child under 12 months of age (JJ) or as a victim of domestic violence (JV) but voluntarily choose to participate in TWP as an exempt volunteer (EV.)

3. TANF recipients who qualify under the JB, JC, JF, JL and JD exemption codes but voluntarily choose to waive their exemption status and were referred to the TWP as a nonexempt (NE) individual.

NOTE: The household or individual may not be disqualified when the member who committed the violation becomes exempt from the work requirements before the sanction can be imposed. For example, in the case of the applicant household, if the member reports becoming exempt before the worker sends the notice of disqualification, the disqualification will not be imposed. Likewise, if a participating household member who committed a voluntary quit violation becomes exempt before the effective date of disqualification, the household will not be disqualified.

CRITERIA FOR IMPOSING VOLUNTARY QUIT PENALTIES

If an individual commits a voluntary quit violation within two full calendar months prior to the month of application or between the date of application and approval or while receiving TANF benefits, the voluntary quit provision will be applied based on the following criteria:

1. To applications with no prior TANF Transitional Transportation involvement only if the violation occurred within two full calendar months prior to the month of application or between the date of application and approval and the violation was without good cause. The penalty period always includes the month of application **plus** the following two full calendar months. (Refer to Chapter 3, Voluntary Quit Penalty for New Application with No Prior TANF Transitional Transportation Involvement, for additional information.)

2. To applications with prior TANF Transitional Transportation involvement if the violation occurred within two full calendar months prior to the month of application or between the date of application and approval and the violation was without good cause. (Refer to Chapter 3, Voluntary Quit Penalty for Application with Prior TANF Transitional Transportation Involvement, for additional information.)

NOTE: The penalty period for application with prior TANF Transitional Transportation involvement will always include the month of application plus the following **two (2)** or **six (6)** full calendar months. (Refer to Voluntary Quit Penalty for Applicant Households with Prior Transitional Transportation, for additional information.)

3. To ongoing cases if the violation occurred while the individual was receiving TANF benefits and the violation was without good cause. The appropriate TWP timed penalty period will be applied. (Refer to Chapter 3, Voluntary Quit Penalty for On Going Case, for additional information.)

IMPOSING THE DISQUALIFICATION PERIOD

When a determination is made that a nonexempt adult or an exempt volunteer committed a voluntary quit violation without good cause, the action to be taken depends upon whether it is an application with no prior TANF Transitional Transportation involvement; an application with prior TANF Transitional Transportation involvement; or an ongoing TANF case.

In an application situation with **no** prior TANF Transitional Transportation involvement, the penalty will apply to the entire assistance unit when the individual who commits the violation is the parent. The entire assistance unit will be ineligible for the TANF Program until the penalty period (month of application plus the following two full calendar months) is served. The penalty for this violation will apply only to the applicant who commits the violation if he/she has requested to be the needy caretaker relative. The needy caretaker relative shall be excluded from the assistance unit at least until the penalty period is served. Then the needy caretaker can request to be added to the case when the penalty period ends. The needy caretaker will be referred to the TWP at the time he/she is added to the TANF case, unless he/she meets a work program exemption.

In an application situation **with** prior TANF Transitional Transportation involvement, the penalty will apply to the entire assistance unit when the individual who commits the violation is the parent. The entire assistance unit will be ineligible for the TANF Program until the appropriate penalty period (month of application plus the following two or six full calendar months) is served. (Refer to Chapter 3, Voluntary Quit Penalty for Application with Prior TANF Transitional Transportation Involvement, for additional information.) The penalty for this violation will apply only to the applicant who commits the violation if he/she has requested to be the needy caretaker relative. The needy caretaker relative shall be excluded from the assistance unit at least until the penalty period is served. Then the needy caretaker can request to be added to the case. The needy caretaker will be referred to TWP at the time he/she is added to the TANF case, unless he/she meets a work program exemption.

In an ongoing TANF case, the penalty will apply to the entire assistance unit regardless of whether the person who committed the violation is a parent or other needy caretaker relative.

The assistance unit will be ineligible for TANF benefits until the appropriate TWP penalty period is served **and** he/she complies with the work program requirement or becomes exempt from the work program.

The penalty months for an application always includes the month of application plus the two or six full calendar months, whichever is applicable, following the month of application.

Voluntary Quit Date	Application Date	Penalty Period *	Comments
February 28	May 5	None	Quit occurred more than two full calendar months prior to the month of application.
January 5	March 8	March - May	Application with no prior TANF Transitional Transportation and the quit occurred less than two full calendar months prior to the month of application.
March 31	April 15	April - June	Application with prior TANF Transitional Transportation (TT). The last TT benefit month was more than 12 months prior to the month in which the violation occurred and the quit occurred less than two full calendar months prior to the month of application.
March 31	April 15	April - October	Application with prior TANF Transitional Transportation (TT). The last TT benefit month was 12 months or less prior to the month in which the violation occurred and the quit occurred less than two full calendar months prior to the month of application.

* The penalty period always includes the month of application **plus** the two or six full calendar months, whichever is applicable, following the month of application.

VOLUNTARY QUIT PENALTY FOR NEW APPLICATION WITH NO PRIOR TANF TRANSITIONAL TRANSPORTATION INVOLVEMENT

An individual who commits a voluntary quit violation without good cause, within **two full calendar months** prior to the month of application or at any time thereafter, will not be eligible for TANF benefits until the penalty period has ended and the individual is otherwise eligible.

Application with NO Prior TANF Transitional Transportation Involvement to be Tested

Applicants shall be disqualified if the individual(s) to be tested meets all of the following conditions:

1. The individual is the parent or needy caretaker relative, and

2. The individual committed a voluntary quit violation within two months prior to the month of application, or between the date of application and approval; and

3. The violation involved work of at least 20 hours per week or produced earnings in an amount at least equivalent to the Federal minimum wage multiplied by 20 hours; or the hours were permanently reduced for any job of 20 hours or more; and

4. The violation was without good cause.

NOTE: If the needy caretaker relative who committed the violation is not the parent of the child(ren) in the assistance unit, deny eligibility for the needy caretaker relative only and test eligibility for the children. Refer to Imposing the Disqualification Period below for further information.

The penalty period always includes the month of application plus the following two full calendar months.

EXAMPLE: Individual quit job, without good cause, on March 12 and applied for TANF benefits on April 15. The applicant is ineligible and the application must be denied. Any application prior to June 15 will be denied. The individual will be ineligible until the penalty period has ended. An application received on or after June 15 from the disqualified individual will be processed with a benefit start date of July 1, if otherwise eligible.

Applicant Who Committed the Violation Becomes Exempt before Sanction Imposed

The household or individual may not be disqualified when the member who committed the violation becomes exempt from the work program before the sanction can be imposed. For example, in the case of the applicant household, if the member reports becoming exempt before the worker sends the notice of disqualification, the disqualification will not be imposed. Likewise, if a participating household member who committed a voluntary quit violation becomes exempt before the effective date of disqualification, the household will not be disqualified.

Disqualification of Applicant Households with NO Prior TANF Transitional Transportation Involvement

If the entire applicant household is to be penalized, the application shall be denied.

The household will be sent MAVERICS notice **A238, TANF Denial-Quit Job**, advising the household of the following:

1. The specific act or noncompliance committed; and

2. The proposed penalty period; and

3. A statement that the household may reapply after the penalty period.

If the individual is a needy caretaker relative other than a parent, the application must be processed only for the children. The **A101, TANF Approval Notice,** will be sent explaining that the individual may ask to be added to the case at the end of the penalty period. In either case, it is not a countable violation and no TWP sanction will be added in MAVERICS on the TASH screen. The worker must complete MDHS-EA-302, TANF Voluntary Quit Tracking Log, to permanently document the individual's case record.

Ending A Voluntary Quit Provision Penalty/Disqualification for Applicant Households with NO Prior TANF Transitional Transportation Involvement

A reapplication for TANF, following a voluntary quit penalty, will be processed as follows:

Penalty Applied To Parent at Application

Following the end of the penalty period (month of application plus the following two full calendar months), the household may reapply and, if otherwise eligible, be authorized to participate. The non-exempt parent will be required to comply with TANF Up-Front

requirements and upon TANF approval will be referred to TWP, unless otherwise exempt.

NOTE: If the individual reapplies on or after the 15th of the last month of the penalty period, the benefit start date will be changed to the month following the end of the penalty period.

Penalty Applied To Needy Caretaker Relative at Application

Following the end of the penalty period (month of application plus the following two full calendar months), the caretaker relative other than a parent may request to be added to the case, if otherwise eligible. If eligible, the individual shall be added to the case the month following the expiration of the penalty period or following the request, whichever is later.

VOLUNTARY QUIT PENALTY FOR APPLICANT HOUSEHOLDS WITH PRIOR TANF TRANSITIONAL TRANSPORTATION INVOLVEMENT

A former TANF recipient who received TANF Transitional Transportation (TT) benefits, at any time, and quit his/her job, without good cause, may be subject to a voluntary quit penalty at reapplication for TANF. If the individual's last TANF TT benefit month was more than 12 months prior to the month in which the voluntary quit violation occurred, a minimum penalty period of the month of application plus the following two full calendar months will be applied. If the individual's last TANF TT benefit month was 12 or less months prior to the month in which the voluntary quit violation occurred, a minimum penalty period of the month of application plus the following six (6) months will be applied. The penalty period always includes the month of application plus the two or six full calendar months following the month of application.

When determining the time lapse between the last TT benefit month and the month in which the violation occurred, the count begins the month following the last TT benefit month. For example:

Last TT Benefit Month	Month Violation Occurred	Time Lapse Between TT and Violation	Penalty to be Applied
07/13	08/14	13 months	Month of Application PLUS 2 Months
08/13	08/14	12 months	Month of Application PLUS 6 Months

Applications WITH Prior TANF TT Involvement to be Tested

Applicants with prior TANF TT involvement shall be disqualified if the individual to be tested meets all of the following conditions:

1. The individual is the parent or needy caretaker relative, and

2. The individual received, at any prior time, TANF TT benefits; and

3. The individual committed a voluntary quit violation within two months prior to the month of application, or between the date of application and approval; and

4. The violation involved work of at least 20 hours per week or produced earnings in an amount at least equivalent to the Federal minimum wage multiplied by 20 hours; or the hours were permanently reduced for any job of 20 or more hours; and

5. The violation was without good cause.

If the individual who committed the violation becomes exempt before the effective date of disqualification, the household will not be disqualified.

Examples for Applying a Voluntary Quit Penalty to Applications WITH Prior TANF Transitional Transportation Involvement

NOTE: For all TANF applications, the penalty period will always include the month of application **PLUS** either the **two** or **six** full calendar months following the month of application.

EXAMPLE 1: TANF case closed effective January 1, 2014, because of earned income. Individual received transitional transportation benefits from January through March 2014 (3 months). The individual quit his/her job March 31, 2014, without good cause. The individual reapplied for TANF benefits on April 15, 2014. The last transitional transportation benefit month was 12 months or less prior to the month in which the voluntary quit violation occurred; therefore, the worker will apply a six-month penalty (April, the month of application plus six months, May through October 2014). The family will be ineligible until the penalty period has ended. An application prior to October 15, 2014, will be denied. An application on or after October 15, 2014, will be processed with a benefit start date no earlier than November 1, 2014, if otherwise eligible. At approval, the individual will be referred to the TANF Work Program unless the family meets a work program exemption. The individual has 15 months remaining on his/her 18-month TT counter (lifetime maximum.)

EXAMPLE 2: TANF case closed effective January 1, 2012, because of earned income. Individual received transitional transportation benefits from January 2012 through July 2013 (19 months). The individual quit job August 19, 2014, without good cause, and reapplied for TANF benefits on September 2, 2014. The last

transitional transportation benefit month was more than 12 months prior to the month in which the voluntary quit violation occurred; therefore, the worker will apply a two month penalty (September, the month of application plus two months, October through November 2014). The family will be ineligible until the penalty period has ended. An application prior to November 15, 2014, will be denied. An application on or after November 15, 2014, will be processed with a benefit start date no earlier than December 1, 2014, if otherwise eligible. At approval, the individual will be referred to the TANF Work Program, unless the family meets a work program exemption. The individual has used up the lifetime maximum allowed for receiving transitional transportation. Any future applications for TANF Transitional Transportation will be denied.

EXAMPLE 3: TANF case closed effective January 1, 2012, because of earned income. Individual received transitional transportation benefits from January 2012 through August 2013 (20 months). The individual quit job August 19, 2014, without good cause, and reapplied for TANF benefits on September 2, 2014. The last transitional transportation benefit month was 12 or less months prior to the month in which the voluntary quit violation occurred; therefore, the worker will apply a six month penalty (September, the month of application plus six months, October 2014 through March 2015). The family will be ineligible until the penalty period has ended. An application prior to March 15, 2015, will be denied. An application on or after March 15, 2015, will be processed with a benefit start date no earlier than April 1, 2015, if otherwise eligible. At approval, the individual will be referred to the TANF Work Program, unless the family meets a work program exemption. The individual has used up the lifetime maximum allowed for receiving transitional transportation. Any future applications for TANF Transitional Transportation will be denied.

EXAMPLE 4: TANF case closed effective January 1, 2012, because of earned income. Individual received transitional transportation benefits from January 2012 through December 2013 (24 months). The individual quit job January 16, 2014, without good cause, and reapplied for TANF April 1, 2014. In this example, voluntary quit does not apply because the quit date is more than two full calendar months prior to the month of application. The application will be processed according to ongoing policy. The individual has used up the lifetime maximum allowed for receiving transitional transportation. Any future applications for TANF Transitional Transportation will be denied.

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EXAMPLE 5: TANF case closed effective January 1, 2012, because of earned income. Individual received transitional transportation benefits from January through March 2012 and July 2012 through January 2013 (10 months). The individual quit a job December 20, 2013, without good cause, and reapplied for TANF February 15, 2014. The last transitional transportation benefit month was 12 months or less prior to the month in which the voluntary quit violation occurred; therefore, the worker will apply a six-month penalty (February, the month of application, plus six months, March through August 2014). The family will be ineligible until the penalty period has ended. An application prior to August 15, 2014, will be denied. An application received on or after August 15, 2014, will be processed with a benefit start date no earlier than September 1, 2014. At approval, the individual will be referred to the TANF Work Program unless the family meets a work program exemption. The individual has 8 months remaining on the 18-month lifetime maximum allowed for receiving TANF Transitional Transportation benefits.

The following TABLE displays data for the above five examples.

No	TANF Closure Date	TANF TT Months	Voluntary Quit Date	TANF Application Date	Penalty Applied	Penalty Period*
1	01/01/14	01/14-03/14	03/31/14	04/15/14	6-month	04/14 plus 05/14-10/14
2	01/01/12	01/12-07/13	08/19/14	09/02/14	2-month	09/14 plus 10/14-11/14
3	01/01/12	01/12-08/13	08/19/14	09/02/14	6-month	09/14 plus 10/14-03/15
4	01/01/12	01/12-12/13	01/16/14	04/01/14	None	None
5	01/01/12	01/12-03/12 07/12-01/13	12/20/13	02/15/14	6-month	02/14 plus 03/14-08/14

* For all TANF applications, the penalty period always includes the month of application **PLUS** either the **two** or **six** full calendar months following the month of application.

Disqualifications of Applicant Households WITH Prior TANF Transitional Transportation Involvement

The application shall be denied from the date of application. The household must be sent MAVERICS notice **A238, Denial-Quit Job**, advising the household of the following:

1. The specific act or noncompliance committed;

2. The proposed penalty period; and

3. A statement that the household may reapply after the penalty period.

If the individual is a needy caretaker relative other than a parent, the application will be processed If the individual is a needy caretaker relative other than a parent, the application will be processed only for the children. The **A101, TANF Approval Notice,** will be sent explaining that the individual may ask to be added to the case at the end of the penalty period. In either case, it is not a countable violation and no TWP sanction will be added in MAVERICS on the TASH screen. The worker will complete MDHS-EA-302, TANF Voluntary Quit Tracking Log, to permanently document the individual's case record.

Ending a Voluntary Quit Provision Penalty/Disqualification for Applicant Households WITH Prior TANF Transitional Transportation Involvement

A reapplication for TANF, following a voluntary quit penalty, will be processed as follows:

Penalty Applied To Parent at Application

Following the end of the penalty period (month of application plus the following two or six full calendar months), the household may reapply and, if otherwise eligible, be authorized to participate. TWP compliance is not required prior to approval. However, the non-exempt parent will be referred to the TWP upon approval, unless otherwise exempt.

NOTE: If the individual reapplies on or after the 15th of the last month of the penalty period, the benefit start date will be changed to the month following the end of the penalty period.

Penalty Applied to Needy Caretaker Relative at Application

Following the end of the penalty period (month of application plus the following two or six full calendar months), the caretaker relative, other than a parent may request to be added to the case, if otherwise eligible.

If eligible, the individual shall be added to the case the month following the expiration of the two or six-month penalty period or following the request, whichever is later.

VOLUNTARY QUIT PENALTY FOR RECIPIENT HOUSEHOLDS

A TANF recipient who commits a voluntary quit violation, without good cause, while receiving TANF benefits will be disqualified for the appropriate TANF Work Program (TWP) timed penalty period.

EXAMPLE 1: Individual quit job, without good cause, on March 12, but did not report job loss to the worker. Worker discovered the job loss on April 15 when check stubs were not submitted. The household will be sanctioned for the appropriate TWP timed penalty period. Any application received prior to the 15th of the last month of the timed penalty period will be denied. The household will be disqualified until the penalty period has ended and the individual has met compliance or the family meets an exemption.

EXAMPLE 2: This situation involves a TANF recipient, with prior TANF Transitional Transportation involvement, who committed a voluntary quit violation on December 20, 2013, without good cause. The violation was reported to the worker on January 15, 2014. The worker will apply the appropriate TWP timed penalty and close the TANF case. This is the individual's third TWP penalty (12- month penalty); therefore, the penalty period will be February 2014 - January 2015. The family will be ineligible until the timed penalty period has been served and the individual who committed the violation has met compliance or the family meets a work program exemption. An application prior to January 15, 2005, will be denied. An application received on or after January 15, 2015, will be processed according to ongoing policy. The individual received TANF Transitional Transportation from August 2010 through February 2011 (7 months). The individual has 11 months remaining on the 18-month lifetime maximum allowed to receive transitional transportation.

Recipient Households to be Tested

A recipient will be disqualified if the individual(s) to be tested meets all of the following conditions:

1. The individual is the parent or needy caretaker relative, and

2. The individual committed the violation while participating in the TANF program; and

3. The violation involved work of at least 20 hours per week or produced earnings in an amount at least equivalent to the Federal minimum wage multiplied by 20 hours; or the hours were permanently reduced for any job of 20 hours; and

4. The violation was without good cause.

NOTE: If an assistance unit is already participating when a violation which occurred prior to approval is discovered, the individual will be treated as a recipient and the sanction applied accordingly.

Disqualification of Recipient Households

If it is determined that a recipient household is to be disqualified, the household will be sent a notice of adverse action within 10 days after the determination of the violation is made. The disqualification period begins with the first available month following the expiration of the 10 day adverse action period. The disqualification period for recipient households is as follows:

First Violation: two months or until compliance, whichever is longer; Second

Violation: six months or until compliance, whichever is longer; Third

Violation: twelve months or until compliance, whichever is longer; or Fourth

Violation: permanently disqualified.

If the household requests a fair hearing with continued benefits and the county action is upheld, a claim shall not be completed. The household shall be disqualified/sanctioned beginning the month following the month the hearing decision is received by the county office.

MAVERICS will automatically generate a TANF closure notice based on the TWP noncompliance reason entered in JAWS. The notice will advise the household of the following:

1. The specific act of noncompliance committed;

2. The proposed period of disqualification;

3. A statement that the household will be ineligible until the disqualification period ends; and

4. A description of the action which can be taken to end or avoid disqualification.

This is a countable violation and will be processed in MAVERICS as other work program violations.

Ending a Voluntary Quit Provision Penalty/Disqualification for Recipient Households

Following the end of the appropriate TWP penalty period, a household shall be permitted to reapply and, if otherwise eligible, resume participation if the parent or needy caretaker relative:

1. Becomes exempt from the TANF Work Program, or

2. Complies with the work program by participating in a new TWP orientation session, or

3. Acquires employment of comparable wages and hours, or

4. Is assigned to another TWP component.

NOTE: If the individual reapplies on or after the 15th of the last month of the penalty period, he/she will be referred to the TANF Work Program and must comply with work requirements or meet a work program exemption before the application can be approved, if otherwise eligible. The benefit start date will be changed to the month following the month of compliance**.** An application received prior to the 15th of the last month of the penalty period will be denied.

VERIFICATION

The worker will request verification of the household's statements concerning the violation only if the information is questionable. The primary responsibility for providing verification rests with the household. However, the worker will assist the household in obtaining the needed verification if the household finds it difficult or impossible to obtain documentary evidence in a

timely manner. Acceptable sources of verification include, but are not limited to, the previous employer, employee associations, union representatives and grievance committees or organizations. Whenever documentary evidence cannot be obtained, the worker will substitute a collateral contact. The worker is responsible for obtaining verification from acceptable collateral contacts provided by the household.

If both the worker and the household are unable to obtain requested verification from these or other sources because the cause for the violation resulted from circumstances that for good reason cannot be verified, such as a resignation from employment due to discrimination practices or unreasonable demands by an employer or because the employer cannot be located, the household will not be denied access to the TANF program.

The worker or case manager will explain to the applicant and/or recipient the consequences of voluntarily quitting a job, voluntarily reducing work hours or being terminated by the employer as a direct result of personal action(s), e.g., disruptive behavior, inappropriate conduct or language, absenteeism (to include absence caused by the loss or lack of termination), tardiness, etc., committed by the individual, without good cause.

DOCUMENTATION OF THE TANF CASE RECORD

The worker will use form MDHS-EA-302, TANF Voluntary Quit Tracking Log, to permanently document an individual's TANF case record when an individual commits a voluntary quit violation without good cause and a penalty is imposed. The worker will also use MDHS-EA-302 to track voluntary quit penalties to ensure the penalty period has ended before the individual or household is approved for TANF benefits, if otherwise eligible.

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INCOME TOTALLY DISREGARDED

The following types of income are disregarded totally in establishing eligibility and the payment amount for TANF:

1. Temporary Assistance for Needy Families (TANF) and Refugee Cash Assistance (RCA).

2. Any payments distributed per capita or held in trust and any interest and investment income from purchases made with funds pursuant to any judgment of Indian Claims Commission or the Court of Claims in favor of any Indian Tribe.

3. Payments for supportive services or expenses to individual volunteers serving as foster grandparents, senior health aides, or senior companions, and to individuals serving under the Domestic Volunteer Service Act of 1973.

4. Any payments to volunteers in VISTA or ACTION.

5. The value of supplemental food assistance received under the Child Nutrition Act of 1966 or the National School Lunch Act, as amended.

6. The weekly needs-based payment made to certain trainees under the Workforce Investment Act of 1998 (WIA).

7. Payments for supportive services made to participants under the TANF Work Program (TWP). See OTHER TYPES OF UNEARNED INCOME, TANF Work Program later in this chapter for the treatment of income received under the TWP.

8. The tax-exempt portions of payment made pursuant to the Alaska Native Claims Settlement Act.

9. Bonus food stamp benefits or surplus commodities received from U.S.D.A and meals furnished through the Nutrition programs for the elderly.

10. Payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act.

11. Supplemental Security Income (SSI) payments (recipients are excluded from TANF).

12. All student financial assistance, including loans on which payment is deferred, grants,

scholarships, fellowships, Veteran's educational benefits, federal and state work study programs, and other similar educational assistance.

13. Payments made with respect to a dwelling under various Housing Acts. These payments are handled by HUD, and can be identified by that agency.

14. Earnings of all full-time students, or part-time students attending school half-time, who are dependent children. This includes on-the-job training through WIA.

15. Payments received by recipients who are on home dialysis for the purpose of paying a family or non-family member as a home dialysis aide under the "Incentives for Home Dialysis" experiment funded by the Department of Health and Human Resources.

NOTE: The earnings of a person providing this service are considered as his/her earned income.

16. Income from another agency or organization when (a) the income is for a designated item not included in the financial need income test, or (b) the income is for items included in the financial need income test but the income and the TANF payment do not exceed the deficit, or (c) the income is given for a different purpose, such as a vocational rehabilitation, emergency payment of energy bills, the home dialysis program, WIA training allowances, etc. See Chapter 4, Workforce Investment Act.

17. Income in-kind.

18. Any non-recurring income received too infrequently or irregularly to be reasonably anticipated, not to exceed $30 per person in any calendar quarter. This may include small gifts of cash for birthday, graduation, etc. A gift for the entire assistance unit may be divided in any way that is most advantageous to the unit.

19. Redress monies paid to eligible Japanese and Aleuts who were unjustly treated during World War II.

20. Any payment received on or after January 1, 1989, as a result of Agent Orange litigation.

21. Any payment from the earned income tax credit (EITC).

22. Any monthly allowance paid to a child of a Vietnam veteran for any disability resulting from spina bifida suffered by such child.

23. Payments from emergency or major disaster. This includes Federal Emergency Management Assistance (FEMA), Disaster Unemployment Assistance, and National Flood Insurance Program (NFIP) payments made under the National Flood Insurance Act of 1968 (P.L. 109-64).

24. Total earnings for six (6) months when the individual finds new employment of at least 35 hours per week within the first 30 days following (1) approval for TANF or (2) start of job readiness training. This is a one-time disregard. See Chapter 6, *Total Earned Income Disregard*, for further discussion.

25. Total earnings for three (3) months when increased earnings or loss of disregards causes ineligibility for TANF money payment provided the six month disregard mentioned above has not been used. See *Chapter 6, 3-Month Income Disregard*, for further discussion.

26. As an incentive for two-parent families, when a TANF PI marries on or after October 1, 1999, the income of the newly married spouse is to be disregarded for six consecutive months. If reported timely, the disregard period begins with the month the spouse is added to the case. If not reported timely the disregard begins with the month the spouse could have been added. This disregard is applicable only in the TANF case and is a one-time disregard.

27. Any income received by a family cap child, including child support. Note: The child's income is coded by the child for TANF purposes.

28. Combat pay: This is additional pay received by military personnel as a result of being deployed to a combat zone. The leave and earnings statement will indicate whether the deployed military person is receiving combat pay. Other verification may be obtained.

29. On-the-job training and other payments received through the Summer Youth Employment and Training Program.

30. Medical Loss Ratio (MLR) rebates from insurance companies. Such payments are considered as non-recurring lump sum payments.

DEFINITION OF EARNED AND UNEARNED INCOME

Income can generally be categorized as either earned or unearned, depending on its source. Unearned income requires no physical activity by the recipient and is usually in the form of a pension, benefit or compensation. Earned income is obtained through the individual's own efforts and is usually in the form of (1) wages, salary, or commissions received as an employee of another person or company or (2) profit gained through self-employment when the individual gives substantial services in connection with the enterprise.

GROSS INCOME TESTED

All earned and unearned income except that specifically disregarded must be tested against the gross income test.

Consider as income only the amount actually received by an individual from a source such as RSDI when a part of the amount of entitlement is being withheld from the monthly payment to repay a prior overpayment received from that income source. The Social Security amount shown on page 1 of an IEVS BENDEX alert is the total of the individual's Social Security check including Medicare premium if paid by that individual (not state buy-in). If the Medicare premium is not state buy-in, the amount of the premium will be added to the amount shown on the monthly Social Security check, **if** the check is used to verify the income. Exception: Monies being withheld or recouped from a payment from a means-tested program to repay an overpayment that was caused by a household's failure to comply with the other program's requirements shall be income. Note that this does not apply when benefits are reduced to repay an overpayment caused by agency error. Examples of means-tested programs are TANF, General Assistance (GA), publicly funded housing or other assistance programs based on need.

See *Chapter 4, Earned Income To Be Averaged,* for deducting business expenses from self-employment income. Also, see *Chapter 6, Budgeting Net Monthly Earned Income,* for further discussion on budgeting income.

NET INCOME TESTED

Net income which must be tested against the 100% need standard includes unearned income and earned income after certain deductions are allowed from gross earnings. Countable support payments from an absent parent are included in the 100% test budget.

LUMP SUM PAYMENTS

Income Versus Resources

Income must be distinguished from resources as both may be received in lump sum payments. The sale of an asset, income tax refunds, retroactive TANF, and accumulated retirement funds which are available for withdrawal and required by policy to be withdrawn are considered resources.

Regular Monthly Income

Income received annually or periodically (less often than monthly) from the same source must be considered as income and is averaged over the period it is intended to cover, unless specifically addressed or excluded in this chapter.

The yearly payments on a property sale and the yearly rental on an oil lease are averaged over a twelve month period and used as regular monthly income.

Lump Sum Income

The majority of lump sum payments that a client may receive, unless otherwise disregarded, are considered as resources in the month received. Some of these payments may be classified as windfalls. A windfall is defined as a sum that is not earned, does not occur on a regular basis, but does not represent an accumulated monthly income received in a single sum. A windfall may be an inheritance, benefits from a life insurance policy, lottery winnings, personal liability accident settlements, and Job Corps readjustment payments.

The most common lump sum payments received by individuals are nonrecurring payments, such as retroactive RSDI benefits. Any portion of this lump sum payment identified as a payment for the current month must be counted as income. Lump sum child support arrearage payments received directly and retained by the recipient, and excess arrearage payments collected by IV-D and returned to the family, are treated as resources in the month received. (Lump sum payments from SSI should be totally disregarded). Other types of non-recurring lump sum payments include income tax refunds, rebates, or credits, retroactive TANF or other payments, lump sum insurance settlements, vacation pay received in one payment, lottery winnings, refunds, etc.

Lump sum death benefits from RSDI should be disregarded when it is verified that the benefit

was used to pay medical bills and/or funeral expenses for the deceased, or that the funds were used to replace a resource or portion of a resource depleted to meet the expenses noted above.

ANTICIPATING EARNED INCOME

In determining eligibility, the worker must reasonably anticipate the household's monthly income for the duration of the certification period. Reasonably anticipated income is based on the income received in the four weeks prior to the date of interview, based on frequency of pay, excluding any income that cannot be reasonably anticipated to continue during the certification period. For example, overtime not usually received, a one-time bonus, etc. If a future change is indicated at the time of application or recertification, the prospective income will be based on a future change. Future changes must be verified and include changes such as a job change, reduction of hours, a lay-off, etc.

Noncontinuing income will not be considered in determining reasonably anticipated income for a household. However, the noncontinuing/terminated income will be counted in the appropriate budget month.

Information known to the agency through any source (client reports, MAVERICS generated report, a fraud tip, seeing a client at work, etc.) must be acted upon.

As mentioned earlier in this material, to reasonably anticipate the household income, the worker must explore the income from the four weeks prior to the interview for an applicant household or a recertification. If a change is reported during a certification period the worker must use check stubs, wage form, etc. to determine anticipated income.

> Example: At interview October 17, based on a household member's weekly pay schedule, the four most recent check stubs for the dates of September 23, September 30, October7, and October 14 would be requested.
>
> Example: A client paid bi-weekly is interviewed September 8. It is determined that the client's most recent paycheck was received September 2. Based on the pay schedule, check stubs for September 2 and August 19 would be requested to reasonably anticipate income.
>
> Example: A recipient reports a new job. The worker should use check stubs and/or a wage form (MDHS-EA-910) to determine countable anticipated income for the remainder of the certification period.

When an individual changes jobs, only the income from the new job should be used to update the case. A MDHS-EA-910, Request for Employment Verification, completed by the employer is the best way to gather the information needed to work the case.

A MDHS-EA-910, Request for Employment Verification, is used to determine the income when the individual does not have income from the four weeks prior to the interview. The worker will multiply the hourly rate by the average number of hours to obtain a weekly amount to be converted.

> Example: A MDHS-EA-910, Request for Employment Verification, is returned showing the individual will be working between 20 and 25 hours per week, making $6.00 an hour. The worker should calculate 6 x 22.5 to determine a weekly income of $135.00. This amount would then be converted based on the pay schedule.

In some instances, the employer may indicate both the wage and hour information and list one or two checks received. The worker should use the checks received in the four weeks prior to the interview and the amount determined by the scheduled hours multiplied by the hourly wage to establish a full month of wages for future months.

> Example: The application was taken August 2 and the interview was conducted on August 9. A MDHS-EA-910, Request for Employment Verification, is returned showing the individual will be working 35 hours per week at $5.75 per hour. Also listed are two weekly checks received in the month of July in the amounts of $201.25 and $207.00. To determine the ongoing income for the case, the worker will use the $201.25 and $207.00 checks and for the other 2 weeks, use $201.25(35 x 5.75)

> Example: A MDHS-EA-910, Request for Employment Verification, is returned showing the individual may be working 40 hours per week at $6.00 per hour. Also listed is the first check received in August, that only covered 2 days out of 5. The individual is paid weekly and will receive three more checks in August. The worker will use the first check and for the additional three checks, determine the weekly amount by multiplying the 40 hours by the $6.00 for a weekly total of $240. For the initial month only, the actual income would be used with the second and subsequent months being converted from a weekly amount of $240 per week.

Once reasonably anticipated income for a household is determined, the income will be coded in the MAVERICS system. The system will convert the income based on the frequency of the income. For example, income paid weekly will be converted by 4.33, bi-weekly converted by 2.15, and semi-monthly multiplied by 2.

If income cannot be reasonably anticipated to be received in the certification period, it should not be used.

Exploring Fluctuating Income

Income to be included in the case must be the best estimate of future earnings. Situations often occur where the recipient/applicant has checks with fewer hours than regularly scheduled. The reason for the lower hours should be explored with the recipient/applicant and if needed, a MDHS-EA-910, Request for Employment Verification, may be used to gather hourly wages and the hours scheduled.

In situations where a recipient/applicant has reduced hours on a check and the reduction is not ongoing and employer initiated, the normally scheduled hours multiplied by the hourly wage should be substituted for the gross.

> Example: An interview takes place on March 17. Wages from the prior four weeks are requested. When the checks are turned in, one check shows 20 hours instead of 40. The worker must contact the individual to determine why she only worked 20 hours. The individual stated her child was sick and could not go to day care. The worker should substitute 40 hours multiplied by the hourly wage to use in place of the 20-hour check.

Exploring Non-Regular Income

Check stubs often reflect holiday, vacation, bonuses, overtime, etc. The worker must discuss the frequency of this income. Additional information from the employer may be required if the check stubs do not show a clear history of the payment. However, check stubs showing year-to-date totals will give the best indication of the frequency of this income and assist in determining regular ongoing income or infrequent overtime and bonuses.

Income that is not considered normal, ongoing income for each month should be excluded from the budget. The worker must clearly document why this income was excluded.

> Example: At recertification in April, a recipient turns in the four most recent check stubs. On one of the check stubs, the individual received 10 hours of overtime. Since the year-to-date total for overtime only shows the amount received on this check and the client stated that she took an extra shift for someone who was out sick, the 10 hours of overtime would be excluded.
>
> Example: At recertification in January, a recipient turns in the 2 most recent bi-weekly check stubs. The client stated that she had overtime due to the holidays. If the year to date total for overtime supports this, the overtime would be excluded in the budget.
>
> Example: At application in January, the individual turns in his four most recent check stubs. Each check stub shows overtime. The year-to-date total for overtime shows $12,567 for the year. The overtime would be included in the budget.

FROM WAGES AND SALARIES

Earned income shall include:

1. All wages, salaries and tips for services performed as an employee. This includes wages held at the request of the employee, advances on income, and other taxable income received on a regular basis such as, Christmas bonus, profit sharing, etc.

   Certain food and beverage establishments allocate a certain amount of tips on the employee's W-2 form (Box 6); however, the employer withholds taxes based on the employee's reported amount of tips and not the allocated amount. Only the amount of

tips reported by the employee rather than the allocated amount should be counted as income.

Advances are distinguishable from loans in that advance wage payments are made in exchange for services or labor to be performed, while loans are made in exchange for repayments of the principle amount plus, in most circumstances, interest.

Wages and salaries, as well as vacation pay received after employment ends (for example, the last paycheck as opposed to severance pay) will be considered earned income when it is received in more than one installment. Severance pay is not earned income. See SEVERANCE PAY in this chapter.

Sick pay provided by the employer is considered earned rather than unearned income if the employee is going to return to work when recovered and is still considered an employee by his employer. Generally, this is a continuation of salary with normal payroll deductions.

Sick pay or disability benefits from a source other than the employer, such as an insurance company, is unearned rather than earned income even if the employee intends to return to work.

Money which is diverted from an employee's gross earnings through a cafeteria plan to pay certain expenses such as child care or medical expenses is counted as income.

2. The total income, after appropriate exclusions, from a self-employment enterprise, including the total gain from the sale of any capital goods or equipment related to the business.

Payments from a roomer or boarder, except foster care boarders, shall be considered a self-employment enterprise regardless of the number of hours spent weekly in providing the service.

Ownership of rental property shall be considered a self-employment enterprise. However, income derived, less the cost of doing business; from the rental property shall be considered earned income only if a member of the assistance unit is actively engaged in the management of the property at least an average of 20 hours per week. Otherwise, the income is considered unearned and, therefore, not subject to the earned income deduction.

Payments made to day care providers under the Child and Adult Care Food Program of the National School Lunch Act shall be considered gross income from which costs of doing business may be subtracted. Included in the cost of doing business are the food expenses incurred by the providers to feed the children under their care.

3. Training allowances from vocational and rehabilitative programs recognized by Federal, State, or local governments, such as the Work Incentive Program, to the extent that they are not a reimbursement.

Exception: Training allowances received through programs authorized by the Workforce

Investment Act (WIA) are excluded. See INCOME TOTALLY DISREGARDED and WIA in this chapter.

4. Earnings to individuals who are participating in on-the-job training programs under Workforce Investment Act (includes monies paid by WIA and monies paid by employer).

5. Income from jury duty provided the pay is dispersed over a time period of several days or weeks in a specific amount, such as $15.00 per day. (If the jury pay does not exceed $30.00 in a quarter and cannot be reasonably anticipated, it may be excluded as infrequent and irregular income.)

6. Basic Allowance for Housing (BAH) and Basic Allowance for Subsistence (BAS) for military personnel are treated as earned income when received in lieu of free housing and/or food. The BAH is one monthly payment and replaces the Basic Allowance for Quarter and Variable Housing Allowance. (Any gain or benefit which is not in the form of money payable directly to the assistance unit, e.g., free meals and/or housing furnished to military personnel living on the base, is classified as an in-kind benefit and excluded as income.)

7. Income received from the selling of blood and blood plasma.

EARNED INCOME DISREGARDS

For families who qualify on the gross income test, earned income may be disregarded in the following ways:

1. Special student disregard for full-time or part-time students under the age of 18

2. Standard $90 deduction for work expenses

3. Dependent care deduction

4. A one-time Total Earned Income Disregard opportunity for six (6) months covers all TANF adults who find an unsubsidized job of at least 35 hours per week either:

   within 30 days after authorization for new TANF approvals on or after 07-01-97;

   or

   within 30 days after the initial start date of the job readiness/job search work activity with the Job Placement Entity (*This covers new approvals since 07-01-97 and ongoing cases*.) The 6-month total disregard of earnings is available **only once** for new TANF approvals and ongoing cases beginning July 1, 1997 and thereafter. See *Chapter 6, Total Earned Income Disregard*.

5. A 3-month total earned income disregard will be available only when the TANF case is subject to closure because of increased earnings and the individual is employed at least 25 hours per week at federal minimum wage level or higher. The 3-month disregard cannot be claimed in combination with the 6-month disregard but can be claimed again after a 12-month break in assistance. See *Chapter 6, 3-Month Income Disregard*.

6. Marriage disregard allows income and resources of a new spouse to be disregarded for six (6) months. See *Chapter 3, Marriage Disregard.*

VERIFICATION OF INCOME

Verification of earned income must include the name and address of the employer, the frequency of payment, the day of the week or date of the month the payment is regularly received, the hours worked, gross income and deductions, etc. Verification can be accomplished by check stubs, using the **MDHS-EA-910, Request for Employment Verification**, etc.

However, where all attempts to verify the income have been unsuccessful because the person or organization providing the income has failed to cooperate with the assistance unit and the worker, and all other sources of verification are unavailable, the worker shall determine an amount to be used based on the best available information.

EARNED INCOME TO BE AVERAGED/PRORATED

The only types of earned income that can be averaged are from contractual or self-employment.

From Contractual Employment

Income from contractual work must be considered as being received in each month covered by the contract regardless of the number of months in which the income is received. Consider the contract to be twelve months when a school related employee has the option to receive gross earnings from school employment over a twelve-month period.

From Self-Employment

Self-employment differs from other employment in that mandatory deductions are not withheld prior to the individual receiving pay. Gross self-employment income is determined by deducting allowable business expenses from the gross income of the business enterprise, farming, sale of blood, etc. Follow MAVERICS instructions in *Volume X, Chapter 3* for self-employment income.

Self-employment income may be received irregularly or on a regular basis and is handled as follows:

- Self-employment income which represents the family's annual support will normally be averaged over a 12 month period, regardless of whether or not the income is received monthly or less often than monthly.

- Normally self-employment income and expenses from the past year are counted for the current year. If the averaged amount does not accurately reflect the family's actual circumstances because the family has experienced a substantial increase or decrease in business, such as a change in the type of farm operation or the amount of land farmed, crop failure or a substantial change in market prices, etc., the self-employment income shall be calculated on anticipated earnings rather than the basis of prior income.

Exceptions to Averaging Income

1. If an assistance unit's self-employment enterprise has been in existence for less than a year, the income from the self-employment enterprise shall be averaged over the period of time the business has been in operation, and the monthly amount projected for the coming year. However, if the business has been in operation for such a short time that there is insufficient data to make a reasonable projection, the assistance unit should be approved for up to 6 months until the business has been in operation long enough to determine anticipated income.

2. Self-employment income which is intended to meet the assistance unit's needs for only part of the year shall be averaged over the period of time the income is intended to cover. Self-employed vendors, for example, who work only in the summer and supplement their income from other sources during the balance of the year shall have their self-employment income averaged over the summer months rather than a 12-month period.

   In an effort to determine the period of time for which self-employment income is intended to support an assistance unit, other factors, in addition to the client's own statement, would have to be examined and evaluated. Such factors would include, but would not be limited to, previous year's business and personal expenses, tax records, anticipated expenses for the current year, income received from other sources during the previous year, income expected to be received from other sources during the coming year, etc. Such factors, when compared with the income from seasonal self-employment, would provide a basis for making a determination as to how long the income is intended to support the assistance unit. For example, if the previous year's expenses were proportionate to the income from self-employment, it could be an indication that the income would sustain the assistance unit for a year; therefore, the income could be averaged. If expenses were not proportionate with the income, it could be assumed that such income could not sustain the family for a year; therefore, income would be averaged over the period of time for which such income is received.

Determining Net Self-employment Income

For the period of time over which self-employment income is determined, the EW shall add all gross self-employment income (including capital gains), exclude the cost of producing the self-employment income, and divide the balance by the number of months over which the income will be averaged.

For those TANF cases whose self-employment income is not averaged but is instead calculated on an anticipated basis, the EW shall add any capital gains the family anticipates it will receive in the next 12 months, starting with the date the application is filed, and divide this amount by 12. This amount shall be used in successive certification periods during the next 12 months, except that a new average monthly amount shall be calculated over this 12 month period if the amount of anticipated capital gains changes. The EW shall then add the anticipated monthly amount of capital gains to the anticipated monthly self-employment income, and subtract the cost of producing the self-employment income. The cost of producing the self-employment income shall be calculated by anticipating the monthly allowable costs of producing the self-employment income.

Expenses must always be handled the same as the self-employment income to which they apply, i.e. annualize expenses if income is averaged, average expenses over the period of time they are intended to cover if income is averaged over the period of time it is intended to cover and count expenses in the month billed if income is counted in the month received.

To be allowed as a business expense, the expense must be incurred in producing the self-employment income and must be reasonably attributed to the production of the income. Thus, business expenses reasonably attributed to the production of income can be deducted when verified or documented from a source which adequately establishes the amount of the expense.

The types of business expenses will vary with the kinds of business enterprises. The worker will have to use his knowledge of business enterprises in the community. Questions on the reasonableness of business expenses may be referred through normal channels to the Economic Assistance Policy Unit, if necessary.

These business expense items are not allowable deductions:

1. Amounts for depreciation since these amounts represent a decrease in the value of the asset for wear and use and are not a real financial cost.

2. Mortgage costs.

3. Payments on fixed assets or durable goods.

4. Personal business and entertainment expenses, including personal transportation expenses, Federal, State, and local income taxes; money set aside for retirement purposes.

5. Repayment of the principal of a bank loan.

6. Net losses from previous periods

7. Charitable contributions allowed as a deduction for tax purposes.

Costs of Producing Income

Costs are allowed when they are billed or otherwise become due. When the income is averaged, only expenses billed or otherwise due in the current 12-month period are allowed. Costs that were billed or otherwise became due in a prior year which are not expected to recur in the current year may not be brought forward to the current year regardless of when they are paid.

Allowable Costs

Allowable costs of producing self-employment income include but are not limited to:

1. Identifiable costs of labor, stock, raw material, supplies, seed, plants, fertilizer and lime;

2. The interest portion of (a) payments on business or operating loans and (b) payments on

income-producing real estate and capital assets such as equipment, machinery and other durable goods;

3. Insurance premiums (such as insurance coverage for machinery equipment, storage buildings, pulpwood trucks or other work vehicles, etc.);

4. Taxes paid on income-producing property;

5. Privilege taxes such as licensing fees and gross receipts and general excise taxes that must be paid in order to earn self-employment income;

6. Business transportation costs such as costs of carrying grain to an elevator, trips to obtain needed supplies, etc. or travel and lodging (but not meals) away from home for a self-employed salesperson if necessary for the employment operation;

7. Rental payments on income-producing equipment. If a farmer is renting equipment with an option to buy, the rent payments are allowed until the purchase is made;

8. Costs of repairs and maintenance of equipment; and

9. Storage and warehousing charges.

It is reasonable to expect that a person who is self-employed will have documents available to verify his business expenses. For the applicant or recipient who is self-employed and has no records documenting his business expenses, follow these procedures:

1. Assist the applicant or recipient to make the best possible estimate of gross earnings and expenses.

2. Inform the applicant or recipient engaged in self-employment for which standards cannot be set that, for future eligibility determinations, he must keep and submit an account of income and expenses. Document the case record that the explanation was made.

3. When the recipient fails to provide the necessary information at the requested time after he has been given the opportunity to keep records of income and expenses, notify the Recipient that his eligibility on financial factors cannot be determined and his case will be closed.

FARM INCOME

Farm income, a type of self-employment, is obtained from the sale of crops. Money received from the sale of livestock shall be computed separately. Farm income is usually received annually and represents that net sum that the farmer will have to live on for the coming year. It is determined by deducting the costs of producing the crop from the proceeds of the crop. A farm operator is an individual who produces farm income on land which he owns, is buying, rents, or has an agreement with a landowner and receives a share of the crop.

The net self-employment income shall be added to any other earned income received by the family. The total earned income less appropriate work allowance and dependent care expenses shall be added to the family's earned income.

Period for Determining Farm Income

The period for which farm income is to be determined shall be that period beginning with the crop settlement time in the current year and ending with crop settlement time in the next year. This way the major portion of the net income from farming is in the individual's hands and will usually be his total income for the year to come.

For applicants that apply at other than settlement time and expect to continue farming in about the same way as in the past, determine the usual farm income and prorate over the 12-month period.

When discussion with the applicant shows that he cannot continue farming on the same basis as in the past, make a short term budget. Include in the budget whatever income is currently available for the months until the crop is settled.

If any income is on hand from the previous crop year, consider this as a resource. For the individual who has discontinued farming, consider any cash on hand as a resource. Farm machinery and equipment essential to the self-employment of a household member engaged in farming shall continue to be excluded from resources for one year from the date the household member terminates his/her self-employment from farming.

Consideration of Loans Obtained for Farming Operations

The farmer may obtain credit or loans for the farming operation from banks, landlords, Farmer's Home Administration or other services and payments through the United States Department of Agriculture (USDA). The basic policy with regard to loans of any kind is that the loan cannot be regarded as income or as a resource when it is not available for current maintenance.

Determining Farm Income

The county Consolidated Farm Service Agency is the USDA umbrella agency that handles most of the programs that provide income to farmers. There are many different programs included And programs and funding can change from year to year according to Congressional appropriations, crop disasters and other factors. Programs handled by the Consolidated Farm Service Agency to provide income to farmers include:

- Production Flexibility Contract Program (PFC) - payment is based on contracted acres
- Loan Deficiency Payment (LDP) - income guarantee
- Conservation Reserve Program (CRP) - land rented to government not to plant crops or to plant trees
- Crop Disaster Program (CDP) - declared by the President
- Loss payment for crop failure

- Non-insured program payments

NOTE: Federal Crop Insurance is handled by a separate USDA office.

When farm income must be verified through the county Consolidated Farm Service Agency, simply request verification of "all government payments" made to the individual through that office rather than requesting specific known programs. This general request will allow that office to verify all farm-related income, including designated sharecropper arrangements.

Farm income is computed by deducting the expenses of production from the gross income received from the sale of the crop. The net income is divided by 12 to arrive at the average monthly income.

If more than one assistance group is included in the farming operation, then the net income must be shared with those working members. There may be persons working in the farming operation that are not included in the assistance group, such as an adult son. Discussion with the family will determine the method of division.

Deductible Expenses

The items listed below are those which are required in the production of crops and are to be allowed after verification is received of the gross proceeds.

1. Seed, fertilizer, and chemicals for insect control and/or soil treatment.

2. Hired labor not to exceed the average local wages for farm day labor.

3. Machinery hire not to exceed the average local rate for such rental.

4. Feed and veterinary expense for work stock used in the production of the crop. Such expense is not allowable for animals not used in the crop.

5. Gas and oil for machinery used in the production of the crop.

6. The purchase and/or repair of small tools and equipment such as rakes, hoes, plow, etc. Repair of large machinery, such as a tractor, can be included in this item, but the purchase of expensive farm machinery cannot be deducted.

7. The interest paid on the crop loan or credit account for the current year.

8. The cash rental paid for the use of the land or the value of the percentage of the crop given in lieu of a cash payment.

9. The net loss on the crop for the previous year. It will have to be repaid from the proceeds of the completed crop if the same farming arrangements have continued. If the farmer has moved, did not repay the loss on the previous crop and his source of credit suffered the loss, then the loss was not his and no deduction can be made.

EARNED INCOME TAX CREDIT

The Earned Income Tax Credit (EITC) is a refundable tax credit for families and dependent children. EITC payments are received either monthly, as advance payments through the employer, annually (as a refund from IRS), or both. EITC payments are disregarded as income in the determination of eligibility and the amount of TANF benefits.

EARNED INCOME OF STUDENTS UNDER AGE 18

The earned income of children who are members of the assistance unit, who are students at least half-time, and who have not attained their eighteenth birthday, will be totally disregarded. The dependent child may be a full-time student or a part-time student but not a full-time employee who is not attending school at least half-time. The exclusion shall continue to apply during temporary interruptions in school attendance due to semester or vacation breaks, provided the child's enrollment will resume following the break. If the child's earnings or amount of work performed cannot be differentiated from that of other members of the Assistance Unit, the total earnings shall be prorated equally among the working members and the child's pro rata share excluded.

Individuals are considered children for purposes of this provision if they are dependent children under age 18 in the TANF case. This does not apply to the minor parent payee.

OTHER TYPES OF EARNED INCOME

TANF Work Program

Do not consider payments made for activities in connection with the TANF Work Program (TWP) and self-initiated education and training as income. When a person in a TANF budget participates in the TWP, he may receive reimbursements for (1) child care; (2) transportation and (3) stipends. Disregard these payments during the period in which this person is in this training program. These supportive services payments will be disregarded as income and child care will not be shown as employment expense. When a TWP participant has completed the training program and obtained unsubsidized employment, consider his earnings as regular earned income unless he is eligible for income disregards. See *Chapter 6, General Principles.*

INCOME FROM FEDERAL ACTS AND SPECIAL PROJECTS

Workforce Investment Act (WIA)

Opportunities for training and permanent private sector employment through the WIA program are available through the local employment offices across the state. TWP participants may be assigned to WIA training opportunities, and in these instances, any income received will be considered in accordance with the procedures set out below for WIA.

Under the WIA program, there are two types of training which the WIA participant may receive. To handle the payments under the program properly, the worker must determine the type of payment which the participant is receiving and handle in accordance with the policy below:

1. Institutional training allowances: A person entering WIA institutional training whose needs or income are considered in determining a TANF grant may receive a weekly needs

based payment for child care for children under six years old.

The needs based payment is disregarded completely in computing the TANF grant.

2. On-the-job training receiving salary: When the WIA participant is engaging in on-the-job training, the employer is paying his regular salary. In this instance, disregard the income earned by a dependent child, but treat the wages of a payee over age 18 as any regular earned income. No needs based payments are made in on-the-job training.

Job Corps

The purpose of Job Corps is to provide intensive programs of education, vocational training, work experience, counseling, and other activities to economically disadvantaged youth between the ages 16 and 22. Any earned income and allowance from Job Corps will be treated as the WIA payments above.

National and Community Services Act (AmeriCorps)

Allowances and payments to individuals participating in programs administered under the National and Community Service Act of 1990 (NCSA) are generally treated the same as from programs under WIA. AmeriCorps includes a new movement to engage Americans in a year or two of national service in exchange for an education award of $4,725 per year of completed service. NCSA programs are numerous and vary by state. Some of the Mississippi programs include:

- AmeriCorps USA - (for participants 17 years and older)
- AmeriCorps VISTA - (for participants 18 years and older)
- AmeriCorps NCCC - (16 to 24 years of age)
- Delta Service Corps
- America Reads

The living allowance (stipend) will be totally disregarded as income for TANF.

The earned income of a dependent child must be totally disregarded if the child is a full-time student, or the child is a part-time student who is not employed full-time.

Work Experience and Training Programs Operated by the Choctaw Indian Tribe

The Mississippi Band of Choctaw Indians operates a tribal work experience and training program and certain WIA programs in addition to the Native Employment Works (NEW) Program to which tribal TANF recipients are referred.

In order to obtain information about a particular client in one of these programs, contact the Tribal Office. The Tribal Office can verify the source of the program funding, therefore determining if the income is to be included or excluded.

GENERAL INFORMATION

Payments from benefits, pensions, and compensations must be considered in determining financial need and amount of payment. These payments are usually received monthly or weekly and are continuous. However, some benefits are received for short periods. Also, some persons are entitled to and receive retroactive payments for past periods.

The eligibility worker is responsible for keeping relatively well informed of the general eligibility requirements for each type of benefit in order to be able to evaluate the information given by the applicant.

An applicant or member of the family who appears to be potentially eligible for a benefit will be required to apply for it. If he/she refuses, the individual cannot be considered needy as this raises a question as to complete information on income. Temporary Assistance for Needy Families cannot be granted to a family when a legal parent in the home refuses to apply for a possible benefit. Exceptions: (a) individuals who are eligible for both TANF and SSI have the right to choose TANF and (b) pensioners receiving the reduced Veterans Administration pensions are not required to reapply for the improved pension.

For persons who are willing to apply for a possible benefit, the worker will assist the person, secure verification, and set up a tickler to check on the results of the claim. A family will be eligible for assistance while the claim is being processed provided they meet all other eligibility requirements.

It is not possible to list all potential sources of income, benefits, pensions, or compensations and the methods of verification; however, the following material contains information regarding the most common ones.

SOCIAL SECURITY BENEFITS - RETIREMENT, SURVIVORS, AND DISABILITY INSURANCE (RSDI)

This program is administered by the Social Security Administration for the purpose of providing workers and their families with a partial replacement of loss of income due to retirement, disability, or death of the worker and with certain types of medical care. The amount of the payment made to the worker or his dependents is based on the wages which the worker received and the amount of social security taxes paid before he retired, became disabled, or died. In some instances this employment includes military service and employment with the railroads.

In addition to the monthly benefit amounts, a single lump sum payment can be made to a surviving spouse living in the same household at the time of death or to those persons who paid the burial expense.

Employment in government service at the federal level is not covered by this program. These employees are covered by a federal retirement plan.

Persons **potentially eligible** either on their own work record or on the work record of another:

1. Persons age 62 or over with past employment records.

2. Persons under age 65 who became severely disabled, physically or mentally, so that they are not able to work and are not expected to be able to work for at least 12 months or the disability is expected to result in death.

3. Unmarried children under 18, of a retired, disabled, or deceased wage earner.

4. An unmarried child of a retired, disabled, or deceased wage earner when the child is 18 or over and was severely disabled before age 22 and who continues to be disabled.

5. A spouse of a retired or disabled wage earner when the spouse is age 62 or over.

6. The surviving spouse of a deceased wage earner when the spouse is 60 or over.

7. A spouse of a retired, disabled, or deceased wage earner who cares for the wage earner's child under 16 or for a disabled child who is receiving benefits on the wage earner's record.

8. A surviving spouse of a wage earner, age 50 or older, when the spouse becomes disabled and is caring for the wage earner's child(ren).

9. A wage earner's dependent parents 62 or older.

10. A divorced spouse of the wage earner age 62 or over.

11. A surviving divorced spouse of the wage earner age 60 or older.

12. A disabled surviving divorced spouse who is age 50 or over.

13. Working individuals age 70 regardless of whether they are retired.

14. Individuals with little or no income who were age 72 before 1968 and had no employment record covered by Social Security and persons who became 72 after 1968 who had very limited covered employment. These benefits are called the "Prouty Benefit".

NOTE: These guidelines should be used in identifying persons who appear potentially eligible and thus referred to the Social Security Administration to make application.

SUPPLEMENTAL SECURITY INCOME (SSI)

The Supplemental Security Income program is administered by the Social Security Administration. The purpose of the SSI program is to insure that all aged, blind and disabled individuals have sufficient income to meet their basic maintenance.

The amount of the SSI payment varies with the amount of other income the individual has for basic maintenance. This income is measured against a standard amount after allowing certain disregards. When a person meets all of the requirements, a monthly payment is issued to him from the United States Treasury. Receipt of SSI also entitles the recipient to Medicaid.

NOTE: Individuals may qualify for both Social Security and SSI benefits.

The general requirements for the SSI program are stated below. These should be used as guidelines in identifying persons who appear potentially eligible and thus referred to make application for SSI.

1. Be an adult who is aged, blind, or disabled, or a minor child who is blind or disabled.

2. Be a United States citizen or a qualified alien.

3. Have resources within the maximum allowable.

4. Have income not in excess of the standard payment amount after appropriate disregards.

5. For a blind or disabled minor living with his parents, the income of his parents is considered.

When working with an individual who appears potentially eligible for SSI, the worker will:

1. Discuss the program and potential eligibility. Include in the explanation a discussion of the choice involved when the individual is also eligible for TANF, or is the parent or other grantee relative of eligible TANF children.

2. When the applicant expresses interest, explain that claims are filed for SSI at the branch or district social security office and ask him to contact that office about filing a claim. When assistance is being given through the TANF program, ask the person to notify the county department as soon as a decision is received.

3. Respond promptly when the Social Security Administration requests the difference between the TANF grant including the SSI eligible individual and the TANF grant that would have been paid without the needs and income of the SSI individual.

4. Promptly remove the person from the TANF budget when he is approved for the SSI payment.

5. Remember that an individual retains his SSI status even though his SSI check is being held for repayment purposes.

SSA/SSI VERIFICATIONS

The Social Security Administration furnishes the Agency with information regarding benefits. This is done with the understanding that it will be used to determine eligibility and will not be disclosed to any other organization or person. MAVERICS processes for requesting and receiving this information include the Wire Third Party Query Process or WTPQ, the on-line SSI inquiry and the IEVS match worker alerts. See the *Income Eligibility and Verification System* procedure later in this chapter.

Wire Third Party Query

The Wire Third Party Query Process (**WTPQ**) is a MAVERICS on-line procedure to verify Social Security and SSI information on applicants and recipients. The response provides current benefits, state buy-in status and payment history. The query process is required for all individuals at application, recertification, when a new person (other than newborns) is added to the assistance unit or when there is a question about SSA/SSI benefits. The **WTPQ** process will provide a message when the SSN is in error or when no benefits are paid.

The query can be sent as soon as the SSN is known for the household member during the application process, even prior to the person being added to a specific MAVERICS case.

Although a worker alert will not appear when the **WTPQ** response is received, the response will identify the case in which the individual resides if the individual is known to MAVERICS. In some cases, this number could be different from the current application, such as the person has previously participated in a closed case or is currently in an active case. Any discrepancies must be resolved before any person can be added to the application and the case worked.

The worker must access the Wire Third Party Query (**WTPQ**) screen (Function 10 on **INME**) and enter the SSN and/or Social Security claim number if other than client's own SSN. If client is receiving benefits on a claim number other than his own SSN, the second SSN associated with benefits will display in the lower right corner of the screen on page 3 of the **WTPQ** Response screen. In some cases, a second **WTPQ** request may be needed to verify both benefits. When appointment notices are sent via the Recertification/Redetermination Appointment Notice (RERA) screen, the query process is automatically generated for all current household members. Should new members be added to the household at redetermination, the query process for each new member must be initiated through INME.

Refer to MAVERICS procedures for the Wire Third Party Query Process to send and receive requests. If the individual is not known to MAVERICS when the SSN is entered on the **WTPQ** screen, the worker must also enter the person's name and date of birth to send the query.

SSI Inquiry

The MAVERICS system also has an SSI inquiry function. In order to complete the SSI inquiry on line the worker will choose function 11 from the Inquiry Menu (I**NME**). The system will also require the case number. Then on the inquiry screen, the worker will enter the SSN of the person for whom information is needed. Once the enter key is pressed, the information will then be displayed immediately.

UNEMPLOYMENT COMPENSATION

Unemployment compensation provides weekly payments to qualified workers who have been employed in jobs which are covered by the state law for such benefits and who have been laid off or have lost their jobs through no fault of their own. The program is administered by the Mississippi Department of Employment Security (MDES). Any client who has lost a job is covered by such benefits. Further, he will be required to cooperate in securing verification of potential receipt of benefits.

The individual may be able to furnish benefit determination forms which are issued to him by Employment Security. If a claimant is eligible, he will normally receive his first payment within

three weeks of the filing date. The gross amount of the check is used in the budget including any amounts deducted to pay claims for Intentional Program Violations.

An IEVS alert will be generated in MAVERICS when an individual's Social Security Number matches with the Mississippi Department of Employment Security. Unemployment benefit information can be obtained from this match. The IEVS does not show deductions such as child support, it reflects the gross amount.

Unemployment compensation is terminated when the accrued benefits have been received. Also, benefits are terminated when a person returns to regular employment. Note: An individual is allowed to work part-time and receive unemployment benefits.

TRADE ADJUSTMENT ASSISTANCE

Trade Adjustment Assistance (TAA) is available to workers who lost their jobs or whose hours of work and wages are reduced as a result of increased imports. TAA includes a variety of benefits and reemployment services to help unemployed workers prepare for and obtain suitable employment. Workers may be eligible for training, a job search allowance, a relocation allowance, and other reemployment services.

A petition must be filed with the Office of TAA to establish group eligibility for TAA services. Petitions may be filed by a group of three or more workers, their union, or an authorized representative. A fact-finding investigation will be conducted and if increased imports contributed to job reductions in the company, the Labor Department certifies the affected group of workers as eligible to apply for TAA. The certification will contain an "Impact Date," which is a date of up to one year prior to the date of the petition. The life of the certification is 2 years from the date of issuance unless terminated earlier.

To be eligible for TAA benefits and reemployment services an individual must:

- Be covered by certification
- Have a qualifying separation from an adversely affected employer
- Have been laid off or put on a reduced work schedule on or after the "Impact Date" and before the ending date of the certification. A reduced work schedule occurs when hours of work are reduced to 80 percent or less of the individual's average weekly hours and wages are reduced to 80 percent or less of the individual's average weekly wage.

TRADE READJUSTMENT ASSISTANCE

In addition to the **Trade Adjustment Assistance**, a weekly **Trade Readjustment Allowance** (TRA) may be payable to eligible workers following their exhaustion of unemployment benefits. The weekly amount of TRA is the same as the unemployment insurance weekly benefits amount received after the first qualifying separation.

To qualify for TRA benefits an individual must:

- Be covered by a certification
- Be totally separated from employment, due to lack of work in adversely affected employment, on or after the "Impact Date" and before the ending date of the certification
- Have worked at least 26 weeks at wages of $30 or more a week in adversely affected employment with a single firm or subdivision in the 52-week period ending with separation
- Have been entitled to and have exhausted all rights to unemployment insurance benefits
- Meet the same weekly work test applicable to claimants for extended unemployment insurance benefits, including actively seeking, applying for and accepting work within their capabilities
- Be enrolled in or have completed an approved training program

TRA Verification

TRA verification is not available from MDES through the regular IEVS unemployment benefit match and alert process. The federal TRA payments are handled separately by MDES and can only be verified by a manual request to MDES when the applicant/recipient cannot provide this information.

TAA/TRA Verification Request

Form **MDHS-EA-913, TAA/TRA Verification Request**, should be sent to MDES at application, regular review, or whenever a change is reported or becomes known that would indicate possible entitlement to TRA. The worker will not send this request to MDES unless there is reason to believe that the person may be receiving or could be entitled to TRA and the benefits cannot be verified by the client's notice and check stubs.

WORKERS' COMPENSATION

The Workers' Compensation Act provides for benefits in the form of compensation for disability or death of an employee from an injury arising out of and in the course of his employment, regardless of the cause of the injury. Death benefits are payable to dependent survivors who are the responsibility of the workman prior to the injury. All employers who have in their service five or more workmen regularly in the same business or in or about the same establishment under any contract of hire, expressed or implied, are required to obtain coverage under the Worker's Compensation Act. There are certain excluded employers who are not required to obtain coverage under the Act, but these may elect to obtain coverage if they wish.

Worker's compensation payments would be counted as unearned income for TANF. This income would then need to be coded on the **UNIN** screen in MAVERICS as **"SK"**. This will count the income in the Food Stamp and TANF budgets.

For information on persons who appear eligible for these benefits, write to the Workers' Compensation Commission, Attention: Commission Secretary, P. O. Box 5300, Jackson, Mississippi 39296-5300.

SEVERANCE PAY

Severance pay is considered unearned income. This is not to be confused with wages and salaries after employment ends (for example, the last pay check) which is considered earned income.

RAILROAD RETIREMENT BENEFITS

Employees covered by these benefits are those persons employed by all railroads engaged in interstate commerce, including the Railroad Express Agency, the Pullman Company, the railroad associations, and the railroad labor organizations. Benefits cover major wage-loss situations: death, age, disability, unemployment, sickness, and maternity. Benefits are available for regular railroad employees retiring with at least 10 years of service.

Information concerning benefits can be obtained by writing or faxing the office listed below. Also, persons wishing to apply for or discuss benefits should write to the office listed below to arrange an interview.

Railroad Retirement Board
500 Poydras Street
Suite 1045
New Orleans, LA 70130
Phone (877) 772-5772
Fax (504) 589-4899

MISSISSIPPI TEACHERS' RETIREMENT

If an individual cannot furnish satisfactory evidence of the non-receipt or the amount of a benefit, it will be necessary for the worker to write the Public Employees' Retirement System, 429 Mississippi Street PERS Building, Jackson, MS 39201 for verification.

MISSISSIPPI PUBLIC EMPLOYEES' RETIREMENT BENEFITS

State retirement benefits are based on length of service and salary. The address for verification of benefit status is the same as that previously mentioned.

VETERANS BENEFITS

These benefits are available to those persons who, by reason of 90 days of active duty in the United States Army, Navy, Marine Corps, Air Force, or Coast Guard (in wartime only) are termed veterans. Benefits are also available to their dependents and dependent survivors. Benefits for veterans are administered by the Veterans' Administration (VA).

Veterans Benefits can be accessed through the INIM Screen, Function 5 “PARIS VA”. The PARIS VETERAN MATCH (PRVA) screen provides information on a SNAP and /or TANF applicant/recipient who, based on the Social Security Number (SSN) submitted to PARIS, is receiving Veteran’s Benefits.

The information will be requested quarterly and the file is processed on the 15th of March, June, September and December. This is an overnight batch process and the file is available in MAVERICS, the next working day after the 15th of each quarter.

This inquiry should be performed for each household member at application, reapplication, reevaluation, and when a new household member (other than a new born) is added to the

Assistance Unit. This data is not considered verified upon receipt.

Upon review of the data, if there are any discrepancies, the worker may request the client to provide verification or contact the Veterans Administration to verify VA benefits received. The worker must document IIDO behind the UNIN screen in MAVERICS regarding VA income and any discrepancies.

If a call is required, the worker must provide his/her name, job title, county office name, the VA recipient's claim number or the Veterans name and social security number.

The VA has a toll free line and can usually give instant information concerning the status of a claim or the amount of payment. As long as the information is for the veteran's benefit, the VA will provide this information to the Agency. A veteran may also use this number to check on his claim or change his/her address. The toll free line for all areas in Mississippi is: 1-800-827-1000.

Although the VA prefers the above method, the county may send a written individual request for each person to the Veterans Affairs Division of the Veterans Administration, 1600 E Woodrow Wilson Drive, Jackson, MS 39216. It is not necessary to have the written permission of the veteran to obtain the information.

The request from the county, whether by phone or in writing, should contain as much of the following information as possible:

1. The full name and address of the veteran.
2. The branch of military service and service number.
3. The claim number if filed for any kind of benefits.
4. Date and place of enlistment, and date and place of discharge.

Information will also be furnished concerning benefits for survivors of veterans. Requests for information on these persons should include the above and the date of death of the veteran, the dependent's full name and address, and relationship to the veteran.

The range of veterans payments and benefits vary. Details regarding these payments can be found in the VA booklet, "Federal Benefits for Veterans and Dependents", which is updated periodically and may be obtained from the Veterans Administration. Please Refer to Volume X Chapter 10 for a list of definitions. Listed below are the types of benefits that might affect eligibility or the amount of payment for TANF families.

1. Payments for disability (either service or non-service connected).

2. Payments to widows and minor orphans of veterans who have died from service-connected or non-service-connected disabilities.

3. Compensation for death during wartime while on active duty, to widows, minor orphans, or dependent surviving parents.

4. Insurance payments for death during wartime while on active duty to the beneficiary designated by the service person. Many parents receive insurance benefits for wartime casualties because the service person failed to change his/her beneficiary when he/she married.

5. Disability compensation to any veteran who is age 65. These persons will probably qualify for a non-service-connected payment and will be required to file claims. These Veterans are entitled to a pension when their yearly income is less than a set amount.

6. Allowances are available for dependents of veterans whose service-connected disabilities are rated at 50% or more.

7. Money payments for education or training in a trade. Eligibility ceases at the end of 10 years from the date of the veteran's release from active duty.

8. An increased compensation allowance for a veteran who is disabled and meets the requirements for an aid and attendance (AA) allowance. This is added to the amount of benefits which he/she will receive or is receiving and thus gives the veteran additional money. Therefore, the total amount of the veteran's check is income. This award is not based on whether or not the veteran actually employs someone to provide care. When a veteran is not physically or mentally able to receive and use his/her benefit, the VA may select a custodian to perform this service for the veteran and may designate a portion of the benefit to be used by the custodian for their expenses in carrying out the duties.

Veterans benefits are not to be confused with retirement pay. These payments are received directly from the Finance Centers of the military establishments and are not under the jurisdiction of the Veterans Administration.

ALLOWANCES AND ALLOTMENTS

Service Allotments

Allowances and allotments from non-custodial parents who are in the military service are considered support payments and treated as such. Any allotment from a stepparent in the military will be considered as any other unearned income in an assistance budget.

The worker will explore with individuals who have specified relatives in the armed services the possibility of obtaining an allotment from the relative. Service men/women may also authorize allotments for individuals who are not eligible dependents. The entire amount of this type of allotment is deducted from the service person's pay.

While it is the responsibility of the service man/woman to make application for an allotment for his/her dependents, the dependents should ask them to do so if he/she does not. Should the service man/woman refuse to do so or for some reason is unable to make application for the allotment, his/her lawful spouse, a person who has custody of the their children or any dependent relative may file application for the allotment. The government defines those persons eligible for an allotment as "any dependent" of the service man/woman.

The service may not provide a "notice of award" for verification. Therefore, it will be necessary to verify the amount received by seeing the check or by securing verification from the appropriate branch of service.

Requests for application or information concerning allotments should be directed to the Veterans Affairs Division of the Veterans Administration, 1600 E Woodrow Wilson Drive, Jackson, MS 39216.

INCOME FROM THE MISSISSIPPI BAND OF CHOCTAW INDIANS

The following plan is in place between MDHS and the Mississippi Band of Choctaw Indians so that the two agencies may work together and avoid duplication of financial assistance:

3. The county Field Operations office will notify the Tribal Office when a member has been approved for TANF by sending a copy of the notice of approval and a copy of the TANF budget. The Tribal Office will terminate any general or emergency assistance being provided. The Indian agency may continue to provide a supplement to the family. Consider this payment as one received from another relief-giving agency and totally disregard as income. However, the semi-annual cash payment usually distributed in July and December is not excluded. This income will be averaged over the period it is

intended to cover, i.e. 5 or 7 months, and counted as unearned income in the budget.

NOTE: TANF adult recipients who reside on or near the Reservation who do not meet a work exemption are referred to the Native Employment Works (NEW) Program. See the provisions for this program in *Chapter 3, Mississippi Band of Choctaw Indians, and Chapter 8, Exclusions.*

2. Since a child 18 years of age or older cannot be included in the TANF money payment grant, the Choctaw Indian Agency may assist such child provided he remains in school.

3. Children who are in boarding schools in other states will have their needs met by the schools and will not be eligible for TANF while in these schools. If an Indian child is attending a boarding school in Mississippi, see Chapter 3, *Living With Grantee Relative, Educational Training*.

4. When a TANF redetermination results in a change in the grant, the county department will send to the Choctaw Indian Agency a copy of the notice sent to the client and a copy of the budget.

NOTE: In order to prevent duplicate payments, TANF approvals and change authorizations should be completed as soon as possible and sent to the Tribal Office early in the month.

INCOME FOR REHABILITATION PURPOSES

The purpose of financial assistance provided by a vocational rehabilitation agency is to obtain retraining for work, and thus serves a different purpose than TANF. Therefore, these allowances are not considered a duplication of assistance and do not have to be entered in the budget except as specified below after a stated period of time. Allowances which the rehabilitation agency makes are usually for room, board, clothing, personal incidentals and sometime include funds for books, tuition, fees, and transportation. A portion of the TANF grant is usually considered when determining the amount to be allowed. The worker will ask the counselor to state the amount which the other agency is providing and the purpose for which it is intended. The different plans which the rehabilitation agency makes are discussed below.

Sheltered Workshops

The Division of Vocational Rehabilitation has established a number of sheltered workshops throughout the State. Goodwill Industries has one in Jackson, and work activity centers for mentally retarded adults have been established under the Mental Health Program. For the first six months, a person training in one of these workshops is considered to be in training, even though he

may be on a production pay scale. Any income received by the trainee in the six-month training period is to be disregarded in the financial need income tests. After the six months' training period ends, even if the client continues training in the sheltered workshop, his earnings must be considered as earned income in the budgeting process. There may be extenuating circumstances in which the initial six-month training period might be interrupted. Such interruptions may be a result of illness or injury. These situations must be clearly documented in the case record.

On-the-Job-Training

On-the-job-training consists of placements in private industry or in a public agency for a specified job. The trainee's income is to be disregarded for six months, as this is the training period.

Educational Placements

Vocational Rehabilitation will sometimes place a person in an educational setting for a recognized course as a part of the rehabilitation plan. These placements may include undergraduate college or university, business schools, technical or vocational schools and rehabilitation centers.

In rare instances the rehabilitation agency may send a client to another state for services. When a client is sent to a center in another state, he will continue eligibility only when he does not establish residence in the other state and apply for assistance there.

SUPPORT FROM NON-CUSTODIAL PARENT OF TANF CHILDREN

Any time that children are deprived due to the continued absence of a parent, there is the possibility of income from the non-custodial parent and this must be explored. This income may be in the form of court ordered child support, spousal support, or voluntary contributions in cash or in-kind. In-kind contributions are not considered in determining eligibility or amount of payment. The worker will determine and document the absence or presence of income from the absent parent. Examples of documentation are:

1. The payee may be able to furnish the non-custodial parent's personal checks or money orders when they come. He/She may be able to show tickets from stores in the community where the non-custodial parent has established credit, or the records may be available in METSS when the support payments have been made through the IV-D office. The payee should be able to provide the address or telephone number of the non-custodial parent so he/she can be contacted and a statement obtained concerning the amount of income he/she is providing the child(ren).

2. The fact that the payee has not been able to pay expenses and has had to borrow money or allow bills to remain unpaid because of lack of income may substantiate the fact that the non-custodial parent is not providing for the child(ren). When the payee can give a logical account of how he/she has been able to manage without income from the non-custodial parent, then the fact of no income from the non-custodial parent will be substantiated.

NOTE: Child Support Enforcement is required to recover from support collections all possible TANF money paid out as TANF cash assistance. See *Chapter 3, Recovery of TANF Payments*, for further discussion.

Child support payments must be turned in to the Child Support Office beginning with the first payment received by the individual after notification of TANF approval. See *Chapter 3, Assignment of Rights to Support, for further discussion*.

Budgeting Principles and Procedures

See *Chapter 6, TANF Grant Payment When Child Support Payments Involved*, for detailed budgeting principles and procedures.

BENEFITS FROM INSURANCE POLICIES

Because of the difference in insurance policies covering illness, accident, disability, hospitalization, and doctor bills, it is necessary that the worker establish the kind of insurance an applicant has and distinguish between regular disability payments and small unpredictable amounts paid. Also, the worker must distinguish between policies covering sickness or disability and those providing payment for hospital and doctor bills. This can usually be done by examining a policy, but a contact with the insurance company may be necessary. Please follow these procedures:

1. All sickness and accident benefit policies payable to the applicant which provide substantial monthly benefits for disability or provide benefits for periods of illness or accident must be considered potential sources of income. When benefits are paid to the applicant on a recurring basis, the amount must be entered in the budget as income. The premiums paid and the fees paid for a required physician's examination are deductible expenses.

   Small sick and accident policies which pay minimum amounts for short periods of time and which require a doctor's statement for each illness usually result in income which is negligible. The income from this kind of policy should be disregarded if it is under $30 per

recipient in any quarter.

2. Sick pay is considered earned income on the basis that it is provided by an employer to an employee during a temporary period of illness. This income is a continuation of income at less than or at the same rate as regular wages.

3. When a client personally receives an insurance payment for services which have already been paid by Medicaid, he/she must refund to the Division of Medicaid the insurance payment received, or that part needed to cover the expenses already paid by Medicaid. If there is any money left after the refund for services paid by Medicaid, the remaining amount will be considered a lump sum payment.

FOSTER CARE/ADOPTION PAYMENTS

Foster care board, Title IV-E, and adoption assistance payments are included in the TANF budget. Adoption payments are countable regardless of whether the funds are received from the state of Mississippi or any other state. MAVERICS coding for these payments is "FC".

JOINT ACCOUNT FUNDS

Monies deposited into a joint bank account are considered unearned income for the joint account owner(s), unless all joint owners are a member of the same TANF household. Exception: When one of the joint account owners is the protective payee of the funds deposited into the account, if the funds are used for the needs of the protective person the funds would be excluded as income to the others.

INCOME AND ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Purpose

The Income and Eligibility Verification System (**IEVS**) is a system which collects and exchanges income and resource data electronically from agencies such as Mississippi Department of Employment Security (MDES), Social Security Administration (SSA), and Internal Revenue Service (IRS) to be used in verifying eligibility for and the amount of TANF benefits for the eligible assistance unit. Due to safeguard restrictions of IRS data and certain SSA data, these matches are labeled as State Resource Data (SRD) and require special handling. This system meets the safeguard requirement of Section 1137 of the Social Security Act and the Department of Treasury.

General Provisions

Wage and benefit information shall be requested via **IEVS** from those agencies identified in the material entitled, Matches To Be Conducted. The method by which IEVS data is obtained is through computer matching, and the data obtained through this method will be provided to counties via **IEVS** alerts in the MAVERICS system, via the Interface Inquiry Menu (INIM) in MAVS, or, for matches with State Resource Data, Paper Alerts received as individual printouts. The key to each match is the individual's social security number. Should an individual have more than one social security number, **IEVS** data will be requested on all social security numbers. (The worker can also inquire on SSA data to obtain SSI and RSDI information.)

Matches to be Conducted

Management Information Systems (MIS) will extract the social security numbers from the MAVERICS system and match against files of the cooperating agencies to produce information necessary for determining initial or ongoing eligibility.

Prior to entering individual social security numbers in MAVERICS, **IEVS** data will not normally be available on applicants. The match on applicants will take place once the SSN has been entered in MAVERICS and periodically thereafter for recipients; therefore, SSNs for ALL members of the assistance unit must be entered in MAVERICS as soon as possible after receipt in the county office. For **IEVS** purposes, a new member will be treated as an applicant. The rationale for including children is to identify SSN errors and/or wages earned by adults and reported under the SSN of another.

Use Of Data

The information obtained through the **IEVS** matches shall be used for purposes of:

1. Verifying an Assistance Unit's income to establish eligibility;
2. Verifying the eligibility for and proper amount of benefits;
3. Investigating to determine whether participating households received benefits to which they were not entitled; and
4. Obtaining information which will be used in conducting criminal or civil prosecutions based on receipt of TANF benefits to which participating households were not entitled.

TYPES AND FREQUENCY OF MATCHES

MIS will conduct the matches through the cross matching of computer tapes as outlined below.

IEVS BENDEX Match Data

BENDEX is an exchange system used by the Agency to request social security benefit information on recipients which is provided via on-line **IEVS** Alerts. When the TANF case is closed in MAVERICS, the recipients are removed from the BENDEX tape. In situations of reapplication by these individuals, special care should be taken to ascertain that the BENDEX information has the amount of the current social security benefit before it is used for verification. The worker must use the **WTPQ** inquiry before completing the application. If a closed case is activated, alerts will be received as changes in the social security benefit occur.

BENDEX also reflects certain wage information contained in the Benefit Earnings Record (BEERS).Because this information is updated only once a year by SSA, the information will be data from the previous year or in some situations, from two prior years, and is handled through SRD alerts. For applicants, matches will be conducted at the next scheduled BENDEX processing cycle. For recipients, alerts will be generated only when there is a change between data is MAVERICS and BENDEX. Matches will be conducted prior to the review due date.

For information regarding MAVERICS screens, etc., refer to *Volume X, IEVS BENDEX MATCH DATA.*

IEVS SDX Match Data

SDX is a tape provided by SSA to the Agency, and contains SSI as well as social security and other unearned benefits such as VA, Black Lung, Railroad Retirement and Mandatory State Supplement (MSS).

The most current alert should provide the current SSI benefit level and be considered verified upon receipt. However, other benefit information, including social security, may not be current on SDX. SDX information is updated as received for other benefits but there may be some lag time before the information is received and can be entered into the system.

The social security amount provided through SDX is the gross entitlement amount, i.e., the amount before deductions such as recoupment for any prior overpayment.

For applicants, matches will be conducted at the next scheduled SDX processing cycle. Remember that SSI recipients are not included in the TANF Assistance Unit.

For recipients, matches will be conducted monthly; however, after the initial match, alerts will be provided only when there is a change between data in MAVERICS and SDX.

For additional information regarding MAVERICS screens, etc., please refer to *Volume X, IEVS SDX MATCH DATA.*

MDHS-EA-975, IEVS State Resource Data

IEVS State Resource Data (SRD) matches will help identify unreported income and/or resources. Be aware that the data will be at least 18 months old at the time of receipt. A match from SRD will not result in an on-line **IEVS** alert. A different procedure must be used for handling State Resource Data matches.

All staff who need access to the SRD (paper) information must receive training on security procedures for the handling of this information and must receive written instructions with copies of the Internal Revenue Code relating to civil and criminal penalties for unauthorized disclosure of information. Each employee will sign the MDHS-EA-106 Security Awareness training form after the IEVS training, and it will be necessary to update this form yearly. New employees must be provided this security information and must sign the training acknowledgment form before they can have authorized access to SRD.

When there is a match from this source, form **MDHS-EA-975, IEVS State Resource Data**, will be generated to the policy unit. The worker must send the client the MAVERICS notice **A905** or the **MDHS-EA-942, Request for Information**, stating that the Agency has information which may affect eligibility and benefit level for TANF which must be resolved. Regulations prohibit revealing the source of this data; it is permissible only to state that the information has become available from electronic data matches. Inform the client of specific information needed for providing the necessary verification for resolving the problem. Ongoing safeguard procedures for handling IEVS must be followed upon receipt in the policy unit of **MDHS-EA975, IEVS State Resource Data** and **MDHS-EA-978, SRD Transmittal and Report.**

NOTE: If any SRD paper alerts are received for combination (TANF and SNAP) cases, changes affecting the Supplemental Assistance Nutrition Program should be handled according to ongoing policy.

IEVS Social Security Number Enumeration/Validation Match Data

When the SSNs that are reported by the household are entered into MAVERICS, verification is accomplished through a monthly computer enumeration tape match with the Social Security Administration (SSA). The worker shall accept as verified an SSN which has been verified by another program participating in **IEVS**.

The IEVS SSN Enum/Val Match Data on-line alert is created when the social security number (SSN) in MAVERICS cannot be validated by SSA. This type **IEVS** alert must be handled immediately, as the SSN is the basis for the **IEVS** match. Social Security numbers are unverified if an IEVS SSN Validation Match Data Alert is received. (See *VOLUME X, MAVERICS Manual*.)

Social Security numbers may be unverified in the system because of unmatched data such as date of birth, race/sex or surnames. If an SSN Validation Match Data Alert is received, the worker shall check the case record to determine if data has been correctly entered into the system. If so, the worker shall, within 10 days, contact the assistance unit to determine if the information provided is correct and obtain the correct information of appropriate.

If the assistance unit is unable to validate the SSN, the worker shall refer the individual to SSA by means of Form **MDHS-EA-949, Referral for SSN Application**, to correct the discrepancy. The client shall be allowed adequate time based on county access to a SSA office, to resolve the discrepancy. **MDHS-EA-949** will be returned to the county office by SSA or the client may bring other documentation from the SSA office to show the resolution.

For additional information regarding MAVERICS, refer to *Volume X, IEVS SSN ENUM/VAL MATCH DATA.*

IEVS ALERTS

Discrepancies between client data in MAVERICS and data from SSA is transmitted to the eligibility worker via an **IEVS** alert in MAVERICS. This is an automatic alert generated in MAVERICS to notify the worker of an identified discrepancy between the MAVERICS automated case file and the interface or tape data from another agency.

EXAMPLE: An IEVS BENDEX alert will be created when the RSDI income contained in the MAVERICS case does not match the information in the BENDEX file.

The worker determines the action required as a result of the **IEVS** alert, takes the appropriate action, sends the appropriate notice(s) and resolves the alert on the applicable screen. Please refer to *Volume X, IEVS ALERT and IEVS MATCH*, for specifics in handling/resolving alerts. MAVERICS provides a method to track the status of IEVS **match** results to assure adherence to the requirement for action on **IEVS** data within the required time frame. The tracking system will maintain the status of the **IEVS** alert until such time as case action is taken or determination is made that the IEVS information does not affect the case.

Due to strict confidentiality requirements, a match with STATE RESOURCE DATA (SRD) will generate paper Form **MDHS-EA-975, IEVS STATE RESOURCE DATA,** rather then an **IEVS** alert. See MAVERICS *Volume X, IEVS STATE RESOURCE DATA.*

VERIFICATION

Receipt of **IEVS** data does not replace the verification procedures used as part of the eligibility determination. The **IEVS** data supplements that verification since it pursues information provided by parties other than the household.

Verified Upon Receipt

The worker shall take action to terminate, deny, or reduce benefits based on information obtained through IEVS which is considered verified upon receipt when obtained from the agencies administering the programs. This information is:

3. Social security benefit information (BENDEX)

2. SSI benefit and death date information (SDX)

However, if there is information that indicates the **IEVS** obtained information which would generally be considered verified upon receipt is questionable, that information shall be treated as unverified upon receipt as outlined below. In other words, if a county receives what is believed to be incorrect information, no adverse action should be initiated until the discrepancy is resolved.

Unverified Upon Receipt

Prior to taking action to terminate, deny or reduce benefits based on information obtained through **IEVS** which is considered unverified upon receipt, the worker shall independently verify the information. In other words, the information must be verified through a method other than the **IEVS** data. Such unverified information is:

1. Wage information from SSA, known as ERF data. This data, while even less current than the wage data from MDES, can give leads to employment not reported to the State's employment agency, such as employment in other states and self-employment.

2. State Resource Data (SRD)

3. Questionable information obtained through **IEVS** which normally would have been treated as verified upon receipt.

Independent verification shall include verification of the amount of the asset or income involved; whether the assistance unit actually has or had access to such asset or income such that it would be countable income or resources for TANF purposes; and the period during which such access occurred.

Independent verification of unverified information obtained through **IEVS** shall be obtained by contacting the client in writing via use of the MAVERICS **A905, Request for Information or MDHS-EA-942, Request for Information**, informing the assistance unit of the information received and requesting that the client respond within 10 days.

When independent verification is received, the worker shall properly notify the assistance unit of the action taken or intended.

EXCEPTION: Except for unearned income information from State Resource Data, if a county

has information which indicates that independent verification is not needed, such verification is not required. For example, if match data duplicates known and verified information in the case record, no further case action is required.

ACTION ON MATCHES

The worker must promptly initiate appropriate action on all matched data upon receipt. If **IEVS** data is received on a closed case, the worker will indicate on the form or appropriate MAVERICS screen that a notice is not required, but follow-up must be completed on potential claim situations.

Action on Applicants

If the **IEVS** information is received before the notice of decision is mailed to the applicant, the information shall be used in making the eligibility determination. However, a worker may not delay the eligibility determination solely to await verification of **IEVS** information which has been requested if other evidence establishes eligibility for assistance.

Action on Applicants

If **IEVS** data or independent verification is received after approval, the same procedure will be followed as for recipients. See Action on Recipients below.

It is not required that IEVS data be pursued or used after an assistance unit is determined ineligible. There is no need to follow up on the data if no benefits were received. However, if the applicant has received benefits in the past, the **IEVS** data might reflect on overpayment, in which case appropriate action for a possible claim is required. When no action is required, the **IEVS** alert must be cleared with the appropriate code. See *Volume X, IEVS MATCH*.

Action on Recipients

The time frame for completing appropriate action on **IEVS** data is within 45 days of the date the Agency receives the data. This means that the 45-day time frame begins when MIS receives the computer tape, and that date will be reflected on all **IEVS** alert screens or printouts along with the date by which the case must be handled. The following steps must be accomplished within the 45-day period.

3. Compare the match data against case record information.

2. Identify new, discrepant or unverified facts.

3. Investigate and verify information where warranted.

4. Send the assistance unit the appropriate change or adverse action notice, or document the case record and/or appropriate **IEVS** screen regarding the decision not to send one.

EXCEPTION: The 45-day timeliness standard may be waived on up to, but no more than, 20% of the matches, provided third party verification has been timely requested but has not been received. A timely request is one made early enough in the 45-day time frame to provide the third party adequate time to respond and to allow the worker time to take necessary action and send the appropriate notice within the allotted 45 days. In other words, the only acceptable "good cause" for failure to handle any match within 45 days is when the worker has timely requested and is awaiting verification from a third party regarding the **IEVS** data. No other reason constitutes good cause.

EXAMPLE: A county receives 200 **IEVS** match forms with a "Tape Received" date of November 3. By December 18, the county must have completed, at a minimum, 160 of these matches and the remaining 40 are incomplete only because the worker has timely requested but not received information from third party sources.

When there is a delay, the worker should follow up on earlier requests and may require the recipient to verify the information or to assist in obtaining verification from the third party. When requested information is received after the expiration of the 45-day period, the worker will act within guidelines and timeliness standards for acting upon reported changes or in conjunction with the next case action when such verification is not received, whichever is earlier.

For appropriate handling and codes, please refer to *Volume X, IEVS MATCH*.

MONITORING AND REPORTING IEVS ALERTS

A tracking system for monitoring adherence to the **IEVS** requirements is mandatory. Management Information Systems (MIS) will immediately process the information received from Mississippi Department of Employment Security (MDES), Social Security Administration (SSA), and the State Resource Data (SRD). In addition, data must be collected in order to comply with the reporting requirements. The requirements will be handled as outlined below:

System Alerts

Matches with MDES and SSA will generate an **IEVS** alert in the MAVERICS system. With the indication of an **IEVS** alert in a case, the worker must "PF9" off the screen, (usually this will be the benefit determination screen, **AFPD**); access the IEVS ALERT SELECTION screen, (**IVAS**); make the appropriate selection by entering "X" in the "SELECT" column and pressing "ENTER". Then, access the unearned income screen to determine if the income in the case is correct and/or the same as that in **IEVS**.

If the income used in the eligibility and benefit determination for the household is correct as shown in the **IEVS** match, access the **IVAS** screen; change the "ACTION" code to "N"; enter the PCN in the comments section on page 3, explain the action taken.

If the income used in the eligibility and benefit determination for the household is incorrect, take appropriate action to correct the case, i.e., send, MAVERICS notice **A905** or manual notice Form **MDHS-EA-942**, **Request for Information**, or, resolve the discrepancy, correct the case, send the appropriate notice, and clear the alert by entering the appropriate codes on the **IEVS** screen.

For additional procedures, refer to *VOLUME X, IEVS SSN ENUM/VAL MATCH DATA*.

Paper Alerts

State Resource Data (SRD) matches generate paper alerts on form **MDHS-EA-975, IEVS**, **State Resource Data**, which are printed and sent to the policy unit for handling. An additional copy of form **MDHS-EA-978**, **SRD Transmittal and Report**, consisting of an original and copy will accompany individual **MDHS-EA-975** data match forms. Both forms contain in the heading "Federal Tax Information". The agency is prohibited from transmitting FTI via e-mail or fax.

The **MDHS-EA-978** matches will be handled as outlined below:

1. The **MDHS-EA-978** will be utilized in the policy unit as a control. A designated staff member will be responsible for ensuring that the MDHS-EA-978 is completed on all matches.

2. Upon receipt of the **IEVS** match sheet, the worker will handle according to policy outlined earlier in this material, notate the indicated action taken on the case or the fact that none was required, and route the form to the individual responsible for controlling **MDHS-EA-978**. The **IEVS** match sheet is not considered complete when verification has been requested but has not been received. It is only complete when the case is documented that an appropriate notice of action has been sent or is not necessary.

3. Because the worker needs to show "good cause" when the verification has been requested timely but has not been received, a method to notify the individual who is responsible for controlling MDHS-EA-978 must be developed by the policy unit.

4. Matches completed after the 45-day standard for any reason will be handled by posting the **MDHS-EA-978.** Form **MDHS-EA-975** must be maintained in secure storage in the policy unit.

SECURITY MEASURES

One person must be designated in the policy unit to serve as the security person to handle MDHS-EA-978 and MDHS-EA-975, and to be responsible for overseeing the day-to-day processing of these forms. It is recommended that this person be in a supervisory position. This individual will be responsible for such tasks as: the security of the forms, posting of the transmittal lists, maintaining the MDHS-EA-107, Authorized Access Listing and making sure each worker has appropriate awareness training for security and use of the forms. Locking containers/file cabinets should be used for storage of SRD transmittal lists and paper alerts when not in use. Only designated personnel should have access to the area. Such storage files/cabinets should be in a designated area located away from central office files and separate from client/public traffic. Personnel should also be aware that "lockable" rooms/cabinets containing communications and computer cabling equipment should be locked at all times and accessed only by authorized personnel.

The policy unit will receive one of the individual paper alerts (MDHS-EA-975) and one of the transmittal sheets (MDHS-EA-978). None of this material may be filed in the case record. If this material should in error become commingled with other information or be filed in the case record, all of the record must then become a security item and filed in locked storage.

Required retention time for the State Resource Data (IRS) is five (5) years for the MDHSEA-978, SRD Transmittal lists. When the individual SRD paper alerts have been worked,

including cases initially pended for requested information, and the transmittal list documented to show actions taken, the paper alerts (MDHS-EA-975) can be destroyed. The transmittal list must be signed and documented by the designated staff member of the policy unit to show when the alerts were destroyed, how these were destroyed (shredded, burned, etc.), and who did the destruction. Destruction by burning must be attended to assure complete destruction. Paper must be shredded to effect 5/16 inch wide or smaller strips with the paper inserted so that lines of print are perpendicular to the cutting line. Shredding along the printed line so that any material is still readable is strictly forbidden. Such destruction must be done by authorized agency personnel, or witnessed by such personnel, in order to ensure that no unauthorized access to SRD materials occurs.

To ensure that all security measures are complete, State Operations is required to conduct an internal inspection of all SRD security procedures in the policy unit. This inspection should coincide with annual awareness/security training of policy unit staff conducted by the end of August each year. Unauthorized use of IRS information by any employee of the Mississippi Department of Human Services is considered a felony punishable upon conviction by a fine of up to $5,000 or imprisonment of up to five years, together with the cost of prosecution. Any persons who witness unauthorized inspection or disclosure of Federal Tax Information must report the discovery via email to EAAdmin@mdhs.ms.gov as soon as it is discovered. The Division will report all violations to the appropriate Special Agent-in-Charge, Treasury Inspector General for Tax Administration (TIGTA) and the Office of Safeguards within 24 hours.

MAVERICS Reports

For additional assistance in monitoring and tracking on-line **IEVS** alerts, MAVERICS produces Report No. IR02, IEVS REPORT FOR ALERTS DUE IN 45 DAYS, more commonly referred to as Aged Action Report HESIT510. This document should be used to report actions taken on IEVS alerts, as well as to serve as a tool in tracking TIMELY follow-up on **IEVS** data.

For additional information regarding the AGED ACTION REPORT, refer to the MAVERICS Report Narratives and *VOLUME X, INCOME AND ELIGIBILITY*.

Revised 10-01-10

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INTRODUCTION

Effective June 2010, Mississippi adopted Broad-Based Categorical Eligibility (BBCE). Through BBCE, there is no household resource test (with certain exceptions as noted below). Federal regulations allow for broad-based categorical eligibility to be conferred to applicant/recipient households as long as the state offers services funded by TANF through Families First Resource Centers (FFRC). Referrals to FFRC programs are provided on the MDHS-EA-900 application form. BBCE households are subject to meeting all other eligibility criteria.

The following are not considered broad-based categorically eligible:

. households containing a member who is currently disqualified for Intentional Program Violation (IPV)

. households containing a member who has been convicted of a drug-related felony

. households in receipt of any lump sum payments in the 12 months prior to the date of application (Exception: EITC, tax refunds, tax rebates, or tax credits. See "Resources to be Excluded" later in this Chapter)

Households failing the BBCE criteria are subject to a resource test. Verification of the countable resources of all non-BBCE household members will be required.

The information in this chapter refers only to countable/non-countable resources attributed to members of a non-broad-based categorically eligible household.

DEFINITION OF A RESOURCE

Resources that belong to parents or other needy caretakers and children in the TANF assistance unit may be retained within certain specified amounts, as a family need not be destitute in order to qualify for assistance. These resources are in addition to real property identified as the home and personal and household effects of limited value. These resources must be taken into consideration in determining the eligibility of all TANF assistance units. Consideration of all resources means that the presence of the resource must be established and a determination made as to the value of the resource.

MAXIMUM ALLOWABLE RESOURCES

The maximum amount of cash or cash assets which a TANF assistance unit may retain and be

considered needy and therefore eligible is $2000.

Ineligibility based on resources continues only as long as the value of resources retained exceeds the maximum, unless the assistance unit has been disqualified in accordance with the provisions outlined in *Transfer of Resources*, later in this chapter.

The resources of the following individuals must be tested against the $2000 limit.

1. Child(ren) in the TANF case budgeted alone whose parent(s) receives SSI or are absent from the home.

2. TANF parent(s) budgeted alone due to the child(ren) in the case receiving SSI.

3. One or more children and one or both legal parents included in the budget.

4. One or more children and a grantee relative. When an individual has been determined needy and can be included in the budget, the total for the budget group cannot exceed $2000.

5. A TANF assistance unit consisting of a parent and his/her children and a stepparent. The maximum of $2000 applies to the cash assets of the parent and his/her children. Consider the following principles:

   a. Do not consider the resources of the stepparent available to the parent's children unless the stepparent makes them available.

   b. Consider one-half of the resources of the stepparent which he has accumulated since marriage to the parent of the assistance children as available to the spouse.

   c. If the parent and the children have resources, do not consider any of them available to the stepparent unless they can be identified as belonging only to the parent. Then consider only one half of these resources as indicated above.

6. A parent and stepparent who also have children by this current legal union and one parent is determined incapacitated.

7. A TANF family consisting of a parent and his/her children living with a stepparent who has children by a prior union. In this situation each set of children will be in a separate case and therefore have separate $2000 limits. If there are children by the current union as well

and one parent is incapacitated, assistance unit policy applies and the parents and all of the children will be budgeted together with a $2000 maximum.

8. A TANF family consisting of a parent and his/her children living in the home of an unrelated adult. Do not consider any of the resources of the unrelated adult available to the parent or to the children, except to the extent to which the unrelated adult makes them available. If the unrelated adult is the putative father, do not consider any of his resources until paternity has been established for his children.

RESOURCES TO BE INCLUDED

Listed below are some of the types of assets commonly held by applicants or recipients. Calculate the net equity value by subtracting the legal debt, such as promissory notes, conditional sales contracts, deeds of trust, vendors' liens or other similar legal papers from the fair market value. If a relative assumes payment on an asset and states that he has a claim against it, the relative must take a vendor's lien on the asset. If a debt is not secured by a legal document, the requirement to repay is subject to question and should be explored. To deduct the legal debt from the value there must be a requirement to repay.

Automobiles and Other Vehicles

Only certain vehicles, whether licensed or unlicensed, can be included in a household's resource determination. Countable vehicles are limited to recreational vehicles (unless used as the home), all-terrain vehicles (ATVs) and other off-road vehicles. Industrial vehicles, i.e., heavy haulers, pulpwood trucks, etc., are countable resources unless used for income-producing purposes over 50 percent of the time, excluding temporary periods of unemployment, or the vehicle annually produces income consistent with its fair market value, even if used only on a seasonal basis. The equity value of these vehicles shall be applied toward the household's resources.

Cash on Hand

Cash on hand is an asset immediately available and must be considered as income or a resource. See below for making this distinction. Some examples include: cash resulting from the sale or disposal of an asset, down payments from the sale of personal property or real property other than the home, or the sale of oil rights, timber, equipment, or other assets.

When the applicant or recipient says he has cash on his person, at home, or in another place not specified below, obtain his statement and signature to this effect for the case record.

Cash on hand or available to the individual must be distinguished from annual, quarterly, monthly, or lump sum income. Resources are permitted to be retained within the maximum limit, while income must be considered in the budget.

When cash is determined to be income, such as farm income which is received at one time during the year, the amount, when placed in the bank, may exceed the allowable resource limit. The money will be considered income for a period of one year from the date of receipt of the income. After the end of the year, any amount remaining becomes a resource.

Cash in Bank or Other Savings Institutions

When the applicant or recipient says he has, or has had within the past year, or there are other clues that he has cash on hand or in a bank or other savings institution, request verification of the amount. He may use his bank statements for the year, if available, or any other document which will establish the amount currently on hand and in his possession during the year.

If other documents are not available, the worker will use the **MDHS-EA-912, Request for Information - Bank, Saving and Loan, Other Financial Institution**, to verify cash in a bank or other savings institution. The worker will request that the individual provide a written or verbal statement regarding the contents of a safety deposit box.

Consider the amount on deposit at the time of application or redetermination.

NOTE: If the bank statement or account book shows that the individual customarily deposits his monthly income, deduct the amount of the current month's check that was deposited. The monthly income should be used in the budget. If the individual has a business enterprise, such as farming and customarily deposits loans to pay expenses, deduct these amounts. Follow the policy for allowing time for replacing or repairing a home, furniture or clothing.

Funeral Arrangements

A maximum equity value of $1500 is set on each funeral agreement and any additional equity should be counted as a resource. The $1500 maximum is set per individual in the TANF household.

Gravel

The sale and removal of gravel are a depletion of real property. When this is a one-time arrangement, the amount paid for the gravel is a resource. However, if the business arrangement is for the continuing removal and sale of gravel, this becomes a business enterprise and the payments are considered income.

House Trailer or House Boat

When the trailer or boat is not used as the home, it will be considered an asset available and tested against the maximum limit. Ask the individual to obtain the resale value from a dealer who has knowledge of such values, or if purchased within the year, obtain the purchase price from the bill of sale.

Joint Bank Accounts

Joint bank accounts may be established in one name or more than one name with one or more signatures authorized to sign checks from the account. Under current Mississippi Law, a bank is not obligated to police withdrawals from accounts by authorized signatures. Therefore, when an individual's name is on an authorized signature card, that individual has full access to any and all funds in the account, regardless of the name on the account or who made the deposits. Funds in such accounts must be considered accessible in their entirety to each individual on the signature card and will be considered toward the maximum limit.

Situations of this type must be explored and the case record documented accordingly. Unusual situations may occur which will need further inquiry and explanation with both the individual and the banking institution. These situations will also need thorough documentation in the case record.

Jointly Owned Resources

Resources owned jointly by the assistance unit and another household will be considered available in their entirety to each household, unless the assistance unit can demonstrate that the resources are inaccessible to them. See *Resources to be Excluded*, later in this chapter, for details. If the assistance unit can demonstrate that it has access to only a portion of the resource, only that portion of the resource shall be counted toward the resource limit.

Livestock

Livestock such as cattle, hogs, chickens and other fowl will be considered as resources at current market value. When the livestock are indebted, subtract the amount of the debt from the current market value. If the individual has purchased livestock recently, he should be able to show his bills of sale. If the individual has had the livestock for more than 12 months, he will need to establish their value by having them appraised by an individual qualified to do this.

NOTE: An individual adds to his resource value when the livestock multiplies.

See *Resources to be Excluded*, later in this chapter, for livestock for home consumption.

Lump Sum Payments

Money received in the form of a non-recurring lump sum payment, such as retroactive lump sum SSA, TANF or other payments, lump sum insurance settlements, vacation pay received in one

payment, lottery winnings, refunds, etc., will be considered, unless specifically excluded as a resource (i.e. SSI *lump sums, income tax refunds, rebates or credits*). Any portion of the lump sum identified as payment for the current month must be counted as income.

Mortgages, Notes and Deeds of Trust

When an applicant or recipient states that another individual owes him a debt, it is necessary that the individual have written evidence of the debt in the form of a promissory note, deed of trust, mortgage, etc. Otherwise, the individual has no way of enforcing the payment of the obligation. Ask the individual to determine the current market value of these assets from local bankers or from banks where the individual ordinarily does business. The current market value is that amount which can be realized from immediate sale. The amount which the individual will receive is the current value less a discount for handling any risk involved. Consider excessive a discount rate of more than 10 percent, and do not consider the asset a resource, count the payments as income, including both principal and interest.

Oil, Gas and Other Minerals

The lease or sale of mineral rights is a depletion of the real property and the proceeds are a resource. The amount paid per acre for the lease is a resource. The company may or may not renew the lease at the end of the year. If the lease is renewed, the rental for the year is income.

The lease or sale of mineral rights can be established from the deeds in the chancery clerk's office. If the deed does not give the amount of payment, the exact amount received must be verified from the lessee or purchaser.

Personal Belongings

Personal belongings that are significant assets such as valuable jewelry, antiques and above-the-ground swimming pools are considered available resources. Their value may be obtained from reputable dealers. Other personal belongings will only be considered in the maximum limit if they are valued at an unusually large amount.

Property Owned in Common or Jointly

When an individual owns in common or jointly with others property which is not a homestead, consider as available to him his pro rata share of the net value and test in the maximum limit.

NOTE: When minor children are involved, the value of the property will be disregarded when the

payee documents that the court has refused to allow the sale or that the court costs would make the sale unprofitable to anyone.

If unusual cases of hardship arise, refer the case to the Economic Assistance Policy Unit, State Operations.

Real Property Other Than the Home

Real property other than the home consists of any real property in which the individual has an interest or which he owns outright, and which is not part of the home place. The use of the property should be explored.

When an individual owns property other than the home in his name, determine its net value using the fair market value minus any legal debt. This is considered in the $2000 maximum limit.

Retirement Plans

Retirement plans that are **not** authorized under section 401, 401(a), 403(a), 403(b), 408, 408A, 408(k), 408(p), 457(b), and 501(c) (18) of the IRS code, or section 8439 of Title 5, United States code, are considered as countable resources. See discussion under "Resources to be Excluded, Retirement Plans" later in this chapter.

Stocks, Bonds and Certificates of Deposit

Determine the possession of stocks, bonds, and certificates of deposit by careful discussion with the individual, exploring past earnings, employment and resources.

Obtain the value of stocks or bonds from the company issuing the stock or from an investment company. It is usually possible to obtain the value of commercial stocks from a broker.

Obtain the value of United States savings bonds and CD's from the bonds and CD's themselves, if in the possession of the individual, or ask him to obtain this from his bank. Since the owner of a savings bond cannot obtain the value except by cashing in the bond, the yearly interest will not be considered income. The value of the bond will increase each year. Most stocks and CD's produce income which must be considered as such.

Students Under 18 With Accumulated Earnings

The accumulated earnings of a student under 18 will be considered as a resource.

Timber

Uncut timber or kindred products such as pulpwood, located on home property are disregarded; however, timber located on property other than the home is considered resources. If timber on home or other property are cut and sold at regular intervals the resulting cash will be annual income. When the entire stand is sold, this depletes the asset and results in a resource. Verify the amount secured by seeing the bills of sale.

Trust Funds

When a trust fund is created, usually on behalf of a child, it is necessary for a request to be made to the attorney handling the settlement. Follow the steps below:

1. Explain to the individual the necessity for the request being made.

2. Ask the individual to advise the attorney handling the trust fund that the child(ren) is receiving TANF and that he needs to verify whether the trust fund is accessible for the release of funds for the maintenance of the children.

3. If the trust fund is inaccessible then it will be excluded from resources. However, explain to the individual that when funds from the trust fund become available he must report it to the county office.

4. If the trust is established by a will, determine and accept the terms of the trust. An approach to the court would be inappropriate as the court could not overrule the trust provisions.

5. Any interest earned and paid to a member of the assistance unit on the trust fund would be considered income.

RESOURCES TO BE EXCLUDED

Automobiles and Other Vehicles

Most automobiles and other vehicles, whether licensed or unlicensed, are totally excluded in the resource determination. The exclusion includes cars, trucks, vans, motorcycles and other vehicles which are considered to be regular, on-road transportation. See *Resources to be Included*, earlier in this chapter, for a discussion of countable vehicles.

Burial Site and Funeral Arrangements

One individual burial site and one documented funeral agreement with a bona fide provider or funeral service up to $1500 will be allowed for each member of the assistance unit. Any amount over the $1500 will be counted in the maximum.

Cash Obtained From Sale of Home

The cash obtained from the sale of the home can be excluded for 6 months if there is a realistic replacement plan. See *Home Property* for procedures.

EITC, Child Tax Credits, and Tax Refunds

Lump sum payments from Earned Income Tax Credits (EITC) and income tax refunds, credits, or rebates are totally disregarded as resources for a 12-month period from the month of receipt.

Child tax credits are included in income tax refunds along with EITC and Federal income tax withheld, and is separate credits allowed for taxpayers with children. Child tax credits are disregarded for a 12-month period from the month of receipt.

Home Property

The home property occupied by the TANF household will be excluded from the resource maximum.

Property which the applicant or recipient claims as the home must meet one of the following definitions:

1. A single tract of land on which the family lives. Property which joins at any point or corner or that is divided only by a road, railroad, creek or right-of-way will be considered a

single tract. The following conditions do not prevent the tract from being considered a single tract and the home place.

a. The individual receives homestead exemption on only part of the single tract or none of it.

b. The single tract is divided into lots or parcels of land for assessment purposes.

2. A trailer or boat occupied by the family as the home regardless of whether the individual owns the land on which the trailer sits or the land near which the boat is anchored. If the family moves elsewhere, the trailer or boat becomes an asset and will be considered in the maximum limit.

Uncut timber located on the home property will also be excluded in the resource calculation.

For a family with two separate homes, only one home may be excluded as described above. Other buildings, such as stores or houses, which are clearly not part of the exempt residence and its outbuildings, must meet another resource exclusion to avoid being counted as a resource (ex: if a second house on home property is occupied and rent is being received from that second house, the resource will be exempt). If counted as a resource, only the equity value (fair market value less indebtedness) of the structure will be counted as a resource. The land upon which it is located will not be considered when determining the value.

On occasions, an individual may be in the process of replacing the home. Cash obtained from the sale of a home will be disregarded for six months when the family has a realistic plan to use that cash to obtain, replace, or repair a home, to replace or repair furniture and household items which were destroyed, or to reduce or liquidate a home mortgage. Expect the individual to use this cash for moderately priced items, and secure cost estimates when feasible.

When the individual expresses intent to rebuild, replace, etc., and demonstrates efforts to do so, secure from the individual documentation of cash used for one or more of the above purposes at the end of the six-month period. Any cash above the documented costs will be considered as lump sum income in the month received.

NOTE: The time may be extended for a reasonable period when the plan is underway but not completed because of special circumstances, such as serious illness of the individual, severe weather or other valid reasons.

When the individual has no replacement plans, count such cash as lump sum income in the month received and treat according to lump sum policy.

Livestock

When livestock or fowl are used only for the production of food for home consumption, they are not considered a resource.

See *Chapter 15, Table V* for more information on this exclusion.

Loans

Loans made to the individual by another individual or agency may consist of cash or credit advanced, and may be for specified or unspecified purposes. However, in order for the worker to disregard the loan as income and resources, the individual must establish that the loan is a bona fide one. Bona fide loans must meet the following criteria:

1. There is a written agreement to repay the money within a specified or an agreed upon time; that is, on a regular timetable or when anticipated income becomes available.

   The loan does not have to be secured by specific items of collateral, but the borrower must express the intent to repay.

2. Or, the loan is obtained from an establishment in the business of making loans. Farm loans are often made by verbal contract between sharecropper and a landlord or merchant.

These types of loans may be considered bona fide when the worker verifies the contract by contacting the lender.

Loans for specified purposes are most often for educational purposes, for the purchase of a home and/or lot, for improvement or repair of the home, and the like.

If the individual cannot establish that the amount in question is a bona fide loan and cannot reasonably explain potential repayment, count the available amount as a contribution to be considered income.

Personal Belongings

Personal belongings such as clothing, furniture, household equipment and the like will not be considered resources unless they are valued at an unusually large amount.

See *Resources to be Included*, in this chapter, for more information.

Disaster Payments

Payments received from sources such as the Federal Emergency Management Agency (FEMA) due to a federally declared disaster are disregarded for six months.

Relocation Payments

The Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, which became Public Law 91-646, provides for relocation payments to be made to individuals and families who are displaced by the acquisition of property for projects and programs that are usually handled through one of three agencies: U. S. Department of Housing and Urban Development (HUD), Army Corps of Engineers or State Highway Department.

Usually an individual who has sold property for one of these projects will have dealt with one of the three agencies listed above and that agency should be able to provide the details of the transaction. However, should an individual indicate that he has sold property for a project through some other governmental agency, contact that agency for verification as to whether or not the individual was provided a relocation payment in accordance with the relocation payment act.

Under the provision of this act for the acquisition of property for these funded programs or projects, the families may receive the following payments:

1. Payment for property acquired: This is payment to the property owner for his property and is equal to the fair market value of the property. This is not a part of the relocation payment and policy for cash obtained from the sale of property will be used.

2. Relocation payments: These payments must be disregarded as income and resources in determining eligibility. The payments are:

    a. For the home owner who must relocate, a payment not in excess of $15,000 to make up for the difference between the payment for the property sold and the purchase price of a replacement property comparable to the one sold or one which would meet the minimum health standards.

    b. For the home renter who must relocate, a payment not in excess of $4000. This is for the difference in the amount that was being paid and the cost of comparable renting in a new

location. The payment is made for no more than a four year period and may be made in four equal installments or one lump sum payment.

c. Dislocation allowance of $200 to each household dislocated by the project.

d. Moving expense allowance: This payment is made to each household which must relocate to cover moving expenses. The payment is made according to the amount of personal property which must be moved. The household may accept either the actual verified cost of moving or $300 a household. However, when the payment of actual cost is made, the household will not receive the $200 dislocation allowance in Item c above.

Disregard all relocation payments as listed in item 2 above as long as the family maintains these funds so that the agency can identify them as the amount received as relocation payments. If the individual commingles the relocation payments with his other cash and it cannot be distinguished from his other funds, then these can no longer be disregarded. An individual will be considered to have commingled his relocation payments when:

1. He places these in a bank account with funds acquired in other ways.

2. He uses these funds along with other funds to purchase a home.

3. He buys other property with the relocation payments instead of investing in a home or paying rent with the money.

Trust Funds

The cash value of the trust fund, if inaccessible, will be excluded.

Marriage Disregard

A one-time disregard will be applied for six consecutive months to the resources of the new spouse of TANF recipients who marry on or after October 1, 1999. This disregard is applicable only in the TANF case and is a one-time disregard. See Chapter 6, Marriage Disregard for information regarding timely reporting.

Small Business Equipment, Farming Machinery and Implements

Equipment essential to the operation of a small business is disregarded. The value of assets associated with a farming operation is also disregarded.

Life Insurance

The cash surrender value of a life insurance policy is disregarded.

Education Savings Plans

Education Savings Plans identified as tax preferred accounts are excluded from the resource determination. Such savings plans include qualified tuition plans under Section 529 that allow either prepayment of education expenses or contributions to an account to pay such expenses, and Coverdell education savings accounts to pay student education expenses.

Retirement Plans

All retirement savings plans authorized under sections 401, 401(a), 403(a), 403(b), 408, 408A, 408(k), 408(p), 457(b), and 501(c)(18) of the IRS code, and the value of funds in a Federal Thrift Savings Plan account as provided in section 8439 of Title 5, United States code, are excluded in the resource determination. The list of excluded accounts is subject to change based on possible future changes in federal policy, and accounts may not be limited to those listed on the chart on the following page.

EXAMPLES OF EXCLUDED RETIREMENT PLANS AND ACCOUNTS

Plan/Account	What is it?	Authorized
Pension or traditional defined-benefit plan	Employer-based retirement plan that promises retirees a certain benefit upon retirement, regardless of investment performance.	Section 401(a) IRS Code
Cash Balance Plan	Employer-based hybrid plan that combines features of defined-benefit and defined-contribution plans. Each employee is allocated a hypothetical account, but account balances accrue at a specified rate, rather than depending on investment performance.	Section 401(a) IRS Code

Employee Stock Ownership Plan	Similar to a profit-sharing plan that must be primarily invested in the employer's stock and under which distributed benefits must be offered in the form of the employer's stock.	Section 401(a) IRS Code
Keogh plan	Informal term for retirement plans available to self-employed people.	Section 401(a) IRS Code
Money Purchase Pension Plan	Employer-based defined contribution plan under which annual contributions are fixed by a set formula	Section 401(a) IRS Code
Profit Sharing Plan	Employer-based defined-contribution plan under which employer contributions may, but need not be, linked to profits. Usually refers to non-matching employer contributions.	Section 401(a) IRS Code
SIMPLE 401(k)	401(k)-type plans only available to small businesses: exempt from certain restrictions and subject to some limitations on employer contributions.	Section 401(a) IRS Code
401(k)	Defined contribution plan that allows employees to defer receiving compensation in order to have the amount contributed to the plan. Commonly referred to as a "cash or deferred arrangement" (CODA). Some 401(k) plans allow after-tax Roth 401(k) contributions.	Section 401(a) IRS Code
403(a)	Plans that are similar to 401(a) plans but are funded through annuity insurance.	Section 403(a) IRS Code
403(b)	Tax-sheltered annuity or custodial account plan offered by tax-exempt section 501© organizations or public educational schools. Many are funded by employee contributions that resemble 401(k)s.	Section 403(b) IRS Code
IRA	Vehicle for tax-deferred retirement savings controlled by individuals rather than employers.	Section 408 IRS Code

Simple retirement account IRA	Employer-based IRA (to which employers and employees contribute) available only to small businesses.	Section 408(p) IRS Code
Simplified Employee Pension Plan (SEP)	Employer-sponsored plan available only to small businesses; allows employer to contribute to employee accounts that function as IRAs and are subject mostly to IRA rules. Generally ceased to apply in 1996.	Section 408(k) IRS Code
Roth IRA	Same as IRA, except that qualified distributions are tax exempt.	Section 408A IRS Code
Eligible 457(b) Plan	Funded plan offered by state and local governments or unfunded plan offered by nonprofit organizations.	Section 457(b) IRS Code
501(c)18 Plan	Plan offered mostly by unions. Had to be set by June 1959 and are now largely obsolete.	Section 501(c)(18)
Federal Thrift Savings Plan	Plan offered by the federal government to its employees	Section 8439 of Title 5 USC

EVALUATION OF RESOURCES

In considering resources of TANF children and their needy caretakers, the worker will observe certain principles and procedures:

1. Ascertain from the parent or other relative in TANF the amount of the resources available to the family unit. Require each parent to give information concerning resources when they are both in the home. Do not involve the spouse or parent who is an SSI beneficiary except to the degree necessary to determine the share legally belonging to the TANF children or adult.

2. Totally disregard:

   a. The home property occupied by the family unit as described above.

   b. Resources which are unavailable see *Conditions of Disregarding Resources*, later in this chapter.

   c. Most vehicles. See exceptions in, *Automobiles and Other Vehicles,* earlier in this chapter.

3. Also, allow the TANF group to retain:

   a. Personal and household effects of limited value.

   b. One burial plot for each member of the family.

   c. Other resources whose combined equity value does not exceed $2,000. Such resources include real estate, cash, etc.

   See discussions in *Real Property*, later in this chapter, for establishing equity value.

4. Consider the resources of legally married husband and wife mutually available except when:

   a. One is an SSI beneficiary and the other is not included as an ineligible spouse in the SSI computation, but is considered in determining eligibility of the children.

   b. The husband and wife have a broken relationship and are living apart.

c.

c. Property acquired prior to the current union is involved.

d. One spouse is in an institution.

5. Determine in whose name legal title is vested when one parent is an SSI recipient, the other parent is included in the TANF budget and there is real property other than the home involved. If title is vested in the SSI parent, do not consider it in determining TANF eligibility. If the TANF parent has title, test the property value against the resource maximum.

6. Consider one-half of other assets as belonging to the SSI recipient and the other half to the TANF parent, and thus to the children, when one parent is an SSI recipient and the other is included in TANF.

7. Test the value of children's resources together with the assets of a grantee relative when the children live with a grantee relative other than a parent and he wishes to be included in the TANF budget and has been determined to be needy. Refer to *Chapter 6, Special Budgeting Procedures*, for testing the resources and income of a grantee relative other than a parent. Distinguish the resources of the grantee relative from those of his spouse by determining in whose name legal title is vested for real property and considering the resources available to his spouse if jointly owned. If the resources of the relative when added to those of the children exceed the family maximum, the relative cannot be included.

8. Determine the fair market value of real property by securing a written statement from a real estate agent, the county tax assessor, or some other individual knowledgeable of real estate values in the community.

   When it is impossible to secure an appraisal from a qualified individual, convert the tax assessed value to market value. This is done by multiplying the tax assessed value by the percentage reduction applicable to the particular county. Your county tax assessor should be helpful in determining this information.

9. Determine the net value of either real or personal property by subtracting any verified legal debt from the value of the asset. Legal indebtedness may consist of a mortgage, lien, or notes. To be recognized, a debt must be in writing in the form of a legal document and properly recorded. Informal debts cannot be recognized.

   When a mortgage is found to be against both real and personal property, or two pieces of real property which must be considered separately, first ask the bank or lending agency to

give the amount of the mortgage against each piece. If they cannot do this, then summarize the information and submit it to the supervisor who can contact the Economic Assistance Policy Unit if needed.

CONSIDERATION OF EXCESS RESOURCES

Applicants

In handling applications and reapplications for assistance, the following policy should be used for excess resources:

1. Consider ineligible an applicant who has cash or a cash asset available for conversion into cash, the value of which exceeds the allowable limit. Consider him ineligible as long as he retains the asset.

2. If the applicant chooses to use rather than retain the asset, consider him ineligible until he has used the excess down to the allowable maximum. This is sometimes referred to as a "spend down". In the discussion of this explain to the applicant:

    a. The intent of the state statute is that each individual should use his income and resources for his maintenance as far as they will go. The statute also contains a prohibition against the transfer of property, real or personal, in order to qualify for assistance.

    b. The agency will expect him to use the excess amount reasonably for ordinary living expenses, the purchase or repair of a home, or other expenditures which he deems essential to meet his needs or those of his dependents.

    c. There is no required time during which an amount of excess cash is expected to provide for the applicant's needs. The period is expected to be reasonably related to the amount of cash but not subject to agency budgetary standards.

3. When the applicant has had cash prior to the date of application or the applicant has been rejected because of excess resources, the worker will ask him to supply the following:

    a. The amount of the cash or the value of the cash assets and the approximate date of its receipt.

    b. The way in which the applicant has used the excess cash or the asset with excess value. The purpose in asking for this information is to determine:

        - The amount he still has on hand, if any;

- Whether he has invested any or all of the cash or has converted a cash asset into another kind of asset from which he can now reasonably be expected to receive a return, such as income or services, shelter rights, or the like; and

- Whether he has transferred cash or a cash asset above the limit without receiving a reasonable return.

The applicant who is applying for the first time is not expected to be aware of agency requirements and may not be able to verify the use of resources for the prior year. However, he must provide sufficient information to allow the worker to determine that his resources are within the allowable maximum and that he did not transfer resources in order to become eligible. Reapplicants whose applications have been rejected or cases closed due to excess resources are expected to verify the use of the excess. When the former applicant or recipient cannot verify the total use of his excess cash, the worker will use his knowledge of living expenses to determine whether the unverified expenditures were required for the individual's' maintenance, were given away, or are available.

If the applicant is unwilling to discuss the use of cash, this raises the question of continued possession of the cash or of the transfer of the asset without return in order to qualify. Eligibility cannot be determined under such circumstances.

Recipients

A recipient may retain and also replenish his resources up to the maximum. However, a recipient who comes into excess cash, which can be identified as resources or an asset with a value exceeding the maximum, either alone or together with other assets, is under no obligation to report the receipt of such assets until the next TANF review.

When the TANF payee gives information and signs the **MDHS-EA-900, MDHS Application for Assistance,** he signs an agreement to this effect. Failure to report such assets or excess cash raises the question of fraud and certainly improper payments.

When the worker learns that a recipient has received excess resources the worker will:

1. Ask the recipient to provide the following information:

    a. Verification of the amount of cash or the value of the asset received and the date of the receipt;

b. The verified amount of cash or the value of the asset remaining on hand whether or not it is in excess of the maximum; and

c. The purpose for which the excess cash will be or has been used.

2. Use the facts obtained to determine whether or not:

a. The individual has used up his assets at time of the review or has plans to use the excess cash as allowed in policy.

b. The individual has received a reasonable return in using up his excess cash. The recipient who uses his excess cash to meet the needs of himself, his spouse and his minor children will be considered to have received a reasonable return.

c. The individual has been ineligible in a prior period because of 1) excess resources retained or 2) resources transferred in order to remain eligible. See discussion on transfer with intent to qualify in *Transfer of Resources - Disqualification Procedures*, later in this chapter.

3. Take appropriate action as follows:

a. Continue assistance when the recipient has used his excess resources 1) to receive a reasonable return or 2) without receiving a reasonable return and the period of ineligibility has expired. Also, continue assistance according to policy for the purchase and repair of a home or household items.

b. Terminate assistance when the recipient 1) retains excess resources except as allowed for a home or household items or 2) has disposed of his excess cash within the prior year without receiving a reasonable return. Explain to the recipient that:

- He is expected to use his income and resources as far as they will go in meeting the living expenses of himself, his spouse, and his minor child(ren) and that he will be ineligible for a period of time based on the amount transferred above the maximum limit.

- He will be required to submit proof of use of his excess cash, should he reapply.

c. Report to the Economic Assistance Policy Unit any situations which meet the definition of hardship.

d. Consider suspected fraud for any period of ineligibility and submit a claim.

CONDITIONS OF DISREGARDING RESOURCES

An asset which alone or in combination with other assets exceeds the allowable maximum will be considered not available in these instances:

1. The asset has been purchased under a contract which precludes the sale or other disposition of the asset, such as a sales contract which has as one of its conditions a prohibition against the sale of the item purchased until paid for, with interest.

2. The applicant or recipient proves that he is willing to convert the asset into cash, or has tried to do so, but is unable. Property in probate proceedings or divorce litigation is also considered inaccessible. See the discussions below for more information on bona fide efforts to convert real property and assets other than real property.

3. The asset has been lost because of factors beyond the individual's control. The facts must be carefully established to show the date of the loss, the circumstances under which the loss took place and the individuals who corroborate the account. The story must be credible and substantiated. The regional director will review such accounts if needed.

4. As a rule, minors cannot be said to own real property. By statute, a person less than 21 years of age cannot have legal title vested in him, cannot purchase, or cannot encumber real or personal property. Property can be left to a minor as an inheritance, or a child can have a share in real property, but it cannot be disposed of or encumbered without permission of the court. Thus, such property is not actually an available resource to the child and will not be considered as such unless the net value is sufficient to warrant the requirement for the guardian, other parent, or trustee to take legal steps to release the resources for his use.

5. The family who uses excess resources to secure burial sites or funeral agreements for TANF household members will be considered as having secured a reasonable return.

BONA FIDE EFFORT TO CONVERT INTO CASH - REAL PROPERTY

Otherwise non-excludable real property that a family is making a good faith effort to sell can be exempt. The worker may verify that the property is for sale and that the household has not declined a reasonable offer.

The individual should provide evidence of a good faith effort to sell the property prior to approval for assistance. A written statement from a real estate dealer, newspaper clippings or

advertisements for the property, or letters from individuals offering to buy the property are acceptable evidence.

The payee will be required to sign a written statement attesting to the following:

1. The payee understands that the family has real property the value of which is over the resource limit as defined by agency policy.

2. The family is making a good faith effort to sell this property and will provide evidence of this effort.

BONA FIDE EFFORT TO CONVERT INTO CASH - ASSETS OTHER THAN REAL PROPERTY

When an individual has an asset other than real property which he states he cannot convert into cash for current maintenance, and the value exceeds the allowable maximum, consider him eligible provided he can prove that 1) he has already made a bona fide effort to convert the asset into cash or 2) he is willing to make such efforts. Valid reasons for inability to convert the asset include: failure to obtain a fair offer; unwillingness of buyers to accept a debt; lack of clear title; and inaccessibility of the property.

Ask the individual to supply evidence of his efforts to convert the asset to cash. Acceptable evidence includes:

a. Written statements from dealers in the community who are familiar with the type of asset being considered.

b. Statements from the company that issued the stock or other asset.

c. Newspaper clippings of his advertisement of his asset.

d. Letters from individuals offering to buy.

e. Statements from a bank or other institution dealing with the asset. **DISCLAIMED OWNERSHIP** Ownership of property is determined by the legal status as shown by the recorded deed in the case

of real property, and by the bill of sale, certificate of title, or other document in the case of personal property. When an individual has property recorded in his name that exceeds the allowable maximum, he may state that the property is in reality that of another individual. In that event he will be given an opportunity to establish that this is the case.

He will be required to:

1. Transfer the property to the individual to whom he says it belongs, in order to present evidence of good faith.

2. Establish through documents if possible, and, if not, through other means that the property belongs to this individual.

3. Establish how the property came to be in his name rather than in that of the person to whom he states it belongs.

When the requirements are met satisfactorily, the transfer of property will not be considered as having been done for the purpose of qualifying for assistance. If the individual is unwilling to show good faith by the above methods, then the fair market value of the property should be considered as a resource.

When the disclaimed property is an insurance policy, the individual must sign a waiver to his rights to the cash value of the policy. Disclaiming of an insurance policy usually arises from the fact that another individual has been paying the premiums. In this case the individual must furnish evidence of payment of premiums and the period during which this has been done. Recent assumption of payment of premiums does not establish another individual's right to the cash value especially when an individual has paid the premiums for a period long enough to have equaled the cash value.

GENERAL

At the time of application, households will be asked to provide information regarding any resources which any household member or excluded household member whose resources are being considered available to the household has transferred within 90 days immediately preceding the date of application. **Applicant households** which have transferred resources knowingly for the purpose of qualifying or attempting to qualify for TANF will be disqualified from participation in the program for up to one (1) year from the date of the discovery of the transfer if the transfer occurred within 90 days of the application. Under Simplified Reporting rules, this is **not** a reportable change. However, if resources are transferred knowingly after a **recipient household** is determined eligible for benefits, a disqualification will be applied if it is discovered within 90 days of the transfer. The date of the transfer and date of discovery must be documented to determine if a disqualification should be applied.

NOTE: A transfer of resources should not be confused with "disposing of" a resource. For example, an applicant or recipient could dispose of money in a savings account in order to buy a car and this would not be considered a transfer of resources. A transfer is a "giving away" of sorts.

ALLOWABLE TRANSFERS

Eligibility for the program will not be affected by the following transfers:

1. Resources which would not otherwise affect eligibility, for example, resources consisting of excluded personal property such as furniture or of money that, when added to other nonexempt household resources, totaled less at the time of the transfer than the allowable resource limits;

2. Resources which are sold or traded at, or near, fair market value;

3. Resources which are transferred between members of the same household, including excluded household members whose resources are being considered available to the household; and

4. Resources which are transferred for reasons other than qualifying or attempting to qualify for TANF; for example, a parent placing funds into an educational trust fund as outlined in *Resources to be Excluded*, earlier in this chapter

DISQUALIFICATION PROCEDURES

In the event the State agency established that an applicant household knowingly transferred resources for the purpose of qualifying or attempting to qualify for TANF, the household will be sent a notice of denial explaining the reason for and length of the disqualification. The period of disqualification will begin with the month of application.

If the household is participating at the time of the discovery of the transfer, advance notice explaining the reason for the length of the disqualification will be sent. The period of disqualification will be made effective with the first money payment to be issued after the notice of adverse action period has expired, unless the household has requested a fair hearing and continued benefits.

NOTE: The date of discovery of a transfer of resources has no effect on the county taking action to disqualify the applicant household for the transfer provided the resource was transferred within the 90-day period preceding the date of application. For example, a household transferred a resource which affected eligibility on April 15th and applied for TANF on July 10. This transfer was discovered by the county the next December. At the time of the discovery the county takes action to disqualify the household based on the amount of the resource, as outlined below.

The length of the disqualification period shall be based on the amount by which nonexempt transferred resources, when added to other countable resources, exceed the allowable resource limits.

EXAMPLE: The parent in a TANF household, who has $1750 in a bank account, transfers a lump sum insurance settlement amount of $1500. Therefore, $1500 would be added to the $1750 in the bank account for a total of $3250. The amount in excess of the maximum limit of $2000 is $1250. The household would be disqualified for 6 months using the chart below.

The following chart will be used to determine the period of disqualification:

Amount in Excess of the Maximum Limit		Period of Disqualification
$ 0 - $ 249.99	. . . . .	1 month
$ 250 - $ 999.99	. . . . .	3 months
$1000 - $2999.99	. . . . .	6 months
$3000 - $4999.99	. . . . .	9 months
$5000 – and up	. . . . .	12 months

Once the disqualification period has been correctly imposed, it cannot be rescinded even if the household takes steps to have the transferred resource returned.

EXAMPLE: Ms. Brown transferred property in order to qualify for TANF. The transfer renders her household ineligible for 6 months. After serving 2 months of the disqualification period, Ms. Brown reapplied for TANF and informed the worker that the property had been deeded back to her. She further stated that she was attempting to sell the property and had listed it with a real estate agent. Ms. Brown must serve the four (4) remaining months of the disqualification period before she can be reapproved for TANF.

SALE OF REAL PROPERTY

Since the purpose of the retention of real property is to provide shelter or to produce income, determine whether the applicant has sold his real property other than the home during the two years preceding the date of application.

At the time of application or redetermination, ask the individual whether he expects to sell his property. If he does, tell him that the agency will:

1. Expect him to sell the property at least for the current fair market value.

2. If he sells the property on time, expect him to receive a reasonable down payment and have the balance paid over a reasonable length of time.

3. Expect him to take a mortgage or note for the balance due and to charge interest at the prevailing rate.

If the individual has already disposed of the property without having taken a note or mortgage, the worker will:

1. Expect him to try to do so.

2. If he refused to try to do this, deny or terminate aid on the basis that the individual has refused to comply with agency policy. He may reapply at any time at which he decides he will comply.

When an individual sells his property with the proceeds to come in over a period of months or years, count the down payment as a resource and the monthly, quarterly or annual payments as

income. Include the interest paid as income. Ask the individual to take the note to the bank or lending institution to obtain the discount value.

Refer to *Bona Fide Effort to Convert Into Cash - Real Property*, earlier in this chapter.

USE OF REAL PROPERTY BY RELATIVES

A TANF recipient is expected to use his property to supply his own needs and to obtain income if possible. This can be found in the state statutes. Therefore, when a relative uses property belonging to an individual or lives in the home with him, the relative will be expected to make some contribution to living expenses. This may include cash rental payment, in-kind payment such as fuel, produce, clothing or payment of taxes and upkeep, or services, either personal or housekeeping services.

If the relative is using the land and is producing income from it, the individual will be expected to receive a reasonable rental. If the relative has joint ownership in the property, he will be expected to assume his share of costs of ownership such as taxes, upkeep and insurance from the income he derives.

MORTGAGING OF REAL PROPERTY

Distinguish between applicants and recipients in considering mortgages placed on real property.

Applicants: Begin with finding out about any mortgages on property.

If the applicant mortgaged his home or property other than the home before he applied and has spent the money, consider him eligible with the following exception:

If the applicant mortgaged his home or property other than his home during the year immediately preceding the date of application, and this action brought the value of the place within the agency maximum (and there is no reasonable and valid explanation) consider that the applicant disposed of the property to qualify for assistance, and disqualify them using the above chart.

Recipients: When a recipient mortgages his home or property other than his home or increases the amount of the mortgage, follow the policy regarding loans.

INFORMATION ABOUT REAL PROPERTY

Introduction

The following discussion is for the most part factual information about the legal ownership and control of real property; homestead rights; and jointly owned property. It is based on state statute and court decisions on exempt property, descent and distribution of property, and deeds and conveyances. When an individual has property and there is some question about the status, the worker will usually be in need of more information in order to help the individual state the facts about it.

The Homestead

As long as a surviving spouse has homestead rights in property, neither this spouse nor the children have control of the place. The Mississippi Code of 1942, as amended, establishes the homestead rights. Under the state statue, either spouse, whether husband or wife, widow or widower, is entitled to hold exempt from seizure or sale for debt or other reasons the land and buildings owned and occupied as a homestead, provided the land does not exceed 160 acres or $30,000 in value. In arriving at the $30,000 value, the legal encumbrances shall be deducted. The husband or wife is entitled to the use and occupancy of the homestead even if he or she does not have family or does not occupy the homestead if he or she is over 60 years of age.

Neither husband nor wife can sell, transfer, place a debt, lease the mineral rights, or sell timber without the other's consent and signature on the deed; thus such property should be disregarded when the other spouse refuses consent.

The surviving widow or widower is entitled to occupy the homestead and to receive income from it. Since the surviving spouse is entitled to the use of and rent from the land, the use cannot be taken by others, even the heirs, without liability for the rent. The surviving spouse who occupies the homestead is liable for the payment of the taxes and upkeep to the extent of the income from it; also the interest on the mortgage, if one exists, but not the payment on the principal. The other heirs cannot sell, encumber with debt, divide, or otherwise dispose of the homestead without the consent and signature of the widow or widower.

Determining a Widow's Equity

To determine a widow's equity in the estate, the date of the husband's death should be secured and the chancery court docket, which is in chronological order, should be checked. The records on the docket made around the date of death of the husband will show divisions of estate and personal

property. The Will Records of the county will also give information in regard to the disposition of property.

Property Other Than Homestead

Real property not occupied as a homestead by a surviving spouse, or for which a surviving spouse does not have homestead rights, is as follows:

1. Property acquired in the name of one spouse who died without a will. Such property descends to the surviving spouse and the children, each having an equal share. If the heirs are minors, the surviving spouse must obtain permission from the Chancery Court to make disposition of it. Therefore, a TANF mother whose spouse owned property in his name only and dies without a will is considered not to have control of it. She will not be required to go through court to dispose of it unless the value exceeds the maximum for property held in common.

2. Property acquired by a will. Property which has been left by an individual who has made a will can be distributed as provided in the bequest. An executor or administrator of an estate must first pay the expenses of the last illness and death of the owner before settling the other debts and distributing the property. All claims against the estate of a deceased person must be presented for probate within six months after the first publication of notice to the creditors.

3. Property in the name of joint tenants. The deed in these instances will read "as joint tenants with full right of survivorship," and will sometimes add, and not as "tenants in common." Such property will belong only to the surviving joint tenant or tenants at the death of one individual. Either tenant can sell, mortgage, or dispose of his share of such property, unless it is the homestead.

4. Property held jointly by spouses. When spouses acquire property and the deed is made with both names on it and does not specify that they are joint tenants with full right of survivorship, each has an undivided one-half interest, and at the death of one of them, the surviving spouse still has an undivided one-half. The surviving spouse also has a child's share in the other half of the property unless a will directs otherwise. If the property was the homestead, note the discussion above for the rights of a surviving spouse. If the property was not the homestead, the surviving spouse and other heirs have control as far as each one’s share is concerned.

5. Property owned in common. This is property owned by two or more people, which they

own under the terms of a will, or by deed, and in which each has an undivided interest. Property held in common is subject to sale, mortgage, division, or other disposition. All of the tenants in common, when adults, can join in the sale or each can dispose of his individual interest.

6. Commonly held property - spouse absent. A wife or husband whose spouse is a patient in a mental hospital cannot dispose of or place a debt on their commonly held property unless the court has acted upon the matter and given authority to the remaining spouse to handle the transaction.

   The same is true when a parent deserts or is absent for other reasons and leaves property in common. The other parent cannot dispose of the property without consent of the court when there are minor heirs involved. See below for policy.

7. Life estates - A life estate in property can be created by a deed, division of property, or operation of law. A life estate gives the grantee the right to use, hold title, and receive profits from the land for life unless restricted to occupancy only. The life tenant has an obligation to make reasonable repairs and preserve the land. He cannot sell the minerals or timber but may use timber for his own use. He is responsible for taxes if there is income from the place sufficient to pay them.

   The individual who will come into the property at the death of the holder of the life estate is called a remainderman and can dispose of the property only subject to the life estate unless the life tenant joins in the deed. If all individuals join in the sale, the life tenant should receive his share. If mineral leases are signed after the transfer in return for life estate, the life tenant is entitled only to the interest from the income from sale of the oil or gas.

8. Property acquired by spouse in a previous marriage. In unusual circumstances, an individual who has remarried will have property which came to him from a prior union and which will be denied to the spouse of the current marriage. When this problem arises, the supervisor should handle through the regional director who may contact the Economic Assistance Policy Unit if necessary.

Loss of Land for Taxes

Under the state statute, if taxes are not paid on real property for two successive years, the property matures in the name of the State of Mississippi. It can be reclaimed by the payment of the back taxes. Usually when the property is reclaimed by the payment of taxes, the owner recovers it. However, when a member of the family pays the back taxes on property which was an estate, it is

difficult to determine whether the property remains an estate or is in the sole possession of the relative who bought it for the taxes. The worker should see the land patent in order to determine

in whose name, on what date, and for amount of taxes the property was bought.

CHECKING PROPERTY RECORDS

When the worker must assist the individual in ascertaining the status of his property, the following suggestions will usually be helpful:

1. Check tax records and receipts to get descriptions of property.

2. See current deeds to property. The individual should have a copy of the deed to property he owns outright. The records in the chancery clerk's office can be checked regarding any deed not in the individual's possession.

3. Clear discrepancies between tax receipts and deeds. For example, the tax receipt may show one name and the deed another.

4. Obtain the legal description of the individual's property. This will show the number of acres, assessed value, and the location of the property. A tax receipt or statement will give this information.

5. Examine the sectional or the general index in the chancery clerk's office to find where mortgages are recorded. Get facts as to the amount of the indebtedness, rate of interest, plans for payment, and name of the holder of the mortgage.

6. If the individual has property in another county or state, obtain information about the property through the other county DHS office or through the other state.

7. For information about transfer of property, consult the general or sectional index in the chancery clerk's office. When these records do not give the needed information, the individual will have to direct the worker to the individual with whom he had the transaction, the attorney, or other reliable source.

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PURPOSE

Need is a basic eligibility factor for receipt of assistance benefits, and both the resources and income of recipients must meet the tests required by federal and state laws and regulations. Refer to *Chapter 5, Resources,* regarding Broad-Based Categorical Eligibility.

Income eligibility and the amount of benefits for eligible families are determined by use of a budget as follows:

1. Gross income is tested against the gross standard of need (185% *Requirements*) for the size family involved. If the income is expected to meet and continue to exceed this standard, the family is ineligible.

2. If the income equals or is less than the gross standard, net income is tested against 100% of the standard of need for the size family involved.

Refer to *Chapter 6, Income to be Tested,* for further discussion on income to be included in each test.
Also, the system tests income in special situations to determine:

1. $90 work expense and dependent care expense. See *Chapter 4, Earned Income Disregards.*

2. The amount, if any, of the income of a stepparent, the parents of a minor mother, or the sponsor of an alien, to be considered available to meet the needs of the assistance unit. See *Special Budgeting Procedures* within this chapter.

The worker must test to see whether or not a caretaker relative other than a parent is needy and wishes to be included in the budget.

PROSPECTIVE BUDGETING

Determining Eligibility Prospectively:

Determining eligibility prospectively means that the worker will establish eligibility on all factors, including need, which is reasonably anticipated to exist in the month for which the benefit is paid. When the agency is aware of a change that will make the family ineligible for a future month or

months, the benefits will be terminated beginning with the first month of ineligibility or

as soon as

possible allowing for a ten-day advance notice if required. For example, benefits will be terminated when the agency is aware in June that an increase in RSDI benefits to be received in July will meet the needs of the family for that month and subsequent months.

NOTE: The standard of promptness requirement that benefits be paid for the month in which the 30th day expires means also that the applicant must be prospectively eligible for the benefit during that month. Do not approve an application for a month for which the worker knows that the applicant is not eligible for the benefit. Deny such an application when handled within 30 days. The applicant must reapply and benefits may be approved only for a month in which the applicant will be eligible prospectively.

Determining Benefit Amounts Prospectively:

Prospective income will be used to determine ongoing eligibility for all TANF cases. Prospective budgeting means that the benefits to be authorized for the review period are based on the household's circumstances reasonably anticipated for a period of time. Reasonably anticipated income is based on the income received in the four weeks **prior** to the date of the interview, excluding any income that cannot be reasonably anticipated to continue during the review period. Income that could not be reasonably anticipated to continue would include overtime not usually received, a one-time bonus, etc. If a future change is indicated at the time of application or review, the prospective income will be based on the future change. Future changes must be verified and include changes such as a job change, reduction of hours, a lay-off, etc.

Noncontinuing income will not be considered in determining reasonably anticipated income for a household. However, the noncontinuing/terminated income will be counted in the appropriate budget month.

> **Example:** Household applies on April 15, 2011. A household member who lost his job on April 8th verifies date of termination and wages received on April 4th and 11th (last check received). The two checks received for April will be counted in the April budget along with any other income. The terminated income will not be included in the budget for May and ongoing.

Prospective budgeting also applies for an individual being added to an active case, including transfer of children. See *Chapter 7, Special Procedures,* for proration of benefits and special procedures for accrual rights of additions to active cases.

Once reasonably anticipated income for a household is determined, the income will be coded in the

MAVERICS system. The system will convert the income based on the frequency of the income.

For example, income paid weekly will be converted by 4.33, bi-weekly converted by 2.15, and semi-monthly multiplied by 2. This conversion process averages the anticipated income while allowing for four and five week pay periods for individuals paid weekly as well as months with three pay periods for those individuals paid bi-weekly. The fluctuation of pay periods would not be considered as variable basis of issuance. See *Variable Basis of Issuance in this chapter.*

> **Example:** The household is due for review effective December, 2011. The client comes in for her appointment November 1, 2011 and reports she is still working, being paid weekly on Friday. Income from the prior four weeks is verified. The worker will enter the four October 2011 pay checks on the EAIE screen. MAVERICS will automatically calculate an average monthly earned income amount according to the pay frequency code. If the amount calculated for December can be reasonably anticipated for the remainder of the new review period, no further income changes would be made to EAIE regardless of the number of pay periods per month.

MAVERICS will process earned and unearned income in the same manner. The following income frequency codes will determine how the income is calculated for the budget month.

W- Weekly MAVERICS will add up the total amount for the pay periods entered and divide the total amount by the number of weeks. Take the weekly average amount and multiply by 4.33 to get the average monthly amount (when the pay frequency code is **'W'**, one to five weekly amounts may be entered).

B- Biweekly MAVERICS will add up the total amount for the pay periods entered and divide the total by the number of pay periods to get a bi-weekly average. Take the bi-weekly average amount and multiply by 2.15 to get the monthly amount (when the pay frequency code is **'B'**, only one to three bi-weekly amounts may be entered).

M- Monthly Only one amount may be entered. The amount entered will be calculated as the total monthly income (when the pay frequency code is **'M'**, only one amount may be entered).

S- Semi-monthly Only one or two semi-monthly amounts may be entered when the pay frequency code is **'S'**. When two semi-monthly amounts are

entered, MAVERICS will add the two amounts together to get the total monthly amount.

When only one semi-monthly amount is entered, MAVERICS will multiply the amount by two to get a total monthly amount.

A- Actual MAVERICS will add up the total amount of income entered to get an actual monthly amount. (When the pay frequency code is **>A'**, one to five weekly amounts may be entered). (**NOTE:** The worker must follow the TANF policy when applying actual income for a month for which the income is normally incurred on a weekly, bi-weekly or semi-monthly basis). For example, actual income would be used for the month of application when the household reports receipt of income in the month of application that will be non-continuing.

If income cannot be reasonably anticipated in the review period, it should not be used.

The calculation of self-employment and contractual income will be averaged based on the tax information for self-employment and the contract for contractual income.

Variable Basis of Issuance:

A household's benefits may vary from month to month within the review period to reflect anticipated changes. This is referred to as variable basis of issuance. These cases may have to be worked for multiple months to reflect the anticipated change in the household's situation.

Examples:

$ Household applies in April. The case includes a 17 year old who is working. The 17 year old will be 18 in June. The case must be worked April-June including the 17 year old. A change must be processed for July removing the 18 year old for the remainder of the review period.

$ A school employee who receives hourly wages will receive only two checks in May and will be off work in June and July. She will return to work in August but will only receive one paycheck. The worker will use a variable basis of issuance to determine benefits by anticipating the income to be received in May, August and September and budget likewise. The income will be removed for the months of June and July.

APPLICATIONS

Giving Explanations

During the intake process, the worker will explain the requirements for Simplified Reporting to all applicants and should review the MDHS-EA-300. (See Generic Forms Manual for additional information.)

Gathering Information

Since benefits must be established prospectively based on income and circumstances expected to exist in the review period, the worker will need to explore each of those months separately.

When self-employment is involved, determine the income received in the prior year, adjust for any known changes, and arrive at the monthly income by averaging over the period the income is expected to cover (normally a year).

If unearned income is involved, ask the individual if a change is expected and document accordingly. Also, ask about any expected changes in other eligibility factors.

Adding an Individual to an Active Case

Remember that an individual added to an active case is considered to be an applicant. This includes an individual moving from one assistance unit to another. That individual should be added to the budget and provided benefits according to policy set out in *Chapter 7, Special Procedures.*

REGULAR REDERTMINATION/REVIEWS

General Principles

Regular Redeterminations/Reviews are a federal requirement. TANF cases will receive a 6 or 12 month review period. (See *Chapter 7, The Redetermination Process.)*

SPECIAL REDETERMINATIONS (Changes)

General Principles

Simplified Reporting households are only required to report certain changes during their review

period. When the household reports a change whether it is a required change report or not, the worker has ten (10) days to request information and then ten (10) days to take action on the change. The change should be made for the next possible month.

Change Reporting Requirements for TANF Households:

All TANF households are considered SR (simplified reporting) households. These households are only required to report the following changes:

1. When the household's total gross monthly income, earned and unearned, meets or exceeds 185% of the need standard for the household size at the time of their current review period. Disqualified household members will not be included in the household size when determining if the household income meets or exceeds 185% of the need standard. This change must be reported by the 10th of the month following the month in which the change occurred. If the 10th falls on a holiday or weekend, the client has until the next business day following the holiday or weekend to report the change. The worker should explain this requirement to the client and circle the client's household size and income limit at each interview as part of the MDHS-EA-300 explanation. See *Generic Forms Manual, Chapter 3, TANF Rights and Responsibilities of Applicants and Recipients.*

2. When it becomes clear that a TANF child will be out of the home for more than 30 days. The parent/caretaker must report this within 5 days. See *Chapter 3, Temporary Separations.*

3. When the PI or the entire household leaves the state. This must be reported within 5 days.

If it is discovered a household failed to report a change as required or falsified information at the interview and the household received an over issuance, a claim would be processed on the household.

NOTE: Individuals who are TANF Work Program or Transitional Transportation participants must continue to verify time and attendance to the Case Manager.

Processing Reported Changes:

Income

When a household reports a change in income, the worker must review the information to determine if the case should be closed or a change in benefits is needed. If a household is

expected to continue to meet or exceed the 185% of the need standard for their household size at the time of their current review period, the case should be closed and the appropriate notice(s) sent to the household. The worker should always check for 3D or 6D eligibility prior to closure. See *Earned Income Disregards* in this chapter. If the information **reflects a change** in scheduled hours and/or rate of pay, but does not cause a case closure, a prospective change should be processed based on reasonably anticipated income. When the information **does not reflect a change** in scheduled hours and/or rate of pay, the previously established prospective income should remain in the case and no case change is needed.

NOTE: In either situation it is imperative that the case be documented to explain why a reported change was or was not processed and the appropriate change notice(s) sent to the household (change increase/decrease/no change notice).

Eligibility Worker's Responsibilities:

When a change is reported that requires processing, the following steps will be taken by the worker.

1. Rework the case in MAVERICS. If a reduction is indicated, the worker will send the notice of change **(A701)** and set an alert to allow 10 days to pass before authorizing the reduced benefit. When 10 days have passed and the individual has not requested a hearing based on the circumstances in the case, authorize the reduced benefit.

   If this action takes place after the deadline for the current payroll month, the worker will need to copy details to the next month in MAVERICS and process and authorize that month in addition to the first month of the reduced benefit.

   Example: On September 16 the client reports her 15 year old left the home on September 13th and will be gone more than 30 days. The worker makes the change in MAVERICS for October and authorizes the reduced benefit on September 26th. Because the payroll deadline for October and rollover to November passed on September 23rd, the worker must copy details to November and work and authorize.

   If the individual requests a hearing during the 10-day advance notice period, rework the case and authorize benefits at the prior level to continue until the hearing decision is received **unless** the client requests benefits **not be continued** at the prior level. (See *Chapter 13, Hearings,* for additional information).
2. If the change results in case closure, the worker will send the appropriate notice of

closure which will "freeze" the case for 10 days before the system automatically closes the case. If the individual requests a hearing during this period, rework the case in the system and authorize benefits so that it will continue at the former amount until the hearing is resolved. **NOTE:** This may require the removal of data entered to determine the closure situation.

NOTE: If the case is in FROZEN status at MAVERICS rollover, and the 10 days of the FROZEN period will expire on or prior to the last day of the current calendar month, the system will not process a benefit for the next month.

Processing Changes Known to the Agency:

TANF households are only required to report certain information if a change occurs in their household. However, if known to the agency, the worker must act on the change as appropriate. Known to the agency is defined as "known to the division". For example, if information is known to another division such as Child Support or Family and Children's Services, until the information is reported to the Division of Economic Assistance it is not considered known to the agency. If information is reported by another division, a change should be made as necessary. Information received via IEVS, such as Bendex, SDX, or unemployment benefits will be considered verified upon receipt and a case change processed if needed. All other IEVS should be investigated. An entry is required in processing IEVS to explain the action taken on the case.

Address:

When the household reports a change of address the worker will accept the recipient's statement and change the address as long as the address is within the county. If the address is in another county, the worker will change the address and transfer the case to the new county. If the recipient gives an address outside the state, the worker will discuss intent to reside with the recipient and determine if they are a resident of Mississippi, prior to changing the address. If they are not a resident of Mississippi, they are no longer eligible and the case should be terminated.

Examples:

1. An individual reports they moved from County A to County B on March 4th. The worker will accept the client's statement, change the address in MAVERICS and transfer the case to the other county.

2. An individual reports to the worker on February 16th that they are now living in Alabama. The worker will discuss intent to reside with the client and if

appropriate, close the case for March. **INTERIM REPORTS**

Interim reports will be issued to all TANF households at the midway point of the review period. These reports will require households to provide information on changes in household circumstances during the first half of the review period. Upon return of the interim reports, caseworkers will process the reports and take action to affect case changes as needed. Households with 12 month review periods will be required to return interim reports by the 6th month of the review period. The interim report will be mailed to the household on the 22nd day of the 5th month of the review period. Issuance of interim reports will be documented on the Notice History (NOHS) screen in MAVERICS.

Information to be reported and verified includes changes in income, household size, and any changes in countable resources for households containing certain disqualified members (drug felons or persons sanctioned for Intentional Program Violation - IPV). Any changes in resources for such households must be reported and verified.

Should the household report the addition of a household member to be included in the case, the name, relationship, social security number, date of birth, declaration of citizenship, and date the new person was added to the household must be noted on the form. If all necessary information is provided on the interim report, use of the 900 supplement form to add a person to the case will not be necessary.

Interim Report Registration

Upon receipt of the household's interim report, workers will register the report through the Interim Report Registration (INRR) screen in MAVERICS. This screen will allow workers to register up to sixteen (16) interim reports at a time by entering the date the report was received and the case number. Based on the status of the received interim reports, workers will process the changes or notify the household of further information or verification required.

Interim reports should be scanned to the Interim Report folder in Interwoven/Worksite.

Complete Interim Reports

To ensure uninterrupted benefits, complete interim reports must be returned in time for processing prior to the end of the 6th month. Returned interim reports containing all necessary, verified information will be marked as "complete" on INRR. Based on reported changes, workers will

rework budgets and authorize benefits for the remainder of the review period (7th through the 12th month). Workers will provide notification of the change in benefit amount by sending the household MAVERICS notice **A701, Change in TANF Benefit.**

Should reported changes by the household lead to ineligibility, the worker will send MAVERICS notice **A400 – TANF Closure – Ineligible Interim Case.**

Incomplete Interim Reports

Based on coding entered by the worker on INRR, returned but incomplete interim reports will require a notice informing the household of the specific reason for incompleteness of the report and instructions on what information is required for processing and continuation of benefits. Cases with interim reports coded as incomplete will be placed in "frozen" status, and will not roll to the next (7th) month without a complete interim report being processed and eligibility determined for the remainder of the review period. Incomplete reasons/INRR codes include the following:

- No signature (NS)
- Income Verification Not Received (IV)
- Non-Categorically Eligible Resource Verification Not Received (RV)
- All Questions Not Answered (QA)
- Other (OT)

Use of the **NS**, **IV**, **RV**, and **QA** codes will automatically generate MAVERICS notice **X419, SNAP/TANF Closure – Incomplete Interim Report** form. This notice will inform the household of the specific information required for processing the interim report and determining eligibility for the remainder of the review period. In addition, unsigned interim reports (NS code) must be returned to the household for signature. Use of the **OT** code will require the worker to access the Notice Request (NORE) screen to send notice **A419, TANF Closure – Incomplete Interim Report Form,** to request verification of the reported change.

In the event that the worker initially registers the interim report as complete on INRR but later determines the report to be incomplete, INRR may be accessed again to code the report as incomplete. Depending on the incomplete reason code used as noted above, either MAVERICS will send the incomplete notice or the worker will be required to access NORE to send a request for verification.

Incomplete interim reports containing all necessary information that are returned during the 7th month of the review period will be registered through INRR and processed by the worker, allowing the household's benefits to be reinstated. Benefits authorized during the 7th month will

be prorated based on the date of receipt. For reinstatement of the case, the worker will send MAVERICS notice **A509**, **Reinstatement – Interim Reporting**, to inform the household of eligibility and benefit level for the remainder of the review period.

Non-receipt of Interim Report

Interim reports will be due by the 5th day of the due month. Failure of the household to return the interim report will generate a notice to the household. MAVERICS notice **X003, Notice of No Return of Interim Report**, will inform the household that the case will close if a completed report is not returned by the end of the month. Non-return of the interim report places the case in "frozen" status. The X003 will be mailed to the household on the 10th day of the month in which the interim report is due. The notice will also state that the case may be reinstated during the 7th month of the review period, with benefits being prorated for the month of receipt, provided the interim report is determined to be complete. For reinstatement of the case, the worker will send MAVERICS notice **A509, Reinstatement – Interim Reporting**, to inform the household of eligibility and benefit level for the remainder of the review period.

NEED STANDARD

Basic Requirements

The Department, with approval of the State Legislature, has a minimum standard for basic needs which is based on family size and amount of state and federal funds available. Individual requirements are combined to create a consolidated standard of need for TANF and the refugee programs. Refer to tables in *Chapter 15* for need standards.

NUMBER OF BUDGET GROUPS

When two or more sets of children live in one household, make:

One application if the same individual is responsible for more than one set of children. For example, a grandparent may be responsible for his own children who are technically eligible and for the children of his deceased son or daughter. Also, a stepparent who is responsible for both his/her own children and stepchildren when the spouse is no longer in the home.

1. Separate applications only when there is no legal sibling relationship between the sets of children. For example, separate applications should be made when a TANF mother and her children

share a household with the mother's sister and the sister's TANF children. Also, separate applications should be made when a parent of children by a prior union is married to a parent with children by a previous union and there is no common child.

In determining the number of budget groups when an adopted child(ren) is involved, the worker will use the legal relationship of the individuals to be in the budget(s). For example, a grandmother has legally adopted one of two children born to her daughter. Both the grandmother and the mother who are living in the same house may have a separate TANF case, each case including the legal parent and their legal child. The two blood-related former siblings now have an aunt/uncle-niece/nephew legal relationship and are not required to be in the same budget. The biological mother of the adopted child legally becomes the child's sister.

NOTE: Refer to *Chapter 3, Deprivation,* and note that a biological parent of a child who has been adopted by another family member may be considered a relative within the specified degree of relationship if the child for some reason returns to the home of the biological parent. This does not alleviate the legal responsibility of that adoptive parent. Establishing relationship may be more difficult if the child's original birth certificate is in the sealed adoption record, but many adoptions can be attested to by other family members, neighbors, etc. The county should ask the regional director for assistance when a problem arises in such cases.

When two sets of children live in one household and there are also other children for whom both parents in the home are responsible, make:

1. One application if one of the legal parents is incapacitated or deprivation is based on unemployment (UP). For example, a mother has children by a prior union and a stepfather has children by a prior union. These parents also have a common child or children of their own living in the home, and one of the parents is incapacitated or meets the TANF-UP criteria.

NOTE: Remember the parents of such a child by the current union do not have to be legally married. Obtain an admission of paternity as for any other TANF case. See *Chapter 3, Unemployed Parent (TANF-UP).*

2. Separate applications for each parent and his or her own children when there is no incapacity or no deprivation due to unemployment of either parent, making the child or children of this current union technically ineligible for assistance.

INCOME TO BE TESTED

Individuals and Types

Income to be included in the gross need standard test consists of all gross income of individuals required to be in the assistance unit. This includes the income of any such individual living in the home who is omitted from the budget as a sanctioned *(coded DI)* or disqualified *(coded DF)* individual, and any amount of income deemed from a stepparent, the parents of a minor mother, or individual sponsor of an alien to the budget group except:

1. Income which a federal law prohibits considering in assistance benefits eligibility determinations, income in-kind, and income from another agency or organization that meets certain specifications. Refer to *Chapter 4, Income Totally Disregarded,* for a more detailed listing. Also, see *Chapter 4, Gross Income Tested,* for the exception for income being recouped from a benefit from another agency.

2. Certain business expenses which can be deducted from self-employment income. Refer to *Chapter 4, Computing Gross Monthly Earned Income - From Self-Employment.*

3. As an incentive for two-parent families, when a TANF PI marries on or after October 1, 1999, the income of the newly married spouse is to be disregarded for six consecutive months. See *Marriage Disregard and Stepparent Situations* later in this chapter.

Income to be tested against 100% of the need standard consists of the gross income described above less certain deductions which should be disregarded under specified circumstances. Refer to *Chapter 4, Establishing Earned Income and Support from Absent Parent of TANF Children,* for further discussion on establishing net earned income, and for budgeting child support.

Mississippi does not allocate income of TANF parents to provide for the needs of spouses or dependent children who are not included in the assistance budget. However, Mississippi does consider the needs of spouses and dependent children of caretaker relatives other than a parent and individual sponsors of aliens, as well as dependent children of stepparents and parents of minor

mothers, in testing need or the amount of income available to the assistance unit. Refer *Special Budgeting Procedures* within this chapter.

The income of an unrelated adult living in the home is not considered available to the budget group unless the unrelated adult makes cash contributions to the budget group.

Totally disregard the income and resources of an SSI recipient or of an SSI ineligible spouse who was converted with the SSI recipient and whose income is still included in the SSI test. The system will disregard the income and resources when the participation code is SS.

Length of Budget Period:

TANF cases will receive a 6 or 12 month review period. Cases with special circumstances will receive a one or two month review period. For example, a case is eligible in the month of application and the following month but due to an anticipated change is ineligible in subsequent months. This case would receive a two month review period.

AMOUNT OF BENEFIT

Computing Benefit

The amount of the potential benefit for each TANF and refugee eligible group is controlled by:

1. The budgetary deficit, which is secured by subtracting the net income from the requirements of the budget group.

2. The legal maximum benefit set by the State Legislature.

3. The percentage, or ratable, reduction set by the agency according to state funds available for the TANF program.

4. Federal requirements on minimum benefits, rounding down benefits, and proration of benefits for the month in which the application or reapplication is made.

The benefit will be the percent of the budgetary deficit or the maximum benefit for the number of individuals in the budget, whichever is less. Exceptions: See discussions below regarding minimum benefits, rounding down benefits and proration of benefits for the month of application.

See *Chapter 15, Table II*, for the current legal maximum benefit, percentage reduction, and minimum benefit. Also, see *Table III* for computing the percentage of the budgetary deficit.

Minimum Benefit

The Omnibus Reconciliation Act of 1981 prohibits monthly benefits to individuals or families who qualify for benefits of less than $10 monthly. Individuals and families who are denied benefits

solely because of the minimum benefit limitation are subject to all rights, except benefits, and all responsibilities, including TANF Work Program, child support, and reporting requirements.

With two exceptions, MAVERICS will not issue benefits when the data entered in the system shows that the family is eligible for a monthly benefit of less than $10. However, MAVERICS will issue benefits of less than $10 when recoupment of improper payments reduces a benefit below $10 or corrective payments are entered on the Underpayment Authorization (**UNAU**) screen.

Rounding Down for Benefits

The Tax Equity and Fiscal Responsibility Act of 1982 requires that TANF benefits be rounded down, when not a whole dollar amount, to the next lower whole dollar amount.

In Mississippi, the amount used to establish benefits is the result of multiplying the deficit by the applicable percentage reduction, or the legal maximum benefit, whichever is less. See *Chapter 15, Table I*, for need standards which meet this requirement and *Table III* for benefit amounts which also comply. Note that families having any deficit will be subject to TANF requirements.

Prorating Benefits for Applicants

When a monthly benefit of $10 or more should be authorized for the month in which application was filed:

1. The system will determine the amount of the monthly benefit. *(If the monthly benefit is less than $10, proration is not applicable.)*

2. The system will divide the monthly benefit amount obtained from Table III by the number of days in the month involved to obtain the prorata share for a day, unless an individual is being added to an active case. The system will compute this division to the second digit after the decimal, and disregard any third digit.

   The system will multiply the daily amount gained in Step 2 by the number of days in the calendar month for which the individual(s) has a right to benefits.

   It will count the authorization date or 30th day after application, whichever is earlier, and any other days remaining in the application month. The system will round down any amount less than a dollar. If the result is less than $10, the amount will not be paid. See *Volume X* for discussion of the Authorization of Supervisor (**AUSP**) screen. In

MAVERICS, proration is calculated and displayed only on this screen.

3. The worker will notify the payee of a pro-rata benefit on the system notice (**A101**) which states the amount of the ongoing benefits, if any.

Exception: For the addition of a person to an active case, the rights to benefits accrue on the first day of the system month following application. Therefore, there will be no proration.

MARRIAGE DISREGARD

As an incentive for two-parent families, for the first marriage of the PI occurring on or after October 1, 1999, the Mississippi Department of Human Services will:

- Disregard the income and resources of the new spouse for 6 consecutive months;
  AND
- Offer TWP services to the new spouse if that person is unemployed or underemployed. *See Chapter 8 for further information regarding underemployment*.

Allowing this disregard of income and resources will encourage marriage and two-parent families and may provide the newly formed family an opportunity to establish a home and better surroundings for the children. The following minimum requirements must be met before disregarding the income.

1. The marriage must be the first marriage for the PI which occurs after October 1, 1999;

2. The marriage date must be verified;

3. **An MDHS-EA-348, Request for Income and Resource Information for Stepparent/New Spouse**, must be completed by the recipient; AND,

4. The worker must set a review date for the 6th month of the disregard. This

is a one-time disregard and will be applied for 6 consecutive months. The following conditions must be reviewed before the worker can determine when to start the 6 month period. **The household does not have to pass the gross income test to qualify for this disregard.**

Budgeting When the Marriage is a Reportable Change:

- If the income of the new spouse in combination with the household=s income **exceeds** 185% of the need standard established at the most recent case review, the marriage would be a **reportable change and subject to simplified reporting rules.** This means the marriage should be reported no later than the 10th of the month following the month in which the change (marriage) occurred. **If the client reports timely,** the spouse will be added for the first possible month and the income and resources disregarded for 6 months. **If the client fails to report the marriage timely,** the worker will determine when the 6 month disregard should have started and if any months remain after adding the new spouse to the case. Only the remaining months would be eligible for the income and resource disregard of the new spouse.

Budgeting When Marriage is NOT a Reportable Change:

- If the income of the new spouse in combination with the household=s income **does not** exceed 185% of the need standard established at the most recent case review, the marriage would **not be a reportable change.** This means the client does not have to report the marriage until the next case review. The spouse will be added for the first possible month after the marriage is reported and the income and resources will be disregarded for 6 months.

Once the worker establishes the time frame for the six month disregard, MAVERICS notice, **A706, Marriage Disregard Notice,** will be sent advising the PI that the new spouse will be added to the case but that this will not affect the TANF money payment for the appropriate number of months. The worker will code the new spouse with a relationship code of **ANW@** and participation code of **AOU@** for TANF. *(The new spouse and his income would be added to an open SNAP case using the participation code of AIN@.)* If the new spouse has income, the worker will use the code **ANW@** on the **EAIN** or **UNIN** screen. This will allow the income to be disregarded in TANF but counted in an open SNAP case. If the client fails to report the marriage timely, the worker will determine when the 6 month disregard should have started.

If any months remain after adding the new spouse to the case, only the remaining months would be eligible for the income and resource disregard of the new spouse.

If the client reports the new spouse left the home during the disregard period, the marriage

disregard ends with the next possible month and the recipient loses any future entitlement to this disregard. NOTE: The 60-month counter will be incremented during the disregard period. Individuals receiving the marriage disregard at the time the 60th month pays will not be eligible for any remaining months of their disregard.

When the marriage disregard months end, the TANF case must be reviewed; a new **MDHS-EA-348** must be completed and the disregard of income and resources will be removed. If the addition of the spouse's income to the case at the end of the marriage disregard period causes case closure, the family **does not** qualify for the 3-month disregard. MAVERICS notice **A415, Marriage Disregard Closure Notice,** will be sent advising the recipient of the case closure and the reason for the closure.

Processing the Marriage Disregard When the New Spouse is a Legal Parent:

If the TANF parent marries the legal parent of a least one of the children in the TANF case and would be potentially eligible for the marriage disregard, the worker should first determine whether the family would qualify for TANF based on unemployed parent or incapacity deprivation factors. If the family is not eligible on either of these deprivation factors, the marriage disregard will be applied to the case **without changing the deprivation code in the case until the end of the disregard period.** Child Support Enforcement will be notified via the change reporting procedure for the MAVS-METTS interface system. At the end of the disregard period, the situation must be reviewed again to determine whether the child(ren) remain deprived based on incapacity or unemployed parent criteria.

NOTE: If the new spouse who is a legal parent receives SSI, the disregard will not apply because he/she will not be a part of the TANF Assistance Unit based on the receipt of SSI. The deprivation reason should be changed to **"IC".**

BUDGETING EARNED INCOME/SPECIAL DISREGARDS

Earned Income Disregards are available when a TANF case is subject to closure due to earned income, if otherwise eligible, depending upon the specific rules for the applicable disregard. The first month of TANF ineligibility will be the month income is disregarded for both 6D and 3D, if reported timely. 6D/3D income will only be disregarded in a month in which the client received a money payment.

Common characteristics of the 6D/3D disregards include the following:

- Must be a new job.

- Disregard months must run consecutively
- The disregards will not be received during the same period of TANF assistance.
- Once it has been determined that an individual is eligible for the disregard, he/she must be contacted and given the option of taking the disregard. This is important since the 60-month time limit counter will be incrementing during the disregard period. (For 6D, send **MAVERICS Notice A505-TANF 6-Month Total Earnings Disregard.** For 3D, send **MAVERICS Notice A506-TANF 3-Month Total Earnings Disregard.**)
- Individuals receiving 6D or 3D at the time the 60th month pays, will not be eligible for any remaining months of their disregard. Likewise, individuals who find employment in the 60th month will not be eligible for any of the earned income disregards.
- If the individual loses the employment during the disregard period and reports it to the worker, the total earned income disregard period ends and cannot be resumed unless new employment is found within 7 days.

Six Month Total Earned Income Disregard (6D)

This disregard is available **only once during the 60-month time limit** for new TANF approvals and ongoing cases beginning July 1, 1997 and thereafter and covers all TANF adults who find a job of **at least 35 hours per week at the federal minimum wage or higher** either:

- within 30 days after authorization for initial TANF approvals on or after 07-01-97

OR

- within 30 days after the initial start date of the initial job readiness/job search work activity with the TANF Work Program (TWP) (*This covers new approvals since 07-01-97 and ongoing cases.)*

Once the individual begins the Job Readiness Activity (JRA) and fails to find employment within the 30 days, he/she loses the opportunity to receive to the 6-month total earned income disregard for the remainder of the 60-month time limit. Likewise, an individual who qualifies for the total earned income disregard by finding full-time employment within 30 days of initial authorization for TANF will not be eligible for the disregard again although they may be referred for job readiness at a later date.

If the individual becomes employed, he/she must report the change based on their TWP status and simplified reporting rules. (*See discussion of timely reporting below).* The worker must obtain verification from the employer which includes the date of hire, work start date, employer name and address, pay rate and hours. The individual's **date of hire** must be within the 30-day time frame

although the actual work start date may begin later based on the employer's needs and payroll periods. In no case should this be more than a month after the verified hire date. If supportive services are needed in order for the individual to work full-time, refer the TANF recipient to the Case Manager.

The 6-month total disregard must be consecutive months. There will be no work expense allowed during the 6-month period of total earnings disregard. If the individual loses the employment during the 6-month disregard period and reports it to the worker, the total earned income disregard period ends and cannot be resumed when new employment is found. **Exception:** If the individual finds new full-time employment within 7 days, the disregard may continue

If the individual's work hours are reduced below 35 but not less than 30 per week by the employer after the total disregard period begins and this is verified by the employer as solely the decision of management and not at the request or voluntary choice of the employee, the total disregard may continue through the 6-month period.

If both parents in a TANF-UP family find full-time employment within the allowable time frame, the total earnings disregard applies to all earnings for the 6-month period.

When the total earned income disregard period ends and the TANF case closes because of earned income, the family should be notified of possible transitional services. *(See Chapter 10, TANF Work Program Payment Process.)* **NOTE:** The family cannot receive the 3-month income disregard when the 6-month disregards ends.

NOTE: Once it has been determined that an individual is eligible for the disregard, he/she must be contacted via Notice A505 and given the option of taking the disregard. This is important since the 60-month time limit will be counting during the disregard period.

Mandatory/Exempt Volunteer TWP cases and initial TANF approvals for individuals exempt from TWP have different timely reporting requirements to qualify for the 6-D total earned income disregard under simplified reporting rules.

An individual is **not** eligible to receive the 6-month disregard if they have previously received the 3-month disregard.

Timely Reporting for Mandatory/Exempt Volunteer TWP Cases:

When the TWP participant is hired in a full-time job within thirty (30) days after initial authorization for TANF or after the initial start date of the Job Readiness Activity (JRA) the

employment must be reported by the 10th of the month following the month in which the change (hire date) occurred to be considered a timely report. This reporting requirement applies to **Mandatory TWP** cases without regard to meeting or exceeding 185% of the poverty level for the household size. *(See Chapter 7, Change Reporting.)* **If the client fails to report the change timely, the worker will determine when the 6-month disregard should have started and if any months remain after the employment is reported. Only the remaining months, if any, would be eligible for the disregard.**

EXAMPLES:

1. An individual applies for TANF and is approved on October 23rd and referred to TWP. She goes to the Case Manager on October 29th for orientation and assessment, and starts the Job Readiness Activity (JRA) on November 1st. She must find full-time employment by December 1st to qualify for the 6-month disregard. She starts full-time employment on November 16th. A timely report must be made by December 10th. November income does not cause ineligibility, but December income does cause ineligibility. Therefore, December-May become the total disregard months. The **EAIN** screen would be coded **6D**.

2. Ongoing individual's child becomes 12 months old and she is referred to the Case Manager and starts Job Readiness Activity (JRA) for the first time on October 1. If she has not found full-time employment by October 31st, she has lost the opportunity to receive the total disregard for the remainder of her 60-months.

3. Ongoing recipient was referred to TWP on November 1st. The Case Manager reviews his work-ready status and he begins Job Readiness Activity for the first time on November 12th. He has until December 12th to find full-time employment. The recipient starts full-time employment on November 29th but fails to report this to the Case Manager until January 17th. December's income causes ineligibility. Since the employment was not timely reported, the Case Manager will determine when the disregard should have started, in this case December-May. Since the first possible month the 6D can be applied is February, the client will only receive 4 of the 6 months total disregard.

Timely Reporting for Individuals Exempt from TWP Cases:

Reporting Requirement When Employment is a Reportable Change:

If the income from the new employment **meets or exceeds** 185% of the need standard established at the most recent case review, the employment would be a **reportable change and subject to simplified reporting rules.** This means the new job should be reported

no later than the 10th of the month following the month in which the income exceeded 185%. If the income will cause TANF ineligibility, the first month of the disregard will be the month the income would have made the individual ineligible for TANF benefits. **If the client fails to report the change timely,** the worker will determine when the 6-month disregard should have started and if any months remain after the employment is reported. Only the remaining months, if any, would be eligible for the disregard.

Reporting Requirement When Employment is Not a Reportable Change:

If the income from the new employment **does not meet or exceed** 185% of the need standard established at the most recent case review, the new job would **not be a reportable change.** This means the client does not have to report the employment until the next case review**.**

EXAMPLES:

1. An individual applies for TANF and is approved on April 13th. She is exempt from TWP and has until May 13th to find full-time employment to receive the 6-month disregard. The recipient obtains a job working 35 hours a week on April 24th. The income from the new job **exceeds 185% of the need standard** for the household in May. Since this is a **reportable change,** she must notify the worker no later than **June 10th.** The client reports her new job to the worker on June 2nd and elects to receive the 6-month disregard. After verification is received from the employer, the worker will process the case allowing the total earned income disregard for May-October.

2. An individual is approved for TANF on July 22nd. She is exempt from TWP and has until August 21st to find full-time employment to receive the 6-month disregard. The recipient obtains a job working 20 hours a week on August 1st. The prospective income from the new job **does not exceed 185% of the need standard** for the household. Therefore, it is **not a reportable change** and should be reported at case review.

Three Month Total Earned Income Disregard (3D)

A 3-month total earned income disregard will be available only when the TANF case is subject to closure because of increased earnings and the individual is employed at least **25 hours per week** at federal minimum wage level or higher. The recipient must not have already received the 6-month disregard (unless there has been at least a 12 consecutive month break in receipt of TANF benefits.) The 3-month disregard opportunity may be available more than once during the 60-month TANF maximum when the TANF case has been closed for at least 12 consecutive months before the family reapplies and is approved for TANF again. Once started, the 3-month

disregard will continue regardless of an increase in income. If the individual's work hours individual's work hours are reduced below 25 but not less than 20 per week by the employer after the total disregard period begins and this is verified by the employer as solely the decision of management and not at the request or voluntary choice of the employee, the total disregard may continue through the 3-month period. If the individual loses employment before the 3-month disregard ends and reports it to the worker, the total earned income disregard ends and cannot be resumed when new employment is found. **Exception:** If the individual finds new employment of 25 hours per week within 7 days of losing employment, the disregard may continue. He/she will not be allowed a new 3-month disregard period unless the case closes for at least 12 consecutive months.

NOTE: Once it has been determined that an individual is eligible for the disregard, he/she must be contacted via notice A506 and given the option of taking the disregard. This is important since the 60-month time limit will be counting during the disregard period.

Mandatory TWP cases and Exempt TWP cases have different timely reporting requirements to qualify for the 3-D total earned income disregard under simplified reporting rules.

Timely Reporting for Mandatory/Exempt Volunteer TWP Cases:

When the TWP participant has increased earnings working a minimum of 25 hours a week at federal minimum wage that will result in case closure, the increase must be reported by the 10th of the month following the month in which the increase occurred to be considered a timely report. This reporting requirement applies to Mandatory TWP cases without regard to meeting or exceeding 185% of the need standard for the household size. *(See Chapter 7, Change Reporting.)* **If the client fails to report the change timely, the individual will lose part or all of the 3-month disregard.** Once the worker determines when the disregard should have started, only the remaining months, if any, will be eligible for 3D.

EXAMPLE:

> A mandatory TWP individual turns in her October check stubs to the Case Manager on November 9th to verify her time and attendance for October. The income has increased because her work hours have changed from 3 days per week to 4 days *(32 hours per week).* The increased income will close the case for December. The individual did not receive the 6-month disregard so she is eligible for the 3-month disregard. If the client elects to receive the 3D, the worker uses the TANF total income disregard type code **3D** on **EAIN** for December. The 3-month disregard period will be October-December.

The TANF benefit will be terminated effective January and the individual will be offered Transitional Services.

Timely Reporting for Individuals Exempt from TWP Cases:

Reporting Requirement When Increased Earnings are a Reportable Change:

If the increased earnings **meet or exceed** 185% of the need standard established at the most recent case review, the increase would be a **reportable change and subject to simplified reporting rules**. This means the increased earnings should be reported no later than the 10th of the month following the month in which the increase occurred. **If the client reports timely,** the income will be disregarded for the first possible month and totally disregarded for 3 months. **If the client fails to report timely,** the worker will determine when the 3-month disregard should have started and if any months remain after the change is reported. Only the remaining months, if any, would be eligible for the disregard.

Reporting Requirement When Increased Earnings are NOT a Reportable Change:

If the increased earnings **do not meet or exceed** 185% of the need standard established at the most recent case review, the increase would **not be a reportable change.** This means the client does not have to report the employment until the next case review.

EXAMPLES:

1. Individual obtained new employment February 27th. Income from the new job exceeds the 185% need standard for the household size during the month of March, and the individual reports this change April 6th. The report was made timely, so the 3D will be for March-May.

2. Individual reports to her worker on April 3rd that she started working 4 days a week in February. Her income in February exceeded 185% of the need standard for her household and should have been reported to the worker no later than March 10th. If the client had reported timely, the **3D** would have been allowed for February-April. Since the change was not reported until April, the **3D** would not be allowed. The case will close effective May. The case record must be documented explaining the reason for **3D** ineligibility.

NOTE: Once a person has had either a 3-month (**3D**) or 6-month (**6D**) total earned income disregard, he/she cannot qualify for a subsequent 3-month earned income disregard until he/she

has gone a minimum of **12 consecutive months** without TANF benefits.

BUDGETING NET MONTHLY EARNED INCOME

For families who qualify on the gross income test, the worker will proceed as indicated below.

Earned Income Disregarded

1. Special student disregard: At application or at the time he goes to work, disregard all of the earned income in both the gross and 100% test of each TANF dependent child (but not of a TANF payee) who is (a) a full time student, or (b) a part-time student but not a full-time employee unless attending school at least half-time.

   The exclusion shall continue to apply during temporary interruptions in school attendance due to semester or vacation breaks provided the child's enrollment will resume following the break. If the child's earnings or amount of work performed cannot be differentiated from that of other household members, the total earnings shall be prorated equally among the working members and the child's pro-rata share excluded.

   A child is a student when he is attending a school, college or university or a course of vocational or technical training which is designed to prepare him for gainful employment. Participation in the Job Corps program under the Workforce Investment Act (WIA) meets this definition.

   Consider 130 or more hours a month as full-time employment. Consider a child to be a full-time student when he is enrolled in a full-time curriculum as defined by the school. Consider him to be a part-time student when his schedule is equal to at least one-half of a full-time curriculum offered in that school. A student's status during the prior school session determines whether he is considered a full-time or a part-time student unless he completes or discontinues his schooling.

   Individuals are considered children for purposes of this provision if they are dependent children under age 18 in the TANF case. This does not apply to the minor parent head of household.

2. Disregards for wage earners other than students: Disregard in the order set forth below from the monthly earned income of each individual, other than the students discussed above, whose needs are included in the eligibility determination:

a. Standard deduction of $90 for work expenses.

b. Dependent care deduction which is the actual cost for the care of each dependent child or incapacitated adult living in the same home and included in the assistance budget. Exception: No deduction for any dependent care is allowable when the care giver is the payee's child or stepchild under age 21 or when the payee receives TANF for the care giver or if the dependent care is paid by a third party.
Note: Any amount above what the third party pays can be allowed as a deduction.

3. If child care is paid other than monthly, the amount to be allowed in the budget can be calculated by multiplying by 4.33 if paid weekly and by 2.15 if paid bi-weekly.

NOTE: See *Chapter 9, TANF WORK ACTIVITIES DEFINED*, for the definition for full and part-time employment.

FOR CARETAKER RELATIVE OTHER THAN A PARENT

When a caretaker relative other than the parent wishes to be included in the TANF budget, he must qualify on need as well as on technical factors. Refer to *Chapter 3, Living with Caretaker Relative,* for technical requirements of being a caretaker relative for TANF children and for requirements of being a needy caretaker.

In order to establish financial need, the worker will manually:

a. Test the resources of the relative and his spouse, if any, against the maximum for cash reserve. Refer to *Chapter 5, Maximum Allowable Resources,* for cash reserve maximums. If the resources exceed the allowable maximums, the individual cannot be included in the budget group and income will not be tested. Also refer to Chapter 5 regarding Broad-Based Categorical Eligibility.

2. Prepare a trial budget, using form **MDHS-EA-323, TANF Budget Computation Sheet.** Include the requirements of the relative, his non-SSI spouse, and any non-SSI minor children living with him.

   Enter the income of the relative, his non-SSI spouse, and his children when appropriate. Deduct allowable employment expenses ($90), from earned income in this trial budget. If a surplus results, the relative is not needy and cannot be included in the TANF budget with the child or children. If a deficit results, his requirements can be included, and his MAVERICS participation code should be IN.

3. In MAVERICS, enter all the income of the relative as for any other individual whose participation code is IN, if the relative does not have a spouse or minor children. If the relative has a spouse or minor children, the worker must make the following manual calculations before entering income into MAVERICS for the relative:

   a. Work a second trial budget, using form **MDHS-EA-323.** Include the needs of the spouse and minor children, but not the needs of the caretaker relative. Include the income of the relative, the spouse, and the minor children. Allow work expense deductions if earned income is involved and work the trial budget to determine the amount of a deficit or a surplus.

      If the spouse of a relative receives SSI but the relative was not converted in 1974, include in the second trial budget only the needs of any minor children and the

income of the relative and the minor children. Allow work expense deductions if earned income is involved and work the trial budget to determine the amount of a deficit or a surplus.

If the second trial budget results in a deficit, there will be no income to be considered available to the relative in the TANF case in MAVERICS. Work the case in the system following normal procedures.

If the second trial budget results in a surplus, the worker will:

b. Determine the 100% need standard for the number of individuals coded IN in the MAVERICS case; i.e., the number including the caretaker relative. Divide the need standard by the number of individuals coded IN to determine the prorata share of the need standard.

c. Subtract the amount of the prorata share of the need standard from the surplus income amount of the second trial budget. Any amount up to the prorata share of the need standard must be considered as income in its entirety to the relative in the gross income test in MAVERICS. Regardless of whether the income is earned or unearned, show the amount up to the prorata share of the need standard on the Unearned Income (**UNIN**) screen for the relative with a type code of OA. Work the case in the system as far as the gross income test. Print the **UNIN** screen and the gross income determination (**AFGI**) screen. If the MAVERICS case fails on the gross income test, the relative cannot be included in the budget group, and he must be coded OUT in the TANF program in the system.

If the MAVERICS case is eligible on the gross income test **and** if the relative has **earned** income which was included in the surplus from the second trial budget, the worker must manually apply the disregard to the relative's earned income. The income remaining after the application of the disregard must then be entered in the MAVERICS case. On the **UNIN** screen, the worker should change the amount of the income previously considered in the gross income test to the amount remaining after the application of the disregard, and then work the case in MAVERICS to determine the amount of the benefit for the relative and the assistance children. This step is necessary because when a trial budget has been worked to determine the income to be considered available to the relative, the employment expenses will have been deducted from gross income for the trial budgets, and any disregard should be applied to the surplus from the trial budget.

If the worker simply entered the relative's income as earned income, the system would deduct $90 work expenses the second time.

4. File the test budgets, including the **UNIN** and **AFGI** screen prints, in the TANF case record. Documentation, rather than a trial budget, is permissible when a sight review shows that the income of a single individual is less than his needs.

WHEN RECEIPT OF SSI IS INVOLVED

When a potential TANF or refugee budget member is applying for SSI, refer to *Chapter 7, Special Procedures,* and follow the required procedures.

When one parent is receiving SSI and the other parent is not receiving SSI or not included as a spouse converted to SSI in 1974, include the income of the non-SSI parent in the TANF or refugee budget along with his requirements. Do this even when SSI has deemed all or part of this parent's income to the SSI beneficiary.

For cases including only children receiving SSI, the income and resources of the SSI child(ren) will be totally disregarded. The system will disregard this income and resources when the participation code is SS.

WHEN WORKING PARENT TEMPORARILY OUT OF HOME

When a parent of TANF children has a temporary plan for working away from the home in which the children live, determine whether he/she retains parental control and supervision as discussed in *Chapter 3, Temporary Separations.* If he does and the plan is temporary, the benefit will be continued in the name of this parent as payee. If there is no plan for the payee and children to live together and another relative must assume responsibility for the children, that relative must apply for the children. See *Chapter 3, Emergency Situations,* if necessary.

When an absent working parent does qualify to be included in the budget with his children, the worker will:

1. Code the parent IN for TANF and work the case as if the parent were in the home, entering the parent's income as usual. The system will allow work expenses and the earned income disregard, if applicable.

2. Designate the needy caretaker relative, if any, as the protective payee according to policy set out in *Chapter 3, Choice of Needy Caretaker Relative.*

MINOR MOTHER BUDGETING

Based on minor mother criteria, when an unmarried minor who is living in the home with her parents has a child for whom she requests assistance, follow one of the budget plans below.

- If the minor is included in an existing TANF case, the PI must apply for the addition of this child to that case, with the minor mother's parent or caretaker relative remaining as payee. The minor mother continues to receive benefits as a dependent child as does her own child.

- If the minor is not currently included in an existing TANF case, the parent or caretaker relative must apply for TANF benefits for the minor parent and her child. All TANF regulations and requirements will apply including Assistance Unit Policy.

- If the legal father of the minor mother's child is living in the home and there is no incapacity or unemployed parent requirements do not apply, the child is not deprived. Deem the legal father's income, after earned income expenses, if any, as available to the minor mother and the TANF unit after allowing for his and his child's needs.

- If the minor mother's child is deprived, he is eligible as a child in the TANF unit. Also include the child's legal father's needs and income in the budget computation if he is in the home, and certify him for TANF as the legal parent of a child in the TANF budget

The above procedure also applies if the legal father is a TANF child and living in the home of his parents.

See *Chapter 3, page 3000 and page 3102* for more information regarding Minor Mother Criteria.

STEPPARENT SITUATIONS

A stepparent is an individual who is ceremonially or legally married to the parent of the stepchildren. He is expected to be living in the home with the family except for the usual temporary absences, such as hospitalization or absence for work purposes.

Deeming Procedures

When a non-S SI stepparent lives with the assistance children and is not requesting or receiving TANF benefits for his own children nor his stepchildren, the worker will:

1. Use form **MDHS-EA-348, Request for Income and Resource Information for Stepparent/New Spouse,** to secure a signed statement from the stepparent and/or the spouse regarding the stepparent's income, resources and any deductions to be allowed from the stepparent's income. The payee, not the stepparent, is responsible for supplying necessary information; hence, the stepparent's signature on the form is helpful but not required. Reject or terminate assistance if the payee is unable to secure or assist in securing the necessary information. See Chapter 5, RESOURCES, regarding Broad-Based Categorical Eligibility.

2. Use regular procedures to verify the stepparent's income, resources, claims of income tax dependency, and contributions. Accept the stepparent's or individual's statement regarding individuals he could claim as dependents under Internal Revenue rules unless the worker has a basis for doubting the claim. Handle lump sum payments received by a stepparent.

According to policy set out in *Chapter 5, Resources to be Included,* and *this chapter, Special Budgeting Procedures.*

3. Make a trial budget including the needs and income of the stepparent and any individuals in
the home who are or could be claimed by the stepparent as his dependents for federal income tax purposes. Do not include any sanctioned individual. See below for special procedures when the stepparent's own children have income which exceeds their needs

   EXCEPTION: Do not include the needs of the spouse and assistance children in the trial budget. Include only the stepparent's gross income less the following:

   a. The first $90 from any earned income, with no deduction for any dependent care costs for individuals in the home.

   b. Amounts paid by the stepparent to individuals not living in the home but who are or could be claimed by the stepparent as dependents for federal income tax purposes.

b. Payments by the stepparent of alimony or child support to individuals not living in the home. Count only amounts actually paid even though a court order may be for larger or smaller amounts. *(Note that the stepparent need not claim such individuals as dependents for federal tax purposes.)*

NOTE: When a payee marries after approval of TANF and the marriage disregard does not apply, only the income that the stepparent receives after the marriage date will be considered as the amount from which income is deemed for the month of marriage. For instance, on April 15 a payee marries an individual whose regular weekly income is $150. He/she has received $150 on April 6 and $150 on April 13. The amount of income to be considered as available to the TANF family after April 15 is $300, that is, $150 on April 20 and $150 on April 27. Compute the amount of income to be deemed from this $300 for April, the month of marriage, less the stepparent disregards.

Consider the resources, other than vehicles, accumulated by the stepparent since the marriage as available to the parent of the assistance child(ren) in the determination of eligibility for TANF. The amount available to the parent *(plus the parent's own resources, if any)* is the amount to be entered in the system. See Chapter 5, RESOURCES, regarding Broad-Based Categorical Eligibility.

If the trial budget described in Item 3 results in a surplus, deem this surplus income to the assistance unit, which consists of the stepparent's technically eligible spouse, who is the parent of the assistance children, and the assistance children. Include this amount and any income of the parent and children in the gross income test. If the assistance unit is determined eligible on this financial test, include the deemed amount from the stepparent as well as any income of the parent and children, after deducting the appropriate disregards, in the budget.

MAVERICS will handle this situation when instructions outlined in *Volume X* are followed.

In some cases a stepparent's own children may have enough total income of their own, such as social security benefits from a deceased parent, which exceeds their prorata share *(need standard divided by the number of individuals in the budget, multiplied by the number of stepparent's own children)* of the budgetary requirements of the trial budget group. When this situation occurs, include only the portion of their income required to meet these needs. Do not include any of their surplus income in the amount to be deemed to the stepparent's spouse. See *Volume X*, for instruction for handling this situation in MAVERICS.

This principle also applies to the deeming procedure when a sibling of a minor mother *(who has applied for her own child)* has income which exceeds his own *(the sibling's)* needs in the trial budget with the minor mother's own mother. See *Volume X*, for MAVERICS instructions.

When the stepparent requests assistance for children of his own, follow normal budgeting procedures. Refer above for situations in which separate budgets should be prepared. If the stepparent and his children are ineligible, the application should be denied. At that point, the stepparent should be added to the case of the assistance group in the system. The system will then determine the surplus income of the stepparent to be considered available to the assistance group.

Lump Sum

When lump sum income is received by a stepparent whose income is considered in the eligibility process, add together the stepparent's net monthly income and the net lump sum, as determined by the procedure set out, to establish the stepparent's monthly income for the month in which the lump sum is received.

After following the procedures set out above, the family will be ineligible for this month if the addition of the countable income from the stepparent's lump sum creates a budgetary surplus.

NOTE: If the lump sum was received in a month prior to the CURRENT month of the TANF case in MAVERICS, this calculation must be manually completed for the month in which a lump sum was received and a claim completed reporting any overpayment.

For subsequent months, consider any amount of the remainder of the lump sum which the stepparent may have retained as cash reserve belonging to the stepparent. Do not consider this amount in determining eligibility for the TANF assistance unit except to the extent actually made available to them.

NOTE: See Chapter 5, RESOURCES, regarding Broad-Based Categorical Eligibility.

Remember, however, that one-half of the resources of a stepparent is considered available to his spouse, and the amount of the spouse's portion of his cash reserve may result in ineligibility for the TANF budget group until the cash reserve is within the maximum.

The income and resources of a TANF parent must be considered available to the children for whom assistance is being requested or received. Do not allocate income of the assistance parent to meet the needs of technically ineligible children born to the current union of the parent and stepparent.

If one of the parents is incapacitated, is sentenced to work without pay, or meets the definition of an unemployed parent (UP) and deprivation does exist for the children of the current union, follow budgeting principles set out earlier in this material.

When a stepparent requests assistance for his stepchildren and wishes his needs included in the budget, work the case in MAVERICS as if he were the own parent, including the stepparent as the PI and entering his resources and income. The system will allow the income disregards as for any other individual whose participation code is IN.

When Legal Parent Is Absent

When a stepparent requests assistance for his stepchildren and wishes his needs omitted from the budget, his income must be handled as set out above for stepparents. Note that a stepparent living in the home cannot choose to have his income disregarded even though the legal parent is absent from the home. In this situation, the stepparent's participation code in MAVERICS must be ST.

FOR ALIENS HAVING INDIVIDUAL SPONSORS

Qualified aliens who have a sponsor who signed the affidavit of support prior to December 19, 1997, will have deeming procedures calculated for three years to determine countable income. *(See guidelines set out below.)* If **Form 1-864, INS Affidavit of Support,** was signed on or after December 19, 1997, all income and resources of the sponsor and their spouse will be considered until the alien has worked 40 qualifying quarters of coverage or becomes a naturalized citizen. See Chapter 5, RESOURCES, regarding Broad-Based Categorical Eligibility.

The following steps are necessary in the budgeting procedure to establish the amount of income which shall be deemed from the sponsor to the alien whether or not the income is actually available to the alien:

1. The worker will determine the gross earned and unearned income of the sponsor and the sponsor's spouse.

NOTE: The latter's income will be considered even if the marriage occurred after the affidavit of support was executed.

2. The system will:

a. Deduct from the gross earned income *(wages, salaries or net earnings from self employment),* 20% of the total of such amounts or $175, whichever is less.

b. Deduct the amount that the sponsor and/or his spouse pays to individuals outside the home who are claimed as dependents for Federal income tax purposes.

c. Deduct any amount paid by the sponsor and/or his spouse for child support or alimony to individuals living outside the home.

d. Work a trial budget using the standard requirements for the number of individuals living with the sponsor who are claimed by him and/or his spouse as dependents for Federal income tax purposes.

e. When this budget results in a deficit, the sponsor has no surplus income to deem to the alien.

f. When the budget results in a surplus, add the surplus to the alien's other income, if any, and budget as for any other TANF case. *(The deemed amount will be the amount to add to the gross income for the gross need test, and, if eligible on gross, in the 100% test, as in a stepparent situation.)*

FOR TANF-UP CASE WHEN PWE RECEIVES UB

The parent determined to be the principal wage earner (PWE) in a TANF-UP case must apply for and accept any unemployment compensation benefits (UB) for which he is eligible. UB are not, however, budgeted as unearned income. Rather, the TANF benefit is calculated without using the PWE's UB. The UB is then subtracted from the benefit amount and the deficit, if any, is paid as the benefit.

When the PWE in a TANF-UP case receives UB, the worker will:

1. Test the family's eligibility prospectively using these steps:

   a. Test the family's total income from all sources against the gross (185%) need standard. If ineligibility is apparent at this step, close or deny the case.

   b. If there is a "deficit or equal" amount, work a net (100%) test budget using all the income except the UB received by the PWE and allowing appropriate earned

income deductions and disregards. Include any UB received by the other parent. Calculate a "test benefit amount."

c. Subtract the PWE's UB from the "test benefit amount." If there is a surplus or the amounts are equal, the family is not eligible.

If there is a deficit, proceed.

2. If the family is eligible for a TANF-UP benefit, the family must be notified of the benefit amount by sending the appropriate MAVERICS notice.

a. If the family is eligible for a TANF-UP benefit of a least $10.00, authorize the benefit.

b. If the family is eligible for a TANF-UP benefit of less than $10.00, no benefit will be paid.

FOR DISQUALIFIED INDIVIDUALS

For individuals included in the assistance unit who for any reason must be disqualified, the correct participation code **(DI, DF, or DC)** must be entered on SSDO. MAVS will consider the resources owned by the disqualified individual as available to the assistance unit in their entirety. See Chapter 5, RESOURCES, regarding Broad-Based Categorical Eligibility. An individual disqualified due to fraud or a felony drug conviction will have a participation code of DF and their income will be counted in the budget. A fleeing felon or a parole violator will have a participation code of DI. For individuals coded DI for fleeing felon, parole violation, enumeration, school attendance (13-17 year olds), or untimely reporting of a TANF child leaving the home, their prorata share of income will be used in the budget. An individual disqualified due to non-cooperation with child support enforcement will have a participation code of DC and the case would be closed.

EXAMPLE: An assistance unit of three, with the PI disqualified (DI), will use two-thirds of the income in the budget.

TANF BENEFIT WHEN CHILD SUPPORT PAYMENTS INVOLVED

Testing Eligibility and Budgeting Child Support When Payee is NOT Included

When testing eligibility or budgeting child support income in an active case, the income must be counted in the case even if the payee is not included in the budget. For cases in which the payee is disqualified, receives SSI, or is a non-needy caretaker the child support income should be considered as belonging to the child and coded appropriately in MAVS.

Testing Eligibility of Applicants Who Receive Support

When it is determined that the TANF family has support from an absent parent, this income paid to the assistance unit will be included in the TANF test budget to determine whether or not this income along with other income of the group leaves a budgetary deficit. This is without regard to whether the support is court ordered or voluntary. To make these tests:

1. Arrive at the monthly support that the absent parent will provide, using the best possible estimate as documented by records and individual's statements.

2. Consider in the TANF test budget for the group the amount of anticipated support (as income) the family expects to receive.

    a. When either the gross or the 100% test results in a surplus, the group is not eligible.

    b. When a deficit results in the 100% test, the budget group is eligible on the income factor. The benefit will be computed by considering in the TANF budget all appropriate income including any child support received by the applicant prior to Child support conversion. The payee will be put on notice of the requirement that the support payments must be turned in to the Child Support office beginning with the first payment received after notification of TANF approval. Failure of the custodial parent to redirect child support to the IV-D office after approval for TANF benefits will cause termination of the case.

Special Procedures for Handling Approvals Involving Support Payments

It is necessary to have specified procedures for determining the amount of initial TANF benefits in giving consideration to the income from the support and the effective date on which the case may be set up as a IV-D case. This is because of the fact that support payments paid during the month

in which the application is being approved may have already been paid directly to the individual before a decision is reached on the application.

1. Budget child support received as countable income in the TANF budget. This income will be entered on **UNIN** using the **CR** income type code. The Child Support income should be counted in the TANF budget until the case is converted to IV-D.

2. When the applicant is found eligible in the current month for benefits in that month set up the case as a IV-D case effective the first day of the following month. For example, if the applicant is eligible for August TANF benefits, in most cases the caretaker relative will have already received the child support payment for August. Authorize the TANF benefit for August based on the same income used in the 100% test budget which includes the countable support obligation. August will be the initial benefit month. Set up the case as a IV-D collection case for September. The income code on UNIN should be changed from CR to CA, which the system will use only to test the case for eligibility.

3. The referral to Child Support will be made with the approval of the TANF case with September as the first IV-D month. Any collections made in September will be recovered by IV-D and only the excess will be paid to the recipient. That excess, if any, paid to the recipient will not be used in the TANF budget unless it can be reasonably anticipated to continue during the review period. The part of the income received by the client should be coded as CR and the balance of the collection amount as CA in order for the system to properly test eligibility.

Budgeting Support in Active Cases

The Child Support collections made on behalf of a TANF family with an active case will be used to test eligibility. If eligible, only the excess current paid directly to the family will be entered in the budget as income. However, when an individual in an active TANF case does not cooperate, or changes occur in an active case, process as indicated below.

1. When the payee refuses to cooperate in turning the support payments over to the agency and continues to keep the payments, the TANF case will be closed. The TANF Federal and State laws strengthen Child Support Enforcement requirements, effective July 1, 1997. TANF assistance will be terminated for the family who fails without good cause to cooperate with Child Support Enforcement activities to establish paternity and to obtain support. If the TANF case is closed because of failure without good cause to cooperate with the Division of Child Support Enforcement, the family will not be approved for TANF

2. again until child support compliance is verified, the family becomes exempt for good cause or the family is no longer subject to the child support requirement that caused the sanction.

3. When a change occurs in a group receiving support, the worker will initiate action in the system to:

   a. Compute a trial budget and compare the current countable child support and other income received in the budget month with the gross and 100% need standards for that budget month. If a deficit results in the 100% budget, no further steps are necessary. But, if there is no deficit in the 100% budget and the needs are met, the TANF benefit should be terminated for the next possible month.

   a. Follow normal procedures for sending advance notices and authorizing closures or changes on cases that will remain active.

   And, in addition, the worker must:

   b. Notify county Child Support staff of the effective date of any closures and of any changes on cases remaining active. See *Chapter 3, Notifications,* for changes which should be reported.

NOTE: The MAVS/METSS interface will handle this notification

Communications

MAVERICS will automatically refer reportable absent parents to METSS. After absent parent information is referred to METSS any changes made to the TANF case in MAVERICS will be passed to METSS. When adding a new AP to the case it must be referred to METSS.

When IV-D staff wishes to report a change in IV-A owned data, an alert will be generated and the IV-A worker must accept or reject the change in MAVS. This is handled on the REPC screen in MAVERICS. When the IV-A worker reports a change in IV-D data, the child support worker will receive an alert and will either accept or reject the change.

All collections paid by absent parents will be entered in METSS by child support staff. The IV-D collections will appear on the **CSCH** screen in MAVS.

The METSS system also provides information about child support payments made to IV-A and food stamp clients.

Child Support Recovery of IV-A Payments

The Division of Child Support Enforcement was required by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 to apply the support collection to the recovery of any TANF payments made to the family, including the TANF money payment, TWP transportation allowances and TWP participation stipends. Any support money remaining after the TANF benefit amount has been recovered will be paid directly to the family by the Division of Child Support Enforcement.

In addition to the ongoing monthly comparison of TANF payments with the current collection amount (up to the obligation) to determine the excess current payment amount, any unrecovered assistance payments (TANF and/or AFDC) from prior benefit months will also be recovered. Any remaining difference will be paid to the family as "excess current".

TANF recovery can also occur for unrecovered assistance payments after the TANF case closes. After TANF closure, the unrecovered TANF/AFDC amounts can be recovered from any child support collections in excess of current obligation amount.

Handling Cases with IV-A Overpayments When Child Support is Involved

When it is discovered a client received a IV-A overpayment, the worker will request from the IV-D worker the amount of IV-A recovery for the month(s) of the overpayment. The IV-D worker can access this information via the PFIN screen in METSS. The IV-A worker will compare the amount of IV-A recovery to the amount for which the client was eligible for each month of overpayment. If the IV-A recovery amount is equal to or less than the amount for which the client was eligible, a TANF claim will be completed in MNCLMS for the total amount of the overpayment. If the IV-A recovery amount exceeds the amount to which the client was eligible, the excess amount will be deducted from the overpayment amount. This is accomplished by contacting the Claims Unit after the claim is prepared. A staff member of the Claims Unit will adjust the amount of the claim to reflect the IV-A recovery amount. The narrative section of the claim should be documented as to the amount of IV-A recovery verified by IV-D.

Example: A client received $170 TANF for March - August. At reevaluation, she reports she went to work April 1 and her earnings exceeded 185% of the need standard. She was not eligible for any of the earned income disregards, due to having previously received them. This change should have been reported by May 10th. Her TANF case would have been closed for June 1. There are overpayments of $170 for the months of June, July and August. During the course of preparing the claim, the IV-A worker contacts the IV-D worker who verifies IV-A recovery of $0 for June, $100 for July, and $120 for August. The amount the client was actually eligible to receive was $0, therefore the entire $170 is reported as an overpayment for the month of June. Since $100 of the $170 the client received in July was recovered by a child support collection, the actual overpayment to report is $70 for July. For the month of August the overpayment amount to report is $50, $120 of the $170 the client received was recovered. The total amount of the overpayment is $290 for June - August.

DEFINITION

A striker is considered to be anyone involved in a strike or concerted stoppage of work by employees *(including a stoppage by reason of the expiration of a collective-bargaining agreement)* and any concerted slowdown or other concerted interruption of operations by employees.

EXCEPTIONS TO STRIKER PROVISIONS

Striker provisions should not be applied in the following instances:

1. Employees who go on strike and would have been exempt from the TANF Work Program the day prior to the strike.

   EXAMPLE: *An individual goes on strike on January 5th. As of January 4th, (the day prior to the strike) she would have been exempt from TWP due to a child under age 1. The individual is still on strike in March and applies for TANF on March 16th. The striker provisions will not be applied because of her TWP status the day prior to the strike.*

2. Striking employees who are notified by their employer that permanent replacements have been hired and no jobs are available for them.

NOTE: Employees of the Federal Government or of a State who engage in a strike against the government or State and are dismissed from their job because of participation in the strike are no longer considered strikers. However, these individuals are considered to have voluntarily quit such job without good cause.

3. Employees, who through no fault of their own, may seemingly be connected with a strike but are nevertheless considered non-strikers. These include but may not be limited to:

   a. Employees whose workplace is closed by an employer in order to resist demands of employees (i.e., a lockout);

   b. Employees unable to work as a result of striking employees (i.e., truck drivers who are not working because striking newspaper pressmen prevent newspapers from being printed); and

c. Employees who are not part of the bargaining unit on strike (i.e., a *non-labor union member*) who does not want to cross a picket line due to fear of personal injury or death.

DETERMINING PRE-STRIKE ELIGIBILITY

General

Households with striking members will not be eligible to participate in the TANF Program unless the household can show that immediately prior to the strike, it would have been eligible or was receiving TANF on the day prior to the strike. The first step in determining eligibility is PRE-STRIKE eligibility. Therefore, all eligibility factors must have been met prior to the date

of the strike.

Assistance Unit

In making this determination, consider all individuals who would have been in the assistance unit

on the day prior to the strike, even if one of those individuals has moved or died.

Income and Deductions

Income and deductions for all who would have been in the assistance unit on the day prior to the strike must be calculated for the month in which the day prior to the strike falls.

EXAMPLE: The strike begins on June 25; the day prior to the strike is June 24; therefore, PRE-STRIKE eligibility is determined for June.

EXAMPLE: The strike begins on June 1, the day prior to the strike is May 31, and therefore PRE-STRIKE eligibility is determined for May

Resources

Resources considered are those that were available to all assistance unit household members on the day prior to the strike.

EXAMPLE: A household member goes on strike June 6 and the household applies for TANF on June 7 and reports a savings account of $1800. The worker asks the household if the balance in the savings account was $1800 as of June 5, the day prior to the strike. The household states that $600 was withdrawn from the account on June 6 and the balance in the account on the day prior to the strike was $2400. Therefore, the household is denied because it was ineligible based on resources the day prior to the strike.

If the household does not meet the PRE-STRIKE eligibility test, the worker should either deny the application or terminate benefits.

Ongoing policy should be applied to those households which meet the PRE-STRIKE eligibility, with one exception; the treatment of the striker's income. The striking member's income before The strike should be compared to the striking member's current income. The higher of the two should be added to the current income of the nonstriking members during the month of application.

EXAMPLE: The striking member's monthly income before the strike was $800 wages and $25 from an investment (total $825 monthly). The striker's current monthly income is $25 from the investment and $200 from part-time employment (total $225 monthly). The higher of the two ($825) should be added to the income of the nonstriking household members to determine current eligibility and allotment.

CURRENT ELIGIBILITY

Ongoing policy should be applied to those households which meet the PRE-STRIKE eligibility, with one exception; the treatment of the striker’s income. The striking member’s income before the strike should be compared to the striking member’s current income. The higher of the two should be added to the current income of the nonstriking members during the month of application.

EXAMPLE: The striking member’s monthly income before the strike was $800 wages and $25 from an investment (total $825 monthly). The striker’s current monthly income is $25 from the investment and $200 from part-time employment (total $225 monthly). The higher of the two ($825) should be added to the income of the nonstriking household members to determine current eligibility and allotment.

TANF WORK PROGRAM

Strikers are subject to the TANF work program requirements, unless exempt. The striker will not be referred to work at the strike site.

REEVALUATION

Households with members on strike will be assigned reevaluation periods in accordance with normal procedures. See *Chapter 7, The Redetermination Process*.

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Revised 05-01-15

DEFINITIONS

Inquiry

An inquiry is a request for information regarding eligibility requirements for assistance and develops into an application only when the individual signs the agency application form and discusses his own situation.

Referral

A referral is a request for information, service, or assistance on behalf of an individual or family. It may be made by an agency, an institution, or another individual and is considered an inquiry until an application is formalized.

Applicant

An applicant is an individual who has made application for economic assistance to the county office of the Department of Human Services and whose application has not been disposed of by appropriate county action. In TANF cases, the parent or other relative with whom the child will live must be the applicant on the child's behalf. For cases in which there are two legal parents in the home, only the parent who is the grantee relative and payee is required to give their name, address and sign the application; however, because the citizenship status declaration is now a part of the application form, **MDHS-EA-900**, the second legal parent is required to sign also.

Application

An application for TANF is made by an individual providing their name, address, and signature on the agency application form, **MDHS-EA-900**. The application may be the first formal request made for the special type of assistance or may be a subsequent request, which is referred to as a reapplication.

Effective Date of Application

The effective date of an application will be the day that the agency receives Part I of the application form, **MDHS-EA-900**, with the applicants' name, address, and signature.

Application Process

The application process consists of all activities from the time that an application is accepted until benefits are authorized and/or notice of denial is mailed to the applicant. At any point in the process, the applicant may decide to withdraw his request.

HANDLING INQUIRIES AND REFERRALS

From Individuals in State

When someone seeks information about receipt of assistance payments, the worker should:

1. Determine whether the inquiry or referral is a potential application by offering to formalize an application.

2. Supply the information, document the conversation, and send a copy to the correspondence file when an application is not desired or the individual making a referral states that the potential applicant is unaware of the referral. Explain that follow-up will be made only when the county department is made aware that the individual himself recognizes his need and desires an application.

3. Take an application if the request is made to county staff or out stationed worker during official office hours.

4. Mail pages one and two (Part I) of **MDHS-EA-900, MDHS Application for Assistance**, informational pamphlet(s), and form **MDHS-EA-300, Rights of Applicants and Recipients,** to a potential applicant living in the county who calls or writes the county office requesting assistance or who has been referred by state office or by someone who states that the potential applicant is aware of the request.

From Individuals Out-of-State

When a request for assistance is made by an individual living or visiting out-of-state, write the individual making the inquiry or referral informing him that an application cannot be formalized until he is living in the state or, for TANF purposes, established intent to live in the state. Instruct him to contact the local county Economic Assistance Office when he arrives in the state if he wishes to apply. Tell him also that he will need to supply documentation from the agency in the other state verifying that he did not receive or will not continue to receive assistance from the state from which he is moving. This information will also provide the contact point to verify countable TANF benefit months from the other state.

FORMALIZING AN APPLICATION

Right to Apply

Under State law, applications must be formalized in the county in which the individual resides. Under both federal and state law, an individual must be given the opportunity to apply without delay and to

have his eligibility determined in a timely manner (within the standard of promptness). State law has set the timeliness standard as approval or denial of the application within 30 days.

Places to Apply

In County Office - When an individual visits a county office during official working hours for the purpose of applying, he has the right to formalize an application on that same day. If an eligibility/intake worker is unavailable for an interview that day, a clerical worker will:

1. Explain that an interview with an eligibility worker will be required and the reason for the delay in the interview.

2. Briefly explain the applicant's rights and responsibilities and give him Part I of **MDHS-EA-900**, the **MDHS-EA-300 Rights of Applicants and Recipients,** and appropriate informational pamphlets.

3. If the applicant completes Page 1 of **MDHS-EA-900** in the office, review the form to be sure it contains proper identifying information and the applicant's signature. Encourage the applicant to complete Page 2 at the time of application. Pages 3 and 4 can be filled out at the time of application or returned at the time of interview.

4. Make an appointment within 10 days for the applicant to see an eligibility worker. Due to certain hardship circumstances, a telephone interview with the applicant may be granted. See provisions under “Initial Interview” later in this chapter.

5. Date stamp the application and register it for the date received to set the 30-day processing period.

In Other Places - Eligibility staff of the county department or an out stationed worker on official duty are authorized to accept applications outside the county office. A request may come while a worker is interviewing in a branch office or in the home of an individual. In some instances, the worker will go to the home, hospital, or another place to take an application for an individual who is incapacitated and unable to visit the county office. Upon returning to the office, the worker will follow regular procedures for registering and handling of the application.

Requests made to a worker on the street or while the worker is not on duty or made in some other informal manner should be handled by letting the individual know the address and office hours of the county department and the individual's right to apply there.

INITIAL INTERVIEW

Requirement

At least one interview with the legal parent or the grantee relative must be held during the TANF application process. A second parent may be interviewed when there are two parents in the home, but an interview with the second parent is not mandatory. However, the second parent must sign the application form and complete the **MDHS-EA-312,** Personal Responsibility Contract. Normally the interview will be held in the county office but may be held in the home or another place based on circumstances.

On a case by case basis, a telephone interview may be granted in situations where the caretaker relative is unable to come to the office due to hardships such as, but not limited to, illness, care of a household member, hardships due to residency in a rural area, prolonged severe weather, or work or training hours which prevent the caretaker relative from participating in an in-office interview. Waiver of the face-to-face interview does not exempt the household from providing all necessary verification requirements as outlined later in this chapter.

The initial interview appointment will be scheduled no later than 10 days from the application date. The applicant must be told that it will be his responsibility to request an appointment to be rescheduled when he is unable to keep the initial appointment. If the applicant fails to keep the interview appointment and does not contact the office to arrange another interview, the application will be denied.

Assistance in Providing Information

The applicant is the primary source of information about the eligibility of himself or the budget group; however, all eligibility factors must be verified and other sources may be contacted. The applicant has the right to the assistance, if he desires, of an individual of his choice in the various aspects of the application process. Also, the county eligibility worker must make a reasonable effort to assist an applicant who is incapable of understanding or following through on his role of establishing eligibility by :

1. Determining whether there is some family member or close friend who can understand the steps normally required of the applicant and who will take over for him. If so, the worker will explain to this individual what is needed and the time limits within which it must be furnished.

2. Take steps for the applicant when there is no one else who can assist him.

The decision as to the worker's responsibility for follow-up depends upon the individual circumstances of the applicant and the type of follow-up required.

Explanations Required

The worker must clearly explain to the applicant:

1. The eligibility requirements for the type of assistance involved. Informational pamphlets must be provided to the applicant

2. That he may choose the program under which he will apply. The worker must clearly explain the advantages of all benefits/programs to the applicant.

3. The agency's standard of promptness in acting on applications and the date that a notice of denial or benefit availability can be expected. Emphasize that the more promptly the individual responds with all requested information, the sooner the application can be completed. The Mississippi Debit MasterCard Program Recipient Information Sheet, MDHS-EA-303A, should be given to the applicant.

4. An individual's right to a fair hearing and the procedure for requesting a hearing. The MDHS-EA-304, Hearings Pamphlet, should be given to the individual.

5. The method of establishing eligibility including:

   a. The use of documentary and other records for verifying factual data. Contacts may be made with relatives, other agencies, employers and others as necessary. Explain the need for a birth certificate or other documents to establish date of birth and relationship to the caretaker relative and provision of the Social Security number in order to comply with the enumeration requirement.

   b. The use of Social Security account number to match with the Income Eligibility Verification System (IEVS) to obtain information from the Social Security Administration, Employment Security Commission, and Internal Revenue Service.

   c. The types of information the agency will have to obtain from him or others for determining initial or continuing eligibility, including income and resources. Information not verified during the interview should be coded in MAVERICS as pending by using “PE” and a date in the verification field. The date should be set for 10 days from the date of the request for information. The worker should send MAVERICS Notice **A301**, or the manual form **MDHS-EA-942**, **Request for Information** (if MAVERICS is not operating)**,** to remind the applicant of verification he is expected to submit. If the manual request for information is used, be sure to document in MAVERICS with the **A000** notice to history.

d. The purpose of form **MDHS-EA-900, MDHS Application for Assistance** and the fact that there are penalties for misrepresentation of facts.

e. The responsibility for reporting promptly certain changes in circumstances that affect eligibility. Give examples of changes to be reported (*PI moving out of state and 5-day reporting criteria*). See Chapter 7, Changes.

f. The necessity for regular redeterminations and the possibility of special reviews by eligibility staff and a full review by Quality Assurance staff.

6. That TANF benefits are limited and the family may wish to request closure of the TANF case when the benefit is not a necessity in order to prevent using up months countable toward the 60-month lifetime maximum.

7 That each applicant for or recipient of TANF benefits must sign a MDHS-EA-312, Personal Responsibility Contract acknowledging his/her responsibilities to the State.

8. That TANF benefits will be denied or terminated for any family who fails to assign rights of child support to the State (MDHS-EA-941) or who fails without good cause to cooperate with activities required to establish paternity or obtain child support.

9. That the TANF benefit will be limited to children existing at the time the family is first approved for assistance or born within the first 10 months of benefits, unless the child meets an exemption.

10. That all dependent children ages 6 through 17 years must attend school satisfactorily to avoid sanctions on the TANF grant and food stamp benefit amount, unless good cause is met.

11. That all TANF dependent children must be immunized as recommended by the Department of Health to avoid case sanctions, unless there is good cause.

12. The method of maintaining benefits, reporting problems with availability of benefits and receipt of debit cards.

13. The facts that the use of the benefit is generally unrestricted and that the agency complies with the Civil Rights Act of 1964. See Chapter 7, Payment Process, for restrictions on benefit use.

14. Services for which the individual or family may be eligible, such as family planning, SNAP, TWP, WIC, Vocational Rehabilitation, and child support. Explain the applicant's responsibilities for such services. Give him/her all appropriate forms, pamphlets and referrals, including but not limited to:

Form **MDHS-EA-941, Notice of Child Support Enforcement,** and the child support payments for a TANF child must be designated to come through IV-D and that cooperation with Child Support

staff is a requirement for all programs and child support payments for a TANF child must be designated to come through IV-D. This form must be completed by the recipient at application, reapplication, adding a child to the case, or after an alleged father has been excluded through genetic testing and the recipient must name another alleged father.

15. TANF Work Program requirements as outlined in Chapter 3. This explanation should include TANF Work exemptions including the requirement for non-exempt TANF recipients to complete the MDHS-EA-336, TANF Work Program Substance Abuse Treatment Agreement.

16. That each adult in the assistance unit must submit to a screening questionnaire to determine the likelihood of a substance abuse problem.

Gathering and Documenting Information

During the initial interview, the worker should gather and document as much information as possible regarding the eligibility of the assistance unit and should take steps to secure material that is required but unavailable at that time. Forms to be used for such purpose include:

- Application form, **MDHS-EA-900.**
- Forms which substantiate or further verify information recorded on IIDO, such as information regarding children, child support, resources, etc.
- Referral forms as indicated
- Other forms as needed in specific cases.
- Forms requesting additional information, such as wage verification or resources.
- Only file forms which policy states must be filed in the case record or documents/forms signed by the applicant. Document on FOES in MAVERICS that the client was given a copy of required forms such as the MDHS-EA-300.

Refer to the Generic Forms Manual for instructions on preparing assistance payments forms.

Withdrawal of the Application

After the applicant has signed the appropriate forms and discussed his situation or at any point during the application interview, the worker may learn that eligibility requirements will not be met. If so, the worker will explain this to the applicant and give him an opportunity to decide whether he wants to go on with the application or withdraw his request. When it is the applicant's decision to withdraw the TANF request, it will not be necessary to complete the eligibility

determination forms unless a SNAP application is also involved. When the worker is involved in a joint interview for both TANF and SNAP purposes, the worker must continue to gather all information necessary to determine SNAP eligibility. In these instances, refer to Volume V, and follow the necessary procedures for processing SNAP applications.

On all withdrawn assistance applications, the worker must record in the case record the information already obtained and the reason for the ineligibility. Whenever possible, a written withdrawal signed and dated by the applicant and stating the reason for the request should be obtained.

Deny the assistance application as a voluntary request for withdrawal and send the MAVERICS Notice, **A201**.

NOTE: If there is a reason for ineligibility (such as income or resources) cases should be denied based on that reason once verification is received. In these situations, there would be no need for the client to withdraw their application.

INVESTIGATING ELIGIBILITY

Home Visit

State law permits, but does not require, that a home visit be made on TANF applications and redeterminations. Whether or not home visits are made shall be at the discretion of the county director. Home visits are permissible at any time.

The home visit for TANF may serve several purposes, such as:

1. Allowing the worker to compare the standard of living evidenced by the home and its surroundings, furnishings, etc., with the applicant's statement of income and resources.

2. Gathering social information regarding the incapacity of a parent, problems for which referrals are appropriate, etc.

3. Gathering information that the applicant failed to provide, either willfully or unintentionally, or was unable to give in the initial interview. For example, failure to find the payee at home may result in a finding of employment, or the visit may allow for securing verification that the applicant has obtained employment since the office visit.

4. Observing whether or not the children live in the home with the grantee relative. The worker does not have to see the children but must ascertain, either through discussion, observation, or other sources, that the children are under the control and supervision of the grantee relative.

If a home visit is to be made, the worker can usually schedule it while talking with the individual. An appointment is preferable but is not required.

Verifications

All eligibility factors must be verified prior to approval of an application.

To Be Secured by the Applicant

Individuals who are capable of providing or obtaining verifications are expected to assist in the eligibility process by obtaining verifications available to them. When possible, documents which the individual has in his possession should be used. For example, the applicant may have birth certificates of children, an award letter from the Social Security Administration, check stubs from an employer, etc. In other instances, the applicant may be able and willing to obtain verifications which are not in his possession, such as a statement from his employer or the individual who provides child care.

Explain the verification requirements to the applicant during the interview and provide written documentation by use of MAVERICS Notice **A301, TANF Pending Application Notice**, or form **MDHS-EA-942, Request for Information** (if MAVERICS is not operating). If the manual request for information is used, be sure to document in MAVERICS with the A000 to history. Remind him that the application cannot be approved without all required verification. Allow the applicant 10 days to submit verifications he has agreed to provide.

When a capable applicant refuses to supply, obtain, or authorize the worker to obtain necessary information, eligibility cannot be established. The worker should explain again why the information is needed and that the applicant has one of three choices:

1. The applicant can give the needed facts or refer the worker to the source of the essential information and have his eligibility determined;

2. He may withdraw his request for assistance; or

3. He will be denied assistance because eligibility cannot be determined. Denial is appropriate if the required information is not received by the 30th day and eligibility cannot be established.

To Be Secured by the Worker

If the applicant cannot provide sufficient evidence as needed, the worker should offer to help in obtaining data and securing verifications. This is especially true for individuals who are incapable of providing information due to physical or mental limitations. Refer to instructions regarding the worker's responsibility for assisting such people.

In the initial interview, the worker should explain to the individual the specific sources to be consulted, if known at the time, and also tell the applicant that other sources will be consulted as necessary. The application form signed by an applicant provides consent that allows the Department to verify all factors of eligibility and to share information with the school district. Individual consent is unnecessary to contact an outside source, unless the outside source, such as a bank, requires written permission from the applicant.

The worker will use outside references only when necessary to gather information required to establish eligibility and will protect the confidentiality of the individual or assistance unit in performing this task.

Specific methods for documenting eligibility factors are contained in this volume in the discussions on the various eligibility factors. Refer to the Generic Forms Manual for forms to be used for securing verifications.

Evaluating Information

The worker must:

1. Review previous, as well as current, information for completeness and accuracy. Previous case records on the applicant or family may contain clues to information not included on current forms, such as property owned, bank accounts, etc. The worker should find out what has happened to assets reported previously, but not currently, by asking the applicant for an explanation and by checking records, when necessary.

2. Resolve promptly any conflicting information and make a decision regarding the information to be considered valid.

3. Be alert to inconsistencies in information and use the legal concept of the "prudent" or "reasonable" man. This concept refers to the element of judgment that must be exercised by all individuals in making choices, determining goals, evaluating statements by others, and the like. When the worker finds some of the applicant's statements questionable, the worker must evaluate the statements and ask the applicant to make a reasonable explanation of the contradictions and/or assist in seeking further information.

   Some examples of the use of this concept in questionable information are:

   a. When an applicant reports no bank account but pays bills by checks or has a joint bank account.

b. When an individual reports a sudden loss of resources previously owned or has disposed of a resource previously in his possession, the worker should seek a reasonable explanation for such reported losses or transfers. Refer to *Chapter 5,*

Transfer of Resources, for instructions regarding transfers in order to qualify. Use facts, reason, and judgment in determining the veracity of statements about losses.

c. When an individual states that he has no income or resources and that his shelter, utility, food, etc., payments are current, the worker should seek further information or a logical and reasonable explanation. The worker will ask the individual how he has managed to pay his expenses when he has no income or resources. There may be a logical and reasonable explanation, such as a recent loss of income or credit or cash reserve being depleted recently. When the individual can offer and substantiate no logical and reasonable explanation as to how living expenses have been met and offers vague explanations, such as "I just get by," eligibility cannot be determined.

Document the case record and deny the application in such a situation.

INTERFACE INQUIRIES

PUBLIC ASSISTANCE REPORTING INFORMATION SYSTEM (PARIS) DATA

The PARIS project is a data matching system in which Mississippi's caseload data is matched quarterly against that of other states participating in the project and selected federal data. The PARIS match serves as an indicator of information that may not have been reported. The worker is required to independently verify that the information on the PARIS match is correct before taking adverse action on the involved case.

PARIS data is generated in MAVERICS at the end of each quarter and is available through the Interface Inquiry Menu (INIM). This data should be reviewed for each household member at application, reapplication, and redetermination. This online data is not considered known to the agency until the data has been retrieved by the case worker.

Upon review of the data at application, reapplication and recertification appropriate action should be taken and CADM should be documented to reflect the disposition of the data. This data must also be checked prior to case authorization.

The worker will determine the state in which the recipient actually resides by obtaining information from the recipient, the agency in the match state and other sources as needed. If the

worker determines that the recipient is not a resident of Mississippi, the individual is not eligible for benefits in Mississippi. A potential claim exists for any month in which the non-resident participated in both Mississippi and the resident state. If the individual is a Mississippi resident, ineligibility exists in the match state and the determination regarding a claim is the responsibility of the match state.

NATIONAL NEW HIRE DATA

The National New Hire data is a matching system in which Mississippi's caseload data is matched monthly against select employers who are participating in the project. The new Hire matches serve as an indicator of information that may not have been reported. The worker is required to independently verify employer information before taking action on the case.

New Hire data is updated in MAVERICS on the last Thursday of the month for individuals who were submitted for SSN matches on the last Thursday of the prior month. This data is available through the Interface Inquiry Menu (INIM) and should be reviewed for each household member

at application, reapplication, and redetermination. This online data is not considered known to the agency until the data has been retrieved by the case worker.

Upon review of the data at application, reapplication and recertification appropriate action should be taken and CADM should be documented to reflect the disposition of the data. This data must also be checked prior to case authorization.

QUARTERLY WAGE MATCH DATA

The Mississippi Department of Employment Security wage match information helps to identify unreported or incorrectly reported earnings. The data contained will not be current data. Rather it will represent data from the five quarters prior to the quarter in which the match is conducted. The data will be retained for a period of 3 1/2 years. It will display beginning with the most recent quarters.

For applicants, the match will be conducted twice a month.

For recipients, the match will be conducted monthly.

This data should be reviewed for each household member age 16 and above at application, reapplication, and redetermination. This online data is not considered known to the agency until the data has been retrieved by the case worker. Upon review of the data, appropriate action should be taken and the EMIN screen documented to reflect the disposition of the data. If the data does not match the amounts reported by the client, the worker is required to send the MDHS-EA-951, Wage Verification Form for Reported Amounts, to the employer .

This data must also be checked prior to case authorization.

PARIS VA

The PARIS VA is a MAVERICS online procedure used to verify veterans benefits on applicants/recipients. The response provides current benefits, type of benefits (pension, aid and attendance, etc.). The query process is required for all individuals at application, reapplication, reevaluation, and when a new member (other than new born) is added to the assistance unit or when there is question about VA benefits.

Paris VA is generated every quarter and is not considered verified upon receipt. The worker must access the Paris VA screen via INIM to view the data and take appropriate action at application, reapplication, reevaluation, and when adding a new household member. Refer to Chapter 4, "Unearned Income" regarding Veterans Benefits.

DISPOSITION OF THE APPLICATION

Standard of Promptness

Generally, applications should be processed in the order they were received, taking into consideration promptness or delays in receipt of verification. Also, exceptions may be made to this order for situations in which destitution, terminal illness or some other urgent need exists. Mississippi State law decrees that not more than 30 days shall elapse between the date on which the application is received and the date of approval or the notice of denial.

To ensure that the standard of promptness is met, applications must be cleared in time to allow for processing within the 30-day limit. In order to meet this standard, the eligibility worker must have the application ready for supervisory review and approval by the 23rd day or sooner if all information is available, in order to allow time for review and correction. Authorization should take place by the 29th day to ensure availability to the applicant on the 30th day.

When disposition of an application is delayed for any reason, the reason for the delay must be recorded in detail in the case record.

Accrual Rights

Provided he was alive and eligible, as far as was known, the applicant's right to a TANF benefit accrues on the earliest of the following dates:

1. The date on which the TANF benefit is authorized, or

2. The 30th day following the date on which a signed and completed application form was received.

EXCEPTION: See below for accrual rights of individuals added to an active case.

To protect an applicant's accrual rights, retroactive benefits must be made in any case when the application process takes so much time that an initial award for the current month does not cover the calendar month in which the 30th day occurred. This is true regardless of whether the delay was caused by the applicant or agency.

However, TANF benefits issued for the month in which the application was filed must be prorated to include the date on which the rights to the grant accrued and any days which remain in the application month. See *Chapter 6, General Principles - Prorating Grants for Applicants*, for handling proration of grants.

For example, the right to the TANF grant accrues:

1. For an application made on July 30 and authorized on August 16 for children who are

   alive and determined to be eligible for August, the accrual date is August 16, and the grant is issued for the month after application (August). Since authorization occurred within 30 days of application, accrual occurs on the authorization date. The first TANF benefit is not prorated.

2. For an application made on July 1 and authorized on August 22, the accrual date is July 31, providing the children are alive on that date and eligible for July. Since the authorization date is later than the 30th day after application, accrual occurs on the 30th day, and TANF benefit must be prorated for one day in July. A retroactive benefit must be authorized.

3. For an application made on July 10 and authorized September 1, with ineligibility determined for August, the accrual date is September 1, providing the children are alive and eligible for September. Proration is not applicable. Although the 30th day falls in August, ineligibility for that month changes accrual to the first day of the next month.

4. For an application made on August 2 and authorized August 22, the accrual date is August 22, providing the children are alive on that date and eligible for August. Since authorization occurred within 30 days after application, accrual occurs on the authorization date. A prorated benefit would be issued for August 22 - August 31 (10 days).

In TANF, accrual rights relate to the children and to the grantee relative or two legal parents (*UP or incapacity cases*) in the budget. Refer below for special procedures for adding an individual to an active case and for protecting the accrual rights of the children when a change of payee is required on an application, and to *Chapter 6, Budgetary Process*, when factors related to income change.

Approvals

When the investigation is completed and all eligibility factors are documented in the case record to show that eligibility is met, the worker will:

1. Work the case in MAVERICS.

2. Complete the appropriate notices to the applicant.

3. Check to ensure that all referral forms are completed and available for routing.

4. Route the case record to the appropriate case reviewer, depending on county staff and procedures, for review of eligibility decisions, authorization, and release of notices.

Denials

An application should be denied when:

1. The investigation shows that the applicant or family group fails to meet one or more eligibility criteria, including signing of required documents.

2. An unresolved noncompliance exists and the applicant fails to comply or prove exemption by the 30th day after application.

3. A mandatory work sanction period has not ended.

4. A mandatory Up-Front requirement (substance abuse screening or Up-Front Job Search or Up-Front Vocational/Rehabilitation requirement)is not verified.

5. The applicant fails to furnish necessary data within the time frame for disposal of the application.

6. A non-exempt parent has voluntarily quit employment, has been terminated by the

employer as a direct result of personal action(s), e.g. disruptive behavior, inappropriate conduct or language, absenteeism (to include absence caused by the loss or lack of transportation), tardiness, etc., committed by the individual or voluntarily reduced his/her work hours, without good cause, within two months prior to the month of application. *See Chapter 3, Voluntary Quit Provision.*

NOTE: Only the individual is disqualified if he/she is the needy caretaker relative. The penalty applies to the entire case if the person is the parent.

When an application is to be denied, the worker will:

1. Document the reason for ineligibility. The information supporting the recommendation for rejection shall be definite, clearly stated, and based on fact.

   When an application is being rejected because of failure to furnish necessary data, deny the application because essential information was not provided (*MAVERICS Notice **A202***) and the agency is unable to establish eligibility or ineligibility.

   When an applicant's statement shows ineligibility, reject the application without verification, provided that the applicant appears competent to give correct information and that there is no indication verification will be needed later.

   If the denial is based on an outstanding sanction for which compliance has not been met, the appropriate forms from the Child Support worker or case manager must be in the case record to support the failure to comply.

2. Complete the appropriate notice to be sent to the applicant. MAVERICS enters the correct denial code when the appropriate notice is sent.

3. Route the case record to the individual authorized to review the eligibility decision and release the denial notice.

Terminations for Other Reasons

Applications may be disposed of because of death of the applicant, inability to locate the applicant, or at the request of the applicant. The worker will:

1. Send the appropriate MAVERICS Notice to history for terminations due to death of the individual or unable to locate. MAVERICS enters the correct denial code when the notice is sent.

2. Record in the case record the reason for rejection. It is not necessary to send a notice to the applicant unless the reason is voluntary withdrawal. When the applicant voluntarily withdraws, send a notice of denial confirming the applicant's desire to withdraw.

SPECIAL PROCEDURES

For Reapplicants

An individual whose application has been denied or terminated may reapply at any time. In general, the same procedures are required as on initial applications. However, ID numbers for the individual and possibly other family members will already be available and there may be current medical information already in the case for an incapacitated parent. The worker will not require verification of previously established eligibility factors which are not subject to change. The individual, however, must verify current income and resources and any other factor that is subject to change. Any outstanding non-compliances must be cleared up, and if the previous application was denied or the case closed due to missing information, this must be supplied. Also, any previously reported resources that would have caused ineligibility must be verified and a determination made as to whether or not resources have been transferred in order to establish eligibility. Sufficient documentation must be provided to establish that the family is currently eligible. The worker should contact another county to secure the case record of any reapplicant when the applicant has been denied or received assistance last in that county. Also note that:

1. A reapplication for TANF following a TWP sanction shall not be approved, if otherwise eligible, until the timed sanction period is served and the work compliance has been satisfactorily resolved by exemption or compliance. When the reapplication occurs after the 15th of the last month of the timed sanctioned period (or any time thereafter), the individual will be referred to JAWS in “REceived” status. The case manager will schedule a new orientation session to give the individual an opportunity to comply with TWP requirements. When the individual has complied with TWP by either meeting a work exemption reason or by attending the orientation to begin the assessment and work activity assignment process, the EW is notified through the MAVERICS/JAWS interface of the satisfactory TWP status. The TANF case can then be authorized for the following month. If the individual fails to attend the orientation session and does not meet a work exemption, the TANF application will be denied. *See Chapter 3, Reapplication Following a Sanction.*

EXAMPLE: TANF recipient sanctioned for February and March for non-compliance with the TANF Work Program; reapplies for TANF on March 18; complies with TWP on April 2; TANF eligibility can be determined effective May.

2. A reapplication and new determination of eligibility are required when an applicant requests a hearing on a denied application or closure of a case after the time period for making an appeal has lapsed. See *Chapter 13, Hearing Process*, for situations in which a request for a hearing can be accepted in such instances.

3. The previous receipt of improper payments is not a barrier to current eligibility, as eligibility must be determined on current circumstances. However, workers should use the prudent individual concept described above in determining eligibility for an individual who has been reported for suspected fraud. Also, authorization for assistance for such a reapplicant does not mean that any previous report of improper payments has been cleared, as it may still be pending and may still be acted upon by the proper officials.

For Staff Members, Their Relatives and Personal Interest Cases

Any staff member and relatives and/or personal interest cases of staff members may apply for and receive assistance; however, there are special procedures for taking and processing applications for employees and individuals related to, or of personal interest, to a staff member as listed below.

The county director is responsible for taking and processing applications for employees or personal interest cases and for submitting the case to the Regional Director for review and authorization of the approval or denial. The county director may delegate intake or case reviews, but not the regional director's task, to a county supervisor who has no close relationship to the employee or individual applying. Applications for assistance from supervisors or their relatives will be assigned to the county director for processing and submitted to the regional director for final approval or denial. Applications submitted by a county director or his/her relatives will be taken and processed by the regional director. Applications received from individuals who have a close relationship with the worker's supervisor will be submitted to the county director for review and authorization or denial.

The relatives for whom the special procedures must be used include a staff member's spouse, grandparents, (*also great, great-great, and great-great-great grandparents)*, parents *(including stepparents)*, brothers and sisters *(including stepbrothers and stepsisters, half-brothers and half-sisters)*, children *(including stepchildren)*, grandchildren, aunts, uncles, nieces, nephews, first cousins, first cousins once removed, and these relatives of a staff member's spouse who are related to this degree by marriage. These relationships are the same as those for TANF specified relatives. Furthermore, the interests of the agency will be served by not assigning any eligibility

determination to an employee who has a particularly close relationship with the applicant.

Since county staff are prohibited from processing applications for relatives within the degree described above, the county director must not process an application for one of his/her close relatives. In these instances, the regional director or Program Specialist will take the application. The regional director will review the facts, make the decision, and authorize or deny assistance.

Applications from relatives of staff members other than the county director require the review and approval of regional directors. The county director is responsible for assigning the application to an eligibility worker who can process the application objectively and for authorizing eligibility for such relatives. However, cases should not be assigned to a worker supervised by the relative of the applicant.

For Child in Public Non-Medical Institution

When a parent or other relative makes an application for a child who is currently an inmate of a public institution, such as one of the state mental hospitals or one of the correctional facilities, the worker will contact the institution to determine when the child will be released from the institution.

If the parent or other relative plans to move the child from the institution to his home within 30 days and the institution verifies the discharge plan, the county may process the application and hold for authorization until verification that the child is actually in the home. If the plans do not work out, deny the application.

For SSI Involved Situations

The parent or other relative in TANF has the right to make a choice between TANF and Supplemental Security Income (SSI) benefits, and the eligibility worker is responsible for making as clear an explanation as possible of the advantages and disadvantages of each program. An individual receiving SSI cannot be included in a TANF budget; however, such an individual may be the grantee relative of TANF children.

An individual potentially eligible for SSI may be included in the budget prior to receipt of SSI. When a TANF applicant indicates an interest in receiving SSI, the worker should:

1. Refer the individual to the Social Security Administration (SSA) to apply.

2. Ask the individual to let the worker know when an approval or denial notice is received.

3. Set an alert in MAVERICS or place a tickler in the file to follow up on this not later than the first week of the third month following the SSI application month.

The EW may use the SSI on-line inquiry process to check the status of the application. Once approved for SSI benefits, the approval date, benefit amount, and any retroactive payment will be available on-line.

For Addition of Individual to an Active Case

The request for adding an individual to an active case is essentially an application for assistance. The individual for whom such a request is made has all the rights of an applicant to prompt action and accrual dates, to appeal a denial, etc. Exception: The rights of an individual added to an active case accrue on the first day of the ***system*** month following application. This means that the individual will be added to an active TANF case for the current system month, so rollover plays a part in determining when eligibility begins for the new household member. Such an individual also has the responsibilities of an applicant, such as being subject to enumeration, child support and TANF Work requirements.

An interview with the TANF payee is mandatory to add anyone to a TANF case. The TANF payee must complete the MDHS-EA-900 Supplement, requesting that an individual be added to the TANF money payment. This must occur before the worker completes the process in MAVERICS. Determine eligibility and dispose of the request by authorizing eligibility and sending a notice to the payee, if found eligible.

If inclusion of the new individual with their resources and/or income causes ineligibility, terminate benefits for the next possible month and end a closure notice to the recipient.

EXAMPLE: A recipient completes the 900 Supplement on November 17 to report that her 16 year old son has moved back home. An interview is scheduled for November 20. The current MAVERICS system month is December. The child should be added to the case effective for the month of December and eligibility determined ***ongoing*** with the new household member included. If eligible, the benefit should be adjusted for December.

EXAMPLE: In the example above, the interview cannot be scheduled until November 22, after rollover to January has occurred. The child should be added to the case effective with the month of January and eligibility determined ***prospectively*** for January. If eligible, assistance will be continued and the benefit adjusted effective January 1.

For Applicant Moving Out of County

In instances when an application is submitted but disposition is not completed, and the household reports a move to another county, the first county must ensure that all documents related to the application are scanned to the appropriate electronic folder in Interwoven/Worksite. Once as many required transfer actions as possible have been completed (handling any claims, IEVS, or other alerts, changing the household's address on ADDR, etc.) the first/transferring county must notify the new/receiving county of the transfer, send the A801 Transfer Between Counties notice and use the Case Record Control (CARC) screen in MAVERICS to send the case to the new county. The receiving county will be responsible for completing the eligibility process and notifying the household of the decision. Refer to Chapter 7, pages 7554-7558, regarding case procedures.

For Applicant Leaving the State

When an applicant goes out of state before the application is completed, the county will ask him the purpose of the absence and let him know that his eligibility cannot be determined while he is out of state. Take action then in accordance with the response of the applicant, as follows:

1. Hold the application for 30 days if the applicant says that he has gone on a visit and plans to return. If he does not return within that time, deny the application for inability to complete it.

2. Deny the application when the applicant states that he intends to reside in the other state.

SUBSTANCE ABUSE SCREENING

As a condition of eligibility for TANF, any adult (including any disqualified individual) included in the assistance unit will be subject to a questionnaire to determine the reasonable likelihood of a substance abuse disorder. This screening is required regardless of the adult's referable status to the TANF Work Program (TWP), and will be administered during the application process. Results of the questionnaire have no bearing on the decision to approve the TANF application, and eligibility determination must not be delayed based on the questionnaire's results. However, should results of the screening indicate the reasonable likelihood that a substance abuse disorder exists, upon case approval, the client will be required to register with a designated provider in order to take a drug test. Failure of the adult to cooperate in being tested for a substance abuse problem will lead to a sanction for the TANF adult.

Screening Process

All adults included in the TANF assistance unit will be required to take a substance abuse screening questionnaire at the time of a new TANF application. If at any time another adult joins the assistance unit, that adult will also be subject to screening. The questionnaire will be administered by the Case Manager (CM). The TANF application must be denied if an adult refuses to submit to the screening.

The CM will administer the questionnaire utilizing an online screening tool known as the Substance Abuse Subtle Screening Inventory (SASSI). The screening process takes approximately thirty minutes. At the conclusion of the screening, the results are immediately available for viewing by the CM. Screening results have no bearing on the determination of TANF eligibility.

Non-Exempt Referrals

For TWP referable clients, substance abuse screening will be included in the Up Front Job Search (UJS)/Vocational Rehabilitation (UR) process. The client will be referred by the Eligibility Worker (EW) to the Case Manager Supervisor (CMS) through the MDHS-EA-319A, TANF Work Program Referral Log. In areas where the EW and CM are the same, the 319-A will not be necessary. Using the referral log, the CMS will assign the case to the CM who will in turn schedule a TWP intake appointment. As part of the UJS/VR process, the CM will administer the drug screening questionnaire to the adult household member.

The CM will use the 319A to schedule the client for administering the SASSI. The CM will indicate on the form 1) if the client was a no-show for the appointment; 2) if the client refused to take the questionnaire; 3) if results of the questionnaire show reasonable likelihood of a substance abuse disorder; or 4) if questionnaire results do not indicate a substance abuse problem. In any of these instances, the CM will document the 319A and return the form to the EW.

If results of the questionnaire indicate the adult has a reasonable likelihood of a substance abuse disorder, the CM will document the finding on the 319A and return the form to the EW. If the household is eligible for TANF, the EW will use MAVERICS notice A101, TANF Approval, to inform the household of the results. Along with the A101, the EW must send in a separate mailing the MDHS-EA-337, TANF Drug Testing Instructions, along with an “ePassport” form. This information packet will provide the household information on contacting the nearest testing facility for purposes of submitting to a drug test.

If the client fails to cooperate in taking the questionnaire, the CM will document the refusal by entering the appropriate denial code on the Maintain Up-Front Job Search (MUJS) screen in JAWS. MAVERICS will automatically deny the application by sending notice X710, TANF Up-Front Denial.

Exempt Referrals

For adults determined exempt from TWP requirements, referral to the CM will still be required for purposes of administering the drug screening questionnaire. The MDHS-EA-319B, Substance Abuse Questionnaire Referral, will be provided by the EW to the CMS to indicate the TWP exempt client is being referred only for purposes of taking the questionnaire. The CM will administer the drug screening questionnaire to the adult household member.

The CM will use the 319B to schedule the client for administering the SASSI. The CM will indicate on the form 1) if the client was a no-show for the appointment; 2) if the client refused to take the questionnaire; 3) if results of the questionnaire show a reasonable likelihood of a substance abuse disorder; or 4) if questionnaire results do not indicate a substance abuse problem. In any of these instances, the CM will document the 319B and return the form to the EW.

If results of the questionnaire indicate the adult has a reasonable likelihood of a substance abuse disorder, the CM will document the finding on the 319B and return the form to the EW. If the household is eligible for TANF, the EW will use MAVERICS notice A101, TANF Approval, to inform the household of the results. Along with the A101, the EW must send in a separate mailing the MDHS-EA-337, TANF Drug Testing Instructions, along with an “ePassport” form. This information packet will provide the household information on contacting the nearest testing facility for purposes of submitting to a drug test.

If the client fails to cooperate in taking the questionnaire, the EW will deny the application by sending MAVERICS notice A219, TANF Denial - Other Reasons, indicating on the notice the reason for denial.

DEFINITION OF AUTHORIZATION

Authorization is an official act, usually performed by the county director or their designee, certifying as to the eligibility or continuing eligibility of any assistance payments group. The authorization requests the issuance of a TANF benefit and authorizes the expenditure of public tax funds.

LEGAL BASE

State statute sets the administrative structure and responsibilities of the Department for handling and completing applications and redeterminations for TANF benefits. Refer to *Chapter 1, Legal Provisions,* for the complete discussion of the legal provisions.

AUTHORITY FOR CERTIFICATION AND AUTHORIZATION

The process of certification, authorization, and payment involves the county Economic Assistance Office and State Office. The responsibilities of each are discussed below.

Decision of the County Office

The duties of county staff include:

1. Authorization by the county director or supervisor is required on all applications and reapplications for the TANF program. At the discretion of the county director all other types of actions may be authorized by county staff.

2. The eligibility worker will acquire, record, and evaluate the needed facts about eligibility and determinations of eligibility. He will sign applicable forms, complete the eligibility determination screens in MAVERICS, and route the record to the county director or case reviewer for review and final decision, if supervisory level authorization is required.

3. If supervisory level authorization is required by MAVERICS or by decision of the county director, the county director or case reviewer, in counties having this position, will review the case record for completeness and accuracy of information on each factor of eligibility. The MAVERICS screens will be reviewed for accuracy of data entry and the computation of the grant, if any, for conformity with agency policy. Note that if supervisory level authorization is not required, the eligibility worker is responsible for performing these functions. Authorization of the case will be accomplished through the Authorization of Supervisor (***AUSP***) screen in MAVERICS. Each benefit month worked in the determination of eligibility must be authorized through this screen. If the county director so requires, the notice of approval must be set up by the worker and pended for supervisory release through the Notice Release (***NOTR***) screen in MAVERICS at the time the case is authorized.

4. The case manager handles cases referred to the TANF Work Program (TWP) and may be responsible for all eligibility actions on such cases after approval and authorization in addition to case management.

5. Upon authorization at the county level, the benefit record(s) become available for issuance.

State Office Responsibility

MIS processes benefits through the Mississippi Debit MasterCard Program using the EPPIC system once eligibility is determined in MAVERICS.

AUTHORIZATION PROCEDURES

Authorization of payment and certifications for eligibility must be accomplished through MAVERICS. Refer to Volume X for detailed procedures for the Authorization of Supervisor (***AUSP***) screen.

On Specified Actions and Forms

The procedures for authorization are:

1. All authorization for initial certification and subsequent determinations of eligibility and access to and availability of benefits, will be accomplished through the Authorization of Supervisor (***AUSP***) screen in MAVERICS.

2. The county director and his/her designee will authorize changes in eligibility and amount of benefits.

Others Qualified to Authorize

State office staff may also make the decision on eligibility and authorize the TANF payment. State staff includes the regional staff. The central state office usually assumes the responsibility when:

1. A wholesale change must be made because of state funds available or because of the need for a change in the method of computing payment. Changes may be made in the percentage of budgetary requirements or deficit paid, in the amount of the legal policy maximum, or in the minimum payment.

2. Some other unusual circumstance arises, so that the Economic Assistance Policy Unit must make the decision to authorize the payment or certify as to eligibility.

3. Regional staff must determine eligibility, certify, and authorize assistance when the county director is not allowed to do so.

The authorization certifies that the TANF budget group has been determined to meet the conditions of eligibility and the extent of need, and that until the individual's circumstances change or the eligibility requirements change, regular TANF payments will continue.

NOTIFICATION

Requirements

When the county department has reached a decision concerning the eligibility or ineligibility of an applicant or concerning the amount or termination of the assistance payment, the county office under federal regulations is required to notify the individual in writing of the decision and the reason for its having been reached. The decisions reached include:

- Approval or rejection of the application
- Termination of assistance (*closure of case*)
- Increase or reduction of the benefit

All households will be given the option to receive and view their notices online by registering and activating a "MY MDHS Account." If the HH selects the online option they will no longer receive paper notices through the mail. Households who successfully register and activate their accounts will receive an email notification when a new notice is added to their account. The households will be responsible for viewing all notices to ensure that they are aware of all case changes, interviews, appointments etc.

At the same time the county office makes a case decision, the individual must be offered an opportunity for a local hearing or to request a state hearing. Refer to *Chapter 13, Hearing Process*, for a detailed discussion of hearings.

Forms and Explanations

The county offices will use the notices that have been developed in MAVERICS for the following types of action. Explanations for rejections, closures, and reductions should be included.

1. Notification of approval or rejection of the application.

2. Notice of change for active cases. The worker will send a notice when the changes shown below are necessary:

   a. A decrease in the amount of the TANF benefit.

   b. Termination of eligibility for the TANF benefit.

   c. An increase in payment or a procedural change such as transfer of a case to another county, change of payee and similar technical changes.

The forms require and provide space for the county office to state what action(s) they intend to take, the reasons for the intended action(s), and the specific regulation which supports the action(s). The county worker shall word the explanation simply and clearly so that the individual may understand why and what recourse he can take if he wishes. An exception to the requirement for explanation is that applicants rarely require an explanation for the initial TANF benefits, and recipients rarely object to an increase in the amount of the TANF benefit.

Refer to the more detailed discussion below and note that the county office must give advance notice of ten days on reductions in payment and closure of cases, with specific exceptions.

When possible the worker will talk with each individual whose application must be rejected/denied or whose TANF benefit must be terminated or reduced and explain the reason for this action. This is most conveniently done during an application or redetermination interview.

Refer to Volume X, Chapter 4 for the notices to be used in the situations discussed above and the instructions for completing each.

Notice of Approval

After the county director or supervisor has approved the application and authorized benefits, the county will send the applicant a notice of approval. The notice specifies the type of assistance for which the applicant has been approved and the amount of the benefit, and gives the month in which this approval is effective.

If the applicant was not given the TANF informational pamphlet during the initial interview, the worker will mail a copy of this pamphlet.

Notice of Rejection or Disposal for Other Reasons

When an applicant is rejected/denied or disposed of for other reasons, the applicant shall be notified in writing of this fact and the reasons for the decision. Exception to this requirement will be made in the case of the death of the only child in a TANF case. When the reason for disposal of the application is inability to locate the applicant, the county office shall mail the notice to the applicant's last known address.

The worker will follow the instructions given above for completing the notice, making sure that the reason for rejection is clearly stated.

MAVERICS notices shall be used for notification to the applicant on all types of applications which are being rejected or disposed of for other reasons. These include rejections based on:

1. Failure of the applicant to meet eligibility requirements.

2. Moved out of state, receipt of another type of assistance, or the agency's inability to locate the applicant.

3. Withdrawal of the application. The notice will state the basis for the applicant's ineligibility and the fact that he stated that he did not wish to continue with his application, thus confirming the agency's understanding of his decision.

Advance Notice

Except for specific instances, Federal regulations require that the Department give ten days advance notice to a recipient of the decision to decrease assistance, to terminate assistance for one or more, but not all, individuals in a TANF budget, or to terminate assistance completely. The ten days are to be counted beginning with the date of printing/mailing or electronic posting of the notice and must expire prior to the first day of the effective month. This refers to calendar days, not working days. The county office must not authorize a decrease in benefit or authorize termination of assistance during the advance notice period except as set out on the following pages. The worker must always be aware of the MAVERICS rollover date and whether this will affect the effective date of the action.

When the individual's rights have or will have accrued and it is not possible to stop the TANF benefit, the individual will receive the TANF benefit for the following month. See below for further discussion of withholding authorization for a TANF benefit during the advance notice period and the discussion of accrual rights and the possibility of improper payments in such situations.

Purpose

The purpose of the advance notice is to give the individual an opportunity to request a local hearing to discuss his situation further and to present any new or additional information bearing on his eligibility; or to request a state hearing. See *Chapter 13, Hearing Process*, for the discussion of hearings.

Procedures

Follow these steps in carrying out the advance notice requirement:

1. After a decision to reduce a TANF benefit or close a case, prepare the appropriate notice to the individual, filling in the proper fields and release the notice. Refer to Volume X Chapter 4. When a notice of closure is released, MAVERICS will change the status of the case to frozen.

2. After the ten-day period has expired, MAVERICS will automatically close the case unless the worker has reinstated benefits. Refer to *Reinstatement* later in this chapter, for a discussion of situations in which reinstatement is appropriate.

Notice of Decrease

The county office will notify the payee of any necessary decrease in TANF benefits resulting from new or additional information on a regular or special redetermination. Reductions in TANF benefits result from increased income, removal of individual(s) from the budget, etc.

See below for those instances in which advance notice is not required and for the type of forms to be used in giving notice.

The state office will notify recipients when it is necessary to make a wholesale change by sending computer generated notices to each individual affected. This will be done in the prior month whenever possible. State office will give specific instructions to county offices at the time of each wholesale change.

Exceptions to Notice of Decrease

While the county office will notify the individual each time that it is necessary to reduce his benefit and will explain the reason, the county is not required to observe the advance notice period before taking action when:

3. The case has a child who is removed from her parent's grant and becomes the payee for her own child or becomes a recipient of SSI. If the removal of this individual's requirements from the budget of the active case would result in a reduction in the benefit, the reduction has come about through the request for assistance from the

individual and with the knowledge of the payee, so that advance notice has already been given prior to the approval of the newly eligible individual.

2. The department has received a clear written statement signed by the payee agreeing to the action to be taken. The statement may be written on the notification form obtained during a personal interview or sent by letter to the department. The recipient will state that he no longer wishes assistance or that he agrees and understands that the information he has given or the county has obtained has resulted in reduction or termination. The worker will then close the case or authorize a reduction for the next possible month. Use notice **A492** in MAVERICS to close a case in this situation. Refer to Volume X, Chapter 4.

   The securing of a written statement may be possible when the worker is talking with the individual and can get one at this time or ask him to send one to the agency when a discussion was held by telephone. Otherwise it is doubtful that the county can get a response within the ten-day period. Occasionally a recipient may realize that he is no longer eligible and write a letter stating he no longer needs assistance even though there was not a prior conference with the worker.

Note, however, that when a TANF child reaches age 18 and assistance must be terminated, this often results in case closure or a reduction of the benefits to the children under 18 remaining in the case, and advance notice is required. Use the tickler file and/or worker alerts in MAVERICS to control the removal of children attaining the age of 18 in TANF cases. There is also a MAVERICS report of children reaching their 18th birthday.

Notice of Closure

When the county office reaches the decision that the recipient or recipients are no longer eligible for assistance, the worker will send a closure notice giving the effective date of closure. Ineligibility for assistance means that the case is closed and that the recipient or recipients are no longer qualified for benefits. Refer to Volume X, Chapter 4 for the notices and instructions to use in MAVERICS.

Special Procedures on Closures When Absent Parent Returns

Follow these special procedures for closure when a parent returns from a hospital or prison.

1. When the basis for ineligibility in TANF is the return of the parent to the home where the other parent and children live, and neither parent is incapacitated, send the payee A905**, TANF Request for Information,** stating the assistance may be continued for three months in order to give time for him to obtain work or whatever other adjustments may be necessary. However, also ask the parents to let the department know of any changes in the family situation that might result in their being eligible for a longer period of

time or in an earlier termination of benefits.

2. If either parent in TANF is incapacitated, use the three months to prepare a social information report, obtain medical information, and secure a decision from the Medical Review Unit. If the decision is that the parent is incapacitated, continue the benefit.

3. On the first day of the last month of eligibility, send notice **A409** to history in MAVERICS to close the case. Do not release the notice to the individual. Be sure that the current month on the Case Profile (**CAP2)** is equal to the effective month of closure.

Exceptions to Advance Notice of Closure

The following types of action do not require advance notice:

1. Change in status or procedural changes, such as transfer between counties, or protective payee, etc. These are actions to discontinue assistance in one form and to continue it in another, and the worker should use the change notice. Refer to Volume X, Chapter 4.

2. The department has factual information confirming the death of the TANF child in a one child case, a refugee case with only one in the budget, or the TANF payee when there is no relative available to serve as new payee so that the emergency payment procedure cannot be used. Refer to *Chapter 3, Emergency Situations*, for the discussion of emergency payment procedures.

3. The individual has signed a clear written statement that he no longer wishes assistance or agrees to the termination of benefits. See *Exceptions to Notice of Decrease - Item No. 2 earlier in this chapter,* for a full discussion of written statements from individuals.

4. The payee, TANF child in a one child case, or other recipient has been committed to a mental or other custodial institution such as a state prison or county or city penal institution.

5. The individual's whereabouts are unknown and agency mail to the payee has been returned by the post office indicating no known forwarding address. However, the benefit must be available if the individual's whereabouts become known and he/they are otherwise eligible. See directly below for the procedures to use when a case is closed in error.

6. The only child in a TANF grant has been removed from the home as a result of judicial determination or voluntarily placed in foster care by his legal guardian.

REINSTATEMENT

A reinstatement may be completed on a case in the situations described below:

1. When a hearing decision has determined that the individual is eligible and the case has been closed.

2. When the case is closed and the payee requests a state hearing during the ten-day advance notice period.

3. When a case has been closed in error. See discussion later in the chapter concerning Retroactive and Corrective Action. There must be documentation in the case record explaining the error.

4. When an application has been denied in error. Document the explanation for the error in the case record.

5. When a rejected applicant for refugee assistance has met his spend-down within the designated six months' spend-down period. See *Chapter 17, Refugee Program*, for refugee information.

6. When a spend-down individual, who is a refugee and whose case was closed because his income increased, has spent down his additional excess income within the same specified spend-down period.

7. When a notice of closure is sent as the result of a missed appointment and the client submits a redetermination application after the 10 day notice period but prior to rollover. The case may be reverted to “open” status and eligibility determined.

Cases in the above instances can be reinstated without a reapplication being processed and without the usual complete determination of eligibility. In MAVERICS the procedure known as "revert to open" is a form of reinstatement. Please refer to Volume X, Chapter 4 for the proper procedures in MAVERICS for the reinstatement of TANF benefits.

ASSISTANCE DURING HEARING PROCESS

There are time limits that apply to a request for a local or state hearing. Continuation of assistance during the hearing process is based on the timeliness of the hearing request. See *Chapter 13, Hearing Process*, for a full discussion of hearings and client and county responsibilities.

WITHHOLDING AUTHORIZATION

Once eligibility has been established, the recipient continues to receive his TANF benefit until (1) facts have been secured showing that one or more eligibility requirements are not met, and (2) the recipient has had an opportunity during the notice period to respond to the facts that led to reduction or termination. See below for the specified circumstances when it is necessary and permissible to withhold authorization of assistance.

Death

If the death of the TANF payee or the death of the child in a one-child case occurs or is reported after current payroll deadline, there is no means of withholding the next month's benefit for corrective action. In the case of the death of a TANF payee, use the emergency payment procedure described in *Chapter 3, Emergency Situations*. In the case of the death of a legal guardian, no one else can receive and use the TANF assistance payment until the court removes the guardian and either appoints a new one or releases the individual from guardianship or conservatorship.

Cannot Locate - Payee and Children

When a TANF payee and children move, leave no address, and cannot be located, remove authorization from the next month's TANF benefit, if possible, then:

1. Take definite steps to try to locate the family and record these efforts in the case record and on CADM. Continue the investigation, if necessary, until the time has passed when the payee has missed two TANF benefits.

   EXAMPLE: The investigation is begun on July 25, when it is too late to stop the August payment. Continue the investigation until at least October 1.

   EXAMPLE: The investigation is begun on July 10. The worker should remove the authorization from the August benefit record *(assuming August was authorized by July 10*). The investigation should be continued until at least September 1.

2. If at the end of the two month period the payee and the children have not been located, record all the facts in the case record and on CADM and take steps to close the case. When the notice of closure is released, ensure that the CURRENT MONTH of the TANF program is equal to the month following the month the last TANF benefit was received by the family.

   EXAMPLE: In No. 1, the payee received an August payment, so the CURRENT MONTH should be September for closure.

3. Or, if the family is found and the children are eligible, authorize the benefit and continue TANF.

Cannot Locate - TANF Child

When a child leaves home and his whereabouts are unknown, obtain all the information possible from the parent or other relative and assist him if he wishes in trying to locate the child.

1. Allow 30 days in which to locate the child. Record all efforts made in the case record.

2. Continue the TANF benefit in the same amount while the investigation is being made.

3. If the child returns home during the investigation and there is no change in the budgetary deficit, the case need not be reworked unless a redetermination is due.

4. If at the end of the investigation period the child has not been found, or if found and determined ineligible, remove him from the TANF benefit, giving the payee time to respond to the advance notice.

NOTE: The law now requires the parent or caretaker relative to report within five (5) days when it becomes clear to the household that the child(ren) has left the home or when the child(ren) will be absent from the home for more than (30) days. The law also stipulates that the parent or needy caretaker who fails to meet this five day time limit for reporting that a child has left the home be penalized by serving a disqualification period for failing to timely report. See Chapter 7, Reporting Requirements When a Child Leaves the Home.

Approval for Assistance by Another State

When a payee has been approved for assistance for the children in another state and it is not possible to terminate his assistance here simultaneously with his initial assistance in the other state, stop his TANF benefit for the month in which his assistance there is effective. If the county learns of the approval too late to terminate benefits and the children do receive assistance from both states for the same month, ask the payee to return the Mississippi TANF benefit. A claim must be processed so that a demand for refund can be made. Please note that Mississippi is one of the few states that pays in advance in TANF; that is, on the first of each month for that month.

Advance Notice Given Before Release of the Next Benefit

When the ten day advance notice on closure of a case will expire after the deadline for the current payroll month but prior to the last day of the month, MAVERICS will not issue a TANF benefit for the next month if the case is in FROZEN status at rollover.

The procedures in MAVERICS are:

1. The worker determines prior to the deadline for the current payroll month that the case should be closed. Before releasing a closure notice, ensure that the CURRENT MONTH of the TANF program on the case profile (*CAP2*) screen is equal to the current payroll month. When the notice of closure is released, the STATUS of the TANF program in MAVERICS changes to FROZEN. MAVERICS will add ten days to the FROZEN STATUS DATE to determine whether or not to issue the TANF benefit. If the ten days will expire on or before the last day of the current calendar month, the benefit will not be issued.

2. If the change which results in closure becomes known to the Department after the deadline for the current payroll month, the case should be handled as follows:

   A. As long as the individual made a timely report and the worker acted timely on the change, no overpayment is considered to exist and no claim will be processed.

   B. If the individual failed to make a timely report or the worker failed to take action timely, an overpayment is considered to exist.

      If the case meets the criteria for cancellation and the client agrees, the benefits should be cancelled.

      If the change does not meet the criteria for cancellation, prepare a claim.

3. If the change which results in a reduction of benefits becomes known to the Department after the deadline of the current payroll month, the benefits cannot be changed.

   A. As long as the individual made a timely report and the worker acted timely on the change, no overpayment is considered to exist and no claim will be processed.

   B. If the individual failed to make a timely report or the worker failed to take action timely, no overpayment is considered to exist and a claim would be prepared.

Refusal of Individual to Furnish Information

In some instances the TANF payee is unwilling to give or obtain, or to permit the worker to obtain essential information to establish continued eligibility. When this occurs, the worker will send the notice of closure. If the individual does not furnish the necessary information or request a local or state hearing during the advance notice period, the system will terminate assistance on the next possible payroll. If the individual does furnish the information within the advance notice period, the worker must rework the case and authorize the benefit in order to remove the case from FROZEN status in the system.

If the individual requests a local or state hearing during the advance notice period, the worker must authorize the benefit and continue assistance until a hearing decision is reached.

Admission to Public Institution

When the worker learns of the admission of the TANF payee or child as an inmate to a public institution, the worker will close the case or adjust the money payment for the current payroll month. If the payee is the inmate, use the emergency payment procedures described in *Chapter 3, Emergency Situations*.

Voluntary Request for Closure

In some instances a payee will state that he no longer wishes assistance for his children and will request action to close his case. To request case closure, the payee must submit in writing the request to close the TANF case. If the request is made by telephone and the worker has enough identifying information to proceed, action may be taken to close the case, with the action documented in MAVERICS via CADM. The worker will terminate assistance on the next possible payroll date.

NOTE: The voluntary closure procedure *may not* be used as a means to avoid sanction due to noncompliance with Child Support Enforcement or the TANF Work Program. If the individual wishes to close his/her case, compliance must be met *before* allowing a voluntary closure. If compliance is not met, the appropriate sanction will be applied and must be served.

Only Child in Grant Removed from Home

When an only child in a TANF grant is removed from the home as a result of judicial determination or voluntarily placed in foster care by his parent or legal relative, advance notice is not required. Terminate payment on the next possible payroll.

RETROACTIVE AND CORRECTIVE ACTION

When to Take Action

The county office will make retroactive and corrective payments in the following circumstances:

1. When the county or state office has taken action improperly to reduce, withhold or terminate a TANF benefit or to reject an application. The underpayment amount, once authorized, may be used to reduce the balance of the approved claim rather than being paid to the individual.

2. When the county or state action was taken according to facts available at the time the action was taken but further information, presented within 10 days of the mailing of the notice of action, shows that the TANF benefit should have been initiated at a prior time or the amount of the TANF benefit increased.

3. When the county office has failed to authorize assistance as described below.

4. Even when the monthly amount of the corrective or retroactive payment is less than $5.

Each of these types of corrective action is described in more detail below. **Time Period for Action**

The following policy will govern the time for which corrective and retroactive payment will be issued.

1. No retroactive TANF benefit will be issued for a month prior to that for which eligibility was established. Corrective action will not be taken for a month prior to that in which the change occurred that resulted in the incorrect action. That is, correction will be made back to the month in which the individual's eligibility changed and his assistance was improperly reduced, terminated or withheld, or his application was denied. There is no minimum applied to the amount of the TANF benefit to be issued.

2. Corrective TANF benefits must be issued to a currently eligible family even though the underpayment was made over 12 months prior to discovery. Corrective payments may be made to families who are currently ineligible, and any outstanding corrective payments should be made to a former recipient who reapplies and is found to be eligible.

3. No corrective or retroactive action will be taken for prior months when the recipient did not notify the county department of new or additional information during the 10-day period after the notice of action was mailed to him.

Retroactive Assistance for Improper Action

Improper action takes place when the county or state department rejects an application, terminates assistance, reduces assistance, or fails to increase assistance as a result of incorrect interpretation of policy, failure to carry out policy though aware of it, overlooking a permissible policy or procedure, or failure to consider facts which were available to the agency at the time the action was taken.

The discovery of the erroneous action may come about through: (1) the review of the application or case by an agency staff member, whether case reviewer, programs investigator, state office member, etc., or by a federal staff member; (2) a complaint made by the applicant or recipient or

other individual in his behalf; (3) the recognition of error or oversight by the worker himself; or (4) other sources having knowledge of the facts. After establishing the fact that the previous action was improper, the county office will:

1. Use the MAVERICS procedure to revert a case to RECEIVED status (*the REPT screen*) when an application was denied in error. Work each month in the system from the month of application through the current payroll month.

2. If assistance was improperly terminated, use the REPT screen to revert the TANF program to OPEN status. Begin working the case with the CURRENT MONTH of TANF on the case profile screen (*CAP2*) and continue through the current payroll month.

3. If assistance has been paid in incorrect amounts, correct the TANF benefit for the current payroll month by reworking the case in MAVERICS. Note that it is possible for the CURRENT MONTH of TANF on the case profile screen to be different from the current payroll month. If for some reason the case's CURRENT MONTH is behind the current payroll month, the case must be worked in the system from the CURRENT MONTH through the current payroll month.

4. Make corrective payments for any paid month(s) in which the TANF benefit was improperly reduced or not increased by manually calculating the increased amount for each month and entering the amount(s) on the underpayment authorization (UNAU) screen in MAVERICS. The supervisor must review and authorize any underpayment.

5. Notify the applicant or recipient of the action being taken and the reason for it.

Corrective Action Based on Failure to Authorize

The agency will take corrective action in the instances set out below.

The types of error in failure to authorize which require corrective action are:

1. Failure to authorize the benefits through oversight.

2. Failure to meet the standard of promptness requirement on an application.

Retroactive Action on Hearings

When the result of the hearing is a decision that the individual is eligible, retroactive action will be taken back to the effective date on which assistance was terminated, reduced, or the application rejected, provided that:

1. The new evidence shows that the eligibility factor did exist at the time of the original decision, even though the information was not available at the time, and

2. The application was denied, assistance reduced, or assistance terminated at or prior to that time, and

3. No change has occurred in the individual's condition or situation since the original decision was made to deny, terminate, or adjust assistance. For example, if the individual is found eligible because he developed incapacity after the county department denied his TANF application, a retroactive TANF benefit cannot be issued for any period prior to the time at which the change occurred.

When the decision is made that the claimant is eligible for retroactive assistance, the letter from the Department will give the beginning date of eligibility for assistance. The county office will at once carry out the instructions by authorizing assistance, unless a change in the individual's situation affects the hearing decision.

Retroactive Corrective Payments as Cash Reserve

Consider retroactive corrective payments as cash reserve only when the money is still available to the family two months after the month in which the corrective payment was made. **LOST, STOLEN OR DAMAGED DEBIT CARDS**

The cardholder should be advised to contact a customer service representative of the issuing agent to report his/her card lost, stolen, or damaged and request a replacement card (See Form MDHS-EA-303A, Recipient Information Sheet).

PROCEDURAL CHANGES IN STATUS

The following types of action are considered procedural changes because assistance is continued to or on behalf of the recipient without a break in benefits. With specified exceptions, notice must be given to the individual, stating what the change is and why it is being made. Advance notice is required when only part of the recipients continue to be eligible, such as in change of payee but it is not required for change of address, transfer between counties, etc. A non-advance notice is used for this purpose.

Change of Address

Make a change of address for a recipient by means of the ADDR screen in MAVERICS. A change for the new month can be made at any time prior to the time the system comes down on the day which is the payroll deadline for the next month.

If the county receives notification that the client is living in another county, the director in that county should be notified in order to schedule the client to come in for a review of their case.

Notification should be sent to the client to contact the county office in which they now reside. Transfer the case to the new county of residence after notification is sent to the client. *See Transfer of Cases Between Counties later in this chapter*.

If the county receives notification that the client is now living in another state, the worker will notify the client that the Department does not provide assistance to recipients who leave the state of Mississippi and that the case will close.

If the county receives a notice a change of address outside the United States, the worker will withhold benefits. Notify the individual that the Department does not provide assistance to recipients who leave this country. If the individual remains in another country for longer than two months, the worker will cancel the benefits and close the case for technical reasons.

Change in Name

Make a change in the name of the payee in TANF when:

1. An error was made in the original entry of the name.

2. The individual has married or obtained a divorce and returned to a former name. Determine whether the individual has requested the Social Security Administration to change his name for the purpose of validation of the Social Security number.

3. A change is needed for validation of the Social Security number in order to conform with the way in which the name is listed on Social Security records.

   See Volume X for changing the name of the PI in MAVERICS. Use the EBCR screen to enter or delete the name of a protective payee. Also change other records which carry the name of the individual.

Technical Changes in Records

These include changes such as change in percentage with no change in amount of TANF benefit. Notice is not given to the individual because the continuation or amount of TANF benefit is not affected.

LEGAL REQUIREMENTS

The Social Security Act requires that provisions be made to establish a protective payee for the TANF benefit or a vendor payment as an alternative under the circumstances discussed below.

Mismanagement of Funds

Definition

The designation of a protective payee is required when the payee consistently and deliberately mismanages family funds and the mismanagement is found to be affecting the physical and emotional well-being of the child(ren). This includes the inability to manage money and refusal to accept help in learning how to budget and use money over a period of time with the assistance of some interested individual. Examples of evidence of mismanagement include:

1. Continued failure to plan expenditures so as to spread the available income over the period, keeping in mind the amount of the TANF benefit and other income.

2. Continued immature, compulsive, indiscreet, or other unwise spending which deprives the children of the necessities for daily living.

3. Repeated abuse of credit, which results in garnishment of other income, repossession of items purchased on time, continued refinancing of loans, and the like.

Use this method of payment after evaluation of the factors set out below has been made, the payee has been advised of the problem, and the worker has given intensive case work services for not less than 60 days.

Procedures

Prior to the designation of a protective payee, the worker will:

1. Determine whether the TANF payee is mentally and physically capable of learning to carry out sound money management practices. If the payee is incapable of learning to use the funds for the benefit of the children, investigate the possibility of securing a legal guardian.
2. Make a decision whether the mismanagement is willful, consistent, and continued, and is not the result of an emergency situation, such as illness, loss of income, or other factors over which the payee has no control.

3. Record in the case record the evidences of mismanagement, giving specific instances and circumstances, and the efforts made to help the payee learn better practices.

Notice To Payee and Period of Service

When it is apparent that a problem of money management exists, and a protective payment may be needed, the worker will talk this over with the payee, later confirming the discussion in a letter. The worker will continue intensive casework services for no less than 60 days. At the end of this period, if there appears to be no improvement, or if at a later time the improvement at first seen is not maintained, the eligibility worker will handle the case by establishing a protective payee with the approval of the county director.

TYPES OF PAYMENT

Provision has been made for two types of payment, as follows:

Protective

A protective payment, which is made to an individual designated by the Department who is not a member of the TANF family group but is interested in or concerned with the welfare of the family and who is capable of managing the funds available to the advantage of the family.

Social services must be available to protect TANF recipients in cases in which the problems are manifestly beyond the ability of the protective payee to handle.

Vendor

A vendor payment, which is made to an individual providing food, shelter, or any budget item to a TANF family. Because only a percentage of the budgetary deficit can be met in TANF, this method is unusual.

If some method of substitute payee must be used, the regional director will notify the Economic Assistance Policy Unit, giving the following information:

1. The nature of the problem of money mismanagement that exists.

2. The TANF benefits which are to be issued for the family.

In return, the Economic Assistance Policy Unit will assist the county office in determining the method of payments.

SELECTION OF PROTECTIVE PAYEE

If the decision of the staff is that the TANF benefit must be issued to a protective payee, they will then proceed to make the selection, if possible, based on the information in the record. Except in unusual situations, the selection of the protective payee must be discussed and made with the consent of the TANF payee.

The worker must also explain to the parent or other grantee relative the meaning of the decision, the reason for it, and his right to a fair hearing if he disagrees with the decision. Follow the regular agency procedures in *Chapter 13, Hearings*, in requesting and handling a fair hearing.

Individuals Barred From Serving

The following individuals are barred from being designated protective payees:

1. The county director and the worker who determines financial eligibility for TANF.

2. A member of special investigative staff or staff handling fiscal processes related to the TANF benefit.

3. Landlords, grocers, or other vendors of goods and services dealing directly with the payee.

Qualifications for Serving

The individual selected as protective payee must have the following qualifications:

- An interest in and concern for the welfare of the TANF family;
- Sufficient time and energy above that necessary for the individual's own personal affairs in order to provide the services needed by the TANF family;
- Ability to help the family make proper use of the TANF benefit, based preferably on experience in planning and managing family finances on a limited income;
- Accessibility to the family;
- Ability to establish and maintain a constructive relationship with the family and with county staff; and
- Good character and reliability.

RESPONSIBILITIES OF THE PROTECTIVE PAYEE

Such a payee has certain responsibilities to the family and to the Department, as follows:

1. To the TANF family, he has the responsibility of talking over with the grantee relative the choices possible in the use of the TANF benefit, though he has the final decisions as to how it shall be spent. He may actually spend the TANF benefit for the family, though preferably he will assist the grantee relative in making decisions about how to do so.

2. Also the payee must consult frequently with the relative on problems of household budgeting and home management, and do so with the purpose of increasing the relative's knowledge and skills so that eventually the relative can assume this duty.

3. The payee's responsibility to the Department is formalized when the payee, recipient and worker sign form **MDHS-EA-314, Agreement Between Mississippi Department of Human Services and Protective Payee**, in which his duties are listed. For detailed instructions on the completion of this form, see the Generic Forms Manual. The protective payee and the county staff member must share the responsibility for the planning of the use of the TANF benefit and for evaluating the services of the payee to determine whether the grantee relative is benefitting by the plan.

4. The payee must understand the regulations on confidential information and must observe them. The county worker will also be governed by these principles and will give the payee only that information which will enable him to carry out his duties. That is, the worker must outline for the protective payee information that bears on the problems of money management, including strengths of the grantee relative and family relationships, but will not release any information to the payee that does not relate to the problem with which the protective payee will work.

AUTHORIZING CHANGE TO PROTECTIVE PAYEE

Procedures and Notification

The county will use a letter by which to notify the grantee relative of the decision with regard to the need for the change to the protective payee and the reasons for this.

Mississippi Debit MasterCard

In cases involving money mismanagement only, the Mississippi Debit MasterCard to which the TANF benefit is posted each month will be issued in the name of the protective payee. The EBCR screen in MAVERICS should be coded where the protective payee is the individual who has access to the TANF benefits rather than the parent/caretaker relative. *See Benefit Availability later in this chapter.*

CHANGE IN OR RELEASE OF PROTECTIVE PAYEE

Changes will come about in the circumstances of a protective payee that will require his release from this responsibility and it is also possible that sometimes a payee's services will not be satisfactory. The worker will review the plan and the service which the payee has given before discussing either the release or the change of the protective payee. Use the EBCR screen in MAVERICS to enter or delete the name of a protective payee.

Some of the reasons for a finding of unsatisfactory service on the part of the protective payee include:

1. His failure to use the assistance payment in ways which the TANF family considers important and which are reasonable, or failure to consult the grantee relative in such matters.

2. Violation of the confidential nature of the relationship with the family or the agency.

3. Failure or inability to meet the terms of the agreement with the Department, such as failure to make the required reports or to give other needed information.

A new **MDHS-EA-314, Agreement Between Department of Human Services and Protective Payee,** must be completed when there is to be a change in protective payee.

REVIEW OF PROTECTIVE CASES

TANF cases in which a protective payment has been agreed upon must be reviewed periodically. Reconsider the plan at every six months' redetermination unless circumstances warrant a special review between six month intervals. Determine the status of the case and either continue the protective payment or remove the protective payee.

Money Mismanagement Cases

Review these cases at the regular redetermination time and at any other time as needed after initiation of the protective payment. This review must result in one of three choices:

1. Release of the protective payee and restoration of access to the benefit to the grantee relative.

2. Continuation of the protective payment because improvement has not been made in the ability of the relative to manage, or sufficient improvement has not been noted.

3. Another plan must be made for the child, such as working out a plan for the child to live with another grantee relative, a foster home placement, or the appointment of a legal guardian for the grantee relative.

Cases on protective payment because of mismanagement of money cannot continue for more than one year, except that the payee may be continued for not more than three more months if this additional time is needed in order to complete other plans for the care of the child. Fifteen months must be the maximum period of time for cases of protective payment.

NOTIFICATION AND RIGHT TO REQUEST HEARING

When the decision is reached that a change must be made in the protective payee or in the plan of care for the children, notify the grantee relative in writing, confirming the discussion of the matter with him. Include with the notice a hearing pamphlet to explain the right to request a fair hearing in accordance with the regular agency procedures given in *Chapter 13, Hearings*.

MIS OPERATIONS UNIT

The MIS Operations Unit is responsible for transmitting the assistance benefit information to the EPPIC system based on authorizations in the MAVERICS system.

FACTS ABOUT BENEFIT ISSUANCE

Minimum TANF Benefit

Payment is defined as the expenditure of public tax money on the basis of proper authorization with respect to the eligibility to specified individuals and TANF families. Benefit issuance is made through the Mississippi Debit MasterCard Program.

Mississippi does not issue a TANF benefit in an amount under $10. There are two exceptions to this rule:

1. A TANF benefit will be issued for less than $10 when recoupment withholding is the sole reason for a TANF benefit being below $10; and

2. When a corrective TANF benefit should be authorized in a lesser amount.

Families who receive reduced or no payments due to the stated exceptions are subject to the rights and responsibilities of money payment recipients.

EXAMPLE: An individual is eligible for TANF benefit in the amount of $16 each month. Recoupment is established against a prior overpayment. The minimum recoupment amount is $10 per month, leaving $6 for issuance to the individual. This TANF benefit will be issued as recoupment withholding is the sole reason the payment is less than $10.

3. The TANF benefit is an unrestricted benefit and the county worker cannot place restrictions upon its use. See, however, the provision for a protective payee in Chapter 7, Protective and Vendor Payments.

Description of Benefits

TANF benefits are the expenditure of public tax money on the basis of proper authorization with respect to the eligibility of specified individuals and TANF families. TANF benefits are issued via the EPPIC system by the Mississippi Department of Human Services to a parent or other grantee relative on behalf of eligible children. The benefit is issued to the payee or to his protective or emergency payee. Generally, benefits are unrestricted in their use. However, Federal law prohibits access to TANF funds from ATM or EBT devices located in liquor stores, gambling establishments, or strip clubs. See also the provision for a protective payee, Chapter 7, Protective and Vendor Payments.

Issuance of Benefits

After the county office authorizes payment, the process is as follows.

1. Issuance of benefits is completed by the contractor utilizing the EPPIC system. The contractor is responsible for all issuance after receipt of eligibility information from Management Information Systems (MIS). Eligibility information will be sent to EPPIC on a daily and monthly basis. The monthly file for TANF will be sent at rollover. The daily file will contain initial applications, reinstatements, and any other benefit authorizations for the current or a previous month.

   It is the responsibility of the county office to complete case actions within a time frame that will allow households to participate in accordance with timeliness policies. Households must be advised of participation procedures and method of benefit delivery.

2. For other authorizations on the continuing-case payroll, benefits are issued monthly at "rollover", which is the common terminology for the payroll deadline.

   Rollover occurs on the 23rd of the month unless the 23rd falls on a weekend or holiday, then rollover is the Friday before. At rollover, MAVERICS "rolls" into the next month, and the current system month changes. All cases with an authorized benefit at rollover will be copied exactly into the new month, with an authorized benefit at the same level as the previous month. This automatic creation of an authorized benefit is the reason it is not necessary to actually work every case each month. However, cases with changes must be completed by rollover or an incorrect benefit amount will be authorized for the following month, requiring either a corrective payment or claim.

   EXAMPLE: November 23 occurs on a Sunday. The payroll deadline for December checks will be Friday, November 21, which is called "rollover". All TANF cases requiring a change must be worked and authorized no later than close of business on November 21 because the December benefit will be transmitted that night. Any corrections must be handled through improper payments procedures once benefits are paid out. On Monday, November 24, when MAVERICS becomes available, all open cases with an authorized benefit for December will now have a CURRENT MONTH of January on CAP2 and work will begin for January benefits, which must be completed by next rollover which will occur on Tuesday, December 23.

Benefit Availability

TANF recurring benefits will be available on the first day of each month, when the benefit is processed prior to the payment month, even if the date falls on a weekend or holiday. On that day, benefits will be available by 6:00 a.m. EST. If the TANF benefit is processed in the

payment month for a past month the benefit will be available one day after authorization. The Mississippi Debit MasterCard is the means by which the recipient accesses benefits. The card is issued to the TANF payee upon authorization of the initial benefit(s). The payee will receive the card within six (6) business days after benefit authorization. The payee should have been given MDHS-EA-303A, Recipient Information Sheet, during initial interview. This form gives instructions for and use of the debit card (See Generic Forms, Chapter 3).

Payment as a Result of a Hearing

After a hearing has been held, Administrative Hearings will furnish the county office and the regional director with a copy of the letter to the claimant giving the decision regarding the hearing.

If the county office is required to do additional work, such as the revision of the budget, after the decision of the Hearings Officer, the Director of Administrative Hearings will give the county proper instructions as to the action to be taken.

In cases in which the hearing is requested during the period of the advance notice, the TANF benefit is still in effect, and if the decision of the hearing is that eligibility continues, the county office must authorize benefits. If the decision of the Hearings Officer is that ineligibility exists, the county office will terminate the TANF benefit and prepare a claim for benefits received during the period of time during which the case would have been closed if not for the hearing request. See Chapter 13, Hearings, for the full discussion.

Unauthorized TANF Transactions

Federal law prohibits TANF benefits from being accessed from an Automated Teller Machine (ATM) or Point-of-Sale (POS) device physically located in:

- Liquor stores. Also known as package stores, such establishments sell, either exclusively or primarily, intoxicating liquor.
- Gambling establishments. Such businesses offer, as its primary service, casino, gambling, or gaming activities.
- Strip clubs, defined as any retail establishment providing adult-oriented entertainment in which performers disrobe or perform in an unclothed state for entertainment.

When it is determined that such unauthorized transactions have occurred, TANF households will face a 50% reduction in the monthly assistance unit payment. Benefits will be reduced for each month such a transaction occurred, with the penalty being imposed as soon as possible after advance notice of the reduction. For example, if it is found in February that unauthorized transactions occurred in January and February, the penalty would be imposed for two months, beginning as soon as March, but no later than April, depending on the expiration of the ten day advance notice of the benefit reduction.

Penalties for unauthorized benefit use should not be imposed at the same time or be combined with another sanction or disqualification. The benefit usage penalty should only be imposed the month after another sanction or disqualification has concluded. Workers should set an alert for purposes of imposing the benefit use penalty to begin with the next possible month after the expiration of another sanction or disqualification.

DEFINITION

A redetermination is a review, or reevaluation, of a recipient's situation to determine whether or not eligibility continues for TANF and whether the TANF benefit, if any, is correct. A review of all variable eligibility factors is called a regular redetermination. A review of one or more but not all of these factors is called a special redetermination. The terms “review” and “redetermination” are interchangeable and refer to TANF. “Recertification” is a SNAP term and is not appropriate for TANF. The term “reevaluation” is often used when referring to the simultaneous handling of multi-program cases.

FREQUENCY OF REDETERMINATIONS

Generally, TANF cases must be redetermined every 12 months. In some instances, the TANF review period may be adjusted when added to an existing SNAP case. **Example:** A SNAP case is certified for 12 months, June 2010-May 2011. The household applies for TANF and is approved effective October 2010. MAVERICS will set the TANF review date for June 2011 (8 months) to coincide with SNAP certification through date of May 2011.

For caseload management purposes, when a new SNAP case is certified for 12 months and is being added to an existing TANF case, the TANF review period may be lengthened. **Example:** a TANF case with a 12 month review period June 2010 through May 2011 (June 2011 review date) applies for SNAP in August 2010 and is given a 12 month certification period August 2010 through July 2011. At authorization of the SNAP benefits, the TANF review period will be lengthened to August 2011 (September 2011 review date).

MAVERICS will issue Interim Reports to households for return by the sixth month of the review period. The reports will require households to provide information on changes in household circumstances. Failure of households to return completed interim reports will cause case closure.

County staff should use the worker alerts in MAVERICS, system reports, and county caseload management controls to ensure that redeterminations are processed timely.

VERIFICATION REQUIREMENTS

All variable eligibility factors must be discussed and verified for each regular redetermination and when changes occur within regular redetermination periods. Factors which do not change, such as relationship degrees, need not be reviewed unless information is received that raises a question about the validity of previous information.

When a case is closed or an individual removed from a case due to death of a member of the TANF budget group, the date of death must be verified and documented in the case record.

Verification of eligibility factors is discussed with the related topics in Volume III. For example, see *Chapter 4* for income verifications and *Chapter 3* for verifying relationship, age, etc.

ACCRUAL RIGHTS OF RECIPIENTS

The recipients rights to the TANF benefit accrue on the first day of the month provided he is alive and eligible on that date. Timely change reports and timely county action to adjust benefits for the next possible month will not result in loss of eligibility or a claim on the case.

Due to accrual rights, a TANF family is eligible to receive a TANF benefit for the month in which a child becomes 18, the month in which the child or payee dies, or that in which the child or payee marries. This also includes the remarriage of legal parents of TANF children. Also, the grantee relative is eligible to receive a TANF benefit for a child who leaves home within the month, provided a TANF benefit is not issued to another grantee relative for that child for the same month.

This means that the grantee relative may receive a TANF benefit for a child who is committed to a public institution on or after the first day of the month for which the TANF benefit is issued or for a child who enters foster care within the month for which the TANF benefit is issued.

PREPARATION FOR THE RE-EVALUATION

Before the redetermination interview is held, the worker will study the case material to determine:

1. The eligibility factors which must be discussed with the recipient and verified by the worker.

2. Any changes in policy which may affect the recipient's eligibility.

3. What potential income and resources are indicated that should be investigated and validated.

4. What new information is needed and the steps that must be taken to secure that information.

5. SSI online, WTPQ and INIM inquiries should be checked as well as other accessible data matches.

INTERVIEW REQUIREMENTS FOR REGULAR REDETERMINATIONS

Prior to the Interview

The grantee relative must complete MDHS-EA-900, page 1 at minimum, but should also be encouraged to complete pages 2, 3 and 4. If the grantee relative is unable to complete the MDHS-EA-900, a county staff member should assist him/her.

Individuals to be Interviewed

The regular TANF redetermination must include a personal interview with the grantee relative. When both parents are in the home, it is not necessary to interview both, but the worker may do so if he thinks it advisable. When a medical review is due, the worker must conduct a face to face interview, unless the individual is too ill to attend and the social information is documented to explain the reason why there was no interview. Verification of the income and resources of both parents is required.

Place of Interview

Normally the interview will be held in the Economic Assistance Office and will be scheduled by the worker using a notice available from MAVERICS. The interview may be held in the home or another place of mutual agreement when the recipient is incapacitated and unable to visit the county office.

NOTE: If the individual who must be interviewed refuses or fails to respond to the request for an interview, continuing eligibility cannot be established, and sending a notice of closure is appropriate.

Content of Interview

The worker will:

1. Explain to the grantee relative that they will actively participate in the interview process. Review the MDHS-EA-900 with him/her. Ensure the grantee relative understood and answered each question exploring any vague or discrepant information and ask him/her to add or correct information as necessary. The worker will collect eligibility data, enter the data on-line, and document information on the MDHS-EA-900 as needed. Review with the caretaker relative any form applicable to the recipient's situation, including the Personal Responsibility Contract (MDHS-EA-312) and Rights of Applicants and Recipients (MDHS-EA-300).

2. Seek verifications by having a clear understanding as to the verifications which the individual will obtain, the time the verification should be returned, and the sources the worker will contact. Obtain the individual's signature on any forms to be used to secure verifications from sources requiring consent of the individual prior to release of information, such as medical records, bank clearances, employment/wage verifications, etc.

   Information not verified during the interview should be coded in MAVERICS as pending using "PE" and a date in the verification field. The date should be set for 10 days from the date of the request for information. This will ensure the case will not be authorized without all necessary verification on file.

(See MAVERICS, Chapter 3, The Pending Process).

3. Make any referrals indicated, such as for WIC, family planning, TANF Work Program, child support, Vocational Rehabilitation, etc.

4. Explain family cap requirements. See Chapter 3, Family Benefit Cap.

5. Review the individual's status regarding time limit counters and explain that status. Help the individual make any appropriate choices related to continuing assistance. See Chapter 3, Time Limits.

6. Again explain the conditions under which the recipient receives assistance; that is, the responsibility for reporting changes, the rights to assistance, the appeal and to have a local or state hearing.

7. If additional information is needed to make a final eligibility determination, use the appropriate MAVERICS notice to request the information. Print a copy of all pages of the notice for the client, discuss each item that is needed, and explain when the information needs to be returned (send the notice to history in MAVERICS).

8. When requested information is returned, make updates/changes to IIDO and to MAVERICS data entries as needed and process the case in the system. See Chapter 7, Gathering and Documenting Information, for instruction on forms to be filed in the case record.

9. Rework the case in the system. MAVERICS will automatically set the review date when benefits are authorized.

CHANGE REPORTING

Time Frame for Reporting Changes

All TANF households are considered simplified reporting households. These households are only required to report the following changes:

NOTE: Mandatory TWP clients and Exempt TWP clients have different timely reporting requirements. See Chapter 6 for details.

1. When the household's total gross monthly income, earned and unearned, meets or exceeds 185% of the need standard for the household size at the time of their current review period. Disqualified household members will not be included in the household size when determining if the household income meets or exceeds 185% of the need standard. This change MUST be reported by the 10th of the month following the month in which the change occurred. If the 10th day falls on a holiday or weekend, the client has until the next business day to report the change.

2. When it becomes clear that a TANF child will be out of the home for more than 30 days, the parent/caretaker must report this within 5 days. Failure to report this absence within the required 5 days will result in disqualification for the person who fails to report timely.

3. When the entire household or the grantee relative moves out of state. This must be reported within 5 days.

TANF recipients must be advised at application and case reviews of change reporting requirements and penalties, reminding them that any disqualification or penalty for failure to comply with TANF program requirements other than work and child support will mean a corresponding 25% reduction in SNAP benefits.

Reporting Requirement When a Child Leaves the Home

The parent/caretaker must report within 5 days when it becomes clear that a TANF child will be out of the home for more than 30 days. Action must be taken to remove the child if he/she will be out of the home for a full calendar month. The case must be documented to show why the child should or should not be removed from the grant. This timely reporting requirement does not change the temporary separation reasons in *Chapter 3, Living with Grantee Relative*.

The case must also be documented to show *"when*

The length of the disqualification is calculated by the number of months for which the change should have been made, but at least one (1) month, for any failure to report the absence timely, even when the case action can be taken timely to remove the child. The worker must set an alert to resume eligibility at the end of the disqualification period for the disqualified individual and then send the TANF change notice to the client to let him/her know the reason for the benefit change.

If removal of the child who is absent from the home causes the case to close and the report was not provided timely, notate the case that a disqualification should have been imposed. Close the case and prepare a claim if needed. If the individual reapplies for benefits within the month following closure, apply the appropriate disqualification period. Otherwise, consider the disqualification period served.

TIME FRAME FOR HANDLING CHANGES

Changes in the recipient's situation come to the attention of the Economic Assistance Office not only through regular redeterminations but also through reports from the recipient, the Income Eligibility Verification System (IEVS), quality control, people in the community, and other sources.

The worker must follow up on all information received through IEVS and on any information which represents a change that has a bearing on eligibility. Once the change is reported, the worker will have 10 days to request information when verification is required and then 10 days to take action on the change once the information is received. The required change in status should be made at the next possible payroll date after the change occurs and the facts have been established.

The next possible payroll on which action can be taken will be:

1. The next month after the change occurred and facts have been established when:

    a. The change is a grant increase or procedural change, such as transfer of children, transfer between counties, change in name or address, or technical change. If rollover has occurred when the change resulting in an increase is processed, it will be necessary to issue a supplement for the next month. See Volume X for instructions.

    b. The change is a reduction or closure action which does not require advance notice.

c. The change requires an advance notice but the ten-day advance period will expire prior to the first of the month for which action is desired and the individual does not request a hearing within the ten-day period. If the change is a closure and the case is in FROZEN STATUS in MAVERICS at rollover, the system will not transmit the benefit information to the EPPIC system if the ten days of the FROZEN STATUS period will expire on or prior to the last day of the current calendar month. However, if the individual supplies information which changes the decision to close the case or if the individual requests a hearing on a matter other than general agency policy or law, the worker should take steps in MAVERICS to authorize a correct or continuing benefit for the following month. This procedure will change the case STATUS to OPEN, and the benefit will be transmitted to the EPPIC system.

NOTE: If the case is in FRozen status because of a pending TWP conciliation when the change report is received, the TWP conciliation must be handled before any other changes can be made.

2. The second month after the change occurred and/or facts were established when the action requires an advance notice, the ten-day period will extend into the month after the notice was sent, and the individual had not provided information to reverse the decision.

PROCESSING CHANGES

Processing Reported Changes in Income

When a household reports a change in income or the change becomes known to the agency the worker must review the information to determine if the case should be closed or a change in benefits is needed. If a household is expected to continue to meet or exceed 185% of the need standard for TANF for their household size at the time of their current review period, the case should be closed and the appropriate notice sent to the household. If the information reflects a change in scheduled hours and/or rate of pay, but does not cause case closure, prospective change should be processed based on reasonably anticipated income**.** Keep in mind the household must pass the gross and net income test to continue to be eligible for benefits. When the information does not reflect a change in scheduled hours and/or rate of pay, the previously established prospective income should remain in the case and no case change is needed. In either situation, it is imperative that the case be documented to explain why a change was or was not processed and the appropriate change notice sent to the household.

Processing Changes Known to the Agency and Voluntarily Reported Changes

Changes which become known to the agency from any source will be processed as appropriate. Known to the agency is defined as "known to the division". For example, if information is known to another division such as Child Support or Family and Children Services, until the information is reported to the Division of Economic Assistance it is not considered known to the agency. If information is reported by another division, a change should be made as necessary. Information received via IEVS, such as BENDEX, SDX, or unemployment benefits, will be considered verified upon receipt and a case change processed if needed. All other IEVS should be investigated

The **MDHS-EA-900 Supplement form** will be used when the household requests that an individual be added to the TANF benefit. The form is to be signed by the payee making the request prior to adding the individual to the case. The form will be documented as needed with information related to the new individual.

Should the household report on the interim report the addition of a household member to be included in the case, the name, relationship, social security number, date of birth, declaration of citizenship, and date the new person was added to the household must be noted on the form. If all necessary information is provided on the interim report, use of the 900 supplement form to add a person to the case will not be necessary.

CLIENT NOTIFICATIONS

The recipient has the right to be notified of any changes in the amount of the TANF benefit and in the eligibility of any member of the budget group. Refer to topics in this material for the discussion on notices which must be sent and to Volume X for instructions for generating the notice forms.

AUTHORIZATIONS

The eligibility worker or supervisory staff may authorize continuing eligibility and changes in eligibility and benefit amount. This includes redeterminations, and changes reported by other means.

SPECIAL PROCEDURES

Transfer of Cases Between Counties

Case transfers require the use of appropriate MAVERICS procedures. See Volume X for specific MAVERICS transfer procedures. Counties must communicate and coordinate case transfers, especially when a generic case is involved, to prevent undue hardship on the recipient.

Cases to Transfer

When a county office becomes aware that a recipient or TANF family group is living in another county in the state, the worker will determine from the recipient whether the stay out of the county is a visit or a permanent move. If the recipient states that the stay is a visit (less than 30 days), set a tickler to send a notice of adverse action prior to rollover to freeze and close the case unless the recipient reports his return. If the recipient states that the stay is a permanent one, transfer the case to the new county in which the recipient is living and notify the new county of the transfer.

Responsibilities of Transferring County

Prior to transferring the case, the worker will review the case record, prepare any improper payment report indicated, and take appropriate steps regarding changes that affect the recipient's eligibility or TANF benefit, including the handling of all pending IEVS or other alerts. Cases may be transferred to a new county in open or received status, depending on case actions pending, if any, at the time of transfer (see “Transfer Procedures/Add-a-Program” below). Appropriate steps include the following:

- Entering change data in the system when the transferring county is aware of an increase due the assistance unit. Authorize the increase in the TANF benefit and send notification to the recipient prior to transferring the case through the MAVERICS system.

- Entering change data and sending advance notice of a decrease (not a closure) in assistance when the county is aware that an adverse action requiring advance notice should be processed at the time of the transfer. For example, the transferring county may discover at the time of transfer that a child will be turning 18 in the next month. The transferring county will initiate advance notice to the TANF payee and enter change data in the system to handle removal of the child from the money grant simultaneously with the transfer between counties.

- Processing closures rather than transfers when the transferring county is aware of ineligibility prior to transferring the case to the receiving county.

- Ensuring that the Case Documentation (CADM) screen in MAVERICS is documented and the receiving county notified regarding any pending action, such as an outstanding request for information, prior to transfer (see "Note" below). Whenever the transferring county has an outstanding pending action requiring additional information at the time of case transfer, if the verification is received at any time by the transferring county, that office must scan documents related to the request to the appropriate folder in Interwoven/Worksite. The receiving county must be notified that the requested verification is in the electronic case record.

- Processing address changes on the ADDR screen in MAVERICS. Once all pending actions (such as, but not limited to, claims, IEVS, or other alerts) are handled, MAVERICS notice A801, Transfer Between Counties, should be sent to the household. The case should then be transferred to the receiving county through the Case Record Control (CARC) screen in MAVERICS.

  In cases for which the county has received IEVS State Resource Data, the worker should make every effort to resolve discrepancies and document accordingly prior to case transfer. When it is not possible to resolve questionable information, transfer the State Resource Data to the new county according to security procedures established to protect the confidential nature of these forms.

- Providing the receiving county with any information on the case situation that affects eligibility and which may come to the attention of the transferring county after the transfer has been processed. For example, the recipient may notify the transferring county of a move to a third county after the case had been transferred to the receiving county.

Responsibilities of Receiving County

When a system alert is received indicating a case has been transferred, the county director or his/her designee in the receiving county must conduct a desk review of the case, accessing case information through MAVERICS and Interwoven/Worksite. The review should aid in determining what actions, if any, should be taken or what changes may be anticipated prior to assigning the case to the appropriate case worker. Anticipated changes in income, interim reports due, or an upcoming full case review may be discovered during the desk review. The availability of TANF Work Program (TWP) placements and supportive services in the receiving county must also be assessed for the received case.

Any other required actions, such as handling pending actions not completed by the transferring county, should be handled as necessary. See “Note” below.

The established review period for the TANF-only case will not change. For a TANF/SNAP combination case transfer, the SNAP certification period will remain unchanged.

Transfer Procedures/Add-a-Program

When a report is received that a TANF-only household is moving to another county and intends to apply for SNAP, the transferring county should handle all pending actions (claims, IEVS, and other alerts), document the change of address on the ADDR screen in MAVERICS, and ensure that all steps for transfer are followed according to instructions noted above under “Responsibilities of Transferring County”. Regardless of the timing of the request/application, the receiving county must handle eligibility determination for the new program.

Example: The Jones household receives TANF benefits, reports to their worker in County “A” that the family is moving to another county and wants to apply for SNAP. No SNAP application is submitted at the time of the reported move. County A will ensure that all necessary transfer procedures and any pending actions are handled, then CARC the case to County “B”. In turn, County B will be responsible for handling the household’s request to add SNAP, such as providing the household an appointment, conducting the interview, and obtaining necessary verification to determine eligibility for SNAP.

Example: The Jones household, receiving TANF benefits, submits an application for SNAP in County A on April 5. County A schedules the add-a-program appointment for April 11. On April 9, Ms. Jones reports the household has moved to County “B”. County A must ensure that the application and all documents are scanned to Interwoven/Worksite and that all necessary transfer actions are handled prior to case transfer. County A must notify County B of the transfer and pending SNAP application. County B must provide the household with rescheduled appointment, adhering to timeliness standards of the application submitted April 5.

Communication between each county is essential to ensure that transfer procedures are handled timely.

NOTE: In add-a-program situations, whether handling a new TANF or new SNAP application, normal timeliness standards will apply.

Transfer of Combination Cases

When a household receiving both SNAP and TANF reports a move to another county, the usual procedures for transfer must take place, with all pending actions handled and the case address changed on ADDR. The worker should send to the household the A801 Transfer Between Counties notice for the TANF case and the F801, SNAP Transfer Between Counties notice for the SNAP case. Once all necessary transfer action has been taken, the case should be CARC'ed to the new county.

Transfers Involving Claims

Discovering/identifying a claim means that necessary information has been obtained in order to work the claim. Therefore, in a transfer situation, claims identified by a transferring county must always be completed by that county prior to transferring a case to a new county. When a request for information has been issued for the purpose of obtaining information to identify a claim, when/if the information is provided will determine which county will be responsible for working the claim.

Example: A worker in County "A" requests wage information from an employer for a possible claim and receives the necessary verification. The worker in County A then identifies the claim. While the claim is in ID'd status, a request for case transfer is received from County "B". Prior to taking the necessary steps to transfer the case to County B, the County A worker must process the claim. However, if the requested verification for working the claim had not been received by County A at the time of the case transfer request, the County A worker should document the case record and notify County B regarding the pending request prior to case transfer. If/when the requested verification is submitted, the worker in County B would be responsible for identifying and working the claim.

NOTE: Pending actions must be handled as efficiently as possible by the first/transferring county prior to any case transfer.

Example: Ms. Jones reports she has started a new job and her case worker provides her a request for information the same day. Four days later, Ms. Jones reports her household is moving to another county. If Ms. Jones provides the requested verification prior to her report of the household's move, the first/transferring county must make the appropriate changes to the case and notify the household of the change, prior to the transfer. However, if the verification is not provided prior to or at the time of the report of the move, the transferring county should document the case record regarding the pending request, then take the usual steps to transfer the case to the receiving county. The transferring county must notify the receiving county of the

pending request for information at the time of case transfer. Should the transferring county receive documents related to the pending request after case transfer, the verification should be scanned to the electronic case record and the receiving county notified. The receiving county will then be responsible for handling the case change based on if/when the verification is received.

Interim Reports

In instances when a household moving to a new county within the state reports the move by returning an interim report to the first/transferring county, the first county must process the report prior to case transfer, if possible. Generally, the same procedures for interim report processing will apply. If the household's report of changes requires verification, normal interim report procedures for requesting information will be required. If the transferring county receives the requested verification, the report should be processed and the case transferred to the new county, following normal transfer procedures. Should the transferring county not receive requested verification, resulting in case closure, or the case closes due to no return of the interim report, the case status should be documented on CADM and the receiving county notified. All possible action should be taken by the transferring county prior to case transfer. See Chapter 6, INTERIM REPORTS.

If the recipient moves to a third county before receiving a TANF benefit from the second county, the second county will take appropriate action to transfer to the third county as soon as possible.

CHANGES WITHOUT NOTIFICATION

When households relocate and the former county is not made aware of the change, closed and currently active cases may be registered in the following manner:

Closed Cases - Registered in New County

For households that move to a new county and reapply for benefits, the application may be registered in the new county, with MAVERICS automatically CARCing the case to the new county. The case will be ready for processing in the new county the day after registration.

Example: The Smith household moves from County A to County B and applies for SNAP. The household's previous SNAP case closed 6 months ago. When the application is registered, the case will be automatically CARCed from County A to County B. The application will be available for processing the next day.

Active Cases - Add-a-Program

For households participating in one program that move to another county and apply for a new program, an application may be registered in the new county. Upon registration, the currently active case in the former county will be automatically CARCed to the new county. MAVERICS will issue notice X820, SNAP/TANF Transfer, informing the household that the currently active case has been transferred to the new county of residence. At case transfer, the former county of residence will be notified via system alerts issued to the case worker and director in that county.

Example: The Jones household, currently receiving SNAP benefits in County A, moves to County B and applies for TANF. At registration of the TANF application, the household's SNAP case will be automatically CARCed to County B. This action will generate system notice X820, SNAP/TANF Transfer, notifying the household that the SNAP case is being transferred to County B. The case will be available for processing the next day.

Example: A TANF Work Program (TWP) household in County A moves to County B and applies for SNAP. The household's relocation is not reported to County A. At registration of the SNAP application, the currently open TWP case will be transferred to County B. The SNAP application will be available for processing the day after registration. County B will be responsible for assessing the availability of TWP placements and supportive services in County B.

At the time of such case transfers, there may be instances where pending actions on currently active cases remain unresolved by the former county of residence, such as, but not limited to, claims, IEVS, alerts, cases returned to workers for correction, TWP-related issues, etc. Upon discovery of outstanding case actions, communication between the former and new county of residence is required in order to resolve issues, as needed.

Transfer of Children

When two or more responsible relatives assume the care of children in an active case and payments should continue without a break, the worker will follow procedures set out in *Volume X, Transfer of Children Between Cases*. Refer to those instructions for a detailed definition of this term. When the children move to another county to live with another grantee relative, the first county is responsible for furnishing eligibility information to the second county on those children who have gone to live in the other county. The worker will:

1. Give the basis of deprivation for each child involved, the appropriate date or dates of the loss of parental support and care, and the documentation of the loss.

2. Provide a written summary of the name, relationship, date of birth, name of father and mother, alien status, and verification source.

3. Describe the income and resources available to the child or children. Specify whether the payee has been receiving Child Support, Social Security, SSI, veteran's benefits or other income for any of the children.

4. Describe the reason for the move of the grantee relative and children or the children only from the first to the second county. The worker should use the CADM screen in MAVERICS to document the case situation.

For Staff Members and Their Relatives

The policy set out in *Chapter 7*, *Special Procedures*, on handling applications for employees and their relatives is applicable for redeterminations also.

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OVERVIEW

This material discusses the Up-front Job Search requirements for TANF applicants, the Vocational Rehabilitation requirements for TANF applicants and recipients, and the eligibility requirements for the TANF Work Program (TWP). It defines the individuals who are required to participate in the TWP and those who are exempt from work requirements or wishing to volunteer for the TWP. This material also defines the work processes case managers will complete during the TWP intake process for TANF applicants and TWP participants.

DETERMINING ELIGIBILITY FOR PARTICIPATION IN UP-FRONT JOB SEARCH OR VOCATIONAL REHABILITATION ACTIVITIES

Caseworkers at each local county office determine whether TANF applicants are required to participate in and comply with Up-front Job Search (UJS) or Vocational Rehabilitation (VR) requirements during the TANF application processing period. Refer to Chapter 3, Office of Vocational Rehabilitation (OVR), for additional information. Caseworkers also determine whether TANF recipients are required (mandatory) to participate in or an exempt from participation in the TWP. Refer to Chapter 3, TANF Work Program, for additional and more detailed information.

When it is determined that a TANF applicant is referable to case management for Up-Front Job Search or Vocational Rehabilitation requirements, the eligibility worker will schedule a TWP intake appointment with case management within three (3) days. In small counties, TANF applicants may be referred to case management the same day as the TANF interview. Based on case actions taken by the eligibility worker, MAVERICS will create an Up-Front Job Search (UJS) or Vocational Rehabilitation (VR) file which will allow the case manager to have immediate, real time access to the file via JAWS. The eligibility worker will document the referral, along with the appointment date and time, via the MDHS-EA-319A, Work Program Referral Log, which will be forwarded to the case manager supervisor daily. The case manager supervisor will use the MDHS-EA-319A to make case manager assignments. In counties where the eligibility worker and case manager are the same, the MDHS-EA-319A will not be necessary. When a manual referral is received, the case manager will access the Pull Case Data (PUCA) screen in JAWS to “pull” the referred client. Once the client is “pulled,” the client’s information will display on the Client Information Inquiry (ICLI) screen and assign the client to the case manager’s caseload. The case manager will then schedule a TWP intake appointment in JAWS for the date and time listed on the MDHS-EA-319A. TWP intake appointments cannot be rescheduled beyond three (3) days from the initial appointment date.

NOTE: The TANF Program Status for all referable TANF applicant cases will be in REceived status. The Received status will update to PEnded status if the application is processed with pended information. The TANF case status and date will be updated to OPen at approval.

Up-Front Job Search

Eligible TANF applicants are required to complete the TWP intake process, meet with a WIN Job Center representative and complete job search assignments before their TANF application can be approved, if otherwise eligible. The case manager will work with the Economic Assistance job readiness trainer and the WIN Job Center representative to coordinate UJS assignments. UJS assignments may include MDHS employer referrals, referral to the local WIN Job Center for work registration, STEPS Program application, WIN employer referrals and/or other assignments deemed necessary. The applicant may be required to make physical contact with a maximum of three (3) employers. The county director or designee will determine the job search activities to be required based on the availability of job opportunities within the county and/or surrounding area. The case manager may recommend good cause for not requiring an applicant to participate in job search activities based on individual situations or circumstances. Good cause will be approved by the case manager supervisor. For example, an applicant who is under the age of twenty and enrolled in a secondary education or GED program may not be required to seek employment. In this situation, the individual's Employability Development Plan (EDP) will include the anticipated educational activities and the case manager will enter "NR-not required" as the completion code on the Maintain Up-front Job Search (MUJS) screen in JAWS.

Office of Vocational Rehabilitation

TANF applicants and recipients who have been determined to be incapacitated (eligible for the JB code) or who report they are unable to work will be required to apply for vocational rehabilitation (VR) services and complete the VR intake process. TANF applicants are required to complete the TWP intake process, meet with a VR counselor and complete the VR intake process before their TANF application can be approved, if otherwise eligible. TANF recipients who were not referred to VR during the TANF application period will be referred at their next regularly scheduled TANF redetermination appointment. TANF applicants and recipients who are referred to VR must take a copy of the MDHS-EA-331, Report of Medical Examination, Vocational Rehabilitation Referral, T022, along with any other medical documentation, to their VR appointment and present the paperwork to the VR Counselor. The VR Counselor will not interview a TANF applicant or recipient without the proper medical documentation.

Applicant Referrals to WIN or Vocational Rehabilitation

The case manager will work with the WIN and Office of Vocational Rehabilitation (OVR) designees, at the local level, to schedule TANF applicant appointments with WIN Job Center or OVR counselors. An applicant who is referred to the WIN Job Center or the OVR will be given a referral form. The case manager will generate JAWS Notice T009, WIN Job Center Referral, or T022, Vocational Rehabilitation Referral, contact the appropriate entity to schedule the appointment date and time and enter the information on the T009 or T022. The applicant will give the T009 or T022 to the WIN Job Center or OVR representative at the appointment. The WIN/VR representative will complete Section B, Page 2, to document the status or outcome of all UJS or VR assignments and fax or mail page two back to the local DHS county office within five working days from the date of the T009/T022. Forms that cannot be returned within five working days must be returned no later than 10 days. Upon receipt of the completed T009/T022, the case manager will code the MUJS screen according to the verification received.

NOTE: TANF applicants will be referred to the WIN Job Center that is most accessible or preferred by the individual. Therefore, the WIN Job Center location will be determined prior to scheduling the interview. The individual will be required to report to the location where the appointment is scheduled.

Notification of Cooperation

When it is determined that an applicant fully completed or failed to comply with the UJS or VR requirements, the case manager will access the Maintain Up-Front Job Search (MUJS) screen and enter the appropriate completion code. Once a completion code is entered, JAWS will interface with MAVERICS through the nightly batch process. MAVERICS will code the Authorization of Supervisor (AUSP) screen and send an alert to the TWP Alerts Due Today or Overdue (TWAD) screen informing the worker to process the application. The eligibility worker will process the application according to the code displayed on the AUSP screen. MAVERICS will not allow the application to be approved if a code other than FC (fully complete), DC (discontinue client) or NR (not required) is received from JAWS. If a denial code is received, MAVERICS will automatically deny the application based on the denial code received from JAWS and notify the applicant via MAVERICS Notice X710, TANF Up-Front Denial. MAVERICS will generate an alert to the eligibility worker that the application has been denied.

NOTE: The thirty-day timeliness standard for processing TANF applications applies.

MAVERICS will not allow the eligibility worker to approve or deny applications for individuals who are required to cooperate with up-front requirements until the case manager enters a UJS/VR completion code on the MUJS screen. The eligibility worker and case manager will work together and set ticklers, if applicable; to ensure timeliness standards are met. In situations where applicants cannot, due to no fault of their own, complete the up-front process timely, the case manager may use the "NR-not required" code to allow the application to be processed timely. Using the "NR" code for this purpose will be approved by the case manager supervisor and the case record documented accordingly.

A nonexempt TANF applicant is not considered a TWP participant until the TANF case is approved and the TANF Program Status code is updated to "OPen" in JAWS. At any point prior to TANF approval, a referable applicant (UJS or VR) who fails to comply with any aspect of UJS or VR, without good cause, will have his/her TANF application denied. Further clarification:

- The TANF application for a UJS referral can be denied, after the 10th day, for failure to provide requested information for eligibility.

- The TANF application for a potential VR referral will be held and processed according to timeliness standards.

Once the TANF application for a referable adult is approved and the case is "OPen" in JAWS, the individual will be considered a TWP participant and ongoing TANF/TWP policy and procedures will apply.

DETERMINING ELIGIBILITY FOR PARTICIPATION IN TWP

TANF mandates participation in approved work activities for all adult TANF recipients who are work eligible and do not meet specific exemption criteria. TANF benefits will not be paid to individuals who are not participating in approved work activities after being determined "work eligible" and referred to the TWP. The family's TANF time limit will be reduced from a 60-month time limit to a 24-month time limit.

Work-eligible individuals are determined by their status in the TANF assistance unit. Work-eligible individuals include all adult TANF recipients or minor child heads-of-household (recipient or non-recipient) and non-recipient parents (drug felons, fleeing felons and individuals disqualified for fraud - TANF participation code DF or individuals disqualified for enumeration - TANF participation code DI) living with a child receiving assistance unless excluded for one of

the reasons listed outlined below.

1. The individual is a non-recipient parent who is:

    a. a minor parent who is not a head-of-household;

    b. an alien ineligible for assistance due to immigration status; or

    c. a recipient of Supplemental Security Income (SSI) benefits.

2. The individual is a recipient or non-recipient parent who is:

    a. providing full-time care for a temporary or permanently disabled family member living in the home who does not attend school or is attending a mental/rehabilitation program on a full-time basis as defined and verified by the school or institution. The family member is defined as the spouse, parent, step-parent, sibling, child, step-child, grandchild, grandparent, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law, or sister-in-law of the case head. Child means a biological, adopted or foster child, or a child for whom the individual stands in loco parentis. The disability must be supported by medical documentation which requires the parent to provide such care twenty-four hours per day, seven days per week and defines how long the disability is anticipated to last; or

    b. a recipient of SS I.

3. The individual is a non-needy caretaker relative.

NOTE: All needy caretaker relatives are included in the work participation rate calculation.

Case Definitions

A **TANF Basic** case is one in which:

- There is a single parent included with his/her child(ren);
- There is a single caretaker relative included with the child(ren);

- There are two parents included with the child(ren) and one or both parents are disabled; or

- There are two parents with the child(ren) but one parent receives SSI, and is not included in the assistance unit (AU).

A **two-parent family** case for the purposes of the TANF Work Program participation requirements will be the TANF-UP family in which both parents are able-bodied. If either parent claims an exemption because of incapacity, the case will be handled as a **TANF Basic** case.

Non-Exempt Individuals

Recognizing that adult recipients of TANF benefits, unless specifically exempt, have a 60-month life-time limit for receiving assistance, the focus will be on preparing the individuals for work, assisting them with finding employment, providing post-employment assistance, and teaching the individual about job retention.

All adults who are not specifically exempt from the TANF Work Program will be referred to the case manager for placement in work activities. Nonexempt individuals are TANF recipients who do not qualify for an exemption, and are subject to TWP requirements as a condition of eligibility for TANF benefits. These individuals are often referred to as "mandatory participants." These categories include:

1. Parents whose youngest child is over the age of 12 months.

2. VISTA volunteers and other volunteers participating in activities under the National and Community Service Trust Act of 1993, such as AmeriCorps.

3. Both parents in two-parent families, unless exempt because one parent is caring for a disabled child or household member, will be referred to the TANF Work Program (TANF-UP).

4. Individuals who are employed part-time (working less than 35 hours per week) or full-time (working 35 or more hours per week).

5. Teen parent heads-of-household (under age 20) will be referred to the TANF Work Program, once the child is 12 weeks of age. Teen parents will be required to participate in educational activities if they have not completed high school or received a GED. Refer to

Chapter 3, Teen Parents, for additional and more detailed information.

NOTE: A minor parent under age 18, who is a dependent in a TANF case rather than the head-of-household, may be referred to the TANF Work Program as a MV-minor volunteer if supportive services (child care and transportation only if needed to transport the child to daycare) are needed to remain in school. Refer to Chapter 3, Teen Parents and Volunteers, for additional and more detailed information.

6. Individuals who are incapacitated or report they are unable to work will be referred to TWP for assistance in gaining access to services available through the Department of Rehabilitation Services, Office of Vocational Rehabilitation. The TWP Program Status Code for these individuals will be VR-vocational rehabilitation. Refer to Chapter 3, Referral of Incapacitated Adults, for additional and more detailed information. Individuals who are determined ineligible for VR services will be referred back to the eligibility worker and may be eligible for the JB code if all of the eligibility criteria for receiving the JB exemption are met.

7. Individuals who are disqualified from TANF for enumeration, school attendance or failure to report a child not in the home (coded DI), unless the citizenship code is IA-ineligible alien.

8. Individuals who are disqualified from TANF for fraud, drug felons or fleeing felons (coded DF).

When TANF recipients who are mandatory for the TWP are referred for participation in the work program, they fall into one of the following groups:

- **"NE-nonexempt"** (mandatory) - a TANF recipient who is not exempt from participation in the TANF Work Program. These individuals are required to participate as a condition of TANF eligibility.

- **"SM-spouse mandatory"** - the second parent in a two-parent family who is not exempt from participation in the TANF Work Program. These individuals are required to participate as a condition of TANF eligibility.

When TANF recipients who are mandatory for the TWP are referred for participation in the work program, they fall into one of the following groups:

- **"VR- vocational rehabilitation"** - a TANF recipient who has been determined eligible for vocational rehabilitation services. These individuals are required to participate as a condition of TANF eligibility.

Exempt Individuals

Applicants

If an applicant appears to be exempt, the case manager will refer the applicant back to the eligibility worker in person. All exemptions will be approved by the eligibility worker in MAVERICS. If an exemption is approved after the applicant begins the TWP intake process, the eligibility worker will change the TWP Program Status code on the JOBS screen in MAVERICS which will update the referral status in JAWS through the nightly batch process. The TANF Program Status will update to "CJ-closed in JAWS" on the ICLI screen.

Recipients

An individual included in the TANF grant may be exempt from TWP participation. Exemptions from work program requirements will be determined by the eligibility worker. All exemptions must be verified and the case record documented accordingly. Program exemptions from mandatory work activities are outlined in the following chart. Refer to Volume III, Chapter 3, Exempt Individuals, for a further description of exempt individuals.

WP STATUS CODE	EXEMPTION	60-MONTH TIME LIMIT	24-MONTH TIME LIMIT
JI**	**Child under 18 years of age**	**Exempt**	**Exempt**
JA	**Age 60 and Over**	**Not Exempt**	**Exempt**
JB	**Incapacity** - a physical or mental impairment established by receipt of Social Security Disability, SSI, 100% VA Disability or by the Medical Review Unit.	**Not Exempt**	**Exempt**

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JC*	**Caretaker of an Ill or Incapacitated Child -** a parent that is required to provide full-time care for an ill or incapacitated child living in the home.	**Not Exempt**	**Exempt**
JF*	**Caretaker of Ill or Incapacitated Adult** - a parent that is required to provide full-time care for an ill or incapacitated adult living in the home.	**Not Exempt**	**Exempt**
JV*	**Domestic Violence** - an individual battered or subjected to extreme cruelty verified by medical or psychological records and law enforcement and still at risk.	**Not Exempt Life-time maximum of 12 months.**	**Exempt Life-time maximum of 12 months**
JL*	**Temporary Illness or Injury -** an individual who has a temporary illness or injury based on medical evidence, can be exempt from work requirements up to a 30 day period. If the disability or illness is anticipated to last more than 30 days, a Medical review decision must be requested.	**Not-Exempt**	**Exempt**
JK*	**Pregnancy -Third Trimester** - a pregnant individual in her third trimester of pregnancy can be exempt from work program requirements if there are complications with the pregnancy. The complications must be verified by a doctor's statement.	**Not-Exempt**	**Exempt**
JD*	**Drug Abuse** - an individual who undergoes appropriate substance abuse treatment, verified by a physician, will be exempt from work requirements during the treatment period only.	**Not-Exempt**	**Exempt**
JJ	**Caretaker of Child Under 12 Months** - a parent caring for a child under 12-months of age who chooses to be exempt from work requirements.	**Not-Exempt Lifetime maximum of 12 months.**	**Exempt Life-time maximum of 12 months.**

*** Must be documented by a physician**

** If **the individual coded JI is also the PI, LP or SP, the 60-month counter <u>will be</u> incremented.**

Volunteers

A single parent who is exempt for caring for a child younger than 12 months old (JJ) or who is a victim of domestic violence (JV) may choose to volunteer for the TANF Work Program. The "JJ" and "JV" exemptions are limited to a lifetime maximum of 12 months each. Individuals in these exemption categories may choose to volunteer for work program services. If requested, the individual's JOBS status code will be changed to "EV - exempt volunteer" and the individual will be referred to case management for placement in work program activities.

Adverse action policy and procedures will apply to exempt individuals who volunteer for TWP services as it does any other TWP participant. Exempt individuals will be conciliated for noncompliance which may result in a TWP sanction and corresponding SNAP sanction. Prior to referring an exempt individual to the TWP, the worker will explain work program requirements and penalties for noncompliance. The worker will document the case record that the individual understands the work requirements, the conciliation/sanction process and the penalty for failing, without good cause, to attend or participate satisfactorily in the assigned work activity or committing a voluntary quit violation. Forms MDHS-EA-312, MDHS Personal Responsibility Contract for TANF, and the MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, will be completed (prior to referral) and filed in the individual's case record as documentation of his/her understanding of TWP rules, regulations and requirements.

TANF recipients will be encouraged to participate in the TANF Work Program, even when they are determined to be exempt. Case management and supportive services are available to all TANF Work Program participants without regard to their participation status (nonexempt or volunteer) if they cooperate and participate satisfactorily in their assigned work activity **and** there is an eligible child in the home. However, supportive services for volunteers are subject to fund availability.

MDHS or other staff (WIN, child support, etc.) who become aware of a TANF recipient, exempt from the TWP, who wishes to volunteer should refer the individual back to the appropriate caseworker for referral to the TWP as an exempt volunteer (EV). Only the TANF recipient may request a voluntary referral to the TANF Work Program. **All volunteers will be referred by MAVERICS to JAWS**.

NOTE: **Prior to TANF case closure,** the worker will ensure employed TANF recipients who are coded JJ or JV are given the opportunity to be referred to the TANF Work Program as an exempt volunteer "EV." The worker will explain to these individuals that a referral to the TWP

will allow them to apply for and receive, if determined eligible, supportive services (transitional child care, transitional transportation). If the individual wishes to be referred to TWP, the worker will complete MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, prior to making the referral.

An individual's exemption status may change due to circumstances such as, but not limited to, the following:

- additional household members
- loss of household members
- change in health conditions of the individual or family member or
- dependent child turns age one

NOTE: A single parent of a child under age one will lose the "JJ" exemption status and become mandatory the month following the month the child turns age one or the month following the month the child turns six weeks old if the parent has used up all 12 of her exemption months, unless exempt for some other reason.

If the change results in a change in the individual's TWP status, the case manager will document the case record and make appropriate changes in MAVERICS and JAWS.

Exempt Volunteers

Only the following exempt individuals may volunteer for the TANF Work Program:

- An individual caring for a child younger than 12 months old (**JJ).**

- An individual who is a victim of domestic violence (**JV).**

TANF benefits received while the individual is participating in an approved TANF work activity will not count in the family's 24-month time limit or the 12-month exemption time limits for **JJ** and **JV**. Penalties for noncompliance with TANF work requirements will apply to "EV-exempt volunteers," unless good cause is substantiated. These individuals must not be coded **WL**, **WP** or **WH**. The **EV** code will allow the case manager to set-up a conciliation record.

Minor Volunteers

State law requires minor parents who are not married to live with their parents or other adult caretaker relatives in order to receive assistance. Any request for exemption from this provision will be approved by the Economic Assistance TANF Policy Unit. If approved by State Office, the minor parent's relationship coded will be changed to "PI" as head-of-household and the JOBS status code will be changed to "NE-nonexempt" in MAVERICS and referred to the TWP. If not approved by State Office, the relationship will remain "CH" as a child and the JOBS status code may be changed to "MV-minor volunteer" if the minor parent is enrolled in a secondary education or GED program and needs child care assistance in order to participate.

NOTE: A "MV-minor volunteer" who fails to attend school satisfactorily will be sanctioned under school attendance policy, not TANF Work Program policy. The minor parent's TANF program status code should be changed back to "JI" and the appropriate penalty applied. Refer to Chapter 3, School Attendance Requirements, for additional and more detailed information.

Spouse Volunteers

TANF recipients who marry after October 1, 1999, are eligible for the marriage disregard for a period of six months. This spouse, if unemployed or underemployed, will be allowed to volunteer for participation in the TANF Work Program as a spouse volunteer. However, because this individual's presence in the TANF household will be disregarded, there will be no TWP referral through the MAVERICS/JAWS interface. All procedures involving this individual will be handled manually.

The eligibility worker will refer the spouse volunteer to the case manager via MDHS-EA-364, TWP Communication Form. MDHS-EA-355, TWP Intake Appointment Letter, should be sent timely, as with any other orientation notice. Communication between the eligibility worker and the case manager concerning this individual will be done via MDHS-EA-364, TWP Communication Form. The only distinction between the spouse volunteer and other volunteers is the fact that all procedures will be done manually. Refer to Chapters 3 and 6, Marriage Disregard, for additional and more detailed information.

Non-Compliance with the TANF Work Program

Penalties for noncompliance with the TANF Work Program do apply to volunteers. The case manager will be notified when an exempt volunteer is not attending or participating satisfactorily or is no longer participating in the program. Individuals who qualify for either the JJ or JV

exemption but volunteered for the TWP as an EV will be conciliated and the appropriate TWP sanction applied if they fail to cooperate or participate satisfactorily, without good cause. If good cause is substantiated and approved by the case manager supervisor, the EV code will be changed to JJ or JV which will resume the 12-month exemption counters for these individuals.

Minor parents are subject to school attendance requirements not TWP penalties. Minor volunteers (MV) who fail to attend school satisfactorily will be coded JI in MAVERICS and the worker will begin the school attendance sanctioning process.

If a TANF recipient fails to cooperate or comply with TWP requirements or the only eligible child leaves the home, all TANF supportive services will be terminated immediately. Refer to Chapter 11, Conciliation, for additional and more detailed information.

Exclusions

States have the option of including in the participation rate, families in the State that are receiving assistance under an approved Tribal family assistance plan or under a tribal work program. MDHS has entered into an agreement with the Mississippi Band of Choctaw Indians which allows the Tribe to operate a separate TANF Work Program for their TANF eligible members in seven (7) Mississippi counties. Funding for this program is deducted from the State's Federal funding for the TANF Program. Therefore, it is essential that eligible Choctaw Indians residing in the seven (7) counties be served by the Tribal TANF Work Program rather than the MDHS TANF Work Program. The seven (7) counties providing work program services to eligible Choctaw Indians through the Mississippi Band of Choctaw Indians are:

JONES, KEMPER, LEAKE, NESHOBA, NEWTON, SCOTT, AND WINSTON

However, child care services for Choctaw Indians are funded through MDHS. Choctaw Indians needing child care assistance will be verbally instructed by the tribal office to contact the MDHS local county office to apply for child care services (refer to Chapter 10, Arrangement of Child Care Services for Tribal TWP Participants and Child Only Cases). Choctaw Indians are subject to the TANF 60-month lifetime maximum, but not the 24-month time limit. The 24-month counter for such cases will not increment.

TANF WORK PROGRAM REFERRALS

A referral to the TANF Work Program may be initiated by the intake eligibility worker as a condition of eligibility for TANF, or may be requested by the individual who wishes to volunteer

for TWP participation. Refer to Chapter 8, Volunteers, for additional information pertaining to volunteers. All referrals, with the exception of absent parents and spouse volunteers, are processed using the automated exchange of data between MAVERICS, the automated system which supports the TANF and SNAP programs, and JAWS, the automated system which supports the TANF Work Program. Each referral is classified by JAWS as either an initial referral, re-referral of a prior participant or a request for reinstatement. TWP referable codes are as follows:

NE - Nonexempt
EV - Exempt-volunteering
VR - Vocational rehabilitation
DV - Drug violator (for sanctioning purposes, not participation)
SM - Spouse in a two-parent household, mandatory
MV - Minor, not head-of-household, who wishes to volunteer
WL - Work hours greater than 0 and less than 20 hours per week
WP - Part-time employment, working 20-34 hours per week
WH - Full-time employment, working 35 or more hours per week
CF - Convicted drug felon (DF-drug felon disqualified from TANF)

Referrals

An initial referral is a referral for an individual for whom there is no previous record in JAWS. A re-referral is for an individual with a previous record in JAWS. In the overnight batch process, MAVERICS transmits the referral and information about the TANF recipient, including the dependent children in the household and limited employment information to JAWS on the Maintain Case Children (MCAC) and Participant Employment Selection (SPAE) screens. When a TANF case is referred to JAWS, MAVERICS performs the following to support the TWP intake process:

1. Identifies whether each TANF recipient is excluded, exempt, or required to participate in the TANF Work Program. (Refer to Chapter 8, Determining Eligibility for Participation in Up-Front Job Search or Vocational Rehabilitation Activities and the TANF Work Program.)

2. Determines the TWP Program Status (i.e., nonexempt or volunteer) for each TANF non excluded recipient.

3. Refers TANF applicants who are required to comply with substance abuse screening, upfront job search or vocational rehabilitation requirements prior to TANF approval.

4. Refers non-exempt individuals and exempt volunteers for TWP participation.

5. Identifies whether the referral is an initial referral to the TWP, a re-referral of a previous participant or a reinstatement of a case recently closed.

6. Identifies whether the referral is for a drug abuse treatment sanction. (Refer to Chapter 11, Drug and Alcohol Abuse.)

NOTE: Information added to the JOBS screen in MAVERICS is transmitted to JAWS on the effective date.

JAWS performs the following functions to support the TWP intake process:

1. Accepts appropriate referrals from MAVERICS.

2. Determines the priority for processing each accepted case.

3. Determines whether a re-referred participant qualifies for reinstatement to the TWP.

4. Schedules the referred individual for assessment, according to the priority assigned and the availability of sessions.

   NOTE: The TANF recipient will be assessed within three (3) days of approval for TANF benefits. Therefore, the case manager will schedule the TWP intake appointment in JAWS as soon as the referral is received from the intake worker (refer to Volume III, Chapter 11, Intake Assessment.)

5. Assigns a case manager to the case as soon as an assessment appointment is scheduled. **Reinstatements** If the referral is for an individual with a previous record in JAWS and his/her TWP participation has been closed for 30 days or less, the case will be classified as a reinstatement. When an individual is reinstated in the TWP, the historical information about the individual is brought back into the reinstated individual's JAWS record and updated with any new information sent in the referral from MAVERICS. The reinstated individual may, at the discretion of the case manager, be required to complete another TWP assessment and develop a new EDP.

An individual who was recently terminated from the TWP may be reinstated at the point at which he/she left the program (i.e., case closed in error). The individual is not required to repeat the assessment process, and may be reassigned to a component consistent with his/her latest EDP. Any individual with an assessment more than 90 days old will complete another assessment.

If a prior participant does not meet the criteria for reinstatement, the participant will be assigned to a case manager and scheduled for orientation and assessment according to his/her priority status. Any historic information about the participant's previous participation is available on-line in JAWS for review by the case manager.

"REceived" Status Referrals

TANF applicants who are required to comply with up-front job search or vocational rehabilitation requirements will be referred by MAVERICS to JAWS in "REceived" status. This includes individuals who have served their TANF sanction period and wish to comply in order to receive TANF benefits. These individuals will complete the TWP intake and up-front processes before the eligibility worker can complete the application processing procedures. Once the compliance has gone to MAVERICS and the case is approved, JAWS will receive a new referral. TANF applicants are not eligible for supportive services prior to TANF approval. The case manager will wait until the case opens in JAWS and the individual is approved for TANF benefits before assigning the individual to any other activity and authorizing supportive services.

Redetermination

A redetermination is a reevaluation (*or review*) of a recipient's situation to determine whether or not eligibility continues and whether the amount of TANF benefits, if any, is correct. When a TANF recipient is scheduled for reevaluation of TANF and SNAP benefits; his/her progress in the TWP may also be evaluated.

Referral Errors

If it appears that an excluded or ineligible individual was referred in error, it is likely that the information about the TANF recipient is also incorrect (i.e., child under age 18 who is not the PI is referred as nonexempt). When the case manager corrects the individual's information in MAVERICS, the referral status is also corrected in JAWS.

For example, if the case manager receives a referral for a Choctaw Indian residing in one of the seven (7) counties where TANF work requirements are handled by the Mississippi Band of Choctaw Indians rather than by MDHS, it is likely that the individual's race/ethnic code and/or county of residence are incorrect. When these are corrected in MAVERICS, the referral is redirected to the proper work program entity. If the case manager becomes aware of a change in the individual's circumstances after referral, the changed information is recorded in JAWS and will be verified before being corrected in MAVERICS.

INTAKE

Intake is the process of receiving TANF applicants and recipients referred by the intake eligibility worker for compliance with up-front requirements (UJS or VR) or for participation in the TWP, orienting those individuals to the program, assisting in the completion of the TWP intake process, if necessary, and assessing their "work readiness" and willingness to participate in the TWP.

The intake eligibility worker will schedule a TWP intake appointment within three days and refer the applicant to case management. Failure to keep a TWP intake appointment will mean that the individual no longer needs TANF assistance and wishes to withdraw his/her TANF application. If an applicant fails to keep the TWP intake appointment, the case manager will enter the "WD-withdraw TANF application" code in the completion field on the Maintain Client Assessment (MCA2) screen within two days. If the WD code is not entered within two days, JAWS will automatically enter the "NS-no show" code. In a no show situation for up-front requirements, the preferable code is WD which will be entered by the case manager within the two-day time limit. If the individual keeps the appointment and the MCA2 screen is not coded FC (fully complete) within two days, JAWS will automatically enter a denial code. When the completion code WD or NS is entered on MCA2, JAWS will interface with MAVERICS through the nightly batch process and automatically deny the TANF application according to the closure reason received from JAWS. MAVERICS will send an alert to the worker that the application has been denied.

MAVERICS Notice X710-TANF-Up-Front Denial will be sent to notify the individual of the denial reason. When a TANF application is approved, the A101-TANF Approval Notice will be used to notify the applicant. All nonexempt adults will be referred to JAWS in an OPen status and required to participate in the TANF Work Program as soon as possible after the TANF case is approved. Return appointments for case management will be scheduled within three days of TANF approval. Staff should make every effort to contact the individual by telephone to discuss

the CME appointment. MAVERICS notice A901-Other Notice will be put to history and screen printed and mailed by county staff to notify the individual of the appointment date and time.

The case manager will add the CME appointment via the Maintain Work Program Appointment Referral (MWAR) screen in JAWS as soon as the TANF Program Status is updated to OPen in JAWS. Individuals who fail to keep their appointment with case management will be conciliated and handled according to ongoing adverse action policy and procedures.

NOTE: Because of the MAVERICS-to-JAWS interface, the case may or may not be in JAWS until the next day.

Case managers are the individuals who complete the intake process with individuals referred to the TANF Work Program. TANF recipients will be assigned to work program activities within three (3) days of approval of TANF benefits. The case manager will help the participant obtain the supportive services needed to overcome barriers to his/her continuous participation. The case manager works as a professional partner with the individual to:

1. Identify the individual's work readiness, and assign appropriate work activities which will assist the participant in attaining his/her employment goal.

2. Develop a plan of action for those individuals who are not work ready or who are unable to find employment, enabling the participant to obtain needed work experience or training that will lead to employment.

3. Aid in removing barriers to participation in the TWP and help access the resources needed to lead to self-sufficiency.

Intake Activities

Case managers will develop a comprehensive understanding of TWP policy, procedures and components in order to perform the following intake activities:

1. Accept individuals referred to the TWP by the intake eligibility worker through the MAVERICS/ JAWS interface and conduct assessment.

2. Arrange needed supportive services for individuals to attend orientation, assessment and program components.

3. Provide intake sessions at scheduled times.

4. Facilitate the individual's completion of the intake process.

5. Complete an assessment with the individual of his/her family situation and employability, and determine any barriers the individual might have to continuous participation in the TWP.

6. Develop, with the individual, an EDP to lead the individual to achieve self-sufficiency through employment as quickly as possible.

A TWP participant is a TANF recipient who has completed the intake process and signed his/her EDP indicating a willingness to participate in the TWP.

TWP ORIENTATION/UJS WORKSHOP

State law requires the Agency to provide a brief presentation regarding the Substance Abuse Determination Process (SADP) and job search activities and techniques prior to assigning TANF applicants to Up-front Job Search (UJS) activities. The TWP Orientation/UJS Workshop is a meeting, conducted in an individual or group setting, by which potential TWP participants learn about the TANF Work Program (TWP). County staff will play a very significant role in the success of the TANF Work Program. The initial contact experienced by the TANF applicant or recipient will make a lasting impression and will greatly influence the attitude of the individual as he/she learns about the TANF Work Program.

Prior to referral to the TWP, the intake eligibility worker (EW) will provide explanations about the SADP and basic work program requirements so the individual will know what to expect when he/she attends the TWP Orientation/UJS Workshop. The eligibility worker will inform the individual that the number of hours required for participation in the TWP will be based on his/her Employability Development Plan (EDP) and work activity assignment(s). The eligibility worker will not discuss the minimum hours required for an individual to meet the monthly federal participation requirements based on the age of the youngest child in the assistance unit.

The case manager (CM) and the county director/designee are responsible for conducting TWP Orientation/UJS Workshops and providing individuals with extensive information about the requirements and opportunities available under the TANF Work Program. Although case management takes the lead role in conducting the TWP Orientation/UJS Workshop, other individuals (i.e., former TWP participants, service providers, child care coordinators, local employers, job placement entities, child support workers, and other agencies) should also be given a role.

The overall concept for all able-bodied individuals must include the temporary receipt of TANF benefits while the family receives strong support focused on helping them attain self-sufficiency through employment. During the TWP Orientation/UJS Workshop, the following information will be provided:

1. A basic overview of the Substance Abuse Determination Process (SADP).

2. A basic overview of the TANF Work Program and its purpose.

3. A description of each program component.

4. A description of each available supportive service.

5. The role of the case manager, job readiness trainer and employment coordinator.

6. Program expectations regarding consistent participation.

7. Consequences of adverse case action taken when non-cooperation with the TWP occurs. Case management staff must inform the TWP participant at the TWP Orientation/UJS Workshop, at assessment and whenever appropriate thereafter about the possibility of drug testing as a condition of employment. Refer to Volume III, Chapter 11, Drug and Alcohol Abuse, for additional information.

8. TANF Time limits (24 and 60-month).

9. TANF exemption time limits (12 months for JJ and JV).

10. The individual's rights and responsibilities.

TWP Orientation/UJS Workshop attendees should be given the opportunity and sufficient time to ask questions about the TWP. When conducting a TWP Orientation/UJS Workshop, the case manager must communicate in a positive manner and encourage participants to take advantage of the available services to attain new skills and employment experience that will improve their employability. The TWP Orientation/UJS Workshops should continuously reinforce personal responsibility and the positive aspects, such as becoming self-reliant, obtaining full-time employment, brushing up on skills needed for employment, receiving supportive services (child care and transportation), earned income disregards, and receiving transitional benefits after losing TANF benefits because of earned income. The case manager should also send a clear and simple message to all participants that sanctions will be imposed for noncompliance.

Scheduling TWP Intake Assessment Appointments

Applications

When it is determined an applicant is referable, the eligibility worker will schedule a TWP intake appointment with case management within three days using the Work Program Referral Log, MDHS-EA-319A. The case manager supervisor will use the MDHS-EA-319A to make case manager assignments. In counties where the eligibility worker and case manager are the same, the MDHS-EA-319A will still be necessary to document the results of the SASSI. The case

manager will "pull" the case in JAWS and then schedule a TWP intake appointment in JAWS for the date and time listed on the MDHS-EA-319A. Once the client is "pulled," the client's information will display on the ICLI screen and assign the client to the case manager's caseload. TWP intake appointments cannot be rescheduled beyond three days from the initial appointment date.

Recipients

An intake assessment appointment must be scheduled for an ongoing participant any time the participant becomes referable to the TWP. When a recipient's JOBS status code changes from an exempt code to a non-exempt code, the JAWS system will automatically schedule an intake appointment for the participant and alert the case manager of the scheduled appointment. In those counties that do not use the JAWS automatic scheduling process, the eligibility worker must alert the case manager of the upcoming change so that a TWP intake assessment appointment can be scheduled by the case manager. The eligibility worker will set a tickler for recipients claiming an exemption for caring for a child younger than age one (JJ) for the month prior to the last month of the JJ exemption to allow the case manager an opportunity to schedule a TWP intake assessment appointment timely.

Intake Assessment

During the TWP intake assessment process, the non-exempt applicants will be given the MDHS-EA-361, Work Program Assessment form. This assessment form will initially be completed by the TANF applicant and is used to gather information about the individual's dependents, education, child care and other supportive service needs, employment goals, and prior work experience. The case manager may assist in the completion of this document, if necessary. The case manager will use the MDHS-EA-361 as a guide to conduct a face-to-face, interactive interview. The MDHS-EA-361 must be filed in the TWP temporary documents folder in the individual's electronic case record.

Whenever possible, TANF applicants must complete the substance abuse screening, the TWP orientation/UJS workshop and the TWP intake assessment on the same day. If the TWP intake assessment cannot be done on the same day as the substance abuse screening and TWP orientation/UJS workshop, the case manager must reschedule the interview within three days of the initial intake appointment date. TWP intake assessment information must be entered in JAWS within two days of the appointment date. If the individual fails to keep his/her TWP intake assessment appointment, the case manager **must** enter "WD" as the completion code on the Maintain Client Assessment-Part 2 (MCA2) screen in JAWS. The WD code indicates that the

applicant has withdrawn the TANF application. JAWS will send the completion results to MAVERICS overnight and the TANF application will be denied. If the individual is a “no show” for the TWP intake assessment appointment and the case manager fails to enter the WD code timely, JAWS will automatically enter the NS-no show code to deny the application.

Entry of the TWP intake assessment data into JAWS by the case manager marks the completion of the TWP intake assessment process. It is essential that the results of the TWP intake assessment be recorded in JAWS no later than **two calendar days** after the scheduled initial intake appointment. The valid completion codes are:

CN Appointment Canceled
DC Discontinue Client
FC Fully Complete
RS Refused to Sign
WD Withdrawn
NS No Show (system generated code)

On the Client Information Inquiry (ICLI) screen in JAWS, the participant’s TWP file status will be H-holding until the TWP intake assessment is completed. The assessment completion code must be entered on the MCA2 screen within two days following the initial intake appointment date or JAWS will consider the individual a "no show" and deny the application. It is important that case management staff monitor those cases assigned to the TWP orientation/UJS workshop with a TWP file status code of H-holding because JAWS does not alert the case manager that this activity has not been completed. Refer to Volume III, Chapter 1, TWP File Status Codes, for additional information.

Entry of a completion code at the end of the intake assessment process indicates to JAWS whether the individual’s TANF application should be approved or some other action is required. Once the individual has successfully completed the TWP intake process, JAWS will send the completion results to MAVERICS allowing the eligibility worker to approve the application. Once the application has been approved in MAVERICS, the referral will transmit back to JAWS in the overnight batch process and change the TANF case status on the ICLI screen from REceived to OPen.

NOTE: Individuals referred to the TWP in a “RE” status are not eligible for TANF supportive services.

INTERACTIVE INTERVIEW

Assessment is an **interactive interview** process to determine the individual's work readiness and employability, to identify any employment barriers and gather information needed to establish an Employability Development Plan (EDP.) The EDP will identify the individual's employment goal, the TWP components that can help the participant achieve the employment goal, and any supportive services needed to facilitate the EDP.

The case manager must conduct the assessment in an area that assures privacy and confidentiality, if possible. The participant will be informed of the fact that basic information about his/her case will be shared with other TANF staff and essential service providers. The case manager must explain to the individual that sharing information is necessary to:

1. Coordinate services needed by the participant.
2. Ensure that participants and providers are fulfilling their obligations to the program.
3. Measure the effectiveness of the program.

During the assessment interview, the case manager must identify:

1. The individual's educational background.
2. The individual's skills and interests.
3. The individual's prior work experience.
4. The individual's family circumstances, including any special needs of other family members that may affect the individual's participation.
5. Any other factors that may affect the individual's ability to fully participate in the TWP.
6. The individual's supportive service needs.

The case manager must have the individual review and sign the MDHS-EA-362A, Client Release Form. Failure to sign this form will not result in a sanction. If the participant refuses to sign the MDHS-EA-362A, the case manager must ask the participant why he/she is reluctant to sign the form or have information shared with appropriate service providers. The participant may have legitimate reasons for not signing the release. If the situation threatens the family's wellbeing, the case manager must report this to the appropriate authorities (i.e., Family and Children Services.) The case manager must inform the individual that if he/she receives duplicate services, claims expenses or receives reimbursement for which he/she is not entitled, he/she may be charged with fraud and will be responsible for repayment to the TWP.

TWP Assessment Interview

The TWP assessment interview is performed in an interactive manner; some questions that appear on the MDHS-EA-361, Work Program Assessment, also appear on various JAWS screens. The case manager must explain the questions and use the MDHS-EA-361, initially completed by the individual, as a guide to conduct the interactive interview and enter assessment data in JAWS. Answers are often entered on the JAWS screens by typing a code in a field.

Interactive interviewing, using JAWS in the presence of the individual, requires some special interview skills. Inform the individual that information recorded in JAWS is confidential and will only be viewed by individuals that need to know about his/her situation.

JAWS provides a series of four screens (i.e., MCA1, MCLB, MCA2 and MEDP) to assist the case manager in conducting an interactive TWP assessment interview with the individual. Case managers who do not have access to JAWS, at the time the interactive interview is conducted, must record the individual's responses on the MDHS-EA-361 and enter the information into JAWS within two days of the intake appointment.

The following guidelines must be utilized by the case manager to complete an interactive assessment with the individual:

Employment History and Needs

The following questions must be asked to complete the minimal employment assessment and record in JAWS. Written verification of items (i.e., employment or illness) that may affect the individual’s ongoing participation in the TWP is required.

1. Is the individual currently employed?

    - Where is he/she working?
    - How many hours per week does he/she work? What are his/her current wages?
    - What type of work is he/she performing?
    - Is this employment permanent?
    - Has the employment and wage information been reported to the EW?

2. Has the individual worked six consecutive months at any time in the past two years?

    - Where was he/she working?

- How many hours per week did he/she work?
- What type of work was he/she performing?
- Why was this employment terminated?

The following questions **may** be asked to complete a more comprehensive employment assessment for the purposes of developing the EDP.

1. Is the individual ready for job placement?

2. Other than the employment described above, what employment experience has he/she had to date?

3. What did he/she excel in or enjoy?

4. What employment-related issues recur?

5. Can he/she advance beyond unskilled, entry level jobs?

6. Is the individual's employment expectation realistic?

7. What vocational and career interests are expressed?

8. What additional or refresher skills are needed?

9. Are these realistic?

10. Does he/she have a talent or special aptitude that would be appropriate for a small business enterprise?

Educational History and Needs

The following questions **must** be asked to complete a minimal educational assessment and record in JAWS. Written verification of items that affect the individual's ongoing participation in TWP is required.

1. Is the individual currently in school?

   - Was the individual's enrollment in this current educational program self-initiated?

- What is the name of the school or institution the individual is currently attending?
- What course of study is the individual pursuing through his/her current education?
- When did this current educational program start?
- What is the date the individual expects to complete his/her current educational program?
- How many hours a week is the individual attending this educational program?
- When this educational program is completed, will it lead to a GED or other type of certificate?
- How is his/her attendance?

2. What is the individual's educational history?

- What was the last grade he/she completed in school? (If the individual is not currently in school.) If the individual has completed high school, a copy of the diploma should be obtained for filing in the case record.
- If presently enrolled in school, what is his/her current grade?

3. Does the individual have a GED or equivalent?

- When did he/she complete his/her GED or equivalent? (A copy of the GED certificate should be obtained for filing in the case record.)

4. Has the individual completed some other educational program?

- When was that program completed?
- What skills and knowledge were gained in this educational program?

Case Manager's Assessment

The following questions **must** be answered by the case manager to complete this subjective portion of the TWP assessment and record in JAWS.

1. Did the individual appear on time for the interview?

2. Was the individual appropriately dressed for the interview?

3. Did the individual follow instructions and provide the requested documentation within a reasonable time?

4. Did the individual ask relevant questions during the interview?

5. Does the individual seem to have a positive attitude?

6. Does the individual have comprehensive verbal communication skills?

7. Does the individual need further education to pursue his/her educational or employment goals?

- What type of education is needed?
- Is that education available to the individual? Through TWP? Through other programs?

8. Does the individual need further training to reach his/her employment goal?

- What type of training is needed?
- Is that training available to the individual? Through the TWP? Through other programs?

9. Does the individual need assistance to remove any barriers to participate in TWP?

- What type of assistance is needed?
- Are the supportive services available through TWP sufficient to remove the barriers?

10. Is the individual work ready?

The following questions **may** be considered by the case manager in completing the subjective portion of the TANF assessment for the purposes of developing the EDP.

1. What are the individual's goals?

- What are the individual's hopes for the future?
- What does the individual want to do with his/her life?
- What are his/her financial needs?
- What is necessary for the individual to become self-sufficient?

2. What general and/or survival skills has this individual demonstrated?

- What has the individual done, to this point, to survive in the world?

- Of what is he/she proud?
- What are his/her skills?
- How do these skills relate to the skills needed to support his/her family?

3. What social skills has this individual demonstrated?

- How well does the individual express him/herself?
- What emotional tone does he/she convey?
- How well organized does he/she appear to be?
- In what terms, and with what clarity, does he/she describe personal strengths? Personal weaknesses? Current problems? Possible solutions? Future ambitions?

4. Does the individual have an existing support network?

- Whom does the individual admire and turn to for help or advice?
- Who are available role models?
- What is his/her family structure? Siblings? Extended family?
- What type of relationship does the individual have with family members?

These issues represent a major part of the comprehensive assessment. However, they should not be considered to be all inclusive. Regardless of how accurately the case manager thinks assessment data is, the case manager should not proceed until he/she has reviewed the assessment information with the individual. The individual should concur, after hearing what the assessment indicated, that it presents a representative and accurate picture of his/her circumstances and employment barriers that may hinder or prohibit participation in the TANF Work Program.

This assessment serves as a basis for the development of the EDP by the case manager **and** the individual. During the EDP development, any barriers identified in the assessment that may prevent **consistent** participation must be considered to determine how they can be removed prior to assignment to a component or resolved through participation in work activities.

Once the assessment is completed, the case manager will enter the appropriate completion code on the MCA2 screen in the JAWS system. (A TANF applicant may be subject to up-front job search requirements. If so, in addition to coding the MCA2 screen, the appropriate UJS completion code must be entered on the MUJS screen.) JAWS will send a record to MAVERICS overnight to let the worker know that the participant has complied with the TANF Work Program and/or the TANF application can be processed. If the "DC-discontinue client" code is

used on the MCA2 screen, a discontinue reason code of "UT-unavailable transportation," "UC-unavailable child care," or "UA-unavailable activity" is required. When the "DC" code is entered on the MCA2 screen, the worker must inform the client that the TANF 24 and 60-month time limit counters will increment while he/she is coded DC. The worker must send MAVERICS notice A106, TANF Time Limit Counter Information, at the time the DC code is used and at each 90-day reassessment appointment to notify the client of the status of his/her TANF time limit counters. The case manager is required to complete a desk review each month and schedule a face-to-face interview every 90 days to reassess the status of each barrier.

Assessment as a Continuous Process

Assessing the participant is a continuous process. Using an undated EDP, case notes and the individual's participation records, the case manager must:

1. Assess the participant each time he/she completes a TANF work activity (component).

2. Assess the participant's progress in his/her assigned work activity (component) on a regular basis whenever the participant is enrolled in the same work activity for an extended period of time. ((Refer to Chapter 9, Component Monitoring, for additional and more detailed information.)

3. Assess the status of an individual who has not been assigned to a work activity, for component assignment, **on a quarterly basis.** (On a monthly basis, the case manager should review the individual's case for possible component assignment, when he/she reviews the Case Manager Caseload Listing report.)

PARTICIPANT RIGHTS AND RESPONSIBILITIES

The goal of the TWP is to assist TANF recipients to become gainfully employed as quickly as possible. The participant has certain rights and responsibilities relative to the TWP. A written agreement known as the Employability Development Plan (EDP) is completed by the TWP participant and the case manager to ensure program accountability by both parties. Following the initial assessment, the participant and the case manager must work together to develop the participant's EDP for participation in the TWP. The EDP is a plan developed jointly by the case manager and the individual that describes the individual's employment goal, and the means the individual will use to achieve this goal. Its purpose is to create a plan of action that will lead the individual to unsubsidized employment as quickly as possible. The case manager must use the printed EDP to review its contents and implications with the participant. The participant should

sign the EDP; however, failure to do so will not result in a sanction. If the participant refuses to sign the EDP, the case manager will document this on the EDP and file it in the TWP temporary documents folder in the participant's electronic case record.

Participant Rights

Each participant has the following rights with regards to the TANF Work Program:

1. The TWP participant is entitled to any assistance needed to review and understand the EDP. A signed copy of the agreement will be provided to the participant. The EDP reinforces MDHS' responsibilities to the participant and the participant's responsibility to participate satisfactorily.

2. The purpose and benefits of each planned work activity, along with the plan of action for removing any employment barriers, will be thoroughly explained to the participant.

3. The length of time the individual is required to participate in the program, including the number of participation hours required each week, must be fully explained to the participant. Full engagement (35-40 hours per week) is the goal of the TWP and is based on the individual's employability and the availability of meaningful work activity placements.

4. The participant will receive a full description of the supportive services that may be provided, in addition to the education, training, and employment activities that are planned for the individual.

5. The participant has the right to request a fair hearing if he/she does not agree with a decision regarding TWP participation.

Participant Responsibilities

Each participant has the following responsibilities to the TWP:

1. The participant must assume personal responsibility and make a commitment to participate in the program. This commitment includes ongoing program cooperation. Every participant must cooperate with all program requirements. Refer to Volume III, Chapter 11, Conciliation, for detailed information about good cause determinations and sanctions.

2. The participant must comply with all program requirements.

3. The participant must return all required documentation in a timely manner. This includes attendance records, employment and wage verification, and expense reports.

4. The participant must promptly report any changes in his/her circumstances, e.g., change of address or phone number, household size/members, employment status, and participation problems to his/her case manager.

5. The participant must observe the rules and/or regulations of the service provider, e.g., dress code, smoking regulations, rules and regulations outlined in the employee's handbook, etc.

6. The participant must promptly report any reportable income changes to the appropriate MDHS staff member as required.

EMPLOYABILITY DEVELOPMENT PLAN

On the basis of the assessment, the case manager and the participant will work together to create an Employability Development Plan (EDP). This plan is developed on-line in JAWS (MEDP screen) after the assessment is completed. JAWS supports the case manager in the development and documentation of the individual's EDP by:

1. Providing easy access to relevant current and historical data about the individual.

2. Providing a screen (MEDP) to record the individual's employment goal, along with the planned activities to support the attainment of the goal, and the benefits available from each activity.

3. Printing the EDP in a format and language understandable to the individual.

4. Recording the individual's agreement to cooperate with the activities outlined in the EDP. The EDP, as recorded on-line in JAWS, contains: 1. The individual's name and ID number.

2 The individual's employment goal and the related codes which help the TANF Work Program complete statistical analyses of goals. Only one goal can be recorded in JAWS.

3. Up to seven (7) specific TWP work activities (components) in which the individual is expected to participate to achieve his/her educational or employment goal.

4. The anticipated start and end dates, the actual end date, and scheduled hours for participation in each planned activity or component.

5. A brief evaluation of the benefits and/or skills to be gained.

6. An indication of whether the plan is complete or still under development and negotiation with the individual.

7. An indication of whether or not the individual has signed the EDP indicating his/her agreement with it.

When the EDP has been completed and signed by the individual, JAWS provides a screen where the case manager will indicate any supportive services required to help the individual achieve the goal described in the EDP.

The EDP negotiated with the individual will describe:

1. The purpose of the EDP.

2. The participant's obligations under the program.

3. The individual's skills and abilities.

4. The employment activity, training, or education needed to become self-sufficient.

5. The length of participation in the program, including the number of hours per week.

6. The supportive services (child care, transportation, etc.) that will be provided by the state during the period of participation.

JAWS will allow the case manager to update the EDP as the individual's needs and circumstances change as long as the actual end date has not been entered on an individual component or the EDP has not been closed out. The case manager will be required to create a new EDP when the actual end date has been entered on each component listed and the EDP has been closed out. JAWS maintains an on-line history of changes to the EDP.

The signed copy of the EDP printed by JAWS serves as the individual's formal agreement to participate in the TANF Work Program. A copy of each signed EDP will be filed in the individual's case record. A copy of the signed EDP will also be given to the individual by the case manager. If the participant refuses to sign the EDP, the case manager will document the EDP accordingly and file the information in the participant's file. Once the orientation and assessment have been completed and the EDP is signed, the case manager will set up supportive services, if needed.

BARRIERS TO PARTICIPATION

Employment barriers are defined as anything (e.g., child care, transportation, education, work skills, work ethic, attitude, housing, medical problems, etc.) that may hinder or prevent an individual's participation in the TANF Work Program (TWP).

TANF Work Program participants should accept personal responsibility for identifying and informing the case manager of any known problems or issues that may be a barrier which could hinder or prevent participation in the TANF Work Program. The first opportunity to identify any barriers is during the assessment process. The assessment questions whether any potential barriers to participation exist. Barriers that may hinder or prevent participation in the TANF Work Program may occur at any time. It is vital that participants notify the case manager as soon as a barrier to participation is identified and that case managers make every effort to assist the participant to resolve barriers prior to job loss or noncompliance with work program requirements. The individual is not entitled to any supportive services to help remove these barriers until the issues have been confirmed by the case manager during the assessment process.

Failure to satisfactorily participate in an assigned work activity or to get or keep a job because of inappropriate actions/behavior or the loss or lack of child care or transportation, without good cause, will result in a TWP sanction and corresponding food stamp sanction.

Potential Barriers to TANF Work Program Participation

The following *numbered* questions **will** be asked to complete the assessment of barriers to participation in JAWS; those with a *bullet* (•) **may** be asked to complete a more comprehensive assessment of the individual's barriers to participation:

1. Does the individual need child care assistance to allow participation in the TANF Work Program?

    - Does the individual have access to reliable and consistent child care?
    - Is the means of transporting the child reliable and consistent?
    - Has a primary child care provider been identified and arranged?
    - Has a back-up child care option been identified and arranged?

2. Does the individual need assistance with transportation to allow participation in the TANF Work Program?

    - How does the individual usually travel to and from places where he/she needs to go? Personal vehicle? Taxi? Bus? Other transportation?
    - Does the individual own a reliable automobile that can be used for transportation?
    - Is the individual near a public bus line?
    - Can the individual arrange transportation with a friend, relative, neighbor or public/private/ independent transportation company?
    - Does the individual have access to a car pool or employer sponsored transportation services?

3. Is the individual under a physician's advice or have health care problems?

    - Does the individual medical, vision, hearing, dental, and/or mental health needs?
    - Does the individual understand the effects and treatment of any existing medical conditions?

4. Does the individual acknowledge having a substance abuse problem which would hinder or prevent continuous participation in the TANF Work Program? (*This question should be asked with sensitivity*.)

    - Does the individual abuse alcohol and/or drugs?
    - Does the individual wish to seek an evaluation and treatment for the problem, if deemed necessary?

NOTE: The case manager will inform the TWP participant at orientation, at assessment and whenever appropriate thereafter about the possibility of drug testing as a condition of employment. Refer to Chapter 11, Drug and Alcohol Abuse, and Chapter 3, Drug Treatment.

5. After the individual has completed job readiness/job search and is unable to find a job because of inadequate skills/education, is additional training/education needed to allow the individual to participate productively in the TANF Work Program?

6. Is the individual sufficiently motivated to participate in the TANF Work Program?

7. Are there any allowable component activities available which will help the individual become more employable and/or self-sufficient?

8. Does the individual have a criminal record which might limit attainment of employment or educational goals?

9. Does the individual have pending legal problems which would hinder or prevent participation in the TANF Work Program?

10. Does the individual appear to have personal hygiene issues that should be removed prior to placement in work program activities?

11. Are there any other major problems *(i.e., attitude, personal or family problems, etc.*) that must be overcome before the individual can be ready for work, training, or education?

    - Is there a need for a crisis intervention in this individual's situation?

    - How long will such an intervention take? What will it require? Where will it lead?

The TANF assessment interview explores any actual barriers to continuous participation. **Not all barriers are reasons for exemption from participation in TWP**. Circumstances that can be barriers to participation include:

1. No available or reliable child care.

2. No available or reliable transportation.

3. Temporary (*less than 30 days*) health care problems or advice from a doctor which prevents participation (change the Jobs Status Code to JL-temporary illness).

4. A criminal record which prevents participation.

5. Temporary family emergency.

The individual must actively take personal responsibility to identify and remove barriers to participation. The case manager will make every effort to assist the individual to remove barriers to participation. Any barriers identified during the assessment process are recorded in JAWS via the MCLB screen. If the individual cannot continue the assessment process because of a barrier, and the case manager has sufficient documentation (scanned to the case record) to substantiate the barrier, the case manager may indicate this by entering a completion code of "DC-discontinue client" on the MCA2 screen in JAWS. This indicates that the case manager cannot process the individual further. JAWS will update the TWP file status on ICLI from "H-holding" to "I-inactive". At this point, the worker will send MAVERICS notice A106, TANF Time Limit Counter Information, to notify the client of the status of his/her TANF time limit counters. If the case manager feels the individual needs to be exempt, after entering the "DC" code in JAWS, the case manager will make the determination and enter the decision in MAVERICS or notify the eligibility worker accordingly. Once the exemption code has been entered in MAVERICS, a referral is sent through the interface to update JAWS. If the case manager changes the completion code in JAWS from "DC" to any other valid code, the participant processing will resume at the point of the assessment. Any barriers identified after the individual has been assigned to a TWP component must be reported timely, by the participant, and recorded, by the case manager, in JAWS through an exemption request or conciliation (to determine good cause).

The TANF 24 and 60-month time limit counters will increment each month for individuals who are coded "DC" and do not receive an exemption from the TANF Work Program (view the NOHS screen in MAVERICS to verify that the A106 was sent.) The case manager is required to complete a desk review each month and schedule a face-to-face interview every 90 days to reassess the status of each barrier and determine if resources are available to remove the barrier(s) to participate. The A106 will be sent again at each 90 day reassessment appointment to ensure the individual is aware of the impact that non-participation in an approved TWP activity has on the 24-month counter. The CADM screen in MAVERICS or the Participant Contact Record (PACR) screen in JAWS must be used to document the face-to-face interview. Inactive individuals should be informed that they should report to their case manager any changes that would affect their eligibility status.

If a barrier causes an individual to fail to meet participation requirements or make satisfactory progress, supportive services may be interrupted while the case manager works with the participant to alleviate the barrier.

Assessment of Employment Barriers

On the basis of the assessment, the case manager and the participant will work together to identify and develop a plan of action to resolve employment barriers that may hinder or prohibit participation in the TANF Work Program. This plan is developed on-line in JAWS via the Maintain Client Barriers (MCLB) screen. JAWS supports the case manager in the development and documentation of the individual's action plan to resolve each barrier by:

1. Providing easy access to relevant current and historical data about the individual.

2. Providing the MCLB screen to record the individual's employment barriers along with a plan of action to remove each barrier and any supportive services required to help the individual remove employment barriers.

3. Printing the barriers and action plan in a format and language understandable to the individual.

4. Recording the individual's agreement to cooperate with the plan of action to remove employment barriers.

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OVERVIEW

The goal of the TANF Work Program (TWP) is to provide TWP participants with the necessary skills, training, and supportive services that will lead them to self-sufficiency. Nonexempt adult applicants must complete the TWP intake process conducted by the case manager (CM) prior to approval of the TANF application and/or assignment to a TWP work activity. The TWP intake process includes program orientation, assessment, development of an individualized Employability Development Plan (EDP), as well as up-front job search (UJS) activities or assessment for vocational rehabilitation services, if required. The individual may be assigned to one or more program components by the case manager.

This chapter defines each of the program components (*work activities*) of the TANF Work Program (TWP). A TWP work activity/component is a structured, regularly scheduled program activity for TWP participants. Federal law specifies twelve separate and distinct work activities. Nine (9) are defined as **core** work activities and three (3) are defined as **non-core** work activities. All countable participation (actual hours, holidays, and excused hours counted) reported for a **core** activity will be counted toward the participant's monthly participation requirement. Countable participation (actual hours, holidays, and excused hours counted) reported for a **non-core** activity will only be counted if the individual participates a minimum of 20 hours per week in one of the nine **core** activities.

CORE AND NON CORE ACTIVITIES

Federal regulations define **core** activities as those allowable work activities in which all countable participation (actual hours, holidays, and excused hours counted) reported will be counted toward the participant's monthly participation requirement. **Non-core** activities are defined as allowable work activities in which countable participation (actual hours, holidays, and excused hours counted) reported will only be counted if the individual participates an average of 20 hours per week in one of the nine **core** activities.

A participant must participate a minimum of 80 hours in a core activity during a four-week month, and a minimum of 100 hours in a core activity during a five-week month before any hours reported for a non-core activity will be counted in the participation rate calculation. The 80 and 100 hours can be a combination of actual hours, excused hours counted, and holidays. This rule applies to all participants, regardless of the youngest child's age.

The following allowable activities are defined as **core** activities:

1. Unsubsidized employment
2. Subsidized private employment
3. Subsidized public employment
4. Work experience
5. On-the-job training
6. Job readiness/job search 120/180 hour maximum in any 12-month period and no more than four consecutive weeks)
7. Community service
8. Vocational education training (12-month lifetime limit)
9. Providing child care for an individual in community service

The following allowable activities are defined as **non-core** activities:

1. Job skills training directly related to employment
2. Education directly related to employment
3. Attendance in secondary school/GED program (Exception: countable as a core activity for participants under age 20.)

Core and non-core activities may be coupled to ensure a participant's scheduled weekly hours are sufficient to meet the participant's monthly federal participation requirement and to meet the requirements of the participant's employability development plan (EDP).

CORE TANF WORK ACTIVITIES DEFINED

Nine (9) of the twelve (12) defined work activities are considered core activities. Three (3) of the nine (9) core activities are paid work activities, and the other six (6) are non-paid work activities.

PAID WORK ACTIVITIES

TWP participants engaged in paid work activities may be eligible for the following supportive services: child care, work (transportation) stipend, work-related expenses, and transitional supportive services. Refer to Volume III, Chapter 10, TWP Payment Process, for additional information. A TWP participant whose TANF case is subject to case closure due to earned income may be eligible for a six (6) or three (3) month earned income disregard. Refer to Volume III, Chapter 9, TANF Total Earned Income Disregards for Paid Work Activities, and Chapter 6, Budgeting Earned Income/Special Disregards, for additional information. TWP participation (attendance) for paid work activities will be projected for up to six months at a time. Refer to Volume III, Chapter 9, Projecting Attendance Forward for Paid Work Activities, for additional information. The three (3) paid, core work activities are defined below.

Unsubsidized Employment - Core Activity

Unsubsidized employment is full- or part-time employment in the public or private sector for which the state does not furnish aid or support to the employer for wages paid to the TANF recipient. Unsubsidized employment is a core activity and the weekly projected work hours will be counted in the participation rate calculation. Projected work hours must be based on employer reports, check stubs, or other employer-issued documentation which verifies the number of hours reported. This includes hours for which the individual is paid but does not work, e.g., paid leave and paid holidays. A participant engaged in unsubsidized employment (full- or part-time) will continue to be eligible for TANF Work Program services as long as the participant continues to receive TANF benefits and comply with TWP requirements. If TANF benefits end due to earned income or loss of a total earned income disregard, the participant may be eligible for transitional supportive services. The eligibility criteria for each TANF transitional supportive service is different. Refer to Chapter 10, Supportive Services, for the eligibility criteria for receiving each transitional service.

Unsubsidized employment may result from:

- up-front job search activities completed during the TANF application processing period;
- self-initiated job search; or
- structured job search activities.

Full-time Employment

An individual who is working 35 or more hours per week and earning at least minimum wage is

considered to be employed full-time. The goal of the TANF Work Program is to help participant's obtain full-time, unsubsidized employment of 35 or more hours per week. However, unsubsidized employment of 32-34 hours per week may be considered full-time employment, provided the following criteria are met:

- The benefits for an employee working 35 hours per week are also available to an employee working 32-34 hours per week, e.g., personal leave, medical leave and insurance; and
- The hourly rate of pay is equivalent to at least 35 hours at the federal minimum wage.

Part-time Employment

An individual who is employed part-time who does not earn enough to move to self-sufficiency will be required to "job search" to find a full-time job or a job which pays higher wages (refer to Chapter 9, Assignment to Job Readiness/Job Search). Individuals may participate in more than one work activity. Participants who are working part-time and are unable to find a better job after job searching may be assigned to another activity (i.e., AWEP, community services, GED, or vocational education) which will provide training and experience needed to make the participant more employable.

Types of Unsubsidized Employment

1. **Regular employment** is work in the public or private sector for which a person receives unsubsidized wages on an hourly, weekly, monthly basis, etc. **NOTE:** Contractual employment is considered regular employment for which a person is paid monthly.

2. **Self-employment** is work for which a person earns income directly from one's own business, trade or profession rather than a specified salary or wages from an employer. Income may be verified by a 1099 form, check stubs, or written statements from customers. Individuals earning less than the federal minimum wage, regardless of the number of hours working, must also participate in other allowable activities which will lead to self-sufficiency (i.e., an individual caring for a child 30 hours per week earning $50 per week will be assigned to job readiness/job search). Self-employment work hours for TWP participation must be determined by the income used to calculate the family's TANF cash assistance grant. The monthly income will be divided by the federal minimum wage to obtain the monthly hours. The monthly hours will be divided by 4.33 to obtain the average weekly hours that can be counted as TWP participation. Self-declaration of work hours is not an acceptable method of determining work hours for TWP participation rate purposes.

Subsidized Employment (Private and Public Sector) - "Core" Activity

Subsidized employment is defined as subsidized employment in the private or public sector for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing a recipient. Projected work hours must be based on employer reports, check stubs, or other employer-issued documentation which verifies the number of hours reported. This includes hours for which the individual is paid but does not work, e.g., paid leave and paid holidays. A participant engaged in subsidized employment (full- or part-time) will continue to be eligible for the TANF Work Program services as long as the participant continues to receive TANF benefits and comply with TWP requirements. If TANF benefits end due to earned income or loss of a total earned income disregard, the participant may be eligible for TANF transitional supportive services. Refer to Chapter 10, Supportive Services, for the eligibility criteria for receiving each transitional service.

Subsidized employment includes the following employment models:

1. Work supplementation where TANF funds that would otherwise be paid to the family as assistance is paid to the employer.
2. A third-party contractor, like a temporary staffing agency, serves as the employer of record and is paid a fee to cover the salary, expenses and success in placing employees.
3. Work study programs which involve paid employment provided by an educational institution if the student's earnings are subsidized by the educational institution; and
4. Supported work for individuals with disabilities in an integrated setting, e.g., Vocational Rehabilitation AbilityWorks. Workers with disabilities may receive individualized services such as, but not limited to, transportation, family support and/or additional supervision.

Employers participating in a subsidy program sponsored by the Mississippi Department of Human Services, Division of Economic Assistance, in which TANF funds are used to subsidize wages paid, must submit monthly documentation to verify participant attendance data. Agency staff will review and monitor employer reports to determine whether sufficient documentation exists to substantiate reported attendance data and to warrant a subsidy payment. This auditing process will ensure the agency only pays for and reports actual, allowable hours of participation.

Work Study

Participation in work study programs is defined as subsidized employment and will be tracked under the component type SUB and session type WKS (SUB/WKS). Work study is an approved employment plan at an accredited college, frequently granted in addition to other student

financial aid. Various public funding sources may be utilized to pay earnings for hours worked. Earnings may be paid directly to the student or applied toward the student's tuition fees. TWP participants who wish to use work study as their work activity must provide documentation (work schedule and check stubs) to the case manager. The case manager will contact the educational institution to verify that institution's policy on work study. The participant will not receive TWP participation credit during school breaks and holidays.

On-the-Job Training (OJT) - "Core" Activity

On-the-Job Training is defined as paid employment provided by a public or private employer through a contractual arrangement in which the employer provides training and skills essential to perform the job and the employer is reimbursed for the added costs associated with training (the employer is not provided a subsidy for wages paid.) While engaged in productive work, the participant is provided additional daily supervision and training which will provide the knowledge and/or skills essential to fully and adequately perform the job. The participant is compensated at a rate (including benefits) comparable to that of other employees performing the same or similar jobs. The state reimburses the employer up to 50 percent of the wages paid to the participant utilizing WIA funds to offset the cost of training and supervision given to the participant. The employer is expected to retain the participant as a permanent employee at the end of the training period.

In Mississippi, OJT is administered by the Mississippi Department of Employment Security through their local WIN Job Centers and/or other sources. The case manager must be knowledgeable about OJT opportunities and coordinate referrals through the local WIN Job Center. If other sources are being utilized, the employer must be willing to provide a written training plan, supervise the participant, and provide weekly attendance and performance reports to the case manager. Wages paid through OJT placements may cause a participant to lose eligibility for TANF benefits.

OJT work activities may also include internships, practicums, professional certification, and clinical training required by an academic or training institution for licensure, when the individual is paid by an employer to attend such activities and when they otherwise meet the definition of OJT.

TWP participation hours are based on employer reports, check stubs, or other employer-issued documentation verifying the number of hours worked. This includes paid leave and paid holidays. The case manager uses this documentation to determine the participant's projected work hours for participation and to monitor continued employment.

NON PAID WORK ACTIVITIES

Participants engaged in non-paid work activities may be eligible for the following TANF supportive services: child care, work (transportation) stipend, participation stipend and work-related expenses. Refer to Volume III, Chapter 10, TWP Payment Process, for additional information. Participants may also receive participation credit for assigned/scheduled hours or days on which the participant is excused from work activity assignments due to limited holidays and excused absences. Refer to Volume III, Chapter 9, Holidays and Excused Absences for Non-Paid Work Activities, for detailed information. The six (6) non-paid "core" work activities are defined below:

Alternative Work Experience (AWEP) and Community Service Programs - "Core" Activity

Many individuals, particularly the young and long-term unemployed, have difficulty obtaining employment. The main objective of assigning a TWP participant to a work experience (AWEP) or community service activity is to improve work skills by offering training and experience for a better understanding of the work world and/or correct behavioral programs such as attitude, personal appearance (dress/grooming/hygiene), punctuality, etc., so the individual may move more quickly into full-time employment. These positions are not funded and the participant receives no pay. TWP participants assigned to AWEP or community service (volunteer placements) must register with the Department of Employment Security.

Six-Month Placement Limitations

Individual volunteer placements will not exceed a maximum of six months per federal fiscal year and no more than six months with the same worksite provider. AmeriCorp (Vista) volunteers may be exempt from the six-month limitation per federal fiscal year based on the length of their signed contract. (Refer to AmeriCorps Vista Volunteers for further information.) Extensions beyond the six-month limitations are based on the following:

- Continuation of a current placement requires written approval from the regional director to include the time period for which the extension is granted, if approved; and

- A subsequent placement with a different provider requires participation in job readiness/job search activities between the AWEP/ community service placement periods, and county director approval is required if the subsequent placement is expected to exceed the six-month per federal fiscal year limitation.

The county director will monitor AWEP and community service placements each month to ensure AWEP and community service placements do not exceed the 6-month limitation without written approval from the regional director or designee. Verification of the regional director's approval must be scanned to the case record and the PACR screen in JAWS documented accordingly. The county director will also monitor AWEP placements with child care facilities to ensure individual placements do not exceed a maximum of three (3) TWP participants at any given time. TWP participants placed in child care facilities are prohibited from working or caring for the same age group of their own children.

The county director is responsible for approving all entities utilized by the county as AWEP and community service worksites. Page two of the AWEP/Community Service Agreement, MDHS-EA-366, is used to document county director approval. If the entity is a private for-profit entity, the county director must also sign and date page one of the MDHS-EA-366 and check the appropriate block to indicate his/her approval or disapproval. Forms MDHS-EA-366, Alternative Work Experience/Community Service Agreement, and MDHS-EA-375, Approval of an Entity for Work Program Placements, and any other supporting documentation must be submitted to the county director for approval. A fully executed agreement must be in place prior to making any TWP volunteer placements. The forms will be maintained in the county's administrative files.

Alternative Work Experience Program (AWEP) placements are made with **private nonprofit** and **private for-profit** entities that provide the individual an opportunity to acquire the general skills, training, knowledge, and work habits necessary to obtain the employment goal or successfully accomplish the career goal identified in the individual's employability development plan. Work site sponsors for private for-profit entities are required to submit a written progress report for each TWP volunteer placement every 90 days at a minimum, or more frequently, if deemed necessary. Progress reports should discuss in detail the participant's responsibilities, duties performed, skills learned, work behavior, and areas needing improvement, etc. Progress reports will be filed in the TWP Temp Docs folder of the individual's electronic case record.

Community service placements are made with **public entities** and are limited to projects that serve a useful public purpose in fields such as: health, social service, environmental protection, education, urban and rural redevelopment, welfare, recreation, public facilities, public safety, and child care. Community service activities are structured programs that provide a direct benefit to the community and improve the employability of the participant. Self-initiated community service activities are subject to approval by the county director and completion of an AWEP/Community Service Agreement, MDHS-EA-366.

Individuals participating in AWEP and community service placements continue to receive their

TANF grant but do not receive wages or compensation for work activities performed for the worksite sponsor. Individuals participating in volunteer programs are subject to the Fair Labor Standards Act (FLSA) requirements and cannot be required to participate for more hours than the family's total monthly TANF assistance benefits (TANF grant and work stipend) net out child support, SNAP allotment and VISTA stipend, if applicable, divided by the federal minimum wage (FMW).

Representatives of AWEP and community service worksite entities will be required to sign form MDHS-EA-366, Alternative Work Experience/Community Service Agreement, to document the working relationship between case management and worksite sponsors in administering AWEP and community service placements for TWP participants. The agreement identifies the responsibilities of case management in matching participants with positions related to their employment goals and the needs of the worksite sponsors, arranging supportive services and referring eligible participants to the worksite sponsor. The agreement includes worksite sponsor requirements in providing daily supervision, weekly attendance reports, periodic performance evaluations and workplace conditions suitable to help meet the goals of the TWP. The agreement prohibits day care facilities from assigning TWP volunteers to work with or care for the age group of their own children, if the provider receives reimbursement through the Child Care Certificate Program for the TWP volunteer's child(ren). Worksite sponsors are responsible for conducting background checks and all fees for TWP volunteers who require a background check. The worksite sponsor is required to document all holidays observed. The agreement allows for termination based on mutual consent or by either party with a thirty (30) day notice.

The MDHS county worker responsible for negotiating the agreement will ensure the appropriate worksite representative is fully informed of all terms of the agreement prior to signing. Attention should be given to the importance of providing daily supervision, maintaining and submitting weekly attendance data, and providing written evaluation reports, as required. Attendance documentation must be signed by the worksite sponsor's authorized representative to validate the data and ensure accurate reporting. Attendance data that is not validated by the worksite sponsor cannot be reported as TWP participation.

AWEP and community service positions are beneficial to both the worksite sponsor and the TWP participant. The sponsor is able to increase or improve services at minimal or no cost to his/her organization. The participant gains valuable experience and is exposed to people who can help him/her obtain unsubsidized employment. The sponsor can also utilize TWP placements as a source for recruiting new employees.

Several different entities share program responsibilities for AWEP and community service placements:

1. The regional director or his/her designee is responsible for approving placements which exceed the six-month limitation with the same worksite sponsor.

2. The county director or his/her designee is responsible for:

   - developing AWEP (private non-profit and private for-profit entities) and community service (public entities) opportunities;
   - approving AWEP and community service worksite providers via forms MDHS-EA-366 and MDHS-EA-375;
   - ensuring that day care facilities are informed about and comply with the provision that prohibits TWP volunteers from working with or caring for the same age group of their own children if the provider receives reimbursement through the Child Care Certificate Program for the TWP volunteer's child(ren);
   - ensuring that no more than three (3) TWP volunteers are placed at a child care facility at any given time;
   - ensuring that the TANF assistance benefit used in the FLSA calculation is the net amount of assistance provided after subtracting the amount of any current child support collection retained by the state and federal governments to offset the cost of providing that assistance;
   - ensuring that each placement meets the Fair Labor Standards Act (FLSA) requirements;
   - ensuring that each participant's progress is evaluated at least every ninety (90) days;
   - monitoring AWEP and community service placements monthly to ensure the policy regarding the six-month limitation is enforced; and
   - ensuring that placements exceeding the six-months per federal fiscal year limitation are supported by written approval from the regional director or county director as required by policy.

3. The case manager is responsible for:

   - providing the services outlined in the MDHS-EA-366, Section II, A;
   - matching participants with positions related to their employment/career goals and the needs of the worksite sponsors;
   - screening and referring suitable participants to the worksite sponsor;
   - calculating the FLSA hours and scheduling weekly participation hours accordingly;
   - arranging appropriate supportive services needed by the participant;

- mediating between the worksite sponsor and the participant in the event of problems; and
- counseling participants when problems occur.

1. The worksite sponsor is responsible for:

- providing the services outlined in the MDHS-EA-366, Section II, B;
- developing a job description for positions supported by TWP volunteers;
- interviewing TWP participants referred for volunteer slots;
- testing (if required for the position) and selecting participants;
- providing daily supervision of TWP participants;
- maintaining and submitting weekly attendance reports;
- providing written performance evaluations and progress reports, as requested; and
- conducting background checks for TWP volunteers, if required.

Below are a few examples of potential AWEP and community service worksite sponsors:

AWEP	Community Service	
Child care facilities	American Red Cross	Libraries
Private non-profit businesses	State agencies	City parks
Private for-profit businesses	Head Start programs	State parks
Private hospitals	Public hospitals	School Systems
Private nursing homes	City government	Churches
Physician offices	County government	United Way

The case manager must assign and track AWEP and community service placements accurately according to the entity type and policy definitions.

Activities excluded from the definition of AWEP or community services include Job Corps, substance abuse treatment, mental health and family violence counseling, life skills and parenting classes, job readiness instruction, caring for a disabled household family member, unstructured and unsupervised activities such as helping a neighbor or friend, foster parenting, and activities that meet the definition of another allowable TANF work activity.

AmeriCorps (VISTA) Volunteers

AmeriCorps work activities are defined as community service. **AmeriCorps** recruits and trains individuals who are willing to devote at least one year to serving in their community to meet

specific needs. AmeriCorps includes two programs, AmeriCorps*VISTA and AmeriCorps* NCCC.

AmeriCorps*VISTA is dedicated to increasing the capability of people to improve the conditions of their own lives. Members work full-time and live in the communities they serve. Members must be at least 18 years old.

AmeriCorps*NCCC (National Civilian Community Corps) is a ten-month, full-time residential service program for men and women age 18 to 24. Members address education, public safety, and other issues, but their first priority is improving the environment.

AmeriCorps members receive a modest living allowance and health coverage while participating in the program. After completing one year of service, members will receive an education award (money payment). The award can be used to pay off student loans or to finance college, graduate school, or vocational training. AmeriCorps*NCCC can help pay child care for members with dependent children by matching a portion of the member's payments, although children are not allowed to live on the campus.

Exemption from the Six-Month Placement Limitation

AmeriCorp/Vista volunteers who have signed contracts may be exempt from the six-month limitation and may remain in the community service placement for the length of the contract. A copy of the signed contract must be scanned to the electronic case record and the PACR screen documented accordingly.

Worksite Sponsor

The worksite sponsor should be informed by the case manager of the requirements for an AWEP or community service placement.

- The worksite sponsor will not be required to provide workers' compensation. (TANF recipients are eligible for and should be covered by Medicaid; however, MDHS cannot guarantee coverage.)

- The TANF participant cannot replace a current employee or fill a vacant staff position.

- Positions which can be filled are those for which the entity does not have funds available to establish the position at the time of TWP placement.

- The worksite sponsor will allow the participant time off for job interviews, when necessary.
- The worksite sponsor will agree to provide close daily supervision and actual workplace experience so the trainee can gain experience and skills.
- Participant sign in/out sheets will be verified and maintained daily.
- Participant attendance records will be compiled, verified, and submitted to case management each Monday for the previous week or as requested by case management
- Written progress reports will be provided to case management, as requested.
- The health and safety of the trainee will not be endangered.
- The activity to which the individual is assigned will not be of a personal nature for any employee of the agency.
- All information pertaining to the individual will be kept confidential.
- Case management will be promptly notified of any accidents, failure to report to work, failure to perform satisfactorily, or failure to cooperate with the agency or supervisor.
- If the worksite sponsor is a day care provider, TWP volunteers will not be assigned to work with or care for the age group of their own children, if the provider receives reimbursement through the Child Care Certificate Program for the TWP volunteer's child(ren).

Component Assignment

Individuals who are determined to be job ready based on their education, work skills, and/or work experience, but are unable to find immediate employment may be placed in AWEP or community service by case management:

- While waiting to start job readiness/job search activities;
- After completing four (4) weeks of job readiness/job search and full-time employment has not been obtained. AWEP or community service assignments should only be used when all other efforts to find paid employment have been unsuccessful; or

- As a means to ensure a participant who is assigned to another allowable work activity, but the weekly scheduled participation hours are not sufficient to allow the participant to meet his/her monthly federal participation requirement. In this instance, another allowable work activity will be coupled with AWEP or community service to meet any additional hours needed to satisfy the participant's monthly participation requirement.

Before an individual can be assigned to an AWEP or community service component, the following **prerequisites** must be met, if applicable.

1. The employment or educational goal in the individual's EDP is consistent with the AWEP or community service assignment.

2. The individual is actively registered with the local Mississippi Department of Employment Security.

3. The participant completed any necessary interviews and testing required by the AWEP or community service position.

Determining Maximum Number of Hours to be Assigned

Placements in AWEP and community services must meet strict Fair Labor Standards Act (FLSA) requirements. **The maximum number of hours that a participant may be required to participate in an Alternative Work Experience Program (AWEP) or community service activity is based upon the family's combined monthly benefits divided by the federal minimum wage.** The value of the family's monthly benefits will include TANF assistance payments (TANF grant and work stipend), SNAP benefits and VISTA stipend, if applicable. The value of each benefit will be based on either the benefits for the most recent paid month or benefits anticipated for the first full calendar month of placement, whichever is greater. The value of TANF assistance benefits will be based on the net amount of assistance provided after subtracting the amount of any current child support collection retained by the state and federal governments to offset the cost of providing that assistance.

The case manager must determine the amount, if any, of the TANF payments that will be recovered by the child support collection prior to calculating the maximum number of hours a participant may be required to participate in an Alternative Work Experience Program (AWEP) or community service (COM) activity. Once the amount of current child support recovery is established, the case manager must determine the amount of TANF payments the participant will receive for the month of placement then subtract the amount of child support recovery. The

remaining amount, if any, will be used in the FLSA calculation. The methodology used to net out the child support recovery and the actual calculation must be clearly documented on the PACR screen.

Determining the Amount of Child Support Recovery

The case manager will request, from a IV-D worker or a IV-A staff member who has METSS access, the amount of child support recovery for the month prior to the month the FLSA calculation is completed. After inquiring on the recipient on **PERS**, the METSS user should review the **PFIN** screen for one of the METSS case numbers. If the **PFIN** screen lists an amount in the IV-A Recovery field, further investigation is required to determine the amount of current and past recovery. Accessing the **CUST** screen will provide information as to which absent parent/parents paid support. By accessing the **FBAL** screen for each case number showing a payment, the user can identify the amount of current recovery which is shown on **FBAL** as **CURR MO RCT** (Current Month Receipt.) Obtain the total amount of recovery by totaling the amounts listed on the **FBAL** screens.

Note: If the IV-A recovery amount listed on **PFIN** is significantly different from the amounts listed for other months in the last 6 months, the worker should investigate further to determine the recovery amount to use prospectively in the FLSA calculation. Determine the prospective recovery amount just as a worker would when determining the amount of child support to use in the SNAP budget.

Determining the TANF Payment to Use in the FLSA Calculation

Once the amount of current child support recovery has been determined, the case manager will subtract the anticipated TANF grant from the amount of current child support recovery. If the difference is more than zero, subtract the TWP work (transportation) stipend from the remaining current child support recovery until TANF payments are recovered.

FLSA Calculation

The case manager will enter the family's combined monthly benefits on the FLSA calculation "pop-up window" in JAWS when making the component assignment. The JAWS system will automatically calculate the family's total monthly benefits and divide the total by the federal minimum wage to determine the maximum FLSA hours the participant may be required to participate in AWEP or community service activities. If there are two TWP participants in the

same TANF or SNAP case, the benefit amount for the case may be used for only one member of that household. Examples of the FLSA calculation are shown below.

Example 1: NO CHILD SUPPORT RECOVERY INCLUDED

1. Family of 3 - maximum grant

Total SNAP benefit:	$ 426.00
Total TANF Grant:	170.00
TWP Work (transportation) Stipend:	300.00
VISTA Stipend*	0.00
Total Monthly Benefits	$ 896.00

*__AmeriCorps__ members (VISTA Volunteers) receive a modest living allowance and health coverage while participating in the program. This allowance will be included in the FLSA calculation. However, VISTA stipends are excluded when determining eligibility for TANF.

2. Total monthly benefits are divided by the federal minimum wage to determine the number of hours per month.

$896.00 ± $7.25 = 123.58 hours per month

3. The number of hours per month is divided by 21 days to determine the number of hours per day.

123.58 ± 21 = 5.88 hours per day (8 hours per day maximum)

(TANF) + (SNAP) + TWP Work (transportation) Stipend + VISTA Volunteer* = (Total Benefits) ± (FMW) ± 21

Example 2: CHILD SUPPORT RECOVERY INCLUDED

Jane Smith will receive for October, $170 TANF grant, $300 TWP work (transportation) stipend, and $200 SNAP benefit. Child Support Enforcement consistently collects $600 child support each month. The $170 TANF grant would be subtracted from the $600 child support collection leaving a difference of $430. The $300 TWP work (transportation) stipend would be subtracted from the $430 leaving a balance of $130. All of the TANF payments would have been recovered leaving zero (0) amount to be entered on the FLSA calculation screen for the TANF grant and TWP work (transportation) stipend.

FLSA CALCULATION

Total SNAP Benefit:	$ 200.00
Total TANF Grant:	
TWP Participation Stipend:	
TWP Work (transportation) Stipend:	
VISTA Stipend:	
Total Monthly Benefits:	$ 200.00

HOURS PER DAY: 1.31
HOURS PER WEEK: 6

Example 3: CHILD SUPPORT RECOVERY INCLUDED

John Doe will receive $170 TANF grant, $300 TWP work (transportation) stipend, and $250 SNAP benefits for the month of October. Child Support Enforcement consistently collects $200 child support each month. The $170 TANF grant will be subtracted from the $200 child support, leaving a difference of $30. The $30 child support recovery would be subtracted from the $300 TWP work (transportation) stipend leaving $270 of the $300 TWP work (transportation) stipend to be counted in the FLSA calculation.

FLSA CALCULATION

Total SNAP Benefit:	$ 250.00
Total TANF Grant:	
TWP Work (transportation) Stipend:	270.00
VISTA Stipend:	
Total Monthly Benefits:	$520.00

HOURS PER DAY: 3.42
HOURS PER WEEK: 17

If, after the calculation, the participant's maximum FLSA hours are calculated to be more than 40 hours per week, the participant must not be assigned to more than eight (8) hours per day or 40 hours per week regardless of the maximum number of FLSA hours calculated. Do not round

until the last calculation and then always round the weekly hours down, e.g., 27.5 hours will be rounded down to 27 hours.

NOTE: If the JAWS system is not available at the time an individual is placed in AWEP or community service, the case manager must use form MDHS-EA-363A, Alternative Work Experience/Community Services Placement Worksheet, to manually calculate the maximum FLSA hours the individual can be required to participate each week/month. The completed form must be scanned to the individual's case record and the FLSA calculation completed in JAWS as soon as the system becomes available.

EXAMPLE: **Two-parent** family - If the case manager uses the family's TANF and SNAP benefits to calculate the maximum FLSA hours the husband may be assigned to community service, the TANF and SNAP benefits cannot be used to calculate the maximum FLSA hours for the spouse. The spouse's FLSA calculation can only include her TWP work (transportation) stipend.

Single parent family - A mother and daughter have separate TANF cases, but are in the same SNAP case, are referred to the TWP. The case manager assigns the mother to community service and uses the mother's TANF benefits and the combined SNAP benefits to calculate the maximum FLSA hours that may be assigned. If the daughter is assigned to community service or AWEP, the case manager can only use the daughter's TANF benefits, TWP work (transportation) stipend, and VISTA stipend, if applicable, to calculate the maximum FLSA hours that may be assigned.

After the FLSA hours are correctly calculated, the case manager must determine whether the maximum number of FLSA hours, in conjunction with the "deeming" process, if applicable, is sufficient to meet the participant's monthly participation requirement. If not, in addition to the AWEP/community service assignment, the case manager must assign the participant to another allowable TWP activity for the additional hours needed. The participant will be sanctioned for not attending the additional hours without good cause.

FLSA Deeming

When the maximum FLSA hours are calculated to be less than 20 hours per week the participant may be eligible for the deeming process. During the component assignment process, a "Y" must be entered in the CALCULATE FLSA HOURS field on the MPWA screen to access the FLSA calculation pop-up window. Once the FLSA hours are calculated, JAWS will display the FLSA

hours in the FLSA HOURS field on the MPSA screen. During the monthly participation rate calculation process, JAWS will identify potentially eligible participants. Once identified, JAWS will compare the total FLSA hours calculated for the report month (e.g., 16 hrs. per week X 4 weeks = 64) and the total countable participation hours (actual participation, excused hours counted, and holiday hours) for the report month to determine whether the actual countable hours are equal to the FLSA hours. If yes, JAWS will automatically give the participant credit for 80 hours (4-week month) or 100 hours (5-week month) for the report month,when the participation rate is calculated for the report month.

Example for a four-week month: The FLSA calculation is 68 hours (17 hours per week x 4), and the individual's countable participation hours (actual, holiday, and excused hours counted) is equal to 68 hours for the report month, JAWS will automatically give the individual credit for 80 hours (20 x 4) for the report month when the participation rate is calculated.

Example for a five-week month: The FLSA calculation is 85 hours (17 hours per week x 5), and the individual's countable participation hours (actual, holiday and excused hours counted) is equal to 85 hours for the report month, JAWS will automatically give the individual credit for 100 hours (20 x 5) for the report month when the participation rate is calculated.

NOTE: The deeming process is limited to a maximum of 80 or 100 hours per participant, per report month based on the number of weeks in the report month. In the above examples, a participant whose youngest child is under age six (20 hours per week required) would meet participation for the report month. However, a participant whose youngest child is age six or older (30 hours per week required) would not meet participation for the report month (120/150 hours required and the deeming processed allowed 80/100.) In this situation, the AWEP/ Community Service component must be coupled with another allowable component.

Evaluating the Participant's Progress

Case management will evaluate the participant's progress in AWEP and community service at the end of each placement period, but no less than every 90 days. The results of each assessment will be used to determine whether the training experience is meeting the steps/goal outlined in the individual's EDP and moving the participant forward toward self-sufficiency. Assessment results will also be used to determine if other training or educational activities are needed or whether employment opportunities are available.

If the participant is making progress and additional time is needed in the AWEP/community service activity, continued placement exceeding the 6-month limitation must be reviewed and

approved, in writing, by the regional director or designee. The written approval from the regional director must be scanned to the participant's electronic case record.

As a regular part of the evaluation (quarterly at a minimum), the case manager must:

- Review the individual's TANF and SNAP benefits to determine if there has been a permanent change in the benefit amounts. If a permanent change has occurred, the case manager must close the existing component and add a new component in order to recalculate the maximum hours based on FLSA requirements.

- Review the case for improvements, changes, or any information that would affect the placement of the individual into a full-time job and consult with the job readiness trainer and/or employment coordinator regarding potential employment opportunities. The case manager may require the participant to go for job interviews at any time during the AWEP or community service assignment when a suitable employment opportunity is available. Job interview appointments should be scheduled around the participant's AWEP/ community service work schedule, when possible.

- Assess how the participant feels about the work activity assignment.

- Review the availability of other appropriate TWP activities.

Job Readiness/Job Search - "Core" Activity

Job readiness and job search activities must have a direct connection to improving employability or finding employment, and are defined as the act of seeking or obtaining employment, preparation to seek or obtain employment, including life skills training, and substance abuse treatment, mental health treatment, or rehabilitation activities for those who need these services to improve employability. Job readiness and job search are considered as one activity by Federal law. Job readiness/job search activities are limited to a maximum of 120 or 180 hours during any 12-month period with no more than four (4) consecutive weeks counted in the participation rate calculation. Job readiness/job search activities will be supervised daily.

120/180-Hour Maximum

In order to determine the maximum hours that could be allowed in any 12-month period, federal regulations define one week for a single custodial parent with a child under age six (6) as 20 hours and 30 hours per week for all other work-eligible individuals. Therefore, a six-week period equates to 120 hours (20 x 6) for participants with a child under age six or 180 hours (30 x 6) for participants whose youngest child is age six or older.

12-Month Period

October 2008 was the first month in the initial 12-month period. A maximum of 120 or 180 hours may be reported during any 12-month period. The 12-month period continually rolls and will always be the current report month plus the prior 11 months. A participant with a child under age six is limited to 120 hours during any "rolling" 12-month period. A participant whose youngest child is age six (6) or older is limited to 180 hours during any "rolling" 12-month period. The JAWS Attendance History (ATTH) screen displays a history of the current 12- month period. This history is broken down by the number of hours reported by month, the total hours reported to date, and the total hours available. The case manager will use this screen for tracking and planning purposes.

Increase/Decrease in the 120/180-Hour Maximum

Adjustments in the 120/180 hour allowance will be applied on a case-by-case basis as the family's circumstances change. The increase (120 to 180) or decrease (180 to 120) will be effective the report month following the report month in which a change occurs. The maximum hours for a participant whose youngest child turns age six (6) during the report month of October, will increase from 120 to 180 hours effective for the report month of November. If

that same participant has a new baby that is born during the report month of January, the maximum hours will decrease from 180 to 120 hours effective for the report month of February.

Example:

Report Month	Reporting Period	Date of Birth	Report Month Change Occurred	Report Month Change Effective
September 2008	08/31/08 - 09/27/08	08/30/08	August 2008	September 2008
October 2008	09/28/08 - 11/01/08	09/30/08	October 2008	November 2008
November 2008	11/02/08 - 11/29/08	12/01/08	December 2008	January 2009
December 2008	11/30/08 - 01/03/09	01/02/09	December 2008	January 2009

In a situation where the maximum hours are 180 and a total of 155 hours has already been reported at the time a change occurs causing the maximum hours to decrease from 180 to 120, no additional hours can be reported until sufficient months "roll off" and allowable hours become available.

NOTE: The above chart is also applicable in determining whether a participant is required to have 20 hours (child under age 6) or 30 hours (youngest child age 6 or older) per week to count in the participation rate calculation. In rare instances where the date of birth is also the first day of the reporting period, e.g., 11/30/08, the report month the change occurred and the report month the change is effective will be the same (December).

Four Consecutive Weeks

No more than four consecutive weeks of job readiness/job search participation can be counted in the participation rate calculation. One week is defined as seven (7) consecutive days. Any countable attendance ((thirty minutes, one hour or forty hours of actual, excused, or holiday time) reported during the course of seven consecutive days (Monday through Sunday based on the ARPW screen in JAWS) triggers one week in the four-week limit. Once an individual has

four consecutive weeks of participation, that individual's participation in job readiness/job search will not count for one week, i.e., 7 consecutive days. For example, if a participant is assigned to job readiness/job search for six consecutive weeks, JAWS will only include the attendance data for weeks one, two, three, four and six in the participation rate calculation. JAWS will not include the attendance data entered for the fifth week in the participation rate calculation. If an individual is not placed in employment after four (4) weeks of job readiness/job search, there must be a break of one full week before additional hours can be assigned to the individual (refer to Assessment after Job Readiness/Job Search).

NOTE: County directors will ensure job readiness/job search classes/activities are scheduled for months which include four weeks in the report month, when possible. In counties where there are heavy caseloads and ongoing job readiness/job search classes are conducted, the county director and case management staff must monitor weekly attendance data to ensure all participants meet their individual monthly participation requirement.

Job Readiness Activities

Job readiness activities are defined as coordinated, planned, and supervised classes or individual exercises that help TANF Work Program participants prepare for work. Participants are taught general work place expectations. This may include guidance and motivation to develop positive work attitudes and behaviors necessary to compete successfully in the labor market. Structured job readiness activities (curricula, skill assessments, job club, etc.) will be scheduled for forty (40) hours per week (eight hours per day.) Job readiness assistance consists of two activities:

1. A uniform, structured basic and enhanced training curriculum administered to prepare an individual to obtain employment, such as preparing a resume or job application, interviewing skills, instruction in work place expectations, and life skills training.

   Basic job readiness/life skills are structured activities centered around methods to obtain and retain employment. Activities included are: self-assessment focusing on current skills, abilities, interest and goals, appropriate dress, hygiene, grooming, work ethic, employer expectations, completing applications, interviewing, money management, self-esteem, nutrition and life skills training including balancing life and work, household management, interpersonal skills, decision making skills and time management. Activities will be scheduled for forty (40) hours per week (eight hours per day.)

   Enhanced job readiness includes in-depth activities with individual attention between the participant and the facilitator focusing on the participant's strengths and weaknesses and

reemphasizing and expanding on skills taught in the basic job readiness/life skills program. This forty-hour per week program will follow basic job readiness/life skills for those participants requiring additional preparation for job placement.

2. Substance abuse treatment, mental health treatment, or rehabilitation activities for those who are otherwise employable.

Detoxification services must include medical care and physician supervision and must be certified by a licensed health care provider who must describe the nature of treatment or therapy and that such treatment or therapy is necessary for the person to be able to work.

Mental health treatment, therapy and counseling and rehabilitation activities to address mental or emotional disorders that can interfere with an individual's ability to work or look for work must be provided by qualified state licensed medical/mental health professional who also determines the necessity and the type, duration and frequency of treatment.

Only the actual hours of participation based on the treatment plan are countable in the participation rate. The treatment provider will provide daily supervision and maintain participant attendance records. The case manager will maintain contact with the service provider while the participant is in treatment, as appropriate, but not less than weekly. Individuals whose treatment plan does not provide sufficient hours to meet federal participation requirements will be, in addition to the treatment/rehabilitation activities, assigned to another allowable activity in order to meet monthly TWP participation requirements. Individuals participating in treatment or therapy must be assigned to the appropriate component/session as follows:

JRA/SAT - Substance Abuse Treatment
JRA/MHS - Mental Health Services
JRA/REH - Rehabilitation Activities

Placements in the above components/sessions must be reviewed and approved by the regional director.

Job Search Activities

Job search activities provide counseling/training information about available jobs and instructions in job-seeking skills for participants actively looking for employment. Structured

job search activities may be conducted in a group or on an individual basis. Job search activities include looking for suitable job openings, making contact with potential employers, applying for vacancies, and interviewing for jobs.

The job readiness trainer/employment coordinator will provide daily supervision, including daily responsibility for oversight of an individual's participation. This does not necessarily mean daily contact with the participant but includes access to a staff person who can be contacted to report progress or seek additional guidance as needed before the next regularly scheduled contact. Face-to-face contact must be scheduled on a weekly basis.

Job Club Activities

Job Club activities may be scheduled to discuss the successes and difficulties job seekers encountered during their job search activities; to share job leads; and to provide group support. Documentation of job search activities can be turned in at job club meetings, and form the basis for both the group discussion as well as the planning for other job search activities. The level of structure in the job club may vary greatly and can be tailored to meet the needs of job seekers.

Random Reviews of Job Search Activities

The case manager/job readiness trainer must randomly select one employer contact per week, per participant and follow-up (visit or phone call) with the employer to verify the documented information, confirm completed job interviews, and other related measures for all participants who must receive participation credit (attendance) for job search activities in order to meet their monthly participation requirement and be counted in the numerator (clients meeting participation) for the participation report month. Random reviews must be completed for all participants who fail to meet their required participation hours through job readiness and job club activities for the report month prior to entering attendance data in JAWS.

Random reviews of job search activities will <u>not</u> be required for participants who meet their required monthly participation hours through participation in job readiness and job club activities. That is, for a four-week month, the case manager/job readiness trainer is not required to complete random reviews of job search activities for participants who are required to participate 20 hours per week and meet or exceed the 80-hour requirement for the report month through participation in job readiness and job club activities. In this situation, time spent in job search activities cannot be entered in JAWS.

NOTE: If the time a participant spends in job search activities is not validated and entered in

JAWS, the JAWS system will not allow the case manager to authorize the participation stipend.

Literacy Assessment

The purpose of the literacy assessment is to determine the literacy level of an individual in order to match the person to jobs requiring specific literacy levels. MDHS does not require literacy assessments. However, if an assessment is needed for job placement, the case manager will refer the participant to the local community/junior college for testing.

Attendance Reporting

Attendance data entered in JAWS must be supported by written documentation, e.g., sign-in sheets, attendance reports and job search logs. Under no circumstance will attendance data be entered in JAWS that is not documented on forms MDHS-EA-356A, MDHS-EA-356B or MDHS-EA-395. Job search activities documented on MDHS-EA-395 must be randomly validated via the MDHS-EA-395A process prior to reporting as attendance under the JRA/JRA component.

Attendance documentation, due to volume, will not be scanned into the individual's electronic case record. Hard copy attendance documentation will be maintained in a central location, and maintained according to the retention policy (a minimum of three years). Material will be filed alphabetically, by report month. Attendance files must be accessible to appropriate staff (regional, state office, monitoring, etc.)

Job Readiness Activities - Actual time (minutes and hours) engaged in job readiness activities will be documented and monitored. However, only the minimum number of hours needed for the individual to meet participation for the report month will be reported under the JRA/JRA component assignment. All other hours will be tracked under the JRA/OTH component assignment. The job readiness trainer must maintain daily sign-in sheets (MDHS-EA-356B) to verify the participant's daily attendance. A weekly attendance report (MDHS-EA-356A) will be compiled and submitted to case management each Monday for the previous week or as requested. The sign-in sheet(s) must provide the current calendar date, the county location, provider name, component type, participant names and signatures, participant case numbers/social security numbers and the arrival and departure times. The attendance report must provide each participant's name, social security number/case number and the daily attendance data, along with the appropriate attendance codes (E-excused, U-unexcused, H-holiday). The class instructor will sign the daily sign-in sheets and attendance reports to validate the data reported. The case manager or job readiness trainer will use the attendance reports (MDHS-EA-

356A) to enter attendance data into JAWS. Participants who fail to participate satisfactorily will be conciliated and sanctioned if good cause cannot be substantiated.

Job Search Activities - Actual time (minutes and hours) engaged in the job seeking process and the actual travel time between employment contacts may be reported as TWP participation. Only the travel time from one employment contact to the next is countable. Travel time from the participant's residence, work site, etc. to the first employment site and from the last employment site back to the participant's residence, work site, etc. is not countable. Case managers cannot allow a standard set of time for each job contact (application, interview, etc.), i.e., two hours cannot be allowed for each employer contact. Only the actual time a participant spends at an employment site (arrival to departure), completing online applications, or on the telephone with an employer, along with the actual travel time between employment sites, is countable as TWP participation. Each participant will be required to maintain MDHS-EA-395, TWP Job Search Record, daily to document all employment contacts (visited in person, by internet or by telephone) and travel time. The MDHS-EA-395 will provide the date and time of contact, type of contact, position of interest, the name of the employer, along with the contact information, and the travel departure and arrival times. The participant will submit completed MDHS-EA-395 forms to case management each Monday for the previous week or as requested. If the individual does not meet his/her minimum monthly participation requirement through time engaged in classroom instruction and job club activities, the case manager must complete the job search validation process before time engaged in job search activities can be reported as federal participation via the JRA/JRA component. If the individual has sufficient hours from classroom instruction and job club activities, it is not necessary for the case manager to validate the individual's job search documentation. In this situation, all of the time engaged in job search activities will be tracked under the JRA/OTH component assignment. Participants who submit incomplete reports or report inaccurate or false data will be conciliated and sanctioned if good cause cannot be substantiated.

Guidelines for Reporting Attendance

In order to maximize the 120/180-hour limitation, two component assignments (JRA/JRA and JRA/OTH) will be used to enter and report/track job readiness/job search attendance data.

The **JRA/JRA** component assignment will be used to enter and report the minimum number of hours needed for the individual to meet his/her monthly federal participation requirement. **Attendance entered for this component will count in the participation rate calculation and will count against the individual's 120/180 maximum allowed during any 12-month period.**

The **JRA/OTH** component assignment will be used to enter and track all participation hours that exceed the minimum number of hours needed to meet the individual's monthly federal participation requirement. JRA/OTH can also be used to avoid reducing the 120/180 limit when the total hours (actual, excused, holiday) are less than the minimum needed for the individual to meet his/her monthly participation requirement. **Attendance entered for the JRA/OTH component will not count in the participation rate calculation and will not count against the individual's 120/180 limit.** NOTE: JAWS will not allow the case manager to go to the next week without adding attendance data for the current week.

If the component/session is equal to JRA/JRA or JRA/OTH and a "Y" is entered in the "Build the next attendance week" field, JAWS will display a record for the next week without entering any attendance data for the current week. This field will default to "N" and will be protected for all other components except AWEP and community service.

Case managers must use extreme caution when entering job readiness/job search participation data. There are no system edits to prompt case managers to enter attendance data under the appropriate component. Entering attendance data under the incorrect component will have a negative impact on the participation rate and the 120/180-hour limitation during any 12-month period.

NOTE: Authorization of the participation stipend for participation in job readiness/job search activities may be delayed depending on the data entry process used by the county. Counties that choose to "hold" weekly attendance data until sufficient hours are available for the participant to meet his/her monthly participation requirements will cause authorization of the participation stipend to be delayed. In this situation, the case manager will inform the participant of this procedure and provide a time line as to when the participant can expect to receive the participation stipend (third week or first week of the following month).

JAWS Data Entry Examples

The following examples demonstrate various ways to enter JRA/JRA and JRA/OTH attendance data in order to maximize the 120-/180-hour allowance during a 12-month period and how to avoid the four-week limitation during a five-week month. NOTE: Weekly JAWS attendance hours must be equal to the hours reported on the hard copy documentation. Attendance earned in week one cannot be entered for week two, etc.

Job readiness/job search activities are scheduled for 8 hours per day, 40 hours per week. The weeks counted in participation are shaded to show that no more than four weeks are consecutive.

Example 1

5-Week Month - Participant needs 100 hours to count in participation for the report month.
Client is scheduled to participate 8 hours per day, 40 hours per week.
Client participated 40 hours each week for a total of 200 hours for the month.

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	40	40	20	0	0	100
JRA/OTH	0	0	20	40	40	100

Example 2

5-Week Month -Participant needs 150 hours to count in participation.
Client participated 40 hours in weeks one, two, three, and four.
Client participated 2 days (16 hours) with 3 days excused (24 hours) in week 5.
Total actual participation for the report month was 166 hours.

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	40	40	40	30	0	150
JRA/OTH	0	0	0	10	16 / 24-E	16

Example 3

5-Week Month - Participant needs 150 hours to count in participation.
New referral - started job readiness on Wednesday of Week 1 (first day of the benefit month). Client participated 24 hours in Week 1(16 hours excused), and 40 hours in weeks 2, 3, 4, and 5.
Total actual participation for the report month was 184 hours.

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	0	40	40	40	30	150
JRA/OTH	24 / 16-E	0	0	0	10	34

Example 4

4-Week Month - Participant needs 80 hours to count in participation.
Client participated 40 hours in weeks 1, 3, and 4.
Client participated 24 hours in Week 2(16 hours excused).
Total actual participation for the report month was 144 hours.

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	40	0	40	0		80
JRA/OTH	0	24 / 16-E	0	40		64

OR

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	40	24	16	0		80
JRA/OTH	0	16-E	24	40		64

Example 5

4-Week Month - Participant needs 80 hours to count in participation.
Client participated 40 hours in Week 1.
Client participated 24 hours in Week 2(16 hours excused).
Client was a "no show" for weeks 3 and 4 (conciliation set up in Week 3).
Total actual participation for the report month was 64 hours.

Component	Week 1	Week 2	Week 3	Week 4	Week 5	Total Hrs.
JRA/JRA	40	24 / 16-E	0	0		80
JRA/OTH	0	0	0	0		0

NOTE: Policy allows up to 16 excused hours per month to be counted in participation. In this example, the client needs 16 hours to meet participation. The "look back" process shows that 16 excused hours are available; therefore, the case manager codes the 16 hours as excused hours counted under the JRA/JRA component.

Vocational Education - "Core" Activity

Vocational education (not to exceed 12 months) is defined as organized educational programs which offer a sequence of courses directly related to the preparation of individuals for employment in current or emerging occupations that do not require an advanced degree. Such programs will include competency-based applied learning which contributes in an individual's academic knowledge, higher-order reasoning, and problem-solving skills, work attitudes, general employability skills, and the occupational-specific knowledge and skills that prepare participants for a specific trade, occupation, or vocation. Vocational education programs must be provided by education or training organizations, such as vocational-technical schools, community colleges, post-secondary institutions, proprietary schools, distance learning program providers, nonprofit organizations, and secondary schools that offer vocational education.

All work activity assignments defined as vocational education will be tracked under the VOC/EDU (subject to the 12-month limitation) or JST/JST component assignments. Educational programs leading to an advance degree (Master's, PhD, etc.) are not countable as vocational education, but may be counted as job skills training directly related to employment (JST/JST) which is a non-core activity.

Daily supervision may be provided by faculty, instructors, instructional aides, lab supervisors and supervisors of study sessions or work-based learning activities. The participant will maintain daily attendance records via form MDHS-EA-356, TWP Participant Attendance Report, which will be submitted to case management each Monday for the previous week. The case manager will maintain contact with the educational provider while the participant is enrolled, as appropriate, but not less than monthly.

NOTE: If the individual receives financial aid which includes an allowance for child care and/or transportation expenses, the individual will not be eligible for TANF supportive services for these expenses for time spent in vocational education activities.

Types of Vocational Education

There are a variety of types of vocational education programs that are allowed under the definition of vocational education training: They include:

- **Post-secondary educational programs** are courses of study at an accredited four-year college or university leading a baccalaureate/bachelor's degree. Post-secondary educational programs leading to an advance degree (Master, PhD, etc.) **cannot** be

counted under vocational education, but may be counted as job skills training directly related to employment, a non-core activity.

- **Vocational associate degree programs** consist of both academic and vocational for-credit course work that usually requires about 60 credits and provides an associate degree (arts-AA, science-AS or applied science AAS). Examples: agricultural business and production, business, computer and information science, dental hygiene, engineering, health-related professions, interior design, communication technologies, personal services, protective services, construction, automotive technology, and transportation.

- **Instructional certificate programs** are generally designed to upgrade job-related skills. These programs generally require about one year to complete and require very little, if any, academic courses. Examples: dental assisting, floral arranging, carpentry, cosmetology, certified nursing assistant, medical secretary, teller training, and welding.

- **Industry skill certifications** are industry-developed certificates for students who demonstrate specific skills, often through a test. Preparation for these tests includes self-study and courses offered at post-secondary institutions and other training providers.

- **Noncredit course work** is designed to accommodate those who want specific job-related skills. Examples: Intro to Windows 98, Intro to Fiber Optics, Catering and Food Preparation, and Real Estate License.

- **WIN Job Centers** coordinate training in regular vocational courses taught at local community colleges and other training entities. Training may include nursing, truck driving, chemical phlebotomy, and computer programming. Once determined eligible, the participants' tuition, books and other training costs are paid for utilizing WIA funds. WIN Job Centers also offer specific occupational and vocational skills to eligible individuals in WIA-funded classroom training.

- **State Board for Community and Junior Colleges (SBCJC**) coordinate short-term training programs based on employer needs. Establishment of a short-term training program may be initiated by MDHS or SBCJC staff. TANF funds will be utilized to pay training costs for TANF eligible individuals.

- **Job Corps** offers vocational skills training to young people who have left school or who have finished high school and cannot find a job. They are between 16 and 21 years of age and come primarily from lower-income families. Most Corps members complete

their training in about a year, but they can stay as long as two years. Corps members receive training in such fields as: clerk-typing**;** data entry; carpentry; plumbing; nurse aide; welding and electricity.

- **Basic skills education and English as Second Language (ESL) activities** may be counted under vocational education only if these activities are a necessary or regular part of the vocational education training program in which the participant is enrolled. The requirement for or integration of such activities must be supported by written documentation from the vocational education component provider. Basic skills education and ESL cannot count under vocational education as stand-alone programs. Stand-alone programs must be tracked and reported under the appropriate component/session which may or may not be countable in the participation rate calculation.

- **Distance learning programs** are computer based educational activities that provide formal training during which the student is not in the same physical location as the instructor. Course work is completed online through an accredited educational institution or internet-based provider. Students may or may not have direct interaction with instructors but must be able to communicate with instructors electronically or via telephone. Distance learning activities that meet the definition of vocational education or job skills training directly related to employment will be considered. Distance learning programs must include mechanisms for providing reports that demonstrate how online course work will be supervised and monitored, as well as how the actual time engaged in online educational activities will be documented, verified and reported to the local county Department of Human Services.

  Until further notice, distance learning activities must be reviewed and approved by the TANF Work Program Unit, prior to approval as vocational education or jobs skills training directly related to employment activities. The case manager must obtain appropriate documentation to support the distance learning program, complete the TANF Work Program Distance Learning Activity form, MDHS-EA-352A, and forward the documentation to the regional director, via the county director, for review, comments and recommendation. The regional director will review the documentation and, if the distance learning activities are recommended, forward the documentation to the TANF Work Programs Unit, within five working days, for review and approval. The TANF Work Programs Unit will review the documentation, approve or deny the request and return the MDHS-EA-352A to the regional director within five working days.

Limitation on Vocational Educational Training and Teens in School

Vocational educational training cannot exceed 12 months for any individual. Vocational education activities cannot be approved as core work activities for any participant whose 12-month counter is equal to or greater than 12 months. No more than 30% of the individuals counting toward the participation rate in a month may meet the work requirement by participating in vocational educational training. A teen parent head of household attending secondary school or in an educational activity directly related to employment will be included in the 30%.

Any countable attendance (thirty minutes, one hour, or forty hours of actual, excused hours counted, or holiday time) reported during the course of a report month triggers one month in the 12-month limit. Once an individual has used 12 months, that individual's participation in vocational educational will not count in the participation rate calculation. JAWS currently displays the number of VOC EDU months a participant has used on the Participant Component Selection (SPAC) screen.

Any time a participant is assigned to vocational education activities, the case manager will discuss, with the participant, the 12-month lifetime limitation and the current status of the participant's 12-month counter. The JAWS system will automatically generate the Vocational Education Training 12-Month Counter Notice (T026) each time the Add Participant Assignment (MPWA) screen is successfully processed for all VOC/EDU component assignments. The T026 will print at the case manager's local printer and will be given or mailed to the participant. The T026 will be stored in history and may be viewed from the SPAN screen; therefore, a copy will not be filed in the electronic case record. The purpose of the T026 is to inform the participant, in writing, about the status of his/her 12-month vocational education counter.

Placements Exceeding the 12-Month Limitation

Students who are currently in their last semester at the time their twelfth month is used **and** who are expected to graduate at the completion of that semester, may be allowed to continue their VOC/EDU assignment beyond the 12-month limitation based on a case review and written approval from the regional director. Attendance hours for participants who exceed the 12-month limitation will not count in the participation rate calculation. College students meeting the above criteria should not be required to participant in other TWP work activities, but may volunteer.

Vocational education activities cannot be approved as core work activities for any participant whose 12-month counter is equal to or greater than 12 months; therefore, a VOC/EDU

component will not be added/opened for these individuals. VOC/EDU components for participants who are ineligible or not approved for continuation beyond the 12-month limitation must be closed effective for the last day of the report month in which the twelfth month occurs. Vocational education activities that are not tracked under the VOC/EDU component must be tracked under job skills training (JST/JST). Job skills training is a non-core component which must be coupled with an allowable core component to be included in the participation rate calculation.

Supervised and Unsupervised Study Time

Actual time spent in unsupervised and supervised study sessions may be allowed on a limited basis. Up to one hour of unsupervised study time may be counted for each classroom hour. Unsupervised study time does not have to be documented or verified. Unsupervised study time allowed will be based on classroom hours which must be documented and verified. Time allowed for supervised study sessions must be documented and verified by a responsible adult approved to supervise the study group. Under no circumstance will the total weekly hours reported for unsupervised and supervised study time exceed the recommended weekly study time for the academic curriculum/ course work in which the individual is enrolled. Form MDHS-EA352, TANF Work Program Vocational Education Recommended Study Requirements, must be completed and signed by an authorized representative (advisor, counselor, professor, instructor, etc.) to document the recommended study hours. The MDHS-EA-352 will be valid for the duration of the semester unless changes occur that requires a new MDHS-EA-352 to be completed. Participants must provide their class schedule, along with MDHS-EA-352 each semester. Refer to Volume III, Chapter 9, Determining Hours for TWP Participation, for instructions on calculating the weekly classroom hours scheduled for each course. Documentation will be maintained in the TWP Temp Docs folder located in the individual's electronic case record. Weekly documentation/verification of unsupervised study time is not required. TWP participation credit for classroom time and supervised study time must be documented and verified via MDHS-EA-356, TWP Participant Attendance Report, and submitted to case management on a weekly basis. Time spent in structured study groups may be maintained, verified and reported by the responsible adult approved to supervise the study group. In group study sessions, participants may be required to sign-in and enter their arrival and departure times for each day of the week. Weekly time sheets must be signed by the supervisor and submitted to case management each Monday for the previous week. **The combined total of supervised and unsupervised study time allowed each week cannot exceed the total weekly study time recommended by the educational institution /program.**

Determining Hours for TWP Participation

Individuals enrolled in vocational education programs earning an associate or baccalaureate degree will be tracked as vocational education, not to exceed the 12-month lifetime maximum for any individual, unless the above criteria is met and approved by the regional director. To determine the weekly scheduled hours, individuals will be required to provide documentation of their class schedule each semester that verify the number of classroom hours scheduled. In addition to the class schedule, individuals will be required to provide a completed form MDHS-EA-352, TANF Work Program Vocational Education Recommended Study Requirements. The MDHS-EA-352 must be completed and signed by an authorized representative (advisor, counselor, professor, instructor, etc.) to document the recommended weekly study time required for the academic curriculum/course work in which the individual is enrolled. The MDHS-EA356, TWP Participant Attendance Report, will be used to document and validate the actual time engaged in classroom activities, distance learning (on-line) activities, and supervised study sessions.

NOTE: The individual must inform case management of any class schedule changes. The case manager will review the changes and handle the case accordingly.

The case manager will use the DAY (Days of the Week) and TIME (Class Start and End Times), not the credit hours, to determine the weekly scheduled hours. Based on the following example, the individual will be engaged in classroom activities 19 hours each week. Policy allows up to 19 hours per week to be added for time engaged in unsupervised study activities for a weekly total of 38 hours.

COURSE TITLE	DAY	TIME	ALLOWABLE HOURS
Dental Orientation	Monday	9:00 AM - 9:50 AM (1 hr x 1 day = 1)	1
Dental Assisting Materials	Monda y	9:00 AM - 9:50 AM (1 hr x 2 days = 2)	2
	Tuesday Friday	1:00 PM - 2:50 PM (2 hrs x 2 days = 4)	4
Dental Science I	Tuesday Friday	9:00 AM - 10:50 AM (2 hrs x 2 days = 4)	4
Chair side Assisting	Monday Wednesday	10:00 AM - 10:50 AM (1 hr x 2 days = 2)	2
	Monday Wednesday Friday	1:00 PM - 2:50 PM (2 hrs x 3 days = 6)	6
Total number of classroom hours allowed per week.			19

If the combined total of scheduled classroom hours plus allowable unsupervised study hours is sufficient to meet the individual's monthly federal participation requirement, it is not necessary to report hours for time engaged in on-line course activities or supervised study sessions. Document the case accordingly via the PACR screen in JAWS. If not sufficient, additional hours for time engaged in on-line activities and/or supervised study sessions will be reported, if documented and verified. All hours reported for time engaged in classroom activities, on-line course work, and supervised study sessions must be documented and verified via form MDHSEA-356. If the combined total of all vocational education activities (classroom, unsupervised study, on-line, and supervised study) is still insufficient to meet the individual's monthly federal participation requirement, the case manager must couple the vocational education component

with another allowable work activity (part-time job or AWEP/community service). Once the 12-month, lifetime maximum allowed for vocational education is exhausted, additional time engaged in vocational education activities will be tracked as job skills training directly related to employment, a non-core activity. To be countable in the participation rate calculation, non-core activities must be coupled with a core activity meeting the 20 hours per week requirement. Remember, reporting any VOC/EDU hours on the ARPW screen in JAWS will count as one month against the 12-month lifetime limitation.

Attendance Reporting

Participant attendance data for vocational education activities coordinated through the Division of Economic Assistance, Policy Unit, will be documented via form MDHS-EA-356B, TWP Sign-In Sheet. The training instructor/supervisor will review and sign the time sheets to validate the data and submit the forms to the case manager as requested. The case manager will use the daily sign-in sheets to compile a MDHS-EA-356A, Work Program Attendance Report, and enter attendance data into JAWS.

Participants engaged in self-initiated activities (certificate, associate or baccalaureate degree program) through community colleges, universities or other entities will use MDHS-EA-356, TWP Participant Attendance Report, to report attendance data. Each participant will be required to maintain MDHS-EA-356 to document the actual time spent in each vocational education activity on a daily basis. The MDHS-EA-356 will provide the participant's name and social security number, the reporting period, a list of the activities (class title, lab title, study session, etc.), along with the time spent in each activity daily, weekly totals for each activity and the instructor's/supervisor's signature. The participant will submit a completed MDHS-EA-356 to case management each Monday for the previous week or as requested. The case manager will use the form to monitor weekly attendance, enter attendance data in JAWS and take any other case action(s) deemed necessary, e.g., randomly follow-up with instructor/ supervisor to verify signatures, set-up a conciliation for unsatisfactory attendance, incomplete/ inaccurate information or suspected fraud due to falsification of information, etc.

Up to one hour of unsupervised study time for each classroom hour and the actual time spent in monitored, supervised study sessions may be counted as TWP participation if it is documented and validated via form MDHS-EA-356. **The combined total of supervised and unsupervised study time allowed each week cannot exceed the total weekly study time recommended by the educational institution /program via MDHS-EA-352.**

Attendance documentation for participants assigned to other work activities, in addition to vocational education, will be verified and reported by the work site sponsor. The work site sponsor must adhere to the documentation and verification procedures for recording, maintaining, and reporting attendance data described for each work activity.

Determining Hours and Reporting Attendance for Distance Learning Activities

The case manager, along with the participant and educational institution or internet provider, will determine the procedures to be followed for reporting weekly attendance data to the local county office. If the online course work is completed in an approved setting (WIN Center, library, community college, participant's home, etc.), the following reporting options are available:

· The supervisor at each approved distance learning work site will maintain daily sign-in/signout sheets. Participants will be required to sign-in and enter their arrival and departure times each day of the week. The sign-in sheets will be reviewed, validated and signed by the supervisor and submitted to the local county office each Monday for the previous week;

· Each participant will maintain form MDHS-EA-356, Participant Attendance Report, to document the actual time engaged in online course work for each day of the week. The MDHS-EA-356 must be reviewed and signed by the counselor or an authorized supervisor; or

· A participant enrolled in an internet-based or video conferencing program that is not connected to a local college or university in which an authorized supervisor is not available (participant's home, local library, etc.), the participant will maintain MDHS-EA-356 to document the actual time engaged in online course work for each day of the week. In this situation, the MDHS-EA-356 must be supported by electronic documentation issued by the distance learning institution/program that displays the log-in and log-out times for each day of the week.

Appropriate documentation to support the attendance data entered in the JAWS system must be filed in the county's administrative files. Documentation may include but is not limited to the following:

· MDHS issued time sheets and sign-in sheets;
· reports generated via course software;
· participant time logs that are supported by electronic reports of weekly course work;
· log-in and log-out records available on-line or in an electronic format;

- completion of instructional learning packets or workbooks as defined by the educational institution or internet course provider; or
- provider generated data reports.

Supervised and unsupervised study time is also countable for distance learning programs. Refer to Volume III, Chapter 9, Supervised and Unsupervised Study Time, for further information.

Job Skills Training (Directly Related to Employment) - "Non-core" Activity

Job skills training directly related to employment is training or education for job skills required by an employer to provide an individual with the ability to obtain employment or to advance or adapt to the changing demands of the workplace. Job skills training can include customized training to meet the needs of a specific employer or training that prepares an individual for employment, including literacy and language instruction, if necessary, to enable the participant to perform a specific job or engage in a specific job training program. For example, an employer needs five welders and training is designed specifically to prepare individuals for the job. Job skills training providers must provide structured activities and daily supervision.

NOTE: The job skills training activity will be used to track vocational education activities after a participant has used the 12-month, lifetime maximum allowed for VOC/EDU. Job skills training activities that also meet the definition of vocational education activities should be tracked as VOC/EDU if the individual has not exhausted the 12-month, lifetime maximum.

The local WIN Job Center is the primary resource to link TANF participants with employer-specific job skills training programs. Job skills training programs must meet the following **minimum requirements** to be acceptable as an allowable non-core work activity:

1. The training offered by the program must be related to the types of employment or educational goals contained in the EDP;

2. The training must accept the participant and offer the participant the means to develop skills and competencies as a result of its training;

3. The training must provide ongoing, daily supervision; and

4. The program must provide qualitative measures for judging satisfactory progress of participants, and report that progress to the case manager.

The case manager must be knowledgeable about job skills training opportunities and coordinate referrals through the local WIN Job Center or other job skills training programs.

Post-secondary education programs that lead to an advanced degree and are directly related to employment can be defined as job skills training directly related to employment. The following **minimum requirements** must be met in order for post-secondary education to be defined as job skills training directly related to employment:

1. The degree the individual is pursuing must be needed to obtain employment or for advancement opportunities with the individual's current component provider; and

2. The individual is employed and meeting the twenty (20) hour per week core participation requirement; or

3. The individual is assigned to and meeting participation (20 or more hours per week) in a core activity that is directly related to the post-secondary education course of study. For example, an individual pursuing a degree in education must be assigned to work experience (AWEP) at a school, library, etc.; and

4. The individual's employment and educational goal in the EDP is consistent with the assigned TWP work activities.

NOTE: Job skill training is only countable in the participation rate calculation after the participant has met the minimum 20-hour per week requirement in an allowable "core" work activity, e.g., unsubsidized employment, work experience, on-the-job training, job readiness/job search, community service, vocational education, etc.

Attendance Reporting and Monitoring

Participant attendance data for job skills training activities coordinated through the Division of Economic Assistance, Job Development Unit, will be documented via form MDHS-EA-356B, TWP Sign-In Sheet. The training instructor/supervisor will sign the time sheets to validate the data and submit the forms to the case manager as requested. The case manager will use the daily sign-in sheets to compile a MDHS-EA-356A, Work Program Attendance Report, and enter attendance data into JAWS.

Participants engaged in self-initiated activities (certificate or associate degree programs) through community colleges, universities or other entities will use MDHS-EA-356, TWP Participant Attendance Report, to report attendance data. Each participant will be required to maintain MDHS-EA-356 to document the actual time spent in each activity on a daily basis. The MDHS-EA-356 will provide the participant's name and social security number, the reporting period, a list of the activities (class title, lab title, study session, etc.), along with the time spent in each activity daily, weekly totals for each activity and the instructor's/supervisor's signature. The participant will submit a completed MDHS-EA-356 to case management each Monday for the previous week or as requested. The case manager will use the form to monitor weekly attendance, enter attendance data in JAWS and take any other case action(s) deemed necessary,

e.g., randomly follow-up with instructor/ supervisor to verify signatures, set-up a conciliation for unsatisfactory attendance, incomplete/inaccurate information or suspected fraud due to falsification of information, etc.

Supervised and unsupervised study time is also countable for job skills training programs, if applicable. Refer to Volume III, Chapter 9, Supervised and Unsupervised Study Time, for further information.

Training providers and contractors are responsible for providing daily supervision. The case manager will maintain contact with the job skills training provider while the participant is enrolled, as appropriate, but not less than monthly to verify attendance and satisfactory progress. Face-to-face contact with the participant must be scheduled on a monthly basis.

Education Directly Related to Employment - "Non-Core" Activity

Education directly related to employment is educational activities related to a specific occupation, job, or job offer for individuals, age 20 or older, who have not received a high school diploma or a certificate of high school equivalency. This includes educational courses designed to provide the knowledge and skills for specific occupations or work settings, but may also include adult basic education, English as a second language (ESL), literacy skills, and GED prep classes.

Program activities must meet the following **minimum requirements** to be acceptable as an allowable "non-core" work activity:

1. The training offered by the program must be related to the types of employment or educational goals contained in the EDP;

2. The training must accept the participant and offer the participant the means to develop skills and competencies as a result of its training;

3. The training must provide ongoing, daily supervision; and

4. The program must provide qualitative measures, such as grade point average, as well as a quantitative measure, such as a time frame for completion, for judging satisfactory progress of participants, and report that progress to the case manager.

Attendance Reporting and Monitoring

Participant attendance data for education directly related to employment activities coordinated through the Division of Economic Assistance will be documented via form MDHS-EA-356B, TWP Sign-In Sheet. The instructor/supervisor will sign the time sheets to validate the data and submit the forms to the case manager as requested. The case manager will use the daily sign-in sheets to compile a MDHS-EA-356A, Work Program Attendance Report, and enter attendance data into JAWS.

Participants engaged in self-initiated activities will use MDHS-EA-356, TWP Participant Attendance Report, to report attendance data. Each participant will be required to maintain MDHS-EA-356 to document the time spent in each activity on a daily basis. The MDHS-EA356 will provide the participant's name and social security number, the reporting period, a list of the activities, along with the actual time spent in each activity daily, weekly totals for each

activity and the instructor's/supervisor's signature. The participant will submit a completed MDHS-EA-356 to case management each Monday for the previous week or as requested. The case manager will use the form to monitor weekly attendance, enter attendance data in JAWS and take any other case action(s) deemed necessary, e.g., randomly follow-up with instructor/supervisor to verify signatures, set-up a conciliation for unsatisfactory attendance, incomplete/inaccurate information or suspected fraud due to falsification of information, etc.

Educational providers and contractors are responsible for providing daily supervision. The case manager will maintain contact with the provider while the participant is enrolled, as appropriate, but not less than monthly to verify attendance and satisfactory progress. Face-to-face contact with the participant must be scheduled as needed, but not less than monthly.

Attendance data entered in JAWS must be supported by written documentation which must be filed in the participant's case record or maintained in a central location that is accessible to appropriate staff.

Secondary School Attendance - "Non-Core" Activity

Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence is an allowable non-core activity for individuals age twenty and older who do not have a high school diploma or GED. Participation in this activity is not restricted to individuals for whom obtaining a GED is a prerequisite for employment. Minor parents, under age twenty, who have not completed secondary school or received a GED, should be encouraged to pursue a diploma or GED. Educational activities (EDU/HSE, EDU/GED or EDU/ESL) for individuals under age twenty are considered "core" activities and are countable for the first 20 hours per week in the participation rate calculation. Activities for individuals age 20 and older are considered "non-core" and only count in the participation rate calculation after the participant has met the minimum 20-hour per week requirement in an allowable "core" work activity, e.g., unsubsidized employment, work experience, on-the-job training, job readiness/job search, community service, vocational education, etc.

NOTE: JAWS will allow the education (EDU) component to be added to the EDP and the MPWA screen for a "MV-minor volunteer" when the household type is "ANI-adult not included."

Program activities must meet the following **minimum requirements** to be acceptable as an allowable work activity:

1. The program must be related to the types of employment or educational goals contained in the EDP;

2. The program must accept the participant and offer the participant the means to acquire a high school diploma or equivalent.

3. The program must provide ongoing, daily supervision;

4. The program must provide qualitative measures of progress, such as grade point average, as well as a quantitative measure, such as a time frame for completion, for judging satisfactory progress of participants, and report that progress to the case manager; and

5. The participant must be making good or satisfactory progress and be in compliance with the completion time frames established by the institution or program.

Attendance Reporting and Monitoring

Participants under age 20 who are enrolled in high school (verification required) and making satisfactory progress, based on progress reports and grades, will be allowed up to 8 hours attendance credit per day (Monday through Friday). This includes days missed due to pre-determined holidays, breaks, staff development/teachers meeting, etc. A copy of the school's yearly calendar should be filed in the TWP Temp Docs folder in the participant's electronic case record. High school students are required to provide proof of enrollment, progress reports, and report cards to verify satisfactory progress and continued enrollment, as required by the case manager. However, high school students are not required to maintain and submit weekly attendance reports. Students who are absent for more than three consecutive days must notify the case manager and provide documentation (doctor's statement for self or child, hospital records, obituary, etc.) verifying the reason within five (5) working days. The case manager will determine whether the absence is excused or unexcused and handle the case accordingly.

Attendance data for all participants, regardless of age, who are participating in GED activities, will be documented via form MDHS-EA-356B, TWP Sign-In Sheet, or MDHS-EA-356, TWP Participant Attendance Report, whichever is applicable. The instructor/supervisor will review and sign the time sheets to validate the data. Completed forms MDHS-EA-356B will be submitted to the case manager and MDHS-EA-356 will be returned to the participant. Participants who are required to maintain form MDHS-EA-356 will forward the completed form to case management each Monday for the previous week or as requested. The MDHS-EA-356 will provide the participant's name and social security number, the reporting period, a list of the activities, along with the actual time spent in each activity daily, weekly totals for each activity and the instructor's/supervisor's signature.

The case manager will use these forms to monitor weekly attendance, enter attendance data in JAWS, and take any other case action(s) deemed necessary, e.g., randomly follow-up with instructor/ supervisor to verify signatures, set-up a conciliation for unsatisfactory attendance, incomplete/inaccurate information or suspected fraud due to falsification of information, etc. Attendance data entered in JAWS must be supported by written documentation which must be filed in the participant's case record or maintained in a central location that is accessible to appropriate staff.

Providers are responsible for providing daily supervision. The case manager will maintain contact with the provider while the participant is enrolled, as appropriate, but not less than monthly to verify attendance and satisfactory progress. Good or satisfactory progress is defined as a passing grade, or its equivalent, according to the standards set by the educational institution.

Verification of satisfactory progress must be submitted to the case manager at the end of every grading period. Face-to-face contact with the participant must be scheduled as needed, but not less than monthly.

VOCATIONAL REHABILITATION SERVICES (This is not a federally defined work activity.)

TANF applicants and recipients who have been determined to be incapacitated (eligible for the JB code) or who report they are unable to work will be required to apply for vocational rehabilitation (VR) services and complete the vocational rehabilitation intake process. Mandatory referrals will be determined by the eligibility worker and identified by the "VR-vocational rehabilitation" TWP (JOBS) Program Status Code. These individuals will be required to complete the TANF Work Program (TWP) intake process prior to being referred to the Department of Rehabilitation Services, Office of Vocational Rehabilitation, for evaluation/testing. TANF applicants must fully complete both the TWP and VR intake processes prior to TANF approval. TANF application processing timeliness standards apply. TANF recipients who are determined to be incapacitated and are found eligible for vocational rehabilitation services will be considered a TWP participant. Refer to Volume III, Chapter 3, Referrals to Vocational Rehabilitation, for additional information.

Referral to the Office of Vocational Rehabilitation

The case manager will work with the OVR designee, at the local level, to schedule VR intake appointments with VR counselors. VR intake appointments must be scheduled within ten days from the date of the TWP intake appointment. The case manager will generate a Vocational Rehabilitation Referral (T022) to document and inform the individual of the appointment date and time with the VR Counselor. The individual will take (CM may fax) the T022 and a copy of the MDHS-EA-331, along with any other medical documentation, to the VR appointment and present the paperwork to the VR Counselor. The VR Counselor will not interview a TANF applicant or recipient without the proper medical documentation. The VR Counselor will complete Section B, Page Two, of the T022 and mail or fax the completed form to the MDHS county office. The T022 for TANF applicants will be printed by the case manager when the <PF5> key is pressed on the MUJS screen. The T022 for TANF recipients will automatically print at the case manager's local printer when the MPWA screen is processed successfully.

NOTE: Timeliness standards for processing TANF applications apply. If the VR Counselor has good cause for not completing the VR intake process timely, the case manager will enter the "NR-not required" code on the MUJS screen to allow the eligibility worker to process the TANF application.

TANF Work Program Component Assignment

The case manager will work with the Vocational Rehabilitation counselor to determine which VR services/activities can be defined as allowable, countable TWP work activities. The TWP component assignment may not be determined until after the individual's IPE (Individualized Plan for Employment) is developed by the VR counselor and specific VR activities/services have been identified. This process may take up to sixty days. Until the IPE is developed and the work activity identified, all VR participants will be assigned to the component and session type VOC/REH for tracking purposes only. The job readiness/rehabilitation services (JRA/REH) component will be used to track activities that met the definition of job readiness. Other possible component and session types may include community service (COM/COM), unsubsidized employment (UNS/FUL, UNS/PT1) or subsidized employment (SUB/FUL, SUB/PT1). These components should be included in the individual's EDP. The JRA/REH component will function the same as job readiness (JRA) or job search (JSR) in regards to the TANF participation rate, i.e., countable for no more than four consecutive weeks and countable for no more than 120/180 hours during any 12-month period.

Once the VR activity is identified and defined, the case manager will, if necessary, close the VOC/REH component and assign the participant to the appropriate TWP activity. If the VR service/activity cannot be defined as an allowable TWP work activity that is countable in the TANF Work Program participation rate, the case manager will allow the VOC/REH component assignment to remain open. The VOC/REH is not a federally defined work activity and is not countable in the TWP participation rate calculation. Therefore, it may not be necessary for the case manager to enter weekly attendance data. Attendance requirements for the VOC/REH component will be determined on a case-by-case basis. The individual must be assigned to a component in order to set-up a conciliation for noncompliance with OVR and impose a TWP timed penalty (sanction), if necessary.

Supportive Services

TANF recipients whose TWP (JOBS) Program Status code is "VR" may be eligible for TWP supportive services (child care and work stipend) on a case-by-case basis. The case manager will, based on assigned VR activities and the availability of supportive services through OVR, determine the need for TANF supportive services. The case manager's determination must be based on good judgment and available information.

If TANF supportive services are needed, the case manager will determine to what degree and for how long services are needed. Work (transportation) stipends must be "prorated" based on

assigned VR activities and requirements. Child care assistance must not be provided on an ongoing basis unless the VR activity substantiates the need. Child care assistance should be provided on a month-to-month basis. Individuals assigned to the VOC/REH component are not eligible for the participation stipend ($5 per day). Refer to Volume III, Chapter 10, for additional information regarding supportive services.

Monitoring and Attendance Reporting

The Vocational Rehabilitation provider or its contractors are responsible for providing daily supervision and maintaining daily attendance records for individuals whose VR activities are countable in the participation rate calculation. The case manager is responsible for identifying individuals whose participation must be supervised and tracked. The case manager will also ensure the VR counselor understands the TWP monitoring, tracking and reporting requirements, and provide appropriate forms, if necessary, along with clear instructions for completion and submission. The VR counselor must validate and submit documentation to verify the total hours of participation in their program on a weekly basis. The case manager must review the documentation and enter attendance data in JAWS as required. Attendance data entered in JAWS must be supported by written documentation. This documentation must be filed in the participant's case record or filed in a central location that is accessible to appropriate staff.

VR participants assigned to the VOC/REH component will be monitored via the T015, Vocational Rehabilitation Quarterly Progress Report. JAWS will automatically generate the T015 on the last calendar day of each quarter. The VR counselor will complete and return the T015 to the case manager.

Noncompliance

VR participants are subject to adverse action policy and procedures. If the VR counselor notifies MDHS case management that a TANF recipient fails to fully complete, cooperate or comply with VR requirements, after the TANF application has been approved, the participant will be conciliated and the appropriate TWP timed penalty applied, unless good cause is determined.

HOLIDAYS AND EXCUSED ABSENCES FOR UNPAID WORK ACTIVITIES

Ten (10) state defined holidays and a maximum of 80 excused absences may be counted as TWP participation for individuals participating in unpaid allowable work activities. Unpaid work activities include job readiness, job search, AWEP, community service, and educational activities (vocational, high school, GED, ABE, etc.)

The ARPW screen will be used to document the participant's scheduled hours for each day of the week and to report the actual hours worked and the hours absent, along with the appropriate absent code. The valid absent codes are "E-excused," "U-unexcused" and "H-holiday." Hours absent that are coded "H-holiday" and any "E-excused" hours that are entered in the EX HRS COUNTED field on the ARPW screen will be included in the participation rate calculation.

Holidays

A holiday is defined as any assigned/scheduled hours or day on which a participant is excused from scheduled work activity assignments due to a state defined holiday in conjunction with the provider's previously established and documented leave policy. The case manager must obtain documentation from the component provider that specifies the holidays observed by the provider. Participants will receive participation credit for hours scheduled and not attended due to one of the 10 designated holidays listed below. Attendance reported for any part of a designated holiday (30 minutes, one hour, six hours, etc.) will count as one of the 10 days allowed. JAWS will keep track of the 10 designated holidays and will not allow the case manager to code any day other than the 10 days listed below as a "H-holiday." The State has defined and designated the following 10 days as allowable holidays:

January 1	New Year's Day
The Third Monday of January	Birthday of Robert E. Lee/Dr. Martin L. King, Jr.
One Friday in March or April	Good Friday
The Last Monday of May	National Memorial Day and Jefferson Davis' Birthday
July 4	Independence Day
The First Monday of September	Labor Day
The Thursday Observed as Thanksgiving	Thanksgiving Day
The Friday after Thanksgiving	Day after Thanksgiving
December 25	Christmas Day
The Work Day Before/After December 25	Day before/after Christmas

The above 10 holidays are defined in a JAWS table and system edits will not allow the case manager to enter the "H-holiday" code for any day other than the 10 days listed above. Scheduled hours not worked due to any other documented holiday observed by the component provider, other than the 10 listed above, will be reported as hours absent and coded "E-excused."

No policy changes have been made for minor heads of household (under age 20) who are attending high school or enrolled full-time in a GED program, Minor parents may continue to receive participation credit for days school is out due to holidays (Thanksgiving and Christmas) or official breaks (Spring and Summer, if returning to school in the Fall). Participation credit for these days will be reported as regularly scheduled hours.

Excused Absences

Excused absences are defined as any assigned/scheduled hours not attended by the participant due to specific reasons, such as job interviews, meetings required by other governmental agencies (e.g., child welfare, child support, schools, courts, or other assistance programs), approved holidays observed by the provider but not recognized by TANF, and family emergency and illness, either of the participant or the participant's child. The absence must be documented as excused by the component provider.

Excused absences countable in the TWP participation rate calculation are limited to a maximum of 80 hours during any 12-month period with no more than 16 hours countable during any participation report month. JAWS system edits will not allow the case manager to exceed the 80-hour and 16-hour limitations. In order for excused absences to be included in the participation rate calculation, the participant must have been scheduled to participate in a non-paid allowable work activity for the period of the excused absence.

The case manager will "look back" after all attendance data has been entered for the participation report month to:

· determine which participants do not have sufficient hours to meet their monthly federal participation requirement;
· of those participants, which ones need sixteen or fewer hours to meet their monthly federal participation requirement;
· of those participants, which ones have enough excused hours that will, if counted, allow them to meet their monthly participation requirement; and
· of those participants, which ones have enough hours remaining in their 80-hour counter that equals or exceeds to the number of excused hours needed to meet their monthly federal

participation requirement; then

· for those participants who met all of the above criteria, the case manager will enter the appropriate number of hours needed in the EX HRS COUNTED field on the ARPW screen prior to the participation report run date (end of the month for the previous month.)

No more than 16 excused hours can be counted in any participation report month. Entering the minimum number of hours will ensure that the 80-hour limit is maximized. Anytime hours are entered in the EX HRS COUNTED field, JAWS will "look back" at the **prior 11 participation report months and the current "processing" month** to determine the total number of hours used. If more than 16 hours are entered for the report month, JAWS will display the "NO MORE THAN 16 EXCUSED HOURS CAN BE COUNTED IN A REPORT MONTH" error message and prohibit the case manager from exceeding the 16-hour limit. If 80 hours have been reported, JAWS will display the "CANNOT EXCEED 80 EXCUSED HOURS COUNTED IN A 12-MONTH PERIOD" error message and prohibit the case manager from entering any additional hours. Once a total of 80 hours has been reported in any 12-month period, JAWS will not allow any hours to be entered in the EX HRS COUNTED field until sufficient months "roll off" and additional hours are available.

JAWS will keep track and display the total number of excused hours reported to date for the current 12-month period.

JAWS will keep track of the total number of excused hours counted to date for the current 12-month period (processing month and prior 11 report months) and display the total in the 80-HR COUNTER field on the Component Attendance Report (SCAR) screen pop-up window (ARPW). This figure will increase as additional hours are used and decrease as months/hours "roll off" and additional hours become available. The case manager will review the counter when entering weekly attendance data to stay abreast of each participant's current status. A participant whose counter equals 80 will not be eligible for excused hours to be counted until the counter drops below 80 hours. It may take several months before the counter decreases. The Attendance History (ATTH) screen will display the history of excused hours used by month, the total excused hours used during the 12-month period and the total excused hours available.

NOTE: The EX HRS COUNTED field will be unprotected (up-datable) for the report month until the participation rate is calculated for that report month (end of the month for the prior month.) This allows the case manager to enter or update attendance data through the end of the current calendar month for the prior report month. In determining the total number of EX HRS COUNTED, JAWS always "looks back" never "forward." In rare instances, the case manager

may enter more than 80 hours during the 12-month period. However, JAWS system edits have been added to the participation rate calculation process to ensure no more than 80 hours are counted during any 12-month period.

EXAMPLE: A total of 75 "EX HRS COUNTED" have been reported through the month of August. In the calendar month of September, the case manager enters 5 "EX HRS COUNTED' for the report month of September which brings the 80-HR COUNTER to 80 (75 + 5 + 80.) Then during the calendar month of September (prior to the August participation rate calculation) the case manager goes back and enters an additional 5 "EX HRS COUNTED" for the report month of August. Since JAWS always “looks back,” the system will allow the 5 EX HRS COUNTED for August (75 + 5 = 80.) However, at the end of calendar month October, when the participation rate calculation runs for the report month of September, JAWS will "look back" over the 12-month period and change the 5 "EX HRS COUNTED" in the report month of September from 5 to 0.

EXAMPLE: A total of 72 "EX HRS COUNTED" have been reported through the month of August. In the calendar month of September, the case manager enters 8 "EX HRS COUNTED' for the report month of September which brings the 80-HR COUNTER to 80 (72 + 8 + 80.) Then during the calendar month of September (prior to the August participation rate calculation) the case manager goes back and enters an additional 5 "EX HRS COUNTED" for the report month of August. Since JAWS always “looks back,” the system will allow the 5 EX HRS COUNTED for August (72 + 5 = 77.) However, at the end of calendar month October, when the participation rate calculation runs for the report month of September, JAWS will "look back" over the 12-month period and change the 8 "EX HRS COUNTED" in the report month of September from 8 to 3 (77 + 3 = 80.)

Attendance Reporting

The case manager is responsible for entering daily attendance data in JAWS on a weekly basis for all unpaid activities. Utilizing the SCAR/ARPW screen in JAWS, the case manager will enter the scheduled hours, actual hours worked and hours absent, along with the appropriate absent code (E-excused, U-unexcused or H-holiday) in the absent code field. Excused hours to be counted in the participation rate calculation will not be entered in the EX HRS COUNTED field until after all attendance for the report month has been entered, the “look back” process is completed, and the minimum number of excused hours needed to meet participation is determined.

Holidays

JAWS will automatically include any hours coded “H-holiday” on the SCAR/ARPW screen in the Attendance Hours field displayed on the Monthly Recap of Time and Attendance (MRTA) screen, **and** include these hours in the participation rate calculation for the report month.

Excused Absences

JAWS will not automatically include any hours coded “E-excused” on the SCAR/ARPW screen in the Attendance Hours field on the MRTA screen, nor in the participation rate calculation. In order for JAWS to count any excused hours, the case manager must enter the minimum number needed to meet participation in the EX HRS COUNTED field on the SCAR/ARPW screen. This should not be done until all attendance for the report month has been received and it is determined excused hours are needed for the participant to meet participation. The EX HRS COUNTED field on the SCAR/ARPW screen will remain up-datable until the participation rate is calculated for the report month, e.g., up-datable through November 30 for the report month of October.

Upon entering the last week of attendance for the report month, the case manager will review the MRTA screen to identify the participants who did not meet participation and take the appropriate case action(s). Refer to Volume III, Chapter 9, Excused Absences, for further information about the “look back” procedures.

Unexcused absences are coded “U-unexcused” and cannot be changed to “E-excused” unless the case manager receives written documentation from the component provider to support the change. In this situation, the written documentation must be stapled to the appropriate attendance report maintained in the county’s administrative files.

PROJECTING ATTENDANCE FORWARD FOR PAID WORK ACTIVITIES

The case manager will project forward TWP participation (attendance) for participants engaged in **paid** work activities up to a maximum of six (6) months at a time. Paid activities include unsubsidized employment, subsidized employment and on-the-job training. Attendance for transitional cases (UNS/TRN) will be projected up to a maximum of three (3) months. Continued employment and work hours will be re-verified during the last month of each 6 or 3- month projection time period. Wage forms and check stubs used to project TWP and TRN participation will be scanned to the participant's electronic case record.

NOTE: The first disregard month and the first projected attendance month may not be the same. The first disregard month will be the month the earned income causes or would have caused, if reported timely, the individual to be ineligible for TANF benefits.

Applications

A TANF applicant who finds employment during the 30-day TANF application processing period, and the earned income will cause TANF ineligibility, may have the application approved using the three-month total earned income disregard (3D), if otherwise eligible, depending upon the specific rules for receiving 3D. Any 3D months used will count in the 60-month counter. If the application is approved with 3D, the first month of ineligibility will be the first 3D month. The case will be referred to JAWS in OPen status, and the worker will use the wage verification form, completed by the employer, to calculate the participation hours to be projected for the initial 3-month projection period. During the last month of the projection period, JAWS will automatically generate the Request for Employment Verification (T024) notice requesting current check stubs by the 10th of the following month. The check stubs will be used to verify continued employment, work hours, and to calculate TWP participation for a new projection period if the TANF case remains open. **NOTE:** Wage forms and check stubs will be maintained in the electronic case record.

Example: TANF application received on September 2. Applicant starts to work on September 7. Application is worked and approved in October. The income causes ineligibility for TANF benefits. The applicant is eligible for and chooses to use the 3D. The first disregard month is October. The first projected attendance month is October.

Example: TANF application received on September 2. Applicant starts to work on September 5. The first check is received September 13. The application is worked and approved in September. September's income will not cause TANF ineligibility. Income anticipated for October will cause TANF ineligibility. The applicant is eligible for and chooses to use the 3D. The first

disregard month is October. The first projected attendance month will be September.

Ongoing Cases

The worker will use the wage verification form for new employment and check stubs received during the prior month for ongoing employment to calculate the projected weekly TWP participation hours. The worker must explore absences and unusual income with the participant when reviewing check stubs and make the appropriate adjustments, if any, when calculating the weekly hours. Each projection period cannot exceed the six-month time limit.

Example: TANF recipient starts to work on October 5. The first check will be received on October 12. October's income will create TANF ineligibility. The first disregard month is October. The first projected attendance month is October.

Example: TANF recipient starts to work on October 17. The first check will be received on October 27. Income is reported timely. October's income will not cause TANF ineligibility.

Income anticipated for November will cause TANF ineligibility. The first disregard month is November. The first projected attendance month is October.

Example: TANF recipient started to work on September 5. Change was untimely reported on November 9. The first check was received on September 14. If reported timely, September's income would have caused TANF ineligibility for September. The first disregard month is September. The first projected attendance month is September. (September's participation rate is not calculated until the end of November which allows time for the case manager to take the appropriate case action.)

Transitional Cases

Participation for former TWP participants who are receiving TANF transitional supportive services (child care and transportation) will be projected for up to a maximum of three (3) months at a time. TWP participants whose TANF cases are closing due to earned income or loss of an earned income disregard will be given an appointment to meet with case management to discuss the eligibility criteria for receiving TANF transitional services (child care and transportation.) The worker will send MAVERICS Notice A807, Appointment Notice for TANF Transitional Services, to notify the individual of the appointment date and time to meet with case management and apply for TANF transitional services. The A807 will be sent at the same time the A802, TANF Transitional Child Care and A803, TANF Transitional Transportation, notices are sent to the individual.

The case manager will use the check stubs received during the last month of TANF eligibility to verify continued employment, determine eligibility for each TANF transitional service, and approve or deny applications for TANF transitional services accordingly. If the individual is approved for transitional services, the check stubs will also be used to calculate the weekly participation hours to be projected. The case manager will explore absences and unusual income with the participant when reviewing the check stubs. The first month of projected participation should be the month following TANF case closure. To ensure transitional services are not paid to ineligible individuals, transitional cases can only be projected up to a maximum of three months at a time. Continued employment and work hours must be re-verified at the end of each three-month projected time period based on the check stubs received during the last month of the projection period. The case manager will not continue to project attendance or authorize work (transportation) stipends for the next three-month projection period until documentation verifying continued employment and work hours is received and continued eligibility is determined. The case manager will use the Participant Contact Record (PACR) screen to document the verification used to determine ongoing eligibility for TANF transitional services and scan the documents (check stubs) to the individual's electronic case record.

NOTE: The JAWS system has not been modified to handle the attendance projection process for transitional (TRN) cases, i.e., the Maintain Projected Attendance (MPRA) and Select Projected Attendance (SPRA) screens are not available and the T024 notice will not automatically be generated by JAWS on the 18th day of the last projected month (the case manager must generate a manual notice requesting the check stubs.) The case manager must calculate the weekly hours to be projected and enter the hours via the Component Attendance Report Selection (SCAR) on the TANF attendance report pop-up window.

Determining Weekly Projection Hours

The average weekly hours for unsubsidized employment, subsidized employment, and on-the-job training are determined by multiplying the weekly hours reported on the employer's wage verification form or dividing the total monthly hours verified by check stubs by 4.33. The monthly income from self-employment used in the TANF budgeting process will be divided by the federal minimum wage to obtain the monthly hours. The monthly hours will be divided by 4.33 to obtain the average weekly hours.

NOTE: The case manager must explore absences and unusual income with the participant when reviewing the check stubs and calculating the projected hours.

Re-Verification of Projected Hours

During the last month of each projection time period, continued employment and work hours must be re-verified via check stubs for ongoing employment and form MDHS-EA-910, Request for Employment Verification, for new employment. The case manager must obtain new, valid documentation to verify the individual's current employment status and to calculate the average hours to be projected for a new projection period up to a maximum of six months.

Ongoing TWP Cases

JAWS will automatically generate notice T024, Request for Employment Verification, on the 18th day in the last month of each projected time period for active TWP cases. The T024 will be used to notify the individual that check stubs for the month specified must be provided no later than the 10th day of the following month. A system alert will be generated at the same time to remind the case manager that continued employment and work hours must be re-verified. The case manager will use the check stubs requested to calculate the weekly hours to be projected for a new projection period. The case manager must explore absences and unusual income with the participant when reviewing the check stubs and calculating the weekly projected hours.

Transitional Cases

Projections for transitional cases are limited to a maximum of three (3) months at a time. JAWS has not been modified to automatically handle the projection process as it does for ongoing TWP cases. Even though the weekly participation hours may be projected for up to three months, the case manager will continue to enter attendance data weekly via the SCAR screen. The case manager must also generate a notice similar to the T024 to request continued employment verification. The notice will be generated and mailed no later than the 18th day of the last month in the projected time period. Attendance data will not be entered nor additional supportive services authorized beyond the current projection period until continued employment and work hours are verified and continued eligibility for transitional services is determined.

If the requested check stubs are not received by the 10th of the following month, the case manager will close the transitional case. However, prior to closing the transitional case, the case manager may attempt to contact the individual by telephone or send another request for information notice allowing an additional 10 days to provide the requested information.

Handling Changes

Anytime the State becomes aware of a change (ongoing or anticipated to be ongoing) in an individual's circumstances that requires recalculation of the family's TANF grant and SNAP allotment, the projected participation hours will be recalculated. The case manager will act on a change anytime an individual's employment has been terminated, the work hours have been permanently reduced or increased, or the individual has changed jobs. Changes may be reported by the individual at any time, at case review, or through some other means. The case manager will verify the new information and take the appropriate case action, e.g., terminate or recalculate the projected participation, close the component, set up a conciliation, investigate a job quit or reduction in work hours, review the case for a voluntary quit violation, etc. Anytime TWP work hours are recalculated, the new projection period cannot exceed the six-month maximum.

Handling a Job Quit

When a job quit is discovered for an ongoing TANF case, the case manager will close the projected attendance record effective for the last Saturday in the participation report month, close the TWP component effective for the last day the participant worked, conciliate the individual and impose a TWP timed penalty, if applicable.

When a job quit is discovered for a TANF transitional case, the case manager will close the TRN component and terminate all transitional supportive services effective for the earliest possible date. The case manager will not continue to authorize transitional supportive services after a job quit becomes known to the agency.

CASE DOCUMENTATION

Case management staff will work together to verify employment and attendance data. Employment verification (wage form, check stubs, etc.) will be maintained in the individual's electronic case record. All communication between the TANF recipient, component provider/employer, and local Field Operations (FO) staff, along with pertinent information regarding the TANF Work Program will be clearly documented in the case record via the Participant Contact Record (PACR) screen in JAWS or the Case Documentation (CADO) screen in MAVERICS. The PACR screen is the preferred method for TWP related documentation. However, if the CADO screen is used, the PACR screen must be documented to reference the CADO screen. Contacts with the participant to obtain documentation or monitor participation should never interfere with the individual's employment and meetings will be arranged around the participant's work schedule.

Proper case documentation is critical. Case documentation acts as the foundation for all work done with the participant and captures information not found on other forms or system screens. Case documentation captures details of contacts with the client, internal staff, other agencies, service providers, employers, etc. Case Documentation entered on the PACR screen must, at a minimum, include:

- DATE and manner of contact (telephone, fax, visit, etc.)
- WHO made the contact (client, provider, employer, etc.) including title and business name, if applicable
- WHY was contact made (purpose/reason)
- WHAT information was provided or what did they do while in the office, etc.
- HOW did you assist them (actions taken, decisions made, assignments of tasks for next steps, etc.)
- WHEN are action items/assignments due (call back, submit by, come in, etc.)
- SIGNATURE/NAME of person writing the case documentation

NOTE: JAWS automatically captures the case worker's PCN number and the date the documentation was entered.

Case records are also documented with system codes and closure reasons. Appropriate codes must be used. When a component is closed, the remarks line must be used to further explain the closure code. For instance, if the closure code is PE (placement ended) use the remarks field to explain why the placement ended, e.g., no funding, no longer needed, insufficient skills, etc. If the closure code is SC (successfully completed) explain, e.g., GED / CNA certification obtained, six-month placement completed, 12 months exhausted, completed training, but no job found, etc. Explain why an individual is no longer working, e.g., started new job at Kroger on MM/DD/YYYY, fired for insubordination, excessive absences, etc. If the remarks field does not have sufficient space, make reference to the PACR screen to locate the documentation, e.g., refer to PACR entry dated MM/DD/YYYY for documentation.

Case workers should not use the PACR or CADO screens to simply repeat documentation that can be found on other JAWS and MAVERICS screens, e.g., the attendance report pop-up window on the SCAR screen displays the date a worker enters attendance data; therefore, it is not necessary to document the PACR screen.

TANF TOTAL EARNED INCOME DISREGARDS FOR PAID WORK ACTIVITIES

As an incentive for TANF applicants and TWP participants to find employment, two total earned income disregards are available, if otherwise eligible. Eligibility for the three-month disregard

(3D) and the six-month disregard (6D) is dependent upon the specific rules for each disregard.

The eligibility worker and case manager will explain the 3D and 6D to TANF applicants and TWP participants to include the purpose of TANF transitional services. Any disregard months used will be counted in the TANF 60-month counter. Individuals must also be informed that if they are eligible for one of the earned income disregards it will automatically be given, unless they contact their worker or sign and return the A505, TANF 6-Month Total Earnings Disregard, or the A506, 3-Month TANF Total Earnings Disregard, notice. The first month of TANF ineligibility will be the first month income is disregarded for both 6D and 3D, if reported timely. 6D/3D income will only be disregarded in a month in which the client received a TANF money payment. TANF benefits and earned income will be counted in the SNAP budget.

The 3D is available when a TANF application is subject to denial due to earned income from employment found during the 30-day TANF application processing period. The 3D is also available when a TANF case is subject to closure due to earned income. The 6D is available when a TANF case is subject to closure due to earned income from employment found within a specific 30-day time period. Refer to Chapter 6, Budgeting Earned Income/Special Disregards, for additional information and the specific eligibility criteria for receiving 6D and 3D.

TAX INCENTIVES

The federal Work Opportunity Tax Credit (WOTC) provides tax incentives for employers to hire certain hard-to-place workers, including TANF recipients.

For most target groups, the WOTC authorizes employers to take a 25% tax credit on qualified first-year wages paid to those employed at least 120 hours but fewer than 400 hours, and a 40% tax credit for those employed 400 hours or more. The qualified wages are capped at $6,000. The WOTC can be as much as $2,400.

The WOTC is also available to employers who hire long-term TANF recipients over a two-year period. The qualified wages for this target group are capped at $10,000 each year. The credit is 40% for the first year and 50% for the second year of employment. The WOTC can be as much as $9,000.

Employers should be encouraged to contact the State WOTC Coordinator for Mississippi, John Jones, Mississippi Department of Employment Security, at jjones@mdes.ms.gov or 601-321-6084, or visit the Web site at www.doleta.gov/usworkforce.

OVERVIEW

This material discusses the coordination between the local Economic Assistance staff and other entities.

COMMUNICATION

Accurate and timely communication, whether written, oral or electronic, is critical to the effective operation of the TANF Work Program. Eligibility staff, case management, and Job Readiness Trainers must work together to ensure that TANF Work Program (TWP) services do not become fragmented or cause hardship on the TWP participant.

The TANF recipient has time frames for reporting information to Economic Assistance staff, for example:

- When the household's total gross monthly income, earned and unearned, meets or exceeds 185% of the need standard for the number of people in the TANF case (not the household size), this change must be reported by the 10th of the month following the month in which the change occurred.

- A five (5) day time frame requirement to report, when it becomes clear to a household that a child receiving TANF benefits will be absent or away from home for more than 30 days or when the entire household or the PI moves out of state.

- If a recipient requests a fair hearing, the family may continue to receive benefits while the hearing is being decided provided the request is made within ten (10) days of the adverse action notice.

Employment information received by MDHS staff will be shared with appropriate staff. The case manager should inform appropriate staff, if necessary, of any changes which will affect the individual's participation in the TANF Work Program (i.e., employment verification to resolve conciliation and prevent a case closure).

- The eligibility staff is responsible for ensuring that referrals to TWP are known to case management. The case manager supervisor is responsible for ensuring the timely handling of new referrals. The case manager is responsible for knowing the current status of participants assigned to his/her caseload at all times and taking timely case action(s).

- Case management is the critical link between eligibility for assistance (eligibility staff) and full-time employment (job placement staff). The case manager will place work eligible individuals who do not meet a work program exemption in allowable work activities and arrange supportive services, when necessary. Full-time employment is top priority and the case manager will manage his/her existing caseload and new referrals to ensure participants are referred for job readiness, job search and job placement activities as soon as possible.

- The job readiness trainer/employment coordinator is responsible for preparing participants for the work place and help them gain employment. The job readiness trainer/employment coordinator will develop and implement a program targeted at recruitment of employers for participation in the TANF Work Program for unsubsidized employment. Staff will coordinate job development and placement activities to match participants' skills and abilities with employers' needs, resulting in the best opportunities for long-term employment.

MDHS will cooperate with other public and private agencies associated with the TWP. Case management staff will coordinate their activities with the local Workforce Investment Act (WIA) entity, WIN Job Center and Office of Vocational Rehabilitation. Each entity should become familiar with the other's programs/services and work together to maximize the delivery of services to TWP participants. The Economic Assistance Regional Director will be the point of contact for county case management staff to resolve issues and concerns relating to TWP.

COMPONENT ASSIGNMENT

Work eligible individuals will be assigned to allowable, countable work activities as soon as possible. Work activity assignments will be coordinated to ensure participants are assigned to work activities that will help them meet the employment goal identified in their employability development plan and to ensure sufficient hours are scheduled to meet their monthly participation requirements.

Case Management

Work activity assignments made by the TWP case manager will depend upon:

- The amount of time available before a participant is able to start job readiness/job search activities. The schedule for referrals to job readiness/job search activities will be coordinated between the case manager and the job readiness trainer.

- The participant's need for additional training or education in order to improve the individual's readiness for full-time employment.

Once the case manager has completed the TWP intake process, the case manager will set up supportive services, if needed, and assign the participant to one or more TWP work activities defined in the previous section of this chapter.

Job Readiness Trainer (JRT)/Employment Coordinator (EC)

The case manager will refer TWP participants to the job readiness trainer/employment coordinator for job readiness, job search and job placement activities. The job readiness trainer/employment coordinator will also be responsible for job development, job retention and job advancement.

COORDINATION OF WORK ACTIVITIES

Alternative Work Experience and Community Service

The MDHS county director or designee is responsible for the development of AWEP and community service sites for TWP participants. Individuals who are not immediately placed in job readiness/job search may be placed in community service or work experience (AWEP) activities. The time length of community service and AWEP placements will be determined by the anticipated placement date in job readiness/job search activities. Participants who complete job readiness/job search but do not find employment will be referred back to the case manager for additional training and/or work experience.

The case manager should schedule meetings with the county director or the designee to discuss recruitment of AWEP and community service providers who would be interested in accepting and working with TWP participants. The county director/designee should be aware of public and private, non-profit, entities within the county that would be a good placement resource for TWP participants, e.g., state and federal agencies, county offices, public schools, hospitals, etc. The county director/ designee will take the lead in recruiting AWEP and community service placement sites. Development of AWEP and community service providers and positions available is an ongoing process.

A follow-up report will be prepared after contact is made with potential AWEP and community service providers. The report will provide the name and address of the potential provider, along

with a description of the types of work, work schedules, and number of slots available at each

location. The county director/designee must review and approve appropriate AWEP and community service providers. Form MDHS-EA-375, Approval of an Entity for Work Program Placements, will be completed for each AWEP and community service provider. Approval of the number of placements with each entity will take into consideration the size and needs of each entity and may not displace regular employees.

Although it is not necessary for the county director/designee to approve individual placements after an entity has been approved to serve as a site provider, he/she will stay abreast, at all times, of which entities are being used, the types of jobs available and the number of participants assigned to each work site. The case manager will keep the county director/designee informed about changes, problems or concerns, e.g., placement changes, provider problems or concerns, participant problems or concerns, etc. This does not mean ongoing conciliations routinely handled by the case manager but should include matters which could affect future placements, prevent misunderstandings, etc. The case manager will work with the provider to resolve issues to the mutual benefit of both the provider and the participant and to assure the placement is successful.

Placement in Job Readiness/Job Search Activity

Placement in full-time employment is the goal for the entire TWP caseload. All TWP participants will be assigned to participate in job readiness/job search activities unless full-time employment is found while participating in one of the other allowable work activities. Early placement in job readiness/job search activities places an individual in formal job readiness training, structured job club/job search activities, and offers the best opportunities for full-time unsubsidized job placement. The case manager is responsible for ensuring that referrals and assignments to job readiness/job search are known to the job readiness trainer.

Prioritization of Placements in Job Readiness/Job Search

The CM will evaluate new referrals to TWP and the current caseload to decide the priority of placements in job readiness/job search. The following procedures will be followed to ensure coordination of services for TWP participants.

Individuals **not immediately placed** in job readiness/job search:

- Individuals under age 20 without a GED or high school diploma will be referred to an educational or training program if they are not employed full-time.

Any individual under age 20 who is not married to the head of household, does not have a GED or high school diploma and is not caring for a child over 12 weeks of age will be assigned to participate in educational or training activities.

A minor parent who is employed may continue working while also attending an educational or training class. The case manager and the participant will work together to coordinate the scheduling of the employment hours and class time. While working, the participant will not be required to attend educational or training classes for 25 hours per week. The individual may receive supportive services while satisfactorily participating in these activities.

- Individuals age 20 or older who are working or attending another allowable TWP component at least 25 hours per week and attending an educational or training activity will be allowed to complete the educational or training activity. Individuals who find a job and the job is one that will lead to self-sufficiency will not be placed in job readiness/job search. Individuals who do not find a job or do not earn enough to transition off TANF benefits will be placed in job readiness/job search.

- Individuals age 20 or older who are attending an educational or training program (EDU/HSE, EDU/GED or EDU/ESL) 25 or more hours per week, making satisfactory progress and the program will end within six (6) months will be allowed to complete the activity before being placed in job readiness/job search.

- Individuals working more than 25 hours per week and earning enough to eventually transition off TANF benefits due to earned income will not be placed in job readiness/job search. The case manager must review these cases on a case-by-case basis to ensure the employment hours are sufficient to meet the monthly federal participation requirements. If not, the UNS component must be coupled with another countable activity. Individuals employed part-time or full-time who do not earn enough to move them to self-sufficiency will be required to job search to find a job which pays higher wages. The case manager will work with individuals that will be assigned to another work activity to coordinate the work hours and work activity assignment.

Placement in job readiness/job search should be prioritized in the following manner:

- Individuals not currently in a work activity.
- Individuals currently in community service and AWEP.
- Individuals completing an educational or training program who have not found employment.
- Individuals employed part-time.

The case manager will ensure accurate attendance information is entered in JAWS timely to ensure continuity of supportive services and work activity credit in the State's participation rate calculation. Individuals who cannot be placed in job readiness/job search within the first 30 days will be assigned to another allowable activity until they can be placed in job readiness/job search.

Individuals who cannot immediately be placed in job readiness/job search will be placed in one of the following activities:

- Short-term vocational educational activities. TANF imposes a 12-month lifetime time limit for any individual in vocational education activities.
- Alternative Work Experience Program (AWEP) with a private non-profit entity.
- Community service with a public entity.

Individual placements in AWEP and community service activities may continue until the case manager is prepared to place the individual into job readiness/job search or employment. The length of these placements will be determined by the expected date of placement in job readiness/job search, but should not exceed six-months per federal fiscal year. The case manager must determine placement dates in job readiness/job search. Individuals placed in short-term vocational education activities will be allowed to complete the assignment. The case manager must contact the WIN Job Center, community colleges and other training programs in the area to obtain a listing of available training classes and the expected start and end dates of these classes. Using this information, the case manager will determine whether it is feasible to assign participants to short-term vocational education classes or community service/work experience programs. The case manager should never assign a participant to a vocational education class if the end date of that class conflicts with the start date of job readiness and the participant will not be allowed to complete the training.

EXAMPLE: If the individual can be placed in job readiness/job search within 30 days, the work experience or training activity assignment must not exceed 30 days. If the individual is to be placed in job readiness/job search within 90 days, the activity assignment must not exceed 90 days. The case manager must determine and coordinate placement dates in job readiness/job search.

Placing Employed Individuals in Job Readiness/Job Search

Participants who are working 35 or more hours per week (32 under certain circumstances) and earning at or above the federal minimum hourly wage are considered to be employed full-time.

Part-Time Employment

Participants who are already working part-time will be placed in job search activities for additional hours to find a full-time job or a job which pays higher wages. Prior to placement in job readiness/job search, the CM will review these ase in MAVERICS to verify each participant's TANF status. Participants whose TANF case is going to be suspended or closed will not be placed in job readiness/job search.

Participants who are not employed must attend job readiness/job search eight (8) hours per day, forty hours per week. Participants that are employed part-time may continue their job while also participating in job search activities. These participants will not be required to attend job readiness/job search for eight (8) hours per day. The case manager has the flexibility to schedule job readiness/job search around participant work schedules and work with them to obtain a better job or increased work hours. Participants who are working part-time must remain in the job readiness/job search activity until completion (four weeks), or until early completion upon placement in full-time employment or part-time employment at higher wages. The total daily scheduled hours should not exceed eight (8) hours per day for the combined work activities.

The case manager will be responsible for verifying that the work hours for participants who are employed at the time of referral to TWP are sufficient to meet the federal participation requirement on a case-by-case basis, adding the component assignment and tracking participation in JAWS.

NOTE: If the participant was assigned to a part-time job placement and the work hours are increased to full-time, the case manager will close out the part-time job placement in JAWS, and add the full-time job placement and the new work hours.

JAWS Process for Placement in Job Readiness/Job Search

The case manager will complete job readiness/job search component assignments in JAWS and refer participants to the job readiness trainer. Individual component referral notices **(T005)** will automatically be printed at the case manager's local printer by JAWS each time the MPWA screen is successfully processed. (The provider of job readiness/job search must be added to the inventory.) The T005 will be given to the participant to present to the job readiness trainer. The case manager will use the PACR screen to document the date that the referral notice was given to the participant. The job readiness trainer has five (5) days to complete the back of the referral notice and return it to the case manager. If the form is not returned within five (5) days, the case manager will contact the job readiness trainer. If the participant did not show for the appointment, the case manager will start the conciliation process IMMEDIATELY. If the participant keeps the appointment with the job readiness trainer and the referral notice is returned, the case manager will scan the completed notice in the participant's case record.

NOTE: Manual form MDHS-EA-365A, Work Program Component Referral, will only be used when JAWS is not available. Anytime the MDHS-EA-365A is used, the case manager will enter the information in JAWS as soon as the system becomes available.

Job Readiness Trainer/Employment Coordinator Activities

Upon receiving a referral from the case manager, the job readiness trainer will assist the TWP participant in becoming more employable and finding full-time unsubsidized employment. Although eligibility staff and case management have explained the work program beforehand, the job readiness trainer will also give the participant a brief overview of the job readiness, job search and job placement activities, the roles and responsibilities of the job readiness trainer/employment coordinator, and what is expected of the participant.

Upon receiving a referral from the case manager, the job readiness trainer will:

- Complete the back of the component referral notice (T005) and return it to case management. If the notice is not returned within five days, the case manager will contact the job readiness trainer and begin the conciliation process, if necessary.

- Have the participant sign in and out each day via MDHS-EA-356B, TWP Sign-In Sheet. Use the daily sign-in sheets to complete the MDHS-EA-356A, Work Program Attendance Report, and submit it to the case manager each Monday for the previous week, or as

requested. The case manager or job readiness trainer will use the MDHS-EA-356A to enter weekly attendance data in JAWS. The original sign-in sheets will be maintained in a central location for monitoring purposes.

- Explain, during the job readiness class, that there are possible income exclusions as determined by the Housing Authority for individuals who live in public or assisted housing. However, it will be the responsibility of the TWP participant who resides in public housing or Section 8 housing to request that form MDHS-EA-910H, Job Readiness Training Verification, be completed and to follow up after initial training or at the time employment is found. Participants who have specific questions about possible income exclusions will be referred to the Housing Authority for answers. **Eligibility for income exclusions for TWP participants who reside in public or assisted housing will be determined by the Housing Authority.** Refer to Chapter 9, U.S. Department of Housing and Urban Development.

- Refer participants who need to be TABE tested to the local community/junior college when a literacy assessment is needed to obtain employment.

Participants have successfully completed job readiness/job search when they:

- Successfully complete four week; or
- Have an early completion, less than four weeks, due to job placement (unsubsidized).

Assessment after Job Readiness/Job Search

Participants will be referred back to the case manager after completing four weeks of structured job readiness and intensive job search activities and do not find a job. The job readiness trainer and case manager will assess the employability of these individuals and jointly evaluate each participant's records, i.e., test scores, progress in job readiness, employer comments from job interview appointments, previous component assignments, etc. Based on this assessment, the case manager and job readiness trainer will discuss options such as:

1. Additional job search;
2. Vocational education;
3. Other training opportunities through WIA and junior colleges;

4. Work experience; and

5. Community services.

The case manager and job readiness trainer will work together to remove any barriers to successful job placement. If the decision is that the participant needs additional education, job skills training, work experience, etc., the case manager will schedule a face-to-face reevaluation meeting with the participant to discuss future work activity assignments. The case manager will close the job readiness/job search component and assign the participant to the appropriate work activity. At any time in the future a potential job placement becomes available, the job readiness trainer/employment coordinator will notify the case manager. The case manager will work with the participant's current component provider and the potential employer to coordinate the job interview. The case manager will inform the participant of the location, date and time for the interview. The interview, along with the results, will be documented in the participant's case record. The participant's current component assignment will be continued while the person goes for the job interview and, if hired, continued until the employment start date. When the person starts work, the current component will be closed, if no longer needed, and the appropriate employment component will be assigned.

The following guidelines will be used to determine appropriate work activity assignments:

Lack of Work Experience

Participants needing additional work experience may be assigned to community service or AWEP. Participants assigned to these activities will be reevaluated every 90 days, at a minimum, to monitor their progress. Based on the evaluation results, the case manager will contact the job readiness trainer to assess the possibility of job placement.

Lack of Education or Training

Participants needing additional education or training in order to obtain employment will be referred back to case management for vocational education training, job skills training/education directly related to employment or work experience.

Suspected Disabilities

If the case manager or job readiness trainer suspects that a participant has a disability, the case manager will refer the participant to the Mississippi Department of Rehabilitation Services, Office of Vocational Rehabilitation, and/or the Mississippi Department of Mental Health for assessment and encourage the participant to seek a medical evaluation. The case manager will

be responsible for coordinating the referral plan with the appropriate entity. If the participant refuses to seek assistance from all available resources, the case manager will explain that failure to cooperate or participate satisfactorily, e.g., continuous unsatisfactory attendance, failure to make satisfactory progress, etc., in assigned work activities may cause the individual to be sanctioned, if good cause cannot be substantiated.

Drug and Alcohol Addictions

If the job readiness trainer/employer coordinator or the employer suspects that drug or alcohol problems are preventing satisfactory participation, the case manager will be notified. The case manager will inform TWP participants at orientation, assessment and whenever appropriate thereafter about the possibility of drug testing as a condition of employment. The job readiness trainer will also inform participants about drug testing requirements during the job readiness/job search training period and at the time of referral to potential employers who require testing.

NOTE: A substance abuse exemption can only be approved at the time of application, reevaluation or change from exempt to mandatory participation status. An exemption cannot be requested as a way to avoid TWP participation or a sanction after the person has been referred to case management or at the time of referral to an employer who requires drug testing prior to employment. Once the individual has declined the opportunity for a substance abuse treatment exemption, no such exemption will be granted until the next reapplication, reevaluation, or change from exempt to non-exempt status.

A substance abuse exemption from the TANF Work Program will only be allowed during the treatment period and will not exempt the individual from the 60-month time limit. Any evaluation for alcohol or substance abuse may be provided through the participant's family physician and should be covered by Medicaid. Refer to Chapter 11, Determining Good Cause, Drug and Alcohol Abuse.

Other Temporary Incapacity Situations

Emergency situations such as a short-term illness of the participant or a family member living in the home may arise and prevent the individual’s participation in the assigned work activity. A family member is defined as the spouse, parent, step-parent, sibling, child, step-child, grandchild, grandparent, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law, or sister-in-law of the case head. A child means a biological, adopted or foster child, or a child for whom the individual stands in loco parentis. MDHS realizes that situations beyond the participant’s control may occur to prevent participation in the TANF Work Program. Excuses for not

attending a work activity must be monitored closely by the case manager to ensure the participant is making every effort to participate in the program. When necessary, the case manager must schedule a face-to-face case management appointment with the participant. The appointment will be scheduled in JAWS via the MWAR screen. JAWS will send the case manager an ALERT and generate a TANF Assessment Appointment Notice (T003) for the participant. If the participant does not show for the appointment, JAWS will initiate the conciliation process.

After a careful evaluation of the participant's progress and needs is completed by the job readiness trainer and the case manager, the following actions will be taken:

- The job readiness trainer and the case manager agree that the person is almost job ready and needs to resume job readiness/job search (remedial) activities for an additional two weeks after a one week break; or

- The job readiness trainer and the case manager agree that the person needs additional work experience or vocational education. The job readiness trainer will refer the person back to the case manager for additional work experience or training (i.e., community service, AWEP, or vocational education).

The results of this evaluation must be documented by the job readiness trainer and the case manager and placed in the participant's case record.

NOTE: Keep in mind this assessment occurs after four weeks of structured job readiness/job search activities. The purpose of this action is to move the participant into employment as quickly as possible, and to offer the training or experience needed to find a job.

Actions of the Case Manager and Job Readiness Trainer after Assessment

If it is decided that additional work experience or training is needed to help the participant become more employable, or to provide strength in an area where the individual is lacking (this information should be known to the job readiness trainer), assignments will be made to the most appropriate work activity. Throughout assignment in the new activity, the case manager and job readiness trainer will perform the following steps:

1. The case manager will review the placement every 30 days and record the participant's progress in the assigned activity. (Notify the on-site provider prior to or at the time of placement that daily supervision is required and detailed records must be maintained on

each participant and this tracking is in response to the requirements of the TANF Work Program. Details of how and when this information will be available and the procedure for obtaining this information should be clearly understood in advance of placement and retrieval should occur on a methodical, timely basis without fail.)

2. While participating in other work activity assignments, the job readiness trainer/employment coordinator will continue working with and scheduling job interview appointments for the participant. All interview appointments scheduled and the interview results must be documented in the case record.

NOTE: Once the participant has been referred back to the case manager for placement in another work activity, the job readiness trainer should continue to make routine contact with the individual (i.e., once per week). The job readiness trainer should also screen new employers to see if any new jobs are available for the participant.

The case manager and job readiness trainer are "sharing" the responsibility of tracking the participant. Therefore, the case manager and job readiness trainer must work together and notify each other of the participant's progress. As the case manager reviews the participant's progress in the assigned work activity, the case manager must contact the job readiness trainer for possible job placement. The job readiness trainer may contact the participant at any time to schedule job interview appointments. The results of these appointments must be shared with the case manager.

OTHER TRAINING PROGRAMS

Workforce Investment Act (WIA)

Training funds for employers may be available through the federally funded training programs established under the existing Workforce Investment Act (WIA). WIA is administered through the Mississippi Department of Employment Security (MDES) through contract with the Mississippi Development Authority and four workforce investment areas.

The Workforce Investment Network, or WIN, is the primary framework for the delivery of WIA services in Mississippi. The larger or comprehensive WIN Job Centers offer co-located partner staff, such as the Department of Employment Security, Department of Rehabilitation Services, local community colleges and various other partners. The smaller or affiliate centers offer services by the Department of Employment Security and provide information about other partners' services. Coordination with WIN Job Centers will broaden the range of services offered to WIA programs specifically to help the following individuals:

1. Economically Disadvantaged

    a. Youths (14 to 21)

    b. Adults (22 and older)

    c. Older Workers (55 and older)

2. Dislocated Workers

Because the economic conditions and demographics of each region vary, the programs offered will vary from county to county. This may require different methods of coordinating and documenting the information on the TWP participant. The case manager and job readiness trainers must work with their local WIN Job Center to incorporate the services of WIA training with countable TWP activities and establish procedures for making, monitoring and tracking referrals. The following chart lists some of the programs and services provided utilizing WIA funds and how they should be identified in the TANF Work Program.

TANF WORK PROGRAM ACTIVITY	WIA ACTIVITY
On-the-Job Training	**On-the-job-training** - reimburses employers up to 50% of an employee's wages for up to six months when an eligible individual is on the job, receiving training and earning a regular salary.

Vocational Education	**Individual referral** - provides participants with training in regular vocational courses taught at local community colleges and other training entities. Training may include nursing, truck driving, chemical phlebotomy, and computer programming. Once determined eligible, the participants' tuition, books and other training costs are paid for by WIA. **Classroom training** - offers specific occupational and vocational skills to eligible individuals in WIA-funded classroom training.
Job Readiness/Job Search	**Employment services** - provide job referral, job development, job placement and assessment services, career counseling and placement assistance to meet the unique needs of economically disadvantaged individuals and laid off workers.
Education (ABE, GED, etc.) for individuals under age 20. **Education Directly Related to Employment** for individuals age 20 and older.	**Literacy programs** - offer basic skills training to eligible individuals whose lack of basic reading skills renders them unable to compete in the labor market.

Referrals to WIN Job Centers

TANF eligibility workers will identify and refer TANF applicants who are required to comply with TANF Up Front Job Search requirements, during the 30-day TANF application processing period, to case management. Refer to Chapter 7, Up Front Job Search, for additional

information. TANF applicants referred to case management will be required to complete the TWP intake process and will be referred to the WIN Job Center by the TWP case manager. TANF applicants whose TANF applications are approved and who are referred back to case management for participation in the TANF Work Program will be required to follow-up with the local WIN Job Center to inquire about potential employment and/or training opportunities. ongoing TWP participants will be referred to the WIN Job Center based on assessment and determination by the TWP case manager.

Case Manager

When a TANF applicant is referred to the TWP by the eligibility worker, the case manager will complete the TWP intake process and refer the applicant to the local WIN Job Center. The case manager will:

1. Discuss the TANF Up Front Job Search requirements with the applicant and inform the applicant that the TANF application will be denied if the applicant fails, at any point, to comply with Up Front Job Search requirements;

2. Complete the TWP intake process with the applicant;

3. Contact the representative for the WIN Job Center and schedule the interview date and time for the applicant (interview should be within ten (10) days from the date of the TWP intake appointment);

4. Generate a WIN Job Center Referral (T009) for the applicant. Give the T009 to the applicant who will present it to the WIN Job Center counselor at the interview appointment. The WIN Job Center counselor will complete and return the T009 to the case manager within ten (10) days from the date of the referral; and

5. Enter the results of the WIN Job Center referral in JAWS which will allow the eligibility to process the TANF application.

The case manager will assess ongoing TWP participants to determine the appropriate work activity and arrange supportive services. The case manager may refer the following participants to the local WIN Job Center:

· Individuals who are waiting for placement in job readiness/job search. The length of time

assigned for this activity will be coordinated with the date of placement in job readiness/job search.

· Individuals who have completed the job readiness/job search activities but were unable to find employment.

Individuals enrolled in an education or training program prior to referral to the TANF Work Program will be allowed to remain in that activity, if they are:

- Under age 20, in an education or training program.

- Over age 20, in an education or training program (GED or vocational education, or job skills training) and will complete the activity within six (6) months. NOTE: An individual enrolled prior to referral will meet with the case manager who will review and discuss the current status of the activity (time remaining, progress being made, vocational education months remaining, etc.) with the individual and together decide the most effective path to self-sufficiency and develop the employment plan accordingly. In this situation, the activity may or may not be countable in the participation rate calculation.

- Over age 20, in an education or training activity and working at least 25 hours per week.

WIA may provide child care and transportation to its participants; therefore, MDHS and WIA will exchange information on TWP participants who are enrolled in WIA classes to determine whether or not a participant is receiving duplicate supportive services. If the participant is receiving supportive services from both programs, a claim for improper payment must be prepared and filed in the case record, and the overpayment entered on the TSOP screen in JAWS for work expense (transportation) overpayments.

NOTE: The case manager will contact the WIN Job Center to obtain the start date of their training programs. The case manager may have to look at other work activity assignment options for individuals who are awaiting the start date of the WIA class or the job readiness/job search activity.

Job Readiness Trainer/Employment Coordinator

The job readiness trainer/employment coordinator is the MDHS representative who works directly with the employer. The job readiness trainer/employment coordinator will identify training necessary to meet the requirements of an employer and/or job and, whenever possible,

contact the WIN Job Center to coordinate WIA training programs and the State Board for Community and Junior Colleges to coordinate training programs through community colleges.

On-the-Job Training (OJT)

Under this activity, TWP participants are hired (unsubsidized employment) by private or public employers and provided additional supervision and on-the-job training. While engaged in productive work, participants are provided training which provides the knowledge or skills essential to fully and adequately perform the job. OJT participants are compensated at a rate (including benefits) comparable to that of other employees performing the same or similar jobs. OJT employers are reimbursed up to 50% of the participant's wages for up to six month utilizing WIA funds to offset the cost of training and supervision given to participants. OJT employers are expected to retain OJT participants as permanent employees at the end of the training period. The case manager will assign and track the participant under the OJT/OJT component during the OJT training period (up to six months). If the participant retains employment after the OJT training period ends, the case manager will close out the OJT component and assign the participant to the appropriate UNS component. Wage verification forms from the employer or check stubs will be used to verify employment and determine the weekly work hours to be projected for both components.

NOTE: For the purpose of the TANF grant, OJT participants are considered to be employed and may be eligible for the TANF total disregard of earnings or lose eligibility for TANF benefits.

The job readiness trainer/employment coordinator will contact the WIN Job Center to identify current OJT sites and coordinate the development of new OJT sites. Both entities will work together to develop a process for referring TWP participants to OJT sites. TWP participants must be registered with the WIN Job Center prior to referral to the OJT site; otherwise, the employer cannot receive reimbursement from WIA for wages paid to participants.

State Board for Community and Junior Colleges

TANF funds may be utilized to provide training programs coordinated by the State Board for Community and Junior Colleges. These training opportunities are to be coordinated through the Division of Economic Assistance, Job Development Unit. The State Board for Community and Junior Colleges has the capability to arrange training courses for TWP participants at the location or vicinity of the training requirement. Depending upon the type of training involved, a training course could require 5-10 participants to be cost effective. This is an excellent resource for

businesses that are considering expansion of their workforce and are willing to hire 5-10 welfare recipients, in an unsubsidized capacity.

In identifying the need for training, the intent is to match the specific training needs of welfare recipients to jobs with specific training requirements. The procedures listed below should be followed to initiate training course:

- The case manager or job readiness trainer/employment coordinator will identify training necessary to meet the requirements of an employer and/or job.

- The case manager or job readiness trainer/employment coordinator will contact the Economic Assistance Job Development Unit for approval of the training program and to interface with the State Board for Community and Junior Colleges to arrange the training class. The case manager must coordinate supportive services.

- The county director or his/her designee may initiate/identify employer related training needs and contact the Job Development Unit for approval of the training program and to interface with the State Board for Community and Junior Colleges to arrange the training class. The county director/designee must ensure coordination with the appropriate job readiness trainer/employment coordinator and upon completion of the training program the case manager will refer participants to the JRT for placement services.

- The State Board for Community and Junior Colleges will arrange a training class and notify the Job Development Unit when they are ready for referrals.

- The Job Development Unit will contact the case manager or job readiness trainer/employment coordinator to begin the referral process.

- The job readiness trainer/employment coordinator will:

  - Notify the case manager about the new training site and the need for supportive services (child care and transportation).

  - Work with case management to select the TWP participants to be referred to the training site.

- The case manager will place the TWP participant in the appropriate activity (vocational education, job skills training, etc.) and monitor the participant's participation.

- The case manager will refer the participant back to the job readiness trainer for placement services, once the training course is complete.

Mississippi Department of Employment Security (MDES)

As a condition of TANF eligibility, all nonexempt adult TANF applicants will be referred to the local WIN Job Center to register for work and participate in Up-Front Job Search activities during the 30-day TANF application processing period. TANF applicants who are approved and referred back to case management for participation in the TANF Work Program will be required to follow-up with the local WIN Job Center to inquire about potential employment and/or training opportunities.

TWP participants will not be placed in AWEP, community service or subsidized employment when:

- Any other individual is on layoff from the same or any substantially equivalent job; or

- The employer terminates the employment of any regular employee or otherwise causes an involuntary reduction of its workforce in order to fill the vacancy, so created, with a TWP participant.

The Mississippi Department of Employment Security has been appointed by State law to hear and decide claims by employees of violations.

Mississippi Department of Rehabilitation Services, Office of Vocational Rehabilitation

TANF applicants and recipients who have been determined to be incapacitated (eligible for the JB code) or who report they are unable to work will be required to apply for vocational rehabilitation (VR) services and complete the vocational rehabilitation intake process. The case manager will provide, to the VR counselor, a Vocational Rehabilitation Referral Notice, T022, along with a completed MDHS-EA-331, Report of Medical Examination, and/or any other supporting medical documentation for each individual referred for assessment. Nonexempt adult

TANF recipients who are determined to be incapacitated and are found eligible for vocational rehabilitation services will be referred to case management and required to cooperate with the vocational rehabilitation counselor and comply with the requirements outlined in their Individualized Plan for Employment (IPE). Refer to Chapter 3, Vocational Rehabilitation Services, for additional information.

The case manager will work with the vocational rehabilitation counselor or designee, at the local level, to:

1. Schedule vocational rehabilitation intake appointments within ten days from the date of the TWP intake appointment;

2. Determine which vocational rehabilitation services/activities can be defined as allowable, countable TWP work activities; and

3. Coordinate TWP work activity assignments and supportive services, if needed.

U. S. Department of Housing and Urban Development (HUD)

HUD believes "training income exclusions" are an important factor in helping TANF and food stamp recipients in public and assisted housing move from welfare and dependence to greater self-sufficiency. Therefore, HUD has addressed questions regarding their existing policy on the treatment of income amounts received during job training programs or work/employment when they are determining annual income in assisted housing programs.

Income Exclusions

Public and assisted housing residents may be entitled to certain income exclusions for the determination of the amount of their rent. Residents must first enter a qualifying employment training program before they can receive this exclusion. The job readiness training component through the TANF Work Program or participation in a WIA funded program providing employment training and supportive services are some examples that would meet the definition of "training" as outlined by HUD. After completion of the training program, the income exclusion period would apply if the resident finds employment. There is a maximum of 18 months from the date the job begins that HUD can exclude the resident's new income. **Eligibility for this exclusion will be determined by the Housing Authority.**

EXAMPLE: An individual living in public or assisted housing who participates in a qualified training program, completes the training program and finds his/her first job may be eligible for the 18-month exclusion provided he/she was in the training program on or after the effective date (09-23-94) of the Tenant Participation and Tenant Opportunities Program rule.

EXAMPLE: An individual who completed a qualified training program and started his/her first job prior to being admitted to public housing, but only had the job for 12 months at the time

he/she entered public housing, may be entitled to the remainder of the 18-month exclusion, i.e., six (6) months.

Income Included

The Housing Authority will determine the amount of income to include in their calculation to determine the amount a resident will pay in rent. They will determine the total amount of TANF benefits as well as earnings the individual was receiving prior to entering the training program and arrive at a "base amount," anything over this would be considered the "incremental amount" and excluded from the calculation.

EXAMPLE: A Section 8 family member is receiving $170 per month in TANF benefits. She enrolls in a qualifying State employment training program, such as job readiness, and becomes employed receiving $450 per month. The TANF benefits stop. To determine the incremental amount of earnings and benefits, HUD subtracts $170 (benefits prior to enrollment in the training program) from the $450 (income). The incremental amount is $280. HUD would then determine the income to be counted, $170 and the amount to be excluded, $280. The exclusion could run a maximum of 18 months.

Explanation to the Recipient

At each application, re-application, reevaluation, TWP intake, and during the job readiness component, the eligibility worker, case manager and/or job readiness trainer will inform the individual about potential HUD income exclusions in determining the rent amount. To be eligible for this exclusion, the individual would have to participate in or have completed a qualifying training program, such as the job readiness training component in the TANF Work Program. All applicants and recipients should be made aware of this possible exclusion. However, this will only benefit those recipients living in public and assisted housing who participate in or have completed an approved training activity. It is possible that the individual would not qualify for the exclusion at the time they are in the county EA office for application, reapplication or reevaluation, but they may become eligible at a future date. It will be the responsibility of the individual to report changes in their household and follow up with the Housing Authority to ensure a proper determination of their rent. The explanation to the individual must be documented in the case record on MDHS-EA-900A.

The Job Readiness Training Verification form, MDHS-EA-910H, will be used to help recipients, living in public and assisted housing, verify their status in the TWP job readiness training component and employment placements to establish eligibility for the potential income

exclusion. It will be the responsibility of the TWP participant to request that a MDHS-EA-910H be completed at the end of the job readiness training component and include the information verifying his/her employment status. If the participant completes the job readiness training component and is employed, the appropriate section of the form should be completed, along with the employment date (unsubsidized), employer's name, average hourly wage and scheduled hours per week. Should the individual complete the job readiness training component and not be employed, the appropriate section of the form should be completed, along with the end date and the fact that the individual has not found employment. The participant may request this verification at any time and the case manager or job readiness trainer will complete the MDHS-EA-910H verifying the individual's current status. Eligibility for income exclusions will be determined by the Housing Authority. The case manager or job readiness trainer should refer the participant to the Housing Authority if they need answers to specific questions about the possible exclusion of income.

ELIGIBILITY FOR INCOME EXCLUSIONS FOR TWP PARTICIPANTS WHO RESIDE IN PUBLIC OR ASSISTED HOUSING WILL BE DETERMINED BY THE HOUSING AUTHORITY!!!

MDHS Division of Child Support Enforcement

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) and the Mississippi Code 1972, Annotated, Section 93-11-71, require procedures to ensure individuals who owe past due child support for any case in which a child receives TANF may be required, by the court, to participate in work programs operated by state agencies. This includes participation in the TANF Work Program (TWP). The purpose of imposing work requirements on a non-paying, non-custodial parent (NCP) is to help the parent obtain employment in order to provide financial support for his/her dependent child(ren). In order to be referred to TWP, the non-custodial parent must not be incapacitated and must have:

- a legal responsibility (support order) to provide financial assistance for his/her child(ren)
- a delinquency in support payments of more than one month
- a child(ren) receiving TANF benefits
- no verified employer and
- a verified location for process (address)

When the above criteria are met, the Division of Child Support Enforcement may petition the court to issue an order to require the non-custodial parent to participate in the TWP job readiness and job search activities for up to 60 days or until employment is found, whichever comes first.

Child support attorneys will make recommendations to the courts that non-custodial parents be referred to TWP as hearings are scheduled for contempt of court for non-payment of support. If participation in TWP is ordered, the county director or designee in the county in which the non-custodial parent resides will receive the referral to the work program. The county director or designee will be responsible for coordinating the TWP activities for the NCP.

Preparing for the Court Hearing

Prior to the court hearing, the Child Support Office must verify the status of the TANF case of the NCP's child(ren) to ensure the case is currently in active status and is anticipated to remain active in the month following the court hearing date. The Child Support Office will provide the Economic Assistance Office in the county in which the custodial parent resides a list of TANF cases needing this verification and the date of the court hearing or other due date. Depending upon the number of cases involved, the Child Support Office will make the request sufficiently in advance of the due date to allow time for review and response, no less than three work days. The county director or designee will review the TANF case status, upon request by the Child Support Office, and provide a TANF case status report including the start date of the next job readiness/job search class for the county. If the non-custodial parent resides in a county other than that of the custodial parent, the county director or designee will contact the director of the county in which the non-custodial parent resides to verify the start date of the next job readiness/job search class for that county. The TANF case record of the custodial parent will be documented to show the request and case status report.

If the TANF case will close because the person has missed the reevaluation-appointment and the case closure could be prevented at the time of the TANF status request from the Child Support Office, the EW should immediately try to contact the TANF recipient to determine why the review was not done timely. If the individual states his/her intention to close the TANF case, allow the case to close or remain closed and report this status to the Child Support Office.

If the individual states his/her intent to continue TANF, set a time to complete the review and report the case status when completed. The Economic Assistance county office must complete such reviews within TANF time frames for regular reviews and within the deadline to report the TANF status to the Child Support Office prior to the court hearing date.

If the TANF case is not currently active or is anticipated to close, the child support attorney will not request referral of the NCP to TWP in the contempt of court hearing for failure to pay support. Also, if the next scheduled job readiness/job search class start date is too far into the future to

expect the NCP who may need more than placement services to reasonably be served

within 60 days, the child support attorney will take this into consideration when making recommendations to the court.

Referrals to TWP

If the TANF case is active and the court orders the NCP to participate in the TANF Work Program, the child support worker will complete the MDHS-CSE-625/325, TWP NCP Referral/Communication Form, and forward the referral to the county director or designee of the county in which the NCP resides. The Child Support Office will inform the NCP of the referral to TWP when the court order is received. If the NCP is in the office, he/she should be directed to the Economic Assistance Office to set a TWP appointment start date.

Since the non-custodial parent of the TANF recipient cannot be referred from MAVERICS to JAWS, all referrals, tracking and reporting for the NCP's participation will be done manually between the Child Support Enforcement Office and the county director or designee in the county in which the NCP resides.

Receipt of Referral by the County Director

Upon receipt of the court ordered referral, the Economic Assistance office will log in the referral via. MDHS-EA-325A and will again check the TANF case status to be sure it is still open.

The case manager or job readiness trainer will notify the NCP in writing of his/her first appointment date and/or the date of the first available job readiness class for that county. Depending upon the county scheduling time frame, the NCP's initial TWP appointment may be scheduled by telephone, in the office or by mail. In any case, the appointment should be provided in writing to the NCP with a copy filed in the case record. The NCP will be assessed and will begin job search activities or will participate in the job readiness/job search activity just as other TWP participants, except that all tracking and reporting will be done manually.

If the NCP fails to report to the initial TWP appointment, the Child Support Office will be notified immediately by MDHS-CSE-625/325 and by phone/fax. The Child Support Office will contact the NCP to determine why the failure occurred. Since the job readiness class is a very structured program, it is important for the NCP to begin attendance on the first day. However, the NCP may begin later in the week, provided the new start date is agreed upon and approved by the Child Support Office and the job readiness trainer. Document the TWP case record accordingly.

If the NCP fails to respond after the second TWP notice, the job readiness trainer will again complete the second section (Comments) of the MDHS-CSE-625/325 to explain the status and return the form to the Child Support Office. No further TWP action is required unless further requests are received from the Child Support Office. A copy of the MDHS-CSE-625/325 will be retained in the case record for documentation. The job readiness trainer will also document the referral receipt date and the NCP's failure to show on the NCP TWP Tracking Form, MDHSEA-325A.

Allowable Work Activities

If the job readiness/job search class will not start soon in the county, the case manager or job readiness trainer will refer the NCP to the local WIN Job Center to register for work, will make a preliminary assessment of the NCP's job skills and will begin referrals for employment to attempt to find a job as soon as possible. If the NCP has not found employment by the time the job readiness class begins, the NCP will be referred to the class and expected to participate for the duration of the class or until employment is found. The NCP must be assisted in job search activities as soon as appropriate placements become available.

The NCP can be placed only in full-time unsubsidized employment since he/she must be seeking employment to ensure payment of the child support obligation.

Job readiness/job search and unsubsidized employment are the only two work activities available for the NCP. The case manager or job readiness trainer will work with the NCP for a maximum of 60 days from the date the referral to TWP is received from the Child Support Office.

Failure to Obtain Employment

When the NCP has completed job readiness and job search activities but has been unsuccessful in obtaining gainful employment after 60 days, the case manager or job readiness trainer will complete the MDHS-CSE-625/325 to notify the Child Support Office of the status. The Child Support Office may wish to contact the case manager or job readiness trainer to discuss the reasons why the NCP was unsuccessful in finding employment. Further work-related training or basic skills may be required which could be obtained through WIA, GED classes, on-the-job training, etc., in order to prepare the NCP for employment. These activities would be determined by the Child Support Office and the court.

If the NCP fails to complete the job readiness/job search activity or refuses to participate satisfactorily in assigned work activities or job interviews, the Child Support Office will

immediately be notified via the MDHS-CSE-625/325. Any good cause determinations for failure to participate satisfactorily will be handled by the Child Support Office who will coordinate with the case manager or job readiness trainer whether the person will continue to participate in the assigned work activity if the 60-day referral period has not expired.

Job Placements

When the NCP is successful in obtaining employment within the 60-day period, the MDHS-CSE-625/325 will be completed notifying the Child Support Office of the placement. The unsubsidized employment must be a full-time job. Placements must not be in temporary employment or limited part-time jobs. The type of placement, pay rate, work hours, start date, etc., with the employer's name and address must be reported. This does not obligate the employer to keep an employee who fails to participate unsatisfactory after a placement. It is the responsibility of the NCP to make satisfactory efforts to keep a job since failure to comply with the support order could mean another hearing for contempt of court.

General Information

Determinations of incapacity or exemptions for good cause or substance abuse treatment will be the responsibility of the Child Support Enforcement Office. The NCP will be referred to the Child Support Office to discuss requests for incapacity or other requests to avoid or be excused from participation. The NCP will not be eligible for TANF supportive services.

Tracking and Reporting Requirements

All tracking and reporting procedures for the NCP referrals will be handled manually by the case manager or job readiness trainer. Each office must maintain a MDHS-EA-325A, NCP TWP Tracking Form, of all NCP work program participants showing the date the referral was received and the status of the case. A case record must be maintained on each NCP referral from the Child Support Office and the case record shall contain all correspondence, documentation and related forms to support all activities, attendance, assignments, failure to attend, etc. These case records will also be available for review by the Division of Child Support Enforcement, auditors or other program monitors on an as needed basis.

Forms and tracking/reporting documents will include:

- **NCP TWP Tracking Form, MDHS-EA-325A**, used as a chronological county office record from date of receipt through termination.

- **Client Contact/Action Record, MDHS-EA-376**, used for documentation of routine activities.

- **TWP NCP Referral/Communication Form, MDHS-CSE-625/325**, which is used to receive and send information between the Division of Child Support Enforcement and the case manager or job readiness trainer.

- **TWP Communication Form, MDHS-EA-364**, may be used to document information regarding unsatisfactory participation, if necessary. This form is usually completed by the case manager! job readiness trainer during the TWP conciliation process, but in the case of the NCP, the MDHS-EA-364 will be attached to the MDHS-CSE-625!325 returned to the Child Support Office when there is a participation problem with the NCP.

  . Appointment notices and other correspondence. .

  Other TWP forms.

OVERVIEW

This material describes the process for referring TANF recipients for placement in TANF Work Program (TWP) activities and monitoring their attendance and progress in their assigned activities.

COMPONENT REFERRALS

TANF recipients are enrolled in the TWP work activities (components) through a process of referral. JAWS produces an inventory of all of the providers for each work activity component. The inventory identifies the provider, the type of component services available, the location of the component sessions, and the dates and times that sessions are held.

The case manager will select an available component session for the TWP participant. Information about the selected session is recorded by the case manager in JAWS. The TWP participants assigned to a non-paid work activity (job readiness, job search, AWEP, community service, education, etc.) will be given a TANF Work Program Component Referral Notice, T005, to take to their component provider. JAWS will automatically print a T005 notice at the case manager's local printer when the Add Participant Assignment (MPWA) screen is successfully processed. The case manager will enter the date and time of the appointment with the component provider on the T005 notice. A copy of the T005 notice will be scanned to the participant's electronic case record.

When a TWP participant is assigned to a work activity, JAWS will:

- Alert the case manager when the actual start date is not entered (PLACEMENT NEEDS A START DATE).

- Identify, after the close of business on the fifteenth day of each month, all component assignments for which the Expected End Date is on or prior to the last day of the following month and alerts the case manager (REVIEW COMPONENT EXPECTED END DATE AND SUPPORTIVE SERVICES). When this alert is received, the case manager will review the case and take appropriate action(s), e.g., update the expected end date, close the component, add a conciliation record, review ongoing eligibility for TANF supportive services, generate a child care termination (CR02), if applicable, etc.

- Display a warning message on the MPAC screen if the component expected end date is less than the current calendar date (EXPECTED END DATE HAS EXPIRED, YOU MUST

REVIEW THE CASE). When this warning is received, the case manager will review the case and take the appropriate case action(s), e.g., update the expected end date, add a conciliation record, close the component, generate a child care termination (CR02), if applicable, etc.

- Monitor the weekly entry of attendance data (COMPONENT ATTENDANCE REPORT DUE).

- Produce a Vocational Rehabilitation Quarterly Progress Report (T015) for participants assigned to the VOC/REH-vocational rehabilitation component. JAWS will generate the initial progress report 90 days from the actual start date of the component and every 90 days thereafter.

- Monitor the timely return and entry of VOC/REH quarterly progress reports (T015) completed by vocational rehabilitation counselors (COMPONENT PROGRESS REPORT DUE).

FOLLOW-UP AFTER PLACEMENT IN A TWP WORK ACTIVITY

The TWP requires that daily supervision be provided to all participants assigned to non-paid work activities. The provider's worksite supervisor is responsible for daily supervision and oversight. Daily participation hours must be documented by the worksite sponsor and monitored on a weekly basis by the case manager. Follow-up should occur when:

- the TWP participant fails to contact the case manager or job readiness trainer at a specified time;
- progress in the component assignment must be evaluated; or
- the component assignment is about to end.

The case manager and/or job readiness trainer have a responsibility to follow-up with each participant on a regular basis after assignment to a TWP activity as follows:

1. The case manager will follow-up with component providers to ensure the participant enrolled in the assigned work activity, is attending the activity and making satisfactory progress. If the component provider fails to return the completed T005 referral notice to the case manager within five (5) day, the case manager will contact the provider to determine whether the participant kept the appointment. If the participant failed to keep the appoint-

ment, the case manager will begin the conciliation process.

2. As a component provider, the job readiness trainer will complete the T005 referral notice and return it within five days to the case manager, along with any other required documentation, e.g., the MDHS-EA-357, Participant Travel Form, and/or the MDHS-EA-356B, Sign-In Sheet, and maintain appropriate documentation in the participant's case record or a central file.

3. The case manager will re-evaluate participants who are assigned to AWEP or community service at least every 90 days to monitor progress and then contact the job readiness trainer/job developer to discuss possible job placement. Refer to Chapter 9, Evaluating the Participant's Progress, for additional information.

4. The case manager will evaluate participants who are not engaged in allowable work activities on a monthly basis via the Case Manager Caseload Listing report. A mandatory face-to-face interview will be conducted at least every 90 days to determine whether there has been a change in the individual's circumstances (i.e., transportation, child care or an allowable work activity becomes available) which will allow participation. At each interview the case manager will explain that the TANF 24-month time limit will increment each month that the individual is not assigned to a work activity and does not qualify for an exemption from TANF work requirements. The worker will use the PACR screen to document the interview. The worker will send MAVERICS notice A106, TANF Time Limit Counter Information, to provide written notification of the status of the family's TANF time limit counters.

5. The case manager or job readiness trainer will periodically contact the participant to give positive feedback, such as, encouragement and congratulations for achievements and successes.

6. When receiving verification of continued employment for unsubsidized or subsidized employment, the case manager or job readiness trainer will pay close attention to the attendance and wage information. If changes are noted (decrease in wages or work hours, excessive absences, etc.), the case manager and/or job readiness trainer will:

   a. Discuss the decrease in wages/work hours or absenteeism with the participant.

   b. Contact the employer and discuss the decrease in wages/work hours or absenteeism.

   c. Recalculate and re-project the TWP weekly attendance hours, if required.

d. Take any other appropriate case action(s), e.g., set-up a conciliation, terminate supportive services, close the projected attendance record, inform the eligibility worker, etc.

A participant cannot elect to reduce his/her own work hours. If the participant voluntarily decreased the scheduled work hours, the case manager will initiate the conciliation process.

When the TWP participants are referred to potential employers or find employment, the case manager or job readiness trainer will:

1. Follow-up with the employers in order to receive feedback on each participant's interview performance.

2. Contact newly employed individuals and their employers at least once per month to encourage job retention.

When developing new employment opportunities, the job readiness trainer or employment coordinator will follow-up on participants referred back to case management for additional work experience and training. These individuals will be routinely contacted by the job readiness trainer or employment coordinator and given the opportunity to find employment.

Any contact with a participant, provider, employer, job readiness trainer, employment coordinator, case manager or eligibility worker must be clearly documented in the client's case record via the Participant Contact Record (PACR) screen.

COMPONENT MONITORING

The case managers and job readiness trainers are responsible for monitoring participants' attendance and progress in assigned work activities and taking timely actions to complete and close components. JAWS system edits help case managers and job readiness trainers in performing these monitoring functions.

Non-Paid Work Activities

The case manager and/or job readiness trainer are responsible for:

1. Explaining the goal of the TANF Work Program and the purpose of each placement to the participant and component provider.

2. Explaining attendance reporting requirements to the participant and component provider.

3. Providing copies of the appropriate attendance reporting form(s) to the participant and/or component provider in advance of the reporting period. The following attendance forms may be used:

   MDHS-EA-356, TWP Participant Attendance Report
   MDHS-EA-356A, Work Program Attendance Report
   MDHS-EA-356B, TWP Sign-In Sheet
   MDHS-EA-357A, TANF TWP Declaration of Attendance and Transportation

3. Contacting the participant and/or component provider if the attendance form is not returned on time or is returned incomplete.

4. Recording, in JAWS, the participation data reported by the participant or component provider, by close of business each Tuesday, for the previous week, i.e., scheduled hours, actual hours, hours absent, along with the correct absent code. NOTE: Attendance reported by the participant must be validated (signed off on) by the component provider prior to entering the data in JAWS.

   NOTE: State Office will allow flexibility in enforcing the weekly stipulation on entering attendance. The case manager must use good judgment when tracking a participant's progress and scheduling a conciliation. The case manager and component provider will work out a schedule for submitting attendance. If the participant and/or component provider are required to submit attendance data on a weekly basis and the participant or component provider fails to provide attendance reports timely, the case manager will schedule a conciliation. Refer to Chapter 9, Monitoring Attendance, for a detail listing of the reasons why attendance must be entered timely.

   The following information will be used as guidelines for entering attendance into JAWS.

   - The case manager or job readiness trainer is responsible for monitoring and tracking participants attending job readiness/job search. Attendance for this activity will be entered on a weekly basis.

- The case manager will monitor participants assigned to AWEP, community service, vocational education and other educational and training programs. The provider and/or the participant will be required to submit weekly attendance reports each Monday for the previous week or as required by the case manager and semester grades, if applicable.

5. Completing the month end "look back" of participation data to determine whether reporting any excused hours will ensure the participant meets his/her monthly participation requirements. If so, the **minimum** number of excused hours needed to meet participation will be entered in the EX HRS COUNTED field prior to the calculation of the monthly participation rate.

The **component provider** is responsible for:

1. Maintaining and validating daily participant sign-in sheets documenting each participant's arrival and departure times, if required.

2. Compiling weekly participant attendance report forms using the daily sign-in sheets, if required. This report will document the actual participation hours, the hours scheduled but missed due to a holiday, excused or unexcused absences.

3. Submitting participant attendance reports each Monday for the previous week, or as requested by the case manager.

The **participant** is responsible for:

1. Actively participating in assigned work program activities to gain skills and/or knowledge needed to become more employable.

2. Attending the scheduled hours to make progress and achieve a satisfactory participation rating.

3. Completing MDHS-EA-356, TWP Participant Attendance Report, and/or other required verification to document attendance data.

4. Securing appropriate signatures, e.g., class/training instructor, supervisor, etc., on the MDHS-EA-356 each week to validate the attendance data reported by the participant.

5. Submitting a completed and validated MDHS-EA-356 form to the case manager each Monday for the previous week, if required.

6. Submitting enrollment documentation, class schedule, semester, midterm and/or final grades, report cards, financial aid verification, along with any other documentation requested (if attending an educational/training component), as required.

7. Submitting copies of a GED, diploma, license, or degree.

8. Completing and submitting MDHS-EA-395, Job Search Record, to document job seeking activities, if applicable.

JAWS provides an on-line screen for recording daily attendance data on a weekly basis for non-paid work activities. When the participant is assigned to a non-paid component, JAWS creates the first attendance report format, listing the participant's demographic and component information, including the hours the participant is scheduled to attend each day of the reporting period. When the actual hours are recorded on-line by the case manager using this screen, JAWS creates the attendance report screen for the next reporting period for the participant.

JAWS alerts the case manager if the attendance report information is not entered by the due date indicated for each report. Attendance reports are due no later than the Monday following the close of the report period. If the weekly attendance data is not entered in JAWS for the time period covered in the progress report by the close of business each Tuesday, JAWS sends an alert to the case manager. This alert cannot be eliminated until the attendance report information is entered in JAWS.

If the case manager receives an alert stating that attendance is overdue and the participant has been assigned to job readiness/job search activities, the case manager will contact the job readiness trainer to discuss the attendance problem before scheduling a conciliation appointment for the participant.

MDHS-EA-364, TANF Work Program Communication Form, will be used to contact the job readiness trainer and to provide written documentation of the communication between the case manager and the job readiness trainer. The job readiness trainer must return this form within five (5) days. If the form is not returned within five (5) days and the case manager contacted the job readiness trainer by phone to discuss the situation, the case manager will schedule a conciliation appointment for the participant if the job readiness trainer reports that the participant failed to report for class or attend satisfactorily. The case manager will not automatically schedule a

conciliation and terminate supportive services without first investigating the problem. To do so would be unfair to the participant if the delay in entering this information was the fault of the job readiness trainer.

Paid Work Activities

An individual's participation in a paid work activity will be monitored periodically by the case manager. TANF Work Program (TWP) participants must provide verification of continued employment as requested, but not less than every six (6) months. Transitional (TRN) participants must provide verification of continued employment every three (3) months. The case manager will use the check stubs, for the time period requested, to verify continued employment, monitor participation, recalculate the projected attendance for a new projection period and take any other case action(s) deemed appropriate.

Attendance Reporting for Non-paid Work Activities

Attendance for active TWP participants assigned to non-paid work activities is monitored on a weekly basis. The component provider will be required to provide attendance documentation to verify each participant's daily attendance data each Monday for the previous week. JAWS will alert the case manager when attendance is due. Attendance reporting and monitoring are the joint responsibility of the case manager, job readiness trainer, the component provider and the participant. The component provider will provide daily supervision, monitor satisfactory participation and evaluate satisfactory progress.

Attendance Reporting for Paid Work Activities

Participation for active (TWP) and transitional (TRN) participants assigned to paid work activities (unsubsidized, subsidized, on-the-job training) will be projected forward according to the guidelines provided earlier in this chapter (refer to Projecting Attendance Forward for Paid Work Activities.)

The case manager is responsible for determining whether the weekly projected attendance hours are sufficient to meet the monthly federal participation requirements for the TWP participants. If not, the case manager will assign the individual to an additional work activity and ensure the individual's combined hours (projected and scheduled) are sufficient to meet the individual's monthly federal participation requirement. The case manager is also responsible for determining whether the weekly projected attendance hours are sufficient to meet the minimum monthly work requirements for individuals requesting TANF transitional supportive services.

Terminating or Changing Projected Attendance

Any time the State becomes aware of a change (ongoing or anticipated to be ongoing) in an individual's circumstances which requires recalculation of the family's TANF grant and SNAP benefits, the projected participation hours must be recalculated. The case manager is required to make a change anytime an individual's employment has been terminated, the work hours have been reduced or increased, or the individual has changed jobs. Changes may be reported by the individual at any time or at case review or through some other means. The case manager will verify the new information and take the appropriate case action, e.g., terminate or recalculate the projected participation, close the component, set up a conciliation, investigate a job quit or reduction in work hours, review the case for a voluntary quit violation, etc. Recalculation of work hours will be projected for a new six-month period.

When a job quit is discovered for a TWP participant, the case manager will terminate the projected attendance record effective for the last Saturday of the participation report month in which the job quit was discovered. The projected attendance record for a transitional care will be terminated effective for the last day of employment, if possible, but no later than the date of discovery. TANF supportive services (TWP and transitional) must be terminated immediately upon receipt of information that a participant is no longer employed.

The JAWS system will automatically generate a Request for Employment Verification (T024) notice on the eighteenth (18th) day in the last month of each projected time period for ongoing (TWP) cases. The T024 notice informs the individual that check stubs for the month requested must be provided no later than the tenth (10th) of the following month. When the T024 is generated, JAWS will also generate an alert to inform the case manager that the case must be reviewed and appropriate case action(s) taken, e.g., verification of continued employment must be provided, projected attendance must be recalculated, a new projection period must be entered, a conciliation appointment must be scheduled, supportive services must be terminated, etc. NOTE: Until this process is automated for transitional cases, the case manager will be responsible for sending a request for employment verification (similar to the T024) to transitional participants no later than the 18th day in the last month (third) of the projected time period.

Monitoring Attendance

Monitoring and tracking a participant through the JAWS system is crucial to the TANF Work Program. Attendance and wage information must be entered timely for the following reasons:

1. The **participation rate calculation program** runs at the end of the month for the previous month (i.e., January 31 for the month of December). Attendance for the previous calendar month must be entered in JAWS prior to the last work day in the current calendar month. Attendance entered after this date will not count in the participation rate calculation. JAWS monitors attendance for the TWP participants monthly. At the end of the month for the previous month (i.e., June 30 for May), JAWS will search for any participant who has not been satisfactorily participating (an average of 20 hours per week for a single custodial parent whose youngest child is under age six and an average of 30 hours per week if the youngest child is age six or older.) If attendance has not been entered, JAWS will assume that the TWP participant is not participating satisfactory and will not count the participant in the participation rate calculation (will count against the county.)

2. The TANF 24-month time limit counter will be activated when a TANF recipient is determined to be work eligible, i.e., the recipient does not meet a work program exemption and is referred to the TWP. Work eligible TANF recipients will be required to participate in allowable work activities as soon as possible after referral to the TANF Work Program. Assignment to an allowable work activity will stop the 24-month counter from being incremented. To ensure that the 24-month counter for each TANF recipient is incremented correctly the case manager must complete work activity assignments timely. The case manager will be responsible for monitoring attendance data and taking appropriate case actions timely, i.e., set up conciliations, close out component assignments, terminate supportive services, etc. Attendance data will be monitored weekly for non-paid work activities and every three or six months for paid work activities. Failure to enter attendance may cause the participant to lose TANF benefits and/or TANF supportive services.

3. **Supportive services** (child care and transportation) are authorized based on the work activity assignments and satisfactory attendance. Failure to monitor the participant's attendance and take appropriate case action(s) could result in overpayment of TANF supportive services.

4. **Scheduling a conciliation and determining good cause** relies on attendance maintained in the system and in the participant's case record.

When a participant is assigned to a component, the case manager and job readiness trainer should emphasize the importance of becoming self-sufficient and meeting attendance requirements for the component.

Monitoring Job Readiness/Job Search

All work activity assignments and attendance information entered in JAWS for job readiness/job search must be supported by written documentation. This documentation must be filed in the participant's electronic case record. The TWP Sign-in Sheet, MDHS-EA-356B, must be maintained to verify the participant's daily attendance in job readiness. The sign-in sheet must identify the date and list the time that the participant arrives and leaves class each day. The class instructor must review and sign each time sheet prior to compiling a MDHS-EA-356A, Work Program Attendance Report, for the reporting period. If the daily sign-in sheets and attendance reporting forms contain data for multiple persons, they will be filed in a central location that is accessible to appropriate staff.

Job leads for TWP placements will be developed by the job readiness trainer or employment coordinator. Participants will be required to maintain a daily log of all employer contacts using MDHS-EA-395, Job Search Record. Completed MDHS-EA-395 forms will be submitted to the job readiness trainer weekly, or as requested. The job readiness trainer will use this form to follow-up with employers to validate the participants' job search activities, prior to entering attendance data in JAWS, and to determine coaching/counseling needs of participants. Participants who refuse a bonafide job offer, without good cause, will be sanctioned accordingly.

Attendance Reporting for Employment

Verification of employment is the responsibility of the participant except when this information is already known to the agency (i.e., obtained from the eligibility worker, case manager or job readiness trainer). Verification of continued employment and work hours must be provided as requested, but not less than every six months for the TWP participants and every three (3) months for transitional participants. Periodic verification is needed to recalculate projected work hours, monitor satisfactory attendance and determine eligibility for supportive services (child care and transportation.) Documentation of employment may be mailed or sent electronically, faxed by the employer, or brought in by the participant.

Employment Verification

Sources for employment verification may include, but is not limited to:

- Check stubs;

- MDHS-EA-910, Request for Employment Verification; or

- The employer may provide wage and attendance data for specific payroll periods upon request.

Employment verification will be filed in the participant's electronic case record. If the employer submits wage and attendance forms containing data for multiple persons, each case record must be documented accordingly and the forms filed in a central location that is accessible to the monitors, or copies may be made and the names of other persons blocked out prior to filing in the electronic case records. If a participant submits check stubs, the case manager must copy the check stubs and return the original check stubs to the participant. The check stubs will be used to verify continued employment and work hours for case management.

If the individual has not reported his/her employment, the case manager will request this information from the individual. Written documentation of all communication between the case manager, job readiness trainer, TANF recipient and local county staff must be clearly documented in the individual's case record. Contacts with the participant to obtain documentation or monitor participation should never interfere with the individual's employment. The case manager and job readiness trainer should arrange meetings with the participant around the participant's work schedule.

The case manager and job readiness trainer will work closely to verify employment data. If the job readiness trainer has verification of the individual's employment, this information must be shared with the case manager so that the unsubsidized component can be added in JAWS timely and to prevent adverse case actions due to non-participation.

In instances where the employer was recruited for job placements of the TWP participants, the employer should be contacted on a regular basis. This will determine if there are any problems with the employee or if the employer feels MDHS needs to provide any additional assistance to the employer or the employee.

Individuals who are already employed at the time of referral to the TANF Work Program will meet with the case manager to discuss the TWP requirements, supportive services and adverse action policy and procedures. However, contacts with the participant should never interfere with the individual's employment. If the individual is unable to attend the orientation appointment, the case manager will reschedule the appointment.

If the participant finds employment (part-time or full-time) after referral to job readiness/job search, the job readiness trainer will forward copies of all employment verification to the case manager and instruct the participant to contact the case manager for a case review. Failure to record resources and wages may result in a case error involving overpayment of TANF and SNAP and erroneous supportive services payments.

Participants will continue to be eligible for the TWP and may receive supportive services (assistance with child care, transportation and work related expenses) as long as they receive TANF benefits. The case manager will continue to authorize transportation stipend payments (if needed) as long as the participant remains eligible. Once the TANF case closes because of earnings, the participant may be eligible for transitional supportive services (child care and transportation.) The case manager must follow the procedures outlined in the JAWS User Manual, Chapter 11, Section 3, to enter and maintain projected attendance records for all paid work activities.

Attendance Reporting for Other TWP Components

The case manager is responsible for receiving, monitoring and entering attendance data for individuals attending AWEP, community service, and all educational/training programs.

Verification of Attendance

Sources of attendance verification include:

- Attendance forms obtained from the component provider. Some program providers report attendance to the case manager by completion of a participant attendance report.

- Individual attendance forms (MDHS-EA-356, TWP Participant Attendance Report) completed by the participant **and** signed by the provider.

- Midterm, final and/or semester grades and report cards.

- Verification of attendance for participants assigned to job readiness/job search, AWEP, Community Service and educational/training programs coordinated by the Program Support Unit will be provided by the component provider. The participant cannot use form MDHS-EA-357A, TWP Declaration of Attendance.

- The case manager will track vocational education leading to an advanced degree in JAWS under job skills training directly related to employment, a “non-core” activity. The student will provide enrollment verification, maintain and submit MDHS-EA-356 weekly and provide copies of semester grades. Refer to Chapter 9, TANF Work Activities Defined, for additional information.

- Individuals participating in self-initiated educational or training programs will be required to maintain and submit form MDHS-EA-356, TWP Participant Attendance Report, each Monday for the previous week.

- The case manager will obtain enrollment and attendance verification from the school (i.e., principle or counselor) for high school students. Also, the student will provide copies of his/her progress reports and grades.

The following guidelines will be used to monitor attendance and enter data in JAWS for individuals assigned to these activities:

- **“Hours Worked”** is defined as actual attendance hours in a TWP work activity. When the participant is a high school student and will be returning to school, the case manager will enter attendance during spring break, summer months and holidays (Thanksgiving and Christmas) as actual hours. NOTE: Participants are not eligible for a transportation stipend payment for weeks they do not actually attend their component assignment. The case manager must determine whether the participant is ineligible for a stipend or eligible for a partial payment for the month based on the participant’s attendance documentation.

- **“Hours Absent”** is defined as assigned hours not attended by the individual due to personal problems (i.e., illness, family emergency, etc.). If the individual does not attend his/her work activity, the case manager will enter the hours absent in the “Hours Absent” field and enter “**E**-Excused,” “**U**-Unexcused” or “**H**-Holiday” in the “Absent Code” field.

  NOTE: The case manager will review the attendance data for all TWP cases, prior to the participation rate report being generated for the report month, and enter the minimum number of excused hours to be included in the participation rate calculation in the EX HRS COUNTED field, according to policy. Reporting excused hours is limited to 80 hours within any 12-month period and up to 16 hours within any participation report month. Refer to Chapter 9, Excused Absences for Non-Paid Work Activities, for additional information.

Attendance verification will be filed in the participant's case record. If the component provider submits attendance forms containing attendance data for multiple persons, the forms must be filed in a central location that is accessible to the monitors and each case record documented accordingly, or copies may be made and the names of other participants blocked out prior to filing in electronic case records.

Monitoring Component Closure

The case manager is responsible for closing components timely. JAWS provides the case manager with the ability to review component assignments on-line and to add, change or close components.

JAWS tracks scheduled and mandated component end dates and alerts the case manager when the end date is nearing so that proper action may be taken.

1. If the TANF case and the TWP activity closes while the participant is assigned to a non-paid work activity, the case manager will not provide further services to this individual.

2. When a conciliation, exemption or fair hearing is requested, the case manager will close the participant's component/work activity in JAWS, if deemed necessary.

3. When a participant is referred to the case manager for placement in another TWP work activity, the case manager will close any assigned activities as deemed necessary.

4. When a TANF case closure (due to a sanction, earned income, youngest child turns 18, client's request, etc.) or exemption request is received from MAVERICS, JAWS will process the closure at the end of the month and close all open TANF Work Program components and projected attendance records effective for the last day of the month. JAWS will project the attendance through the end of the participation report month. (When a TANF case closure record is received from MAVERICS and processed by JAWS, the TANF Program Status code field on the ICLI screen will display "CL" for case closure.)

5. Prior to closing a paid work activity via the MPAC screen, the case manager must close the projected attendance record effective for any Saturday prior to the system generated end date displaying on the MPRA screen. The TWP participation will be projected through the Saturday entered on the MPRA screen. NOTE: If the Saturday entered is the last Saturday in the participation report month, JAWS will project the attendance through the end of the participation report month.

Monitoring Employment after a TANF Case Closure

If the participant is in a paid work activity at the time of TANF case closure and transitional supportive services are requested and approved, the case manager will continue to track and monitor the participant, and re-verify continued employment and work hours every three (3) months. Ongoing employment must be re-verified using current check stubs. New employment may be verified using form MDHS-EA-910, Request for Employment Verification. If new employment occurs during the transitional period, the case manager must verify that the time lapse between the employment end date and the employment start date does not exceed 30 days. The documentation used to re-verify the individual's current employment status and work hours quarterly will be used to determine ongoing eligibility for transitional services and to calculate the weekly participation to be projected for the next three (3) month projection period. The documentation used to re-verify employment each quarter must be filed in the individual's electronic case record.

Once transitional services end, the individual is under no obligation to routinely report information to the TANF Work Program. Refer to Chapter 10, Supportive Services, for information regarding monitoring and verification of continued employment for receipt of TANF transitional services.

OVERVIEW

This material discusses the requirements for satisfactory participation in a TANF Work Program activity.

PARTICIPATION IN THE TANF WORK PROGRAM

All adult TANF recipients who are determined work eligible are required to participate in the TANF Work Program in order to continue receiving TANF benefits. Federal law limits the receipt of TANF benefits to a lifetime maximum of 60 months for any adult. State law limits the receipt of TANF to a maximum of 24 months for work eligible adults who fail to participate, without good cause, in allowable TANF Work Program activities. The TANF 24-month time limit counter will not increment when a TWP participant is assigned to an allowable work activity. The case manager is responsible for and will be held accountable for TANF timeliness standards.

Full Engagement

The focus of case management is to identify employment barriers, place participants in allowable TWP work activities and other program activities designed to deal with the core difficulties participants experience in finding and retaining employment. TANF Work Program participants vary widely in their capabilities, skills and disabilities. Federal regulations allow for the provision of full engagement, i.e., up to 8 hours per day, 40 hours per week. This allows states the flexibility to design programs, structure case management services and work program activities in ways that afford all participants an opportunity to participate in core work activities and be engaged in a variety of other activities deemed necessary to overcome unique barriers in order to become self-sufficient. This concept allows case management to couple work activities to ensure participants can meet their monthly federal participation requirements while engaging in a variety of work activities deemed necessary to become self-sufficient.

Participants must be assessed individually and employment plans individualized to include requirements and services designed to move the family toward self-sufficiency and independence. Each participant's Employability Development Plan (EDP) will be individualized to address the core difficulties and employment barriers identified during the assessment process.

Full engagement should be considered for all participants who:

- do not have a high school diploma/GED;
- have little or no employment skills/work history; and/or
- have less than 20 months remaining on their TANF 60-month time limit counter.

Participants meeting any of the criteria shown above will be required to be fully engaged to the extent possible based on their capabilities, abilities and needs, and the availability of viable work activities and resources. Full engagement will allow participants who are experiencing difficulties with other employment barriers, e.g., substance abuse, learning disabilities, undiagnosed and/or untreated mental illnesses, domestic violence issues, homelessness, or physical disabilities needing treatment an opportunity to reach their full potential by gaining the greatest level of self-sufficiency possible within the time constraints imposed by TANF regulations.

Work activity assignments may include a combination of core and noncore activities that will allow the participant the opportunity to meet participation and other non-countable activities deemed necessary and appropriate. Participants who fail to meet the requirements of their EDP will be subject to adverse action policy and procedures and the appropriate TWP timed penalty will be applied, if good cause cannot be substantiated. Refer to Volume III, Chapter 9, Satisfactory Participation in the TANF Work Program, for additional and more detailed information.

Satisfactory Participation for Participation Rate Calculation

In any reporting period, the minimum number of hours that an individual must participate to count in the State's participation rate calculation is 20 hours per week for a single custodial parent or caretaker caring for a child under age six (6), 30 hours per week for a single custodial parent whose youngest child is age six (6) or older and a total of at least 55 hours per week for a two-parent household. If a two-parent family is receiving federally-funded child care assistance and one adult in the family is not disabled (JB) or is not a parent caring for a severely disabled child (JC), i.e., both parents are able bodied adults, then the parents must participate a total of at least 55 hours per week. The parents may share in the work activities, e.g., one parent may participate for a total of 35 hours and the second parent 20 hours. One parent should not be assigned more than 40 hours per week. If one parent meets a work exemption (JK or JJ), the required work hours for the other parent are reduced to 35 hours per week.

JAWS calculates the percentage of participation for each adult participating in a non-paid work activity by the actual hours of participation, as reported by the component provider and entered in JAWS by the case manager. JAWS calculates the percentage of participation for each adult participating in a paid work activity by the attendance hours projected by the case manager.

NOTE: Federally-funded child care is provided by the State; therefore, if an adult in a two-parent family is not disabled or caring for a disabled child, the parents must participate for a total of at least 55 hours per week. However, if it is substantiated that suitable child care is not available, the required work hours may be reduced to 35 hours per week and only one parent will be required to participate. (Child care should not be a barrier for individuals to participate in the TANF Work Program. If child care is needed, parents do not have an option for receiving federally-funded child care assistance if suitable child care arrangements can be made.)

Special Rule for Teen Heads of Households

A teen head of household (under age 20) will count toward meeting the TWP participation rate if the recipient maintains satisfactory attendance in secondary school or the equivalent until the teen graduates, earns a GED or participates in education or training directly related to employment for the minimum number of hours required.

Satisfactory Participation

Work eligible individuals who do not meet a work exemption will be referred to the TANF Work Program and will be required to cooperate with all program requirements including full engagement, if deemed necessary. Work activity providers must provide daily supervision and assist case managers in defining satisfactory progress for all TWP participants assigned to their worksite.

Satisfactory Participation in a TWP Component/Work Activity

Participant will be required to participate satisfactorily in all work activities defined in their individualized EDP and cooperate with all other program requirements. This includes, but is not limited to, attending all component activities, submitting all required forms, and making satisfactory progress as determined by the component provider and case manager. Each participant will meet certain attendance requirements in order to be considered in compliance with the TANF Work Program. Each work activity/component has a set level of activity, attendance and compliance. **Failure to attend the required number of hours without good cause will result in a sanction.** The case manager will use good judgment when determining

good cause. Excessive excused absences from component activities are not acceptable.

Community Service and AWEP - The **maximum** number of hours in any month that a TWP participant can be required to participate in Alternative Work Experience Program (AWEP) or community service activities will be based on the family's FLSA calculation. Refer to Chapter 3, FLSA Calculation, for further information. The worksite provider and the case manager will define satisfactory participation. Satisfactory progress will be measured by the participant's worksite supervisor and problems reported to the case manager. The worksite sponsor must also provide daily supervision.

Employment - The hours that an individual is scheduled to work will be decided by the individual's employer.

Unsubsidized Employment - An individual working 35 or more hours per week at or above the federal minimum wage is considered to be employed full-time; however, under certain circumstances a 32-hour job placement may be counted as full-time employment. Refer to Chapter 9, Full-Time Employment, for additional information. An individual working less than 35 hours per week is considered to be employed part-time.

An individual working part-time (less than 35 hours per week) at the time of referral to the case manager or who finds a job prior to placement in job readiness/job search, will be required to participate in an additional work activity, if necessary, to meet the weekly federal participation requirement. The case manager will encourage this individual to explore additional work hours and promotional opportunities with the employer and seek other employment offering higher wages or more work hours. Whenever possible, the individual will be placed in job readiness/job search activities.

An individual working less than 25 hours per week will be required to participate in another allowable work activity to ensure sufficient hours are available to meet the individual's monthly federal participation requirement. As slots become open, the individual will be placed in job readiness/job search activities. A participant who is employed part-time will continue working while also attending the job readiness/job search activity. In this case, the participant will not be required to attend job readiness/job search for eight (8) hours per day.

Educational and Training Programs - Attendance rules and guidelines for colleges and training institutions vary. The case manager will develop a method of tracking each participant (i.e., enrollment forms, attendance sheets signed by instructor(s), grades, etc.)

Job Readiness/Job Search - The case manager and/or job readiness trainer will conduct job readiness and job search activities concurrently. Participants will be required to participate eight (8) hours per day, forty hours per week.

The case manager will be responsible for ensuring that each TWP participant is scheduled for sufficient hours each week to meet his/her monthly federal participation requirement. It may be necessary to assign the participant to more than one countable activity (couple two components.) MDHS will provide TANF supportive services to each participant assigned to an approved TANF work activity as long as the individual is participating "satisfactorily" and the supportive services are needed.

Unsatisfactory Participation

Unsatisfactory participation includes, but is not limited to the following:

1. Failure to comply with all work activity assignments in accordance with the individualized Employability Development Plan (EDP).

2. Disruptive behavior (fighting, arguing, inattentiveness, etc.) at the worksite;

3. Decreasing the hours assigned for the work activity without permission;

4. Unexcused absences (excessive excused absences from component activities is not acceptable); and

5. Intentional inappropriate behavior to discourage potential employment. If the

participant is not participating satisfactorily after placement in a work activity, the case manager will initiate the conciliation process and apply the appropriate timed penalty, if good cause cannot be substantiated.

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OVERVIEW

This material provides a general overview of TANF support services that are available to TANF recipients who are satisfactorily participating in the TANF Work Program (TWP) and TANF transitional services that are available to TWP participants who transition off TANF due to earned income or loss of earned income disregards. It defines each supportive service and describes the minimum requirements and limitations for receiving each service. It also describes supportive services payment processes.

TANF TWP and TRN (transitional) supportive services are approved on a case-by-case basis. TWP participants are not entitled to these services. Receipt is based on the family's need, eligibility criteria and satisfactory participation in the TANF Work Program. Refer to Chapter 10, Component Monitoring and Satisfactory Participation in TWP, for additional information.

In order for a TANF recipient to receive TANF TWP supportive services and TANF transitional services, the recipient must be referred to the TANF Work Program. When an exempt individual whose JOBS Program Status code is JJ (caring for a child under 12 months) or JV (domestic violence) becomes employed, the worker will complete and send MAVERICS Other Notice A901 to schedule a face-to-face appointment. During this appointment, the worker will inform the individual about the availability of and requirements for receiving TANF TWP and transitional supportive services, and the advantages of being referred to the TANF Work Program as an exempt volunteer (EV) prior to TANF case closure if transitional supportive services will be needed. A TANF recipient who is not referred to the TANF Work Program prior to TANF case closure is not eligible for TANF transitional services. Exempt volunteers are not excluded from work program penalties and are therefore subject to adverse action policy and procedures. Individuals who wish to be referred to the TANF Work Program must complete a TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer, MDHS-EA-359, prior to referral to JAWS. Refer to Chapter 11, Conciliation, for additional information.

TANF SUPPORTIVE SERVICES

TANF supportive services are available to current TWP participants and TWP participants who lose TANF eligibility due to earned income or loss of earned income disregard. Approval for each TANF supportive service is based on the family's need for the service, and the specific eligibility criteria for each supportive service. TANF recipients and applicants are not eligible for TANF supportive services during the TANF Work Program intake process. The appropriate application for TANF transitional services (TCC or TT) must be received within 30 days after

the TANF case closes due to earned income.

TANF (TWP) Supportive Services

The following TANF supportive services are available to ongoing (TWP) participants who would not be able to participate in the program or remain employed without them:

1. TANF Child Care..... full-time or before/after school certificate

2. Work Stipend .....bus pass or $300 stipend (monthly)

3. Participation Stipend*.....$5 per day, $25 maximum per week (*This supportive service is available through May 31, 2012, and will be obsolete effective June 1, 2012)

4. Work-Related Expense Items/Services.....up to $500 per FFY

The Mississippi Department of Human Services (MDHS), Division of Economic Assistance, will assist an eligible TWP participant with child care expenses, a monthly work (transportation) stipend, and help with work-related expense items/services provided the services are needed and all eligibility criteria are met. The participant must be assigned to an approved TANF work activity prior to approval for any TANF supportive service. The participant is responsible for making sure arrangements for needed supportive services are in place to meet his/her daily needs to allow satisfactory participation and compliance with his/her Employability Development Plan (EDP) and work program requirements. The case manager should be easily accessible to provide assistance as needed. A participant may have family members, friends, or other service providers who provide assistance with child care, transportation, and other services.

The county director or a designee is responsible for coordinating all TANF supportive services for TWP participants. The county director or a designee will explore the supportive services the participant can arrange for him/herself and the services MDHS will need to provide. Services may be provided by agencies that have contracts with MDHS to provide these services or by another community resource. Participants and/or service providers may be reimbursed utilizing TANF funds. Some TANF supportive services have program limitations, and some are provided at no cost to the TANF Work Program and/or participant.

Participants and providers must be informed that if they receive an overpayment for supportive services, they are responsible for repayment to MDHS. The participant and the provider must

also be informed that if false information results in an overpayment, they may be charged with suspected fraud. Refer to Chapter 10, Improper Payments, for additional information.

Transitional (TRN) Supportive Services

The TANF transitional services available to a former TWP participant who transitioned off TANF due to earned income or loss of an earned income disregard, and who meet certain eligibility criteria are listed below. Only one adult in a two parent family may receive TANF transitional child care (TCC) and work (transportation) assistance. The parents will determine which adult receives each transitional service. One parent may receive transitional work (transportation) stipends and the other parent may receive TCC, or one parent may receive both services. However, the parent working the most hours with earnings at or above the federal minimum wage should be encouraged to apply. Once the parents make the decision, there cannot be a change. The case manager will document the decision in the case record and have the parent(s) complete the appropriate application(s).

1. Transitional Case Management..... up to 24 months

2. Transitional Child Care (TCC) .....up to 24 consecutive months (per eligibility period)

3. Transitional Work (Transportation) Assistance (TT)....up to 18 months (lifetime maximum)

NOTE: Compliance with Child Support Enforcement is an eligibility requirement for Transitional Child Care (TCC), but is not a requirement for transitional work (transportation) assistance. The Division of Early Childhood Care and Development is responsible for verifying compliance with child support enforcement, not the DEA worker. If noncompliance is determined by DECCD, DECCD will electronically notify (email) the DEA worker that TCC services should be terminated. Upon receipt of notification from DECCD, the DEA worker will process a TCC termination (CR02).

A TWP participant who loses TANF eligibility due to earned income or loss of an earned income disregard, and meets specific eligibility criteria may be eligible for the TANF transitional services listed above. Transitional work (transportation) stipends (TT) are limited to a lifetime maximum of 18 months per family. TCC does not have a lifetime maximum. A family that regains eligibility for TANF benefits and subsequently becomes ineligible for TANF due to earned income may be eligible for a new TCC 24-month eligibility period if all other necessary conditions of eligibility are met. The worker will send the following MAVERICS notices at TANF case closure:

- A106-TANF Time Limit Counter Information;
- A807-Appointment for Transitional Services;
- A802-TANF Transitional Child Care; and
- A803-TANF Transitional Work (Transportation) Assistance.

An application is required to TCC and TT assistance. The appropriate application must be received within 30 days after the TANF case closes. The case manager will be responsible for approving or denying all applications for TANF transitional services, assisting with the arrangement of transitional services, referring individuals to other resource providers (i.e., food, clothing, housing, health, and other services, et.) and providing counseling to ensure no problems are present to jeopardize the individual's continued employment.

Eligibility During Maternity and Post-Partum (Medical) Leave

An individual who is approved for TANF transitional services at the time of placement on maternity and/or post-partum leave without pay, may not lose eligibility for the approved service(s) if:

- the individual's employment is not terminated by the employer;
- the individual returns to the same job after the medical leave period ends or within the time limit specified by the employer;
- the individual continues to work the required minimum weekly hours earning at or above the federal minimum wage; and
- the individual meets all other eligibility criteria.

The case manager will contact (telephone, email, or regular mail) the employer to obtain the anticipated medical leave dates and the employment status during the leave period or send MAVERICS Other Notice (A901) requesting the participant to provide the appropriate documentation within ten days. The A901 will include a statement to inform the individual that failure to provide the requested documentation may result in termination of TANF transitional services.

If the documentation verifies that the individual's employment has not been terminated and the employee is expected to return to work, the case manager will not close the UNS/TRN component assignment. Regularly scheduled work hours will continue to be entered as "E-excused" absence hours during the medical leave period. TANF work (transportation) stipend payments will not be authorized during the leave period. Refer to Work (Transportation)

Stipend, Full and Partial Payments, for additional information. If employer documentation verifies that employment has been terminated, the USN/TRN component and all TANF supportive services will be terminated.

If employment is terminated, eligibility for TANF transitional services may continue if the individual starts a new job within 30 days, i.e., the actual start date of the new job cannot be greater than 30 days from the actual end date of the previous job, and all other eligibility criteria are met.

The case manager will inform the individual that supportive services will not be authorized during the leave period.

Tracking Transitional Supportive Services on a Closed TANF Case

When a TANF case closure record is received from MAVERICS, JAWS will automatically close the participant's TWP component for the last day of the last benefit month. To track TANF transitional services (TCC and transportation stipends) on a TANF case that has a TANF Program Status of closed, the case manager will:

1. Send MAVERICS Notice A807, Appointment for TANF Transitional Services, to notify the individual of the appointment date and time to meet with the case manager to discuss the availability of and eligibility criteria for receiving TANF transitional services. The individual will be given the opportunity to complete the appropriate applications for TANF transitional services. The case manager will also inform the individual about the reporting requirements and supporting documentation that must be submitted periodically or as requested by the case manager;

2. Register the appropriate transitional program in MAVERICS (CC or TT);

3. Verify that JAWS received the correct TANF case closure date from MAVERICS. If the TANF case closure date displayed on the Maintain Participant Status (MPAS) screen is not correct, contact the MAVERICS/JAWS Help Desk to correct the date prior to adding the UNS/TRN component;

4. Add the UNS/TRN component on the Add Participant Assignment (MPWA) screen in JAWS;

JAWS will not receive the TANF Program closure record from MAVERICS until the last day of the month in which the TANF case is closed. However, to ensure there is not a disruption in child care and/or transportation services, JAWS will allow the case manager to add the UNS/TRN component prior to the TANF Program Status showing closed on the ICLI screen. Refer to Chapter 10, Transitional Work (Transportation) Stipend and Transitional Child Care, for additional information;

5. Approve or deny applications for TANF transitional services;

6. Enter the ACTUAL START DATE for the UNS/TRN component on the Maintain Participant Component (MPAC) screen;

7. Determine the work hours to be projected (up to three months) using the check stubs received during the last month of TANF eligibility;

8. Enter and maintain attendance on the ATTENDANCE POP-UP WINDOW (ARPW) from the COMPONENT ATTENDANCE REPORT SELECTION (SCAR) screen;

9. Add a transportation record for transitional work assistance on the Maintain Transportation (MTRE) screen, if applicable, and authorize payments according to policy (attendance data must be current in JAWS prior to authorizing the monthly TT stipend);

10. Add a child care referral for Transitional Child Care on the Add Child Care Referral (ACRR) screen, if applicable;

11. Notify the individual no later than the 18th day in the last month of each three-month projection time period that check stubs for the month indicated must be provided no later than the 10th day of the following to verify continued employment and work hours. This notice will inform the individual that failure to submit check stubs timely may cause TANF transitional services to be terminated.

Employment Coordinator's Responsibility

Job placement and job retention are critical to the success of the TANF Work Program. In addition to case management services identified above, the employment coordinator will perform the following:

1. Set-up and maintain a review system to stay abreast of:

- the status of employed individuals
- work hours (increase, decrease, excessive absences, etc.) and
- Level of self-sufficiency gained by individuals assigned to job readiness/job search, AWEP, community service, educational activities, etc.

2. Conduct on-site visits with the employer once a month to determine how the employee is performing (beginning the initial month of employment). If possible, visit with the employee while on-site. If this is not possible, telephone the employee at home and/or arrange a visit on the employee's day off;

3. Maintain a tracking log of all contacts made with employers, employees and case management staff. The log should reflect the date of the visit or contact, along with comments pertaining to the contact;

4. Address the number of work hours, if a reduction in work hours occurs, to determine the reason and notify the case manager accordingly so that appropriate action can be taken, if necessary.

5. Follow-up immediately with the employer, and be available for counseling, upon notification of problems or concerns expressed by the employer or the employee; and

6. Keep case management informed of any incidents of noncompliance and problems that may affect job placement, job retention or transitional services.

PARTICIPATION STIPEND (Active Cases Only)

The participation stipend is provided to offset daily expenses when a TANF Work Program (TWP) participant is satisfactorily participating in a non-paid allowable TWP work activity. Satisfactory participation is determined by the case manager based on weekly hours scheduled and weekly attendance records. Refer to Chapter 9, Satisfactory Participation in the TANF Work Program, for the definition of satisfactory participation. A participant involved in orientation and assessment or assigned solely to a paid work activity is not eligible for participation stipend reimbursements. Paid work activities are unsubsidized employment (UNS/FUL, UNS/PT1, UNS/PT2, etc.), subsidized employment (SUB/WKS) and on-the-job training (OJT/OJT). The participation stipend is not available as a TANF transitional supportive service.

The participation stipend is considered a reimbursement; therefore, it does not count as unearned income in the SNAP budget.

Arrangement of Services

TANF Work Program participants are responsible for making arrangements for meeting their daily needs during the period of time they are scheduled to attend TWP components or work activities. However, case managers should be easily accessible to provide assistance, as needed.

Minimum Requirements

The following **minimum** requirements must be met before the participation stipend may be authorized for reimbursement:

1. The participant must satisfactorily participate in an approved non-paid work activity documented on the Employability Development Plan (EDP).

NOTE: Satisfactory participation will be determined on a weekly basis. The case manager will consider the weekly hours scheduled vs. the weekly hours attended and excused vs. unexcused absences. A participant who fails to participate satisfactorily, without good cause, will not be eligible for the participation stipend for that week.

2. Documentation of the participant's attendance must confirm satisfactory participation and progression in order to receive participation stipend reimbursement payments. Acceptable forms of attendance verification include, but are not limited to the following:

- attendance reports completed by the provider;

- MDHS-EA-356, TWP Participant Attendance Report, which is maintained by the participant on a daily basis and present to the instructor/supervisor for validation and signature at the conclusion of the last weekly scheduled class/session for each activity; and
- school progress reports/grades.

Reimbursements

The participant is reimbursed $5 per day (maximum of $25 per week) for days she actually reports to the work site, and attendance documentation verifies satisfactory participation. The case manager will authorize reimbursements on a daily basis in JAWS when entering component attendance data on the ARPW screen. Reimbursements are processed daily and issued to the participant's MS Debit MasterCard account and are available to the participant by 10:00 a.m. the following day.

EXAMPLE 1: A participant who reports to the work site five days during the week may be eligible for a maximum of $25 for that week.

EXAMPLE 2: A participant who reports to the work site three days during the week and has two excused absent days may be eligible for $15 for that week.

EXAMPLE 3: A participant who reports to the work site seven days during the week may be eligible for $25 for that week.

EXAMPLE 4: A participant who reports to the work site two days and has three unexcused absent days may not be eligible for that week. Eligibility will be based on the case manager's determination of good cause for unsatisfactory attendance.

The JAWS system will not allow the case manager to authorize reimbursement for days the participant does not actually report to the work site (i.e., excused, unexcused, holidays, etc.) If a participant is assigned to more than one non-paid component, JAWS will not allow the case manager to authorize reimbursement for the same calendar day in both components. JAWS will not allow updates to the SCAR screen (ARPW pop-up window) to authorize a participation stipend after the screen has been successfully processed. The participation stipend must be authorized at the same time weekly attendance is entered, if eligible. If the participant is eligible and the case manager fails to authorize the participation stipend timely, an improper payment record will be established in JAWS to issue an underpayment. Participants who receive a participation stipend overpayment are responsible for repayment. Once it is determined that a

participant received an overpayment, the case manager will establish an overpayment record in JAWS. Refer to Chapter 10, Improper Payments, for additional information.

WORK-RELATED EXPENSES (Active Cases Only)

A work-related expense is defined as an item or service that a TWP participant is required to obtain in order to get and/or keep a job. The item or service must be required by law or by the employer and be an out-of-pocket expense to the participant. Each TWP participant is limited to a maximum of $500 per federal fiscal year (October - September.) The State may assist TANF recipients, who are participating satisfactorily in allowable TANF Work Program work activities, with the following items and/or services if needed for employment opportunities:

1. Fees for ID cards, worker permits, long form birth certificates, marriage licenses (for name change only), work related safety equipment, required uniforms, clothing, CNA testing fees, books/manuals required for on-the-job training and required tools.

   EXCEPTION: The payment of long form birth certificates, marriage records, ID cards and minimal clothing for job interviews do not require an immediate attachment to a job placement. These expense items can be paid once the participant has enrolled and is participating satisfactorily in the job readiness/job search work activity. Request for out-of-state birth certificates and marriage records must be coordinated through the Work Programs Unit.

2. Fees for GED Tests and Retests

   MDHS will provide payment for GED testing and retesting for those TWP participants assigned to an education component when the component is a **countable** work activity. There are five (5) parts to the GED test. If the participant fails any part of the test, the state will pay retesting fees.

NOTE: Participants under the age of 20 must have an open EDU component. Participants over the age of 20 must be assigned to another allowable activity as well as EDU.

3. Other reasonable items are subject to approval by the TANF Work Programs Unit. A written request, along with a copy of the Request for Work-Related Expense Item(s), MDHS-EA-367A, must be submitted to the Work Programs Unit for approval prior to providing a Work Related Expense Referral, Notice T025/MDHS-EA-365D, to the participant.

The combined cost for work-related expenses and fees cannot exceed the maximum limit of $500 per federal fiscal year (October through September). Participants are not entitled to these funds, only essential items or items deemed necessary for immediate employment or advancement

should be purchased. Work related expenditures must be justified and thoroughly documented in the case record. TANF funds cannot be used for medical services (i.e., physical exams, drug screening, etc.)

Provider Agreements

The regional director and case management staff will be responsible for contacting entities in their area to provide work-related expense items/services and execute a Work-Related Expense Payment Agreement, MDHS-EA-367. Agreements involving other state agencies will be executed by the Work Programs Unit staff. Payments for work-related expenses will be made to the provider. Refer to the JAWS User Manual, Chapter 13, Section 3, Work Related Expenses, for the system procedures to add a work related referral and expense record.

Minimum Requirements

The following minimum requirements must be met before a work-related expense item/service can be approved and paid:

1. The participant's TANF Program Status (ICLI screen) and the TWP work activity (SPAC screen) must be **open** in order for the case manager to create and update a referral (T025), add an expense record and authorize the expense record to generate payment to the provider;

2. The work program participant must make a request for an allowable work-related expense item/service;

3. The case manager will initiate a Request for Work-Related Expense Item(s), MDHS-EA367A, form to verify that the expense item/service is an out-of-pocket expense required by the employer;

4. Upon receipt of a completed MDHS-EA-367A, the case manager will provide the participant with a Work Related Expense Referral, Notice T025/MDHS-EA-365D, to the appropriate provider. The case manager will clearly notate the items to be purchased, along with any limitations, e.g., three sets of clothing/uniforms (khaki pants, navy shirt), one belt (no studs or large buckle, one pair of shoes (steel toed boots, black/white athletic shoes, etc.) The component must be open to generate a T025;

5. The participant must deliver the Work Related Expense Referral, T025, (valid for 30 days) notice to the provider and receive the requested item(s)/service;

6.

6. The provider must verify (complete Section B) and return the referral notice to the case manager. A cash register receipt, signed by the merchant, may be used to verify a purchase and authorize payment, if the case manager authorized the purchase;

7. Through JAWS, the case manager will update the referral, add an expense record and authorize payment to the provider of the item(s)/service (component must be open). Timely payments must be issued to providers; therefore, case managers will complete the steps to authorize payment the same day/week the completed referral/receipt is received by the county; and

8. JAWS will automatically generate a check to the provider the following Friday after the payment is authorized.

JAWS will support the case manager in the determination of the amount, control and issuance of payments for work-related expenses. Conditions for authorization and payment of a work-related expense will be dependent upon the participant's attendance, satisfactory progress in the component, and/or the return of the referral notice by the provider who rendered the service. Refer to the JAWS User Manual, Chapter 13, for additional information.

Processing Provider Payments After Component Closure

Once an authorized purchase is made, MDHS is responsible for payment to the merchant/provider. JAWS will not allow the case manager to update the referral and add an expense record if the component is closed. If the component is closed at the time the completed Work Related Expense Referral, Notice T025, or cash register receipt is returned, the case manager will issue payment to the merchant/provider via an underpayment. Refer to the Payment Process, Improper Payments, for the policy and procedures for processing improper payments.

WORK (TRANSPORTATION) STIPEND

The work stipend is provided to offset the cost of a TANF Work Program (TWP) participant's transportation expenses so that the individual may participate in TWP activities. The transitional work stipend is provided to assist a family that loses TANF eligibility due to employment and meets certain eligibility criteria. Successful use of this supportive service requires open communication and cooperation between case management, county and regional directors, and the participants/ families served. The case manager will make every effort to offer the most appropriate type of service available, as deemed necessary. Participants receiving work stipend payments must accept personal responsibility and work toward making their own transportation arrangements to reduce their dependence on agency assistance. Only **one** type of service (stipend or bus pass) will be approved and authorized for the participant each month.

Service Types

There are two types of services that may be offered to ongoing (TWP) and transitional (TRN) participants:

1. Bus Pass
2. Work Stipend

County directors will ensure case managers have the tools needed to make valid transportation assessments, e.g., bus schedules, route maps, county resource directory, etc. When selecting the type of service to be offered, the case manager will consider the following:

- Availability of a public transit system
- Location of the participant's residence and work site to a bus route
- Distance from the participant's residence and the work site to a bus stop and
- Shifts or work schedules reasonably accommodated by the bus schedule, including bus transfers

Areas with Public Transit

In areas where public transit systems are available, a bus pass is the first type of service to be considered. If the case manager determines a bus pass is not feasible for the participant or the participant owns a vehicle, the work stipend may be approved. In these instances, the case manager will clearly document the reason(s) for approving the work stipend via the Maintain Client Barriers (MCLB) and Participant Contact Record (PACR) screens.

Areas with no Public Transit

In areas where there is not a public transit system, the work stipend is the only type of service that can be offered.

Bus Pass (BP)

A bus pass (BP) is the first type of service considered for ongoing (TWP) and transitional (TRN) participants who live in areas where transit systems are available. The county office will purchase bus passes, utilizing TANF funds, for distribution to eligible participants (TWP and TRN). The number of bus passes needed is entered in JAWS by the supervisor and JAWS generates an invoice to the local bus company. Bus passes may be purchased up to the 15th day of the month. After that date, bus passes may still be purchased, but JAWS will record them on the following month's invoice. Refer to the JAWS User Manual, Chapter 13, Section 10, Bus Passes, for system information.

In counties where transit systems are available, case managers will issue bus passes, when feasible, to eligible participants (TWP and TRN) and their children, if needed, and allow participants to utilize bus systems. Only one bus pass may be issued to each participant and child within a calendar month. If a bus pass is lost, another one cannot be issued for that month. A bus pass will allow the participant to ride the bus to the employment site or to a work program activity site. A bus pass will also provide greater access to transportation services which may be used to meet other needs.

If the case manager determines that a bus pass is the most appropriate service type for the participant, the participant must sign MDHS-EA-357C, TWP Bus Pass Log, prior to the receipt of a bus pass. The participant's child(ren) may also receive a bus pass, if needed, and the child is:

- Not eligible to ride the bus free of charge
- Living in the home with the parent/caretaker
- Under the age of 13 and
- Being transported to a child care provider which is located on the bus route. If the child care provider is not located on the bus route from the participant's residence to the work activity, it is the participant's responsibility to make alternate travel arrangements for the child.

Bus passes will not be issued to transport children to school or issued to any child who is eligible

to ride the bus free of charge. The eligible child(ren)'s name and social security number must be entered on the MDHS-EA-357C, TWP Bus Pass Log.

Work Stipend

A work stipend is the second type of service considered for participants (TWP and TRN). The work stipend is limited to a maximum amount of $300 per month. The case manager may determine the work stipend to be the most appropriate type of service for a participant when:

- Public transit **is not** available in the area. If the participant does not own or have access to a car, he/she must arrange for someone to transport him/her to the allowable work activity

- Public transit **is** available; however, the bus/van is not a feasible method of transportation (determined by the case manager's review of the bus schedule and route) for the participant or

- Public transit **is** available; however, the participant owns his/her own vehicle

The monthly work stipend amount will be determined on a case-by-case basis, based on the scheduled hours per week the participant is scheduled to participate. If the participant is assigned to more than one component, the case manager will add the scheduled participation (hours per week) entered on the Maintain Participant Component (MPAC) screen for each open component to determine the total scheduled hours range. Monthly work stipend payments will be based on the following chart.

Weekly Scheduled Participation Hours	**Total Scheduled Hours Range**	**Monthly Transportation Stipend Allowance**
32 to 40 Hours	1	$300
26 to 31 Hours	2	$240
20 to 25 Hours	3	$180
Less than 20 Hours	4	$120

Work stipends will be paid in advance, when possible. The case manager will authorize work stipends monthly, in JAWS, for eligible TWP and TRN participants. Authorization may start on

the 10th of the current month for the following month and may continue through the last day of the benefit month. Example: A work stipend payment for the benefit month of November may be authorized any time from October 10 through November 30. Refer to the JAWS User Manual, Chapter 13, Section 9, Transportation Services, for additional information.

For SNAP purposes, the TANF work stipend is a reimbursement, and therefore, is not countable income. However, money received by a TANF recipient from another TANF recipient or individual for payment of transportation services will be counted as other earned income, less allowable deductions, in SNAP and TANF.

Full and Partial Payments

The case manager has the option of paying the "F-full" amount or a "P-partial" amount when authorizing work stipend payments via the Authorize Transportation Stipend (TSAU) screen in JAWS. The total stipend payments authorized for any benefit month cannot exceed the maximum amount allowed for the total scheduled hours range displayed on the Maintain Transportation (MTRE) screen. Payments for a benefit month should be available to the participant during the benefit month, when possible. The following chart lists the "F-full" and "P-partial" payment amounts for TWP participants.

Weekly Scheduled Participation Hours	**Monthly Transportation Stipend Allowance "F-full" Amount**	**Monthly Transportation Stipend Allowance "P-partial" Amount**
32 to 40 hours	$300	$150 or balance remaining
26 to 31 hours	$240	$120 or balance remaining
20 to 25 hours	$180	$90 or balance remaining
Less than 20 hours	$120	$60 or balance remaining

When a work stipend is authorized on TSAU, the case manager will request a full or partial payment. JAWS keeps track of the total scheduled hours range and all payments issued for the benefit month. When the case manager authorizes a payment, JAWS will calculate the appropriate payment amount based on the total scheduled hours range, deduct any previous payments for that benefit month, and pay the balance due. If the amount already paid is greater than the full/partial amount requested, the amount already paid will be deducted from the maximum amount allowed and remaining balance will be paid. The total stipend amount paid

for any benefit month cannot exceed the $300 maximum.

Example: The client was assigned to AWEP and scheduled to participate 23 hours per week which is range 3 for $180 per month. A full payment ($180) was authorized in November for the benefit month of December (available to the client on December 1). The client started working 32 hours per week on December 13 which is range 1 for $300 per month. The client is eligible for $300 because the change occurred prior to the 16th day of the benefit month. The case manager authorized a "f-full" payment ($300) on December 20. JAWS will automatically calculate the amount already paid for the benefit month ($180) and deduct that amount from the maximum amount for the benefit month ($180 - $300 = $120). JAWS will pay the difference ($120).

The following examples are provided as a guide when determining whether a partial payment should be authorized.

Examples:
1. Participant's actual start date is on or after the 16th day of the benefit month (only eligible for a partial payment if no participation for the 1st - 15th)
2. Participant's expected end date is on or prior to the 15th day of the benefit month (no work activity is planned for the 16th - 31st)
3. Former TWP participant referred following a TWP sanction period
4. Participant has established a pattern of noncooperation or
5. Option can be justified by a participant's personal behavior or attitude regarding work program requirements.

Transitional work stipends (TT) for transitional (TRN) cases cannot be prorated; the full amount must be authorized, if otherwise eligible.

Arranging Transportation Services

The purpose of providing work stipends to TWP and TRN participants is to help facilitate the transition from dependency to self-sufficiency. Eliminating transportation as a barrier to an individual's independence requires a concentrated effort between MDHS staff and individuals receiving work stipend payments. Individuals may be provided bus passes (in limited areas) or monthly work stipend payments for use to arrange their own transportation. For federal reporting purposes, the case manager will add and maintain **all types** of transportation used by TWP and TRN participants in JAWS. JAWS will only support one open transportation record for each TWP and TRN participant. A new transportation record will be required anytime the total weekly scheduled hours drops below or exceeds the range displaying on the MTRE screen.

Transportation arrangements for TWP and TRN participants must be made by the individual with assistance from the case manager, if needed. **Department of Human Services, Division of Economic Assistance, employees are not allowed to transport clients under any circumstances**. The case manager will discuss the importance of reliable transportation and assist the participant in establishing a backup plan(s) to be utilized should a breakdown occur in the existing type of transportation. The case manager will explore and discuss transportation resources and options with the participant and clearly document all transportation decisions on the TWP Participant Travel Form, MDHS-EA-357, and in the case record via the Participant Contact Record (PACR) and Maintain Client Barriers (MCLB) screens in JAWS. A participant who fails to participate satisfactorily in the assigned activity or loses a job because of a breakdown in transportation, without good cause, will be sanctioned. Good cause recommendations must be approved by the case manager supervisor.

Transportation Records

Adding a Transportation Record

The case manager will add a transportation record, in JAWS, for each participant approved for transportation assistance. Each record will identify the type of service (bus pass or stipend) approved for the participant and the total scheduled hours range. The range (1, 2, 3, or 4) indicates the maximum monthly stipend amount that can be paid. The total scheduled hours range can only be updated when the transportation record is initially added on MTRE. Although JAWS does not use the participant's mileage to calculate the work stipend amount, the case manager will enter the mileage (round trip) from the participant's residence to the worksite for documentation purposes.

When a TANF case closure causes the component to close through the "batch" process, JAWS will automatically close the transportation record. The case manager will receive an alert when batch closures occur. The case manager will be responsible for reviewing the TWP case and determining the participant's status and taking the appropriate case action(s) accordingly.

A history of all transportation records for each participant is maintained by JAWS and can be viewed via the Transportation Selection (STRE) screen.

Total Scheduled Hours Range Changes

Any time a permanent change occurs in a participant's total weekly scheduled participation

which results in a different payment range, the case manager will close the current transportation record and add a new record for the correct payment range.

Increase in Scheduled Participation Hours

If a RANGE change occurs on or prior to the 15th day of the month that results in an increase in the monthly stipend amount, the case manager will close the transportation record for the incorrect RANGE, add a new record for the correct RANGE (the end and start dates cannot overlap) and authorize a second stipend for the benefit month to pay the balance.

If a RANGE change occurs on or after the 16th day of the month that results in an increase in the monthly stipend amount, the case manager will close the transportation record for the incorrect RANGE for the last day of the month, add a new record for the correct RANGE effective for the first of the following month. An additional stipend payment will not be authorized for the benefit month in which the range change occurred. The change will be effective the following month.

Decrease in Scheduled Participation Hours

If a RANGE change occurs on or prior to the 15th day of the month that results in a decrease in the monthly stipend amount, the case manager will close the transportation record for the incorrect RANGE and add a new record for the correct RANGE (the end date and start date cannot overlap.) Additional case action will be determined by the stipend amount already paid for the benefit month. If a stipend for the benefit month has not been paid at the time the change occurs, the case manager will select the transportation record for the correct RANGE (lesser amount) and authorize the stipend accordingly. If a stipend for the benefit month was paid prior to the range change occurring, there will not be an overpayment claim set up. The correct stipend amount will be authorized for the following benefit month.

If a RANGE change occurs on or after the 16th day of the month that results in a decrease in the monthly stipend amount, the case manager will close the transportation record for the incorrect RANGE effective for the end of the month and add a new record for the correct RANGE effective for the first of the following month (the end and start dates cannot overlap.) The RANGE change will be effective for the following month.

Authorization Period

In order for work stipends to be processed and made available to the participant on the first day of the benefit month, JAWS will allow the case manager to begin authorization of work stipends

and bus passes on or after the 10th of the current month for the following month. Stipend payments authorized on the 10th through the 23rd of the current calendar month for the following month, may be changed or deleted through the close of business on the 23rd day of the current calendar month. Stipend payments authorized on the 24th through the last working day of the current calendar month for the following month, may be changed or deleted through the close of business on the last calendar day of the current month. To make changes to a payment amount or delete a transportation stipend payment, the case manager must access the Maintain Transportation Stipend Record (MTSS) screen before the transportation stipend is processed by JAWS. (The DATE PAID field must be blank.) Stipend payments authorized in the current month for the following month will be processed by JAWS twice per month (after the close of business on the twenty-third and the last day of the month). Stipends processed by JAWS for a future month will be available to the participant on the first day of the benefit month. A transportation benefit for the current calendar month may be authorized through the close of business on the last working day of the benefit month. Stipends authorized during the benefit month will be available to the participant the next day. For example, the authorization period for a November stipend is October 10 to November 30. Stipends that are not authorized by the close of business on the last working day of the benefit month must be processed as an underpayment.

Transportation assistance (bus passes and work stipends) will be issued in advance, when possible. The case manager will authorize bus passes and work stipends each month based on each participant's eligibility. JAWS will not allow the case manager to authorize benefits (bus passes and work stipends) if the participant does not have an open transportation record for the benefit period.

Satisfactory TWP participation is required to receive TANF supportive services. No JAWS system edits are available to prohibit the case manager from issuing a bus pass or authorizing a work stipend when the participant is not participating satisfactorily. Policy requires the case manager to review and approve the individual's participation data each month before authorizing a stipend or issuing a bus pass. It is the case manager's responsibility to monitor and track the individual's participation to ensure satisfactory participation requirements are met **before** authorizing a work stipend or issuing a bus pass.

The case manager will provide thorough explanations about the requirements for receiving transportation assistance, the maximum monthly stipend allowances, the reporting requirements (attendance and employment verification), and adverse actions that may be applied if timeliness standards are not adhered to, e.g., conciliation, sanction, termination of supportive services, etc.

Individuals who fail to submit attendance verification timely and request payment for a month which the authorization period has ended will not receive payment for that month.

The Select Transportation Record to Authorize (STSL) and the Select Bus Pass (SBPL) screens in JAWS display participants assigned to a particular case manager who may be eligible for a work stipend or a bus pass. The case manager will review the "Last Month Authorized" field on these screens to determine whether benefits should be authorized. Supervisors will use these screens for monitoring purposes. The List Transportation Stipends by Client (LTSR) and List Bus Pass by Client (LBPR) screens display stipends and bus passes authorized for the participant. The LTSR screen a date in the date paid field if the stipend has been paid. The case manager will review the LTSR screen to determine whether an authorized stipend should be deleted or the stipend amount changed prior to being paid. The LBPR screen must be reviewed to determine whether a bus pass for the current calendar month or the following month should be deleted or the number of bus passes and children changed.

Work stipend payments for a future month, which are authorized on the 10th through the 23rd of the current calendar month, may be changed or deleted through the close of business on the 23rd day of the current calendar month. Payments for a future month authorized on the 24th through the last working day of the current calendar month may be changed or deleted through the close of business on the last calendar day of the current month. The LTSR screen will display a "Y" in the authorization indicator field if the stipend has not been paid and can be updated.

Work stipends must be authorized prior to the close of business on the last working day of the benefit month. Stipends not authorized timely must be processed as an improper payment (underpayment).

Payments

The case manager supervisor is responsible for processing payments to public transit providers. Provider payments are issued through the invoice process and made directly to the provider/vendor.

There is a payment cycle each Friday for providers and payments are issued centrally by the Division of Budgets and Accounting. A history of provider payments is maintained by JAWS and can be viewed via the Check History Inquiry (ICHI) screen.

Work stipend payments (TWP and TT) are made directly to the participant and posted to the participant's Mississippi Debit MasterCard account. Work stipends authorized for the current

calendar month are processed nightly and are available to the participant by 10:00 a.m. the following day. Work stipends authorized in advance (in the current month for the following month) are processed by JAWS two times per month. Stipends authorized on the 10th through the 23rd are processed after the close of business on the 23rd. Stipends authorized on the 24th through the last working day of the month are processed on the last day of the month. Stipends authorized in advance will be available to the participant on the first day of the benefit month.

JAWS system edits are in place to prevent payment of unauthorized benefits and to ensure payments for any benefit month do not exceed the maximum monthly allowance based on the payment range entered on MTRE. A history of work stipend payments paid to each participant is maintained by JAWS and can be viewed via the Transportation Stipend Check History (TSHI) screen.

Attendance documentation must be received, reviewed, and entered into JAWS, if possible, prior to authorization of benefits. The documentation must be filed electronically in the TWP Temp Docs folder or the county's central file. The attendance data used to determine satisfactory participation will be determined by the component type (AWEP, COM, JA, high school, college, etc.) and must be current or no more than two (2) months prior to the transportation benefit month. Authorization of benefits, on the TSAU screen, requires the case manager to attest that attendance documentation is up-to-date and the participant is participating satisfactorily. If the participant is eligible, the case manager will authorize the stipend timely to ensure the benefits are posted to the participant's Mississippi Debit MasterCard account and will be available on the first day of the benefit month.

Monthly work stipend allowances may be issued to TANF Work Program (TWP) participants in partial payment amounts. The case manager will use good judgment when determining whether to issue the "F-full" amount or a "P-partial" amount. Refer to Chapter 10, Prorating Monthly Work Stipend, for additional information. Transitional work stipend payments must be issued for the "F-full" amount allowed for the payment range. Transitional work stipends cannot be prorated.

Work stipend payments issued to ongoing (TWP) participants are subject to improper payment policy and procedures. If an overpayment occurs, a claim will be set up and the overpayment amount recovered. If an underpayment occurs, the claim amount will be issued to the participant. Refer to Chapter 10, Improper Payments, for additional information. Individuals submitting attendance verification and requesting payment for a benefit month in which the authorization period has ended will not receive payment for that month. The case manager will take timely case action(s) to conciliate TWP participants and close Transitional Work Assistance

(TT) Programs when individuals fail to submit attendance verification according to timeliness standards outlined in policy. Refer to Chapter 9, Component Monitoring/Attendance Reporting and Chapter 11, Conciliation, for further information.

EXAMPLE: A TWP participant, responsible for tracking his/her own attendance, who fails to submit verification of October's attendance prior to December 1, will not be eligible for a November work stipend. A transitional (TT) recipient who fails to submit his/her continued employment verification as requested by the case manager, at a minimum quarterly, will not receive a stipend for the next available benefit month and may lose eligibility for TT assistance. Therefore, an underpayment will not be processed.

At this time, system support is not available to handle improper payments for transitional work stipend (TT) payments. Therefore, TT payments are not subject to improper payment policy and procedures. If a transitional work stipend payment is issued in error, the individual's transitional work stipend (TT) counter will be incremented. If the worker fails to authorize a transitional work stipend, the individual's transitional work stipend (TT) counter will not be incremented for that month. Transitional work stipend payments are limited to a onetime, lifetime maximum of 18 months.

Mississippi will not authorize work stipend payments or issue bus passes to a family that does not include an eligible dependent child or includes an adult who has received TANF funding for 60 months (whether consecutive or not), except as allowed by Public Law 104 - 193 in regard to a minor child(ren), hardship, etc.

Provider/Vendor Checks

Provider/vendor payments to public transit providers are processed in JAWS and checks are generated each Friday. The provider/vendor must allow ten (10) days from the check issuance date displayed on the JAWS Check History Inquiry (ICHI) screen to receive a check. If the check is not received within the 10-day period, is lost, stolen, or mutilated the case manager will review the check status in JAWS and contact the Division of Budgets and Accounting, Client Services Unit, to determine the status of the check. The case manager will then follow the procedures outlined in Chapter 10, Payment Processes, to request a duplicate or cancel the check accordingly. County staff will not, under any circumstance, instruct the provider/vendor to contact State Office.

WORK (TRANSPORTATION) ASSISTANCE FOR TANF APPLICANTS

TANF applicants who are required to participate in up-front job search activities prior to TANF approval will complete the TWP intake process which includes assessment of the individual's transportation needs. The case manager will explore the transportation options with each TANF applicant to determine what resources are available and what arrangements can be made. Work stipends and bus passes are not available to TANF applicants during the 30-day TANF application processing period. If the TANF application is approved and the recipient is determined to be work eligible, the case will be referred to JAWS for participation in the TANF Work Program. Work stipends or bus passes will be available when the participant is placed in an allowable work activity, if otherwise eligible.

WORK (TRANSPORTATION) ASSISTANCE FOR ACTIVE TANF CASES (TWP)

Assessment for Transportation Services - Active TANF Cases

Work stipends are available to TANF recipients who are determined work eligible and required to participate in the TANF Work Program. The need for work assistance will be determined prior to assignment to TWP work activities and provided in the form of bus passes (where available) and work stipends.

The case manager will encourage the participant to receive work stipend payments if he/she owns or has access to a private vehicle or if carpooling can be arranged. A participant receiving work stipend payments for private vehicle transportation must develop and provide the case manager with his/her transportation plan. This plan must describe how the participant will travel to and from his/her work site and how his/her child(ren) will be transported to and from day care. The plan must also include the participant's backup plan that will be used in the event the primary plan fails. The TWP Participant Travel Form, MDHS-EA-357, will be used to document the participant's transportation plans. The case manager will discuss the importance of reliable transportation and the impact the lack of transportation may have on the family's ability to participate in work program activities and move toward self-sufficiency. The case manager will use the Participant Contact Record (PACR) screen to document the case record accordingly. The case manager will inform the participant that if there is a breakdown in transportation services, he/she must call the case manager or case manager supervisor as soon as possible to discuss other possible transportation options and continued participation in the assigned work activity.

If a public transit system is available and the participant lives on a bus route, a bus pass may not

be the appropriate mode of transportation, if the individual's child(ren) is not allowed to ride the bus or if riding the bus would interfere with getting the child to day care or school. High school students (teen parents) who have access to bus transportation through the school system will be required to use this mode of transportation, even if the individual owns a vehicle. The only exception is for a participant who must transport a child to day care. (Underage children are not allowed to ride the school bus with their parents.)

Minimum Requirements

The following minimum requirements must be met before work stipends can be authorized:

1. The participant must be assigned to an allowable component. JAWS will allow the case manager to add a transportation record and authorize a work stipend or bus pass as long as the ASSIGN DATE for the TWP component has been entered. In some instances, authorization of the work stipend or issuance of the bus pass can only be based on the component ASSIGN DATE (e.g., the participant is an initial (new) referral to TWP and transportation is needed immediately to enable the participant to attend the activity.) The case manager has the option of authorizing a partial payment in situations where the participant is not an initial referral to TWP. This includes situations for which the participant has not participated in an activity for more than sixty (60) days (has been in HOLDING); or has a history of noncooperation in TWP (e.g., has served a sanction, complied with TWP, and is being referred to TWP for a component assignment.) The case manager will determine, on a case-by-case basis, whether a work stipend should be authorized or a bus pass issued prior to receiving documentation verifying that the participant actually started the component. The case manager may authorize a work stipend as soon as verification of the component placement is received (e.g., a completed component referral (T005) is received from the provider; a wage form (910) is received from the employer, etc.)

2. The participant's weekly scheduled participation hours must be sufficient, at a minimum, to allow the participant to meet his/her monthly federal participation rate requirement. Prior to authorizing a work stipend in advance (e.g., authorizing a December benefit in the month of November), the case manager will review the participant's actual hours of participation for the previous month and the scheduled participation hours for the benefit month to project eligibility.

3. The participant must be in compliance with work program requirements and participating satisfactorily in the assigned work activity. The case manager will use case documentation

and the participant's most recent attendance documentation for verification purposes.

Documentation cannot be more than two months prior to the benefit month being authorized. For example, attendance data for September or October will be used to determine eligibility for a November stipend or bus pass.

EXAMPLE: The participant is assigned to Vocational Education and submits attendance documentation to the case manager timely. The attendance data validates satisfactory participation during the months of October and November. The class ends on December 16 and a new class will start on January 7. Beginning November 10, the case manager can authorize benefits for the month of December based on the October and November attendance verification. Beginning December 10, the case manager can authorize benefits for January, based on the individual's satisfactory attendance in November and December and the **scheduled** attendance hours on and after January 7.

Verification of Attendance for Active TANF Cases

Attendance documentation for most of the non-paid work activities will be submitted by the provider/worksite sponsor. The case manager will establish the time line for attendance reporting, based on the work activity assignment, and inform the participant and/or provider accordingly. Attendance documentation for non-paid work activities may be submitted weekly, biweekly, semimonthly, or monthly. However, at a minimum, attendance documentation for non-paid work activities must be submitted by the 10th of each month for the prior month. Attendance documentation for paid work activities must be submitted by the 10th of the month following the last month in the projection time period (one to six months). For example, the six-month projection period is 11/01/10 - 04 /30/11, current check stubs verifying continued employment must be submitted by the 10th of May. The case manager will not authorize a work stipend for May until the documentation is received and continued eligibility is verified.

The case manager will ensure all attendance documentation is received, reviewed and attendance data entered in JAWS, if possible, prior to authorizing work stipends or issuing bus passes each month. Attendance data for non-paid work activities will be entered on the Component Attendance Report Selection (SCAR) screen and projected attendance data for paid work activities will be entered on the Maintain Projected Attendance (MPRA) screen. If a participant has not submitted the required attendance for the TWP work activity or current verification of continued employment, the case manager will not authorize a work stipend or issue a bus pass. A conciliation appointment will be scheduled for TWP participants who fail to submit attendance verification timely for their assigned work program activity (e.g., employment, AWEP,

vocational education, etc.)

Prorating Monthly Work Stipends

Work stipends for TANF Work Program participants may be prorated based on the actual start date and expected end date of the TWP activity, as well as the history of the participant's willingness to cooperate with TWP work requirements. The case manager may choose to authorize a partial payment based on the participant's acceptance of personal responsibility and previous history. A partial payment may also be justified based on the number of days the participant is expected to participate during the benefit month. In this situation, the payment type (full or partial) will be based on the day of the month the component actually starts or is expected to end.

If the actual start date is on or prior to the 15th day of the month, the case manager will authorize a full payment. If the actual start date is on or after the 16th day of the month, the case manager will authorize a partial payment.

The same rule will apply for the last month of the component assignment. If the expected end date is on or prior to the 15th day of the month, the case manager will authorize a partial payment. If the expected end date is on or after the 16th day of the month, the case manager will authorize a full payment.

NOTE: If the participant is expected to begin a new component assignment during the same month the current component ends, the case manager may authorize a full payment based on previous attendance history. The case manager may choose to authorize a partial payment in advance (prior to the first of the benefit month), and a second partial payment after the participant reports to the new work assignment, but prior to the close of business on the last working day of the benefit month.

Example: The participant is scheduled to participate 25 hours per week (Range 3 - $180/month). The actual start date of the component assignment is July 19. The CM will authorize a partial payment ($60) for the benefit month of July. If the expected end date of the component assignment is September 20, the CM will authorize a full payment ($180) for the benefit month of September.

Example: Participant is assigned to a short-term training program for 30 hours per week. The last day of training is August 13. The participant is expected to begin a community service placement on August 16 and the scheduled participation is 28 hours per week. The case manager

may authorize a full payment ($240) for the benefit month of August. However, the case manager may choose to authorize a partial payment ($120) prior to August 1 (in advance) and a second partial payment ($120) on August 17 (after the participant reports to the work assignment) for a total of $240 for the benefit month of August.

Refer to the chart on page 10033 for the "F-full" and "P-partial" payment amounts for each total scheduled hours range.

NOTE: Issuing partial payments will require the case manager to develop a system and set tickler(s) to ensure stipends are authorized timely. All prorated benefits should be available to the participant within the benefit month, if possible.

Improper Payments (Active TANF Cases)

Improper payment claims (overpayments and underpayments) for TWP participants will be established, documented and added into JAWS by the case manager. Individuals submitting attendance verification and requesting payment for a month which the authorization period has ended will not receive an underpayment for that month. The case manager will timely conciliate TWP participants when they fail to submit attendance verification according to timeliness standards outlined in policy. Refer to Chapter 9, Component Monitoring/Attendance Reporting, Chapter 10, Improper Payments, and Chapter 11, Conciliation, for further information.

EXAMPLE: A TWP participant whose six-month projection period is October through March will be required to provide all check stubs received during the month of March no later than April 10. If continued employment verification is provided on or after May 1, the individual is not eligible for a work stipend payment for the benefit month of April.

Underpayments

JAWS will not allow a transportation underpayment record to be added if a transportation record does not exist for the month of the underpayment. If a transportation record does not exist for the benefit month for which the underpayment is being requested, the case manager supervisor or the regional director must access the Transportation Underpayment Override (TUOR) screen to process the underpayment, if otherwise eligible. The TUOR screen will also be used to process a transportation underpayment when the total scheduled hours range changed from the original range entered on MTRE. (A transportation record does not exist for the correct total scheduled hours range.)

The Add Underpayment for Transportation Stipend (TUNP) screen is used, by the case manager, to process transportation underpayments when a transportation record exists on MTRE. The reason codes used on the MDHS-EA-371, Report of TWP Improper Payment, must be used in the Reason Code field on TUNP to identify the specific reason for the underpayment. The Description field is a free form space provided to allow the case manager to make any additional comments deemed necessary. Comments entered in this field will be stored in history with the underpayment record.

A history of transportation underpayments will be maintained by JAWS and can be viewed via the Transportation Stipend Underpayment History (TSUH) screen.

Refer to the JAWS User Manual, Chapter 13, Section 9, for additional information regarding system procedures.

NOTE: System support is not available, at this time, to process improper payments for transitional transportation.

TRANSITIONAL WORK (TRANSPORTATION) STIPEND (closed TANF cases)

Transitional work stipends (TT) are limited to a onetime, lifetime maximum of 18 months. Individuals may apply for transitional work stipends within 30 days after the TANF case closes. Transitional work stipends can only be offered to one adult, included in the TANF case at the time of case closure. The TANF case must close due to earned income or loss of the three- or six-month earned income disregard. The worker will send two notices regarding transitional work stipends at the time the TANF case closes. MAVERICS Notice A803, TANF Transitional Work Assistance, informs the individual about the availability of and requirements for receiving transitional work stipends. MAVERICS Notice A807, Appointment Notice for TANF Transitional Services, notifies the individual of the appointment date and time to meet with case management to discuss the eligibility criteria and the application process. The transitional services appointment will be scheduled within ten (10) days of TANF case closure. The adult must be working at least 25 hours per week at or above the federal minimum wage and need transportation assistance to remain employed. The individual must complete a TANF Transitional Work Assistance Application, MDHS-EA-357G, which also advises the applicant of the rules governing transitional work stipends. The eligibility period for transitional work stipends may begin the month after the TANF benefits stop. Policy and procedures for the arrangement of transitional work assistance (TT) are the same as those for regular (TWP) transportation with two exceptions. Transitional work stipend payments cannot be issued in partial payment amounts and overpayments are not recoverable. The monthly transportation

stipend payment scale used for TWP participants is also used for transitional participants. Exception: Participants with a TT start date of June 30, 2010, or prior, will continue to receive the full stipend amount of $300 regardless of the Total Scheduled Hours Range, as long as they maintain continuous eligibility for the remaining TT months. If eligibility is lost, the individual must subsequently meet all of the eligibility criteria to be approved for any remaining TT months. All remaining months will be processed using the following chart.

Weekly Scheduled Participation Hours	**Monthly Transportation Stipend Allowance**
32 to 40 Hours	$300
26 to 31 Hours	$240
20 to 25 Hours	$180

Individuals submitting transitional work stipend applications who were previously approved for transitional work stipend payments under the 12-month lifetime policy provision are not eligible for additional transitional work stipend payments if their twelfth transitional work stipend benefit month was prior to August 2007. Subsequent applications submitted by these individuals will be denied. Individuals under this provision, who received less than 12 months prior to August 2007, may be eligible for extended transitional work stipend payments up to a maximum of 18 months.

Individuals approved under the 24-month lifetime provision may be eligible for extended transitional work stipend payments up to a maximum of 18 months if their transitional work stipend (TT) counter is less than 18 months. The onetime, lifetime maximum for individuals who regain eligibility for TANF benefits before the 24 months expire will be reduced from 24 to 18 months.

Subsequent applications for transitional work stipend payments for any individual whose transitional work stipend (TT) counter is equal to or greater than 18 months will be denied. Transitional work stipend recipients who reapply for TANF benefits and the TANF application is denied will lose eligibility for transitional work stipend payments unless the denial is an agency error.

The transitional work stipend (TT) counter will be incremented each month a transitional work stipend is paid or a bus pass issued. Transitional work stipend payments are limited to a

onetime, lifetime maximum of 18 months. Therefore, individuals receiving transitional work stipend payments will be allowed to terminate their benefits any time after approval. The individual must notify the case manager and complete a Request for Termination of Transitional Work Stipend Payments, MDHS- EA-357H, by the tenth day of the month prior to the month benefits are to be terminated. If the individual request termination or benefits are terminated because the individual no longer meets the eligibility criteria, the individual's Transitional Work Assistance (TT) program will be closed. The individual cannot receive additional transitional work stipend payments unless the individual regains eligibility for TANF benefits and the TANF case subsequently closes due to earned income or loss of the three- or six-month earned income disregard.

Transitional work stipend payments provided to individuals who are employed are not considered as assistance and are not subject to child support requirements.

Minimum Requirements

The following minimum requirements must be met before transitional work stipend payments can be authorized:

1. The individual must be referred to JAWS for participation in the TANF Work Program prior to TANF case closure.

2. The individual must have lost TANF benefits because of increased earnings or loss of earned income disregards.

3. The individual must be working 25 or more hours per week and earning the federal minimum hourly wage or higher. An individual, whose work hours are permanently reduced to less than 25, but not less than 20, may continue to receive transitional work stipend payments only when it is verified that the reduction in work hours was not the individual's choice. The case manager will document the involuntary reduction in work hours and continue to authorize transitional work stipend payments if otherwise eligible.

4. A TANF eligible child (under age 18), who was included in the assistance unit at the time the TANF case closed must be living in the home. Eligibility for transitional work stipends must be terminated if the only TANF eligible child leaves the home or turns 18 years of age.

An individual will lose eligibility for transitional work stipend payments if the individual:

1. Fails to meet the eligibility criteria or provide verification of continued employment as requested (at a minimum quarterly)

2. Voluntarily and permanently reduces the work hours and is no longer working a minimum of 25 hours per week or earning the federal minimum hourly wage

3. Has no TANF eligible child (under age 18) living in the home or

4. Moves to another state

Individuals who lost eligibility for or requested termination of transitional work stipend payments must subsequently regain eligibility for TANF benefits and transition off TANF again due to earned income or loss of an earned income disregard, and must complete a TANF Transitional Work Assistance Application, MDHS-EA-357G, within 30 days of TANF case closure if transportation assistance is needed in the future. However, the application will be denied if the individual's transitional work stipend (TT) counter is equal to or greater than 18 months.

Registering Transitional Work Assistance (TT) in MAVERICS

When a transitional work stipend application is received, the Transitional Work Assistance Program type (TT) must be registered in MAVERICS on the Register Application (REAP) and Register Program with Open Case (REGO) screens. The TT program will be referred to JAWS in an overnight batch process. The case manager will review the application and approve or deny eligibility for transitional work stipend payments in JAWS. The case manager will also authorize work stipend payments and document the issuance of bus passes in JAWS each month. If the individual is eligible for transitional work stipend payments, the case manager will add a transportation record for the appropriate transportation type (bus pass or stipend.) Once the transportation record is successfully added, JAWS will automatically generate a Transitional Work Stipend Approval Notice (TT01) which will be mailed to the participant from State Office.

Handling Transitional Work Stipend Applications Before the TANF Program Closes in JAWS

When a transitional work stipend application is received before the TANF Program shows closed in JAWS, the case manager will authorize a transitional work stipend in the current calendar month for the calendar month following case closure. To ensure transitional work stipends are processed timely and that a TT record is not added to a TWP component, the case manager will:

1. Close the TWP component effective for the TANF closure date which is expected at the end of the month. This will cause the TWP transportation record to close automatically

2. Add the UNS/TRN component, if required (only one TRN component is required for all transitional supportive services)

3. Add the TT record for the appropriate total scheduled hours range and

4. Authorize the transitional work stipend payment after completing the above

NOTE: There should not be an interruption between TWP and TRN transportation assistance, if eligible. The employment that caused the individual's TANF case to close should also be used to determine eligibility for TANF transitional services. Example: If December is the last month of TWP transportation, January should be the first month of TRN transportation.

Projected Attendance

Attendance data for UNS/TRN components may be projected up to a maximum of three (3) months at a time. Attendance data for the initial three-month projection period will be determined using the individual's check stubs received during the last month of TANF eligibility. Attendance data for subsequent projection periods will be determined using the individual's check stubs received during the last month of each projection period.

Example: TANF case closes December 31, effective for January. Check stubs received during December will be used to calculate the weekly projected attendance hours for the January through March projection period. Check stubs received during March must be provided to the case manager no later than April 10. March's check stubs will be used to determine continued eligibility and, if eligible, to calculate the weekly projected attendance hours for April through June. The case manager will not authorize a stipend for April until March's check stubs are received and continued eligibility is determined.

Verification of Attendance for Transitional Work Stipends

The individual must provide documentation to verify continued employment and attendance hours as requested by the case manager, but no less than quarterly. The case manager will send a request for continued employment verification no later than the eighteenth day of the last month in the projection period. The individual must provide all check stubs received during the month requested in the notice (last month of the three-month projection period) no later than the tenth

day of the following month. The case manager will not authorize additional work stipend payments until verification of continue employment is received and continued eligibility is determined. This may delay authorization of the stipend for the first month in the three-month projection period. This case manager will discuss eligibility criteria, attendance reporting requirements and payment authorization with the individual at the appointment for transitional services.

Individuals who fail to provide verification of continued employment timely will have their Transitional Work Assistance (TT) Program closed. Once a Transitional Work Assistance (TT) Program closes for this reason, it will not be "opened back up" unless it is determined an agency error occurred.

Entering Attendance in JAWS for Transitional Work Stipends

The automated process for entering projected attendance data for UNS/TRN components has not been completed. Attendance data for UNS/TRN components will continue to be entered in JAWS via the Component Attendance Report Selection (SCAR) screen (ARPW pop-up window.)

Authorizing Transitional Work Stipends

JAWS requires the case manager to approve the individual's participation before authorizing a stipend or issuing a bus pass. There are no system edits in JAWS to prohibit the case manager from authorizing transitional work stipend payments if the individual fails to meet the required work hours or participate satisfactorily. It is the case manager's responsibility to monitor and track the individual's participation and ensure required work hours are met before authorizing a work stipend or issuing a bus pass. JAWS requires the case manager to enter a "Y" in the Client is Satisfactorily Participating field on the Authorize Transportation Stipend (TSAU) screen before the stipend can be authorized. A "Y" entered in this field serves as the case manager's validation that he/she has reviewed the case and the individual is satisfactorily participating in the program and submitting attendance verification timely.

JAWS will not allow the case manager to request partial payments for transitional work stipends. Individuals approved for transitional work stipends will always receive the full amount for the total scheduled hours range approved ($300, $240 or $180), regardless of the date of the month on which the application was completed and approved. JAWS will increment the individual's transitional work stipend (TT) counter for the benefit month. Refer to Chapter 10, Transitional Work Stipend (TT) Counter, for additional information.

EXAMPLE 1: An individual completes a TT application on September 17 for the month of October, and is approved for Range 1 will receive a $300.00 payment for the month of October.

EXAMPLE 2: An individual completes a TT application on October 17 for the month of October, and is approved for Range 1 will receive a $300.00 payment for the month of October.

EXCEPTION: Transitional work stipend applications received and registered on the last day of the month are not eligible for benefits for the application month. The first benefit month will be the month following the month of application. Referral from MAVERICS to JAWS is an overnight process. An application registered in MAVERICS on the last day of the month will not be received in JAWS until the first day of the following month. The TT program must be open in JAWS before benefits can be authorized.

EXAMPLE: An individual completing a TT application on October 31 for the month of October will receive a $300.00 payment, if approved for Range 1, for the month of November.

Eligibility for transitional work stipend payments may continue for any subsequent month, regardless of the reason for the job loss, as long as the time lapse between the ACTUAL END DATE of one job placement and the ACTUAL START DATE of another job placement is not more than 30 days.
There are no JAWS system edits, the case manager will verify and document the time lapse between jobs and handle the case accordingly.

Transitional Work Stipend (TT) Counter

Transitional work stipend (TT) payments are limited to a onetime, lifetime maximum of 18 months. JAWS will increment the individual's counter by one whenever a work stipend is paid or a bus pass is authorized. The transitional work stipend (TT) counter will be maintained in JAWS on the Maintain Transportation (MTRE) screen. When the Transitional Work Assistance (TT) Program closes, JAWS will send the counter and the last paid/authorized transitional work stipend participation information to MAVERICS. This data will only be displayed in MAVERICS (CAP2 screen) when the Transitional Work Assistance (TT) Program is closed.

MAVERICS will not display this data if the Transitional Work Assistance (TT) Program is open.

Denying and Closing Transitional Work Assistance (TT) Program

The following notices may be generated automatically by JAWS or by the case manager to deny

or close the Transitional Work Assistance (TT) Program in MAVERICS. Closure and denial notices are generated by JAWS and mailed, from State Office, to transitional work stipend recipients or applicants.

- **TT02, Transitional Work Stipend Denial Notice -** The TT02 is used to deny a transitional work stipend application. When a Transitional Work Assistance (TT) Program is registered in MAVERICS, MAVERICS sends a Transitional Work Assistance (TT) Program referral to JAWS. If the case manager has not approved the application and added a transportation record after 45 days (from the TT Program Start Date), JAWS will automatically close the Transitional Work Assistance (TT) Program, generate a TT02 and send a closure record to MAVERICS. The case manager may also generate this notice from the Transitional Work Stipend (TT) Denial/Closure Notices (TSNO) screen in JAWS to deny a transitional work stipend application before the 45-day period ends. JAWS will not allow a denial notice to be generated if a transportation record is in open status.

- **TT03, Transitional Work Stipend Closure Notice** - Is generated automatically by JAWS when the individual's lifetime maximum has been reached, when no benefit has been paid within 120 days of the TT status date on ICLI, and when no TT stipend has been authorized within 120 days of the last authorized TT payment. The case manager may also generate this notice from the Transitional Work Stipend (TT) Denial/Closure Notices (TSNO) screen in JAWS to close the Transitional Work Assistance (TT) Program. When a UNS/TRN component is closed on the Maintain Participant Component (MPAC) screen, a pop-up window will display requiring the case manager to enter a "Y" or "N" to indicate whether the Transitional Work Assistance (TT) Program is closing. If a "Y" is entered JAWS will close the Transitional Work Assistance (TT) Program on the ICLI screen, send a closure record to MAVERICS and generate a TT03 to the individual.

  In addition to the JAWS automated notice process, if the Transitional Work Assistance (TT) Program is terminated for any reason (e.g., recipient no longer meets the minimum requirements, recipient requested termination, etc.), a TT03, Transitional Work Stipend Closure Notice, will be generated and mailed to the individual by the case manager. Individuals who request termination of this assistance must complete a Request for Termination of Transitional Work Assistance, MDHS-EA-357H. The completed form will be scanned and placed in the TWP temporary folder of the individual's case record. Transitional Work Assistance (TT) Programs closed in error in JAWS will be reverted to open in the MAVERICS system. MAVERICS will automatically send the revert to open transaction to JAWS in an overnight referral process.

JAWS will maintain a history of Transitional Work Stipend denial and closure notices on the SPAN screen which may be printed locally by the case manager. All transitional work stipend denials and closures in JAWS will transmit a closure record to MAVERICS the following night.

AUTHORIZED STIPENDS WHICH HAVE NOT PAID WILL BE AUTOMATICALLY DELETED BY JAWS WHEN A CLOSURE NOTICE (TT03) IS GENERATED.

NOTE: Closing the transportation record on the MTRE in JAWS **will not** generate a notice to the individual nor close the Transitional Work Assistance (TT) Program in MAVERICS. If the case manager wishes to close the Transitional Work Assistance (TT) Program, the TT02 or TT03 will be generated via the Transitional Work Stipend Denial/Closure Notices (TSNO) screen in JAWS. If the Transitional Work Assistance (TT) Program is closed in error in JAWS, MAVERICS will allow the case manager to revert the program to open.

If a TT program is registered in MAVERICS and referred to JAWS in error, the "RE-Registered in Error" code will be used to close the TT program. When the "RE" code is used, JAWS will not mail a denial/closure notice to the individual.

Refer to the JAWS User Manual, Chapter 13, Section 9, Transportation Services, for additional**)** information regarding JAWS system procedures.

Improper Payments (Transitional Cases)

An improper payment claim cannot be established for transitional work stipend payments. Transitional work stipend payments are limited to a maximum of 18 months. Anytime a participant receives a transitional work stipend overpayment, the "TT" counter is incremented which decreases the number of months the individual may receive transitional work stipend payments. An individual who submits verification of continued employment and requests payment for a month which the authorization period has ended will not receive an underpayment for that month.

EXAMPLE: A transitional participant whose three-month projection period is October through December is required to provide all check stubs received during the month of December no later than January 10. If continued employment verification is provided on or after February 1, the individual is not eligible for a January transitional work stipend payment.

CHILD CARE SERVICES

There are two types of TANF child care services, TANF Work Program (TWP) and Transitional Child Care (TCC). TANF TWP child care is available for TANF recipients who are satisfactorily participating in the TANF Work Program and the service is needed. TANF TCC child care is available for TWP participants who transition off TANF because of earned income or the loss of an earned income disregard (3D or 6D), the family's income is at or below the 85% State Median Income, and the service is needed to remain employed. (TCC does not have a lifetime maximum.)

Eligibility for TANF TWP child care may begin after the parent is referred to the TANF Work Program, assessed, and assigned to an allowable work activity. The TANF TCC 24-month eligibility period begins the month following the last month of TANF eligibility (month following TANF case closure.) The parent must request TCC services by signing and returning MAVERICS Notice A802, TANF Transitional Child Care, or completing a TANF Child Care Application, MDHS-EA-379.

TANF child care may be provided for eligible parents or caretaker relatives who require such care so that they may participate in work program activities, accept employment and/or remain employed. All current and former TANF recipients requesting TANF child care services will be required to complete a **TANF Child Care Application, MDHS-EA-379**. The MDHS-EA-379 will be used to register a Child Care Program and CLIM the eligible child(ren) in MAVERICS. MAVERICS will refer the Child Care Program and the child(ren) to JAWS overnight. TANF TWP and TCC child care services will be administered by the Office for Children and Youth, Designated Agents, through a certificate process utilizing TANF Block Grant Funds.

Priority for **TANF** child care services will be given in the following order:

1. Children of parents or needy caretaker relatives who cooperate with TWP requirements and who participate satisfactorily in allowable TWP work activities. This also includes:

- children of parents or needy caretaker relatives who are working, but not earning enough to transition off TANF;
- children of parents who are disqualified (TANF participation code of DI or DF); and
- children of Tribal TWP participants.

The eligibility criteria for child care services are the same for all TANF Work Program participants *(whether Tribal or State).* Child care services must be provided to Tribal TWP

participants and will be available to the same extent as they are available to State TWP participants.

2. Children of parents or caretaker relatives transitioning off TANF because of increased earnings or loss of earned income disregards.

3. Children in a TANF case which does not include the PI in the assistance budget (ANI/child only cases). The **PI** of the child-only case must be employed and earning wages at or above the federal minimum wage. (The PI's continued employment must be verified at each regularly scheduled TANF case review. Refer to Child Only Cases for Non Needy Caretaker Relatives.)

Case Management Assignment

In order to process an application for TANF child care services in JAWS, a case manager must be assigned to each case. Child care referrals for TWP participants will be processed by the case manager assigned to the case. The case manager supervisor will use the following procedures to make case management assignments to Child-Only, Choctaw and TCC cases that were not assigned to the TWP .

1. When the case is referred from MAVERICS to JAWS, an alert will be generated to the case manager supervisor to assign a case manager to the case.

2. TWP participants who transition from TWP child care to TCC services may be assigned to the case manager assigned to the case at the time of case closure.

A case manager cannot add, update or terminate another child care referral for a case assigned to another case manager.

Minimum Participation Requirements

The minimum participation requirements for a parent, a needy caretaker, and a non-needy caretaker are as follows:

A parents or needy caretaker who is determined to be a work eligible individual and required to participate in the TANF Work Program (TWP) must comply with his/her Employability Development Plans (EDP), and participate satisfactorily in their assigned work activities in order to receive TANF (TWP) child care assistance.

A parents or needy caretaker whose TANF case closes due to earned income or loss of an earned income disregard and who continues to work may be eligible for TANF Transitional Child Care (TCC) assistance for up to 24 consecutive months after their TANF case closes. The TCC 24-month eligibility period begins the month following the last month of TANF eligibility (month following TANF case closure.)

A non-needy caretaker of a child only case (ANI-adult not included) who requests TANF child care assistance for a TANF eligible child(ren) must be employed and earning wages at or above the federal minimum wage. The non-needy caretaker relative may remain eligible for TANF child care services as long as:

· TANF case remains in open status

· TANF eligible child(ren) remains in the home; and

· adult remains employed and provides continued employment verification as requested.

Full-time, part-time, or full-time/part-time child care services will be provided based on each participant's work program requirements and the type of child care selected by the parent/caretaker, i.e., licensed center, relative, non-relative, etc. Satisfactory participation is required and is based on the individual's EDP and component assignment(s). The case manager must use good judgment when allowing a parent or caretaker relative to receive child care services. If an individual fails to participate as required or voluntarily reduces the work hours, the policy and procedures for unsatisfactory participation and/or voluntary reduction in work hours must be followed and applied, if applicable.

EXCEPTION: A parent/caretaker who is participating in the Child Care Certificate Program and is employed by or placed at a licensed child care center or group home facility as a TWP volunteer may only select the same facility as his/her child care provider if his/her work assignment at the facility is not related to providing direct care for his/her own child(ren). Nor can the child(ren) be included in a group assigned to the parent/caretaker in order to maintain the adult/child ratio required by the Mississippi State Department of Health. Prior to making a TWP volunteer (AWEP) placement or upon receiving notification that a TWP participant has been hired or is working at a child care center, the case manager will contact the facility and/or the DECCD to verify whether the parent/caretaker has any child(ren) attending the facility for whom

the provider receives reimbursement utilizing TANF/CCDF funds (TWP or TCC child care certificates.) If yes, the case manager will inform the child care provider of this exception and conduct periodic site visits to ensure compliance. Cases for which the child care provider is found to be in noncompliance with this exception will be handled as follows:

· A TWP volunteer placement will be terminated immediately and the parent/caretaker will be assigned to a different work site or work activity.

· A case involving an employed participant will be reported to the DECCD electronically via email.

· A child care provider that continues to be in noncompliance will not be allowed to continue to serve as an AWEP provider and no new placements will be made.

Eligible Children

In order to be eligible for TANF child care services, a child must be:

· less than 13 years of age (eligible through the month of the 13th birthday)

· between the ages of 13 and 18 **and** meet the Supplemental Security Income (*SSI*) definition of disability by having a medically proven physical or mental condition(s) that causes marked and severe functional limitations of at least 12 months in duration and render the child incapable of self-care (Special Needs). The condition(s) must be documented by a physician or the child must be receiving SSI income. Children with special needs may be eligible through the age of 18. A special needs child will be ineligible for child care services the month following the month the child turns age 19. There is no requirement to submit social and medical information to the Medical Review Board. The special needs code on the ACRP screen must be updated from “N” to “Y” at the time the child care referral is processed;

· living with a parent or needy caretaker who is satisfactorily participating in an allowable TWP activity;

- living with a non-needy caretaker relative who is not in the assistance budget, but is employed and earning wages at or above the federal minimum wage; or

- a family cap child in a TANF case in which the parent or caretaker is satisfactorily

participating in the TWP or is employed.

Child Care Responsibilities and Parental Choice

The child care certificate program allows a parent to select child care services from a wide range of child care providers. Parents or caretaker relatives may select center-based, group home, family child care (in-home or out-of-home), and non-relative (in-home or out-of-home) provider. Providers must be licensed or approved by DECCD prior to participation in the Child Care Certificate Program. Child care providers must be at least 18 years of age and are responsible for providing a safe and secure learning environment while the children are in their care. A parent cannot be paid for taking care of their own children. Another adult living in the home with the child cannot be paid for taking care of a child living in the same home. The certificate program empowers a parent with parental choice by allowing a selection of child care services ranging from full-day to before- and after-school care.

The case manager will assist the parent/caretaker with assessing their child care needs and, upon request, provide a list of licensed and/or approved child care providers to parents who do not have a ready choice or direct the parent to the DECCD website. A list of licensed and approved child care providers is available on the DECCD website and is updated periodically by the DECCD. A parent or caretaker may also call the DECCD Child Care Express/Resource and Referral line at 1-800-877-7882 or 359-4544 to obtain a list of providers. The case manager **will not** influence a parent or caretaker to choose a particular provider.

IMPORTANT NOTE: If a parent selects a child care provider that is not licensed or approved by DECCD, the case manager will explain to the parent that the provider must complete the DECCD approval process prior to participating in the Child Care Certificate Program. A provider that is not licensed by the State Department of Health or approved by DECCD will not be reimbursed for child care services provided prior to approval. (DECCD will not issue retroactive payments.) If a participant chooses a non-approved provider and fails to participate satisfactorily in the assigned TWP activities, good cause will not be granted.

Although it is the decision of the parent to determine whether child care services are needed and the type of child care needed, the case manager may determine that child care services are not necessary using the following criteria:

1. The child is in school during the time the parent is working or participating in an approved TWP activity.

2. There is another legally responsible parent or guardian in the home who customarily cares for the child.

   Exceptions will be allowed, on a case-by-case basis, if the parent can provide documentation to substantiate the reason the "responsible" individual cannot provide appropriate child care. For example:

   a. The legally responsible adult is unable to provide adequate child care because of a disability (documented by a physician statement or receipt of SSI) or

   b. The child is at risk due to suspected abuse, abandonment or unsafe environment. Appropriate documentation (court records, police records, protective services referral forms, record of calls to the child abuse hotline, or a handwritten statement from the parent, etc.) must be placed in the parent's file.

Appropriate Child Care for TWP Participants

When a single custodial parent caring for a child under age six (6) demonstrates an inability to obtain needed child care, the TANF grant may not be reduced or terminated. The parent's demonstrated inability must be for one of the following reasons:

1. Appropriate child care within a reasonable distance from the individual's residence or worksite is unavailable.

   a. Appropriate child care will be defined as a licensed child care center or an approved family day care home or an individual (18 years old or older) chosen by the parent to care for the child.

   b. The distance shall be considered reasonable if the day care center is within a 20-mile radius of the parent's home or worksite.

2. Informal child care by a relative or under other arrangements is unavailable or unsuitable.

   a. Reasons for unavailable or unsuitable child care will be reported by the parent to the case manager. Complaints involving child abuse, neglect or an unsafe environment must be reported to the MS State Department of Health, Division of Child Care Facilities Licensure. Proper county procedures must be followed.

b. If the parent or caretaker relative refuses to take the child to a particular day care center, the individual must inform the case manager of the reason for the refusal. The case manager must assist the parent/caretaker relative with finding other child care services available in the area. The case manager will determine good cause for non-participation based on the information gathered.

3. Appropriate and affordable formal child care arrangements are unavailable.

a. Affordable child care is child care services that are equal to or less than the established rates for the type of care according to the OCY Daily Child Reimbursement Tiers.

Participant's Work Schedule

A participant's work schedule will determine the days of the week the child care provider can request payment for services provided. The valid work schedule codes that will be entered on the ACRP screen are listed below. The code entered must represent the participant's work schedule.

D – Day Shift – 6:00 a.m. – 6:00 p.m.

N – Night Shift – 6:00 p.m. – 6:00 a.m.

S - Shift Flexible – a combination of day, night, and/or weekend work.

The case manager must work closely with the worksite sponsor/employer to determine the type of work schedule the participant is expected to participate/work each week. The work schedule must be defined at the time of placement and prior to processing the ACRP screen to request child care services.

NOTE: If a participant's normal weekly work schedule is the day shift or night shift, Monday – Friday, but could include weekend (Saturday or Sunday) work, the appropriate work schedule code entered on the ACRP screen will be "S-shift" work. This will ensure the child care provider may be paid for any day of the week. The child care provider will be responsible for coding the eLedger correctly to reflect the actual days child care services were provided each week during the month. Example – A participant is placed at a site that operates seven days per week (fast food, nursing home, hospital, etc.). The participant's scheduled participation hours entered on MPAC is 30 hours per week. The participant is expected to work 6 hours per day, five days per week. The weekly work schedule is determined on a week-to-week basis and could

include any five days within a calendar week. The work schedule code entered on the ACRP screen will be "S-shift" work.

Types of Child Care Services

Two (2) types of child care services have been defined for TANF TWP and TCC participants. The case manager must determine the appropriate type of child care needed for each child based on the participant's weekly work schedule and the age of the child(ren) needing care. Anytime the type of child care services needed by the parent/caretaker changes, the case manager will process a termination (CR02) for the effected child(ren) and process a referral (CR01) for the correct type of child care services needed.

Full-time **"F"** – Is child care services for six or more hours per day and allows the child care provider to be paid up to 196 hours per month (196 ÷ 21 = 9.33 hours per day). Full-time services will be requested for:

- A child less than age 5 whose parent is participating in work program activities or working.

- A school-aged child (age 5 or older) whose parent is participating in work program activities or working non-traditional hours (6:00 p.m. – 6:00 a.m.), Monday – Friday or weekends.

Full-time/Part-time **"B"** - Is a combination of full-time and part-time child care services and allows the provider to be paid up to 114 hours per month (114 ÷ 21 = 5.42 hours per day). Full-time/Part-time services will be requested for:

- A school-aged child (age 5 or older) who attends school and needs a combination of part-time and full-time care while the parent participates in work activities or works. Part-time care will be needed after the school day ends. Full-time care will be needed when the school is closed and for the summer months.

- A child less than age 5 who attends a Head Start Center during regular school hours and needs after school care while the parent participates in work activities or works.

Child Age 13 or Older

A child age 13 or older is not eligible for child care services. The child may be eligible through

the month of the 13th birthday. A Child Care Termination Notice (CR02) must be processed no later than the 15th day of the month in which the child turns age 13 requesting that child care services be terminated on the last day of the month. This will allow the DECCD to provide a two-week notification prior to the termination date. JAWS will not allow a child age 13 or older to be selected for child care services on the ACRP screen unless the special needs code for the child is changed from "N" to "Y." Refer to Child with Special Needs for additional information.

Child with Special Needs

A child with documented special needs may receive child care services through the month the child turns age 18. The special needs code on the ACRP screen will default to "N" for all children and must be changed to "Y" by the case manager if the child has documented special needs (receipt of SSI or verified by a physician's statement). The type of child care services needed for a special needs child will be determined based on the child's circumstances (age, school enrollment, etc.) and the parent's weekly participation/work requirements.

Child Care Development Fund (CCDF) Priority Populations

The Child Care Certificate Program has four priority populations. DECCD will serve the first and second priority populations based on child care referrals processed by DEA case management. If CCDF funds are available, the third and fourth priority populations will be served on a first-come, first-served basis in order of priority.

1st Priority Population

Children of parent(s) who are in compliance with the TANF Work Program and the requirements outlined in his/her EDP (TANF TWP).

2nd Priority Population

Children of parent(s) who transition off TANF due to earned income and remain employed (TANF TCC).

3rd Priority Population

Children of very low-income working parent(s) shoes income is at or below 50% of the State Median Income (SMI) who are at risk of going on TANF, in the following order:

a. Children in Protective Services or Foster Care;
b. Children with Special Needs (up to 85% of the SMI);
c. Children of parent(s) deployed in the Mississippi National Guard, or Reserve (up to 85% of the SMI);
d. Children of Teen Parent(s) currently enrolled in high school full-time; and
e. Children of all other eligible parent(s) at this income level, including parents enrolled in an approved educational program, whether working or not.

4th Priority Population

Children of parent(s) working the required 25 hours per week and/or are enrolled in an approved educational program whose income falls above 50% of the SMI and at or below 85% of the SMI.

Authorized Child Care Providers

The following are basic Agency guidelines for selecting child care providers:

1. Center-based and group home child care providers must be licensed by the State Department of Health. **NOTE:** No payments may be made to child care centers that have been officially closed by the State Department of Health.

2. Unregulated child care providers who care for five or fewer children are exempt from licensure by the Mississippi State Department of Health. However, unlicensed providers must be approved for participation in the Child Care Certificate Program by the DECCD. The provider will not be eligible to receive reimbursement for child care services provided prior to approval by DECCD. DECCD will not issue retroactive payments.

3. Child care providers must be 18 years of age or older.

4. Parents and legal guardians cannot be paid for child care services for their own children.

NOTE: MDHS case management is not responsible for obtaining child care provider information, but will assist a parent, if requested, by directing the parent to the DECCD website where a list of licensed and approved child care providers can be accessed, and/or providing the contact information for DECCD.

Rate Assessment

Rates for all child care services are based on the child care providers' established rates charged to the general public and cannot exceed the rates of the current OCY Weekly Child Care Reimbursement Tiers.

Child care provider rates higher than allowed by the DECCD Weekly Child Care Reimbursement Tiers cannot be paid more than the maximum allowed. A parent who chooses a child care provider whose rate is higher is responsible for paying the difference, in addition to co-payment fees, if applicable. The parent is also responsible for making arrangements with the provider for paying the excess fees and the co-payment, if applicable. If the parent fails to pay the provider, the provider will notify DECCD which may cause the child care services to be terminated.

NOTE: An individual who incurs out-of-the pocket expenses for child care services, in addition to receiving child care assistance through the Child Care Certificate Program, may be eligible for a child care deduction when determining eligibility for TANF benefits.

Child Care Provider Payments

Parents/caretakers must be informed and need to understand that the TANF Child Care Program will not pay a provider for child care services provided prior to the start date or beyond the termination date of a certificate. **Case managers shall not provide verbal approval to the parent/caretaker or the provider that child care assistance has been approved and will be paid**. Verbal approval can only be provided by DECCD staff. DEA case management staff will process child care referrals (adds, terminations, and voids) accurately and timely to ensure child care services can be arranged and provider payments processed timely. When a certificate is written and mailed to the parent/caretaker, the status of the certificate is "in process." The status will not be updated to "active" until the certificate is signed by the parent and provider and returned to DECCD. If the provider selected by the parent is not licensed or approved, the certificate will remain "in process" until the provider is approved by DECCD. The provider will not receive payment for child care services provided prior to approval (retroactive payments will not be made by DECCD).

Child care provider payments are issued monthly by the DECCD. Questions concerning payments or eLedgers should be referred to DECCD at 1-800-877-7882 (toll free) or emailed to ccpayment@mdhs.ms.gov.

Parents and caretakers should notify DECCD prior to changing child care providers. The parent/caretaker is responsible for providing a two (2) week notice prior to removing a child(ren) from the provider's care, unless extenuating circumstances occur. A parent who fails to provide adequate notice may be responsible for paying the two-week termination fee charged by some providers. MDHS may not be required to reimburse providers when parents fail to give a two (2) week notification.

Child Care Expenses and Deductions

Reimbursement for TANF TWP and TCC child care services through the Child Care Certificate Program are paid directly to the child care provider. If the full child care expense is paid with TANF funds, the parent or caretaker relative cannot receive a child care deduction. If the individual incurs out-of-the pocket expenses for child care, the cost of child care may be deducted from earnings when determining TANF benefits. Use ongoing policy regarding child care verification of out-of-pocket expenses.

Child Care Certificate

Upon electronic receipt of the Referral for Child Care Services, (CR01), from case management, child care certificates are issued by the DECCD directly to parent/caretaker for the provision of child care services for eligible children. The parent/caretaker is responsible for completing and returning the certificate, along with any other required documentation to DECCD within the established time frame. The case manager will use the appropriate TANF child care information sheet (MDHS-EA-379A or MDHS-EA-379B) for completing the certificate process timely. A copy of the MDHS-EA-379A or MDHS-EA-379B will be given to the parent.

Once a child care application has been registered in MAVERICS it can be denied in MAVERICS or JAWS as follows:

1. If the Child Care (CC) Program has not been referred to JAWS (CC Program status is still in received status on CAP2 and no referral date displays on CHCS), enter a stop date equal to the application date on each individual displayed on the CHCS screen **and** in the STOP DATE field. Enter a STOP REASON (client request "CR" or registered in error "ER"), AUTH PCN and press enter.

2. Once a CC Program has been registered in MAVERICS and referred to JAWS (CC Program status is open on ICLI), JAWS will automatically close the CC Program after 30 days if no action has been taken on the case, i.e., a Referral for Child Care Services, (CR01), has not

been processed. When JAWS closes the CC Program on ICLI, JAWS will send a closure record to MAVERICS to close the CC Program on CAP2 overnight.In both situations, the worker must complete and mail MAVERICS Notice A222, TANF Child Care Denial, to inform the applicant of the action taken on the application.

Child Care Referral Notices

JAWS will automatically process the following child care notices electronically based on specific case actions taken by the case manager. JAWS will display all child care referral notices on the DPCR and DCNH screens in real time, allowing immediate access by DECCD staff for timely processing.

CR01 Referral for Child Care Services - JAWS will process and display this notice when a child care referral is successfully added on the Add Child Care Referral (ACRR) screen. It is imperative that the case manager enter data correctly on the ACRR screen. The child care certificate(s) will be issued according to the information provided on the CR01. The effective date of the child care certificate will be the child care start date entered for the child. The certificate will remain active until a Child Care Termination (CR02) is processed by the case manager.

CR02 Child Care Termination - JAWS will process and display this notice when the Terminate Child Care Referral (TCRR) screen is successfully processed. JAWS will not allow a termination date to be less than the current calendar date. Termination of child care services must be processed timely by the case manager. The DECCD is required to provide a two-week notification prior to termination. Untimely termination requests will result in excessive payments to child care providers.

CR03 Child Care Notice to Void Termination - JAWS will process and display this notice when a child care termination is successfully voided on the Void Termination Child Care Referral (VCRR) screen. JAWS will not allow a referral that has been terminated to be voided if the termination date is less than the current calendar date. When a CR03 is processed, DECCD will “reverse” the termination and continue the child care services. DECCD will notify the provider that child care services should continue for the effected child(ren) through the expiration date of the certificate or termination.

All child care referral notices are stored in the JAWS notice history file. These notices may be Viewed and printed, if necessary, by accessing the Participant Notice Selection (SPAN) screen.

Termination of Child Care Services

The case manager must monitor all child care cases to ensure the participant continues to meet all eligibility criteria and is in compliance with program requirements. If, at any time, the participant fails to comply with TANF, TWP, Child Care Program, or is no longer eligible due to TANF case closure, the case manager must process a child care termination notice (CR02) timely to notify the DECCD of the termination date and termination reason. (Refer to CR02 above.)

When the case manager becomes aware that a TANF case in which a participant is receiving child care services will close, a CR02 must be processed via the Terminated Child Care Referrals (TCRR) screen., The TCRR screen requires the case manager to enter the termination date and termination reason code. The termination date must be equal to or greater than the current calendar date. JAWS will not allow the case manager to backdate a termination. The CR02 will display on the DCPR and DCNH screens to notify the DECCD of the change in the individual's circumstance. The DECCD is responsible for allowing a two-week notification (10 working days) to the provider. The case manager will not increase the termination date by 10 working days when processing the TCRR screen.

Voiding a Child Care Termination

Should the case manager determine that child care services should be reinstated before the actual termination date, a Child Care Void Termination Notice (CR03) will be processed via the VCRR screen. JAWS will not allow the case manager to void a termination if the termination date is not equal to or greater than the current calendar date. If a termination (CR02) was processed and JAWS will not allow the termination to be voided, the case manager must process a child care referral (CR01) if child care services need to continue. In this situation, the case manager must review the child care referral history to determine the correct child care start date to enter on the ACRR screen to ensure there is not an interruption in child care services or provider payments.

EXAMPLE: On July 10 the case manager becomes aware that the TANF case will possibly close effective July 31 in JAWS. The case manager processed a termination on July 10, terminating all children effective July 31. The TANF case reverts back to open on July 20, prior to the termination date of July 31. The case manager will process a CR)# to void the termination and continue child care services.

Child Care Termination Codes

TANF child care services will be terminated for the following reasons: (Refer to the JAWS User Manual, Section 6, Chapter 13, for the termination codes or use of the PF2 function on TCRR.)

1. Moved to another state
2. TANF case closure (JAWS batch)
3. Client request termination
4. Referral entered in error
5. Work hours or component change
6. No longer employed (TCC)
7. Child no longer living in the home
8. Parent no longer a TANF recipient
9. Failure to participate satisfactorily
10. TANF case closure - increased earnings
11. TANF case closure - loss of earned income disregard
12. TCC 24-month expiration
13. Parent is no longer a TWP participant (Program status change)

Recap of Child Care Actions

The Weekly Recap for Case Manager (LWCR) screen may be used by the case manager, case manager supervisor, or management staff to view all child care actions processed by a specific case manager for a specified time period. The case manager's identification number along with the start and end dates for the time period to be displayed must be entered on the LWCR screen.

The following child care referral information processed by the case manager during the time period specified will display.

Client's Name	Client's SSN	Child(ren)'s Name	Action Type	Referral Type	Action Date

The Child Care Referral Notice History (DCNH) screen may be used to display a history of all child care referrals for a specific client. The selection number for a particular referral may be entered to view the referral details and print the referral, if necessary.

Reporting Requirements

Parents and caretakers will be informed that personal responsibility must be accepted to ensure child care services are arranged timely, work program participation is satisfactory, and all reporting requirements are met to avoid an interruption in child care services. Parents and caretakers will be required to adhere to the reporting requirements of DEA and DECCD. Reportable changes that affect eligibility for and receipt of TWP child care and TCC services will be handled by the case manager. Changes regarding child care providers will be reported to and handled by the DECCD. A child care provider change should be reported to DECCD prior to removing a child from one provider to another, unless extenuating circumstances occur.

NOTE: If TCC co-payment fees are owed, a TCC certificate may not be issued for the new provider until the fees are paid in full or suitable arrangements are made with the previous provider.

Reporting Changes

All reportable changes as required by DEA and/or DECCD should be reported according to each division's policy, or within 10 days of the reportable change. Reportable changes include, but are not limited to the following:

1. Change in Number of Children

   When TANF child care assistance (TWP or TCC) is needed for a child that was not included on the TANF Child Care Application, MDHS-EA-379, the parent or caretaker must complete a MDHS-EA-900 supplement to request child care services for the child. The Participant Contact Record (PACR) screen in JAWS should also be used to document the case record accordingly. If the child to be added to the Child Care Certificate Program is not known to MAVERICS, the child must be CLIMed into the Child Care Program and referred to JAWS via the Child Care Summary (CHCS) screen in MAVERICS. The case manager must then process a Referral for Child Care Services (CR01) for the child by selecting the child from the Add Child Care Referral Pop-Up (ACRP) screen. The child added for TCC services may be eligible for the months remaining in the family's TCC 24-month eligibility period.

2. Change in Employment (Income or Hours)

   A parent/caretaker of a child(ren) receiving TANF TWP child care or TCC services is required to report a change in wages and/or work hours to the case manager. However, if a

change becomes known to the case manager, a Change in Child Care Services (CR04) should be processed.

3. Change in Child Care Providers

Child care provider changes are handled by the DECCD, not the case manager. The parent should report the change to DECCD prior to removing a child from the current provider's care unless extenuating circumstances occur. The parent/caretaker must provide the reason for the change. The DECCD is required to provide a two-week notification (10 working days) prior to terminating a certificate. A parents or caretaker who fails to provide timely notification, may be responsible for paying the two-week termination fee, if applicable.

Parental Complaints

The DECCD is responsible for maintaining a record of substantiated parental complaints and information regarding such parental complaints is made available to the public upon request.

Complaints may be received from parents regarding a violation of licensing requirements or an incidence of alleged abuse or neglect of a child by a care giver. At no time will DECCD or DEA be involved in the investigation of a child abuse/neglect report. The DECCD will not discontinue issuing certificates for child care services to a provider when a child abuse/neglect report has been received, unless advised to do so by the Child Care Licensure Branch of the Mississippi State Department of Health (MSDH) or the Division of Family and Children's Services.

- If the complaint is about a licensed child care center for a licensing violation or alleged abuse or neglect of a child by a care giver, the parent is referred to the Child Care Licensure Branch, (MSDH) at 576-7612 or 1-800-737-7613.

- If the complaint is from a parent who alleges abuse or neglect of a child by a care giver in a family child care home or by an individual, the parent is referred to the Protective Services Unit, Division of Family and Children's Services at 359-4999 or 1-800-553-7545.

Head Start Centers

Extended child care services may be available through Head Start organizations around the State. These services include extended day services, some after-school and summer child care for Head Start children whose parents are actively participating in the TANF Work Program. At the

individual's request, the case manager will provide Head Start organizations with a completed MDHS-EA-365/565, Resource Service Referral Notice, to provide documentation of the family's active TANF status. The case manager is urged to fully utilize these services as an additional source of quality child care for TANF Work Program participants.

TANF TWP CHILD CARE (Open TANF Cases)

TANF TWP child care is the 1st priority group to receive child care services. TANF TWP child care is available to TANF recipients who are required to participate in the TANF Work Program. Child care expenses for children of TWP participants will be paid at 100 percent, unless the parent or caretaker chooses a provider that charges more than the rate allowed by the DECCD. Good coordination and communication between the case manager, the DECCD, the participant, and the provider are critical in eliminating child care as a barrier to participation in the TANF Work Program.

Arrangement of TANF Child Care Services for TWP Participants

A parent/caretaker must successfully complete the TWP intake process (orientation, assessment, EDP, component assignment, etc.) and the need for child care assistance must be determined before the case manager will process a Referral for Child Care Services (CR01). The case manager must consider the child care referral process and the time required to complete the DECCD certificate process when determining the expected start date for the participant's component assignment. The case manager will use the following procedures to arrange child care services for a TWP participant:

1. Upon completion of the TWP intake process (orientation, assessment and EDP), assign the TWP participant to the appropriate allowable work activity. If child care services are needed, the TWP participant must complete a TANF Child Care Application, MDHS-EA-379. An application for TANF TWP child care services is not approved or denied in JAWS. The application must be scanned to the participant's electronic case record.

2. If the Child Care Program has not been registered in MAVERICS, the case manager must contact the clerk to have the Child Care Program registered.

3. The clerk will register a Child Care Program in MAVERICS via the REAP or REGO screen.

4. The eligibility worker or case manager will CLIM the eligible child(ren) into the Child Care program and refer the case to JAWS via the CHCS screen in MAVERICS.

NOTE: Due to the overnight referral process between MAVERICS and JAWS, A CR01 cannot be processed on the same day the Child Care Program is registered in MAVS..

5. The case manager will process a child care referral (CR01) via the ACRR screen. The child care start date may be entered for each child. JAWS will ;allow the child care start date to be backdated up to 30 days from the current calendar date, if necessary.

NOTE: System edits are in place to prohibit the case manager from entering a child care start date that is greater than 30 days prior to the current calendar date or entering a termination date that is prior to the current calendar date, etc.

6. The DECCD will process the CR01 and mail a child care certificate packet to the parent/caretaker relative.

7. The parent is responsible for returning the completed certificate, along with any other required documentation, to the DECCD within the established time frame.

8. Upon receipt of the completed certificate, the DECCD will activate the certificate.

Exempt Volunteers

A work eligible individual who is exempt (JJ-caretaker of child under 12 months or JV-domestic violence) from TWP work requirements and request TANF child care assistance must be referred to the work program as an Exempt Volunteer. An individual who is approved for the JK code (third trimester of pregnancy) will not be allowed to become an exempt volunteer.

Component Assignment

The case manager must review all TWP cases no less than monthly and develop a plan of action to transition TWP participants from one component assignment to another timely. A TWP participant should not be placed in H-holding more than three working days. This will ensure TANF supportive services are utilized correctly.

After the close of business on the 15th day of each month, JAWS will identify all participants whose component assignment with an Expected End Date that is on or prior to the last day of the

following month and send an alert to the case manager. When the "Review Component Expected End Date and Supportive Services" alert is received, the case manager will review the case and take appropriate action(s), e.g., extend the expected end date, close the component, set up a conciliation, review ongoing eligibility for TANF supportive services, and process a CR02 to terminate child care services, if applicable.

JAWS will display a message on the MPAC screen if the component's Expected End Date is less than the current calendar date. When the "Expected End Date Has Expired You Must Review Case" message is received, the case manager must review the case and take the appropriate case action(s), e.g., extend the component expected end date, close the component, add a new component, add a conciliation record, or process a CR02, to terminate child care services, etc.

Arrangement of Child Care Services for Tribal TWP Participants and Child-Only Cases

The case manager will use the following procedures for arranging child care services for TANF (TWP) tribal participants and child-only cases:

1. The parent or caretaker requesting child care services must complete a TANF Child Care Application, MDHS-EA-379.

2. The clerk/worker will register the Child Care Program in MAVERICS, CLIM the eligible children into the child care program and refer the case to JAWS. The MDHS-EA-379 will be scanned to the electronic case record.

3. The clerk will refer the parent or caretaker relative to case management on the same day the application is completed.

4. The case manager will ensure the individual is eligible for child care services.

Arrangements for child care services for Tribal TWP participants and Child-Only Cases will be the same as State TWP participants, with the following exceptions:

Tribal TWP Participants

3. A work program component of CHW/CHC must be opened in JAWS for Tribal TWP participants in order to process a Referral for Child Care Services (CR01). Eligibility for child care services may continue as long as the TANF case is open. MDHS does not receive work program information from the Tribe.

2. When tribal participants transition off TANF and apply for TCC, a work program component of CHW/TRN must be added in JAWS.

NOTE: The TANF TWP child care services must be terminated prior to processing a TCC child care referral.

Tribal TWP participants are only eligible for TANF TWP child care and TCC services. A Tribal participant is not eligible for any other TANF supportive services, i.e., TWP transportation, work related expenses, or transitional transportation.

Child Only Cases for Non Needy Caretaker Relatives

A TANF child only case in which the PI (adult) is employed may be eligible for TANF TWP child care assistance. Child care services may continue as long as the child is a TANF recipient and the non-needy caretaker is employed. A non-needy caretaker relative is not eligible for any other TANF supportive services, i.e., TWP transportation, work related expenses, transitional child care, or transitional transportation assistance. The PI (adult) of the child-only case must be employed and earning wages at or above the federal minimum wage before a TANF TWP child care referral will be processed. If there are two adults in the home, there are no work requirements for the second adult. Child care services for a child in child-only cases may be paid 100 percent unless the non-needy caretaker chooses a child care provider that charges more than the rate allowed by DECCD.

When a non-needy caretaker relative applies for TANF TWP child care assistance, the Child Care Program will be registered in MAVERICS and referred to JAWS. The case manager will verify the PI's employment and the work hours via a minimum of two check stubs received in the past 30 days. One check stub will be used if the individual is paid monthly. If the individual is employed and earning wages at or above the federal minimum wage, the case manager will:

1. Complete the TWP intake screens

2. Assign the individual to the ANI/CHC component with an expected end date that coincides with the next regularly scheduled TANF case review

3. Process a child care referral (CR01) via the ACRR screen.

4. Explain the child care referral process and inform the non-needy caretaker that personal responsibility must be accepted, and the certificate process completed timely. Form MDHS-

EA-379A will be given to the PI and used by the case manager as a guide to provide thorough explanations about the Child Care Certificate Program.

5. Inform the non-needy caretaker that continued employment must be verified at each regularly scheduled TANF case review or as requested by the case manager.

6. Inform the non-needy caretaker that the TANF Child Care Program will not pay a provider for child care services provided prior to the start date or beyond the termination date of an "active" certificate.

No further action is required by the case manager until the non-needy caretaker's next regularly scheduled TANF case review appointment, unless the TANF case closes or it becomes known to the Agency that the individual is no longer employed. In both of these situations, the case manager will process child care termination (CR02).

At each TANF case review appointment, the case manager will verify continued employment via a minimum of two check stubs received in the past 30 days. If the individual continues to be eligible for child care services based on the PI's employment status and the TANF case status, the case manager will update the expected end date of the ANI/CHC component to coincide with the next regularly scheduled TANF case review.

After the close of business on the 15th day of each month, JAWS will identify all component assignments with an Expected End Date that is on or prior to the last day of the following month and send an alert to the case manager. When the "Review Component Expected End Date and Supportive Services" alert is received for an ANI case, the case manager will view the case, begin the case review process, and take appropriate action(s), e.g., extend the expected end date, close the component, review ongoing eligibility for child care services, process a CR02, if applicable, etc. If the individual remains eligible for child care assistance, the case manager will update the Expected End Date of the ANI/CHC component to coincide with the next regularly scheduled TANF case review.

TRANSITIONAL CHILD CARE (TCC) – Closed TANF Case

Transitional Child Care does not have a lifetime maximum. TCC services are available for up to 24 consecutive months each time a family loses TANF benefits because of increased earnings or loss of an earned income disregard (TANF Basic) or for increased work hours (TANF-UP only). The TCC 24-month eligibility period begins the month after the TANF benefits end and cannot exceed 24 consecutive months. A family needing TCC services must complete a

TANF Child Care Application, MDHS-EA-379, within 30 days after the TANF case closes.

When a TANF case is subject to closure due to increased earnings or loss of an earned income disregard, the family will be notified of the availability of and eligibility requirements for receiving TCC services via MAVERICS Notice A802. A transitional services appointment must be scheduled no later than ten days after the TANF case closes. The A807 also informs the individual that check stubs received during the month specified must be provided at the appointment. These check stubs will be used to verify continued employment and eligibility for TCC services (no minimum work hours are required for TCC). The case manager will use MDHS-EA-379B (TCC informational sheet) as a guide to provide thorough explanations about the TCC referral process and the Child Care Certificate Program. A copy of the MDHS-EA379B will be given to the parent/caretaker.

TCC Eligibility Determination

Eligibility for Transitional Child Care (TCC) will be determined by the DEA. A family must meet all of the following eligibility criteria to be approved for TCC services.

1. The parent/caretaker relative must be referred to and in compliance with TANF Work Program (TWP) requirements at the time of TANF case closure;

2. The TANF case closure reason must be earned income (increased earnings or loss of an earned income disregard);

3. The parent/caretaker relative must complete a TANF Child Care Application, MDHS-EA379, within 30 days from the TANF case closure date;

4. The parent/caretaker relative must be employed at the time of application for TCC and provide appropriate employment verification; and

5. The eligible child(ren) must be living in the home with the parent/caretaker relative.

NOTE: Eligibility for TCC services does not require a minimum weekly work requirement. A non-needy caretaker for a child only case (ANI) is not eligible for TANF transitional services including TCC.

Compliance with Child Support Enforcement

Compliance with Child Support Enforcement (CSE) is an eligibility requirement for receiving TCC services (but not transitional transportation). Compliance with CSE will be verified by the DECCD worker via METSS, not the DEA worker. If a parent is found to be in noncompliance with CSE requirements, the DECCD worker will inform the DEA worker electronically via email. Upon receipt of the email, the DEA worker will process a termination (CR02) for the TCC referral. Communication between DECCD workers and DEA workers will be handled electronically via email or fax. However, if it is known to the Agency (via disqualification in the SNAP Program) that a TCC applicant is in on compliance with CSE at the time a TCC application is processed, the DEA worker will deny the TCC application accordingly. The denial reason code entered on the TCC screen will be "CS-noncompliance with Child Support Enforcement."

Continued Employment Verification

A parent/caretaker of a child receiving TCC services is required to provide continued employment verification as requested by the case manager but not less than every three months. The case manager will send a request for information notifying the parent/caretaker that check stubs for the month indicated must be provided by the due date indicated, but not later than the 10th of the month following the end of each quarter. Documentation provided will be used to determine ongoing eligibility for TCC services. If employment terminates for any reason, the time lapse between jobs (from actual end date to actual state date) cannot exceed 30 calendar days for TCC eligibility to continue. If the family fails to meet the policy requirements or TCC eligibility is lost for any reason, the case manager will process a child care termination (CR02) for all children receiving TCC.

Application for TCC Services

A family needing TCC services must complete a TANF Child Care Application, MDHS-EA379, within 30 days after the TANF case closes. The case manager will process the TCC application within three (3) days from the date received. The TCC application will be denied or approved via the Transitional Child Care Authorization (TCCA) screen in JAWS. JAWS will not allow a TCC referral to be processed if the TCC application has not been approved via the TCCA screen. This policy will allow a seamless transition from TWP child care to TCC services with no interruption in child care services or payments to providers.

TCC Approval/Denial

Applications for TCC must be approved (CR06) or denied (CR07) in JAWS via the TCCA screen within three working days. The check stubs requested via MAVERICS Notice A807, Appointment for Transitional Services, will be used to determine the employment status for approving or denying the TCC application. The TANF Program status must be CL-closed and the CC Program status must be OP-open on the ICLI (JAWS) and CAP2 (MAVERICS) screens in order to process the TCCA screen. If the TANF Program status is OP-open on ICLI, the TCCO screen must be processed before JAWS will allow the TCCA screen to be processed. When the TCCA screen is successfully processed to approve or deny an application, JAWS will automatically process the TCC Approval Notice, CR06, or TCC Denial Notice, CR07, accordingly. When a TCC application is approved, the case manager will add the UNS/TRN component, if required, and add the TCC referral in JAWS. (One TRN component is required to track all TANF transitional services.) When a TCC application is denied and a CR07 is processed, JAWS will automatically close the CC Program on the ICLI screen and send a CC Program closure record to MAVERICS (overnight). When a TCC application is approved on the TCCA screen, the TCC Program Status will display OP-open on ICLI.

EXAMPLE: The TANF case closed in 12/11, effective for 01/12 due to earned income. The family's 24-month TCC eligibility period is 01/01/12 through 12/31/13. The parent/caretaker must complete a MDHS-EA379 by the close of business on 01/30/12. An application received after 01/30/12 will be denied.

Child Care Start Date for TCC Services

JAWS will allow the TCC start date to be back dated up to a maximum of 45 days from the current calendar date (up to 30 days for TWP child care services). A child care referral for TCC services must be "attached" to a UNS/TRN component assignment. The case manager must view the Inquire Child Care Referral History (ICRH) screen and verify that the TWP child care referral has been terminated, if applicable.

Transition from TWP to TCC

To ensure there is no interruption in child care services, the process for transitioning the family from TANF Work Program (TWP) child care to Transitional Child Care (TCC) services must be handled timely.

1. The case manager will process a Child Care Termination (Cr02() notice to terminate all

active children. The child care termination date will be the last day of the last TANF benefit month. The DECCD is responsible for giving the child care provider a two-week notice.

2. If the TANF Program Status and the CC Program Status are "Open" and a date is displayed in the CC Program Status Date field on the ICLI screen in JAWS, the case manager must access the Transitional Child Care Override (TCCO) screen and enter the TCC eligibility date and the TANF closure date. When the TCCO screen is successfully processed, JAWS will allow the case manager to add a UNS/TRN component and process a Referral for Child Care Services (CR01) for TCC services.

Referral for TCC Services

When a TCC referral (CR01) is processed, the case manager will enter the gross wages, net wages, wage date, and pay frequency using one check stub received in the previous 30 days. The case manager will review the check stubs provided at the transitional services appointment with the individual to determine if the wages reflect a normal pay cycle. Only one check stub will be used to enter the wage information on the ACRR screen. The case manager will use the check stub which most accurately reflects a normal pay cycle. The case manager will review the date entered on the ACRR screen before completing the screen to ensure all entries are correct.

JAWS Batch Closures

There are two situations in which JAWS will automatically close the TCC and CC programs on the ICLI screen and send a CC Program closure record to MAVERICS.

1. If a TCC referral (CR01) is not processed within 30 days from the TCC approval date.

2. When the last TCC child is terminated.

In the above situations, JAWS will use "NC-no referral added within 30 days" or "LC-last child terminated" as the closure reason code. JAWS will automatically process a TCC Closure Notice (CR08) to inform the parent/caretaker relative of the TCC closure reason.

TCC 24-Month Eligibility Period

The first month in the 24-month TCC eligibility period will be the month following the last TANF benefit month. TCC child care services are not guaranteed for 24 months. If employment is terminated for any reason, the parent must start a new job within 30 days from the termination

date of the previous job to remain eligible for TCC. If TCC eligibility is lost, the individual must regain eligibility for TANF and transition off TANF due to earned income before a subsequent application for TCC can be approved. TCC does not have a lifetime maximum. A family can be approved for more than one TCC 24-month eligibility period.

TCC 24-Month Counter

JAWS will use the TCC 24-Month Counter Notice, CR09, to inform the parent/caretaker relative that the family's TCC 24-month eligibility period will expire soon. JAWS will run a batch program on the 10th of every month to identify cases with three (3) months remaining in the TCC 24-month eligibility period. JAWS will identify cases to be notified by selecting all cases where the CC and TCC programs are open and the TANF Program has been closed for 21 months or more. JAWS will automatically process a CR09 for any case identified that has not previously been sent a CR09 (only one notice will be sent for each case).

Case Manager Alerts

When a CR09 is generated, JAWS will send an alert (CR09 sent for client ID) to the case manager. JAWS will also send an alert (TCC eligibility will expire-terminated TCC services) to the case manager when the CC and TCC programs are open and the TANF Program has been closed for 23 months or more.

Co-Payment for TCC Services

Transitional Child Care services for a TWP participant who transitions off TANF is not paid at 10 percent. A family receiving TCC services will be assessed a monthly co-payment fee of $10 regardless of the number of children receiving TCC services. Co-payment fees are assessed per family unit, not per child, and reflect a monthly rate regardless of attendance. The parent is responsible for making arrangements with and paying the monthly co-payment fee directly to the child care provider. TCC services may be terminated if the family fails to pay the monthly co-payment fee.

Note: Active TANF (TWP) parents, needy caretakers, and non-needy caretaker relatives are not assessed a co-payment fee for TWP child care services.

Newborn Child Needing TCC Services

A child born during the TCC 24-month eligibility period may receive TCC services for the

number of months remaining in the family's 24-month eligibility period, if any. The parent must complete a MDHS Supplement to the Application for TANF, SNAP or Child Care Certificate Program, MDHS-EA-900 supplement, to request TCC services for the newborn child. The newborn child must meet the definition of a TANF eligible child and be living in the home. If eligible for TCC, the newborn child must be CLIMed in the Child Care Program and referred to JAWS (overnight) via the CHCS screen in MAVERICS. The worker will scan the MDHS-EA900 Supplement to the case record and electronically notify (email) the case manager, if necessary, that TCC services have been requested for a newborn child. The case manager will process a TCC referral (CR01) in JAWS for the new child. TCC services cannot exceed the family's 24-month eligibility period for any child.

EXAMPLE: The TANF case closed in 12/10, effective for 01/11 due to earned income. The family's 24-month TCC eligibility period is 01/01/11 through 12/31/12. The parent/caretaker completed a MDHS-EA-379 on 01/10/11 requesting TCC for two children. A TANF eligible child was born on 11/15/11. The parent completed a MDHS-EA-900 Supplement on 01/08/12 requesting TCC for the newborn child. The TCC eligibility period for the newborn is 01/12 – 12/12 (a maximum of 12 consecutive months).

TCC Notices (JAWS)

JAWS will utilize the following notices to support the Child Care Program for TCC services:

CR06 - TCC Approval Notice (CR06) will be processed by JAWS when a TCC application is approved and AP is entered on the TCCA screen. The CR06 will indicate the first month in the family's TCC 24-month eligibility period, and inform the parent/caretaker of the requirements for continued TCC eligibility. When TCC is approved via the TCCA screen, the TCC Program Status will display OP-open on ICLI. TCC that has been approved cannot be denied, but may be closed.

CR07 - TCC Denial Notice (CR07) will be processed by JAWS when a TCC application is denied and DE is entered on the TCCA screen. The CR07 will inform the applicant of the denial reason. JAWS will close the CC and TCC programs on ICLI and send a closure record to MAVERICS. TCC cannot be denied if all children are not terminated with a past termination date (current system date or prior, cannot be a future date).

CR08 - TCC Closure Notice (CR08) will be processed by JAWS when the TCC program is closed and CL is entered on the TCCA screen. The CR08 will inform the applicant

of the closure reason. JAWS will close the CC and TCC programs on ICLI and send a closure record to MAVERICS. TCC cannot be closed if all children are not terminated with a past termination date (current system date or prior, cannot be a future date).

CR09 - TCC 24-Month Counter Notice (CR09) will be processed by JAWS when the CC and TCC programs are open, and the TANF Program closure date is equal to 21 months or more. When a CR09 is processed, JAWS will send an alert (CR09 sent for client – ID) to the case manager.

The CR06, CR07, CR08, and CR09 notices will be saved to notice history. The notices can be viewed and printed, if necessary, from the Participant Notice Selection (SPAN) screen.

JOB RETENTION BONUS PAYMENTS (Transitional Service Only)

EFFECTIVE FEBRUARY 15, 2012, JOB RETENTION BONUS PAYMENTS WILL NO LONGER BE OFFERED TO FORMER TANF WORK PROGRAM (TWP) PARTICIPANTS, AN APPLICATION FOR JOB RETENTION BONUS PAYMENTS, MDHS-EA-360, RECEIVED ON OR AFTER THIS DATE WILL BE DENIED.

An individual approved for job retention bonus payments prior to February 15, 2012, may receive all five bonus payments according to the payment schedule outlined below, as long as the individual continues to meet all of the eligibility criteria. If the individual becomes ineligible prior to receiving all five bonus payments, the individual cannot subsequently regain eligibility or receive payment for any unpaid bonuses. The individual's signature on the application, MDHS-EA-360, will serve as documentation that the case manager thoroughly explained the eligibility criteria and reporting requirements, and serves as attestation to the applicant's understanding.

Job retention bonus payments are limited to a lifetime maximum of $3000 payable in five (5) payments over a 24-month period. The payment schedule for the five payments is outlined below. Each bonus payment can only be paid one time, per participant.

B1 - $ 200 after **97 days** of employment
B2 - $ 400 after **187 days** of employment
B3 - $ 600 after **277 days** of employment
B4 - $ 800 after **457 days** of employment
B5 - $1000 after **737 days** of employment

RB Program Status

An individual currently approved to receive job retention bonus payments will have an RB Program status of "OP-open" displaying on CAP2 in MAVERICS and ICLI in JAWS. If eligibility is lost, the worker will close the RB Program in JAWS via the Retention Bonus authorization (JRBA) screen. When the RB Program is closed, JAWS will automatically process a closure notice (RB02) to inform the individual of the closure reason, update the Rb Program status on ICLI to "CL-closed," and send a closure record to MAVERICS.

NOTE: The JRBA screen cannot be processed if the RB Program was not registered in MAVERICS and referred to JAWS.

Minimum Requirements

The purpose of job retention bonus payments is to encourage job retention when employment causes a TWP participant to become ineligible for TANF benefits. The following minimum requirements must be met before an individual can be approved and bonus payments issued:

1. The individual must have been referred to JAWS for participation in the TANF Work Program prior to TANF case closure; and

2. The TANF case must have been closed because of increased earned income or loss of the three or six-month earned income disregard; and

3. The individual must have applied within 30 days of TANF case closure, and been approved prior to February 15, 2012.

4. The actual start date of the TRN component must be within seven calendar days of the TANF case closure date.

5. The individual must have a TANF eligible child, who is under the age of 18 that was included in the TANF case, living in the home. The eligible child cannot be replaced with another child who was not included in the TANF case at the time of case closure; and

6. The unsubsidized job placement must be an average of 30 hours or more per week at or above the federal minimum wage; and

7. The individual must provide continued employment verification (check stubs) by the 10th of the month following the last month of each three-month attendance projection period, at a minimum, or as requested by the worker; and

8. The time lapse between the ACTUAL END DATE of one transitional job placement and the ACTUAL START DATE of the subsequent transitional job placement cannot be greater than 30 calendar days.

NOTE: The 30-day time lapse does not apply to the initial transitional (TRN) job placement. The actual start date of the initial transitional (TRN) component cannot be greater than seven calendar days from the TANF case closure date. Example: The TANF case closed May 31, 2009. The actual start date of the TRN component cannot be greater than June 7,

2009. The actual start date of subsequent TRN job placements cannot be greater than 30 calendar days from the actual end date of the previous TRN component.

Individuals will lose eligibility for job retention bonus payments if they fail to meet any of the minimum requirements listed above. If eligibility is lost, any unpaid payments will not be paid.

Payments

Job retention bonus payments will be processed in JAWS and posted to the individual's MasterCard account. The "RB" program status must be open on the Client Information Inquiry (ICLI) screen in JAWS before a bonus payment can be authorized. Authorization of bonus payments is a case manager function and is based on attendance data entered in JAWS. JAWS will not allow the worker to process a bonus payment prior to the defined payment schedule or if the attendance data is not up to date for the bonus being processed. Refer to the JAWS User Manual, Chapter 13, Section 3, for additional information. For SNAP purposes, bonus payments will be considered as unearned income.

JAWS will not allow the case manager to authorize a bonus payment if the average weekly work hours are less than 30. Anytime a specific bonus payment is deemed ineligible for payment by the JAWS system due to insufficient hour, the worker will generate the Job Retention Bonus Payment Denial, RB04, notice to notify the individual that payment for that specific bonus was denial. The RB04 notice can only be generated from the Maintain Client Bonus Payments (MBNS) screen.

NOTE: Improper payments cannot be created for job retention bonus payments. If an underpayment occurs, the case manager will enter all pertinent information in JAWS and process the payment accordingly. Bonus payments are considered non-assistance and cannot be recovered or recouped from future bonus payments.

Notices

The eligibility worker/case manager will complete and mail the following MAVERICS notices when appropriate:

- **RB02, Job Retention Bonus Case Closure**, will be sent to the participant when it is determined that the individual no longer meets the requirements of the job retention bonus program and the "RB" program will be closed.

- **RB04, Job Retention Bonus Payment Denial**, will be sent to the participant when it is determined that the average weekly work hours are less than 30 hours per week and that specific bonus payment will be denied.

- **RB05, Job Retention Bonus Final Payment**, will automatically be generated by the JAWS system when the final job retention bonus payment has been processed on the MBNS screen.

The RB02, and RB04 will be initiated by the case manager and sent to the individual at the appropriate time. The RB05 is a system generated notice.

Tracking

Individuals approved for job retention bonus payments will be tracked in JAWS under the transitional component for unsubsidized employment (UNS/TRN). If the individual applies for other TANF transitional supportive services, i.e., transitional work stipends and/or transitional child care, one UNS/TRN component assignment will be used to track attendance data for all TANF transitional services.

JAWS System Calculation

All job retention bonus payments will be processed in JAWS at the appropriate time. The case manager will not rely on manual calculations to determine eligibility. Each bonus payment will be authorized or denied based on the system calculation. If all eligibility requirements are met, JAWS will allow the case manager to authorize and pay the bonus. If the individual is not eligible, JAWS will display the appropriate error message and the case manager will take the appropriate case action. Policy requires the actual start of the UNS/TRN component to be within seven (7) days of the TANF closure date displayed on the MPAS screen. Therefore, seven additional days are built into the JAWS calculation process.

Example: **B1 - $ 200** after **97 days** of employment
JAWS will not allow the bonus to be processed until after all attendance data has been entered through the week in which the 97th day falls.

The JAWS calculation process consists of the following steps:

1. JAWS verifies that the ACTUAL START DATE of the UNS/TRN component is within seven (7) days of the TANF closure date displayed on the MPAS screen and

2. JAWS determines the start and stop dates of the bonus being processed, i.e., 90 + 7; 180 + 7; 270 + 7; 450 + 7, or 730 + 7. The start date is the ACTUAL START DATE of the component and the stop date is the last day of the week in which the 97th, 187th, 277th, 457th or 737th day falls and

3. JAWS adds the actual attendance hours entered from the start date through the stop date and divides the total hours by the number of weeks in that specific bonus period to determine the average weekly hours and

4. JAWS will allow the case manager to authorize the bonus payment if attendance has been entered for the appropriate number of days and the average weekly hours are equal to or greater than 30 or

5. JAWS will display the appropriate error message to indicate the reason the bonus payment cannot be processed.

MILITARY LEAVE (Transitional Service Only)

Military Leave is a provision to ensure individuals who have transitioned off TANF and are receiving work stipends do not lose eligibility if they are ordered to active duty and comply with the reemployment constraints of the Uniformed Services Employment and Reemployment Rights Act (USERRA).

Individuals receiving work stipends, who are called to active military duty, shall remain eligible to receive stipends once they are discharged and return to work in accordance with the USERRA constraints. Continued eligibility will be based on the following:

1. The individual must provide advance notification (written or verbal) to the employer regarding leave to perform active military service.

2. The individual must provide a copy of the orders to report to active duty to verify the active duty start date.

3. The individual must provide a copy of the discharge orders or form DD-214 to verify the active duty end date.

4. The individual must have been discharged/released from service under honorable or general conditions.

5. The individual must go back to work (reemployed with previous employer or finds another job) in accordance with the time constraints prescribed by the Uniformed Services Employment and Reemployment Rights Act (USERRA), Chapter 43 of the Title 38, U. S. Code. Reemployment is strictly based on the duration of the uniformed service. Periods of military service and the time constraints are as follows:

   a. Up to 30 days - the individual must report back to work at the next regularly scheduled shift on the day following release from the military, safe travel home, and eight hours of rest.

   b. 31-180 days - the individual must apply (make reemployment intent known to the employer) for reemployment within 14 days following release.

   c. 181 days or more - the individual must apply for reemployment within 90 days after release.

USERRA only requires the individual to make reemployment intent known to the employer. However, in order to remain eligible for job retention bonus payments, the individual must apply and return to work within the time frames listed above. If there is more than a 30-day time lapse between the ACTUAL END DATE of the UNS/MIL and the ACTUAL START DATE of the UNS/TRN components, the individual is not eligible to resume job retention bonus payments.

6. The individual must work an average of 30 hours per week at or above the federal minimum wage

7. There must be a TANF eligible child (under age 18) in the home, who was included in the TANF case at the time the case closed.

Closing UNS/TRN Component and Transitional Transportation Program for Military Leave

The USERRA requires the individual to provide advance notification of upcoming military service of any type to the employer. To remain eligible for transitional work stipends, the individual must also provide a copy of the orders to report to active duty to verify the active duty start date to the case manager.

The military leave "ML" component completion code will be used to close the UNS/TRN component in JAWS when a transitional individual reports for active military duty. The "ML" code can only be used to close a UNS/TRN component. JAWS will not allow the "ML" code to be used for any other component/session combination. Once the individual provides appropriate documentation of the requirement to report for active military duty, the case manager will:

1. Close the UNS/TRN component using "ML" as the component completion code and enter remarks accordingly in JAWS on the MPAC screen, e.g., ordered to report for active military duty effective August 19, 2004.

2. Close the Transitional Transportation Program (TT) and/or Transitional Child Care Program (TCC), if applicable. The case manager will generate the Transitional Transportation Closure Notice (TTO3) on the TSNO screen and the Child Care Referral Termination (CR02) notice on the TCRR screen in JAWS. Refer to the JAWS User Manual Section 6 (Child Care) and Section 9 (Transportation) for system procedures.

3. Inform the individual that eligibility for transitional work stipends may continue if the appropriate documentation (DD-214 form, endorsed orders or a letter from the commanding officer and employment verification) is submitted within the USERRA time constraints and state eligibility policy. Refer to Chapter 10, Transitional Work Stipends for the eligibility criteria.

Procedures Following Honorary Discharge/Release from Active Military Duty

The USERRA provides clear military absence (from employment) protection for all members of the uniformed services who receive honorary discharge/release. When the individual is discharged from active duty, a copy of the discharge orders or form DD-214 to verify the active duty end date must be provided to the employer and the case manager. Time spent on active military leave from employment will not count against the individual when calculating work stipends. Upon receipt of proper documentation (military discharge orders or form DD-214 and employment verification) that the individual has been discharged and returned to work within the time constraints prescribed by the USERRA:

1. The individual must complete a new application(s) for transitional work stipends;

2. The worker will register the Transitional Transportation (TT) program in MAVERICS, if the benefits are requested; and

3. The case manager will determine eligibility for transitional work stipends. If the individual is eligible, the case manager will add a new UNS/TRN component, enter attendance and monitor participation, and authorize transitional work stipends for the individual. The individual must meet all eligibility requirements for receiving transitional work stipends prior to approval or authorization of benefits.

Official documentation of the military orders (report and discharge) or form DD-214, along with the manual calculation of the military start and end dates must be clearly documented on the PACR screen in JAWS. The reemployment verification, along with the military discharge verification must be maintained electronically in the TWP Temporary Documents folder.

Reestablishing Eligibility for Transitional Services

After the individual is discharged and provides appropriate documentation of discharge from active military duty and reemployment, the case manager will:

1. Manually determine the military leave start and end dates, based on the USERRA and State policy and the reemployment start date, **prior** to continuing the JAWS process. **NOTE**: The case manager will not automatically use the date preceding the reemployment date as the military end date.

2. Access the MPWA screen and enter the military leave start date in the EXP START DATE field and end date in the EXP END DATE field for the UNS/MIL component in JAWS. The case manager will also enter CME in the PLACED BY field. **NOTE:** When the MPWA screen is accessed, JAWS will automatically populate the PGM COMP CODE field with UNS and SESSION TYPE field with MIL if the previous component (UNS/TRN) closure code was "ML." The case manager is not required to add a provider for UNS/MIL into the JAWS inventory.

3. Complete the required fields and press ENTER. JAWS will automatically display the MIL RECORD ADDED SUCCESSFULLY PRESS PF12 FOR TRN PROVIDER message. Press PF12 to access the SCOS screen. Locate and select the appropriate TRN provider (employer) and press ENTER to return to the MPWA screen. **NOTE:** Provider selected must have an open TRN session.

4. On the MPWA screen, change the action code to "A" and enter the expected start and end dates, expected hourly wage and scheduled participation hours and press ENTER to display the RECORD ADDED SUCCESSFULLY message. **NOTE:** When the MPWA screen is accessed, JAWS will automatically populate the PGM COMP CODE field with UNS and SESSION TYPE field with the TRN.

5. Access the SPAC screen, select the UNS/TRN component, press ENTER and complete the component assignment process on the MPAC screen. **NOTE:** The UNS/MIL component will display on the SPAC screen.

6. Add the transitional work stipend record in JAWS. **NOTE:** The Transitional Transportation (TT) program must be registered in MAVERICS.

7. Enter attendance and resume authorization of transitional work stipends according to policy and procedures.

JAWS will automatically prompt the case manager to add the UNS/MIL component for an individual whose last component assignment was UNS/TRN and the closure code was "ML", before adding another component assignment, e.g., UNS/TRN, JRA/JRA, UNS/PT1, AWP/AWP, COM/COM, etc.

Manual Calculation to Determine Military Leave End Date

The case manager will use the USERRA policy to manually determine the end date for military service. The case manager should not automatically use the date preceding the reemployment date as the military end date. If the individual **does not** return to work in accordance with the time constraints prescribed by the USERRA and state policy, the individual loses eligibility for work stipends. If the individual re-establishes eligibility for TANF and the TANF case closes again because of increased earnings or loss of disregards, the individual may be eligible to receive transitional work stipends for any remaining transitional transportation months.

The following are examples of manually calculating the individual's military leave start and end dates, based on the USERRA policy and the reemployment start date:

1. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 01-31-04 (less than 30 days, must return to work at the next regularly scheduled shift on the day following release from the military, safe travel home, and eight hours of rest). The individual must return to work within two or three days after the discharge date. If the individual promptly returns to work, the UNS/MIL start date will be 01-03-04 and the end date will be the date preceding the reemployment date.

2. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 05-23-04 (less than 180 days, must return to work within 14 days). The individual must return to work on or before 06-06-04. If the individual returns to work on 06-06-04, the UNS/MIL start and end dates will be 01-03-04 through 06-05-04.

3. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 08-08-04 (more than 180 days, must return to work within 90 days). The individual must return to work on or before 11-06-04. If the individual returns to work on 11-06-04, the UNS/MIL start and end dates will be 01-03-04 through 11-05-04.

4. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 08-08-04 (more than 180 days, must return to work within 90 days). The individual must return to work on or before 11-06-04. If the individual returns to work on 10-20-04 (73 days after discharge), the UNS/MIL start and end dates will be 01-03-04 through 10-19-04.

5. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 08-08-04 (more than 180 days, must return to work within 90 days). The individual must return to work on or before 11-06-04. If the individual returns to work on 12-05-04, the UNS/MIL start date will be 01-03-04 and the end date will be 11-06-04. The UNS/TRN start date will be 12-05-04. **NOTE:** The time lapse between the UNS/MIL actual end date and the UNS/TRN actual start date is less than 30 days.

6. The individual's last day of employment was 12-27-03. Active military duty start and end dates were 01-03-04 through 08-08-04 (more than 180 days, must return to work within 90 days). The individual must return to work on or before 11-06-04. If the individual returns to work on 12-15-04, the UNS/MIL start date will be 01-03-04 and the end date will be 11- 06-04. The UNS/TRN start date will be 12-15-04. **NOTE:** The time lapse between the UNS/MIL actual end date and the UNS/TRN actual start date is more than 30 days. The individual is not eligible to resume bonus payments.

Ineligibility for Transitional Services After Discharge

If the individual does not return to employment within the prescribed time constraints and the time lapse between the ACTUAL END DATE of the UNS/MIL component and the ACTUAL START DATE of the UNS/TRN component is more than 30 days, the individual will lose eligibility for transitional work stipends. If the individual, at any time, reestablished eligibility for TANF and the TANF case closes again because of increased earnings or loss of disregards, the individual may be eligible for transitional work stipends for any remaining transitional transportation months.

OVERVIEW

This material describes procedures for handling participant complaints, lost, stolen, destroyed, or mutilated checks, improper payments, recoupment procedures, and fraud.

FACTS ABOUT TANF WORK PROGRAM PAYMENTS

The TANF Work Program utilizes two processes to issue TANF supportive service payments. TANF supportive service payments to TANF Work Program participants (TWP and TRN) are issued electronically. Vendor/merchant payments are issued by check.

Authorizing TANF supportive service payments is the responsibility of the case manager. If a supportive service payment is not received by the participant or provider, the case manager will handle the complaint at the local level. County staff will never instruct a participant to contact State Office staff (Economic Assistance or Budgets and Accounting.) Refer to Chapter 10, Handling Client Complaints, for further information.

All TANF supportive service payments (work program and transitional) are authorized by county personnel and processed for payment by the JAWS system. Client payments are posted electronically to the participant's MasterCard account, according to the benefit month for which the supportive service is issued. Benefits authorized for a prior month or the current calendar month will be available to the participant the following day. Benefits authorized in the current calendar month for the following month will be paid on the last day of the month and available to the participant on the first day of the benefit month. Vendor/merchant payments for work-related expense items/services are processed every Friday. Checks for payments authorized Monday through Friday will be generated after the close of business each Friday and mailed to the payee from State Office the following week. The payee must allow ten (10) working days from the date the check is generated for receipt of the check.

Valid Checks

A check is valid for only 120 days. Checks older than 120 days will automatically be cancelled when the JAWS file and bank tape interface process occurs. The issuance status of checks cancelled for this reason is "EX-expired" which can be viewed on the Check History Inquiry (ICHI) screen in JAWS. Checks must be endorsed by the payee.

PAYMENT PROCESSES

Miscellaneous Payment Processes

Appropriate Division of Budgets and Accounting staff can access JAWS to inquire on a provider's payment history; reissue a check that was lost, stolen, mutilated or destroyed. The Division of Economic Assistance staff can inquire on a participant's or provider's payment history to determine the status of payments to assist with inquiries, from participants and providers, and provide problem resolution. JAWS generates checks along with associated reports, which may be used for management and reconciliation purposes. Lost, mutilated, destroyed, or stolen checks can be reissued to providers through JAWS, if the original checks have not been cashed. Checks that have been cashed can be reissued; if it has been determined the provider did not cash nor benefit from the check.

Mutilated or Destroyed Check

There may be instances when a provider receives a check which cannot be cashed because it is mutilated or has been partially destroyed (by fire, water or other occurrence). Whenever possible, the payee should return the damaged check to the case manager. The case manager will complete
a Request for Emergency Payee or Cancellation of Check, MDHS-EA-121, and attach the damaged check to the form. MDHS-EA-121 must be signed by the county director and forwarded to the Division of Budgets and Accounting, Client Services Unit, for issuance of a replacement check.

Requesting a Duplicate Check

If the original check has not been received by the provider or has been damaged to the extent that no identifiable portion of the check remains which can be returned to the Division of Budgets and Accounting, the case manager and provider will complete a Request for Duplicate Check, MDHS-EA-120, to request a replacement check. A complete explanation that the check was not received or exactly how the check was mutilated or destroyed must be entered on the form (in the additional remarks of CLAIMANT section). The payee must allow ten (10) working days from the date the check is generated for receipt before requesting a replacement check.

Returned Check

Undeliverable checks are returned to the Division of Budgets and Accounting by the postal

service. Budgets and Accounting staff sorts returned checks by the payee's county location and forwards the checks, along with a transmittal sheet, to the appropriate county director. The county director or designee will sign the transmittal, indicating receipt, and return it to the Division of Budgets and Accounting within 10 days. County staff should attempt to locate the payee and determine the correct address to either issue the check or determine the appropriate disposition for the check.

The following procedures should be followed by county offices when handling returned checks:

1. If the payee's new address is known, the check may be forwarded to the provider in a new envelope.

2. If the payee can be located and is known to the case manager, the check may be released to the payee upon presentation of acceptable identification. Under these circumstances, the case manager may wish to have the payee pick up the check at the county office.

3. If a payee's address is incorrect in JAWS, the correct address will be entered in JAWS before the next supportive service payment cycle, if necessary.

4. If the payee cannot be located within 90 days, the case manager will complete MDHS-EA121 requesting cancellation of the check, attach the check **(do not write anything on the original check itself)** and submit them to the Division of Budgets and Accounting. The case manager will maintain a copy in the case record.

   If the payee is located after the check has been cancelled and the check date is less than 365 days from the current calendar date, the case manager will complete a new MDHS-EA-121 to request that the check be reissued.

Lost Checks

If a provider does not receive a check that JAWS indicates was issued, the case manager will follow the procedures listed below:

1. Access the ICHI or TSHI screen in JAWS to verify whether the check was issued at least 10 working days prior to the current calendar date. A Request for Duplicate Check, MDHSEA-120, will not be processed prior to ten (10) working days after the check was generated to allow adequate time for the check to be located and delivered by the post office.

2. Prior to submitting a Request for Duplicate Check, MDHS-EA-120, review the returned check transmittal to verify that the check has not been returned by the Division of Budgets and Accounting.

3. Help the payee complete a Request for Duplicate Check, MDHS-EA-120, if necessary. Forward the completed MDHS-EA-120 to the Division of Budgets and Accounting for processing.

   Upon receipt of the MDHS-EA-120, Division of Budgets and Accounting staff will conduct an investigation to determine the check status. Upon completion of the investigation process and confirmation from the bank that the check has not cleared the bank, a stop payment will be requested, if applicable, and a duplicate check will be issued to the payee.

4. **Explain to the payee that the original check must not be cashed once a duplicate is requested**. If the original check is located it should be returned to the case manager. In some instances, the original check may be located after a Request for Duplicate Check, MDHS-EA-120, has been submitted. If the original check is located and the Division of Budgets and Accounting has not requested a stop payment and issued a duplicate check, it may be possible to release the original check. The case manager will contact the Division of Budgets and Accounting, Client Services Unit, via telephone or email to determine whether this action is possible. If the original check is released, the MDHS-EA-120 will be voided. Under no circumstances, should a check be released without prior approval from the Client Services Unit. When Budgets and Accounting has already requested a stop payment, the case manager will complete a Request for Emergency Payee or Cancellation of Check, MDHS-EA-121, attach the check and submit them to the Client Services Unit to cancel the check. The reason for cancellation would be "duplicate check has been requested."

The payee should be warned that if both the original and duplicate checks are cashed an overpayment will occur and the payee may be charged with suspected fraud.

If a payee returns a check that is more than 120 days old, a duplicate check will be requested by completing and submitting a Request for Emergency Payee or Cancellation of Check, MDHSEA-121, to the Division of Budgets and Accounting. A duplicate check will not be issued for a check that is more than 365 days old. When a duplicate check is requested and the original check has already cleared the bank, the Division of Budgets and Accounting staff will send a check image to the county director requesting that the payee be contacted to examine the endorsement. If the payee states the signature is not his/hers an Affidavit Regarding Check

Endorsement, MDHS-EA-120A, which is valid for 30 days, will be completed. The original and two copies of the MDHS-EA-120A, along with 30 signature samples (15 cursive and 15 printed) will be submitted to the Division of Budgets and Accounting for approval and processing.

If the payee states the signature is his/hers, a written request to void the MDHS-EA-120 will be submitted to the Division of Budgets and Accounting.

Repeated Requests for Duplicate Checks

Because of the administrative complexities of requesting duplicate checks, the process will be used only when absolutely necessary. When a payee requests a duplicate check for the second time within a 12-month period, the case manager should complete a Request for Duplicate Check, MDHS-EA-120, and:

1. Explain to the payee that checks will be mailed to the case manager for the next three months. The provider or designee will receive the check from the case manager. This process will assure proper receipt of checks.

2. Maintain a check receipt record for the payee for this time period and document the participant's case record via the Participant Contact Record (PACR) screen.

For the third and subsequent requests for duplicate checks within a 12-month period, follow the above procedures for six months.

Charging Back of Checks

If the case manager determines the check was cashed without the payee's knowledge, the payee will decide whether further action should be taken. If the payee wishes to complete a Request for Duplicate Check, MDHS-EA-120, to request a duplicate check, the payee must complete an Affidavit Regarding Check Endorsement, MDHS-EA-120A, and file a police report. If the payee does not wish to request a duplicate check, the case manager will return the check to the Division of Budgets and Accounting, Client Services Unit, with a complete explanation for canceling the request for a duplicate check.

A check that is paid on the basis of an illegal endorsement or if a duplicate check is negotiated, MDHS will return the check to the bank for credit. The bank will charge back the amount of the check to the party who first presented the check for payment. That party will be responsible for the recovery of any loss. MDHS will furnish copies of the check for comparison of the signature

of the person who illegally endorsed the check with the signature of the payee in order to assist the wronged party in recovering the loss.

Improper Payments

An improper payment is defined as the receipt of a payment for TANF supportive services by a TWP participant or provider to which he or she is not entitled (overpayment) as a result of suspected fraud, client error, provider error, agency error, or other error. An improper payment may also occur when a participant or provider is underpaid (underpayment) as a result of client, provider, agency, or other error. Federal regulations allow states to take all reasonable and practical steps to correct and collect all improper payments made to TWP participants and providers. The fact that a participant received an improper supportive service payment(s) in the past does not affect the individual's current eligibility for participation in the TWP.

All improper payments (overpayments and under payments) must be documented via MDHSEA-371, Report of TWP Improper Payment, completed by the case manager. Improper payment records will be added and maintained in JAWS. Case managers are responsible for processing overpayment records to initiate the recoupment process. Case manager supervisors, county directors, regional directors or regional program specialists are responsible for processing underpayment records. Refer to the JAWS User Manual, Chapter 15, Section 6, and Chapter 13, Section 9, for system procedures.

Reasons for Improper Payments

An improper payment may occur under any of the following conditions:

1. **Suspected Fraud -** The participant or provider, during the receipt of TANF supportive service payments, willfully falsifies, misrepresents or withholds information which, if known to the case manager, would have resulted in the denial of supportive services/reimbursements, or issuance of a smaller payment.

    a. State statutes that govern the granting of TANF supportive services define fraud and prescribe the following penalties:

    Whoever obtains or attempts to obtain or aids or abets any person to obtain by means of willful false statement or representation or by any impersonation or other fraudulent device.

1. Supportive services to which he/she was not entitled, or

2. Supportive services greater than that to which he/she is justly entitled, is guilty of a misdemeanor and upon the conviction thereof will be fined not more than five hundred dollars ($500.00) or be imprisoned at the discretion of the court. In assessing the penalty, the court will take into consideration the amount of money fraudulently received.

b. Anyone obtaining these services through fraudulent devices will be punished by:

1. Imprisonment in the state penitentiary for a term not exceeding three (3) years, and fined not less than one thousand dollars ($1,000.00) or more than ten thousand dollars ($10,000.00) or

2. Imprisonment in the county jail for a term not exceeding one (1) year, and fined not less than one hundred dollars ($100.00) or more than one thousand dollars ($1,000.00)

c. All staff should keep in mind that fraud is a serious charge to make against an individual and the results can be equally serious. According to a ruling by a Mississippi court in a civil fraud case, there is a presumption against fraud, dishonesty and bad motive. The evidence to overcome this presumption must be more than a mere preponderance. It must be clear and convincing.

When making a decision regarding suspected fraud, the case manager should consider the following:

1. Whether the participant/provider obtained supportive services/reimbursements by willfully making a false statement or by knowingly withholding information that would have a bearing on his/her eligibility or participation in the program. The case manager should be aware of indications that the participant or provider understood that the information given affected the receipt of TANF supportive services.

2. Whether the participant/provider gave information during assessment or at other times which appeared to contradict later statements. Did the individual realize that the later statements were different?

3. Whether the case manager relied solely on the participant's or provider's statement when authorizing supportive services/reimbursements. Was any supporting documentation obtained?

4. Whether the participant/provider willingly falsified documents or knowingly withheld information (e.g., vouchers, ledgers or receipts) in order to receive supportive service payments.

Statute of Limitations

Generally, the statute of limitations does not apply to the State on civil actions; therefore, court action can be taken to recover supportive service payments/reimbursements improperly obtained without regard to the time the fraudulent act was committed.

In instances where there was only **an attempt** to obtain supportive service payments/ reimbursements, the statute of limitations bars criminal prosecution, unless action is commenced within two years after commission of the offense. Therefore, MDHS will refer attempted fraud cases to law enforcement officials within two years of the attempt to obtain assistance under false pretenses. In those cases where assistance is actually obtained under false pretenses, MDHS will refer such cases to law enforcement officials as they are discovered and properly investigated, without regard to the two-year period.

2. **Participant error** - The participant unknowingly reports incorrect information that results in an improper payment. There is no evidence that the participant willfully misrepresented or withheld information. All indications are that the individual misunderstood, or was unable to comprehend the program requirements.

3. **Provider error** - The provider unknowingly reports incorrect information that results in an improper payment, e.g., making an error on the purchasing receipts for TANF work-related expenses which result in an improper payment.

4. **Agency error** - The case manager takes an incorrect action causing the issuance of an erroneous payment, such as:

   a. Failing to follow-up on an anticipated change in a participant's component or living arrangement

b. Computing a supportive service payment incorrectly

c. Failing to close an individual's case once he/she no longer qualifies for the TWP Program

5. **Other error** - Situations which cannot be identified as suspected fraud, client, provider or agency error, such as:

a. Payments made during a fair hearing process when the hearing decision is not in the participant's favor are considered improper and subject to recoupment, but the reason code should be classified as "Other"

b. Errors made as a result of computer error or human oversight

It is the responsibility of the case manager to determine which cases of improper payment resulted from the participant/provider deliberately furnishing false information. When an improper payment is discovered, the case manager will determine whether it was caused by the participant's or provider's failure or refusal to give correct or complete information (suspected fraud), a lack of understanding on the part of the participant or provider (participant or provider error), or a mistake by agency staff (agency error).

Overpayments

A participant or provider may be overpaid as a result of suspected fraud, client, provider, agency, or other error. Policy permits the recoupment of TANF supportive service overpayments paid to TWP participants and providers through reduction of future TANF supportive service payments or by direct repayment by the participant or provider. Recoupment by reduction of future TANF supportive service payments must allow the TWP participant to retain 80 percent of his/her original TANF supportive service benefit amount. Only 20 percent of the benefit total may be recouped each month. Providers may choose to repay the overpayment in full, or have the total amount (100%) of the overpayment recouped from future checks until the overpayment is recovered in full.

Overpayments cannot be created for bus passes and transitional work (transportation) stipends issued in error.

Overpayment Recoupment Procedures

When a TANF supportive service (work stipend, participation stipend and work related expense) overpayment occurs for a TWP participant, the recoupment process will be implemented, as appropriate, by case management.

When a bus pass is issued in error, the case manager will make every effort to retrieve the bus pass from the participant. Once a bus pass has been authorized and the expense record processed (Friday check run has occurred), JAWS will not allow the case manager to delete the bus pass record. If the bus pass was not issued or is returned by the participant after the bus pass record has been processed, the case manager will contact the MAVERICS/JAWS Help Desk to remove the bus pass record.

Overpayments for other TWP supportive services are established using the following procedures:

1. Complete MDHS-EA-371, Report of Improper Payment, to document the overpayment and validate the reason for the claim, the time period covered, and the claim amount.

2. Add the overpayment record in JAWS.

   Refer to the JAWS User Manual, Chapter 13, Section 9, for work (transportation) stipend overpayments, and Chapter 15, Section 7, for participation stipend (client) overpayments and work-related expense (merchant/vendor) overpayments.

3. Send the participant a T016, TWP Notice of Overpayment (Participant), if the overpayment is for a participation stipend. Send the resource service provider a T017, TWP Notice of Overpayment (Provider), if the overpayment is for a work-related expense.

   If the overpayment is for a work (transportation) stipend, a Transportation Notice of Overpayment, TT04, will be generated by JAWS and mailed from state office when the case manager successfully processes the Transportation Stipend Overpayment (TSOP) screen and enters a “Y” on the pop-up window.

   These notices inform the participant/provider of the overpayment, explains the reason for the overpayment, provides repayment instructions and recoupment procedures, and advises the participant/provider of his/her right to a fair hearing. JAWS will maintain a history of overpayment notices on the Participant Notice Selection (SPAN) screen and may be printed locally by the case manager.

4. If the participant does not respond within thirty working days, initiate the recoupment process by reducing future TANF supportive service payments by twenty percent. Resource service providers will be required to repay the improper payment in full. However, if the resource service provider does not respond within thirty working days, 100% of future reimbursements will be withheld until the improper payment is paid in full.

5. If the participant/provider responds that he/she will pay back the overpayment from cash reserves or other income, advise that payments must be made by money order or cashier's check payable to "State Treasurer" and mailed to the Division of Budgets and Accounting. No personal checks will be accepted. The participants/provider's name, social security number and case number (participant only), along with the notation "TWP" should be included on the money order or cashier's check.

   If the participant or provider requests a fair hearing, the supportive service payments will continue unchanged until the fair hearing decision is rendered. The participant or provider should be notified that if the hearing decision is not in his/her favor, any overpayment paid during the hearing process must be repaid to MDHS.

   When a TANF case has been closed and an outstanding overpayment remains at the time of re-application, the overpayment may be recovered by a direct repayment or recoupment if the case becomes active again.

In a recoupment situation, the overpayment record type (participation stipend, work stipend, etc.) will only be recovered from future benefit payments of the same type. Example: A work stipend overpayment will only be recovered from future work stipend payments. A work stipend overpayment will not be recovered from a future participation stipend payment.

Under payments

A participant or provider may also be underpaid as a result of client, provider, agency or other error. All requests for under payments are processed at the county or regional level by the case manager, case manager supervisor, regional director or regional program specialist. Refer to the JAWS User Manual, Chapter 15, Section 6, for the system procedures to process an underpayment for work-related expenses and participation stipends. There are two PAYMENT TYPE codes associated with these types of TANF supportive service under payments. The payment type "C" is used to identify client payments and "S" is used to identify resource service vendor/provider payments. The eligibility period for the underpayment record cannot exceed 12 months prior to the current calendar date. JAWS will require the case manage supervisor to enter

the appropriate REASON CODE to identify the specific reason for the underpayment. Free form space (DESCRIPTION field) is provided to allow the case manager supervisor to enter additional comments deemed necessary. If "OT-other" is entered as the REASON CODE, an entry in the DESCRIPTION field is mandatory.

Refer to the JAWS User Manual, Chapter 13, Section 9, for the system procedures for processing work (transportation) stipend under payments.

When a TANF supportive service (work stipend, participation stipend, and work-related expense) underpayment occurs, the case manager will determine the reason for the underpayment, time period for the underpayment and the underpayment amount due. When a client underpayment is successfully processed in JAWS, the expense will be paid after the close of business and the benefit will be available to the participant the next day. If the underpayment is for a vendor/provider, the expense will be paid and a check generated after the close of business on Friday. Ten (10) days should be allowed for receipt of checks.

HANDLING COMPLAINTS

Handling Client/Resource Service Provider Complaints

If a participant or resource service provider complains that a supportive service payment (work stipend, participation stipend, or work related expense) has not been received, the case manager will:

1. Inquire in JAWS on the appropriate check history screen. The Check History Inquiry (ICHI) screen must be accessed to view the participant's check detail for participation stipend payments and job retention bonus payments. The Transportation Stipend Check History (TSHI) screen must be accessed to view the participant's check detail for work stipend payments.

   Payment of a work-related expense incurred by a participant is paid directly to the resource service provider (not the participant). The case manager will:

   c. Access the Work Related Expenses Selection (SOWR) screen, locate the provider's identification number and then access the Invoice Selection (SINV) screen, enter the provider's ID number and press the enter key to display the invoice amount and payment date or

b. Access the Work Related Expenses Selection (SOWR) screen, locate the provider's identification number and then access the Check History Inquiry (ICHI) screen, enter an "S" in the PMT TYPE field and the provider's identification number in the PRVDR/CLI ID field and press the enter key to view a provider's check detail.

2. Review the payment history in JAWS including when benefits were issued and the status of each payment. The most recently issued benefit is listed first. Participant payments are posted to the individual's MasterCard account. Provider payments are issued in check form.

3. If the benefit has been paid, the case manager will provide the payment date and amount. The case manager will then:

   a. Instruct the participant to contact the customer service unit for further details.

   b. Verify the provider's mailing address on the Maintain Resource Service Agency (MRSA) screen.

4. If the benefit has not been processed or paid, determine whether is payment is due and take the appropriate case action(s) to resolve the issue.

Participation stipends must be authorized (by entering "Y"-Yes) on the TANF Attendance Report (ARPW) pop-up window, in order for the payment to be processed. The ARPW pop-up window is accessible from the Component Attendance Report Selection (SCAR) screen. Once attendance has been entered and JAWS has processed the screen, the case manager cannot modify the ARPW screen to authorize participation stipend payments. The case manager will have to create an underpayment record to process the payment if it is determined the participant is eligible for the payment.

Work stipends must be authorized on the Authorize Transportation Stipend (TSAU) screen by the end of the benefit month. Once the benefit payment month has ended, the case manager will have to create an underpayment record to process the payment if it is determined the participant is eligible for the payment.

Should the participant, provider or case manager have unresolved questions, after the case manager and/or supervisor have viewed all applicable screens in JAWS, an e-100 form will be submitted to the Help Desk for assistance. The complaint will be handled at the local level. County staff will never instruct a participant to contact State Office staff (Economic Assistance

or Budgets and Accounting.)

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OVERVIEW

This section discusses the roles and responsibilities that the case manager, job readiness trainer, employment coordinator, case manager supervisor, county director and the regional director have in monitoring the participant's progress and participation in his/her TANF Work Program (TWP) component/work activity.

MONITORING PARTICIPATION

Case Management

The case manager will monitor all work program participants, placements and related activities using the monthly Case Manager Caseload Listing Report and the MRTA screen. Work Program placements consists of: community services, AWEP, job readiness/job search, education, vocational education, job skills training, unsubsidized employment and subsidized employment. If the participant fails to report for, does not attend or is not attending his/her assigned activity satisfactorily *(refer to Chapter 1I, Satisfactorily Participation in a TWP Component/Work Activity)*, the case manager must begin the conciliation process.

When there is a problem with an individual's participation in the TANF Work Program, the case manager and the participant will work closely together to reconcile and resolve the differences as quickly as possible. This very important phase of the participant's transition from welfare to work is the point of determination as to whether or not the participant will become self-sufficient, and every effort should be made to work with the participant through this difficult period.

The case manager and participant may be able to resolve some problems without a disruption in the participant's work activity. Any discussion between the case manager, the participant and/or the employer/component provider must be documented on the Maintain Participant Free-Form Remarks PACR screen. The **MDHS-EA-376, Client Contract/Action Report** form will only be used if JAWS is not available.

Job Readiness Trainer (JRT)/Employment Coordinator (EC)

The JRT/EC will monitor the participant in job readiness, job search and job placement. The JRT/EC may be able to resolve some problems without contacting the CM. Any discussion between the JRT/EC, and the participant and/or the employer must be documented on the

Maintain Participant Free-Form Remarks PACR screen. The MDHS-**EA-376, Client Contract/Action Report** form will only be used if JAWS is not available and maintained in the participant's case record. If the participant misses a day or is late for an appointment, the JRT/EC may be able to resolve the problem with the participant. The resolution must be documented on the **PACR** screen or if JAWS is not available, on the **MDHS-EA-376**. If the participant fails to cooperate or participate satisfactorily in his/her **job readiness/job club/job search class or job placement**, the JRT/EC must complete MDHS-**EA-364, TWP Communication form** and **s**ubmit to the CM.

The case manager will initiate the conciliation process and determine "good cause" when the following occur:

1. The participant **does not show** for the TWP intake appointment, work activity or does not attend satisfactorily the assigned TWP work activity or job placement.

2. The participant **misses** (or is going to miss without permission) several days of training/employment or is **consistently late** for training/employment, etc.

3. The participant appears to be **capable of making progress but fails to do so.** The case manager will assess satisfactory progress for an individual assigned to a work activity. If the case manager feels the participant is capable but not putting forth a good faith effort (i.e., not attending assigned work activity satisfactorily, failing to go on job interviews, etc.), documented details of the incident must be maintained on PACR.

4. The case manager or JRT/EC must follow-up with employers in order to obtain feedback to document the participant's interview performance. If an individual **intentionally fails a job interview**, the case manager must begin the conciliation process.

5. The case manager or JRT/EC must contact newly employed individuals and their employers at least once a month to encourage job retention. Working with the case manager, the JRT/EC will provide necessary assistance, coaching, and counseling to resolve workplace difficulties which threaten the continuation of the job placement. If the participant **refuses to meet the wishes of the employer**, the case manager will determine if the participant committed a **voluntarily quit violation**. It is very important that the JRT/EC stress to the employer that he/she should notify case management of any

problems before terminating the participant. Committing a voluntary quit violation, without good cause, will result in TANF case closure with a timed penalty period and a corresponding SNAP sanction.

NOTE: It is vital that participants notify the case manager as soon as a barrier to participation is identified and that case managers make every effort to assist participants to resolve barrier prior to job loss or non-compliance with work program requirements.

6. Every employer and component provider has his/her own rules about satisfactory participation in work. If the individual fails to meet these rules, he/she risks being terminated or rejected by the employer/component provider. If an employer/provider reports that a participant **failed to meet the work place expectations**, the case manager or JRT/EC must investigate and attempt to resolve the problem. If the individual's problem cannot be resolved, the case manager must initiate the conciliation process.

7. The case manager or JRT/EC must investigate the report of noncompliance within three (3) working days and complete a **MDHS-EA-364**, to document the employer's version of why the participant left or terminated a placement. Supporting documentation should be attached, if applicable.

If the case manager receives an alert stating that attendance is overdue and the participant's attendance verification/documentation is the responsibility of a component provider, the case manager must contact the component provider to discuss the attendance problem before scheduling a conciliation appointment for the participant. Automatically scheduling conciliation and terminating supportive services (without investigating the problem) would be unfair to the participant (especially if the delay in entering this information was the fault of the case manager). MDHS-EA-364, will be used to contact the JRT/EC and to provide written documentation of the communication between the case manager and JRT/EC. The component provider must return this form within five (5) days.

NOTE: Once the case manager initiates conciliation, he/she must not assign the TWP participant to an activity or send the individual on a job interview until the conciliation result is determined, unless such an activity is part of the satisfactory resolution of the conciliation.

The case manager will use the case manager caseload listing monthly review desk guide to review all cases displaying on the Case Manger Caseload Listing report each month or review, monitor and work his/her TWP cases. The case manager must take appropriate action(s) identified during the case review to ensure that each participant is meeting his/her work program requirements. If a participant fails to meet his/her TWP requirements, the case manager will initiate the conciliation process.

Case Manager Supervisor and/or County Director

The case manager supervisor and/or county director must monitor each case manager's caseload to ensure TWP cases are worked according to timeliness standards set forth in work program policy and procedures. Corrective actions will be initiated for any case manager failing to meet timeliness standards set forth in TWP policy and procedures.

Regional Director

The regional director must conduct periodic reviews of TANF and TWP reports to ensure all counties in the region are working TWP cases according to timeliness standards set forth in work program policy and procedures. A corrective action plan must be developed and implemented for any county failing to meet timeliness standards. Upon implementation of a county corrective action plan, written notification must be submitted to the Economic Assistance division director.

OVERVIEW

This section discusses the conciliation process, adverse action notices, and conciliation reasons and resolutions.

CONCILIATION

Conciliation is the process used by the case manager and the participant to resolve an informal conflict or grievance and/or impose a timed work program penalty, if applicable. The conciliation process may resolve problems concerning the participant's participation or progress in a work activity. The case manager should strive to create an atmosphere in which participants are encouraged to discuss any problems or concerns that prevent successful participation or progress in work activities. This is accomplished by permitting individuals to voice their complaints and grievances and by exhausting all reasonable means and available resources to resolve the issue.

NOTE: TWP participants must be encouraged to take personal responsibility to identify and resolve or remove barriers that prevent them from satisfactorily participating in assigned work program activities. It is vital that participants notify the case manager as soon as a barrier to participation is identified and that case managers make every effort to assist participants to resolve barriers prior to job loss or noncompliance with work program requirements.

A participant must have good cause for failure or refusal to participate in TWP activities. Non-participation may occur early in the process or after the participant has been attending a scheduled work activity. When determining good cause, the case manager should take into account how long the individual has been in the program and how much he/she understands about TWP and the individual's action(s) toward personal responsibility. The case manager must use good judgment and base good cause decisions on established policy and procedures. Whenever the participant has an incident of non-cooperation, the case manager should schedule a conciliation appointment and work with the participant to resolve the issue. Adults receiving TANF benefits, who are not exempt from the TANF Work Program or who are participating as an exempt volunteer, must comply with the program requirements. If the participant does not comply, he/she may be sanctioned. When it is obvious that the participant is not meeting the work requirements, the case manager must determine the reason for noncompliance and determine whether there was good cause for the failure. Based on the documentation that he/she obtains, the case manager must decide whether to sanction the TWP participant.

If a TANF recipient fails to comply with TWP requirements, the case manager must review the status of all TANF supportive services and take appropriate action(s), e.g., terminate immediately, terminate based on the result of the conciliation, etc.

NOTE: All good cause determinations recommended by the case manager must be approved by the case manager supervisor, county director or designee via MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer. *(Refer to Chapter 11, Determining Good Cause.)*

Penalties for noncompliance with the TANF Work Program **do** apply to exempt volunteers (JJ and JV). Exempt individuals will be conciliated for noncompliance which may result in a TWP sanction and a corresponding SNAP benefit sanction. Prior to referral to the TWP, exempt volunteers **(EV)** must sign **MDHS-EA-359** to acknowledge his/her understanding of TWP requirements and adverse action policy and procedures and to document the individual's case record that TWP rules and regulations were explained.

If an exempt volunteer is conciliated and good cause is approved and the individual no longer wishes to participate in the TWP as a volunteer, the **EV** code must be changed to **JJ** or **JV** (this change will cause the 12 month JJ counter to resume) in MAVERICS. Exempt individuals who are employed and wish to volunteer must be coded "**EV**". These individuals must not be coded "**WL**", "**WP**" or "**WH**" for tracking and monitoring purposes. The "**EV**" code will allow JAWS to automatically set up a conciliation record. Minor parents are subject to school attendance requirements; therefore, the case manager must change the **MV** code to **JI** in MAVERICS and begin the School Attendance sanctioning process when the minor parent fails to attend school. Minor volunteers are not subject to TWP penalties. *(Refer to Chapter 8, Exempt Individuals)*.

Establishing a Conciliation Record

The case manager will, within three (3) days of learning of noncompliance, schedule a conciliation appointment. A conciliation appointment can be scheduled in JAWS in one of the following ways:

- If an individual does not show for the orientation or assessment appointment, he/she will receive **T008, Notice of Adverse Action**, through the JAWS batch process.

- If an individual is assigned to a work activity, but fails to report, is not participating satisfactorily or refuses to participate, the case manager will schedule a conciliation appointment, and the individual will receive **T011, TANF Notice To Discuss**

Disagreement and Adverse Action.

NOTE: When a conciliation record is set up, the case manager must review the status of all TANF supportive services and take appropriate actions(s), e.g., terminate immediately, terminate based on the result of the conciliation, etc.

When a JAWS conciliation record is created, a conciliation notice is mailed to the TWP participant and a conciliation referral is sent to MAVERICS the same night. MAVERICS will automatically generate a notice of adverse action to the household for each program based on the conciliation reason code received from JAWS. The notice will inform the household of the pending TANF and SNAP sanctions, the reason for the adverse action and effective month for the case action. The case manager may reschedule a conciliation as long as the appointment date is within 10 days of the discovery date of the initial conciliation appointment. The rescheduled appointment, **T012**, will not automatically be mailed to the individual. JAWS will maintain the notice on the Participant Notice Screen (**SPAN)** screen in JAWS. The case manager should screen print the notice and mail or give it to the individual.

When a conciliation appointment is scheduled in JAWS, the appointment schedule code will be updated to "OC" (Outstanding Conciliation) and the TWP File status will be "I" (Inactive). JAWS will send a transaction to MAVERICS and the participant's benefits will be placed in a "FROZEN" status. If MAVERICS does not receive a compliance, exemption or fair hearing request from JAWS within 10 days, the TANF and possibly the SNAP case will close *(see Chapter 11, Noncompliance with TWP - Case Closure)*. This process places more responsibility on the case manager. Completion codes for orientation and assessment appointments must be entered and conciliations must be resolved in a timely manner.

The individual receives three (3) notices of adverse action:

1. JAWS generated conciliation appointment notice

2. MAVERICS notice of adverse action (NOAA) for the pending closure of the TANF case

3. MAVERICS notice of adverse action (NOAA) for the pending reduction of benefits or case closure for SNAP

NOTE: The participant's TWP activity may remain "open" during the conciliation

process. Entering attendance on the ATTENDANCE REPORT POP UP WINDOW (ARPW) during the conciliation process will resolve the pending conciliation. The case manager must review the status of all TANF supportive services and take appropriate action(s), e.g., terminate immediately, terminate based on the result of the conciliation, etc.

Ten-Day Closure Run

MAVERICS automatically closes the TANF and possibly the SNAP case at the end of the 10 calendar days if no compliance, error, fair hearing request or exemption request code is received from JAWS. Once the 10 calendar day period has expired, the case manager **cannot** resolve an outstanding conciliation, even though JAWS has not closed the case. The supervisor may resolve the conciliation with **"ER"** at any time, if the sanction was applied in error (i.e., due to the case manager not entering a resolution in a timely manner). A screen print of the Maintain Conciliation Record **(WCOR)** screen and supporting documentation on PACR, if

applicable, of why the **"ER"** code was used, must be forwarded to the county director.

EXAMPLE: Case closures are effective dated in JAWS. The case may close in MAVERICS on September 11 effective for the month of October, and JAWS will process the case closure on October 1.

Conciliation Reasons

Reasons for scheduling a conciliation include, but are not limited to, the following:

- No show for an appointment or work activity
- Refusal to participate in the TANF Work Program
- Unsatisfactory attendance
- Failure to cooperate with the case manager, component provider, employer
- Failure to report and/or submit sufficient evidence to substantiate absence from the assigned work activity timely

- Failure to go to an employment interview
- Inappropriate or disruptive behavior (includes abusive or inappropriate language and inappropriate clothing) in a work activity
- Established pattern of failing to cooperate with TANF regulations *(see Chapter 11, Establishing A Pattern of Non-Cooperation)*
- Refused a job offer or
- Voluntarily quits a job, voluntarily reduced work hours for any job of 20 or more hours per week or terminated by an employer as a direct result of personal action(s). *(Refer to Chapters 3 and 11, Voluntary Quit Provision.)*

When a conciliation is needed, the case manager must:

- Schedule a conciliation appointment
- Notify service providers (child care and/or transportation) of termination of services *(see Chapter 10, Supportive Services)*
- Investigate the reason for non-compliance by talking with the participant and researching the Investigative Report and supporting documentation and/or any medical verification records and possibly the attendance records.
- Determine whether or not the participant had good cause for non-compliance (documentation must be provided within the 10 calendar day conciliation period).
- Process any exemption request made by the participant.
- If the participant is in a work activity and not making progress, counsel the participant to identify the problem and discuss other options or the possibility of a sanction.
- Determine whether or not the participant is demonstrating a good faith effort to comply. If so, talk with the component provider and allow the individual to continue in the same work activity or place the individual in another work activity, whichever is deemed appropriate.

- **Forward all good cause decisions, along with MDHS-EA-359 and supporting documentation, to the case manager supervisor for review and approval within the 10-day conciliation period.** The case manager must not resolve the conciliation in JAWS until the completed **MDHS-EA-359** is received.

If the individual does not have a good cause for one of the conciliation reasons listed above, the case manager **must not resolve the conciliation**. MAVERICS will automatically close the case at the end of the 10 calendar day period.

NOTE: Whenever possible, the case manager should meet with the participant, and if good cause is determined, provide appropriate documentation to the case manager supervisor for review and approval in order for compliance to be sent before the 10th day. If the compliance is sent on the 10th day, MAVERICS auto-closure will close a TANF case prior to processing the compliance sent by JAWS.

If the 10th day falls on Saturday or Sunday and the participant comes in on Monday, the CMS should **"ER"** the conciliation if good cause is approved and the participant chooses to comply.

Whenever **"ER"** is used, the supervisor must file a screen print of the WCQR and PACR screens, documenting the reason for the use of this code in the participant's case record and forward a copy to the county director.

Conciliation Resolution

Resolution may occur when:

- The barrier to satisfactory participation is resolved and the participant continues in his/her work activity or another work assignment
- The participant's progress is determined to be satisfactory
- The participant has a valid reason for non-participation and an exemption request is approve
- The participant refuses to cooperate and a timed work penalty is imposed

- The participant provided sufficient evidence to substantiate good cause. The good cause recommendation was approved by the case manager supervisor and the participant agrees to participate and is assigned to a TWP activity

- The participant finds employment of 25 **- 35 hours per week** at or above the federal minimum wage within the 10-day conciliation period

- Good cause is not determined and a timed work penalty is imposed

NOTE: *See Chapter 11, Good Cause - Drug and Alcohol Abuse*, for information on the conciliation process for drug and alcohol abuse.

NOTE: Good cause determinations must be documented and reviewed and approved by the case manager supervisor. When a conciliation is resolved, the participant must sign **MDHS-EA-359**, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer.

OVERVIEW

This material discusses good cause determination, drug and alcohol abuse, voluntary quit, compliance prior to a case closure and requesting a case closure.

DETERMINING GOOD CAUSE

Good cause for noncompliance in the TANF Work Program (TWP) will be recommended by the case manager, when it is determined there is sufficient evidence to substantiate the good cause, and approved by the case manager supervisor, county director or designee via **MDHS-EA-359, TWP Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer**. When contacted by a participant with an explanation for not attending a work activity, the case manager must use good judgment and the good cause determination must be based on TANF policy, work program requirements and the individual's action(s) taken toward personal responsibility. For example, if the participant has a breakdown in transportation, did he/she immediately resort to his/her backup plan and/or explore all other available options in order to meet his/her work program requirements? Having good cause covers a broad range of circumstances. Sometimes situations arise where an individual is unable to participate for a day or several days because of such things as illness, the death of a family member, jury duty, etc. These are often short-term situations resulting from events beyond the participant's control. There will also be circumstances in which an individual will have good cause for turning down a specific job or assignment such as net loss of cash income. Although the individual may have good cause for not attending an assigned work activity, he/she will be required to continue to participate in the TANF Work Program.

NOTE: It is vital that participants notify the case manager as soon as a barrier to participation is identified and that case managers make every effort to assist the participant to resolve barriers prior to job loss or noncompliance with work program requirements.

Before approving a good cause, the case manager must obtain written documentation when possible (e.g., doctors' excuses, police and court reports, an obituary, jury summons, etc.) to verify the good cause. Prior to approving a good cause the case manager supervisor must review the decision and supporting documentation. The participant must provide the case manager with appropriate documentation within the 10-day conciliation period. In some instances where the participant is claiming a good cause for child care or transportation, the case manager must investigate and file written documentation of the findings in the participant's case record. The individual must make every effort to identify barriers and inform the case manager

as soon as possible. The case manager must make every effort to assist the participant to resolve barriers to participation.

- Failure to get or keep a job or to satisfactorily participate in an assigned work activity because of inappropriate actions/behavior or the loss or lack of transportation, without good cause, will result in a TWP sanction and corresponding SNAP benefit sanction.

The case manager recommends good cause for failure to participate in a work activity or accept employment, when it is determined there is sufficient evidence to substantiate it. The case manager supervisor must approve or deny the good cause via **MDHS-EA-359**. Good cause must be determined when one of the following conditions exists:

1. **Transportation problems** - This includes a breakdown or disruption in transportation arrangements due to no fault of the participant, with no accessible alternate transportation, and individuals who live so far from any TWP activity as to be classified as remote (commuting time two (2) hours or more to the work activity - round trip). The case manager should stress to the participant by accepting the work stipend payment the participant agrees to bear the responsibility of providing transportation to the assigned components. The case manager and the participant should also devise a transportation back up plan for the participant. When both plans are determined ineffectual, the case manager must investigate and document in the participant's case record that every effort has been made to resolve the participant's transportation problem.

2. **Household emergency** - Any crisis that interferes with participation, such as, the death of a family member, or waiting for a plumber or electrician.

NOTE: Individuals who are employed must follow personnel procedures set by the employer. A participant assigned to an activity, other than employment, may be excused from participation up to five (5) days for each occurrence of death in the immediate family. The immediate family is defined as spouse, parent, stepparent, sibling, child, stepchild, grandchild, grandparent, son-in-law, daughter-in-law, mother-in-law, father-in-law, brother-in-law, or sister-in-law. Child means biological, adopted or foster child, or a child for whom the individual stands or stood in loco parentis.

3. **Temporary illness** - This includes illness of the participant or another household or family member requiring the presence of the individual (less than 30 days). If not clearly defined or the individual will be out for several days, medical information must be requested. The participant should request an exemption for long-term illness or disability.

NOTE: Individuals who are employed must follow personnel procedures set by the employer.

4. **Breakdown of child care arrangements** - This includes a breakdown or interruption in child care, as well as care that is not available or accessible to the parent. It also includes situations where the parent cannot arrange or pay for child care and the agency cannot provide it (for children over age 13). The State may not reduce or terminate assistance to a single custodial parent caring for a child under age six (6) for refusing to engage in work, if the parent demonstrates an inability to obtain needed child care.

NOTE: Individuals who are employed must follow personnel procedures set by the employer.

5. **Circumstances beyond the control of the participant** - This includes individuals who miss appointments or fail to attend a work activity because of:

- job interviews
- court appearances
- jury duty
- temporary incarceration*
- military duty*
- employment during the time the activity occurs
- inclement weather
- natural disaster
- no legal right to work in USA* or
- participation would result in loss of a job

* Although these are not exemption reasons, these circumstances could affect TANF eligibility.

NOTE: In situations where the case manager is not able to document the case record and the case manager supervisor and/or county director cannot make a determination, the county should contact the regional office for a good cause determination from the Economic Assistance Policy Unit, if necessary.

6. **Net loss of income** - Accepting the job would result in a net loss of income for a household. Net loss is determined by assessing the total of earnings, SNAP benefits, and transitional services, less work-related expenses (transportation and child care not paid by MDHS). If the resulting amount is less than the current amount of TANF, SNAP benefits and supportive services good cause may be approved.

7. **Unreasonable work demands** - This includes:

- Employment no longer available because of a labor dispute
- Discrimination by an employer based on age, race, sex, color, handicap, religious beliefs, national origin or political beliefs
- Work demands or conditions that render continued employment unreasonable, such as working without being paid on schedule or work conditions were hazardous to health
- Job pays less than minimum wage based on the number of hours actually worked
- Job not within physical or mental capacity

The participant will be required to provide documentation of the above-listed circumstances to the case manager within his/her 10-day conciliation period if possible.

NOTE: Whenever possible, the CM should work with the participant and component provider to schedule "make-up" hours in order for the participant to meet the monthly participation requirements for the report month.

Drug and Alcohol Abuse

Drug and alcohol abuse is a serious threat to an individual's ability to stay employed and off public assistance. It is a critical barrier to a successful transition from welfare to work. An individual may receive an exemption from the TANF Work Program while undergoing drug or alcohol abuse treatment.

NOTE: Minor heads of households will be treated as adults for this policy.

The substance abuse treatment period is countable in the 60-month time limit but is not countable in the 24-month time limit.

At any time after application, reevaluation, or at the time the participants job status changes from exempt to mandatory (NE) or exempt volunteer (EV), the participant states that he/she has a substance abuse problem which would prevent job placement, employment retention or participation in any TWP activity, the case manager will send the notice of adverse action for a TWP sanction. If the participant has been referred to a JRT/EC, the **MDHS-TWP-364,** and supporting documentation must be provided to the case manager within three (3) working days.

Upon receipt of this report, the case manager must initiate the TWP sanctioning process.

- The case manager will add a conciliation record in JAWS using **"DA - drug abuse**," as the conciliation reason
- JAWS will send the conciliation transaction to MAVERICS. JAWS **will not** send an appointment notice to the client
- Upon receipt of the conciliation referral from JAWS, MAVERICS will process the record and send a TANF case closure notice and a SNAP adverse action notice to the client

Good cause cannot be granted for this reason because of the previous opportunities given to claim this exemption and obtain treatment. If the conciliation reason is **"DA**," JAWS **will not** allow the case manager to resolve the conciliation record or request an exemption (for any reason). If the conciliation record was added in error, the supervisor may resolve the record by using "**ER**" (the conciliation was added in error) or "**CN**" (cancel the conciliation because the record did not process or the sanction was removed in MAVERICS). The fair hearing process will be treated the same as the other fair hearing requests that are referred to MAVERICS.

An individual who has served his/her sanction period and is not seeking an exemption will be pulled to JAWS in a **"Re - received"** status. Regular Up Front Job Search policy and procedures for compliance will be followed (see Chapter 8, TWP Referrals - Received Status Referrals).

Refer to Chapter 3, Drug Treatment, for the eligibility criteria and the policy and procedures for handling substance abuse exemption request.

Voluntary Quit Provision

An applicant or recipient who voluntarily quits a job or is terminated by the employer as a direct result of personal action(s), e.g., disruptive behavior, inappropriate conduct or language, absenteeism (to include absence caused by the loss or lack of transportation), tardiness, etc., committed by the individual or voluntarily reduces his/her work hours for any job of 20 or more hours per week, without good cause, will become ineligible for TANF benefits.

(Refer to Chapter 3, Voluntary Quit Provision, for additional information.)

COMPLIANCE PRIOR TO CASE CLOSURE

The participant has 10 days from the discovery date on the conciliation/adverse action notice to:

- Meet with the case manager and provide appropriate documentation for good cause determination and
- Comply with the TANF Work Program requirements

If good cause is not approved, the appropriate TWP penalty will be applied.

Resolving a Conciliation

If good cause is approved, the participant may comply, during the 10-day conciliation period, by:

- Fully completing orientation or assessment
- Accepting employment of 25 or more hours per week earning at least minimum wage
- Being placed in a work activity or
- Talking with the case manager and agreeing to participate

For information about resolving a voluntary quit violation, refer to Chapter 3, Voluntary Quit Provision.

Although **"CA-Participant Agrees"** may be used as the conciliation result, the participant must come in and talk to the case manager and good cause must be approved by the case manager

supervisor. Contacting the case manager by phone is not acceptable for compliance. Use of the **"CA"** code is one of several options that the case manager has for resolving a conciliation. The conciliation may also be resolved by having the participant fully complete an orientation/assessment appointment or placing the participant in an activity. **"CA"** was added as a resolution code because there may be times when the participant receives the conciliation appointment letter on the tenth day and the case manager must send a compliance to MAVERICS immediately in order to prevent a case closure. The case manager should use discretion when resolving a conciliation with "**CA**." Whenever **"CA"** is used as a resolution code, documentation of the face-to-face interview with the participant must be documented on the PACR screen. If the participant cannot complete orientation/assessment at the time of the interview, the participant must be scheduled for the next available session. (Scheduling an appointment for two (2) or more weeks into the future is not acceptable.)

Once the conciliation resolution has been entered in JAWS, **T013, TANF Resolution to a Disagreement,** will be mailed to the participant. If the conciliation resolution fails or if the participant disagrees with the agency decision related to a denial of services or sanctions, he/she may request a fair hearing.

Establishing a Pattern of Non-Cooperation

Whenever the participant fails to comply or participate satisfactorily the case manager must schedule a conciliation in JAWS to ensure accountability and to establish a pattern of non-cooperation. If the participant claims good cause but establishes a pattern of noncompliance (no more than three times), and the case manager does not feel that the participant is trying to comply or the participant's actions do not demonstrate personal responsibility, a sanction will be applied.

The case manager must use good judgment and base his/her decision on TANF policy and work program requirements when determining good cause. The case manager may apply the sanction whenever he/she feels that the situation warrants one. If the case manager and case manager supervisor believes the participant should be sanctioned during the first conciliation, the sanction should be applied. However, written documentation (including all written and oral communication between the case manager and the participant) to support the action must be filed in the participant's case record. The "establishing a pattern" policy should be used as a guideline to deter the creation of multiple (four, five, six...) conciliation records by the case manager which allow the participant to continue to make excuses for his/her non-cooperation.

If the participant is not sanctioned, the participant must complete the **MDHS-EA-359**, **Agreement to Participate Following Notice of Adverse Action or Referral as an Exempt Volunteer**. The purpose of form **MDHS-EA-359** is to provide documentation that TANF Work Program (TWP) rules and regulations have been explained to exempt volunteers prior to referral to the TWP and to TWP participants who have been scheduled for conciliation because of noncompliance, unsatisfactory participation or the lack of actions demonstrating personal responsibility. Case managers must ensure that participants understand their personal responsibility to comply with and participate satisfactorily in TWP. Form **MDHS-EA-359** will serve as verification that the case manager explained TWP requirements and that the participant understands the penalty for failing, without good cause, to participate. If the participant fails, without good cause, to participate in any future TWP activities, his/her TANF case will close with a timed penalty period.

REQUESTING A CASE CLOSURE PRIOR TO CONCILIATION

When a TANF recipient requests 0ase closure, he/she must write a statement requesting the case be closed. The TANF recipient (nonexempt “NE,” exempt volunteer “EV” or convicted drug felon “CF”) may not request case closure to avoid a sanction when there is an outstanding TWP conciliation. It is critical that case managers set up conciliation records according to timeliness standards.

OVERVIEW

This material discusses the TANF work penalties and compliance after a case closure.

NON-COMPLIANCE WITH TWP - CASE CLOSURE

Before a TWP sanction is applied, the case manager must view the status of the TANF time limit counters and verify that the appropriate TANF high counter notices have been sent and that the case record is well documented. If the participant claims to be employed, the case manager must request verification of the employment. If the individual has used up all of the family's 24 or 60-months, the case manager will mail to the appropriate MAVERICS closure notice (A453 or A454).

TANF recipients who are not exempt from the TANF work requirements must comply with the TANF Work Program (TWP). Failure without good cause to comply with the TWP of either parent means termination of the TANF case with a timed work penalty when the individual subject to the TWP sanction is the case head or second parent. The family must serve at least a minimum time-penalty and meet compliance before TANF eligibility can be reestablished.

If the TANF participant does not comply with the TWP within the 10 day adverse action notice period and **does not** meet a SNAP work exemption, the SNAP case will be sanctioned according to the penalties below:

1. The entire household will be sanctioned when the TANF noncompliant member is also the SNAP head of household. (This is an automatic system closure with a timed work penalty.)

2. Only the individual will be sanctioned with a timed work penalty (DW participation code) when the TANF noncompliant member is **not** the SNAP head of household.

If the TANF participant does not comply with the TWP within the 10 days adverse action notice period and **does** meet a SNAP work exemption, the individual will be disqualified (DI participation code) for the minimum length of the timed TANF work sanction. The sanction will continue until the disqualification period is served. After the timed penalty period is served, the individual will be eligible to participate in SNAP and will be added back to the SNAP household.

If the noncompliant household member becomes exempt from TANF work requirements, the household may again be determined eligible to participate in SNAP. The sanctioned household may regain eligibility for SNAP benefits after the minimum time penalty is served (see Disqualification Penalties) and the individual complies with the TWP. After the timed TWP penalty is served, if the household reapplies for SNAP benefits without also reapplying for TANF, the household may regain eligibility by meeting SNAP work requirements.

NOTE: When the TWP sanction exceeds six months for the head of household who does not meet a SNAP work exemption, the household may reapply after six months for the remaining members. (See Disqualification Penalties, Head of Household). Individuals with a permanent disqualification (4th violation) can never regain eligibility for TANF even if they become incapacitated or otherwise exempt.

The SNAP benefit amount shall not be increased because of a TANF sanction, either a TANF benefit reduction or termination.

The TANF-only case (not eligible for SNAP) will be closed and the timed work penalty set when the case head (or second parent) fails, without good cause, to comply with TANF work requirements. The TANF Work Program penalties will be the same time periods as work-related penalties in SNAP. Failure to comply will result in a full benefit sanction for both the TANF benefits and the SNAP benefits for the family. The case will close for a specific time period, or until the individual complies with the TANF work requirements, whichever is longer.

When a nonexempt adult or an exempt volunteer in the household refuses or fails to comply with TANF work requirements, the following full benefit sanction will apply:

VIOLATION	**PENALTY (WHICHEVER IS LONGER)**
1st Violation	2 Months Minimum or Until Compliance
2nd Violation	6 Months Minimum or Until Compliance
3rd Violation	12 Months Minimum or Until Compliance
4th Violation	Permanent Disqualification

Even though the work-related violation penalties are the same minimum time periods for both the TANF and SNAP programs, the sanction periods may be effective for different months based

on program participation periods and sanction levels. This may result in families being able to cure the sanction and reapply in one program when they may remain ineligible in the other (SNAP exception for verified onset of incapacity during sanction). Because families may choose not to use their time limited (60 or 24) TANF months during the period in which the family may have income that would reduce the TANF benefit the household may choose to serve the timed work penalty and then reapply for SNAP only. Such families would be subject to the SNAP work requirements while eligible for SNAP only.

24-MONTH TIME LIMIT - CASE CLOSURE

TANF regulations mandate that the nonexempt parent or caretaker in the family must work and/or participate in approved work activities as soon as that individual is determined work eligible and referred to the TWP. State law reduces the family's TANF time limit counter from 60 to 24 months if the nonexempt adult(s) in the family refuses or fails to comply with TANF work requirements. Assignment in JAWS to an allowable TWP component will stop the 24 month counter, regardless of whether the participant participated in the activity. The case manager is responsible for assigning and closing component assignments timely. Refer to Chapter 3, Time Limits, for additional and more detailed information.

COMPLIANCE AFTER A CASE CLOSURE

Whenever the case is closed for non-compliance**,** the conciliation record will remain "open". This will allow the supervisor to resolve the conciliation after the 10-day period (using the "ER-error" or "CN-cancel" code) or allow the case manager to pull an Up Front Job Search referral to JAWS from MAVERICS should the individual reapply for benefits. The CM must not allow the individual to complete an orientation/assessment until an Up Front Job Search/Voc Rehab referral has been created by the EW and pulled to JAWS by the case manager.

TWP Referral in "REceived" Status

A sanctioned individual may reapply for benefits at any time, but the family will not be eligible for TANF benefits until the penalty period has ended. Anyone applying prior to the 15th of the last month of the sanction period will have their application denied. A sanctioned individual that reapplies on or after the 15th of the last month of the sanction period and qualifies for a TWP work exemption will not be referred to the TWP for compliance. The case manager supervisor will access the Sanction Override (SANO) screen in MAVERICS, exempt the individual using the "EX" code and work the case in MAVERICS.

If a nonexempt individual reapplies on or after the 15th of the last month of the sanction period, the eligibility worker will work through the TANF application in MAVERICS, creating an Up Front Job Search/Voc Rehab referral. The case manager must pull the referral to JAWS to complete the orientation/assessment process and begin Up Front Job Search/VocRehab. The Up Front Job Search/Voc/Rehab referral must be coded Fully Complete (FC) to generate a compliance record back to MAVERICS that will allow the application to be approved and TANF benefits authorized.

EXAMPLE: If the individual is sanctioned for the months of October and November and reapplies for benefits on November 15, the eligibility worker will work though the TANF application creating a referral to be pulled to JAWS in a **"Received"** status. The case manager will fully complete the TWP intake and Up Front Job Search process and enter the appropriate completion code for UJS. JAWS will send the compliance or non-compliance record to MAVERICS.

At this point, the individual has not been approved for TANF benefits and cannot receive supportive services while in "REceive" status.

An individual who is sanctioned and successfully completes the Up Front Job Search/Voc Rehab process will be eligible to receive TANF benefits, if otherwise eligible, the first month after the month in which compliance was received.

- If an individual, sanctioned for October and November, completes Up Front Job Search/Voc Rehab in November, the individual may be eligible for TANF benefits on December 1.

The TANF application can be approved effective the month following the sanction end date, if the Up Front Job Search/Voc Rehab process is successfully completed after the sanction end date. The SNAP case can be approved prior to the Up Front Job Search/Voc Rehab process being completed. The TANF recipient(s) can be added back to the SNAP household for the month following the sanction end date.

The CM will be allowed to send an exemption request for an individual in "REceived" status.

Fully Completing Up Front Job Search/Voc Rehab

When the individual successfully completes the Up Front Job Search/Voc Rehab process, JAWS will send a compliance record to MAVERICS. If the compliance is received within the 10 days

allowed to complete Up Front Job Search and it is determined the applicant is eligible for benefits, the supervisor must approve the case and the individual will be referred to JAWS in an OPen status for immediate participation in the TANF Work Program.

No Show for Up Front Job Search/Voc Rehab

When the applicant no shows for the Up Front Job Search/Voc Rehab referral appointment, the CM must enter the Withdraw TANF Application (WD) code within 2 days of the scheduled appointment. This will generate a referral to MAVERICS to alert the EW the application was denied in JAWS. If the WD code is not entered by case management, JAWS will automatically deny the referral by entering the No Show (NS) code on day three. A denial notice will be generated to the client in MAVERICS and JAWS will not send a conciliation notice to the individual.

Compliance - Although Sanction Not Applied (Manual Process)

When a TANF case closes due to a program violation, the case must not be re-approved until the household is in compliance. Cases closed for specific program violations will be identified in MAVERICS by the closure reason. However, there will be times when the TANF case may already be in a FRozen status when JAWS sends the non-compliance to MAVERICS. If the program status of the TANF case is RECEIVED, PENDED, CLOSED, DENIED or FROZEN, MAVERICS will ignore the conciliation. If the case closes for any reason other than non-compliance, MAVERICS will send a 'CL' code and the conciliation record will be **closed** in JAWS. This will require special handling at reapplication or during the FRozen status because compliance with the violation must be verified before re-authorization or re-approval.

1. MAVERICS will send an alert to indicate that JAWS sent a conciliation record. MAVERICS will "flag" the case but will not sanction the participant. If the participant who is "flagged" reapplies for TANF benefits, MAVERICS will alert the EW that the participant must comply with the TWP.

2. The **MDHS-EA-319, TWP Conciliation Status Request**, will be used for communication between the intake eligibility worker and the case manager at reapplication and prior to re-approval for TANF benefits when the TANF case closes for another reason and MAVERICS ignores the conciliation. The form may be initiated by either the intake eligibility worker or case manager. The initiator of the form will prepare an original and one copy of the **MDHS-EA-319, TWP Conciliation Status Request**, sending the original to request or convey

information and keeping a copy in the electronic case record. The responder will complete the requested information and return the original form, also keep a copy for the case record. The form with associated material must be maintained in the TANF electronic case record. Completed forms should be sent/mailed daily.

NOTE: The sanctioned individual must contact the eligibility staff before completing an orientation/assessment appointment with case management.

EXEMPTION FROM TWP

TANF mandates participation in approved work activities for all adult recipients who do not meet specific exemption criteria. Although the individual is exempt from work requirements, the exemption may or may not prevent the 60- or 24-month counters from being incremented. An adult included in the TANF money payment assistance unit may be exempt from the mandatory work requirements for the following reasons:

1. **Age** - Individuals over **60** years of age and individuals under the age of **18** years are exempt. However, the minor parent must participate in educational requirements when the infant becomes 12 weeks old, unless the individual has obtained a high school diploma or GED. (Not countable in 60- or 24-month time limits.)

2. **Incapacity** - A physical or mental impairment established by receipt of Social Security Disability or 100% VA Disability or by the Medical Review Unit. (Not countable toward the individual's 60- or 24-month time limits.)

3. **Caretaker of Ill or Incapacitated Child** - Only parents of TANF eligible children are exempt when providing care in the home for another household member who is ill or incapacitated. (Not countable toward the individual's 60- or 24-month time limits.)

4. **Caretaker of Ill or Incapacitated Adult** - Only parents of TANF eligible children are exempt when providing care in the home for another household member who is ill or incapacitated. (Not countable toward the individual's 60- or 24-month time limits.)

5. **Domestic Violence** - An individual battered or subjected to extreme cruelty verified by medical or psychological records and law enforcement. Victims of domestic violence may be exempt for up to 12 months, not necessarily consecutive. (Not countable toward the individual's 60- or 24-month time limits.)

6. **Temporary Illness or Injury** - An individual who has an illness or injury, verified by a physician's certificate, may be temporarily exempt from work requirements up to 30 days. If the disability or illness is anticipated to last more than 30 days, a Medical Review decision must be requested. (Countable toward the individual's 60- or 24-month time limits.)

7. **Pregnancy** - A woman in her third trimester of pregnancy may be exempt from work participation due to medical complications that have been verified by a physician's

certificate. (Countable toward the individual's 60- or 24-month time limits.)

8. **Drug Treatment** - Individuals who are undergoing substance abuse treatment verified by a physician will be exempt from the work requirement during the treatment period. (Countable toward the individual's 60- or 24-month time limits. *See Chapter 11, Drug and Alcohol Abuse*.)

9. **Caretaker of a Child under 12 months** - The caretaker of a child under 12 months old may be exempt from work participation for up to 12 months during the 60- and 24-month time limit. A parent may only receive this exemption for a total of 12 months although the months need not be consecutive and can be divided among more than one child. The State may disregard these individuals from the denominator of the participation rate calculation for all families. (Countable toward the individual's 60- or 24-month time limits.)

NOTE: A teen parent (under age 20) head of household, who has not completed high school or received a GED, must be referred to TWP once the infant becomes 12 weeks old.

Requesting an Exemption in JAWS

The individual may request an exemption from the eligibility worker or the CM. The worker is responsible for obtaining verification and determining exemptions from the TANF Work Program. The CM may request an exemption for any TANF recipient or individual, pulled in a "REceived" status, to the TANF Work Program.

The CM may request an exemption in JAWS based on the following:

1. If an outstanding conciliation exists and the individual requests an exemption within the 10 calendar day time frame, the CM may enter the exemption request in JAWS on the existing conciliation record.

   - If the exemption is approved by the EW/CM, the individual will be exempt from TANF work requirements.

   - If the exemption is denied, the individual will be required to comply with Up Front Job Search/Voc Rehab.

The CM cannot request an exemption once the 10 calendar day time frame expires.

2. If an outstanding conciliation does not exist, the CM may follow the normal exemption process in JAWS.

- If the exemption is approved by the EW/CM, the individual will be exempt from TANF work requirements.

- If the exemption is denied, the individual will be given an opportunity to comply with the TANF Work Program or the application will be denied.

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DEFINITION

A hearing is a process which provides an applicant or recipient an opportunity to appeal agency action or failure to act. When the applicant or recipient disagrees with action that has been taken, the hearing gives him the opportunity to more fully describe his circumstances, to present evidence supporting his claim, and to have his eligibility reviewed by someone not involved in the original decision. Evidence which can be presented in a hearing is limited to circumstances known at the time the eligibility decision was made. New or additional information not known or reported at the time of the case action is not allowed to be presented during a hearing.

There are two types of hearings available: an agency conference or a state hearing. An agency conference is one in which a county staff member who has not participated in determining eligibility for this particular case reviews information with the individual and reaches a decision. A state hearing is a more formal hearing which consists of a presentation by the individual and by others, if he wishes, of facts about his circumstances; questioning by a hearing officer; a recording of the discussion and a review of the findings prior to the rendering of the final decision. A state hearing may also consist of a review by a state hearings officer of the agency conference proceedings. Each type is discussed in more detail later in this chapter.

BASIS FOR A HEARING

An applicant or recipient has a right to appeal decisions regarding eligibility for assistance including the following issues:

1. Decisions regarding eligibility for or amount of TANF benefits
2. Conditions of payment or repayment
3. Denial of opportunity to make application or reapplication of benefits
4. Undue delay in determining eligibility for TANF and in making TANF benefits available
5. Suspension or discontinuance of TANF benefits in whole or in part
6. Assignment or participation issues in the TANF Work Program, including work exemptions, supportive services, good cause, etc.
7. Decisions regarding cooperation with the Division of Child Support Enforcement and good cause claims
8. Application of penalties which results in rejection of application, case closure, or reduction of benefits

NOTE: Some issues which are established by law are not subject to the fair hearing process, such as the maximum TANF benefit level.

REQUESTING A HEARING

The applicant or recipient has the choice of either an agency conference or a state hearing to appeal any decision made on his case. The individual may bypass the agency conference and request a state hearing, or if he chooses to request an agency conference and is dissatisfied with the result, a state hearing may then be requested.

The individual must make the request for a hearing in writing and sign the request. The claimant may be represented by any one he designates; however, he must give the designation in writing. The request for a hearing may be made by:

1. Checking in the space provided on any of the notification forms
2. Writing a letter indicating his request for a hearing
3. Completing form **MDHS-EA-305, Request for a Hearing**

The individual may make the request orally, but this must be followed by a formal written request. The worker will assist the individual by explaining how to request a hearing, sending the form **MDHS-EA-305** to the individual who does not wish to write a letter and lacks a notification form, or helping to fill out a request form when the individual comes to the office of the Department of Human Services and requests a hearing. The request for a hearing may be sent to the county office or to the Administrative Hearings Unit. The worker may give the individual an addressed envelope when the individual prefers to mail the request himself.

TIME LIMIT FOR HEARING REQUEST

Hearing Request as a Result of Change in Case

An individual may request a hearing within 90 days following the expiration of the advance notice period when a change is made in his case. When the request for a hearing is made within 10 days of the date of the change notice, assistance must be continued with TANF benefits unreduced during the process unless the recipient specifically states he does not want benefits continued. If benefits are continued, the individual should be advised that if the hearing decision is not in his favor, he will be required to pay back any assistance for which he was not eligible.

NOTE: Continuation of TANF benefits during the hearing process will not be granted if the TANF case is closed as a result of the 60 month counter or termination of extended benefits.

Hearing Request as a Result of Case Closure

An individual may request a hearing within 90 days following the expiration of the advance notice period when his case is closed. Just as in the change of a case, when this request for a hearing is made within 10 days of the date of the closure notice, assistance must be continued with benefits unreduced during the hearing process unless the recipient specifically states he does not want benefits continued. If benefits are continued, the individual should be advised that if the hearing

decision is not in his favor, he will be required to pay back any assistance for which he was not eligible.

NOTE: A case closure for a "pure" TANF sanction will not result in a claim if benefits are continued. A sanction will be imposed if the hearing decision is in the Agency's favor. However, if benefits are received because of unreported information, a claim would be established in addition to a sanction.

State Hearing Request after Local Hearing

When the individual has had a local hearing and is not satisfied with the outcome, he must request a state hearing within 90 days following the expiration of the advance notice of case change or closure.

NOTE: If the 10th day falls on a weekend or holiday, the individual must always be given until the first working day following the weekend or holiday to prevent the action or to request continued benefits.

INDIVIDUAL'S RIGHTS IN HEARING

The applicant or recipient has the following rights in a hearing:

1. To present facts about his circumstances and eligibility orally or by documents

2. To have an attorney, relative, or friend to assist him if he wishes or to present the facts for him

3. To question adverse witnesses about the information they have about his eligibility

4. To examine the hearing folder. This may be done before, during, or after the hearing. The claimant or his representative is to examine the hearing folder in the county office and is not to remove it. If he requests copies of portions of this record, the county will provide these. Exception: Copies of medical material cannot be supplied.

HEARING RECORD

The county office must initiate the request for a hearing on the Fair Hearing Request (FHRE) screen when a request for a state hearing is received. If the hearing request is submitted in writing, the document should be scanned to the TANF Fair Hearing folder in Interwoven/Worksite. The request for a hearing should be documented in the case record on the Case Documentation (CADM) screen in MAVERICS. The narrative on CADM should include a summary of the action taken which caused the request, along with the document type and scan date of any verification used to validate the case action taken which prompted the hearing request.

When the hearing is requested because of issues relating to the TANF Work Program, the county must ensure that documents from the Case Manager (CM) and/or the Job Readiness Trainer are contained in the appropriate folder in the EA electronic case record or scanned to the Fair Hearing folder. If a hearing request is received by the Job Readiness Trainer, the county must be made aware of the request, which should be subsequently documented on CADM. Appropriate work program staff, case management, and eligibility staff will attend the hearing. The hearing decision can be found on the FHRE and Notice History (NOHS) screens in MAVERICS.

For hearings involving the determination of incapacity to establish eligibility for TANF money payment or for a work program exemption, the medical and social information should be scanned to the Medical Review folder, with reference to these documents being made in the narrative summary on CADM.

BASIS FOR DISMISSING HEARING REQUEST

The department may deny or dismiss a request for a hearing only under the following circumstances:

1. The request is written by the claimant or his designated representative in writing, stating the reason.

2. The request for a hearing is made on the sole issue of State or Federal Law requiring automatic grant adjustments and the recipient does not make an individual appeal on incorrect computation of his grant.

3. The hearing is abandoned. This occurs when neither the claimant nor his representative appears at the time and place agreed upon for the hearing and has furnished no valid reason for inability to be present.

HOLDING THE AGENCY CONFERENCE

Federal regulations allow the county to hold an agency conference in the county office for an applicant or recipient who requests this prior to asking for a formal state hearing. When the decision in the agency conference results in the department's compliance with the individual's request, the need for a state hearing may no longer exist. However, the agency conference cannot be used as a substitute for a state hearing unless the claimant agrees.

When the applicant or recipient makes a timely request for an agency conference, the county director will acknowledge receipt of his request and will schedule the agency conference within 10 days after receipt of the request.

The county staff member holding the agency conference must be one who has not participated in determining eligibility or who directed the decision. Although the county director must officially sign all forms with his name, if he has not actually taken part in the eligibility decision, the director or his/her designee may hold the agency conference. If the director has taken part in the decision, he must designate another staff member to hold the conference. If there is no county staff member who qualifies, the county director will notify the regional director who will either hold the hearing or designate someone to do so.

The county department is responsible for:

1. Providing informal procedures for the individual and his representative, if present, to present information about the case, to question the basis for the decision which the county has made, and to have an explanation of the eligibility requirements as they pertain to the individual's situation.

2. Considering carefully the information presented at the conference and reaching a decision as to the individual's eligibility. Do not use any material in making this decision that was not discussed with the individual during the hearing or made available to him in the hearing folder.

3. Notifying the claimant of the decision based on the agency conference by use of one of the Notices of Decision on Agency Conference discussed later in this chapter. These notices give information as to the individual's right to a state hearing and provides space for him to use to make that request. If the agency conference involves the determination of incapacity in TANF the worker must let the individual know that the county department cannot make this decision but will have to forward information to the Medical Review Team for a final decision. The agency conference decision must be documented on CADM.

NOTICE OF DECISION

The staff member who has held the hearing will notify the individual of the decision by:

1. Sending the **A902** in MAVERICS

2. Stating clearly on this form the reason for the decision reached. The statement will include the eligibility factor involved, the evidence considered, and the policy which governs the decision.

3. Let the individual know that if the decision is adverse to him, the county will take action to reduce the benefit, terminate the benefit, or close the case on the next possible payroll.

4. Let the individual know of his right to request a state hearing, but that he must do so within 20 days of the mailing of the notice, and that assistance will not be continued or will be continued in the same amount during the state hearing process.

INTRODUCTION

A state hearing calls for a review of the claimant's eligibility, based on all the evidence at the time the case action was taken. The claimant has the opportunity to present certain facts he believes are important to his claim. He may have a lawyer or other representative assists him in presenting his claim and give reasons why the county's action should be corrected.

ACKNOWLEDGMENT OF HEARING REQUEST

When Administrative Hearings (AH) staff receives a request for a state hearing, they will enter the request into MAVERICS on the Fair Hearing Request (FHRE) screen. An alert will be generated to the worker and the supervisor based on the unit and caseload assignment in MAVERICS. This alert should prompt the worker to scan all related materials into Interwoven/Worksite and document CADM. Administrative Hearings Staff will verify that the material has been scanned. A daily report will be generated for review by AH.

COUNTY RESPONSIBILITY IN PREPARING FOR HEARING

Upon receipt of any request for a state hearing in the county office or upon receipt of the alert of a state hearing of which the county has no prior knowledge, the director or case reviewer will:

1. Review the record and reexamine the action of the county in order to determine whether an adjustment should be made.

2. Determine whether the individual is eligible on points other than the one at issue.

3. Ascertain whether there is sufficient information recorded to determine the amount of payment in case the decision is in favor of the individual.

4. Secure any additional evidence needed for the hearing. If at any time prior to the holding of the hearing the county office finds that the previous decision can and should be changed, the county will take the necessary action to initiate or reinstate the payment or adjust the benefit level. The county office will notify the Administrative Hearings Office of its action and whether the claimant is willing to withdraw his request for a hearing. The county will report promptly to the hearings officer any changes in the claimant's circumstances.

5. The request for a fair hearing should be documented in the case record on the Case Documentation (CADM) screen in MAVERICS. The narrative on CADM should include a summary of any verification used to validate the case action taken which prompted the fair hearing request.

6. Scan the material as outlined in this chapter, *Hearing Record*, into Interwoven within five days after the receipt of the hearing request.

If the county office received the hearing request directly from the claimant prior to it being received by Administrative Hearings, the request should be included together with the hearing material.

Under present Federal regulation, the department is required to act promptly and take final action on a state hearing within 60 days from the date of the request for a hearing. Administrative Hearings will make every effort to complete the hearing process well within this time period.

STATE RESPONSIBILITY IN PREPARING FOR HEARING

Administrative Hearings staff will review the material scanned by the county department. If the review shows that an error was made in the action of the county department, or in the interpretation of policy by the county, or that a change has been made, the county will be asked through appropriate channels to make an adjustment. When the county worker discusses the matter with the claimant and he is agreeable to the adjustment of his claim, he will give his withdrawal in writing and state the reason.

If the action of the county department is in order, Administrative Hearings will request only any additional information that may be needed to make a decision.

TIME AND PLACE OF HEARING

The hearing shall be set with as little delay as possible. Responsibility for scheduling the time and place rests with the Administrative Hearings Office. The Administrative Hearings Officer will notify the client by sending a **Fair Hearing Appointment (A091**) through the MAVERICS (MAVS) system. This notice will generate an alert to the county worker and director informing them that an appointment has been set for the client. The notice will also populate the FHRE screen with the appointment information. All state hearings are scheduled to be conducted by telephone; however, the individual may request a face-to-face hearing which would be scheduled at a later date.

The notice of the time and place shall be mailed to the individual at least five days before the day for which the hearing is scheduled. A request is sent to the claimant to reply at once whether the time and place are satisfactory. A copy of this notice can be viewed on the Notice History Screen (NOHS) in MAVERICS.

The county in which the hearing is to be held will arrange for a suitable room in which the hearing can be held in privacy. If the claimant is incapacitated and unable to come to the office, the county will arrange for the hearing to be held in the home.

If the client failed to attend or withdraw his/her request for the hearing, the officer will send the client a **Fair Hearing Other Notice (A093)** through MAVS, explaining the reason why Administrative Hearings has denied his/her request.

NOTE: County Directors/Supervisors and Workers must check alerts daily in order to know the correct dates of all appointments scheduled on the county's calendar by Program Integrity. The county's calendar can be accessed from the SEOO menu, function 5 (HFNO) and then select function 12 (Hearing Appointment Calendar).

WHO MAY ATTEND

The hearing is an orderly but informal proceeding much in the nature of a conference. The term informal refers to the fact that regular court procedures, such as swearing in, are not followed. However, at the discretion of the hearings officer, he may swear in all persons present for the purpose of holding the hearing. A ruling of the State Attorney General empowers State and County Department staff with the authority to administer oaths and affirmations in accordance with the state statute.

The hearing will not be open to the public. Those who should attend the hearing are the individual, the hearings officer, and the county worker who has participated in the eligibility decision. If this worker is not available, the case supervisor or director who supervised the decision should be present. All other persons who attend will attend for the purpose of either representing the claimant, giving information on his behalf, or for the purpose of representing the county or state agency. All persons who attend the hearing will be asked to give information pertinent to the issues under consideration.

GROUP HEARINGS

A group hearing can be held for a number of claimants under the following circumstances:

1. The Department may consolidate the cases and conduct a single group hearing when the only issue involved is one of a single law or agency policy.

2. The claimants may request a group hearing when there is one issue of agency policy common to all of them.

   Each individual claimant in a group hearing must be permitted to present his own case and be represented by his own lawyer or to withdraw from the group hearing and have his appeal heard individually.

HOLDING THE HEARING

The responsibility for the conduct of hearings has been delegated to Administrative Hearings staff. The hearing will be held by an impartial hearing officer from that staff.

The hearings officer will open the hearing with an explanation of the purpose, the manner in which it will be conducted, the availability of the hearing information, the confidential nature of information presented at the hearing, and the fraudulent provision of the assistance acts. He will follow this with the information that the final decisions as to eligibility or ineligibility will be made by the hearings officer on the basis of the facts brought out in the hearing, and that the

claimant will be notified by letter giving the decision and the reasons as to why the decision was reached.

The hearings officer will make a general statement as to the eligibility requirements. He will define the issue involved in such a way that the individual will understand.

The individual shall be given an opportunity to make a full statement concerning his claim and shall be given assistance in bringing out all information on which he bases his claim. All persons representing the claimant and those representing the county department shall have opportunity to state all facts pertinent to the points at issue and to make corrections or modifications in statements made by themselves or others testifying.

The claimant shall have the privilege of examining written evidence, of questioning or refuting oral and written testimony, of examining witnesses, and of otherwise developing facts relevant to the issue or issues at hand, under the active leadership of the hearings officer.

CHANGES DURING THE HEARING PROCESS

If changes occur during the pendency of an appeal which results in further reduction of benefits or ineligibility, the household or its representative will be given the opportunity to request a hearing on the new issue and such a request will be treated as a new hearing.

Review by Medical Appeals Team

If the issue for a hearing is one of incapacity of a TANF parent, after the hearing has been held, the Administrative Hearings Office will forward the social and medical information with a copy of the transcript to the Medical Appeals Team. The process will be:

1. The Medical Appeals Team will review the evidence and make a decision on medical eligibility. This decision will be sent to the Administrative Hearings Office.

2. If the Medical Appeals Team finds that additional information is needed, they will direct the county department as to the proper steps to take and will again review the findings when the new reports are received.

Summary and Recommendation

The hearings officer shall have the responsibility of preparing a statement summarizing the facts brought out in the hearing as recorded in the transcript, indicating the policy governing the issue at hand, and making a recommendation based on these findings.

DECISION OF THE STATE DEPARTMENT OF HUMAN SERVICES

The hearings officer of the State Department of Human Services is the official in whom responsibility for final decision has been placed. The decision shall be based only on evidence, testimony, and documents used at the hearing.

The hearings officer will notify the client by sending a **Fair Hearing Decision Notice (A092)** through MAVS of a decision within seven days from the time of the review, setting out the reasons for the decision. A copy of this notice may be viewed on NOHS, and an alert will be generated to notify the county staff of the decision made on this case. Copies of the transcript will be provided if requested. The notice will populate the FHRE screen with the hearing decision.

The decision of the hearings officer is final and binding upon the county and state department. When changes in the individual's situation, in the law, or in policy come about after a hearing decision has been made, the county department will take its regular action as it would on any other case.

The Administrative Hearings Office will provide any necessary instructions to the county department for making money payments or adjustments.

SECOND REQUEST

The decision of the hearings officer is final. Should a claimant appeal a second time without a change in his circumstances or agency policy, the administrator of the Administrative Hearings Office will contact the claimant in writing explaining this fact. If the individual's circumstances or policy has changed, the individual should make a new application.

STATE REVIEW OF THE AGENCY CONFERENCE

When the claimant receives an adverse decision on an agency conference, he may request that the state hearings officer review the findings and decision made on that conference.

The policies above on acknowledging receipt of request, withdrawal, changes during the hearing process, and notification remain the same. However, the procedures to be followed by the county department and the Administrative Hearings Office will vary somewhat from those used for the formal hearing.

The county will be responsible for scanning agency conference material to the TANF Fair Hearing folder in Interwoven/Worksite within five days after the receipt of the request. The request for the review should be documented in the case record on the Case Documentation (CADM) screen. If additional information is needed, the hearings officer will contact the county department.

The state hearings officer shall review the agency conference record to determine:

1. Whether the record contains the essential information on the eligibility factors involved.

2. That the summary of the agency conference contains a resume of the information which the individual brought out at the agency conference.

3. That the decision of the county director/designee was based on the evidence in the agency conference record and was in line with appropriate policy and regulation.

If the state hearings officer finds that the local decision was correct, he will prepare a decision summarizing the issue and the basis for the decision. For instances in which the state hearings officer finds that the facts in the record are inadequate or that incorrect policy has been applied, he will direct the county to get the facts or use correct policy and change the decision, reinstate the payment, or correct the amount of payment retroactively to the date of erroneous action.

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INTRODUCTION

Effective April 1, 2005, the State of Mississippi began using prospective budgeting to determine eligibility for all TANF households. Retrospective budgeting, including monthly reporting, was discontinued. This transition meant that all TANF households became Simplified Reporting (SR) households. Such households are required to report when the household's total gross monthly income meets or exceeds 185% of the poverty level for the household size at the time of their current certification period. This change must be reported by the 10th day of the month following the month in which the change occurred. TANF households must also report, within 5 days, when the entire household moves out of state or when it becomes clear that a child will be out of the home for more than 30 days.

For TANF households, eligibility workers must act on any changes that become known to the Division of Economic Assistance. If it is discovered that a household failed to report a change as required or provided false information at any time which resulted in an over issuance of benefits, a claim must be processed.

Claims must be processed under TANF policy in effect at the time of the over issuance. For claims identified for months prior to May 2005, the claims data base will accommodate both prospective and retrospective budgeting methods, as needed. In preparing claims for months beginning with May 2005 and ongoing, only prospective budgeting may be used.

DEFINITION AND LEGAL BASE

The term "improper payments" is used when a TANF or a refugee individual receives assistance but was not entitled to all or part of the payment or services received.

Public Law 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, (PRWORA), requires that States promptly take all reasonable and practical steps to correct and collect all improper payments made through Temporary Assistance for Needy Families and TANF related programs regardless of whether the improper payments were due to willful or non-willful withholding of information or agency error. Also, there are no provisions for waiving adjustments due to the amount or age of the improper payment. However, the Law does not require the pursuit of recovery of total overpayments of less than $35 on cases for a former recipient until such time that he reapplies and becomes eligible again. Corrective payments should be limited to assistance units who are currently eligible or who would have been currently eligible if an error had not occurred. See *Chapter 7, Corrective Authorization Procedures*.

Recoupment can be made by reduction of benefits as well as by voluntary repayments.

Overpayments may be recovered from liquid assets, gross income, and the assistance grant. However, only gross income and the assistance grant will be used to establish the amount from which monthly recoupment from benefits can be made. The Department must always allow the client to retain 90% of what the maximum grant would be for the appropriate number of individuals when there is no other income available to the family.

Recoupment by reduction of benefits is only possible when the client to whom overpayment was made remains eligible for assistance in the amount of $10 or more. Investigation for possible recoupment from closed cases is the responsibility of the Fraud Investigation Unit in the Legal Services Division. Recoupment from closed and under $10 cases is the responsibility of the Department of Accounting and Finance. When a case has been closed and outstanding overpayments or underpayments remain on reapplication, these payments are to be recouped by reduction of the grant, or corrected, when the case becomes active again. See procedures later in this chapter.

Using guidelines dictated by federal regulations and state law, the Department has chosen to recover from the person who caused the overpayment although that individual may no longer receive a grant.

The policy and procedures set out below are applicable to the TANF and Refugee Resettlement and Cuban/Haitian Entrants programs.

Both the county and the state offices of the Department have responsibilities for handling cases of improper payment and for recovering amounts improperly paid. See continued discussion for the state statute regarding suspected fraud.

INSTANCES REQUIRING A CLAIM

Instances which may result in a claim include, but are not limited to, the following:

The assistance unit:

1. Failed to provide the county with the correct or complete information.

2. Failed to report to the county changes in its circumstances.

3. Provided erroneous information.

4. Received continued benefits pending a fair hearing decision and is found to be ineligible or eligible for fewer benefits than it received.

The county:

1. Incorrectly computed the household's income or deductions or otherwise made an error that caused the assistance unit to receive assistance to which they were not entitled.

2. Failed to follow up on a reported or expected change in the assistance unit's circumstances.

3. Continued assistance without a timely redetermination.

NOTE: Do not consider that a person received improper TANF payments when the worker determines that the person's share of a TANF payment has been considered by SSI as unearned income in a retroactive SSI payment for that individual. **CLAIMS THRESHOLD**

Federal regulations allow states not to pursue claims when it is not cost-effective to establish and collect on them. If the worker determines the claim amount is $35 or less, a claim will not be prepared. The threshold is applicable to all claim types involving an over issuance of benefits. If it is determined a claim is not required due to the threshold provision, the case should be documented that the amount of the claim is $35 or less.

STANDARD OF PROMPTNESS FOR CLAIM COMPLETION

Upon determination that a claim is required, the county must establish and complete Administrative Error (AE) and Inadvertent Household Error (IHE) claims within six months of discovery. Suspected Intentional Program Violation (SIPV) claims must be completed within **80 days** of discovery.

TYPES OF IMPROPER PAYMENTS

Administrative Error (AE)

An Administrative Error occurs when the county takes an incorrect action or fails to take an action which causes an improper payment.

Examples include, but are not limited to:

1. Failure to follow-up when the assistance unit reports a change in income, living arrangement, or other information that would affect eligibility or amount of payment.

2. Failure to follow-up when the assistance unit is asked to apply for a possible benefit such as social security, veteran's, unemployment or other retirement or disability benefit.

3. Failure to follow-up when the assistance unit reports a plan to sell, transfer or otherwise dispose of property, real or personal, or to buy or otherwise acquire property.

4. Failure to complete the redetermination timely, causing benefits to be paid to which the assistance unit was not entitled.

5. Failure to interpret policy correctly. In this instance the correct interpretation of policy would cause a denial, closure or reduction in benefits.

6. Failure to enter income or expenses correctly, code participation correctly, or some other error made that caused benefits to be issued to which the assistance unit was not entitled.

7. Failure to follow up on known facts such as:

    a. The removal of an individual in the assistance unit who qualifies for and receives SSI.

    b. Closing a case when a recipient receives excess cash reserve.

    c. Using any information which alerts the county to a change.

8. Mechanical error, such as machine or human oversight or failure, where assistance is authorized or continued to an ineligible individual or assistance unit, or a money payment is authorized for an amount greater than the amount to which the assistance unit was entitled.

Inadvertent Household Error (IHE)

An Inadvertent Household Error occurs when the assistance unit receives erroneous payments or payments in a larger amount than is proper when the applicant or recipient fails to provide accurate and complete information and there is no evidence that the client willfully misrepresented or withheld information. All indications are that the individual misunderstood or was unable to comprehend the relationship between information to be reported and eligibility requirements. Such cases include those in which the adult is senile, mentally ill or mentally challenged, or physically unable to communicate. The worker must be sure to document the client's explanation or why the client's statement is unavailable.

Suspected Intentional Program Violation (SIPV)

A Suspected Intentional Program Violation occurs when the assistance unit intentionally falsified, misrepresented or withheld information that would have caused ineligibility or reduced benefits.

The following guidelines should be used when determining if the claim is SIPV.

1. Whether the applicant or recipient obtained assistance by making a willfully false statement or knowingly withholding information affecting his eligibility. The worker must be alert to indications as to whether the individual understood that the information he gave or withheld had an effect on his eligibility.

2. Whether the applicant or recipient had given information on other factors of eligibility or at other times which appeared to contradict the later statements he made and whether it appeared that he made the later statements knowing that they were different.

3. Whether the county department relied on the individual's statement of his action, and granted or continued assistance to him on the basis of his statement.

NOTE: These guidelines must be considered when determining if the claim should be worked as IHE or SIPV, since these are the two "client error" types of claims. If, after reviewing the client's statement or explanation for the failure to report a change etc., the worker is unsure if the claim is SIPV, the description of IHE should be reviewed before a determination is made of the claim type. Again, the worker must document the case and the claim narrative to include the client's statement or the reason why this was not available.

Penalty

The state statutes which govern the granting of public assistance provide a definition of fraud and prescribe a penalty as follows:

Whoever obtains or attempts to obtain, or aids, or abets any person to obtain by means of willfully false statement or representation or by any impersonation, or other fraudulent device:

(1) Assistance to which he was not entitled, or

(2) Assistance greater than that to which he is justly entitled, is guilty of a misdemeanor, and upon the conviction thereof shall be fined not more than five hundred dollars ($500.00) or be imprisoned at the discretion of the court. In assessing the penalty the court shall take into

consideration the amount of money fraudulently received; or

(3) Punished by imprisonment in the state penitentiary for a term not exceeding three (3) years, and fined not less than one thousand dollars ($1,000.00) nor more than ten thousand dollars($10,000.00); or

(4) Punished by imprisonment in the county jail for a term not exceeding one (1) year, and fined not less than one hundred ($100.00) nor more than one thousand ($1,000.00).

Since fraud is a serious charge to make against a person, and the results can be serious, the facts in such a case must be clearly and accurately stated. The following is the ruling of a Mississippi court in a civil fraud case:

> There is a presumption against fraud, dishonesty, and bad motive, and evidence to overcome this presumption must be more than a mere preponderance; it must be clear and convincing.

The form which the applicant and recipient is asked to sign, Form **MDHS-EA-900**, carries with it a warning about the penalty for giving false information, so that when he completes the form and gives information, he has been put on notice about giving incorrect or incomplete information.

NOTE: TANF claims involving attempted fraud should be entered in the claims narrative as suspected fraud (SIPV) and not Intentional Program Violation (IPV).

CRITERIA FOR ESTABLISHING THE SUSPECTED INTENTIONAL PROGRAM VIOLATION CLAIM

The months affected by the Suspected IPV over issuance will be calculated back to the month that the over issuance occurred, not to exceed more than six years prior to the date that the over issuance was discovered. The month of discovery will not be included in the six-year count, but will be included as part of the over issuance.

Example: If the over issuance is discovered in July 2006, the six-year period is July 2000 through July 2006. Any of those months may be reported as an over issuance.

In the event an over issuance is discovered too late to prepare a claim as outlined above, the case will be documented on CADM in MAVERICS as to the date the over issuance was discovered, the most recent month that the household received more benefits than it was entitled to receive, and the reason for no claim being reported.

NOTE: The date of discovery is the date the county receives verification/evidence that an over issuance occurred.

STATUTE OF LIMITATIONS ON SIPV

Generally, the statute of limitations does not apply to the state on civil actions, so that court action to recover amounts of assistance improperly obtained can be brought without regard to the time the fraudulent act was committed.

Fraud

If public assistance is actually obtained under false pretenses by means of willfully false statement or representation or by impersonation or other fraudulent device or false pretenses, the statute of limitations does not bar criminal prosecution for such an offense.

Attempted Fraud - Suspected Intentional Program Violation (SIPV)

If, however, there is only an attempt to obtain public assistance by means of a willfully false statement or representation, or by impersonation, or other fraudulent device or false pretenses, the statute of limitations bars criminal prosecution unless commenced within two years after the commission of that offense. This offense is covered by Public Law 97-19-71(4).

Therefore, the Department will refer to law enforcement officials within two years of the attempt to obtain assistance under false pretenses. In cases where assistance is actually obtained under false pretenses, the Department will refer such cases to law-enforcement officials when and as such cases are discovered, and properly investigated, without regard to the two year period.

Other (OT)

There will be situations which cannot be identified as suspected fraud, administrative error or inadvertent household error.

Examples of this type of claim include:

1. An employer provides erroneous information which creates an overpayment to an individual who is unaware of the error.
2. The assistance was continued or continued at the same amount during the hearing process and the hearing decision was not in the individual's favor. All payments or overpayments made during this period are considered improper.

TRANSFER OF CLAIMS

When the county staff becomes aware that an individual responsible for repayment of an **unpaid claim balance** is participating in another TANF case, the Claims Management Unit **MUST** be notified via a memorandum to transfer the claim to that active case.

NOTE: A claim will only be transferred when there is a balance and payments are not being made.

PREPARING THE CLAIM

When an improper payment is discovered, the claim must be identified in MAVERICS. The following day the worker should be able to enter **MNCLMS** (Claims Database) to work the claim. A separate claim must be identified for each type of claim to be worked. For example, if the worker determines that a claim is to cover the period of 01/05-10/05, but the months of 01/05-07/05 will be worked as SIPV and 08/05-10/05 will be worked as AE, then two claims must be identified in MAVERICS.

The following material will explain what information is needed in working the claim.

DETERMINING THE FIRST MONTH OF THE CLAIM

After excluding any months that are more than six years prior to the date the overpayment was discovered, the worker will determine the first month of overpayment as outlined below. For the months that may be included, check the benefit history screens.

Overpayment Occurring at the Time of the Initial Application

When information is not reported or is provided incorrectly or when an action is taken by the worker at the time of application which results in an overpayment, the first month of the claim will be the beginning payment month for that application.

NOTE: The worker will prepare the claim using the budgeting procedures that should have been used to work the case. Due to the conversion of all TANF cases to Simplified Reporting in April 2005, all cases are budgeted prospectively effective 4/1/05 for applications and 5/1/05 for redeterminations.

EXAMPLE: The individual applied on September 10, 2004 and the case was approved on September 25. The individual failed to report that they were employed at the time of application. The first month of the claim would be September. Since September and October were worked prospectively and then beginning in November the case was worked retrospectively, the claim would be worked using the same budgeting methods.

EXAMPLE: The individual applied on August 15, 2005 and the case was approved on September 10. The individual's case was budgeted ongoing prospectively. The EW included a child who was not eligible based on relationship. The claim would be worked prospectively.

Overpayment Occurring After Authorization

When the overpayment occurs as a result of a change, the worker will first determine if the change was reported timely or untimely. If the assistance unit failed to timely report a change, the first month of the claim will be the first month in which the change would have been effective had it been timely reported.

EXAMPLE: The head of household began a new job in July. The income received in July exceeded the household's income limit. This change was not reported until the recertification interview November 5. Since the change should have been reported by August 10th and action taken for September, the first month of the claim would be September.

If the assistance unit reported a change timely, but the county failed to act on the reported change timely, the first month of the claim will be the first month the county should have made the change effective.

EXAMPLE: On August 1 the individual reported that her 17-year-old son moved out of the home on July 28 to live with his older brother and work. The EW failed to remove the son from the case. The error was discovered in case review on December 7 by the Supervisor. The first month of the claim would be September.

EXAMPLE: A child turns 18 on March 10th which made him ineligible April 1. The worker fails to take action timely and the child is not removed until June. The first month of the claim would be April.

DETERMINING THE CLAIM AMOUNT

After determining the first month of the claim, the county will determine the correct amount of TANF benefits that should have been received for each month of the claim.

When determining the amount of TANF benefits that the assistance unit should have received each month, the county will work each month based on the information that was reported at the time and the information that the claim is based on. New information, such as child care, that was not reported and verified at the time will not be considered in working the claim.

When the correct information is entered in **MNCLMS** and the budgets worked for the months included in the claim, the benefit amount the assistance unit actually received and should have received will be calculated by **MNCLMS**. This can be viewed on **AFPD**.

The difference between the benefits the household received and the benefits it should have received is the overpayment amount and will be displayed on **AFSU** (AFDC summary screen).

NOTE: If an underpayment shows up on **AFSU**, do not pend the claim because it cannot be approved in the Claims Management Unit (CMU).

PREPARING THE NARRATIVE

The following information must be included in the claim narrative. This information must be clear and concise in order for the Claims Management Unit to approve the claim. The county must remember that the information that is entered in **MNCLMS** is the ONLY information that CMU uses to approve a claim since they do not have access to the case record or documents that support the claim. Proper names must be used in the narrative. The following list is in the same order as the fields in **MNCLMS**.

REASON FOR CLM TYPE: This entry should be a simple, concise phrase describing the reason for the claim.

CATEGORY: This entry will identify the claim as a new or initial (INI) claim, any additional claims (ADD), or a correction to a claim (COR).

CLAIM TYPE: This entry will identify the type of claim that the county has determined this claim to be.

SOURCE OF DISCOVERY: Description of how the county discovered that a claim existed. Examples include: IEVS, case review, check stubs, etc.

DATE OF DISCOVERY: The date that the county obtained evidence used to determine a claim needed to be worked.

DATE OF CHANGE: The date the change occurred that led to the claim.

DATE CLIENT REPORTED THE CHANGE: If the assistance unit reported the change, enter the date it was reported. If the assistance unit did not report the change, enter 9's.

BENEFITS TERM: If the case closed based on the information used to work this claim, enter the effective date of closure. This date should be the month after the month listed in the field OVERISSUANCE/OVERPAYMENT MONTHS THRU. Or, if the case did not close, enter 9's.

BENEFITS CORRECTED: If the case remained open, enter the month that the benefits were corrected in MAVERICS. This should be the month after the month listed under the field

OVERISSUANCE/OVERPAYMENT MONTHS THRU. Or, if the case closed,

enter 9's. **OVERISSUANCE/OVERPAYMENT MONTHS**: **FROM**: The

first month of the claim.

THRU: The last month of the claim.

If the claim covers two or more separate time frames, list the first and last months in these fields, then list the periods not included and explain why the months were not included on OVN3 under OTHER.

The entries in these fields should match the information on **AFSU**.

EXPLAIN THE REASON AND JUSTIFICATION FOR THE CLAIM: A simple explanation including who, what, when and where, that describes why the claim is being worked.

EXAMPLES: SIPV - Ms. Jane Doe failed to report ongoing income which exceeded the household's limit.

SIPV - Ms. Jane Doe failed to report at interview that she was employed at Wal-Mart.

AE - Ms. Jane Doe reported that her son had moved out of the home but the information was not acted upon by the county.

IHE - At application, Ms. Jane Doe failed to report receipt of an annual holiday bonus received each December as part of her regular income.

EXPLAIN THE DISCOVERY OF THE CLAIM: An explanation of how the claim was discovered. Examples include: **IEVS**, Ms. Jane Doe reported the information untimely, anonymous tip, case review, etc.

EXPLAIN VERIFICATION OBTAINED: A description of the verification that the county has to support the claim. The description must include who, what, when and where. If **IEVS** is the only source, the case and claim must be documented on the attempts to get the information verified.

EXAMPLES: SIPV - Wage form completed by Wal-Mart showing a hire date of 01/09/05, a termination date of 04/16/05, first check received 01/17/05, last check received 04/25/05 and gross wages for the weeks of 01/17/05 thru 04/25/05.

IHE - Copy of annual bonus check received in December.

AE - Ms. Jane Doe reported on 08/05/06 that her son, John was leaving her home to go live with his father. This was documented in the case record, but action was not taken by the county.

CLIENT'S STATEMENT AND SUPPORTING EVIDENCE: An explanation of the error that caused a claim to be needed. The county must be very specific in describing the error, justifying the error type and listing all pertinent information including the client's statement or explanation or the worker's attempts to contact the client. See the examples below for the specific information that is to be included, noting that the IHE and SIPV claims require a client's statement.

EXAMPLES: SIPV - Be very specific. Document the dates of the **MDHS-EA-900 and 900A** prior to the claim, followed by all of the 900/900A's during the claim period, including whose signature appears on each form. An explanation should be made about how long the case has been active and any other information the county has to back up the claim. This part of the narrative should back up the county's belief that the assistance unit is suspected of an Intentional Program Violation. For example: Ms. Jane Doe failed to report that she had accepted employment at Wal-Mart. Ms. Jane Doe signed the **MDHS-EA-900** at application on 06/02/05. Ms. Jane Doe signed the **MDHS-EA-900** again at redeterminations on 10/20/05 and 04/25/06.

Client's Statement: If the county did not discuss the claim with the assistance unit, a MAVS Request for Information should be mailed. The county must explain in the notice that a claim is being worked and ask for a statement explaining why they did not timely report the information being used in the claim. The county will also need to explain who will be responsible for the repayment. The statement that is given by the assistance unit must be included in this section of the claim.

AE - This claim is being worked as an agency error because Ms. Jane Doe reported timely that her son, John, was moving out of her home and in with his father. However, the county failed to act on this information and remove John from the case.

IHE - At application, Ms. Jane Doe provided wage verification without including the annual holiday bonus received each December.

OTHER: This field can be used to list any other information needed for the claim such as the claim type and the amount of the claim, any months within the claim that are not months of overpayment, any cross-references to other claims narratives budgeting method and any additional information that substantiates the claim. The county may also use OTHER to finish fields in which they ran out of space in the narrative. If OTHER is needed for this, make a reference to OTHER from that field.

OVERPAYMENT CLIENT RESPONSIBILITY SCREEN (OVC2): The county must code this screen to list the primary individual responsible for the repayment of the overpayment and any other individuals responsible for the repayment should the primary individual become unable to pay or does not pay in full. The coding will be completed as follows:

Y - Primary individual responsible, usually the PI or other parent in a two-parent assistance unit. Only one individual can be coded "Y".

R - Individuals responsible if the primary individual is not available. This will include all other case members in a TANF case during the period of overpayment, including minors.

N - Any individuals who were not in the case at the time of the overpayment will be coded "N". Also, any step-parent whose income was deemed should be coded "N".

ACCUSED/GUILTY: This field will identify the individual or individuals accused of SIPV. This should be the individual the county feels deliberately failed to give correct information in order to receive benefits that they were not entitled to. If the claim is not being worked as SIPV, an "A" is not required. The coding is as follows:

A - Accused - The primary individual or individuals responsible.

R - Responsible - Other individuals responsible for the case. N -

Not responsible - Case members not held responsible.

CORRECTED CLAIMS

Corrected (COR) claims are generated when there is additional information received for months of over issuance on a previously established claim. The worker must **ID** a new claim and only include the months of over issuance that is affected by the additional information from the previous claims.

The worker must complete the narrative and budgets for this recoupment. The county staff should contact the **Claims Management Unit** to make any adjusts needed for **OVCA.**

PROCEDURES AFTER THE CLAIM IS APPROVED

After the claim is approved, the individual will be sent a notice explaining the reason for the overpayment and that MDHS will collect these improper payments. The individual may contact the county for more information about the overpayment. The county should thoroughly explain the reason for the overpayment, the collection procedures and answer any questions from the individual.

The household should return the demand letter, signed by the PI indicating the preferred method of repayment in the space provided, or the PI may call and arrange repayment with the worker. Either contact must be made within 10 days as specified on the notice.

If the individual's case is closed or they choose to repay on a monthly basis, advise him that payment must be in the form of a money order or cashier's check made payable to STATE TREASURER and mailed to the State Office. The payment must be received by the third of the month and should include the case name, case number and the notation "TANF" in order to receive proper credit for the payment.

If the individual fails to respond and has not made arrangements for direct repayment or requested a hearing prior to the expiration of the advance notice period, then the county will begin recoupment from the money payment. The **A702 Recoupment from Grant** must be mailed to the individual to inform him of the change.

If the individual requests a hearing, the county will explain that any payments made during the hearing process must also be repaid if the individual does not win the hearing. The county will need to prepare hearing folders that include a copy of the claim and all material used in working the claim.

The claim should be pulled up with other current case material and filed on the top left side of the case record at each redetermination until the total overpayment is recovered.

The worker should make the client aware that changes in the money payment will affect the amount being recouped each month, and MAVERICS will adjust the amount to ensure that the maximum is withheld each month.

The Claims Management Unit and Fraud Investigations will continue to handle repayment on inactive cases. The minimum payment that an assistance unit must make will normally be 10% of the income available to the assistance unit. This amount may be increased if the assistance unit has cash reserve.

RECOUPMENT OF IMPROPER PAYMENTS

Legal Base

According to legal advice obtained from the Office of the State's Attorney General, it is the responsibility of the Department to make demands for refunds and to refer to the Fraud Investigation Unit those cases which represent large amounts of payment. See above for the requirement to collect all improper payments whether they were due to willful or non-willful withholding of information or agency error. It is the duty of the Attorney General's office to seek recourse as the Chief Legal Officer of the state against recipients who have received assistance to which they were not entitled based on agency error.

Justifications for Demands by Department

The Department considers that it has a firm basis for demands for refunds in the following instances:

1. The county department has put the client on notice in writing that he is no longer eligible, or is eligible for a smaller amount of assistance. That is, the county office has sent Notice of Change, and has set out both the month in which ineligibility or reduction in grant will be effective and the reasons for having to take this action.

2. The applicant or recipient, and spouse, if any, have signed Form **MDHS-EA-900** certifying to the validity, completeness, and accuracy of the information entered on the form.

TANF Claim Collection Guidelines

The State first must seek recovery from the Individual responsible for the overpayment (or from that individual's current assistance unit). This means that States are required to pursue collection of the overpayment from the TANF payee, provided that this individual was also a recipient (i.e., a member of the overpaid assistance unit). There is, however, no obligation to repay the overpayment if the payee was not a member of the overpaid assistance unit. If the caretaker relative was not an overpaid individual because she was not a member of an assistance unit on whose behalf she received TANF payments, the State will be required to seek recovery from members of the overpaid assistance unit (or their current assistance unit).
When the parent(s) or caretaker relative is included in the TANF group (including disqualified persons), collection efforts will be focused on this individual. The State must make all reasonable

efforts to locate the caretaker relative recipient and collect the improper payment. A record of location attempts must be made, such as undeliverable delinquent notices, date of death, case closures because client left the State, etc.

It is appropriate to notify other members of the assistance unit of the outstanding overpayment obligation and their responsibility to repay only after the caretaker relative recipient cannot be located.
Location of the caretaker relative recipient means that:

(1) The State has identified the physical whereabouts of the caretaker relative recipient, and

(2) The State must be able to obtain repayment or recoupment from the TANF grant; or

(3) The State must be able to effectuate legal process, if necessary, to collect the overpayment from the caretaker relative recipient.

TANF Payee Not a Recipient

When the payee was not a member of the overpaid assistance unit, but did knowingly obtain benefits for her/himself rather than the dependent children, the suspected fraud claim will be prepared and sent to the CMU. The FI unit can pursue court action on the suspected fraud case. In this case, the children are not responsible for repayment.

EXAMPLE: The caretaker relative failed to report that all children had left the home and she continued to receive TANF until the next case review.

TANF Payee is a Recipient/Court Ordered

When the payee was a member of the overpaid assistance unit and a court order established repayment, all reasonable collection efforts must be made to collect from that payee whether or not the person continues eligible for TANF. The overpayment obligation will not be discharged until the overpayment is fully recovered. If the judgment is no longer legally enforceable (death of the person without assets, left the state or cannot be located, etc.) the remaining unpaid obligation will be passed on to the remaining members of the assistance unit, the same as if there was no court order, until that person returns to the State and is re-located for collection.

TANF Payee is a Recipient/Without Court Order

When there is no court order for repayment and the caretaker relative is a recipient at the time of overpayment, recoupment will begin from the first TANF payment following the expiration of the 10-day notification according to ongoing policy. If the case is closed and the recipient is later reapproved, recoupment begins immediately, provided appropriate demand notices have already been sent timely.

When the caretaker/payee was not a recipient at the time of overpayment, recoupment will be enforced on the assistance unit whether or not that individual continues as payee.

EXAMPLE: Grandmother receives TANF for 3 grandchildren but is not in the grant herself. She continues as payee and recoupment is effected from the grant for the 3 children.

When the caretaker payee was not in the assistance unit at the time of overpayment and the 3 grandchildren who were in the budget now reside with another specified relative who may or may not be in the budget group, recoupment will be enforced against the budget group which includes the overpaid children. This is true even when there may be other persons in the budget now who were not members of the overpaid household.

EXAMPLE: Grandmother becomes ill and the 3 grandchildren for whom she was TANF payee (non-recipient) during the overpayment go to live with their aunt who also applies for TANF for herself and her two children.

In this case, the county will notify the CMU by a **REHI** screen print and/or memo to request a transfer of the claim to the new case number. Recoupment will continue in the new case until repaid in full or the overpaid children leave that home.

Claim transfers can occur in many situations.

EXAMPLE: A currently active assistance unit was found to have been overpaid. The overpaid caretaker relative was contacted and agreed to recoupment from the grant of the overpaid assistance unit. Several months later, however, the caretaker relative moved leaving no forwarding address. Subsequent contact with the current caretaker produced no new address for the overpaid caretaker relative.

In this case, recoupment could continue if the remaining household members go to another active case. If there are no remaining overpaid assistance unit members who can be located, collection

efforts will be held until the caretaker returns to the State or other recipients in the overpaid group return and are identified for recoupment.

EXAMPLE: The overpaid caretaker relative and the other members of an overpaid assistance unit reside in the home of a grandparent. While this living arrangement is constant for the other members, the overpaid caretaker relative moves in and out of the county. The family often does not know where the overpaid caretaker relative can be contacted when he is not in the county. Since the payee cannot be located, recoupment would continue in the case of the remaining children until the original caretaker returns or the claim is repaid.

When the caretaker relative cannot be located, is deceased, or was not a member of the overpaid assistance unit, the State must seek recovery from the members of the overpaid assistance unit (or their current assistance units). There is no priority regarding the order in which recovery for such member is to be pursued and failure to recover from one family member (or his current assistance unit) does not discharge the remaining family members (or their current assistance units). For example, overpayment recovery can occur in sequence against only one member at a time, moving from member to member until the debt is recovered.

Income and Other Changes

When the grant or other income changes, the worker will take steps outlined below:

1. Follow instructions set out in Volume X, Chapter 6, to enter the change(s) in MAVERICS. After the change has been entered into MAVERICS, the system will calculate a revised recoupment amount based on the change that has been entered.

2. Follow procedures set out above for sending an advance notice and handling requests for direct repayments and hearings.

Subsequent Grant Recoupments

As subsequent grant recoupment overpayments are discovered, they will be reported in the CLAIMS-DB; however, the claims narrative should show that the claim is a corrected or additional report when a second report is required for the same case. The claims narrative provides space to give this information.

After receiving approval from the Claims Management Unit on an additional report, the county should refer to *TANF Claims Processing* in Volume X.

Remember to send an advance notice when required.

Follow these procedures for determining the balance of a claim and the months remaining in the recoupment period.

1. Access **REHI** to determine the outstanding balance of a previous claim (if applicable) and add that amount to the amount of the additional claim.

2. Divide the resulting total by the revised usual monthly recoupment amount to determine the months remaining in the recoupment period.

The above procedure is similar to the procedure used for changes in income and in grants except that two amounts may be added together to determine the total amount due. Of course, it is possible that the former improper payment will have been recovered by the effective month for reporting the case.

If some recoupment has been made prior to submittal of a corrected report, MAVERICS will compute the recoupment after the Claims Unit approves and enters the correction. Refer to Volume X for TANF claim processing in MAVERICS.

Establishing Recoupments On Reapplications

Once a reapplication has been approved, recoupment must start on any outstanding claim balance. **REHI** can be accessed to determine if there is an outstanding balance during the application process. MAVERICS will compute the recoupment amount using the balance remaining on improper payments.

OVERPAYMENTS THAT INVOLVE CHILD SUPPORT

The narrative for the claim will be entered into MNCLMS. The county Child Support Office must be contacted to determine the recovery amount for the claim period. If Child Support reports the amount of recovery and it is less than the total for which the individual was eligible, the county will include in the narrative the amount of overpayment as the amount of unrecovered TANF. If the recovery amount is equal to or in excess of the total for which the individual was eligible, the county will not have a claim. The Division of Child Support Enforcement should be notified if there has been an over-recovery of TANF.

INACTIVE CASES

The Claims Management Unit and the Fraud Investigation Unit will continue to handle recoupment on inactive cases. The Fraud Investigation Unit (FI) and the MAVERICS-generated demand and delinquent notices will initiate action to locate and/or recover the overpayment from a former TANF recipient.

A notice of improper payments paid to former TANF recipients is automatically mailed by MAVERICS when a claim is approved by the Claims Unit.

RESPONSIBLE PERSONS FOR TANF CLAIMS

All TANF recipients in the assistance unit (standard filing unit, including disqualified individuals) at the time the overpayment occurs are considered responsible for repayment of the claim. This means that children as well as the parent or the caretaker relative in the budget are responsible for repayment and claims must be transferred between cases as responsible persons move from one case to another.

The priority of recovery action against overpaid TANF recipients looks to the caretaker relative recipient first to recover the overpayment because that person is generally responsible for the overpayment, (i.e., the person who receives and administers the TANF payment). However, if the caretaker relative is "unavailable" due to death or disappearance, then the state must seek recovery from other members of the overpaid assistance unit or their current assistance units.

When an overpayment occurs, the state must take all reasonable steps necessary to promptly correct the benefit amount and recover the overpayment. Methods of overpayment recovery include:

- Claim establishment by CMU approval or court order with
  - recoupment from the ongoing TANF grant or
  - direct case repayment by the responsible person(s) either by lump sum or monthly/periodic payments

The overpayment recovery shall be from (in order of priority):

1. The assistance unit which was overpaid or

2. Any assistance unit of which a member of the overpaid assistance unit has subsequently become a member or

3. Any individual member of the overpaid assistance unit whether or not currently a recipient

Unless a currently active assistance group chooses to make a cash settlement, or a court ordered repayment plan specifies another method of repayment, the overpayment shall be recouped from the TANF grant in monthly installments. If through recoupment, the amount of the TANF grant is reduced to zero, members of the assistance unit are still considered recipients of TANF and, as such, are subject to TWP requirements, TT and TCC benefits if otherwise eligible.

In cases which have both an underpayment and overpayment, one may offset against the other in correcting the improper payment.

Prompt recovery of an overpayment is required:

- The county will IDentify and complete the claim within 80 days of discovery, sending the SIPV claim to the CMU in PEnded status. (AE and IHE claims are pended and approved in the county.)

- The CMU will APprove (or DEny) the SIPV claim and forward active and closed cases with suspected fraud claims to the Fraud Investigations Unit.

- The CMU and/or MAVERICS will notify the client and the county of the ACtive (or other) claim status and (1) allow the client to make a full cash repayment or other repayment plan, or (2) initiate recoupment from the TANF grant.

OFFSETTING THE RECOUPMENT

When an underpayment amount is to be issued for a TANF case, the amount of the underpayment will be used to offset the outstanding balance of a claim. If the claim amount is greater than the outstanding balance, then the entire amount will be applied to the balance of the claim. This does not apply to TWP supplemental payments.

RESPONSIBILITIES OF DEPARTMENTS

The county Department of Human Services and the state office departments of Accounting and Finance, Fraud Investigation Unit, and MAVERICS are jointly responsible for recovering overpayments. Each has specific duties; however, the efforts of all departments must be coordinated.

The County Responsibilities

The county should use knowledge of policy to identify and work all overpayments and report these overpayments to the Claims Management Unit. The county also carries the responsibility for recoupments. The county will be available to the client to explain the basis and facts about the claim.

1. The county Department of Human Services will identify cases of suspected fraud or error, whether client or agency.

   Claims are IDentified in MAVERICS on the **OVCA** screen. The **REHI** screen should be reviewed each time before a new claim is IDentified to be sure that another identification status is needed before a new entry is made. All paid benefits in MAVERICS for the IDentified claim will be copied overnight to the CLAIMS-DB and the ID status will show WK on **OVCA** in MAVERICS and CLAIMS-DB. However, the county supervisor or Director may DElete the claim/on **OVCA** in the CLAIMS-DB if determined that the claim should not have been IDentified. After the status is changed to WK, benefits move over to the CLAIMS-DB on the weekend after they are paid.

   The county office must DElete unneeded recoupment numbers after the claim has been moved to the CLAIMS-DB.

   The county must ID claims by program and type claim, i.e., a TANF overpayment caused by both client and agency error would require that two recoupment numbers be IDentified on **OVCA** in MAVERICS. In this case, the paid benefits in MAVERICS will move to the CLAIMS-DB with two sets of narrative screens, one for each IDentified recoupment plan. All work, tracking and inquiry must be accessed by recoupment number.

2. The county Department of Human Services is responsible for working the claim in the **CLAIMS-DB** in MAVERICS.

After the claim is IDentified in MAVERICS and is moved to the CLAIMS-DB in WK status, the worker may then discover that the overpayment should have more than one recoupment type. When this occurs, the worker must return to MAVERICS to ID the next claim. **(Do not attempt to** ID **any claim in the** CLAIMS-DB**.)** The next day the new recoupment number with narrative screens will be in WK status in the CLAIMS-DB. The paid MAVERICS benefits are already in the CLAIMS-DB and will not repeat with the newly IDentified claim.

In the claims database, selection of required screens to work through each claim may be assessed to reduce time required to **ENTER** through unnecessary screens. For example, for a TANF claim in which deprivation is not a factor, these screens can be omitted. However, when a new person is added to the case to work a claim, it is necessary to work through and enter required data for eligibility (participation status/income/resource) for each month of the claim calculation to test eligibility because the CLAIMS-DB does not allow for copying details from month to month.

3. When the claim is completed in the CLAIMS-DB, the worker will send the case record with a route slip to the supervisor for review of the case documentation and to review the CLAIMS-DB and MAVERICS screens.

   The county supervisor will PEnd or DElete the SIPV claim on **OVCA** in the CLAIMS-DB when the claim is completed. The Supervisor will approve or delete AE, IHE, and OT claims. If approved, such claims will be activated by the Supervisor. The claim status on **OVCA** in MAVERICS remains WK after IDentification until the claim is DEleted by the county supervisor or is either approved (AC) or DEnied by the CMU. Only the final disposition of the claim/recoupment number is displayed on **OVCA** in MAVERICS following the system status entry of WK on **OVCA** in both MAVERICS and CLAIMS-DB after the claim is identified. The claims database **OVCA** screen will display the status code as entered by the county. The MAVERICS **OVCA** screen status history will display the last three status updates, such as AC, PE, WK.

4. If the claim is approved, MAVERICS will issue the demand notice to the client.

5. Following the receipt of an approval from CMU the worker must access the case for the CURRENT MONTH and, at a minimum, rework the **AFPD** screen. The worker will then access **AUSP**, which will display the result of the recoupment calculation. The worker will prepare the notice to the client. The only appropriate notice is **A702, TANF Recoupment From Grant**.

When reports of alleged improper payments come directly to the state office from an outside source, the information will be referred to the appropriate county office for follow-up.

Claims Management Unit Responsibilities

The Claims Management Unit (CMU) will use knowledge of policy to approve claims and enter information into MAVERICS to process recoupments. The CMU is responsible for review and approval of SIPV claims, while the county office will handle all other claim types.

Upon receipt of the claim, the appropriate staff in the CMU will:

Review the claim and seek any additional information needed from the county by use of mailbox to the supervisor. This information should be corrected within 10 days.

2. Make a decision regarding the period of improper payment, the policy involved, and the type of claim.

3. When the claims narrative is reviewed and approved (AC), the Claims Management Unit will enter all claims in MAVERIS as:

   A- Administrative Error (AE)
   S - Suspected Intentional Program Violation (SIPV)
   H - Inadvertent Household Error (IHE)
   O - Other

4. When the claim is approved by Claims Management in the Claims-DB, an overnight batch process will copy the recoupment record (**OVCA**) back to MAVERICS for claim establishment. A demand notice will be automatically generated the same night the recoupment record is copied back to MAVERICS.

   When the claim is denied (DE) by the Claims Management Unit, the remarks field on the **OVCA** screen may be used for explanation.

5. Record receipt of all claim type reports and maintain information on the individual, the total number and amount of overpayments identified.

6. Refer the claim to the Fraud Investigation Unit, if necessary. When the Fraud Investigation Unit reports back, the claim could remain SIPV or be changed by the claims Unit to IHE or Other as noted above.

7. Enter all information regarding the claim in MAVERICS to allow for processing of the recoupment and tracking of all claims.

8. Send demand letters at intervals of 30, 60 and 90 days on inactive cases. Accounts still delinquent at the end of 90 days will be placed in a delinquent account file and handled appropriately. Accounts that are delinquent for three (3) or more years move to an inactive file until reactivated, should the assistance unit become eligible again.

9. Notify the county of actions taken by sending a copy of demand letters, etc.

10. Place accounts that are delinquent three years or more in a permanent inactive file. **Exception:** Improper payments will be reactivated should the payee become eligible again.

11. Require a minimum repayment of approximately 10% of the available monthly income. The minimum may be increased when the family has cash reserve. On the other hand, in extenuating circumstances, the minimum may be reduced to $5.

Fraud Investigation Unit Responsibilities

Upon receipt of improper payment material on cases of suspected fraud from the Claims Management Unit, staff in the Fraud Investigation Unit will:

1. Review all reports of suspected fraud to determine whether or not legal action is indicated. If action is needed, the FI Unit will conduct further research, discuss with the county attorney and client and report back to the division director the decision made by the attorney.

2. Assign suspected fraud claims on which payments will be made directly to an investigator for further investigation and recoupment efforts.

3. Cooperate in completing required federal and state reports on identified overpayments and on recovery of such overpayments.

Budgets and Accounting Responsibilities

The Division of Budgets and Accounting is responsible for:

3. Posting payments as received into the appropriate case.

2. At the end of the month, sending receipts to all clients who made a payment that month.

3. Compiling information and preparing federal reports.

MAVERICS Responsibilities

MAVERICS will complete the functions listed below after the county has completed the procedures set out above.

1. Withhold the designated amount for the appropriate number of months.

2. Subtract the withheld amount each month from the total amount due and maintain records of the balance due.

3. Subtract the remaining amount due in the last month of the payment period. This amount may or may not vary from the payments in preceding months.

4. Send a monthly listing of the original total amount due, the amounts withheld to date, and remaining balance for each involved client to Accounting and Finance.

INTRODUCTION

The **Claims Data Base** was created to allow TANF and SNAP overpayments to be identified, worked and tracked via automation, using a combination of a MAVERICS and a new data base.

The Claims Data Base allows entry of household members, income, resources, and/or expenses necessary to calculate the correct monthly benefit, i.e., the **benefit level that should have been issued as well as the claim narrative**. MAVERICS retains the information originally entered to determine the benefit actually received by the household.

IDENTIFYING/PREPARING A CLAIM

When a claim is discovered, the Eligibility Worker will access the **OVCA** screen and enter the code signifying discovery of a claim, following instructions given below.

The claim must be prepared or coded deleted (**DE**) in the Claims Database **within 6 months of the date of discovery**, following the guidelines listed below:

1. Identify the claim in MAVERICS by entering the code **ID** on **OVCA** screen.

2. An overnight process will automatically cause all case data and paid benefits to be copied into the claims **and** change the claim status on **OVCA** screen to **WK** in MAVERICS as well as in the Claims Data Base. At this point the claim is available for calculation of overissuance in the Claims Data Base by a weekend process as long as the claim remains in **WK** status.

3. Enter the case number, correct recoupment number, and program type on **SEOO** to ensure proper claim preparation. Complete OVN1 prior to working the budget.

4. In calculating the claim, work through each month of the claim, entering the information required. Overissuance details will be displayed on **AFSU** screen, i.e., months of overissuance, amount household received, amount household should have received, and amount of overissuance. Print this screen and retain in the case record on the top left side of all material. In the **Claims Data Base only**, code earned income which was not reported timely as **UR** on **EAIN** screen.

5. Complete the narrative portion using the screen(s) **OVN1-5**.

6. **OVC2** is the tracking screen for all individuals responsible for repayment of a claim. All members associated with the case will be displayed on this screen. (For instructions and correct codes see Volume X.)

7. When the AE, OTHER, or IHE claim is prepared, the County Director or Supervisor must complete a **second party review** for accurate policy application and, either approve or delete the claim in the Claims Data Base. SIPV claims should be reviewed and pended (PE).

8. When the SIPV claim is pended it is available for the Claims Management Unit to provide a **third party review**. The Claims Management Unit will approve or deny the claim and make the appropriate referral for fraud investigation.

9. Except for SIPV claims submitted to Fraud Investigations, upon approval of AE, IHE, OTHER, or SIPV claims, the Supervisor or County Director or the Claims Management Unit will enter appropriate codes on **OVCA** screen for automatic benefit reduction to be effective the first month following expiration of the 10-day notice, **X-021, MAVERICS TANF REPAYMENT NOTICE**. If the client responds within the 10-day time frame and prefers to repay the claim in cash, the Supervisor/Director must remove the recoupment plan and amount form the **OVCA** screen.

NOTE: Preparation of claims should be considered an important responsibility of county staff. It is imperative that **ALL FACTS** of a suspected overissuance are investigated, verified, and the claim thoroughly reviewed prior to submittal for approval to the Claims Management Unit. Approval of a claim may have serious consequences to the client such as: felonies, incarceration, fines and/or loss of employment. Collection may be pursued on **ALL** assistance unit members, (except those involving court orders) through various means and it is important that all members are properly identified on **OVC2** screen.

SPECIAL HANDLING

Combination Cases

Cases with an overpayment in both TANF and Food Stamp Programs must be identified by Program and worked simultaneously for cost effectiveness.

Combination claims are those having different types of overissuances for the same time period, i.e., AE, IHE, OTHER, and/or SIPV occurring during the same time period. If an SIPV is included in the combination claim, it must be identified first as recoupment 001 or the next available recoupment number with other claim types, IHE, AE, following.

If two claim types are identified and one is a strong case for SIPV and the other is AE, OTHER, or IHE, the worker must complete the narrative explanation, basic data and responsible person(s) entries for the SIPV claim type first. The narrative for the second claim type may then be cross-referenced to the SIPV recoupment number. Do not attempt to cross-reference narratives unless the time periods of the overissuance are the same and the claims are prepared together.

Supplements/Restorations

When two benefits are issued for the same moth only **ONE ISSUANCE** is copied from MAVERICS into the Claims Data Base during the overnight process. The MAVERICS Help Desk must be notified via the **E100, Help desk Control Form**, to move the second issuance into the Claims Data Base.

Revised 04-01-06

Page	Subject
15000	TABLES
15000	Table I - Monthly Consolidated Standard for Basic Requirements
15001	Table II - Percentage Reduction-TANF and Refugee Programs Legal Maximums-TANF and Refugee Programs Minimum Payment-TANF and Refugee Programs Foster Care Vendor Payments Proration of First Month Benefits
15003	Table III - Amount of Payment Based on Number of Persons and 60 Percent of Deficit Up to the Maximum
15015	Instructions for Use of Table III

Revised 10-01-06

MONTHLY CONSOLIDATED STANDARD FOR BASIC REQUIREMENTS
TABLE I

No. Persons	1	2	3	4	5	6	7	8	9	10	11
100% Requirements	218	293	368	443	518	593	668	743	818	893	968
185% Requirements	403	542	680	819	958	1097	1235	1374	1513	1652	1790
No. Persons	12	13	14	15	16	17	18	19	20	21	22
100% Requirements	1043	1118	1193	1268	1343	1418	1493	1568	1643	1718	1793
185% Requirements	1929	2068	2207	2345	2484	2623	2762	2900	3039	3178	3317

If more than 22 are in the budget, add $75 to the requirements for each person above 22 and compute 185% of that figure, rounding down to the nearest dollar, for the gross income test.

This consolidated standard includes requirements for food, clothing, personal incidentals, electricity, water, household supplies, fuel, and shelter. The standard will be used for all budget groups who live in private living arrangements. Children who are away from the regular family unit's private living arrangement to attend the Blind School, Deaf School, Addie McBryde Center, rehabilitation center, maternity home or a boarding school will be included in the regular budget as though they were at home, and the income will be tested against the consolidated standard for the entire group.

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE II

PERCENTAGE REDUCTION – TANF AND REFUGEE PROGRAMS	**60% of unmet need (deficit) up through but not exceeding legal maximums**
LEGAL MAXIMUMS – TANF AND REFUGEE PRORAMS	$110 for first person $36 for second $24 for each additional person

MAXIMUMS

No. Persons	Payment
1	$110
2	$146
3	$170
4	$194
5	$218
6	$242
7	$266
8	$290

NOTE: For all months from 07-01-86 through 06-30-99, the maximum payment for the first person was $60. TANF replaced the AFDC program effective 10-01-96 but the payment level per person remained the same.

MINIMUM PAYMENT – TANF AND REFUGEE PPROGRAMS

$10, except when making corrective payments or when recoupment withholding is the sole reason for making a payment below $10.		
FOSTER CARE VENDOR PAYMENTS	$225 – Ages 0-3 $235 – Ages 4-5 $255 – Ages 6-9 $275 – Ages 10-12 $290 – Ages 13-15 $300 – Ages 16-20 $340 – Special Needs $400 – SSI	Emergency rate - $20 a day Therapeutic rate - $600 a month
PRORATION OF FIRST MONTH BENEFITS	Any payment issued for the calendar month in which a family or individual applied must be prorated from, and including, the date of	

	authorization to the end of the calendar month; or, for the 30th day after application when the application month has 31 days. See Chapter 7 on accrual rights of applicants.

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

AMOUNT OF PAYMENT BASED ON NUMBER OF PERSONS AND 60 PERCENT OF DEFICIT UP TO THE MAXIMUM

The rounding procedure done in this table is based upon rounding down to the nearest dollar with only two digits considered significant. Example:

$21.33 x 60% = $12.978 = $12.97 = $12.00 payment amount.

BUDGET DEFICIT

		FROM	THROUGH	PAYMENT	FOR ONE OR MORE PERSONS
I	$	0.001	1.66	0.00	
		1.67	3.33	1.00	
		3.34	4.99	2.00	
		5.00	6.66	3.00	
		6.67	8.33	4.00	
		8.34	9.99	5.00	
		10.00	11.66	6.00	
		11.67	13.33	7.00	
		13.34	14.99	8.00	
		15.00	16.66	9.00	
		16.67	18.33	10.00	
		18.34	19.99	11.00	
		20.00	21.66	12.00	
		21.67	23.33	13.00	
		23.34	24.99	14.00	
		25.00	26.99	15.00	
		26.67	28.33	16.00	
		28.34	29.99	17.00	
		30.00	31.66	18.00	
		31.67	33.33	19.00	
		33.34	34.99	20.00	

35.00	36.66	21.00	

$	FROM	THROUGH	PAYMENT
	36.67	38.33	22.00
	38.34	39.99	23.00
	40.00	41.66	24.00
	41.67	43.33	25.00
	43.34	44.99	26.00
	45.00	46.66	27.00
	46.67	48.33	28.00
	48.34	49.99	29.00
	50.00	51.66	30.00
	51.67	53.33	31.00
	53.34	54.99	32.00
	55.00	56.66	33.00
	56.67	58.33	34.00
	58.34	59.99	35.00
	60.00	61.66	36.00
	61.67	63.33	37.00
	63.34	64.99	38.00
	65.00	66.66	39.00
	66.67	68.33	40.00
	68.34	69.99	41.00
	70.00	71.66	42.00
	71.67	73.33	43.00
	73.34	74.99	44.00
	75.00	76.66	45.00
	76.67	78.33	46.00
	78.34	79.99	47.00
	80.00	81.66	48.00
	81.67	83.33	49.00
	83.34	84.99	50.00
	85.00	86.66	51.00
	86.67	88.33	52.00
	88.34	89.99	53.00
	90.00	91.66	54.00
	91.67	93.33	55.00
	93.34	94.99	56.00
	95.00	96.66	57.00
	96.67	98.33	57.00
	98.34	99.99	59.00
	100.00	101.66	60.00
	101.67	103.33	61.00

I	$	FROM	THROUGH	PAYMENT
		103.34	104.99	62.00
		105.00	106.66	63.00
		106.67	108.33	64.00
		108.34	109.99	65.00
		110.00	111.66	66.00
		111.67	113.33	67.00
		113.34	114.99	68.00
		115.00	116.66	69.00
		116.67	118.33	70.00
		118.34	119.99	71.00
		120.00	121.66	72.00
		121.67	123.33	73.00
		123.34	124.99	74.00
		125.00	126.66	75.00
		126.67	128.33	76.00
		128.34	129.99	77.00
		130.00	131.66	78.00
		131.67	133.33	79.00
		133.34	134.99	80.00
		135.00	136.66	81.00
		136.67	138.33	82.00
		138.34	139.99	83.00
		140.00	141.66	84.00
		141.67	143.33	85.00
		143.34	144.99	86.00
		145.00	146.66	87.00
		146.67	148.33	88.00
		148.34	149.99	89.00
		150.00	151.66	90.00
		151.67	153.33	91.00
		153.34	154.99	92.00
		155.00	156.66	93.00
		156.67	158.33	94.00
		158.34	159.99	95.00
		160.00	161.66	96.00
		161.67	163.33	97.00
		163.34	164.99	98.00
		165.00	166.66	99.00

	166.67	168.33	100.00
I	**$**	THROUGH	PAYMENT
	168.34	169.99	101.00
	170.00	171.66	102.00
	171.67	173.33	103.00
	173.34	174.99	104.00
	175.00	176.66	105.00
	176.67	178.33	106.00
	178.34	179.99	107.00
	180.00	181.66	108.00
	181.67	183.33	109.00
	183.34	184.99	110.00

* MAXIMUM OF $110 FOR 1 PERSON

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

II	$ FROM	THROUGH	PAYMENT	FOR 2 OR MORE
	185.00	186.66	111.00	
	186.67	188.33	112.00	
	188.34	189.99	113.00	
	190.00	191.66	114.00	
	191.67	193.33	115.00	
	193.34	194.99	116.00	
	195.00	196.66	117.00	
	196.67	198.33	118.00	
	198.34	199.99	119.00	
	200.00	201.66	120.00	
	201.67	203.33	121.00	
	203.34	204.99	122.00	
	205.00	206.66	123.00	
	206.67	208.33	124.00	
	208.34	209.99	125.00	
	210.00	211.66	126.00	
	211.67	213.33	127.00	
	213.34	214.99	128.00	
	215.00	216.66	129.00	
	216.67	218.33	130.00	
	218.34	219.99	131.00	
	220.00	221.66	132.00	
	221.67	223.33	133.00	
	223.34	224.99	134.00	
	225.00	226.66	135.00	
	226.67	228.33	136.00	
	228.34	229.99	137.00	
	230.00	231.66	138.00	
	231.67	233.33	139.00	
	233.34	234.99	140.00	
	235.00	236.66	141.00	

236.67	238.33	142.00
238.34	239.99	143.00
240.00	241.66	144.00
241.67	243.33	145.00
243.34	244.99	146.00

* MAXIMUM OF $146 FOR 2 PERSONS

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM

TABLE III

III	$ FROM	THROUGH	PAYMENT	FOR 3 OR MORE
	245.00	246.66	147.00	
	246.67	248.33	148.00	
	248.34	249.99	149.00	
	250.00	251.66	150.00	
	251.67	253.33	151.00	
	253.34	254.99	152.00	
	255.00	256.66	153.00	
	256.67	258.33	154.00	
	258.34	259.99	155.00	
	260.00	261.66	156.00	
	263.33	263.33	157.00	
	264.99	264.99	158.00	
	266.66	266.66	159.00	
	268.33	268.33	160.00	
	269.99	269.99	161.00	
	271.66	271.66	162.00	
	273.33	273.33	163.00	
	274.99	274.99	164.00	
	276.66	276.66	165.00	
	278.33	278.33	166.00	
	279.99	279.99	167.00	
	281.66	281.66	168.00	
	283.33	283.33	169.00	
	284.99	284.99	170.00	

* MAXIMUM OF $170 FOR 3 PERSONS

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

IV	$	FROM	THROUGH	PAYMENT	FOR 4 OF MORE PERSONS
		285.00	286.66	171.00	
		286.67	288.33	172.00	
		288.34	289.99	173.00	
		290.00	291.66	174.00	
		291.67	293.33	175.00	
		293.34	294.99	176.00	
		295.00	296.66	177.00	
		296.67	298.33	178.00	
		298.34	299.99	179.00	
		300.00	301.66	180.00	
		301.67	303.33	181.00	
		303.34	304.99	182.00	
		305.00	306.66	183.00	
		306.67	308.33	184.00	
		308.34	309.99	185.00	
		310.00	311.66	186.00	
		311.67	313.33	187.00	
		313.34	314.99	188.00	
		315.00	316.66	189.00	
		316.67	318.33	190.00	
		318.34	319.99	191.00	
		320.00	321.66	192.00	
		321.67	323.33	193.00	
		323.34	324.99	194.00	

* MAXIMUM OF $194 FOR 4 PERSONS

Revised 04-01-06

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

V	$	FROM	THROUGH	PAYMENT	FOR 5 OR MORE PERSONS
		325.00	326.66	195.00	
		326.67	328.33	196.00	
		328.34	329.99	197.00	
		330.00	331.66	198.00	
		331.67	333.33	199.00	
		333.34	334.99	200.00	
		335.00	336.66	201.00	
		336.67	338.33	202.00	
		338.34	339.99	203.00	
		340.00	341.66	204.00	
		341.67	343.33	205.00	
		343.34	344.99	206.00	
		345.00	346.66	207.00	
		346.67	348.33	208.00	
		348.34	349.99	209.00	
		350.00	351.66	210.00	
		351.67	353.33	211.00	
		353.34	354.99	212.00	
		355.00	356.66	213.00	
		356.67	358.33	214.00	
		358.34	359.99	215.00	
		360.00	361.66	216.00	
		361.67	363.33	217.00	
		363.34	364.99	218.00	

* MAXIMUM OF $218 FOR 5 PERSONS

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

VI	$	FROM	THROUGH	PAYMENT	FOR 6 OR MORE PERSONS
		365.00	366.66	219.00	
		366.67	368.33	220.00	
		368.34	369.99	221.00	
		370.00	371.66	222.00	
		371.67	373.33	223.00	
		373.34	374.99	224.00	
		375.00	376.66	225.00	
		376.67	378.33	226.00	
		378.34	379.99	227.00	
		380.00	381.66	228.00	
		381.67	383.33	229.00	
		383.34	384.99	230.00	
		385.00	386.66	231.00	
		386.67	388.33	232.00	
		388.34	389.99	233.00	
		390.00	391.66	234.00	
		391.67	393.33	235.00	
		393.34	394.99	236.00	
		395.00	396.66	237.00	
		396.67	398.33	238.00	
		398.34	399.99	239.00	
		400.00	401.66	240.00	
		401.67	403.33	241.00	
		403.34	404.99	242.00	

* MAXIMUM OF $242 FOR 6 PERSONS

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

VII	$	FROM	THROUGH	PAYMENT	FOR 7 OR MORE PERSONS
		405.00	406.66	243.00	
		406.67	408.33	244.00	
		408.34	409.99	245.00	
		410.00	411.66	246.00	
		411.67	413.33	247.00	
		413.34	414.99	248.00	
		415.00	416.66	249.00	
		416.67	418.33	250.00	
		418.34	419.99	251.00	
		420.00	421.66	252.00	
		421.67	423.33	253.00	
		423.34	424.99	254.00	
		425.00	426.66	255.00	
		426.67	428.33	256.00	
		428.34	429.99	257.00	
		430.00	431.66	258.00	
		431.67	433.33	259.00	
		433.34	434.99	260.00	
		435.00	436.66	261.00	
		436.67	438.33	262.00	
		438.34	439.99	263.00	
		440.00	441.66	264.00	
		441.67	443.33	265.00	
		443.34	444.99	266.00	

* MAXIMUM OF $266 FOR 7 PERSONS

AMOUNT OF PAYMENT IN ASSISTANCE PAYMENTS PROGRAM
TABLE III

VIII	$	FROM	THROUGH	PAYMENT	FOR 8 OR MORE PERSONS
		445.00	446.66	267.00	
		446.67	448.33	268.00	
		448.34	449.99	269.00	
		450.00	451.66	270.00	
		451.67	453.33	271.00	
		453.34	454.99	272.00	
		455.00	456.66	273.00	
		456.67	458.33	274.00	
		458.34	459.99	275.00	
		460.00	461.66	276.00	
		461.67	463.33	277.00	
		463.34	464.99	278.00	
		465.00	466.66	279.00	
		466.67	468.33	280.00	
		468.34	469.99	281.00	
		470.00	471.66	282.00	
		471.67	473.33	283.00	
		473.34	474.99	284.00	
		475.00	476.66	285.00	
		476.67	478.33	286.00	
		478.34	479.99	287.00	
		480.00	481.66	288.00	
		481.67	482.33	289.00	
		482.34	484.99	290.00	

* MAXIMUM OF $290 FOR 8 PERSONS

* 9 AND ABOVE, MULTIPLY THE DEFICIT BY 60% AND FOLLOW ROUNDING PROCEDURES SET OUT ABOVE.

* FAMILY MAXIMUM DETERMINED BY TOTAL NUMBER OF PERSONS IN TANF BUDGET GROUP. FOR EACH ADDITIONAL PERSON, ADD $24.00 TO DETERMINE THE MAXIMUM.

INSTRUCTIONS FOR USE OF TABLE III

The above table is arranged in sections according to the number of eligible persons included in the TANF payment. In each section are ranges of budgetary deficits and the amount of payment for each range, based on 60 percent of the deficit.

To use this table, first find the section for the number of persons in the budget. For example, if two persons are to be included in the payment, find Section II on page 15004. If the budgetary deficit for the case falls within Section II, find the range of deficits within which the deficit for this case falls, and then follow the line over to the proper amount of the payment.

If the deficit for the case of the two eligible persons is $220, first use Section II as this is the section for two persons. Then find the range $220.00-$221.66 and note that the payment will be $132.

But if the deficit for these two persons is only $63 because they have some income, their deficit will be found in Section I and their payment will be $37.

Or if the deficit for the two persons is $252, this is larger than any of the deficits in Section II and the payment of $146 will apply.

If the budget group consists of twelve persons, the legal maximum will be $386. If the deficit is $426, the payment will be $255 since 60% of the deficit is below the maximum for that family size. See Section VII.

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DEFINITION OF A REFUGEE

Applicants who meet certain criteria are eligible for Refugee Cash Assistance (RCA) benefits for an eight month period. Applicants for these benefits must provide documentation from the U.S. Citizenship and Immigration Services (USCIS) verifying their refugee status, and must be included in at least one of the following categories in order to receive benefits:

- paroled as a refugee or asylee under section 212(d)(5) of the Immigration and Nationality Act (INA)
- admitted as a refugee under section 207 of the INA
- granted asylum under section 208 of the INA
- certain Cuban and Haitian entrants and certain Amerasians from Vietnam
- admitted for permanent residence, provided the individual previously held one of the statuses listed above

The most common immigration documents used in verifying refugee status include Form I-551-Resident Alien Card and Conditional Resident Alien Card, Form I-555-Alien Registration Receipt Card, and form I-94 - Arrival-Departure Record.

NOTE: Full-time students in institutions of higher learning are **not** eligible for refugee cash assistance.

APPLICATION PROCESS

When a refugee requests financial assistance for himself/herself or for a group of minor children for whom he/she is responsible, the MDHS-EA-900 application should be accepted and registered in the usual manner in the county office. Any refugee family group potentially eligible for TANF must be tested for TANF or referred for a determination of eligibility for assistance from other programs. Persons age 65 or older, blind or disabled individuals must be referred to the local Social Security office to apply for SSI benefits (if eligible, these persons may receive refugee cash assistance until eligibility for cash assistance under the SSI program is determined, provided the conditions of eligibility for refugee cash assistance continue to be met). Eligibility for SNAP and/or TANF should be determined before a refugee assistance request is processed. If the individual refugee or refugee family is eligible for any of the regular programs administered through Economic Assistance, benefits should be authorized at the local office and no other action will be required.

In some instances, the refugee applicant may be eligible for SNAP, but ineligible for TANF. If so, the SNAP application should be processed as normal by the county office. For processing of

the request for Refugee Cash Assistance, the county office must submit **a copy** of the MDHS-EA-900 application and the 900A, plus copies of all documents verifying refugee status to State Operations/Policy Unit. The policy unit will review the application to determine eligibility for RCA based on need standard requirements for TANF using the MDHS-EA-323. If approved, the refugee household will be eligible for RCA payments for an eight month period beginning the month of the initial application for benefits in the local office. The policy unit will submit a money payment request to Budgets and Accounting in State Office for processing and mailing of the RCA payment. State Operations will notify the applicant household of the approval or denial of the request by regular mail.

Each refugee age 18 or over will have his/her application processed as an individual unless he/she is the parent of minor children. One application will be processed for parents and minor children. A minor child who was born to a refugee family after entry into the United States can be included in the refugee assistance group of the parent although the child is actually a citizen of the United States. RCA payments are determined the same as TANF benefit levels regarding grant maximums based on household size.

NOTE: If it is determined that a refugee has an urgent need for cash assistance, the application for cash assistance should be processed as quickly as possible and the initial payment issued to the refugee on an emergency basis.

Reporting Changes

Refugee households are certified as Simplified Reporting (SR) households. Each refugee household is responsible for reporting changes to the county office only at application/re-evaluation interviews. These changes should be forwarded to the Policy Unit as needed. All households would only report a change if it causes the household to meet or exceed 185% of the poverty level. This change should be reported by the 10th of the month following the month of the change.

NOTE: If these changes are below the 185% poverty level, the refugee will only be required to report these changes at his/her next re-evaluation interview.

Department Responsibilities

Although the refugee household is eligible for cash assistance for an eight month period, a regular redetermination of eligibility must be completed on each financial assistance case after **six** months.

Upon determination that the amount of the RCA payment will be changed or that the refugee is no longer eligible for financial assistance, State Operations will notify the refugee in writing of this change.

ELIGIBILITY FACTORS - FINANCIAL ASSISTANCE

The financial assistance program for refugees is intended to provide temporary assistance when the sponsor is unable to meet all the needs of the refugee until the refugee (1) is able to find employment and become self-supporting or (2) receives financial assistance through the regular TANF or SSI programs. The same criteria for technical eligibility in TANF apply to applicants for refugee assistance, with the exceptions of deprivation and specified degree of relationship. Children in the refugee household do not have to be deprived of a parent or be living with a specified relative in order to receive refugee assistance. Single individuals applying for refugee assistance may be eligible for benefits by meeting all other eligibility factors.

Residence

The refugee/refugee household must reside in the state of Mississippi with the intent to remain here. Children's residence is determined by the parent or the adult responsible for them.

Age/Relationship

Age and relationship may be verified by using the I-94 or other documents in the refugee's possession which reflect age and relationship and appear reasonable under the circumstances. When the refugee has no written record of any kind to use as a support document, the refugee's statement regarding family relationship should be accepted unless there is reason to doubt the validity of such a declaration.

Financial Need

All income and resources available to the refugee family group must be considered and measured against the standards for financial need which are applicable to the TANF program. Income and resources that may be available from the refugee's sponsor or sponsoring agency must be considered and documented.

Resources

The resource maximums used in determining eligibility for TANF are used for applicants for refugee assistance. Do not consider against the maximum amount the resources which are not available to the refugee or refugee family group, such as those left in the country from which the refugee(s) came. Also, do not consider the resources of the sponsor available to the refugee/refugee group unless the sponsor has actually given them to the refugee.

Income

The standards used for TANF families in determining financial need based on income are applicable for refugees. Form MDHS-EA-232, TANF Budget Computation Sheet, should be used to determine need based on income. All income which is available to the refugee/refugee group should be included. Eligibility and money payment amount are determined by testing gross income and allowing the appropriate amounts for work expenses and child care when earned income is involved. Other possible income sources include cash contributions from the sponsor and income from the voluntary agency that placed the refugee/refugee group with the sponsor. However, a sponsor's income **may not** be considered as accessible to the refugee solely because the person is serving as a sponsor. In addition, any cash grant received by the applicant under the Department of State or Department of Justice Reception and Placement programs must not be considered as income for the refugee.

Work Requirements

As a condition for receipt of refugee cash assistance, a non-exempt refugee must be registered for work with the local employment service. Such refugees must apply for, accept, or continue with an appropriate offer of employment or employment related training, and participate in any available and appropriate social service program providing job or language training in the area in which the refugee resides.

Refugees who have been approved for food stamp benefits through the county office may have been already been registered for work. If so, no further action regarding work registration for refugees is required. Refugees are not subject to TANF work requirements.

MS Code Sec 43-19-31